

“The debates are taking place as part of the informal Civil Society Hearing being held at the UN in New York which is presided over by the President of the 65th session of the United Nations General Assembly Mr Joseph Deiss. The event provides a platform for UN member states to engage with civil society representatives and hear their views on how to further the AIDS response. This will in turn inform discussions at the High Level Meeting on AIDS which is being held in United Nations General Assembly, New York, from 8-10 June 2011.”<sup>1</sup>

The civil society meeting was held over two days. The Thursday before was a (too-small/too-hot) conference room at the Hellmsley Hotel. People began to contribute the specific language and areas to be covered for inclusion in the Declaration in June. I would like to note **two items for consideration for the Declaration**:

1. **Nutrition as a human right.** Proper nutrition for people living with HIV is critical for survival and to assure medications are not sold for food. It also may help to blunt ARV side effects. The addition of a multivitamin/mineral can further a) slow disease progression in those not yet on ARV; b) blunt ARV toxicities and c) can offset inadequate nutrition from food (but is also useful for those nutritionally replete individuals). An multivitamin/mineral can cost as little as US\$10-20 per patient per year.
2. **Universal Decriminalization.** In order to more effectively achieve the goals of Zero Infections and Zero Stigma, decriminalizing normal human behaviors is essential. Among these are decriminalizing sexual activity between same or transgender individuals (e.g., men who have sex with men), transgender individuals, carrying condoms or syringes, sex work and ending the futile, pointless, costly, failed and racist war against some drugs.

*A few highlights:*

Jeanne Gapiya-Niyonzima of Burundi underscored that many of the Global Funds fiscal troubles could be alleviated by a tiny tax on financial transactions that could raise billions. Bishop Senyonjo from Uganda spoke up for LGBT rights and acceptance; Sunil Pant, the first openly gay member of Parliament in Nepal (or pretty much anywhere in Asia at the federal level) pointed out that "inaction by our rich nation's government leaders, these lives are facing death that is caused by subtle attack on human dignity or grave humiliation or a degradation of human beings. And that is clearly crime against humanity. Let me remind the definition of crime against humanity. Crimes against humanity, as defined by the Rome Statute of the International Criminal Court Explanatory Memorandum, "are particularly odious offences in that they constitute a serious attack on human dignity or grave humiliation or a degradation of one or more human beings

People I didn't like--Ambassador Goosby, (Mark Schoofs seemed to refer to him as the 900 pound Gorilla??? well...) basically nattering on about what civil society needs to do...excuse me, we KNOW what to do. Why don't YOU say what you will do to battle for increased funding for GFATM and PEPFAR, ending abstinence-only funding, starting needle access programs, ending the costly, failed, racist drug war or ANYTHING of substance regarding what the Administration wil do, not just the tawdry, pathetic cheap trick of trying to pass the buck (while cutting funds).

Jeffrey Sachs was pretty cool--loved when he slapped down Nordstrom against his weird idea about levying fees on the poor...while also decrying vociferously the war against the poor in the US. Sharp.

Kim Nichols just ROCKS. She had the sharpest, most direct comments on IP blocking access to generics, noting the fair trade agreements that are trying to outright murder people. Rani Ravudi was eloquent in her expression of third gender rights and need for recognition, inclusion.

The efforts of young people like Ajay Kumar Uprety from Nepal were stellar--and the demand to be EQUAL CONTRIBUTORS to the decision-making process was a vital contribution. This was reflected also in the need for funds to get to the GROUND to the people actually doing the work every day. Maxensia Nakibuuka Takirambule of Uganda was brilliant, sharp, eloquent and riveting in her comments.

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<sup>1</sup> <http://eatg.org/eatg/Global-HIV-News/World-Policy/Challenges-achievements-and-aspirations-to-be-shared-as-civil-society-gears-up-for-General-Assembly-High-Level-Meeting-on-AIDS>

