

**ASEAN Declaration of Commitment on HIV and AIDS:  
Fast-Tracking and Sustaining HIV and AIDS Responses  
To End the AIDS Epidemic by 2030**

1. WE, the Heads of State and Government of the Association of Southeast Asian Nations (ASEAN), namely Brunei Darussalam, the Kingdom of Cambodia, the Republic of Indonesia, the Lao People's Democratic Republic, Malaysia, the Republic of the Union of Myanmar, the Republic of the Philippines, the Republic of Singapore, the Kingdom of Thailand, and Socialist Republic of Viet Nam, on the occasion of the 28<sup>th</sup> Summit in Vientiane, Lao PDR, on 6-8 September 2016, reviewing comprehensively the progress achieved since the adoption of the 2011 ASEAN Declaration of Commitment: Getting to Zero New HIV Infections, Zero Discrimination, and Zero AIDS-Related Deaths, and envisioning a future where, working together, we can end the AIDS epidemic in ASEAN by 2030;
2. REAFFIRMING previous ASEAN Declarations on HIV and AIDS, 'ASEAN Declaration of Commitment: Getting to Zero New HIV Infections, Zero Discrimination, Zero AIDS-related Deaths' (Bali, Indonesia, 2011), 'ASEAN Commitments on HIV and AIDS' (Cebu, Philippines, 2007), 'Seventh ASEAN Summit Declaration on HIV and AIDS' (Bandar Seri Begawan, Brunei Darussalam 2001), each of which called for, in the ASEAN response to HIV and AIDS, political will and leadership, and meaningful partnerships with relevant stakeholders, and in particular with the key affected populations;
3. REAFFIRMING the commitment of ASEAN Member States to the United Nations General Assembly Political Declaration on HIV and AIDS: On the Fast-Track to Accelerate the Fight against HIV and to End the AIDS Epidemic by 2030 adopted on 8 June 2016 in New York, in particular the goals of the Political Declaration in support of the 2030 Agenda for Sustainable Development, by 2020 — to work towards reducing the number of new HIV infections to fewer than 500,000 per annum globally and to reducing AIDS-related deaths to fewer than 500,000 per annum globally as well as to eliminate HIV-related stigma and discrimination — as well as commitments in previous global Declarations in 2011, 2006, and 2001;
4. NOTING the findings from ASEAN's second regional report on HIV and AIDS of 2015 which observed that in the region, the HIV epidemic continues to affect approximately 1.7 million people and that HIV is largely concentrated among key affected populations and in priority geographical areas. The make-up of these differs according to the epidemic characteristics in each Member State and may include sex workers and their clients, people who inject drugs; men-who-have-sex-with men and transgender population, while other populations continue to be vulnerable (such as partners/spouses of key affected populations, migrant and mobile populations, children

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and youth, women and girls, people in correctional institutions, and, people in conflict and disaster-affected areas);

5. NOTING with continued concern, that while there has been progress in the implementation the ASEAN Getting to — Zero New HIV infections, Zero Discrimination, and Zero AIDS-related Deaths, such as the roll out of participated of cities or areas from 13 cities/areas in 2012 to more than 50 cities/areas in 2015 — there remain significant urgent challenges at regional, national, and local levels to focus, target, and expand the coverage, reach and quality of evidence-informed/based programmes, and in addition, challenges in mobilising sufficient resources to invest in fast-tracking and sustaining the response;
6. ASSERTING that it is essential for ASEAN Member States to focus our individual and collective efforts, in line with national legislation, priorities and evidence in each Member State, on initiatives; to address key affected populations and priority geographic areas; to set ambitious but achievable regional and national targets for prevention, testing, treatment, care and support; and to commit to enhance the political will and the financial resources to fast track and sustain the response; and
7. In summary, RECOGNISING that, in ASEAN, while remarkable progress has been made on the prevention and treatment of HIV and AIDS, and that there is a unique window of opportunity to act now, to avoid the risk of a rebound of the epidemic in some parts of the world, to fast-track and sustain the response, and eventually to end the AIDS epidemic by 2030.

Do hereby declare our commitments to Fast-Track and Sustain the ASEAN Response to HIV and AIDS, and to:

### **Fast-Track the ASEAN HIV and AIDS Response**

8. FOCUS and TARGET HIV and AIDS programmes for key affected populations and priority geographical areas, according to national legislation, priorities and evidence about the epidemic in each Member State;
9. SCALE UP and STRENGTHEN the coverage, reach and quality of a continuum of comprehensive integrated packages of prevention, testing, treatment, care and support services, similarly referred to as the cascade of services, for key affected populations in priority geographic areas according to national legislation, priorities and evidence about the epidemic in each Member State:
  - (a) Combination of prevention interventions, tailored for each key affected population taking into consideration the religious and cultural sensitivities of the community, that may include peer- and outreach-based education, healthy sexual relationship, condoms, pre-exposure prophylaxis for those at

