UNAIDS PROGRAMME COORDINATING BOARD WORKING GROUP

THEMATIC SEGMENT:

Beyond 2025: Long-acting antiretrovirals: potential to close HIV prevention and treatment gaps

MEETING SUMMARY: FIRST MEETING OF THE WORKING GROUP

DATE: Thursday, 16 October 2025

MEETING AGENDA

- Welcome and introduction
- Presentation of the draft outline of the Background Note and discussion
- Presentation of the pre zero-draft agenda and discussion
- Next steps

……

SUMMARY

1. Welcome and introduction

Mr. Morten Ussing, Director Governance, UNAIDS Secretariat, welcomed the PCB working group to its first meeting for the preparation of the thematic segment of the 57th PCB (18 December 2025) on ***Beyond 2025: Long acting antiretrovirals: potential to close HIV prevention and treatment gaps.***

The Secretariat highlighted that the working group is established to create ownership of the PCB stakeholders in the framing of the background note and discussions for the PCB thematic segment. It was also reminded that the members play an important role in shaping the day and the documentation that informs it. Mr. Ussing recalled that the Secretariat is responsible on behalf of the Executive Director for the background note, with Cosponsor support, and the working group providing the broader steer.

Mr. Morten Ussing (Director, Governance, UNAIDS Secretariat) opened the first working-group meeting, welcoming participants and thanking them for the strong turnout for this initial preparatory meeting. He noted that the working group will meet twice during the preparatory phase and outlined the session's format: a Secretariat presentation of the draft annotated outline of the background note, a discussion to provide steer and key messages, followed by a presentation and discussion of the pre zero-draft agenda for the thematic segment.

Mr. Ussing explained where the thematic segment sits within the PCB governance structure and recalled the Bureau-led process for selecting the theme — including the Bureau's call for proposals and the Board's final endorsement. He reminded members that the working group exists to build ownership across PCB constituencies for both the background note and the thematic day, and that participation in the group allows members to influence the focus, messaging and speaker selection for the session. He also flagged that UN considerations on gender and geographic balance will guide speaker choices.

The Secretariat noted that the thematic segment — ***Beyond 2025: Long-acting antiretrovirals: potential to close HIV prevention and treatment gaps*** — is timely and that Brazil's leadership in proposing and hosting the PCB offers an important opportunity to secure high-level and in-person engagement in Brasilia. Members were invited to provide oral interventions during the meeting and to submit written comments afterwards to ensure their inputs are reflected in the drafting process; a call for case studies and further written inputs will be circulated to support the background note and related conference room paper. Mr. Ussing then gave the floor to Ms. Paula Auberson-Munderi to introduce the draft annotated outline of the background note.

2. Presentation of the draft annotated outline of the background note for the thematic segment

Ms. Paula Auberson-Munderi (Head of Programme Innovation, Prevention & Treatment & Pediatrics and Co-lead for the thematic segment) presented the draft annotated outline on behalf of the co-leads, Secretariat and WHO, and a selection of internal Secretariat teams whose workstreams intersect with the topic. She thanked colleagues who contributed to the outline and recalled that the draft circulated to members follows closely the scope and instructions set by the PCB for this thematic session.

Ms. Auberson-Munderi said the background note is intended to: (a) describe the prevention and treatment gaps relative to global targets; and (b) explain the value-added of long-acting antiretrovirals (LA-ARVs) in improving programme outcomes. The note will emphasize population groups, geographies and contexts where access and continuation on antiretroviral-based prevention and treatment remain most problematic.

The draft outline proposes six core sections. The first will set out data and trend analysis, drawing on UNAIDS reporting and the draft Global AIDS Strategy 2026-2031 to situate numerical targets for prevention and treatment. The second will summarize LA-ARV products: those already approved and in use, plus products in the near- and longer-term development pipeline to inform Board members of anticipated innovations.

The third section will adopt a person-centered framing, identifying the specific populations and contexts likely to benefit most from LA-ARVs. The Secretariat is issuing a call for country case studies to illustrate implementation experience (noting Brazil and Nigeria as early examples available to the Secretariat) that can be used both in a conference room paper and as illustrative material in the main background note.

A further section will examine health-system and community-system enablers, and service-delivery models required for rollout — with particular emphasis on community-led responses, integration into existing programmes, and models (existing or innovative) that support equitable delivery. The Secretariat stressed the importance of reflecting community leadership throughout these analyses.

Another section will focus on pathways to equitable access: pricing and affordability, regulatory barriers, financing gaps, market-shaping mechanisms, possibilities for technology transfer and local manufacture, and funding models that could support sustainable access. Finally, the note will conclude with a set of recommendations.

Ms. Auberson-Munderi closed by inviting oral comments during the meeting and written inputs. Thereafter, reiterating that the Background Note writer is engaged and listening to inputs on today's call. She also noted that a zero-draft agenda for the thematic day and a companion conference room paper (featuring submitted case studies) will be circulated shortly and asked members with suggested case studies to respond promptly to the forthcoming call.

As co-lead on the thematic segment, Andy Seale, WHO, urged the working group to favor a smaller, more focused set of recommendations in the Background Note rather than expanding the list. Mr. Seale argued that a limited number of well-targeted recommendations would be more strategic and useful for discussion at the 58th PCB meeting. He concluded by expressing readiness to remain engaged in further drafting and discussions.

