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Summary record of the 44th meeting

Held at Headquarters, New York, on Tuesday, 25 July 2023, at 3 p.m.

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In the absence of Ms. Stoeva (Bulgaria), Ms. Narváez Ojeda (Chile), Vice-President, took the Chair.

The meeting was called to order at 3 p.m.

Agenda item 17: Non-governmental organizations

(continued) (E/2023/32 (Part III); E/2023/L.32)

1. **Ms. Nishihara** (Chile) said that her country's decision to abstain from voting on draft decision [E/2023/L.32](#) at the previous meeting (see [E/2023/SR.43](#)) did not reflect any judgment regarding any specific non-governmental organization (NGO) which had been recommended for consultative status therein or any intention to restrict the inclusion of civil society. Rather, Chile supported and respected the formal mechanisms and procedures that Member States had established within the Council for the inclusion of civil society and to which Chile was committed as a member of the Council and of the Committee on Non-Governmental Organizations.

2. **Ms. Widyastuti** (Indonesia) said that her country had voted against draft decision [E/2023/L.32](#) since overriding the recommendation made by the Committee on Non-Governmental Organizations would undermine procedural norms and established institutional processes. It was important to trust the Committee's expert assessment and the diverse perspectives and comprehensive evaluations it offered. By voting against the proposal, Indonesia intended to help avoid any future precedent casting doubt over other similar recommendations.

3. Her country's decision to vote against the draft decision was in line with its commitment to peaceful cooperation and mutual respect. It was crucial for Member States to ensure that political interests did not supersede international law or established rules within the United Nations. Multilateralism could be strengthened only when all Member States united to deliver, and it was incumbent upon the Council to address any discontent concerning the operational methods of the Committee.

4. **Mr. Sengdara** (Lao People's Democratic Republic) said that his delegation recognized the important contribution of civil society organizations to the work of the United Nations and to the implementation of the 2030 Agenda for Sustainable Development and had no objection to any of the NGOs specifically mentioned in the draft decision. However, his delegation was concerned by the approach to the draft decision, which undermined the decision-making process of the Committee on Non-Governmental Organizations. It was the common responsibility of Member States to create an environment in which all bodies of the United Nations could carry out their mandate. Overruling the decision of any such body would not be conducive to advancing multilateralism.

Action on recommendations contained in the report of the Committee on Non-Governmental Organizations on its 2023 resumed session (E/2023/32 (Part III))

5. **The President** drew attention to the draft decisions contained in chapter I of the report.

Draft decision I: Applications for consultative status, requests for a change of name and quadrennial reports received from non-governmental organizations

6. *Draft decision I, as amended by the adoption of draft decision [E/2023/L.32](#), was adopted.*

Draft decision II: Suspension of the consultative status of non-governmental organizations with outstanding quadrennial reports, pursuant to Council resolution 2008/4

7. *Draft decision II was adopted.*

Draft decision III: Reinstatement of the consultative status of non-governmental organizations that submitted outstanding quadrennial reports, pursuant to Council resolution 2008/4

8. *Draft decision III was adopted.*

Draft decision IV: Withdrawal of the consultative status of non-governmental organizations, pursuant to Council resolution 2008/4

9. *Draft decision IV was adopted.*

Draft decision V: Dates and provisional agenda for the 2024 session of the Committee on Non-Governmental Organizations

10. *Draft decision V was adopted.*

Draft decision VI: Report of the Committee on Non-Governmental Organizations on its 2023 resumed session

11. *Draft decision VI was adopted.*

Agenda item 4: Elections, nominations, confirmations and appointments (E/2023/9/Add.8 and E/2023/9/Add.9)

International Narcotics Control Board

12. **The President** invited the Council to elect a member to the International Narcotics Control Board from among the candidates nominated by Governments ([E/2023/9/Add.8](#)) for a term beginning on the date of election and expiring on 1 March 2025 to fill a vacancy arising from the death of Mr. Bernard Leroy (France). Since the number of candidates exceeded the number of vacancies, she invited the Council to elect the members by secret ballot.

