

UNAIDS 2025

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# Result Area 5: Human Rights

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2024 Results Report



## Result Area 5: Human rights

### 2024 Expenditures and encumbrances for all Cosponsors against allocated funds (in US\$)

Core		Non-core		Total	
Core Allocated Funds	Expenditures and encumbrances	Non-core estimates	Expenditures and encumbrances	Total allocated funds	Total Expenditures and encumbrances
\$3 380 474	\$2 360 378	\$10 902 300	\$14 066 934	\$14 282 774	\$16 427 313

*Advocacy for, collaboration with and partners convened for supporting countries for the removal and/or amendment of punitive and discriminatory laws and policies relating to HIV and/or develop protective ones.*

The Joint Programme remained a global leader in aligning HIV responses with principles of human rights, gender equality and social inclusion. The Secretariat and Cosponsors played a central role in developing and achieving the consensus adoption of the groundbreaking UN Human Rights Council Resolution 56/20, "Human Rights in the Context of HIV and AIDS", which explicitly recognizes the human rights of key populations. The resolution urges states to review or repeal restrictive, punitive or discriminatory legal and policy frameworks that adversely affect the successful, effective and equitable delivery of HIV services. It also calls for the development of SRH services and education programmes, specifically for adolescents, young persons and persons with disabilities. On World AIDS Day 2024, UNAIDS [Take the RIGHTS path](#) report publicized examples from around the world of proven policies and programmes that are protecting health and HIV services by protecting people's rights.

#### Indicator progress on human rights (RA 5)

- **72 countries** were supported to **remove or amend punitive and discriminatory laws and policies**, and/or develop protective ones affecting the HIV response.
- **65 countries** were supported to **reduce stigma and discrimination** as defined in the Global Partnership for action to end all forms of HIV-related stigma and discrimination.

UNDP worked with national institutions, civil society and communities and other partners in 84 countries to create enabling environments for people living with HIV and marginalized and vulnerable people who are disproportionately affected by HIV, with a focus on advancing legal and policy reforms that can reduce discrimination and improve health outcomes. It also supported 96 countries on HIV and TB-related rights. In the Republic of Congo, Eswatini and Kenya, UNDP enhanced the knowledge of national human rights commissions, the judiciary, parliamentarians and civil society about the rights of key and vulnerable populations, to help increase access to HIV services. With the Asia Pacific Forum of National Human Rights Institutions, it enhanced the capacity of national human rights institutions in 10 countries on LGBTQI+ rights. It also convened regional judges' forums in Africa (including 46 senior judges from 18 countries); the Caribbean (10 countries) as well as national judges forums in Guyana, India and Ukraine.

ILO and partners trained health workers, human resource managers and law enforcement personnel on eliminating HIV-related stigma and gender-based violence in Malawi; provided financial and technical support to empower young women, linking economic empowerment to stigma reduction and HIV service access in Zambia; empowered youth in Nigeria to advocate for HIV prevention and stigma reduction

through the Digital Young Filmmakers Initiative; and supported labour federations in South Africa to undertake strategic planning to integrate gender and HIV in workplace policies. The ILO supported over 230 employers in Ukraine to adopt workplace policies prohibiting HIV-related discrimination and collaborated. In Uganda, it worked with the National Forum of People Living with HIV and employer organizations to develop and launch an employers' guide on combating HIV-related stigma and discrimination. In Mozambique, the ILO, in partnership with UNDP, the Secretariat and UN Women, supported the Government to revise the HIV legal framework.

The Joint Programme continued advocacy and guidance for evidence-informed drug laws and policies aligned with human rights and public health principles for more effective HIV response. Working with the International AIDS Society, International Network of People who use Drugs, WHO and the Secretariat, UNODC organized the 4th Pre- Commission on Narcotic Drugs Multi-Stakeholder Consultation "HIV and Hepatitis Prevention, Treatment and Care with and for People Who Use Drugs", which generated recommendations that informed the 67th session of the Commission on Narcotic Drugs.

