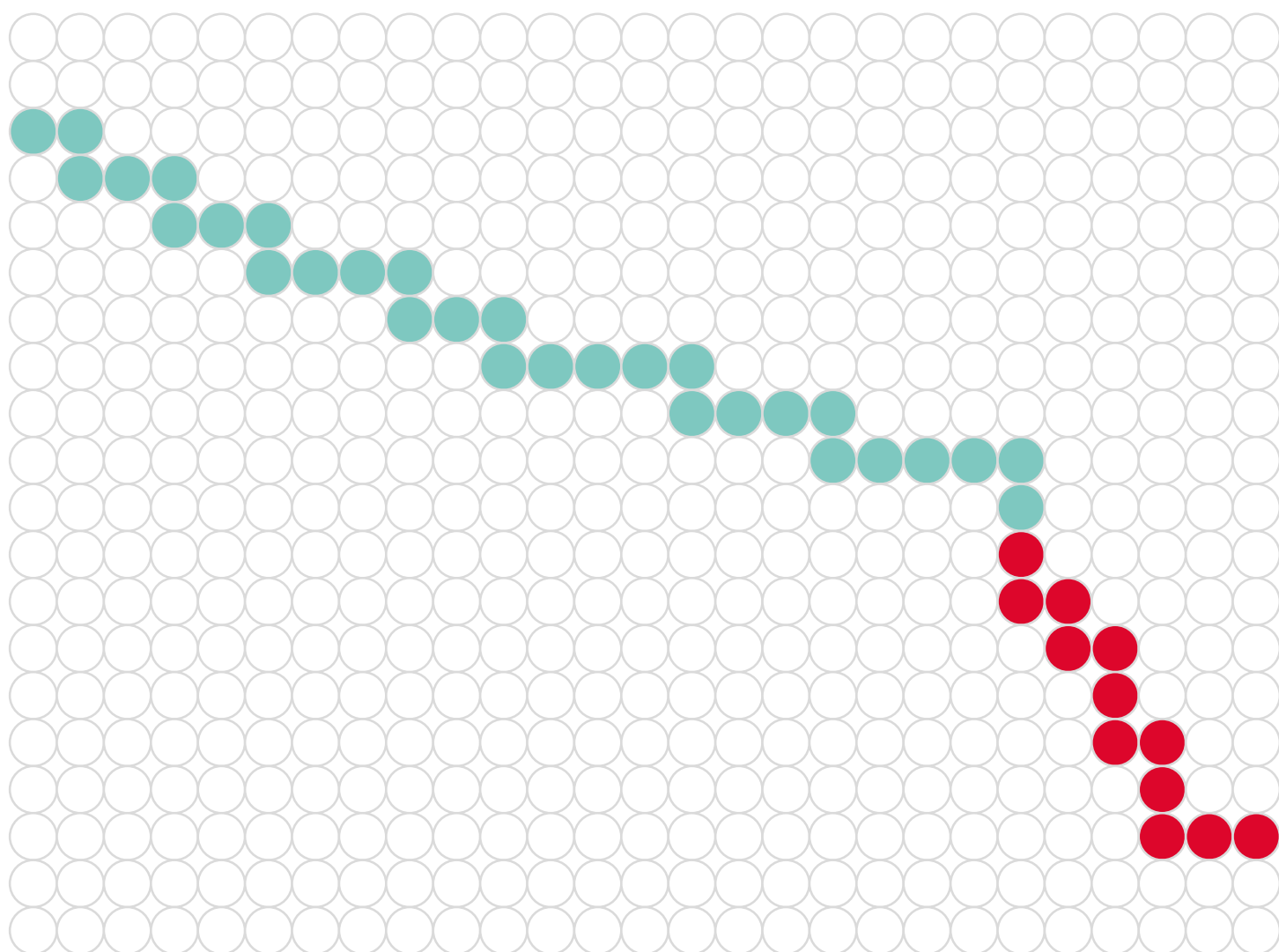


Towards a global HIV prevention coalition and road map

Preventing and reducing new HIV infections by 75% by 2020



Introduction

United Nations Member States have committed to reducing new adult HIV infections to fewer than 500 000 annually by 2020 and ending AIDS as a public health threat by 2030.

