
Commission on the Status of Women

Fifty-eighth session

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Agenda item 3 (c)

Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”: Gender mainstreaming, situations and programmatic matters

Women, the girl child and HIV and AIDS

The Commission on the Status of Women,

Reaffirming the Beijing Declaration and Platform for Action,¹ the outcome documents of the twenty-third special session of the General Assembly,² the Programme of Action of the International Conference on Population and Development³ and key actions for its further implementation, the 2001 Declaration of Commitment on HIV/AIDS,⁴ the 2006 Political Declaration on HIV/AIDS,⁵ the 2011 Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS,⁶ the HIV and AIDS-related goals contained in the United Nations Millennium Declaration⁷ and the Millennium Development Goals, in particular the resolve of Member States to have halted, by 2015, and begun to reverse, the spread of HIV, as well as the commitments on HIV and AIDS made at the 2005 World Summit,⁸ the High-level Plenary Meeting of the sixty-fifth session of the General Assembly on the Millennium Development Goals,⁹ the 2013 special event to follow

¹ *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.

² General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

³ *Report of the International Conference on Population and Development, Cairo, 5-13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.

⁴ General Assembly resolution S-26/2, annex.

⁵ General Assembly resolution 60/262, annex.

⁶ General Assembly resolution 65/277, annex.

⁷ See General Assembly resolution 55/2.

⁸ See General Assembly resolution 60/1.

⁹ See General Assembly resolution 65/1.



up efforts made towards achieving the Millennium Development Goals¹⁰ and the United Nations Conference on Sustainable Development,¹¹

Welcoming the leadership and commitment shown in every aspect of the HIV and AIDS response by Governments, people living with HIV, political and community leaders, parliaments, regional and subregional organizations, communities, families, faith-based organizations, scientists, health professionals, donors, the philanthropic community, workforces, the business sector, civil society and the media, including the African Union Roadmap on Shared Responsibility and Global Solidarity for AIDS, Tuberculosis and Malaria Response in Africa,

Reaffirming that prevention, treatment, care and support for people living with and affected by HIV and AIDS are mutually reinforcing elements of an effective response that must be integrated into a comprehensive approach to end the epidemic, and recognizing the need to ensure the respect, promotion, protection and fulfilment of human rights in the context of HIV and AIDS,

Reaffirming also the need to eradicate poverty, which can contribute to the vulnerability of women and girls to HIV infection and aggravate the impact of the epidemic by depleting resources and incomes, thereby contributing to inadequate food and nutrition, which leads to poor treatment outcomes, and to impoverishment owing to loss of income and increased health expenditures, and endangers the survival of present and future generations,

Noting with concern that violence against women and girls, including harmful practices, is among the contributory factors to the spread of HIV, and noting with appreciation the efforts of the UN system to end violence against women and girls, including the campaign “UNiTE to End Violence against Women”,

Recognizing that populations destabilized by armed conflict, humanitarian emergencies and natural disasters, including refugees, internally displaced persons and, in particular, women and children, are at increased risk of HIV infection,

Concerned that women and girls with disabilities face increased vulnerability to HIV as a result of, inter alia, legal, social and economic inequalities, sexual and gender-based violence, discrimination and violations of their rights,

Concerned also that the global HIV epidemic disproportionately affects women and girls and reinforces gender inequalities, that the majority of new HIV infections in young people aged 15 to 19 years occur among girls, and also concerned that women and girls bear the disproportionate burden of caring for and supporting people living with and affected by HIV, and that they become more vulnerable to poverty as a result of the epidemic,

Concerned that women and girls are physiologically more vulnerable to HIV, especially at an earlier age, than men and boys, and that this is increased by violence against women, girls and adolescents, sexual exploitation including commercial sexual exploitation, premature and coerced sexual relations, harmful practices, such as child, early and force marriage, female genital mutilation as well as an imbalance in the power dynamic between women and men, and unequal legal, economic and social status, including poverty,

¹⁰ See General Assembly resolution 68/13.

¹¹ See General Assembly resolution 66/288.