Guided by UNAIDS's call for an evidence- and rights-based and public health-centred approach to drug policy, the Commission adopted an historic reference to harm reduction in a resolution on drug policy. UNODC also reinforced the critical importance of collaboration between law enforcement structures and civil society and of applying human rights-based approaches at major regional conferences, including the Africa Regional Conference on Law Enforcement and Public Health in South Africa and the 6th European Harm Reduction Conference in Warsaw. In partnership with Lawyers for Human Rights and Just Detention International-South Africa, UNODC promoted a regional network advocating for the rights, health, rehabilitation and reintegration of people in prison. UNODC and the Viet Nam Administration for AIDS Control conducted a scientific workshop on HIV prevention and treatment for people who use amphetamine-type stimulants, which included 113 policymakers, health officials and civil society representatives and catalysed dialogues for improved health referral pathways and alternatives to punishment.

UN Women supported efforts to repeal or reform discriminatory laws and practices that hinder the rights and access to services for women living with HIV and women in key populations affected by HIV. UN Women's collaboration with the national network of sex workers and Government ministries in Indonesia resulted in formal recommendations to the Ministry of Home Affairs and nine regional governments to repeal harmful regulations and promote equitable treatment and HIV services. UN Women also supported advocacy for a bill in Guatemala on addressing sexual violence, the inclusion of HIV prevention and CSE, and strengthened victim support services. Furthermore, UN Women partnered with the Greater Women Initiative for Health and Rights in Nigeria for the inclusion of sex workers in violence reporting mechanisms and influenced the drafting of the Gender and Equal Opportunities Bill, which seeks to increase access to justice for sex workers. Through targeted advocacy, UN Women enabled the "Her Rights" initiative in South Africa to draw international attention to the forced and coerced sterilization experienced by 104 women living with HIV between 1997 and 2023. This led to a formal communication from the UN Human Rights Committee recognizing those acts as forms of torture and gross violations of human rights.

The Secretariat convened the Human Rights Reference Group and provided other guidance and support that helped shape legal and policy reforms for more effective HIV responses. This included engagement with UN human rights special procedures and other bodies on the importance of decriminalization for key populations and the submission of two reports to the Special Rapporteur on the Right to Health regarding

harm reduction and HIV-related decriminalization (with a specific focus on key populations). In a context of regression of human rights and gender equality in the context of the HIV, which is especially affecting the LGBTQI+ community, the Secretariat elevated its advocacy in crisis situations and provided direct support to improve the safety and security of key populations and ensure their continued access to essential HIV and other health services. The Secretariat supported two dialogues with 50 lawmakers on HIV law reform in Côte d'Ivoire; worked with UNDP to support trainings on stigma and discrimination for staff of the Commission on Human Rights and Administrative Justice in Ghana; commissioned a review of the effects of the passage of the Human Sexual Rights and Family Values Bill in Ghana, which criminalizes LGBTQI+ communities; supported more than 70 organizations to advocate for the passage of the Integral Trans Law and Anti-Discriminatory Law; and provided technical advice in parliamentary debates on new laws criminalizing key populations, restricting civic space and limiting access to SRH services in Burkina Faso, Ghana, Liberia, Mali and Zimbabwe.

UNFPA's global monitoring of legal restrictions related to HIV testing and treatment gathered data from 153 countries, which informed its engagements with human rights mechanisms and countries on those issues and the development of follow-up recommendations. In 2024, with the Centre for Reproductive Rights, UNFPA launched the first programme tool for assessing states' international human rights obligations for attaining SRH in Universal Health Care (UHC), which includes a dedicated module outlining those obligations.

*Technical and policy advocacy provided to support countries on actions to reduce HIV-related stigma and discrimination affecting the HIV response, including through leveraging the Global Partnership for action to eliminate HIV-related stigma and discrimination.*

The Global Partnership for action to eliminate all forms of HIV-related stigma and discrimination (co-convened by UNDP, UN Women, the Secretariat, Global Fund and GNP+) continued to drive progress on stigma and discrimination. Colombia, Germany and Nigeria joined the Global Partnership in 2024, increasing its membership to 41 countries. A five-year informal review of the Global Partnership assessed its impact, highlighted its successes and outlined future strategies. It also evaluated progress on country commitments, identified community successes and challenges, and highlighted lessons for improvements.

