

A74/12 - Provisional agenda item 15

The US should be a primary supporter and influencer of the renewed health workforce mandate mentioned at 22(a), including a possible new 2022-2030 strategy. US government commitment to a robust and sustainable global health workforce is paramount to ending the HIV/AIDS pandemic by 2030, as the global health workforce shortage is the primary barrier to efficient and effective HIV service delivery. The WHO notes the lack of investment on the part of G20 countries in this area, and the uncertainty of changing political commitments in countries - the US could play a pivotal role in coordinating and convening this group to ensure sustained commitments that complement national health workforce plans and goals, utilizing the national workforce accounts mechanism.

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While we commend the WHO for inclusion of statistics demonstrating awareness of the detrimental effects of COVID-19 programming on HIV service delivery, we also encourage the US to play a role in negotiating further global investment in HIV programming to mitigate these effects. The pause in prevention services due to COVID-19-related lockdowns and/or social distancing measures halted, and in some cases worsened, much of the progress made in these areas, putting us at a distinct disadvantage of reaching the goal of ending the HIV/AIDS pandemic by 2030. WHO-coordinated efforts could greatly increase the probability of getting these programs back on track and returning to a pre-COVID-19 status.