Deeply concerned that there are women, including young women, living with HIV who would like to space or limit pregnancy but are currently not using an effective method of contraception owing to limited access to voluntary family planning services and a broad range of contraceptive methods,

Concerned also that HIV infection rates are higher among young people, especially young and married women, who do not finish primary school as among those who do,

Concerned further that women and adolescent girls have unequal access to health resources, including sexual and reproductive health-care services, for the prevention of HIV infection and treatment of and care and support for people living with and affected by HIV and AIDS,

Noting with concern that regulations, policies and practices, including those that limit legitimate trade of generic medicines, may seriously limit access to affordable HIV treatment and other pharmaceutical products in low- and middle-income countries, and recognizing that improvements can be made, inter alia through national legislation, regulatory policy and supply chain management, and noting that reductions in barriers to affordable products could be explored in order to expand access to affordable and good quality HIV prevention products, diagnostics, medicine and treatment commodities for HIV, including opportunistic infections and co-infections,

Stressing that the HIV epidemic, with its devastating scale and impact on women and girls, is often aggravated by poverty, which requires urgent action across all internationally agreed development goals, including the Millennium Development Goals and the post-2015 development agenda in all fields and at all levels,

Stressing also that gender equality and the political, social and economic empowerment of women and girls are fundamental elements in the reduction of their vulnerability to HIV, and that increased access to information, prevention programmes and treatment and elimination of HIV-related stigma, discrimination and violence are all essential to efforts towards ending HIV and AIDS,

Noting with concern that, despite the significant progress made in addressing the HIV epidemic, many countries have been unable to fulfil their pledges to achieve their commitments made in the 2001 and 2006 Declarations on HIV/AIDS, including those related to women and girls, set to be achieved by 2010, and emphasizing in this regard the need to continue efforts to achieve these commitments and to accelerate progress towards meeting the 2015 goals outlined in the 2011 Political Declaration on HIV/AIDS,

1. *Reaffirms* the need for Governments, supported by the relevant actors, including civil society and the private sector, to intensify national efforts and international cooperation in the implementation of the commitments contained in the 2001 Declaration of Commitment on HIV/AIDS,⁴ the 2006 Political Declaration on HIV/AIDS,⁵ the 2011 Political Declaration on HIV/AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS,⁶ the Beijing Platform for Action¹² and the Programme

¹² *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex II.

of Action of the International Conference on Population and Development,³ towards achieving the vision of an AIDS-free world;

2. *Also reaffirms* the commitment to achieve universal access to comprehensive HIV prevention programmes, treatment, care and support, and the resolve to have halted, by 2015, and begun to reverse, the spread of HIV, and stresses the urgency of significantly scaling up efforts towards meeting these goals, and in this regard looks forward to the review of the progress towards attaining the Millennium Development Goals and to the elaboration of the post-2015 development framework;

3. *Further reaffirms* the commitment as set out in the Programme of Action of the International Conference on Population and Development and in Millennium Development Goal 5, to achieve universal access to reproductive health by 2015, which encompasses integrating this goal into strategies to attain internationally agreed development goals, including those contained in the United Nations Millennium Declaration⁷ aimed at reducing maternal mortality, improving maternal health, reducing child mortality, promoting gender equality and empowering women, combating HIV and AIDS and eradicating extreme poverty and hunger;

4. *Stresses* the need to significantly increase and coordinate political and financial commitment to address gender equality and equity in national HIV and AIDS responses and to address HIV in the national gender response by responding to the specific needs of women and girls, including those living with and affected by HIV, and urges Governments to effectively reflect in their national policies, strategies and budgets the gender dimension of the epidemic, in line with the time-bound goals of the 2011 Political Declaration on HIV/AIDS, as well as the goals of the Beijing Platform for Action and the Programme of Action of the International Conference on Population and Development and key actions for their further implementation;

5. *Urges* Governments to take all necessary measures to create an enabling environment for the empowerment of women and girls, and to protect and promote the full enjoyment of all human rights and fundamental freedoms in order to enable them to protect themselves from HIV infection, and to mitigate the impact of the epidemic, including through access to education, health, including sexual and reproductive health, social protection programmes, civil registration and other nationality documentation and the right to property and inheritance, as well as to strengthen the economic independence of women, including through employment and income generation policies and strategies, decent work, political participation and decision-making at all levels,

6. *Emphasises* the need for Governments and other relevant stakeholders to ensure that national HIV strategies and programmes comprehensively target women and girls in vulnerable groups and in populations that epidemiological evidence shows are at higher risk of HIV infection, and to take measures to ensure that HIV services are accessible, nondiscriminatory and affordable to them;