13. *At the invitation of the President, Ms. Tudor-Bezies (Canada) and Mr. Imanuel (Indonesia) acted as tellers.*

14. *A vote was taken by secret ballot.*

<i>Number of ballot papers:</i>	48
<i>Number of valid ballots:</i>	48
<i>Number of members voting:</i>	48
<i>Required majority:</i>	25
<i>Number of votes obtained:</i>	
Mr. Lapaque (France)	28
Mr. Arthivech (Thailand)	9
Mr. Djadi (Algeria)	8
Mr. Torkornoo (Ghana)	2
Mr. Abani Ahmed (Niger)	1
Mr. Adu-Amankwah (Ghana)	0

15. *Having obtained the required majority, Mr. Lapaque (France) was elected a member of the International Narcotics Control Board.*

16. **The President** invited the Council to elect a member to the International Narcotics Control Board from among the candidates nominated by the World Health Organization (E/2023/9/Add.9) for a term beginning on the date of election and ending on 1 March 2027 to fill a vacancy arising from the resignation of Mr. Mattick (Australia). Since the number of candidates exceeded the number of vacancies, she invited the Council to elect the members by secret ballot.

17. *At the invitation of the President, Ms. Tudor-Bezies (Canada) and Mr. Imanuel (Indonesia) acted as tellers.*

18. *A vote was taken by secret ballot.*

<i>Number of ballot papers:</i>	48
<i>Number of valid ballots:</i>	48
<i>Number of members voting:</i>	48
<i>Required majority:</i>	25
<i>Number of votes obtained:</i>	
Ms. Simão (Brazil)	24
Mr. Farrell (O'Fearthail) (Australia)	22
Mr. del Campo Sánchez (Mexico)	2

19. **The President** invited the Council to elect a member to the International Narcotics Control Board from among the candidates nominated by the World Health Organization, in a second ballot restricted to the two candidates who had obtained the largest number of votes in the previous ballot without having obtained the required majority.

20. *At the invitation of the President, Ms. Tudor-Bezies (Canada) and Mr. Imanuel (Indonesia) acted as tellers.*

21. *A vote was taken by secret ballot.*

Number of ballot papers: 46

Number of valid ballots: 46

Number of members voting: 46

Required majority: 24

Number of votes obtained:

 Ms. Simão (Brazil) 26

 Mr. Farrell (O'Fearthail) (Australia) 20

22. *Having obtained the required majority, Ms. Simão (Brazil) was elected a member of the International Narcotics Control Board.*

Committee for Programme and Coordination

23. **The President** said that there was an outstanding vacancy on the Committee for Programme and Coordination to be filled from Latin American and Caribbean States. She took it that the Council wished to nominate Costa Rica by acclamation for election by the General Assembly to the Committee for Programme and Coordination for a three-year term beginning on 1 January 2024.

24. *Costa Rica was nominated for election by the General Assembly to the Committee for Programme and Coordination.*

Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS

25. **The President** said that there was an outstanding vacancy on the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS to be filled from Latin American and Caribbean States. She took it that the Council wished to elect Mexico by acclamation to the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS for a three-year term beginning on 1 January 2024.

26. *Mexico was elected a member of the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS by acclamation.*

Agenda item 11: Implementation of and follow-up to major United Nations conferences and summits *(continued)*

(b) Review and coordination of the implementation of the Doha Programme of Action for the Least Developed Countries *(A/78/112-E/2023/94; E/2023/L.24)*

27. **Mr. Erdenebileg** (Chief of the Policy Development and Coordination, Monitoring and Reporting Service; Office of the High Representative for the Least Developed Countries, Landlocked Developing Countries and Small Island Developing States), introducing the

report of the Secretary-General entitled “Follow-up to the Fifth United Nations Conference on the Least Developed Countries” (A/78/112-E/2023/94), said that the Fifth United Nations Conference on the Least Developed Countries had been attended by more than 5,000 participants, including 47 Heads of State or Government, 200 ministers and vice-ministers and representatives of the United Nations system, including resident coordinators from least developed countries, private sector actors, civil society organizations and major groups. Participants had committed to concrete support measures, including financial pledges worth hundreds of millions of dollars, strengthened cooperation agreements, new partnerships and enhanced investment.

28. Nevertheless, much remained to be done to tackle the continuing impact of the coronavirus disease (COVID-19) pandemic and ongoing overlapping global crises, which had been devastating for the development progress of the least developed countries. In 2020, in those countries, 32 million people had been pushed into extreme poverty and the number of severely food insecure people had increased from 243 million in 2020 to 266 million in 2021. It was imperative to address food insecurity, undernourishment and the impact of food emergencies. The Office of the High Representative would submit a second report to the seventy-eighth session of the General Assembly on the operationalization of a food stockholding system for the least developed countries. In 2022, 22 per cent of children in the least developed countries had been out of school, which was more than double the global average. His Office was preparing a feasibility study on the establishment of an online university for consideration by the General Assembly, which would leverage the potential of digitalization to advance science, technology, engineering and mathematics education. The infant mortality rate in the least developed countries was 45 per 1000 live births, which was 62 per cent higher than the global average. The basic infrastructure required for structural transformation in the least developed countries was also often lacking or absent. In 2020, just 56 per cent of their populations, and 45 per cent in rural areas, had had access to electricity and only 36 per cent had used mobile broadband. Following the pandemic, 15 of the least developed countries were at high risk of debt distress and six were in debt distress already. Increasing investment in those countries would be key to economic recovery and advancing the Sustainable Development Goals, yet foreign direct investment in the least developed countries had decreased by 14 per cent between 2021 and 2022. The Office of the High Representative was therefore exploring the feasibility of establishing an international

investment support centre for those countries, as requested by the Doha Programme of Action.

