**GNP+ Co- Executive Director opening speech UN Multi stakeholder hearing on HIV and AIDS**

- Distinguished President of the General Assembly,
- Distiguished Chairs of the HLM on HIV &AIDS
- Representatives of Member States,UNAIDS leadership,
- Fellow People living with HIV leaders,
- communities, Civil society and partners,
- Ladies and Gentlemen,

It is an honour to address you today on behalf of the Global Network of People Living with HIV (GNP+) and the millions of people living with HIV who we represent. Grounded in the principle of greater involvement of people living with HIV (GIPA) and through a robust consultative process, GNP+ has developed and shared a unified People Living with HIV statement on Asks, solution statements and commitments for the upcoming High-Level Meeting. We urge all Member States to engage with it seriously.

**I share three critical asks from that statement:**

**First**, guarantee uninterrupted, affordable and stigma free access to lifesaving HIV treatment for all people living with HIV, regardless of geography, age, gender, identity, or crisis context. This must include access to innovations such as long-acting treatments and continued research towards HIV cure and vaccines, **so that quality of life becomes a core outcome of treatment**. To achieve sustained viral suppression for all; Scale up high impact differentiated service delivery (DSD) models, including peer adherence support, community testing, community pharmacy models, multi-month dispensing and strong referral pathways.

**Second**, integrate HIV services into primary health care. The GNP+ report on PLHIV Minimum Requirements for Integrated HIV Services, informed by over 1,800 respondents, clearly articulates our demand for responsive, person centred HIV services embedded within Primary Health Care (PHC) and Universal Health Coverage (UHC) frameworks. This integration must guarantee coordinated care for HIV, TB, maternal health, non-communicable diseases (NCDs), mental health, and primary care, supported by resilient supply chains, adequate human resources and accessible, affordable services for all.

**Third**, fully implement and resource the GIPA principles as a non negotiable foundation of People Living with HIV led responses. This will strengthen and sustain our engagement with national governments and ensure country Led HIV responses are realistic and sustainable. In particular, we call for the institutionalisation and effective transformation of the Global Fund Country Coordinating Mechanism (CCM) into a transparent, legally recognised governance platform for health, where People Living with HIV exercise real agency in designing, implementing and monitoring national HIV responses together with out governments.

**Delegates, The HIV response has succeeded precisely because it places people living with HIV and those most affected at the centre. At its core, is the ambition to protect life and secure quality of life for all. We must not lose sight of this fundamental purpose**.

With fewer than four years remaining until 2030, 9 million people living with HIV still lack access to treatment. Persistent stigma, punitive laws and environments, and deep inequalities continue to undermine adherence, viral suppression, and access across the testing, treatment, and prevention cascades. As a direct result,

630,000 people living with HIV including 75,000 children died in 2024 from preventable, treatable AIDS related illnesses. **This is unacceptable. With the science and tools now available, no one should die of AIDS.**

We must confront the devastating reality that these deaths are not abstract statistics; they are a profound failure of our collective promise. The World Health organisation data reveals that 30% of PLHIV in care are battling advanced HIV disease(AHD), 17% of them dye in hospitals admissions and another 14% lost shortly after discharge. The burden on our children is perhaps the most stinging evidence of our inaction, while only 52% have access to lifesaving treatment, studies show that in some countries, upto 50% of children under five perish within just six months of their HIV diagnosis.

**Many more people living with HIV are ageing thanks to ART, only to die from complications of non-communicable diseases, I am these numbers, so is everyone we know living with HIV. Everyone you know**. This is the moment to decide the true weight of your commitment; remember these numbers, for they speak for us and they must be the only compass that guides your commitment.

**The Global AIDS Strategy provides clear numeric anchors for action: 40 million people on treatment and 20 million accessing biomedical prevention. Two scientific breakthroughs now stand ready to accelerate progress:**

**1) Undetectable = Untransmittable (U=U), supported by long-acting antiretrovirals,**

**and 2) long-acting PrEP, including the recent advancement of lenacapavir (LEN), that can prevent new infections. The path to HIV epidemic control is now within reach.**

Last year's disruptions has tested all of us. **Yet, this period of reform and repositioning offers a genuine opportunity for leadership. The leadership of today must shape this transition from emergency response to sustainable systems; a necessary and proud evolution that recognises People Living with HIV will be here in 2031 and beyond, with needs that matter then as they do now. Let us carry forward the same admirable spirit, energy and resolve that have defined the multilateral HIV response.**

We call on governments and policymakers to keep their promise to end AIDS deaths, end stigma, and stop new HIV infections as the clear pathway to epidemic control. **Guided by the principle of greater involvement of people living with HIV** ,we urge you to honour the commitments enshrined in the right to health and translate political pledges into sustained action and accountability. Only by fulfilling these obligations can we secure the future that we have collectively fought for. **To keep people alive.**

Thank you.