Thank you, Mr President,

UNAIDS is pleased to support the implementation of the New Urban Agenda, with a focus on its call to end the AIDS epidemic, address discrimination against people living with HIV and leave no one behind, by ensuring equal rights and opportunities, eliminating all forms of violence and discrimination and providing equal access for all to basic health and social services.

More than half of the world’s population currently live in cities, and cities account for large and growing proportions of people living with HIV. The risk and vulnerability to HIV is often higher in urban vs rural settings, because of urban dynamics such as social and economic inequalities, violence, etc. In some countries, a single city can account for up to 30% of the national HIV burden, while more than one quarter of all people living with HIV are residing in about 200 cities.

In December 2014, four core partners – UNAIDS, UN-Habitat, the City of Paris and the International Association of Providers of AIDS Care (IAPAC) jointly launched the Fast-Track Cities: Ending the AIDS Epidemic initiative. It seeks to accelerate cities’ HIV responses to end AIDS by 2030 and to address the disparities in access to services, social justice and economic opportunity.

The New Urban Agenda provided an impetus to the Fast-Track initiative. Furthermore, the Global AIDS Strategy for 2021-2026 underscores the role of cities in addressing rights issues, reducing inequalities and social exclusion, and protecting against risks and vulnerabilities, while using the HIV response as a pathfinder in those efforts.

To date, more than 350 cities and municipalities in all parts of the world have joined the Fast-Track network. They are adopting innovative approaches to reach all affected populations with HIV and other social and health services (such as TB and COVID-19), address stigma and discrimination, violence and gender inequality. These will help achieve not only better health outcomes, but also positive social transformation to build societies that are equitable, inclusive, resilient and sustainable.

In closing, I would like to share a specific example – it is about a project, as part of the Fast-Track Cities network, with financial support by USAID and managed by UNAIDS and IAPAC, to support 15 high HIV burden cities that together account for about 3 million people living with HIV. The project is implemented under the leadership of local governments and in close collaboration with communities and civil society organizations. Strengthened partnerships and innovation to reach key and vulnerable populations have led to an increased uptake of HIV services and also contributed to the COVID-19 response.

Thank you.