29. It was necessary to build upon and harness the strong momentum from the Fifth United Nations Conference on the Least Developed Countries. The Office was working to translate commitments from the Conference into action, such as by operationalizing the Sustainable Graduation Support Facility to provide policy and technical advice to the least developed countries on track for graduation. In June 2023, the High Representative had convened the heads of the United Nations agencies, funds and programmes to follow-up on the commitments made in support of the least developed countries at the Secretary-General’s high-level event in Doha. The Office of the High Representative was preparing for the third United Nations Conference on Landlocked Developing Countries and the fourth International Conference on Small Island Developing States, which would take place in 2024 and would affect 25 of the least developed countries.

30. **Ms. Adhikari** (Observer for Nepal), speaking on behalf of the Group of Least Developed Countries, said that multiple global crises during the first year of the Doha Programme of Action for the Least Developed Countries had illustrated that the partnership, cooperation and support from the international community were key for their smooth, sustained and irreversible graduation.

31. The Doha Programme of Action had been adopted with renewed and strengthened commitments by both the least developed countries and their development partners to achieve rapid, sustainable and inclusive recovery from crises and other structural challenges. However, the situation on the ground was quite different. About half of the world’s poorest people lived in those countries, a quarter of young people there were not in education, employment or training, and the rate at which undernourishment in the least developed countries was declining remained very slow. Inadequate funding for research and development hindered innovation and the enjoyment of the benefits of science, technology, innovation and digital technologies in the least developed countries. Diverse production and trade patterns were key to economic success, yet more than half of the population of the least developed countries depended on the agriculture sector, making them vulnerable to shocks. In those countries, the sectors which were most likely to contribute to the achievement of the Sustainable Development Goals had not been assessed. Furthermore, the least developed countries were bearing the brunt of climate effects despite being minimal contributors to the global carbon footprint.

32. The mobilization of international financial resources for the sustainable development of the least developed countries remained an unmet goal, but, through enhanced support from the international community, greater resource allocation and the conversion of commitment into action, it was still possible to achieve the target of enabling 15 of them to graduate by 2031. The Group called for the integration of the Doha Programme of Action into the United Nations development system and United Nations funds and programmes and for efforts by the least developed countries and their development partners to correct the path towards achieving the Goals.

Draft resolution E/2023/L.24: Doha Programme of Action for the Least Developed Countries for the decade 2022–2031

33. **The President** said that the draft resolution contained no programme budget implications.

34. *Draft resolution E/2023/L.24 was adopted.*

35. **Mr. Heartney** (United States of America) said that, with regard to trade and paragraph 12 of the resolution, his delegation reiterated its explanation of position regarding the Doha Programme of Action, delivered at the first part of the Fifth United Nations Conference on the Least Developed Countries on 17 March 2022.

Agenda item 12: Coordination, programme and other questions (*continued*)

(d) Prevention and control of non-communicable diseases (E/2023/86; E/2023/L.26)

36. **Mr. Obermeyer** (Director, New York Office of the World Health Organization), introducing his report on the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases (E/2023/86), said that a number of global commitments regarding non-communicable diseases were off-track. Those diseases were the cause of 74 per cent of all deaths in 2019, an increase from 61 per cent in 2000, and made up seven of the 10 leading causes of deaths. Of premature deaths from non-communicable diseases in 2019, 86 per cent had occurred in low- and middle-income countries. Nearly 1 billion people had been living with a mental disorder in 2019, and depression and anxiety alone had cost \$1 trillion annually. Premature mortality from non-communicable diseases could be partly attributed to a failure to address risk factors, such as tobacco use, harmful use of alcohol and air pollution.

37. Since the Task Force had been established in 2013, it had carried out a number of country missions and

technical support. A total of 40 non-communicable disease, mental health, road safety and physical activity investment cases had been undertaken between 2016 and 2023 and were contributing to changes in policy and strengthened governance and financing. Nevertheless, tools that had been developed at the global level to strengthen multisectoral action needed to be tailored to country contexts. Technical and financial support, even at low levels, could catalyse effective action, but required continuity in order to have a sustained impact and build capacity. Multisectoral engagement was also needed to prevent and control non-communicable diseases, to improve mental health and maximize the impact on sustainable development. For example, the involvement of a number of sectors was needed to ensure that digital health could be operationalized as a best buy for Member States.