7. *Urges* Governments and other relevant stakeholders to address the challenges faced by older women in accessing HIV prevention, treatment, care and support, as well as in caring for people living with or affected by HIV and AIDS, including orphaned children in vulnerable situations;

8. *Encourages* Governments and other relevant stakeholders to scale up efforts to address the vulnerability of women and girls to HIV in situations of armed conflict and post-conflict, humanitarian emergencies and natural disasters, including prevention of sexual and gender-based violence and continuous provision of anti-retroviral treatment;

9. *Also urges* Governments and other relevant stakeholders to address the increased vulnerability to HIV faced by women and girls with disabilities, ensuring their equal access to prevention, treatment, care and support, as an integral part of their HIV and AIDS response;

10. *Emphasizes* the need to strengthen policy and programme linkages and coordination between HIV and AIDS and sexual and reproductive health, and their inclusion in national development plans, and the need to design gender-based policies aimed at social and economic equality including poverty reduction strategies and sector-wide approaches, where they exist, as a necessary strategy for fighting the HIV epidemic and mitigating its impact on the population, which could result in more relevant and cost-effective interventions with greater impact;

11. *Urges* Governments to strengthen initiatives that would increase the capacities of women and adolescent girls to protect themselves from HIV infection, principally through the provision of health-care services, including for sexual and reproductive health, and that integrate HIV prevention, treatment, care and support and include voluntary counselling and testing, including through effective HIV prevention education that takes into account the epidemiological and national context, while also recognising the importance of reducing risk-taking behaviour, and encouraging responsible sexual behaviour, including abstinence and fidelity, correct and consistent use of condoms and equality between men and women within a culturally and gender-sensitive framework;

12. *Urges* Governments and other relevant stakeholders to address the situation faced by women and girls who provide care and/or economic support for people living with or affected by HIV and AIDS, who are often forced to drop out of school or employment, by increasing the provision of resources, support and facilities to the survivors and caregivers, in particular children, especially in women and child-headed households, and older persons, as well as to facilitate the balanced sharing of the provision of care by both men and women;

13. *Urges* Governments to ensure that the rights of children in child-headed households, many of whom have been orphaned as a result of the HIV/AIDS epidemic, are respected and that the heads of such households have full enjoyment of all the rights of the child, and to further ensure that children in child-headed households, particularly girls, receive the support they need to ensure their continued attendance in school;

14. *Urges* Governments and other relevant stakeholders to address the situation faced by children and young persons, especially girls, who may be forced into child labour, including the worst forms of child labour, as a result of death or illness of family members or caregivers, and to protect these children and young persons from violence, including gender-based violence, sexual abuse, sexual exploitation, including commercial sexual exploitation, trafficking and labour exploitation;

15. *Take measures* to integrate, inter alia, family and community-based approaches in policies and programmes aimed at providing prevention, treatment, care and support to women and girls living with or affected by HIV and AIDS;

16. *Urges* Governments to ensure, in the context of prevention programmes for HIV and other sexually transmitted infections, accessible and affordable procurement of safe and effective prevention commodities, including male and female condoms, post-exposure prophylaxis and, where applicable, pre-exposure prophylaxis, to ensure that their supply is adequate and secure, and to promote ongoing research, including that for safe and effective microbicides;

17. Commit to remove before 2015, where feasible, obstacles that limit the capacity of low- and middle-income countries to provide affordable and effective HIV prevention and treatment products, diagnostics, medicines and commodities and other pharmaceutical products, as well as treatment for opportunistic infections and co-infections, and to reduce costs associated with life-long chronic care, including by amending national laws and regulations, as deemed appropriate by respective Governments, so as to optimize:

(a) The use, to the full, of existing flexibilities under the Agreement on Trade-Related Aspects of Intellectual Property Rights specifically geared to promoting access to and trade in medicines, and, while recognizing the importance of the intellectual property rights regime in contributing to a more effective AIDS response, ensure that intellectual property rights provisions in trade agreements do not undermine these existing flexibilities, as confirmed in the Doha Declaration on the TRIPS Agreement and Public Health¹³, and call for early acceptance of the amendment to article 31 of the TRIPS Agreement adopted by the General Council of the World Trade Organization in its decision of 6 December 2005¹⁴;

