PARIS DECLARATION

1 December 2014 (amended 24 July 2018)

FAST-TRACK CITIES: ENDING THE AIDS EPIDEMIC

Cities achieving the 90–90–90 targets by 2020

90% of people living with HIV knowing their HIV status.

90%

of people who know their HIV-positive status on treatment.

90%

of people on treatment with suppressed viral loads.

PARIS DECLARATION

We stand at a defining moment in the AIDS response. Thanks to scientific breakthroughs, community activism and political commitment, we have a real opportunity to achieve the Sustainable Development Goals target of ending the AIDS epidemic by 2030. Cities have been heavily affected by the epidemic and have been at the forefront of responding to HIV. Cities are uniquely positioned to lead Fast-Track action towards achieving the 90–90–90 and other targets by 2020. Attaining these targets will put us on a trajectory towards getting to zero new HIV infections and zero AIDS-related deaths.

We recognize that ending AIDS requires a comprehensive approach that allows all people to access quality life-saving and life-enhancing prevention, treatment, care and support services for HIV, tuberculosis and viral hepatitis. Integrating these services into sexual, reproductive and mental health services is critical to achieving universal access to health care.

We can eliminate stigma and discrimination if we build our actions on scientific evidence. Understanding that successful HIV treatment and viral suppression prevents HIV transmission (Undetectable = Untransmittable) can help reduce stigma and encourage people living with HIV to initiate and adhere to HIV treatment.

Working together, cities can accelerate local actions towards ending the AIDS, tuberculosis and viral hepatitis epidemics globally by 2030. As called for by the New Urban Agenda, we will leverage our reach, infrastructure and human capacity to build a more equitable, inclusive, prosperous and sustainable future for all our residents, regardless of age, gender, sexual orientation and social and economic circumstances.

WE, THE MAYORS, COMMIT TO:

1. End the AIDS epidemic in cities by 2030

We commit to achieve the 90–90–90 and other Fast-Track targets by 2020, which will put us firmly on the path to ending the AIDS, tuberculosis and viral hepatitis epidemics by 2030. We commit to provide sustained access to quality HIV testing, treatment and prevention services, including pre-exposure prophylaxis (PrEP), in support of a comprehensive approach to ending AIDS that also addresses tuberculosis, viral hepatitis, sexually transmitted infections, mental health, substance use disorders, and comorbidities associated with aging with HIV. We will eliminate HIV-related stigma and discrimination.

2. Put people at the centre of everything we do

We will focus our efforts on all people who are vulnerable to HIV, tuberculosis, viral hepatitis and other diseases. We will help to realize and respect the human rights of all affected people and leave no one behind in our city's AIDS, tuberculosis and viral hepatitis response. We will meaningfully include people living with HIV in decision-making around policies and programmes that affect their lives. We will act locally and in

partnership with our communities to galvanize global support for healthy and resilient societies and for sustainable development.

3. Address the causes of risk, vulnerability and transmission

We will use all means, including municipal ordinances, policies and programmes, to address factors that make people vulnerable to HIV and other diseases, including laws that discriminate against or criminalize key populations. We will ensure that people affected by HIV enjoy equal participation in civil, political, social, economic and cultural life, free from prejudice, stigma, discrimination, violence or persecution. We will work closely with communities, clinical and service providers, law enforcement and other partners, and with marginalized and vulnerable populations, including slum dwellers, migrants and other displaced people, young women, sex workers, people who use drugs, gay men and other men who have sex with men and transgender people, to foster social equity.

4. Use our AIDS response for positive social transformation

Our leadership will leverage innovative social transformation to build societies that are equitable, inclusive, responsive, resilient and sustainable. We will integrate health and social programmes to improve the delivery of services, including for HIV, tuberculosis, viral hepatitis and other diseases. We will use advances in science, technology and communication to drive the social transformation agenda, including within the context of efforts to ensure equal access to education and learning.

5. Build and accelerate an appropriate response reflecting local needs

We will develop and promote services that are innovative, safe, accessible, equitable and free from stigma and discrimination. We will encourage and foster community leadership to build demand for, and to deliver, quality services that are responsive to local needs.

6. Mobilize resources for integrated public health and sustainable development

Investing in the AIDS response together with a strong commitment to public health and sustainable development is a sound investment in the future of our city that will yield increased productivity, shared prosperity and the overall well-being of our citizens. We will adapt our city plans and resources for a Fast-Track response to HIV, tuberculosis, viral hepatitis and other diseases within the context of an integrated public health approach. We will develop innovative funding strategies and mobilize additional resources to end the AIDS epidemic by 2030.

7. Unite as leaders

We commit to develop an action plan to guide our city's Fast-Track efforts, embrace the transparent use of data to hold ourselves accountable and join with a network of cities to make the Paris Declaration a reality. Working in broad consultation with everyone concerned, we will regularly measure our results and adjust our responses to be faster, smarter and more effective. We will support other cities and share our experiences, knowledge and data about what works and what can be improved. We will report annually on our progress.



by 2020

90-90-90

Treatment

500 000

New infections among adults

ZERO Discrimination

by 2030

95-95-95

Treatment

200 000

New infections among adults

ZERO

Discrimination