38. The United Nations multi-partner trust fund to catalyse country action for non-communicable diseases and mental health (Health4Life Fund) had been established by the World Health Organization, the United Nations Development Programme and the United Nations Children's Fund and aimed to establish catalytic funding to bring additional private sector and foundational support to countries and meet priorities such as expanding access to treatment, enhancing policies, legislation and regulation and modernizing health systems through digital solutions. He urged Member States to contribute to the fund, which aimed to raise \$250 million for the prevention of non-communicable diseases in its first five years. The Task Force had also begun implementing its 2022–2025 strategy, which aimed to support countries in accelerating multisectoral action on Sustainable Development Goals related to non-communicable diseases and mental health, to mobilize resources to support the development of country-led priorities and responses, to harmonize action and to forge cross-sectoral partnerships.

Draft decision E/2023/L.26: United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases

39. **The President** said that the draft decision contained no programme budget implications.

40. *Draft decision E/2023/L.26 was adopted.*

(h) Joint United Nations Programme on HIV/AIDS (E/2023/85; E/2023/L.30)

41. **Ms. Achrekar** (Deputy Executive Director for the Programme Branch of the Joint United Nations Programme on HIV/AIDS (UNAIDS)), introducing the report of the Executive Director of UNAIDS

(E/2023/85), said that HIV/AIDS continued to be one of the deadliest pandemics, with 39 million people living with HIV at the end of 2022, including 1.5 million children. One person died of AIDS-related causes every minute and one person was newly infected with HIV every 20 seconds. Nevertheless, over the past 40 years, remarkable progress had been made in the global HIV/AIDS response. The 2023 UNAIDS Global AIDS Update showed that there was a path to ending AIDS as a public health threat by 2030 and that countries that put people and communities first in their policies and programmes were leading the way. In Botswana, Eswatini, Rwanda and Zimbabwe, 95 per cent of people living with HIV knew their HIV status, 95 per cent of people living with HIV who knew their status were receiving treatment and 95 per cent of people receiving treatment had achieved viral suppression; a further 16 countries, including 8 in sub-Saharan Africa, were close to meeting those targets. Globally, 29.8 million people living with HIV were receiving treatment, which represented a fourfold increase since 2010. By taking the path to end AIDS, the world could ensure that it was prepared for other pandemic threats and advance towards achieving many Sustainable Development Goals.

42. However, the gains made against HIV were fragile and, in a world marked by intersecting inequalities, a lack of human rights protection, stigma, discrimination and structural and punitive laws that prevented or prohibited access to health-care services, did not benefit everyone. Every week, 4,000 adolescent girls and young women acquired HIV, and 9.2 million people who needed treatment were not receiving it. In 2022, HIV prevalence had been 11 times higher among men who had sex with men, 4 times higher among sex workers, 7 times higher among people who injected drugs and 14 times higher among transgender people. Furthermore, \$20.8 billion had been available for HIV programmes in low- and middle-income countries in 2022, which was 2.6 per cent less than in 2021 and fell short of the \$29.3 billion that would be needed by 2025. It was possible to end AIDS by increasing political will and investing in a sustainable response to HIV through the financing of evidence-based HIV prevention and treatment, health systems integration, non-discriminatory laws, gender equality and empowered community networks.

43. UNAIDS continued to lead global efforts to respond to AIDS, including through the Global Alliance for Ending AIDS in Children by 2030. In partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria and the President's Emergency Plan for AIDS Relief, UNAIDS used data to guide HIV/AIDS responses, convened stakeholders to bring political attention to related issues and ensured that enabling and

effective policies were in place to support access to health care. However, the ability of UNAIDS to fulfil its mandate had been undermined by chronic underfunding, and its available financial resources had been some 25 per cent below its core budget since 2016, which impacted the Joint Programme's capacity. It was imperative to protect that capacity, and the Programme Coordinating Board had recently expressed a desire for a budget of \$210 million.

44. UNAIDS had taken steps to align its work with the mandates of the quadrennial comprehensive policy review of operational activities for development of the United Nations system, including by adopting a new Unified Budget, Results and Accountability Framework for the period 2022–2026 and by establishing an Independent External Oversight Advisory Committee, in line with the recommendations of the 2019 review of the Joint Inspection Unit. UNAIDS continued to develop tools and approaches to guide United Nations country teams and inter-agency collaboration in the implementation of the 2030 Agenda. The inclusive multisectoral and multi-stakeholder model exemplified by UNAIDS was more relevant than ever and it was encouraging to see continued support from Member States.