(b) Addressing barriers, regulations, policies and practices that prevent access to affordable HIV treatment by promoting generic competition in order to help to reduce costs associated with life-long chronic care and by encouraging all States to apply measures and procedures for enforcing intellectual property rights in such a manner as to avoid creating barriers to the legitimate trade in medicines, and to provide for safeguards against the abuse of such measures and procedures;

(c) Encouraging the voluntary use, where appropriate, of new mechanisms such as partnerships, tiered pricing, open-source sharing of patents and patent pools benefiting all developing countries, including through entities such as the Medicines Patent Pool, to help to reduce treatment costs and encourage development of new HIV treatment formulations, including HIV medicines and point-of-care diagnostics, in particular for children;

18. *Urges* Governments to strengthen, implement and enforce legal, policy, administrative and other measures for preventing, eliminating and addressing the causes and consequences of all forms of violence against women and girls, including harmful practices, such as female genital mutilation, child, early and forced marriage, domestic violence, violence at work, verbal and physical abuse, rape,

¹³ World Trade Organization, document WT/MIN(01)/DEC/2. Available from <http://docsonline.wto.org>.

¹⁴ See World Trade Organization, document WT/L/641. Available from <http://docsonline.wto.org>.

including marital rape, and other forms of sexual violence and coerced sexual activity, battering and trafficking in women and girls, and to ensure that linkages between violence against women and HIV are addressed as an integral part of the national HIV and AIDS response;

19. *Also urges* Governments, where they have not yet done so, to institute and ensure the transparent and effective enforcement of laws and access to redress mechanisms to protect women and girls from child, early and forced marriage and marital rape;

20. *Further urges* Governments to prioritize and expand access to treatment for all people, in all settings, in a progressive and sustainable manner, including the prevention and treatment of opportunistic infections and co-infections and other HIV-related conditions and the effective use of and adherence to anti-retroviral medication, including through access to clinical and laboratory testing and post-exposure prophylaxis, with the full protection of their human rights, including their sexual and reproductive health and reproductive rights, in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Declaration and Platform for Action and the outcome documents of their review conferences;

21. *Urges* Governments to promote access to affordable, high-quality, safe and effective drugs and related pharmaceutical commodities and supplies for women and girls for HIV, sexually transmitted infections and maternal health and family planning, and to collect data on treatment disaggregated by age, sex, disability, geographical location, marital status and continuity of care;

22. *Requests* Governments to promote and provide equal and equitable access for all persons without discrimination, throughout their life cycle, to social services related to health care, safe drinking water and safe sanitation, nutrition, food security, education programmes, including HIV prevention programmes, and social protection schemes, especially for women and girls living with or affected by HIV and AIDS;

23. *Emphasizes* the negative impact of HIV-related stigma, especially for women and girls, in seeking and accessing HIV and AIDS programmes, and urges Governments to intensify efforts to eliminate all forms of stigma and discrimination against women and girls in relation to HIV and AIDS, including through strengthening national policies and legislation and challenging gender stereotypes, stigmatization, discriminatory attitudes and gender inequalities, and to encourage the active involvement of men and boys in this regard, and emphasizes the need to develop and implement policies and programmes designed to eliminate HIV-related stigma and discrimination, so as to ensure the dignity, rights and privacy of people living with and affected by HIV and AIDS;

24. *Stresses* that women and girls should be empowered to protect themselves against violence and that, in this regard, women have the right to exercise control over and decide freely and responsibly on matters related to their sexuality including their sexual and reproductive health, free of coercion, discrimination and violence;

25. *Calls upon* all Governments, the international donor community and relevant entities of the United Nations system to prioritize programmes addressing the specific needs of women and girls, particularly those most vulnerable and at risk,

in the HIV response and to take measures to ensure that resources commensurate with the impact of HIV and AIDS on women and girls are made available, in particular in funding provided to national HIV and AIDS programmes designed to promote and protect the human rights of women and girls in the context of the epidemic, to promote economic opportunities for women, including to diminish their financial vulnerability and their risk of exposure to HIV, and to achieve the gender-related goals set out, inter alia, in the Declaration of Commitment on HIV/AIDS and the 2006 and 2011 Political Declarations on HIV/AIDS;