David Puente was a terrific moderator and actually framed questions to elicit specific recommendations for the Declaration during his moderation of the second session. Mark Schoofs moderated the first and third sessions, pretty adroitly for the most part. My only criticism, aside from his questionable allusion in referring to the USA as the 900-pound gorilla in the room which may have come off as somewhat racist since Amb. Goosby is an African American who is obese, was his stepping out of his role as moderator to press for prevention programs, with specific accolades for Pre-Exposure Prophylaxis (PREP). I have discussed elsewhere my concerns for the efficacy and safety of this intervention, but it does strike me as odd that he would press for an intervention in the midst of many Africans and others who, HIV+, watch their fellow citizen die by the millions for lack of ARV. Where the hell do people think the money is going to come from, should it even work/be advisable, to provide “truvada” to high-risk individuals in Africa? Or Nepal? Or rural India? (Recent data also suggest it doesn’t work for women.<sup>2</sup>)

Charles King raised the vital issue of the right and necessity of housing as a part and parcel of HIV care (and prevention too). This is vital and does have meaning all over the planet, even though housing in many places has a different meaning.

More pertinent to the matter at hand, there are signs of progress. Sunil reminded me that just a scant few years ago, the UN leaders were aghast at the notion of including "Sex workers" or "men who have sex with men" in the Declaration. "Marginalized populations" or some such other vague hand waving was the best they could manage...but that has changed. It's incremental--but it's there...we must nurture it, defend it, encourage the growth of such specific examples of compassion and sanity. A **Universal Decriminalization** notion is an essential next step...practical, real life and tangible expressions of those otherwise vilified notions of dignity and honor.

Perhaps the saddest part was the Member States side of the room: nearly empty. A few spoke up, with representatives from Mexico, Norway, Germany, Australia and I believe the UK (?) making some comments during the proceedings. Mostly, though, that side of the room was silent as it was largely empty.

A couple of review articles are appended. Questions and comments on this post are welcome.

<http://eatg.org/eatg/Global-HIV-News/World-Policy/Civil-Society-supports-UN-Member-States-to-set-new-AIDS-agenda>  
12/04/2011

## Civil Society supports UN Member States to set new AIDS agenda

More than 400 civil society representatives have come together at the United Nations in New York for a one-day hearing on progress made in the HIV response.

New York, 8 April 2011—More than 400 civil society representatives have come together at the United Nations in New York for a one-day hearing on progress made in the HIV response. The event is an opportunity for United Nations Member States to engage with civil society representatives and people living with HIV to highlight some of the challenges, achievements and aspirations in the AIDS response and find new ways of moving forward.

The hearing is being held as UN Member States begin consultation on the drafting of a new outcome document on HIV, to be adopted at a United Nations High Level Meeting on AIDS in June.

At the 2006 High Level Meeting on AIDS, countries set goals towards achieving universal access to HIV prevention, treatment, care and support. Although great strides have been made in the response since that time, not all countries have reached their universal access targets.

At the hearing civil society organizations highlighted the need for a strong new declaration, rejuvenated political commitment and revitalized targets to ensure countries scale-up to reach their universal access goals.

The President of the General Assembly, Joseph Deiss, who chaired the hearing said, “Civil society was the first to sound the alarm bells on AIDS in the 1980’s and their passion and resolve have not diminished today. Civil society’s voice remains as powerful as ever before and they are making every effort to support Member States in producing a strong and meaningful declaration on AIDS in June.”

The President's report from the hearing, which will be issued as an official General Assembly document, will be instrumental in informing consultations in the lead up to the June Meeting.

"It is essential for the future success of the AIDS response that civil society is fully involved," said Michel Sidibé, Executive Director of the Joint United Nations Programme on HIV/AIDS. "Civil society has a unique ability to build bridges and create links between partners. Member States have a valuable opportunity today to learn from the people who are most affected by the epidemic and find new ways of working together to make a real difference."

Civil society representatives highlighted the need for sustainability over the long term. "It is encouraging that there is more commitment now from governments and donors to programmes to prevent vertical transmission of HIV," said Ebony Johnson, North American Delegate, UNAIDS PCB NGO Delegation. "But this commitment must be extended to support people for the whole of their lifetimes to make sure that they have continued access to robust and sustainable HIV prevention, treatment and support services."

Many of the issues and concerns raised by civil society organizations at the hearing were centered on increasing access to HIV services. Major obstacles outlined included legal and policy barriers; stigma and discrimination; the need for laws to protect human rights, including the rights of people living HIV; and social justice for equity in access to services

"The legal and policy environment must be reformed to increase the availability and uptake of services by people most affected by the epidemic," said Joel Nana, Executive Director of African Men for Sexual Health and Rights. "It is essential that the right to access services is upheld regardless of sexual orientation, sexual practices or legal status."

