

# GLOBAL ACTION PLAN FOR HIV DRUG RESISTANCE 2016-2021

APRIL 2016



HIVDR refers to a reduction in the ability of a particular drug or combination of drugs to block replication of HIV. HIV drug resistance can be categorized as transmitted resistance, which occurs when previously uninfected individuals are infected with a drug-resistant virus; and acquired resistance, which occurs when resistance mutations emerge because of drug-selective pressure in individuals receiving antiretroviral therapy.

## WHY DO WE NEED A FIVE-YEAR PLAN FOR HIV DRUG RESISTANCE (HIVDR)?

The World Health Organization (WHO) is committed to ensuring that successful HIV treatment scale-up is not undermined by HIVDR. Preventing HIVDR is essential for meeting the 90–90–90 targets by the year 2020:

- 90% of all people living with HIV have been diagnosed
- 90% of all people with diagnosed HIV infection are receiving antiretroviral therapy (ART)
- **90% of all people receiving ART have suppressed viral load**

The 2015 WHO ART guidelines recommend “Treat All” and PrEP, meaning ART for far more people. Quality ART must include HIVDR prevention and prompt switching of regimens if treatment fails. If scaled-up ART is accompanied by treatment failure and unsuppressed viral loads, there is a risk of increased HIVDR (figure 1). This can, in turn, put current ART regimens at risk and drive up the cost of successful treatment, leading to more deaths and compromising the sustainability of treatment programmes.

**FIGURE 1:**



WHO is leading the development of a five-year Global Action Plan for HIVDR, reflecting a global consensus that HIVDR in lower- and middle-income countries requires a coordinated and resourced response to

increase awareness, commitment and action at all levels. The Global Action Plan will define the respective roles of key partners in preventing, monitoring, and responding to HIVDR and is part of the Global Action Plan on Antimicrobial Resistance.

Key partners throughout the world are being consulted, including the governments of countries impacted by HIV, representatives from civil society and nongovernmental organizations, regional bodies, donor countries and organizations, and many others. Meetings with key stakeholders, as well as online consultations with technical experts and wider groups of stakeholders, are providing input to guide the content of the Global Action Plan.

The Global Action Plan will describe:

- the strategies required to prevent, monitor and respond to HIVDR;
- the roles of stakeholders at all levels to implement the plan;
- the strategy to raise global awareness of the threat of HIVDR;
- the resources needed for the plan's implementation, as well as how to mobilize these resources; and
- how implementation of the plan will be monitored.

Initial consultations have identified five strategic objectives for the plan, with key areas for action within each objective (see reverse). These will be refined with further stakeholder input during 2016.

### OBJECTIVE 1: MOTIVATE COORDINATED ACTION AND MOBILIZE RESOURCES

- Increase awareness and commitment among global, regional and national stakeholders
- Encourage country ownership through national HIVDR working groups, plans and strategic investment
- Encourage partner alignment for coordinated technical support and policy
- Mobilize sustainable financing for a range of activities on HIVDR at global, national and local levels

### OBJECTIVE 2: PREVENT AND RESPOND TO HIVDR

- Provide normative guidance at community, national and global levels for action and monitoring

- Develop and implement national strategies to tackle HIVDR, and integrate these strategies into HIV national plans and routine monitoring and evaluation
- Base programmatic decisions on HIVDR data to maximize treatment outcomes
- Ensure coordinated action on HIVDR prevention and mitigation in ART delivery and treatment support

### OBJECTIVE 3: GENERATE EVIDENCE TO INFORM POLICY

- Strengthen surveillance and appropriate use of routine programmatic data
- Ensure data dissemination and timely reporting at multiple levels
- Develop and utilize mathematical models to inform policy decisions
- Assess and promote "value for money" interventions

### OBJECTIVE 4: ENCOURAGE INNOVATIVE RESEARCH

- Invest to better understand trends, determinants and effects of HIVDR, including in key populations and high HIVDR-incidence areas
- Invest in basic science research to answer new and evolving questions in HIVDR

### OBJECTIVE 5: STRENGTHEN LABORATORY CAPACITY AND QUALITY

- Strengthen HIVDR testing standards, including for new molecules (integrase inhibitors)
- Develop innovative and user-friendly approaches for HIVDR testing, interpretation and reporting

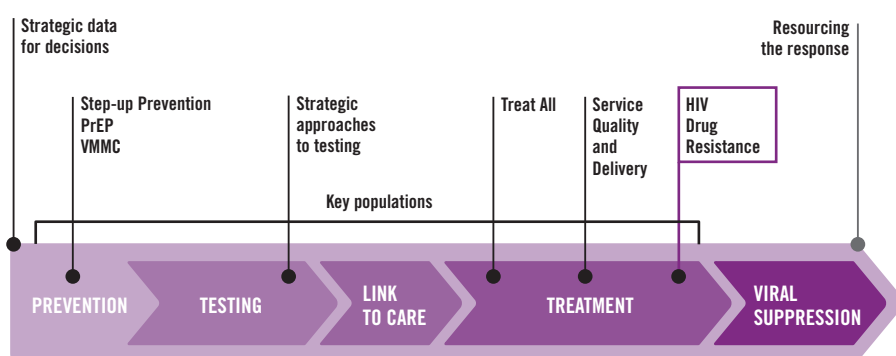
### TIMELINE OF ACTIVITIES

- February to June 2016 – Stakeholder feedback and input
- July 2016 International AIDS Society Conference (Durban) – Final draft for public input and comment
- First quarter 2017 – Launch

### TO ADD YOUR IDEAS AND PRIORITIES

See the WHO web site for ways to make comments: <http://www.who.int/hiv/topics/drugresistance/en/>  
Email Silvia Bertagnolio at [bertagnolios@who.int](mailto:bertagnolios@who.int)

FIGURE 2: CONTINUUM OF HIV TESTING, PREVENTION, TREATMENT AND CARE



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BRIEF

HIV DRUG RESISTANCE