

## **Outcomes of the 81st Plenary Meeting of the United Nations General Assembly on 24 April 2026**

### **Modalities Resolution for the 2026 High-Level Meeting on HIV/AIDS**

#### **Context and Access**

The 81st plenary meeting of the United Nations General Assembly, held on Friday, 24 April 2026, addressed the modalities resolution for the High-Level Meeting (HLM) on HIV/AIDS, which is expected to take place on 22–23 June 2026. While such resolutions may appear procedural at first glance, they are politically significant: they determine who participates, which issues are made visible (or rendered invisible), and how the process leading to the political declaration is structured. I was able to follow parts of the meeting on screen. Photos of the outcomes were shared via the working group preparing the virtual Multi-Stakeholder Hearing scheduled for 14 May, to which we have been invited by UNAIDS as members.

The discussions during this session made it clear that the 2026 HLM will take place in an increasingly politicized environment. Developments observed over recent years are becoming entrenched: in particular, the role of civil society and the recognition of so-called key populations were at the center of contentious debates. This is deeply concerning, as both are fundamental pillars of an effective global HIV response.

#### **Content of the Modalities Resolution**

The resolution discussed and adopted in the plenary defines the organizational framework of the HLM. Its key elements include:

- The structure of the meeting, including plenary sessions and the multi-stakeholder panels on 14 May, which were co-prepared with the Action against AIDS Germany network
- Participation modalities, particularly for Member States, UN organizations, and non-state actors
- Accreditation procedures for NGOs and civil society organizations
- Guidelines for the preparatory process, especially regarding the political declaration

Although the resolution does not establish substantive political commitments, it significantly shapes the scope for action and the inclusiveness of the entire process.

#### **Key Points of Contention and Voting**

In addition to the vote on the resolution as a whole, several amendment proposals, primarily introduced or supported by the Russian Federation, were at the center of the debate.

#### **Language on “Key Populations”**

The amendments proposed by Russia aimed to remove the term “key populations” or replace it with more general formulations such as “vulnerable groups” or “nationally defined populations.” Attempts like these are not new; Russia has repeatedly pushed for such changes in recent years, including at UNAIDS Programme Coordinating Board meetings and previous High-Level Meetings.

Removing this term would have far-reaching consequences for the global HIV response:

Die Streichung dieses Begriffes hätte für die weltweite HIV-Arbeit weitreichende Konsequenzen:

- Targeted prevention measures would be weakened
- Progress would become harder to measure

Already scarce resources could be used less effectively or redirected toward groups that are not at elevated risk. This is already happening in Russia, where programmes for people who use drugs have been cut and replaced with other ineffective measures (e.g., repeated HIV testing of pregnant women).

From a community perspective, there is a real risk that the most affected groups would face further marginalization. This, too, is already happening in the Russian Federation, for example through the criminalization and persecution of marginalized communities (people who use drugs, gay men, and other LGBTIQ communities), as well as the dismantling of the structures these communities have built for themselves.

Compared to other countries in the WHO European Region, Russia, home to an estimated 1.1 to 1.2 million people living with HIV, **is among the most heavily affected countries in Europe**. Accordingly, infection rates in Russia are among the highest in the region. Figures like these clearly demonstrate how problematic it is when affected communities are not treated as partners in prevention, but rather as enemies of the state and as alien to “Russian culture.” The fact that Russia appears eager to internationalize this “model” of HIV response is deeply alarming.



**Figure 1:** Russia made significant headway, as reflected in the voting results: 33 countries supported the proposal to remove references to key populations, 29 abstained, and 77 voted against.

## Participation of NGOs and Civil Society

A second major point of contention in the discussions was the role of civil society in the HLM process. The proposed amendments included:

- Stricter or politically controlled accreditation procedures for NGOs at the UN HLM
- Greater influence of Member States over the selection of participating organizations, with the aim of establishing a veto against “undesirable” NGOs
- Restricting participation to “appropriate” or “relevant” organizations, without clear definitions

This is not the first time that individual countries have sought to exclude civil society voices from United Nations processes. Russia, in particular, has advocated for a veto over NGO participation, in order to avoid what it describes as “provocations” by marginalized communities. What is often described as “shrinking civic space” is becoming visible at the highest political levels. The global HIV response has historically been closely tied to civil society engagement. Evidence clearly shows that HIV programmes are most effective when they are inclusive, evidence-based, and community-led.

