FAST-TRACK CITIES: ENDING THE AIDS EPIDEMIC

Cities Achieving 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 to shared goals, we have a real opportunity to end the AIDS epidemic globally by 2030. Cities have long been at the forefront of responding to AIDS. Cities now are uniquely positioned to lead Fast-Track action towards 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; and 90% of people on treatment with suppressed viral loads.

We can stop all new HIV infections and avert AIDS-related deaths, including deaths caused by tuberculosis. We can end stigma and discrimination. Every person in our cities must have access to life-saving HIV and tuberculosis prevention, treatment, care and support services.

Working together, cities can take local actions for global impact. Leveraging our reach, infrastructure and human capacity, cities will build a more equitable, inclusive, prosperous and sustainable future for all of our residents—regardless of gender, age, social and economic status or sexual orientation.

WE, THE MAYORS, COMMIT TO:

1. End the AIDS epidemic in cities by 2030

We commit to achieve the 90-90-90 HIV treatment targets by 2020, which will rapidly reduce new HIV infections and AIDS-related deaths—including from tuberculosis—and put us on the Fast-Track to ending AIDS by 2030. We commit to provide sustained access to testing, treatment, and prevention services. We will end stigma and discrimination.

2. Put people at the centre of everything we do

We will focus, especially on people who are vulnerable and marginalized. We will respect human rights and leave no one behind. 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 and other tools to address factors that make people vulnerable to HIV, and other diseases. We will work closely with communities, service providers, law enforcement and other partners, and with marginalized and vulnerable populations including slum dwellers, displaced people, young women, sex workers, people who use drugs, migrants, men who have sex with men and transgender people to build and foster tolerance.
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 HIV, tuberculosis and other diseases. We will use advances in science, technology and communication to drive this agenda.

5. Build and accelerate an appropriate response to local needs

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

6. Mobilize resources for integrated public health and development

Investing in the AIDS response together, with a strong commitment to public health, is a sound investment in the future of our cities that fosters productivity, shared prosperity and well-being. We will adapt our city plans and resources for a Fast-Tracked response. We will develop innovative funding and mobilize additional resources and strategies to end the AIDS epidemic by 2030.

7. Unite as leaders

We commit to develop an action plan and join with a network of cities to make this 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.

City: District of Columbia

Signature: [Signature]

Date: 12/01/2015

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Fast-Track Targets

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