The Global Partnership's meeting in Bangkok brought together eight countries to share insights, enhance coordination and advance their efforts to eliminate stigma and discrimination. Other achievements of the Global Partnership included: support for training and sensitization of health students in Ghana, Kenya and South Africa; the launch (with Beyond Stigma, GNP+, International AIDS Society, Zvandiri and the U.S. CDC of the Internal Stigma Package); the training of more than 1,000 community health workers on stigma-free health settings in Thailand; reaching of more than 188 000 teens through the youth-led "A l'Assaut du Sida" quiz, updated with stigma-free human rights and gender content; stigma reduction and community mobilization training of 20 adolescent girls and young women living with HIV in Ghana and 64 youth advocates in Jamaica; support to the MENA Rosa Network on conducting SRH workshops for 111 women living with HIV in Egypt and Lebanon; and the development of the Andean Plan for Stigma-Free Healthcare. WHO launched a technical brief to assist health facility managers in providing quality, stigma-free services.

UNDP continued to work with countries and communities to support access to justice for people living with HIV and key and vulnerable populations. In Kenya, it assisted the HIV

Tribunal to strengthen the rule of law and access to justice for people living with HIV, individuals with disabilities and other key populations. In Pakistan, UNDP and the Global Fund supported the establishment legal aid desks in four provinces to improve access to justice for key populations and for people living with or at risk of HIV. In Tajikistan, UNDP worked with national partners and the Global Fund to support the development of a community-led digital system to record human rights violations against people living with HIV and other key and vulnerable populations. UNDP, community partners and the State Government of Rajasthan in India piloted a legal aid clinic for people living with HIV in two districts. It also supported civil society organizations' efforts to secure accurate ID documentation for transgender individuals (resulting in the issuance of ID cards to 3,000 transgender individuals in Bihar state). It assisted in the development of draft legislation on combatting HIV-related stigma and discrimination in Belarus; worked with local organizations in Kazakhstan to train 157 law enforcement officers on stigma reduction; supported the development of the national plan of Kyrgyzstan to join the Global Partnership; and trained over 100 law enforcement in Thailand on sexual orientation, gender identity and expression and on harm reduction.

UNODC initiated an update of its global training manual for law enforcement officials to strengthen evidence-informed health-centred policing in HIV responses. A high-level stakeholder meeting in Malawi explored strategies for urgently addressing the harm reduction needs of people who use or inject drugs. UNODC trained police officials in Pakistan on harm reduction strategies, HIV service linkages and the role of law enforcement in facilitating access to them. It also organized regional training for law enforcement and police academies from Kazakhstan, Kyrgyzstan and Uzbekistan on HIV prevention, harm reduction and human rights-based policing.

UNODC strengthened human rights-based policing and prison health interventions to integrate human rights, HIV and gender-based violence into law enforcement training curricula in Bangladesh. In Laos, it organized a workshop on health in prisons, bringing together 27 senior officials from the Ministry of Public Security and the Ministry of Health. In Uzbekistan, it equipped 22 law enforcement officers from the Ministry of Internal Affairs and Police Academy with knowledge on HIV prevention, harm reduction and human rights-based policing and collaboration. Working with the National Centre for Drug Control, it also supported the revision of police training curricula and integration of an online HIV prevention module for law enforcement.

UNFPA promoted inclusive HIV programming for key populations despite challenging political, legal and social conditions. For example, community-led initiatives were supported in Jamaica, Guyana, Kenya, Lesotho, Nigeria, South Sudan, Uganda and Zimbabwe to improve service access and challenge stigma. In eastern Europe and central Asia, UNFPA played an important role in supporting the establishment of a regional network dedicated to the decriminalization of HIV transmission and the development of a comprehensive regional framework to guide those efforts.

UN Women strengthened access to justice in the HIV response. For example, it trained women living with HIV and 20 lawyers in Tajikistan to understand legal rights of women living with and affected by HIV, challenge HIV-related criminalization, advocate for gender-sensitive legal protection and engage with the Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW). In Burundi, community-led campaigns and radio programmes mobilized over 500 people to challenge stigma and promote equitable HIV service access, particularly through engaging men as allies. In Lesotho and Senegal, empowered women living with HIV led peer engagement and became visible champions for stigma-free health services.

Building the evidence base for action to promote human rights and end stigma and discrimination, a World Bank report assessed laws and regulations that affect the lives of sexual and gender minorities in 64 countries in six important areas of their life: education, employment, access to public services and social protection, civil and political inclusion, protection from hate crimes, and from being criminalized.

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