45. **Mr. Sekonyana** (Observer for South Africa) said that his country remained concerned about the continued prominence of HIV/AIDS, particularly in Africa. It was also worrisome that the progress made on HIV response during its period of peak mortality between 2004 and 2021 was faltering and that the world was not on track to end AIDS as a pandemic health threat by 2030. The report of the Executive Director indicated that the concerning rise of new HIV infections was a result of stigma and discrimination and that legal and policy frameworks continued to impede progress in treatment programmes. Funding issues were hindering progress on HIV responses and on the implementation of the 2030 Agenda as a whole and, accompanied by the decline of international HIV assistance, would continue to widen inequalities between countries and regions in terms of HIV treatment coverage.

46. South Africa had made notable progress in its HIV prevention and treatment programmes and over 5.7 million people in the country were receiving treatment. As at March 2023, 94.2 per cent of people knew their HIV status, 71 per cent of those living with HIV who knew their status were receiving retroviral treatment and 92 per cent of those receiving treatment had achieved viral suppression. There had been a decline in new HIV infections and in mother-to-child transmission of the virus.

47. There had been encouraging progress in negotiations for the political declarations on the high-level health-related meetings to be held in September 2023, especially regarding the recognition of HIV/AIDS in those texts. He called for strong political commitments to implement political declarations on HIV/AIDS, to pave the way to end HIV-related inequalities and to end AIDS as a public health threat by 2030. Since HIV prevention among adults and young people was a critical priority, South Africa had integrated sexual and reproductive health services and interventions focused on adults, girls and young women into its policies. Comprehensive sexual education was integrated into school curricula to raise awareness of hygiene and health-related information and to reduce the risk of HIV infections, child marriage and adolescent pregnancy. South Africa was also committed to domestic funding to finance trials and evaluations of medical interventions and to subsidize health care for key populations.

48. **Ms. Villarreal Gómez** (Mexico) said that, as part of its commitment to eradicate, prevent and control HIV/AIDS, her country ensured that its population had access to timely and reliable information on the virus through interventions focused on human rights, gender, diversity and cultural identity. Such interventions helped to ensure the health and well-being of all, strengthened inter-agency networks and communities and helped to overcome barriers to health-care coverage through programmes to prevent and control HIV, the hepatitis C virus and sexually transmitted infections. The development of public programmes within resilient shock-resistant systems was essential and, in 2020, Mexico had implemented a national programme to eradicate hepatitis C, which provided for free universal access to detection, diagnosis and treatment for the virus. As a recently elected member of the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS, Mexico was committed to ensuring that it took a cross-cutting and gender-informed approach in its work and protected all human rights, particularly those of persons facing discrimination and situations of vulnerability.

49. **Ms. Morrissey-Pearce** (Observer for Australia), speaking also on behalf of Canada and New Zealand, said that the tools needed to end AIDS as a public health threat were already available. In Eastern and Southern Africa, the number of new infections each year had fallen by 57 per cent between 2010 and 2022 due to strong leadership, increased funding and a focus on effective and evidence-based policies. However, the number of new infections globally continued to increase each year because of inadequate implementation of

effective and evidence-based preventing, testing, treatment and care services. In the Middle East and North Africa, for example, the number of new infections each year had increased by 61 per cent between 2010 and 2022. Key populations were being failed, particularly transgender persons.

50. However, evidence clearly showed that key populations would not seek out life-saving health care and other services when faced with major barriers such as stigma, discrimination, violence, harassment, arrest and imprisonment. Punitive laws and policies and some accepted cultural norms and practices increased the risk of HIV infection for everyone. Australia called for evidence-based public health decision-making, for the human rights of all people to be pursued as an integral part of efforts to achieve Sustainable Development Goal targets related to HIV by 2030 and for redoubled efforts to collect and use disaggregated data to enable more strategic approaches to reaching key populations.

Draft resolution E/2023/L.30: Joint United Nations Programme on HIV/AIDS

51. **Mr. Mahmassani** (Secretary of the Council), reading out a statement of programme budget implications in connection with draft resolution [E/2023/L.30](#) in accordance with rule 31 of the rules of procedure of the Council, said that, under the terms of paragraph 23 of the draft resolution, the Council would request the Secretary-General to submit to the Council, before its 2025 session and after consultation with the Programme Coordinating Board at its 53rd meeting in December 2023, a report on the follow-up to the Council's resolution on the Joint United Nations Programme on HIV/AIDS ([E/RES/2021/26](#)) regarding the establishment of term limits and performance expectations for the position of the Executive Director of UNAIDS.