26. *Urges* Governments, the donor community and relevant entities of the United Nations system to support the development of capacities of women's organizations for HIV and AIDS programme development and implementation, and to streamline funding procedures and requirements that will facilitate resource flows to community-level services;

27. *Calls upon* Governments to integrate HIV prevention, treatment, care and support, including confidential voluntary counselling and testing and elimination of mother-to-child/vertical transmission, with other primary health-care services, including those for tuberculosis and sexual and reproductive health-care services such as family planning, maternal health, prevention and treatment of sexually transmitted infections, including those causing infertility and cervical cancer, and encourages Governments to strive towards universal health coverage, meeting the needs of women and girls living with HIV;

28. *Encourages* the Joint United Nations Programme on HIV/AIDS and its co-sponsors, bilateral and multilateral donors and intergovernmental and nongovernmental organizations to intensify their support to empower women and girls, and engage men and boys, and prevent HIV infection through measures to ensure promotion and effective implementation of combination prevention and to give urgent and priority attention to the situation of women and girls;

29. *Requests* the Secretariat and co-sponsors of the Joint United Nations Programme on HIV/AIDS and other United Nations agencies, funds and programmes responding to the HIV and AIDS epidemic, as well as the Global Fund to Fight AIDS, Tuberculosis and Malaria and other international organizations, to mainstream a gender and human rights perspective throughout their HIV- and AIDS-related operations, including policy, planning, monitoring and evaluation, that includes sex- and age-disaggregated indicators, and to ensure that programmes and policies are developed and adequately resourced to address the specific needs of women and girls;

30. *Encourages* the United Nations to continue to support national monitoring and evaluation mechanisms in the context of the "three ones" principles, to enable the production and dissemination of comprehensive and timely information on the gender dimension of the epidemic, including through the collection of data disaggregated by sex, age, disability, marital status and geographical location, and to raise awareness about the need to address the critical intersection between gender inequality and HIV and AIDS, and encourages Member States to report on the relevant indicators for the global AIDS response progress reporting system;

31. *Stresses* the importance of Governments, the Joint United Nations Programme on HIV/AIDS and other United Nations specialized agencies, funds and programmes developing and implementing strategies to improve infant HIV

diagnosis, including through access to diagnostics at point of care, significantly increasing and improving access to treatment for children and adolescents living with HIV, including access to prophylaxis and treatments for opportunistic infections, and promoting a smooth transition from paediatric to adult treatment and related support and services, while taking into account the need to put in place programmes focused on delivering services to HIV-negative children born to women living with HIV, as they are still at high risk of morbidity and mortality;

32. *Encourages* Member States to work in partnership with the Global Coalition on Women and AIDS, convened by the Joint United Nations Programme on HIV/AIDS and its partners, so as to mobilize and support a wide range of national actors, including women's groups and networks of women living with HIV, in order to ensure that national HIV and AIDS programmes are better able to respond to the specific needs and vulnerabilities of women, girls and adolescents;

33. *Welcomes* the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive and takes note of the Secretary-General's Every Woman, Every Child initiative, as well as national, regional and international initiatives contributing to reduction of the number of maternal, newborn and under-five child deaths, and urges Governments to rapidly scale up access to HIV prevention and treatment programmes integrated with family planning and maternal and child health programmes designed to eliminate mother-to-child/vertical transmission of HIV and reduce HIV-related maternal mortality by 50 per cent by 2015, to encourage men to participate with women in such programmes, address barriers faced by women and girls in accessing such programmes and provide sustained treatment and care for the mother after pregnancy, including care and support for the family;

34. *Expresses concern* that the majority of new HIV infections in women occur in marriage or long-term relationships and encourages the design and implementation of programmes, including awareness-raising programmes, to encourage and enable men, including young men, to adopt safe, non-coercive and responsible sexual and reproductive behaviour and to use effective methods to prevent the transmission of HIV and other sexually transmitted infections;

35. *Stresses* the importance of Governments in ensuring that young men and women have access to information and education, including peer education and youth-specific HIV prevention education, including comprehensive evidence-based education for human sexuality, based on full and accurate information, for all adolescents and youth, in a manner consistent with their evolving capacities, with the appropriate direction and guidance from parents and legal guardians, with the involvement of children, adolescents, youth, communities, educators and health-care providers that builds informed decision making, communication and risk reduction skills, develops self esteem and promotes respectful relationships: as well as services necessary for behaviour change so as to enable them to develop the life skills required to reduce their vulnerability to HIV infections and reproductive ill health.