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higher risk, HIV and STI testing, STI treatment, combat hepatitis B and C, measures aimed at minimizing the adverse public health and social consequences of drug abuse, including appropriate medication assisted therapy programmes and injecting equipment programmes, and access to appropriate interventions for people in prisons and other custodial settings

- (b) Treatment, care and support, may include ARV treatment, treatment of co-infections such as TB and hepatitis B and C, treatment of other opportunistic infections, non-communicable diseases, CD4 and viral load monitoring, practical support for adherence and prevention of loss to follow-up, and psycho-social and community-based support;
- (c) Elimination of mother-to-child transmission includes ensuring that mothers have access to immediate and life-long antiretroviral treatment; and

10. PLEDGE to ENSURE the achievement within ASEAN the 90-90-90 treatment targets adopted by ASEAN Member States in the United Nations Political Declaration on HIV and AIDS: On the Fast-Track to Accelerate the Fight against HIV and to End the AIDS Epidemic by 2030, on 8 June 2016 i.e., by 2020, 90% of people (children, adolescents and adults) living with HIV know their status, 90% of people living with HIV who know their status are receiving treatment, and 90% of people on treatment have suppressed viral loads.
11. ENSURE that no one is left behind in the AIDS response: to work towards a response where there is equal access to high-quality services, prevention, treatment, care and support and no one is denied such services because of HIV-related stigma and discrimination;

### **Sustain the ASEAN HIV and AIDS Response**

12. MAINTAIN and FURTHER STRENGTHEN effective, high-level, action-oriented political leadership on HIV and AIDS at regional, national and local levels;
13. CONSIDER expanding efforts, in accordance with national legislation and priorities, to provide a supportive environment to reduce stigma and discrimination towards key affected populations — involving key stakeholders such as civil society organisations and key affected populations, as well as reviewing , programme and practices which are barriers to key affected populations' full access to services, including reducing HIV-related stigma and discrimination;
14. FURTHER STRENGTHEN the capacities of national and local governments to conduct assessments, analyse and utilise strategic information to effectively advocate with key decision-makers to fast-track and sustain the HIV and AIDS response and to mobilise the required resources, ensuring that programmes are based on the best-

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available, most updated, region- and country-specific evidence about the epidemic and the response;

15. FURTHER ENHANCE ownership, coordination and cooperation across sectors, as well as, at regional, national, and local levels, including South-to-South cooperation, cross-border and city-to-city collaboration and cooperation, and in addition including strengthening capacity to coordinate such multi-stakeholder partnerships;
16. CONTINUE to INVEST in broad community participation, including non-governmental, civil society, community and key population networks and organisations; religious leaders and faith-based organisations; business and private sector, and others, in order to improve effective programming to achieve and sustain measurable results;
17. SUSTAIN, in accordance to national legislation and priorities, effective HIV and AIDS programmes, integrating and institutionalising these, promoting a holistic, integrated response to HIV and AIDS and enhancing collaboration between HIV and AIDS and other health services — tuberculosis, sexual and reproductive health, sexually transmitted infections, family health and family planning, maternal and child health, hepatitis B and C, mental health, and non-communicable diseases and consider working towards integrating them into existing social protection system ;
18. MAINTAIN and EXPAND commitment to raise sufficient international and domestic financial resources to fill gaps in national responses by:
  - promoting national and sub-national evidence-based investment cases for HIV and AIDS;
  - improving efficiency in the use of existing resources;
  - sharing responsibility with international and local development partners to jointly develop and implement transition plans from external to domestic funding; and,
  - encouraging international and local development partners to develop clear funding plans, including exit strategies and transition plans to hand over external supported programmes and ensure sustainability;
19. PURSUE opportunities for region-wide negotiation for development of commodities, as access to generic medicines, as well as their bulk or joint procurement, to increase predictability, reduce costs and increase access to affordable medicines for all, including full use of the Agreement of Trade-Related Aspects of Intellectual Property Rights (TRIPS) flexibilities;
20. MAINTAIN and EXPAND regional consultation, dialogue and exchange of experiences, innovations and evidence in implementing the measures in this Declaration, as well as the documentation and sharing of good practices on HIV and AIDS across ASEAN, particularly including the ASEAN Cities Getting to Zero Regional Project; and,

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21. COMMIT to periodic strategic and operational monitoring and evaluation reviews of progress at regional, national and local levels, specifically including progress in fostering the greater meaningful involvement and effective leadership role of key affected populations, to ensure that, in the response to HIV and AIDS in ASEAN, no one is left behind.
22. Task the concerned ASEAN Sectoral Ministerial Bodies as well as other relevant bodies to implement this Declaration including mobilising resources, and monitor its progress; Encourage all ASEAN Member States to support these ASEAN Sectoral Bodies in accomplishing this Declaration through maximum efforts by such appropriate instruments as may be necessary and consistent with their respective national legislation and policies.

Adopted in Vientiane, Lao PDR, on the 6 day of September 2016, in a single copy in the English language.