Achieving this will require rapid action based on proven tools and well-informed innovations, backed with extensive support. An international partnership is needed to unite the global effort.

UNAIDS and the United Nations Population Fund (UNFPA) are working with United Nations Member States, civil society, philanthropists, academics and international organizations to generate support for a global HIV prevention coalition. When launched, the new Prevention Coalition will champion the Prevention2020 Road Map for achieving the global commitments on HIV prevention.

Co-convened by UNAIDS Executive Director Michel Sidibé and acting UNFPA Executive Director Natalia Kanem, the Prevention Coalition will launch the Road Map on 10–11 October 2017 and report annually on its progress until 2020.

HIV prevention needs more rapid progress

The HIV response has made major progress: new infections among children have dramatically declined, and life-saving treatment is accessed by more people living with HIV than ever before. New infections among adolescents and adults have remained stubbornly high, however, and if vigorous measures are not taken to strengthen HIV prevention and treatment programmes, there is an acute risk of missing the global target of reducing new infections to fewer than 500 000 by 2020. The slow decline of new adult infections also threatens the sustainability of treatment programmes, with every single new infection adding costs for lifelong treatment.

HIV treatment saves lives and has a significant preventive effect, by suppressing onward transmission from those living with the virus. Achieving the 90–90–90¹ targets for HIV treatment is therefore critical. All available evidence, however, shows that treatment alone will not be enough to control the epidemic—primary prevention also needs to be scaled up vigorously.

Despite the massive roll-out of HIV treatment in recent years—and the availability of a broad array of effective prevention tools and methods—new HIV infections among adolescents and adults have been declining far too slowly: more than 1.8 million new infections still occur every year worldwide, including more than 1.6 million among adolescents and adults. The number of new infections among adolescent girls and young women in high-prevalence countries in sub-Saharan Africa remains particularly alarming, despite signs that incidence among girls may have started to decline. The number of new infections among key populations—including sex workers, gay men and other men who have sex with men, people who inject drugs and transgender people—also has not declined; rather, it is increasing in some countries.

There is robust evidence that combination prevention programmes can be successful when implemented at scale. Biomedical prevention methods such as condoms, harm reduction (including needle and syringe programmes and opioid substitution therapy), voluntary medical male circumcision (VMMC) and pre-exposure prophylaxis (PrEP) work for primary prevention when combined with behavioural and structural approaches (such as women's empowerment, education, stigma reduction and strong community mobilization). Furthermore, there is strong evidence that HIV prevention is highly cost-effective and cost-saving if it is focused on people most at risk and if it is delivered with sufficient quality and intensity. However, large-scale implementation has not occurred.

¹ By 2020, 90% of all people living with HIV will know their HIV status. By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy. By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression.

There is global consensus that the target to reduce new HIV infections to fewer than 500 000 can be achieved if primary prevention programmes are rapidly scaled up alongside treatment. Young people at risk and people in key populations need to have greater access to effective prevention services and be empowered to use them. In the 2016 Political Declaration on Ending AIDS, Member States committed to reaching at least 90% of them with tailor-made programmes. Global output targets for condom programmes, VMMC, PrEP and prevention also were set. To achieve these targets, efforts are needed to make the necessary investments and systematically scale up and implement effective programmes, including addressing structural and policy barriers that prevent young people and key populations from using HIV prevention.