Restrictions would:

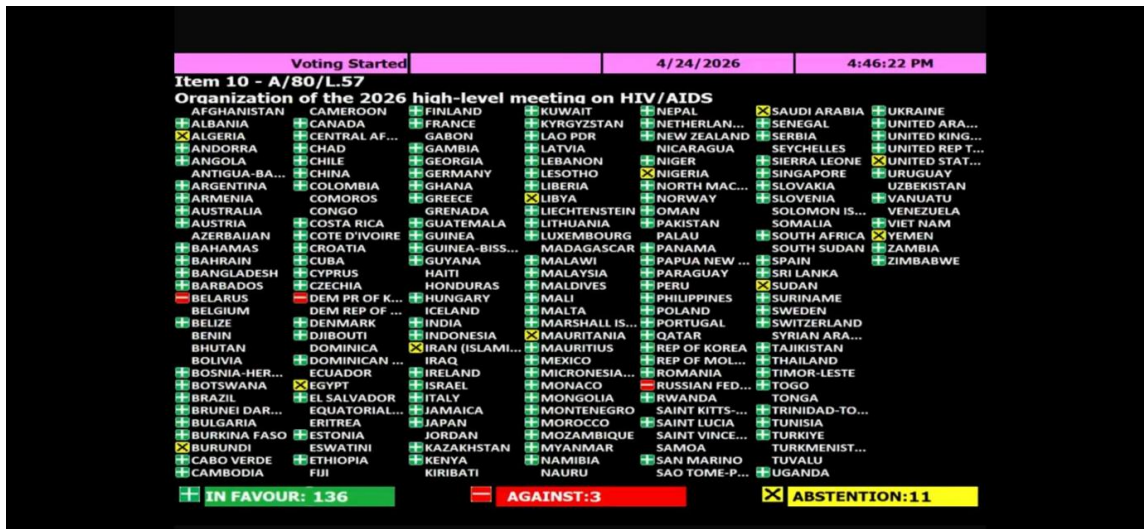
- Reduce the diversity and independence of voices
- Weaken transparency and accountability
- Set a precedent for other global health processes

In the vote on civil society and NGO participation, 28 countries supported the Russian proposal, 77 voted against, and 32 abstained. Russia therefore did not succeed on this point either. Yet, since the motivations of abstaining countries are difficult to interpret, potential shifts along existing political fault lines could pose risks in the future. A broader trend is also evident here: the space for civil society engagement is increasingly being constrained.

Behind Russia’s proposed amendments lies a fundamental conflict between a human rights-based, inclusive approach and a perspective more strongly oriented toward national sovereignty. The latter emphasizes:

- National contexts and decision-making autonomy
- Reluctance toward global norms on rights and inclusion (framed as “Russian values,” “African values,” etc.)

Here, too, divisions follow broader political and cultural fault lines. Some states resist what they perceive as external imposition by UNAIDS or the World Health Organization in defining which groups exist within their societies or should be recognized as vulnerable. Instead, efforts are made to deny the existence of certain communities, exclude them as “non-belonging,” or portray them as a cultural “import” from a supposedly morally degraded West.



**Figure 2:** Following the decisions on the (unsuccessful) amendment proposals by Russia, the General Assembly proceeded to vote on the modalities resolution as a whole: 136 countries voted in favor, 11 abstained (including the United States), and only three voted against: Russia, Belarus, and Nicaragua.

### Increasing Politicization of the HIV Agenda

The debate reveals a clear shift: what was once considered evidence-based is increasingly becoming politicized. Terms such as “key populations” and the role of civil society are no longer a matter of consensus, but are now the subject of ideological contestation. The controversy surrounding NGO participation extends far beyond the HIV field. It has the potential to shape future UN High-Level Meetings, expand state control over global processes, and fundamentally call into question existing multi-stakeholder formats.

For the upcoming UN High-Level Meeting on HIV, it is already evident at the modalities stage how early and how sharply these conflicts are emerging. Core issues related to human rights, inclusion, and participation are likely to dominate the negotiations on the political declaration to be adopted in June. Complex negotiations can be expected, along with further attempts to dilute existing language on gender, LGBTIQ, and key populations.

The 81st plenary meeting of the United Nations General Assembly therefore sends a clear early warning signal for 2026: while the adopted modalities resolution remains formally inclusive and multi-stakeholder-oriented, the growing pressure on key concepts and participation mechanisms reveals just how fragile these principles have become.

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