Statement for the UN High-Level Meeting on AIDS
Recommendation from the Civil Society Members of the Philippine National AIDS Council

Since the UN High-Level Meeting on AIDS in 2016, the Philippines has made some significant strides towards reaching the goal of ending AIDS. Two landmark laws that directly impact the national HIV response were passed:

1. The HIV and AIDS Policy Act of 2018 (Republic Act 11166) expands the scope of HIV prevention, diagnosis, treatment, and care programs and services for people living with HIV, and communities affected by HIV and AIDS. It instituted a stronger mechanism that protects against HIV-related stigma and discrimination through expansion of HIV education programs, as well as, steeper penalties for those who perpetrate discrimination on the basis of HIV status. Furthermore, the law also strengthens the National AIDS Council, which is a policy-making and coordinating body for the national AIDS response, by ensuring greater participation of civil society by increasing the number of seats for community representatives in the Council.

2. The Universal Health Care Act of 2019 (Republic Act 11223), which aims to ensure equitable access of Filipinos to quality health care. The UHC Law is also envisaged to improve the country’s health system through greater integration of the government’s health programs, including HIV and AIDS.

Civil society participation in the national AIDS response is stronger than ever. Community-led HIV treatment and service delivery facilities have increased. To date, there are 18 such facilities set up in different parts of the country, with more being established this year. This was made possible through the continued support of international donors and the cooperation between civil society organizations and local government units.

With regard to progress towards achieving the 90-90-90 targets, the Philippines has gained considerable ground with an increase in HIV diagnosis coverage from 62% in 2016 to 71% in 2019. HIV treatment enrollment also increased from 48% in 2016 to 61% in 2019. Among those enrolled in treatment, the proportion of PLHIV who are virally suppressed increased from 92% in 2016 to 96% in 2019. Unfortunately, the COVID-19 pandemic has temporarily set us back from getting closer to our goals. But the Philippine government remains committed to seeing the end of both pandemics.
This new UN Political Declaration, along with the Global AIDS Strategy, signals the need for renewed energy and commitment to end AIDS in the Philippines through the following:

1. Strengthen the health system to ensure that we can effectively implement existing health programs like HIV prevention, treatment, and care, while we continue to address COVID-19. Ensure that no health program suffers in the face of emerging pandemics as the country works toward a more resilient system to deliver universal health care for every Filipino.

2. Because the Philippines is experiencing a concentrated epidemic among males who have sex with males, transgender women, sex workers and people in prostitution, and people who inject drugs, particularly those aged 15 to 29 years old, there is a need to focus efforts to reach these hard-to-reach key populations and vulnerable communities with evidence-based HIV prevention, diagnosis, treatment, and care services. This will ensure that resources are allocated efficiently with the highest impact in halting the epidemic;

3. Over the years, the Department of Health has steadily increased its budget for the HIV program. It is crucial that the government must keep increasing domestic financing for HIV while encouraging sub-national levels to increase their allocation for their respective HIV responses as services are delivered at the community level. The increase in domestic funding for HIV will also include support for community-led programs and interventions, having proven their effectiveness in reaching HIV key populations and vulnerable communities;

4. Increase investments in social protection services to ensure the well-being of communities living with and affected by HIV and AIDS from future socio-economic disruptions from emerging pandemics, disasters, and similar emergencies;

5. End HIV-related stigma and discrimination and other human rights-related barriers to the effective delivery of HIV prevention, treatment, and care services. These barriers limit the ability of affected communities to access HIV programs and services and undermine the success of the national HIV response.

Effective HIV response requires a whole-of-government approach, with all sectors, including civil society and communities affected by HIV and AIDS, working in harmony to achieve the targets to end AIDS. This means ensuring a safe and enabling environment for civil society participation, transparency in governance, and a strong political will to invest in HIV programs and services delivered efficiently and effectively to the right communities and key populations.