Figure 1. New HIV Infections (15+) in 2016: > 1.6 million

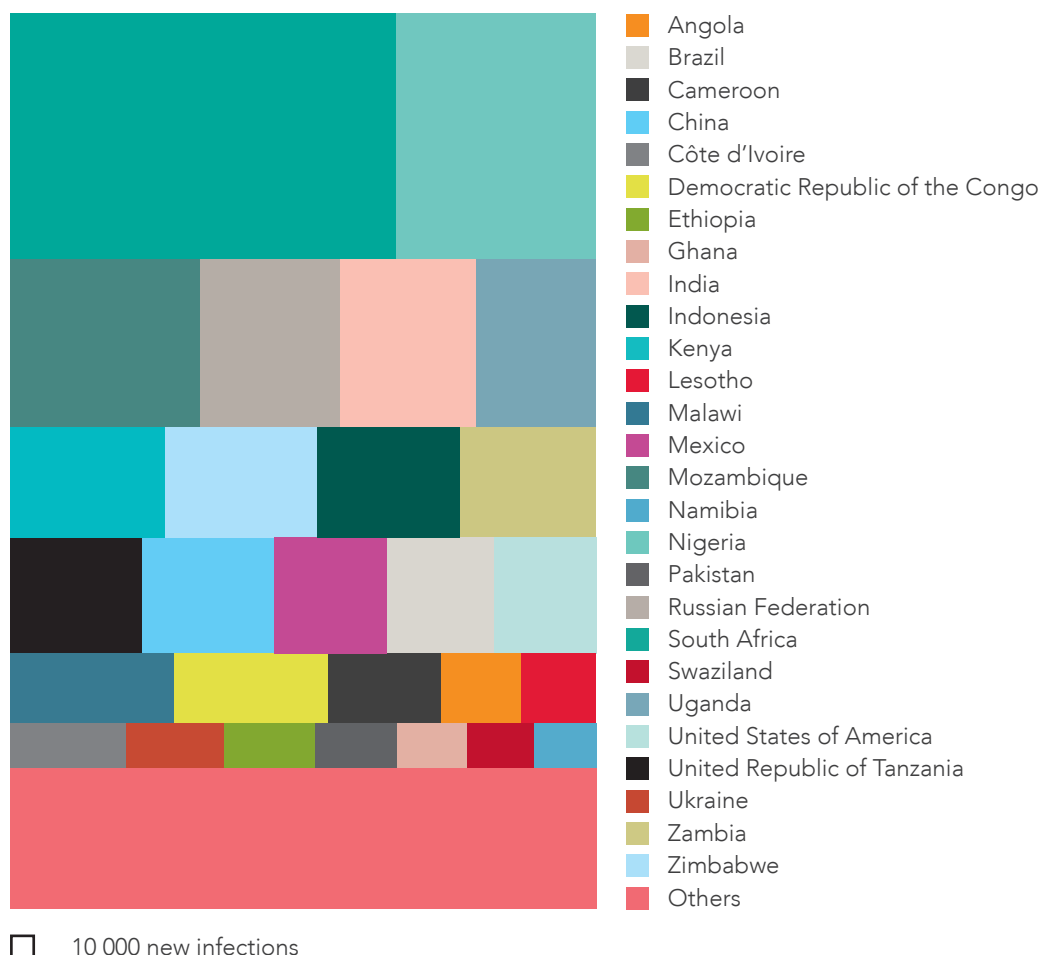
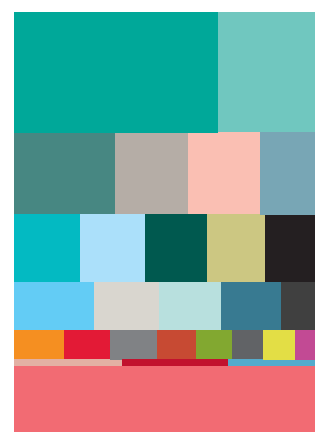


Figure 2. New infections (15+) target for 2020: < 500 000 (75% fewer than 2010)



Source: UNAIDS estimates, July 2017

Why we need a global HIV prevention coalition

A new effort is urgently needed to reinvigorate primary HIV prevention. It needs to build on lessons learned from previous prevention initiatives and other successful initiatives, such as the Global plan towards the elimination of new HIV infections among children by 2015 and keeping their mothers alive, which successfully galvanized efforts to reduce new child infections.

The overarching goal of the Global HIV Prevention Coalition will be to strengthen and sustain political commitment for primary prevention by setting a common agenda among key policy-makers, funders and programme implementers. It also will seek to establish accountability for delivering services at scale. Success requires country ownership and commitment plus global and national actions. The Prevention Coalition will launch the Prevention2020 Road Map, engage stakeholders and leaders in its effective implementation, monitoring, and annual reporting on progress.