52. The request contained in paragraph 23 of the draft resolution would constitute an addition to the documentation workload for the Department for General Assembly and Conference Management of one pre-session document with a word-count of 8,500 words in all six languages and would entail additional non-recurrent resource requirements in the amount of \$24,500 in 2024. Should the Council adopt draft resolution [E/2023/L.30](#), the additional resource requirements for the year 2024 under section 2, General Assembly and Economic and Social Council affairs and conference management, would be requested in the context of the report of the Secretary-General on revised estimates resulting from resolutions and decisions of the Council adopted during its 2023 session.

53. **Mr. Busch** (Observer for Germany), speaking also on behalf of Kenya, said that the draft resolution affirmed the continued work of UNAIDS to support the full implementation of the Global AIDS Strategy 2021–2026 and highlighted how the Joint Programme continued to be a model for joint coordinated and inclusive work within the United Nations.

54. Despite much progress, AIDS was far from over. In 2022, there had been almost 1.3 million new HIV infections and more than 630,000 AIDS-related deaths, with increasing risks resulting from social and economic inequalities and human rights issues. More than ever, a strong Joint Programme was needed to set a global vision and strategy for the next phase of global AIDS response.

55. The draft resolution took note of the importance of the 2021 Political Declaration on HIV and AIDS: Ending Inequalities and Getting on Track to End AIDS by 2030 and the Global AIDS Strategy 2021–2026, which aligned with the 2030 Agenda. The persistent funding shortfalls of the Unified Budget, Results and Accountability Framework and their impact on the ability of UNAIDS to implement its annual workplan were concerning. The draft resolution called for existing donors to maintain and step up their contributions to fund the Framework and invited new donors from public and private sectors to contribute. Urgent action was needed to meet milestones and targets for 2025, which were pre-requisites to end the AIDS pandemic by 2030, and to scale up evidence-based and people-centred HIV prevention, testing, treatment, care and retention services, including access to safe, effective, quality and free or affordable medicines for those who needed them most, including young women, key populations and children living with HIV. The draft resolution paid particular attention to key populations at higher risk of HIV infection and recognized that efforts to achieve universal health-care coverage should be informed by the lessons learned from the multisectoral HIV response. The draft resolution called for reinvigorated efforts to protect human rights and promote gender equality in the context of HIV, expressed concern at the laws, policies and practices that hindered access to HIV prevention, treatment, care and support services and recognized the critical role that civil society played in the global response to the AIDS epidemic.

56. *Draft resolution E/2023/L.30 was adopted.*

57. **Ms. Pereira Gomes** (Brazil) said that the work of UNAIDS was needed so that all Member States could meet HIV treatment and testing targets. It was necessary to address the inequalities that hampered HIV responses and to guarantee equitable and affordable access to the

latest innovations in testing and treatment. She called for an enabling human-rights-based environment for people to seek out information on diagnosis and treatment and access to life-saving tools without fear of stigma, discrimination or violence. The engagement of effective communities and a sustainably financed UNAIDS would be crucial in that regard. The critical lessons learned from the HIV/AIDS response should continue to guide global actions to address AIDS and future pandemics.

58. In June 2023, Brazil had hosted the announcement of the launch of the UNAIDS Global Council on Inequality, AIDS and Pandemics, which sought to generate evidence on the inequalities driving pandemics and the importance of multisectoral approaches in strengthening pandemic responses. Brazil called for other Member States to join the initiative.

59. **Mr. Heartney** (United States of America) said that intensive efforts to understand HIV and control the pandemic had yielded a clear path for ending HIV/AIDS as a global health threat by 2030. Progress had been made in HIV treatment and prevention and, based on decades of experience, the international community had the knowledge needed to achieve its shared goals. However, the important lessons learned were increasingly ignored. Although the populations most at risk of HIV were well known, persistent inequalities affected children, girls, young women, lesbian, gay, bisexual, transgender and intersex persons, persons who used drugs and sex workers. It was well known that bringing services to key and vulnerable populations was more effective than expecting them to seek those services out, often at personal risk, and that stigma and discrimination hindered sound policy and led to negative outcomes. Nevertheless, there continued to be laws enacted and policies retained that institutionalized stigma and discrimination, putting hard-won progress and the ability to achieve the Sustainable Development Goals by 2030 at risk. Member States should support evidence-based, comprehensive policies that had a lasting impact on epidemic control and speak out against actions and policies that undermined collective efforts.