Civil society members also stressed the importance of fostering dialogue between communities and constituencies. They highlighted that dialogue between women's groups, young people, people of different faiths and cultures, and marginalized groups is essential to reduce stigma and discrimination and remove barriers to scaling-up the response.

Another area civil society representatives focused on during the hearing was the urgent need to mobilize resources and strengthen communities through greater investment. In addition they underscored the need to form strategic partnerships between communities, governments, the private sector, trade unions and international organizations for a stronger, more comprehensive response to the epidemic.

The United Nations General Assembly High Level Meeting on AIDS will be held from the 8-10 June in New York. More information can be found online at:

[www.unaids.org/en/aboutunaids/unitednationsdeclarationsandgoals/2011highlevelmeetingonaids/](http://www.unaids.org/en/aboutunaids/unitednationsdeclarationsandgoals/2011highlevelmeetingonaids/)

UNAIDS <http://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2011/april/20110408prshearing/>

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<http://eatg.org/eatg/Global-HIV-News/World-Policy/UNAIDS-Reference-Group-on-HIV-and-Human-Rights-encourages-UN-Member-States-to-focus-on-human-rights-ahead-of-High-Level-Meeting-on-AIDS>

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## **UNAIDS Reference Group on HIV and Human Rights encourages UN Member States to focus on human rights ahead of High Level Meeting on AIDS**

*The issued statement outlines five key priorities for Member States as they negotiate the outcome document for the High Level Meeting on AIDS between now and June 2011.*

The UNAIDS Reference Group on HIV and Human Rights has issued a statement encouraging UN Member States to reaffirm the focus on human rights that has driven 30 years of progress in the global HIV response. The statement outlines five key priorities for Member States as they negotiate the outcome document for the High Level Meeting on AIDS between now and June 2011.

"Commitment to human rights is a cornerstone of the success we have seen. It unites us, drives results, and is critical for our future progress," said Jonathan Cohen, Co-Chair of the Reference Group and Director of the Law and Health Initiative of the Open Society Foundations.

The statement issued by the Reference Group asks governments to reaffirm the emphasis on a human rights based approach that obliges nations “to fulfill the human right to health and that respects, protects and fulfils the human rights of people living with, affected by and vulnerable to HIV.”

It also underlines that a central challenge of the next five years will be to make HIV treatment available to all who need it but are not receiving it. Among other steps, the Group notes that this will require maximum use of flexibilities under the TRIPS agreement to ensure the competition needed to lower the price of second-line and third-line treatments and their production in generic form.

The statement also asks Member States to reaffirm their commitment to the removal of laws, policies, practices, stigma and discrimination that block effective responses to AIDS. This includes several types of laws, policies and practices such as those that criminalize people living with HIV; those that permit violence and discrimination against women; or those that impede access to HIV services, including treatment, prevention and palliative care.

Michaela Clayton, Reference Group Co-Chair and Director of the AIDS and Rights Alliance for Southern Africa noted that the apparent flat-lining of financial resources for HIV is of significant concern and threatens the gains that have been made. “The crisis we are seeing today is not an economic crisis, but a crisis of priorities. What we need is solidarity for the right priorities and to push a standard of commitment that should be expanded and replicated for other health, development and human rights imperatives.”

The international community must renew its commitment to place people living with HIV at the centre of the AIDS response, states the group. According to the statement, people living with HIV must be empowered to live successfully with HIV, maintain their health, dignity and security and prevent the onward transmission of HIV. People living with HIV must participate meaningfully in all aspects of the response to HIV.

*The UNAIDS Reference Group on HIV and Human Rights was established in 2002 to advise UNAIDS on all matters relating to HIV and human rights. The Group speaks with an independent voice and its views and recommendations do not necessarily reflect the positions of the UNAIDS Secretariat or its Cosponsors.*

UNAIDS <http://www.unaids.org/en/resources/presscentre/featurestories/2011/april/20110412refgroup/>

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<http://eatg.org/eatg/Global-HIV-News/Pharma-Industry/Foundations-conflicts-of-interest-and-drugmakers> April 13, 2011

## Foundations, conflicts of interest and drugmakers

Major philanthropic foundations regularly make the news with their donations and initiatives aimed at improving global health. But there is an aspect to their efforts that may be overlooked - such organizations can have links with drugmakers that could constitute a conflict of interest.