The proposed Global HIV Prevention Coalition

Co-conveners

Michel Sidibé, Executive Director, UNAIDS Secretariat
Natalia Kanem, Acting Executive Director, UNFPA

UN Member States

Angola
Brazil
Cameroon
China
Côte d'Ivoire*
Democratic Republic of the Congo
Ethiopia
Ghana
Germany
India
Indonesia
Kenya (host of inaugural meeting)*
Lesotho
Malawi
Mexico
Mozambique
Namibia
Netherlands*
Nigeria
Pakistan
South Africa
Swaziland
Sweden
Uganda
Ukraine
United Kingdom of Great Britain and Northern Ireland
United Republic of Tanzania
Zimbabwe*
Zambia

United Nations organizations

UNAIDS*
United Nations Population Fund (UNFPA)*
United Nations Children's Fund (UNICEF)
UN Office on Drugs and Crime (UNODC)
World Health Organization (WHO)
World Bank

International organizations

Bill and Melinda Gates Foundation*
Children's Investment Fund Foundation*
The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)
United States President's Emergency Plan for AIDS Relief (PEPFAR)

Civil society

African Youth and Adolescent Network on Population and Development (AFRIYAN)
Global Advocacy for HIV Prevention (AVAC)
Global Network of People living with HIV (GNP+)
Global Network of Sex Work Projects (NSWP)
International HIV/AIDS Alliance*
International Network of People Who Use Drugs (INPUD)
International Planned Parenthood Federation (IPPF)
Men Who Have Sex With Men Global Forum (MSMGF)

Others

Centre for the AIDS Programme of Research in South Africa (CAPRISA)*
Hornet
International AIDS Society*
UNAIDS Reference Group on HIV and Human Rights

* Members of the steering group.

The Prevention2020 Road Map

The Prevention2020 Road Map will lay out leadership commitments by all stakeholders towards reaching the prevention targets of the 2016 Political Declaration on Ending AIDS. To address the existing wide gaps in prevention programmes, three interconnected factors will need to be considered:

- The political sensitivities and structural barriers surrounding HIV prevention programmes for adolescents' and young people's sexual and reproductive health and key populations, including harm reduction.
- The optimal allocation of resources and frequent underfunding of effective HIV prevention programmes.
- The need for systematic scaling-up of prevention programmes and intensifying their implementation to have the necessary impact.

The process of developing the Road Map and forming the Prevention Coalition will generate momentum to align political leadership with actions to address these issues and deliver results.

Successful HIV prevention programmes contribute to and benefit from several Sustainable Development Goals (SDGs), including SDG 3 on health and well-being, SDG 4 on adequate education, SDG 5 on gender equality and SDG 10 on reduced inequality. Yet it is not enough simply to link with other efforts to achieve the SDGs: to have the maximum beneficial impact on adolescents, young people and key populations, a stronger, dedicated HIV prevention agenda is needed—led by the Global HIV Prevention Coalition—that will actively create synergies across the SDGs.

Creating the Prevention2020 Road Map

The consultation process for creating the Global HIV Prevention Coalition also will support the development of the Prevention2020 Road Map. More than 30 governments and organizations will participate in the process. Extensive consultations will be held with global and country prevention partners, and there will be advocacy to generate support based on detailed analysis of policy and programme needs and solutions.

A steering group will coordinate the consultations and draw on countries, foundations, donors, civil society and United Nations organizations that are committed to scaling up efforts to achieve the prevention targets of the 2016 Political Declaration on Ending AIDS.

Preparatory tasks for the Road Map will be divided into two work streams:

1. Thematic analysis around key issues related to prevention and why a systematic scale-up has not yet occurred, along with recommendations for remedial action.
2. Country consultations, including reaffirmation of national prevention leadership and commitment.

The participants will use a synthesis of best practices, technical guidance and resident expertise of organizations engaged in the response to HIV. Five thematic papers will inform country consultations and ensure that the Road Map is realistic and robust. Steering group members and the two conveners, the UNAIDS Secretariat and UNFPA, will provide background documentation and engage in preparatory work, drawing on expertise among the partners. An analysis of the barriers to prevention service scale-up and uptake will be undertaken to define the key policy and programmatic actions and to determine funding opportunities and needs for rapidly scaling up programmes in this area.

Through this process, parameters for reducing new HIV infections among adults (15+) to fewer than 500 000 per annum in 2020 will be defined within the framework of existing initiatives and programmes, focusing on primary prevention programmes that complements scaled-up HIV treatment, and facilitated by addressing legal and policy barriers to successful scale-up and wide uptake of HIV prevention services.