60. **Ms. Arab Bafrani** (Islamic Republic of Iran) said that an effective response to HIV/AIDS required global solidarity and shared responsibility with a focus on development assistance to support health systems and enhance unhindered access to diagnosis, treatment and medications. Financing gaps for HIV/AIDS at the international level impeded the efforts of developing countries to accelerate effective responses. Through international cooperation, it was necessary to reinvigorate technology transfer, ensure unhindered access to medicines for developing countries and

support capacity-building, research, development assistance and scientific cooperation. The latest medicines and health-care technology for HIV prevention, testing and treatment should rapidly be made available and affordable.

61. Significant progress had been made in her country in promoting the health and well-being of people living with HIV, in eliminating mother-to-child transmission of the virus and in reducing the transmission of AIDS among drug users. However, while paragraph 7 of resolution [E/2023/L.30](#) required States to urgently remove any obstacles that limited the capacity of developing countries to provide affordable and effective HIV prevention and treatment products, unilateral coercive measures continued to impede efforts to enhance health systems and effective responses to health challenges, impede access to vital medical products and equipment and hinder international cooperation on health. They were a flagrant violation of the fundamental principles of international law and of the Charter of the United Nations and seriously violated the human rights of millions of people, including those living with HIV. The Islamic Republic of Iran strongly condemned such unlawful measures and stressed that States should desist and refrain from promulgating and applying them.

62. The consideration and implementation of the provisions of resolution [E/2023/L.30](#) by her country would be in accordance with its national laws, regulations, policies and priorities as well as its religious, cultural and social values.

Agenda item 18: Economic and environmental questions (*continued*)

(g) Human settlements

63. **Mr. Mlynár** (Assistant Secretary-General and Deputy Executive Director of the United Nations Human Settlements Programme (UN-Habitat)) said that the second session of the UN-Habitat Assembly, which had taken place in Nairobi in June 2023, had been attended by over 5,000 participants from 137 countries, including over 80 ministers. The session had ensured engagement with constituencies of the New Urban Agenda and had placed particular emphasis on the importance of the work of UN-Habitat in supporting countries to accelerate the Agenda's implementation. The Agenda provided a road map for achieving the Sustainable Development Goals and other global agreements, as had been acknowledged by the twin meetings convened by the Council and by the General Assembly in April 2022 to review its implementation.

64. At the session, Member States had adopted 10 substantive resolutions to steer sustainable urban development and the achievement of the Goals at the local level. Resolutions on adequate housing for all and on the transformation of informal settlements, with a focus on Goal 11.1, would contribute to providing universal guidance on meeting the increasing need for adequate housing through intergovernmental expert groups and agreements on key actions. Resolutions on urbanization and climate change resilience and on biodiversity and resilient cities encouraged the implementation of intended nationally determined commitments and national adaptation plans through municipal strategies and the advancement of the Kunming-Montreal Global Biodiversity Framework through the plan of action on subnational governments, cities and other local authorities for biodiversity (2023–2030). The resolution on the creation of a human settlements resilience framework sought to guide responses to the impact of multiple and interlocking crises, which, given the current geopolitical situation, was of extreme importance.

65. The key means of implementation for the New Urban Agenda had also been elevated. A resolution on the localization of the Sustainable Development Goals aimed to support national and local governments to accelerate the attainment of the Goals, and resolutions on people-centred smart cities and on urban planning and sustainable infrastructure would inform discussions on attainment of the Goals through inclusive applications of technology and sustainable financing. In addition, Member States had requested UN-Habitat to develop a global technical digital platform for urbanization and infrastructure development to increase the capacity of subnational and local governments to plan, invest, govern and deliver urban basic services in a socially inclusive and environmentally sustainable manner.

66. The resolutions would offer important policy guidance to countries, give strategic direction to UN-Habitat and have important implications for intergovernmental meetings within the United Nations. The outcomes of the session would contribute directly to the Sustainable Development Goal Summit, where localizing the Goals had been identified as a high impact initiative. Similarly, the role of local governments in the multilateral system would be discussed at the Summit of the Future, and housing was a key track for achieving the new social contract, which would be discussed during the World Social Summit. The UN-Habitat Assembly had decided to extend the UN-Habitat strategic plan to the period 2024–2025 and to adopt a new strategic plan

for the period 2026–2029 at the resumed second session of the Assembly in Nairobi in 2025.