36. *Urges* Governments, employers' and workers' organizations and other relevant stakeholders, as appropriate, to take measures in and through workplaces to prevent and reduce the transmission of HIV and alleviate its impact by ensuring gender equality and the empowerment of women, including ensuring actions to prevent and prohibit violence, discrimination and harassment in the workplace, in line with International Labour Organization Recommendation No. 200 concerning

HIV and AIDS and the world of work, and facilitate provision of current information on HIV and AIDS through employment programmes and services and in vocational training, especially for youth;

37. *Encourages* Governments and all other relevant actors, in the context of prevention programmes for HIV and other sexually transmitted infections, to ensure accessible and affordable procurement of safe and effective prevention commodities and to promote funding, both domestically and externally, and to support and expedite action-oriented research leading to affordable, safe and effective methods controlled by women to prevent HIV and other sexually transmitted infections, including the use of female condoms, microbicides and vaccines, and research on strategies that empower women to protect themselves from sexually transmitted infections, including HIV, and methods of care, support and treatment for women of various ages, and to promote their involvement in all aspects of such research as well as to ensure that gender-equality implications are a key component of research, implementation and evaluation of new prevention methods and that new prevention methods are part of a comprehensive approach to HIV prevention that protects and supports the rights of women and girls;

38. *Urges* Governments to continue to promote the participation and the significant contribution of people living with HIV, young people and civil society actors, in particular women's organizations, in addressing the problem of HIV and AIDS in all its aspects, including promoting a gender perspective, and to promote their full involvement and participation and leadership in the design, planning, implementation and evaluation of HIV and AIDS programmes, as well as in creating an enabling environment for combating stigmatization and discrimination;

39. *Welcomes* the financial contributions made to date to the Global Fund to Fight AIDS, Tuberculosis and Malaria, which is a pivotal mechanism for achieving universal access to prevention, treatment, care and support by 2015, and urges further contributions to sustain the Global Fund, and calls upon all countries to encourage the private sector to contribute to the Fund;

40. *Stresses* the importance of building up national competence and capacity to provide an assessment of the drivers and impact of the epidemic, which should be used in planning for comprehensive HIV and AIDS prevention, treatment, care and support and for mitigating the impact of HIV and AIDS;

41. *Calls upon* Governments, the international community, relevant agencies, funds and programmes of the United Nations system and intergovernmental and non-governmental organizations to intensify their support of national efforts against HIV/AIDS, particularly with respect to women and young girls, including efforts to provide affordable anti-retroviral drugs, diagnostics and drugs to treat tuberculosis and other opportunistic infections, strengthening of health systems and training of medical personnel, including reliable distribution and delivery systems, implementation of a strong generic drug policy, bulk purchasing, negotiating with pharmaceutical companies to reduce prices, appropriate financing systems, and encouraging local manufacturing and import practices consistent with national laws and international agreements, particularly in the worst-hit regions in Africa and where the epidemic is severely setting back national development gains;

42. *Urges* the international community to complement and supplement, through increased international development assistance, efforts of the developing countries that commit increased national funds to fighting the HIV and AIDS

epidemic, and especially to address the needs of women and girls around the world, in particular in those countries most affected by the HIV and AIDS epidemic, particularly in Africa, especially sub-Saharan Africa, and in the Caribbean and in regions and countries where HIV incidence is increasing;

43. *Recommends* that a bold vision for addressing the HIV epidemic, including the situation of women and girls living with and affected by HIV and AIDS, be given due consideration in the elaboration of the post-2015 development agenda;

44. *Requests* the Secretary-General to submit a report to the Commission on the Status of Women at its sixtieth session on the implementation of the present resolution, with an emphasis on accelerated actions taken in regard to women, the girl child and HIV and AIDS, in accordance with the Beijing Declaration and Platform for Action and the Programme of Action of the International Conference on Population and Development, and the Political Declarations on HIV and AIDS, using information provided by Member States, the organizations and bodies of the United Nations system and non-governmental organizations, with a view to assessing the impact of the present resolution on the well-being of women and the girl child.