As a result of this process, the Global HIV Prevention Coalition will convene at its inaugural meeting to launch a results-based road map with a clear set of commitments and actions for scaling up prevention programmes and reducing new infections. The Prevention2020 Road Map will be launched in Nairobi, Kenya on 10–11 October 2017.

Steps

1. Forming the Global HIV Prevention Coalition

- Mobilize leadership at the highest level—global and national—to support practical actions to meet global and national targets and commitments.
- Provide inputs to the Prevention2020 Road Map.
- Create global and national awareness and generate public and stakeholder support.
- Unify global, regional and national actors around the issue for concrete action at the country level.

2. Developing the Road Map

- Recognize and build on achievements, and identify global and country-level gaps.
- Agree on pillars and milestones in achieving prevention impact and programme targets, globally and country by country.
- Ensure adequate resources and allocations based on the global commitment to invest an average of one quarter of HIV resources in HIV prevention.
- Identify synergies between HIV primary prevention and other related frameworks, such as the 90–90–90 targets, the Start Free Stay Free AIDS Free initiative, Every Woman Every Child, the Ministerial Commitment on Comprehensive Sexuality Education and Sexual and Reproductive Health Services for Adolescents and Young People in Eastern and Southern Africa (the ESA initiative) and, more broadly, the SDGs.