Major philanthropic foundations, such as the Bill & Melinda Gates Foundation, regularly make the news with their donations and initiatives aimed at improving global health. But there is an aspect to their efforts that may be overlooked - such organizations can have links with drugmakers that could constitute a conflict of interest, according to an analysis published in PLoS Medicine.

The researchers examined the five largest US private and/or family foundations that focus considerably on global health - besides the Gates Foundation, the list included the Ford Foundation; W K Kellogg Foundation; the Rockefeller Foundation and the Robert Wood Johnson Foundation, which is a philanthropic outgrowth of a Johnson & Johnson founder. They analyzed publicly available endowment disclosures with the US Internal Revenue Service and stock holdings from the US Securities and Exchange Commission. They also examined potential conflicts of interest of individual foundation employees.

What did they find? In some instances, foundation board members sat on the boards of corporations that also may benefit from foundation grants. The opposite was also found to be true - foundation grants are sometimes associated with companies that are represented on a foundation board and are among its investments and partnerships (read the PLoS analysis [here](#)).

Take the Gates Foundation. Several members of its management committee, leadership teams, affiliates, and major funders are currently or were previously members of the boards or executive branches of several major drugmakers, including Merck and Novartis (see the commercial network of the Bill & Melinda Gates Foundation [here](#) and [here](#)).

A related example: In 2005, the Gates Foundation announced a \$107.6 million grant to the PATH Malaria Vaccine Initiative (MVI) to extend a public-private partnership between MVI and GlaxoSmithKline Biologicals to develop the drugmaker's malaria vaccine for children in Africa. Three months later, the Gates Foundation hired Tachi Yamada as executive director of its Global Health program. Until then, he chaired Glaxo R&D.

Meanwhile, there are stock holdings. The Gates Foundation holdings are invested in Berkshire Hathaway, which the researchers write has significant ownership in GlaxoSmithKline, Sanofi-Aventis Johnson & Johnson. And the Gates Foundation held stock in Merck at a time when it developed partnerships with the African Comprehensive AIDS and Malaria Partnership and the Merck Company Foundation to test Merck products.

Also, the researchers noted the Robert Wood Johnson Foundation played a leading role in promoting anti-tobacco products and maintains Smoking Cessation Leadership Centers and programs, but owns Johnson & Johnson stock, a leading manufacturer of cessation products. They also pointed out some board members have been represented on both the foundation's and the company's boards (see the 990 form [here](#)). **UPDATE:** The share of Robert Wood Johnson Foundation assets comprised of J&J stock is currently \$803 million, or just under 9 percent of total assets of \$8.8 billion, a spokesman writes us, adding that there are no current overlapping board members.

For a definition of a conflict, they relied on the World Health Organization, which notes a conflict of interest "can occur when a partner's ability to exercise judgment in one role is impaired by his or her obligations in another role or by the existence of competing interests...A conflict of interest may exist even if no unethical or improper act results from it. It can create an appearance of impropriety that can undermine confidence in the individual, his/her constituency or organization. Both actual and perceived conflicts of interest can undermine the reputation and work of the Partnership."

The authors noted that "a private foundation clearly has the legal right to spend money however it wishes within the limits of the law...yet, in an environment where private foundations influence the future direction of, for example, what programs will be introduced into a foreign community, in a manner that does not necessarily involve directorship or voting from the community- members themselves, it is reasonable to subject the decision-making processes of these entities to public debate, especially if these funds were to have otherwise been collected for public redistribution through federal taxation..."

"While private foundations adopt standard disclosure protocols for employees to mitigate potential conflicts of interests, these do not always apply to the overall endowment investments of the foundations or to board membership appointments," they conclude. "The extent and range of relationships between tax-exempt foundations and for-profit corporations suggest that transparency or grant-making recusal of employees alone may not be preventing potential conflicts of interests between global health programs and their financing."

By Ed Silverman

Pharmalot <http://www.pharmalot.com/2011/04/foundations-conflicts-of-interest-and-drugmakers/#more-31152>