67. **Mr. Rupende** (Zimbabwe) said that his delegation looked forward to the assistance of UN-Habitat in achieving Sustainable Development Goal target 11.1 on ensuring universal access to adequate, safe and affordable housing and basic services. To do so, a transformative shift in policies and investment and an approach to development centred on housing would be required, for which the resolutions adopted at the UN-Habitat Assembly would be key. With increasingly frequent and intensive natural disasters resulting from climate change, cities and infrastructure needed increased resilience to disaster risks. Green and blue infrastructure and nature-based solutions, such as urban forests, coastline stabilization and green roofs, could help to mitigate climate change and build resilience, but without bridging the global finance gap, the 2030 Agenda could not be implemented. Zimbabwe therefore called for enhanced international cooperation in the mobilization of resources, to enable cities to increase local revenue and build administrative capacity.

Agenda 12: Coordination, programme and other questions (*continued*)

(a) Reports of coordination bodies (A/78/16)

68. **The President** said that she took it that the Council wished to take note of the report of the Committee for Programme and Coordination on its sixty-third session (A/78/16).

69. *It was so decided.*

(b) Proposed programme budget for 2024 (A/78/6)

70. **The President** said that she took it that the Council wished to take note of the relevant sections of the proposed programme budget for 2024 (A/78/6).

71. *It was so decided.*

Agenda item 7: Operational activities of the United Nations for international development cooperation (*continued*) (E/2023/L.33)

Draft resolution E/2023/L.33: Progress in the implementation of General Assembly resolution 75/233 on the quadrennial comprehensive policy review of operational activities for development of the United Nations system

72. **The President** said that the draft resolution contained no programme budget implications.

73. **Mr. Rupende** (Zimbabwe) said that the adoption of draft resolution E/2023/L.33 would affirm Member

States' commitment to the quadrennial comprehensive policy review process and recognize the Council's role as the platform for ensuring accountability for and the acceleration of system-wide performance and results in relation to the 2030 Agenda and for providing guidance on the coordination of the United Nations development system. The draft resolution substantively assessed progress in the implementation of the General Assembly resolution 75/233 before the end of the 2020 quadrennial comprehensive policy review cycle and provided a solid basis for upcoming discussions on the funding of the resident coordinator system and negotiations for the next quadrennial comprehensive policy review cycle starting in 2024.

74. The operational activities of the United Nations development system needed to be aligned with the national plans, priorities and changing needs of Member States with regard to the implementation of the 2030 Agenda and the quadrennial comprehensive policy review. Zimbabwe called for continued efforts in future operational activities segments and for the organization of regular informal briefings on the implementation of the quadrennial comprehensive policy review and on the repositioning of the United Nations development system.

75. **Mr. Heartney** (United States of America) said that, although his country had joined the consensus on the draft resolution, there were certain points which had been part of intergovernmental discussions but had not been sufficiently or explicitly reflected in the text. The United States urged relevant United Nations offices and entities to take them into account when implementing the draft resolution.

76. Firstly, advocacy of human rights and other values of the United Nations should remain a core function of the resident coordinator system. Individual resident coordinators should act as standard bearers for the values enshrined in the Charter of the United Nations and the transparency, accountability and independence with which they operated should be important criteria for evaluating their performance and the effectiveness of the resident coordinator system as a whole. It was regrettable that human rights language that had previously been agreed upon had not been included in the draft resolution. Secondly, accountability lines regarding the work done and results achieved within the resident coordinator system must be clarified and strengthened through mechanisms, such as the Independent Evaluation Office. Such enhancements were critical to ensuring that Member States could exercise meaningful oversight of the system. Thirdly, the United States urged the Secretariat to ensure transparency and accountability regarding the income

and expenditure of the resident coordinator system and to provide more detail-oriented information regarding staffing and budget. Without doing so, a sustainable solution to the funding of the system could not be found.

77. **Ms. Mendoza Elguea** (Mexico) said that the role of resident coordinators and country team heads should be continually strengthened, since work on the ground was one of the most important advantages of the United Nations system. Faced with multiple crises, the resident coordinators therefore required adequate resources and tools to carry out their mandate and the flexibility to adapt the work of their country teams so as to meet the specific needs of host countries and support the implementation of the 2030 Agenda.

78. Given the upcoming quadrennial comprehensive policy review in 2024, it was regrettable that the draft resolution had not explicitly reaffirmed cross-cutting mandates, particularly those that were falling behind or needed to better address issues regarding persons with disabilities, gender, climate change, disaster risk reduction and sexual abuse and exploitation. Her delegation therefore questioned the relevance of annually renewing the draft resolution when there was little will to strengthen it or to identify areas that required further work, which would affect the quadrennial comprehensive policy review process.

The meeting rose at 5.10 p.m.