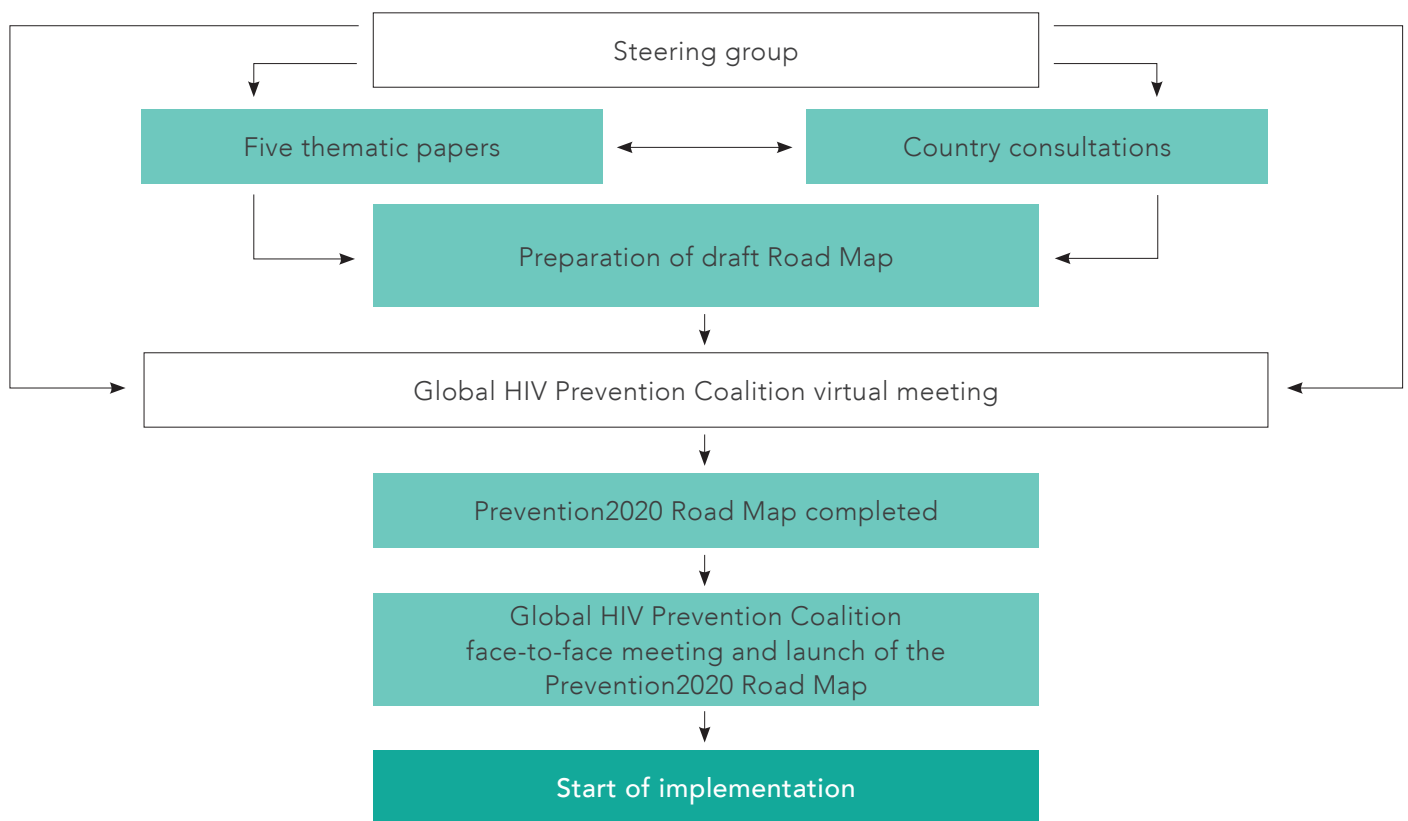
3. Implementing the Road Map

- Address country-level policy and programme obstacles to implementation and recommend solutions for scale-up.
- Provide a framework and timeline for implementation.
- Invest in prevention, including by reinvesting savings made within the HIV response and through synergies with other programmes and sectors.
- Make programmatic coordination, capacity-building and technical support fit for purpose.

4. Accounting for progress

- Establish a reporting mechanism and key indicators for measuring success at the global and national levels, based on the existing Global AIDS Monitoring system.
- Track commitments and milestones.
- Agree on an accountability framework, including who does what.

Figure 3. Forming the Global HIV Prevention Coalition and developing the Prevention2020 Road Map



Thematic discussion papers

Five multipartner working groups are developing discussion papers to inform the elements of the Prevention Coalition Road Map. These elements will form the basis of its recommendations and action points.

1. HIV prevention leadership and financing.
2. Accountability to reach the prevention targets and commitments in the 2016 Political Declaration on Ending AIDS.
3. Prevention service delivery and implementation.
4. Person-centered approaches and community perspectives.
5. Organizing learning and technical support for HIV prevention.

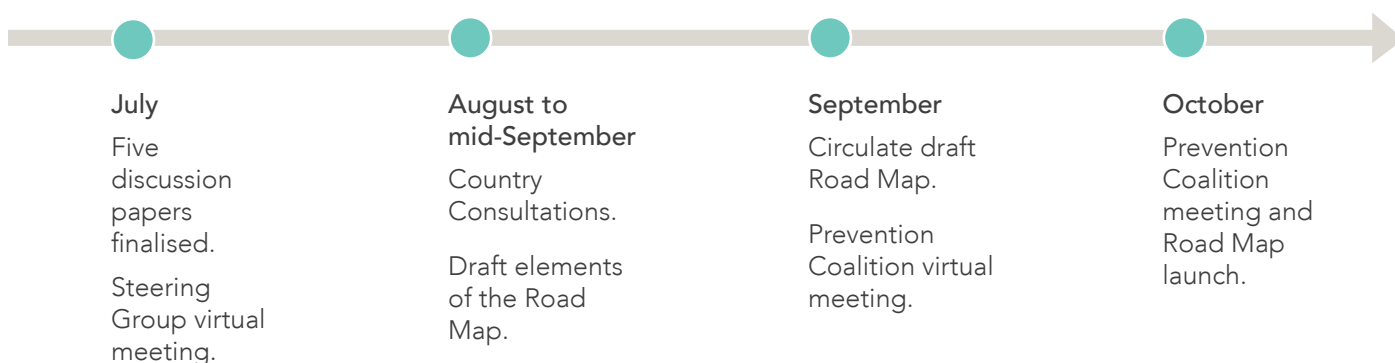
Country consultations

National consultations will be organized in coalition countries to reaffirm and strengthen national leadership for prevention, review progress and help establishing national prevention coalitions. Stakeholders at the national consultations should confirm and define national prevention (and related human rights) targets; identify key programme achievements, gaps and bottlenecks; and agree on commitments and milestones for strengthening prevention policies, programmes and implementation. To prepare for the inaugural meeting of the Global HIV Prevention Coalition on 10–11 October, country delegations will be nominated that include a political leader, the director of the national AIDS programme and a civil society representative.

Timeline

A series of consultations, debates and analyses will allow the steering group to develop the Road Map and convene the Global HIV Prevention Coalition.

Figure 4. Timeline for the Global HIV Prevention Coalition and Prevention2020 Road Map, 2017





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