Secondly, Mr. Seale urged clarity in the scope of the Background Note, stressing that it should address long-acting antiretrovirals broadly and not be confined to long-acting injectables alone and suggested the draft captured the full range of long-acting formulations and delivery modalities so that Board deliberations reflect all relevant technologies and their programme implications.

3. Discussion on the Outline

The PCB working group welcomed the annotated outline. Specific comments included the following:

Cosponsors

- Stressed the importance of choice: long acting injectables should be presented as one tool among several, not as a replacement for other prevention and treatment options.

- Urged to learn from the oral PrEP rollout, which in many regions has not met targets; the Background Note should draw lessons from that experience to avoid repeating mistakes and to design better approaches for future rollouts.

- Cautioned against over-medicalizing responses, from a human-rights perspective: structural barriers — criminalization, stigma and persecution — must be addressed because services will only work when people can access them freely and without fear.

NGO Delegation

- Thanked the team for the presentation and commended the quality of the draft outline, also on behalf of the civil society advisory group which will also be reviewing the papers and agenda.

- Urged stronger treatment of national-level barriers alongside the global access analysis — highlighting human rights, policy and legal barriers, technical obstacles, financing constraints and accountability gaps as important issues to address.

- Called for a fuller articulation of the role of communities: while the draft references community leadership, the NGO delegation asked that community contributions and community-led models be fleshed out in greater detail.

- Recommended that proposed actions and PCB decision points be explicitly aligned with existing initiatives and processes, for example, the Global Prevention Coalition (GCP).

- Stressed the need to address the broader political economy — power, inequality, accountability, justice and meaningful community inclusion — as central obstacles communities face when trying to access prevention and treatment.

- Emphasized the need to prioritize a small number of clear thematic objectives that can strengthen advocacy efforts, rather than an overly long list of aims, underlined the importance of defining government roles and responsibilities (noting this should be further clarified during the December meeting) and stressed country ownership and community engagement as critical to scaling up access, giving India's context an example where long-acting ARVs are not yet widely available.

- Highlighted the role of all actors in the supply chain, including pharmaceutical manufacturers, and called for their inclusion in discussions about scaling up and rollout planning so that the full set of stakeholders who can enable access are part of the process.

Secretariat

- Thanked participants and organizers and urged the working group to translate the thematic work into practical, country-level action, welcoming the idea of drawing on the work of the Global Prevention Coalition (GPC) and suggesting the Secretariat issuing a simplified, integrated prevention framework that is easier to use.

- Emphasized a people-centered approach and reiterated the priority of choice for individuals when selecting prevention and treatment options. The Secretariat also recommended that the background notes would address how country targets should be set — not only global targets, but country-specific parameters and the populations to prioritize — so roll-out plans are realistic and focused, noting the importance of learning from the oral PrEP rollout.

4. Presentation of the pre zero-draft agenda for the thematic segment

Mr. Ussing introduced the next agenda item, noting the importance of members' timely feedback to guide the framing and messaging of both the Background Note and the thematic day. He reminded participants that written comments are due by 21 October, within five days of the meeting, and that these inputs are critical to shaping the forthcoming full draft of the background note.

Mr. Ussing explained that the next meeting of the working group will focus on fine-tuning the content and structure of both the note and the agenda, considering all comments received. He then invited Ms. Paula Auberson-Munderi to present the pre zero-draft agenda for the thematic segment.

Ms. Paula Auberson-Munderi presented the pre zero-draft agenda for the thematic segment, explaining that it is an initial working version shared for discussion and co-creation with the group. She noted that the structure will follow a familiar format while offering opportunities to refine the focus and participation.

The proposed agenda will open with a dialogue and keynote session providing a strategic vision for the discussion. The three keynote speakers envisioned are: (1) a Member State representative, (2) a civil society global leader — potentially an adolescent girl or young woman representing a group that could benefit from long-acting antiretrovirals (LA-ARVs) for prevention or treatment, and (3) the Executive Director of UNAIDS.

Following the opening, a session overview will set the scene, covering epidemic data, progress toward global HIV targets, and highlights of the Background Note. This overview may be presented by the Secretariat's leadership, though this remains open for discussion.

Two panel discussions are proposed:

- The first panel would focus on *Lived experiences*, featuring persons living with HIV or those at risk, advocates for access, and examples of successful pathways that have enabled equitable access to innovative products in the past.

- The second panel, *Planning for Access*, would look ahead to actionable steps. It would include perspectives from an advocate for access, a government representative, a funder, and an industry voice. Remarks from the floor would allow Board members to expand or react to the discussions.

The agenda also envisions a segment for feedback and commitments from Member States and other PCB participants, followed by concluding reflections and *the way forward*, led by the Secretariat's leadership.

Ms. Auberson-Munderi closed by inviting initial reflections from the working group, noting that the agenda will continue to evolve based on members' feedback and written input.

Mr. Seale thanked Mr. Ussing and Ms. Auberson-Munderi for the presentation and confirmed that WHO would be pleased to play an active role in the thematic segment — whether through a technical presentation, moderation, or other forms of engagement as appropriate.

He noted, however, that in-person participation might be challenging for some WHO representatives and therefore raised the importance of planning for hybrid participation. Mr. Seale emphasized that logistical clarity on virtual and in-person modalities will help determine speaker selection and ensure inclusive participation across partners.

He also suggested identifying a speaker with lived experience — ideally representing both the *treatment* and *PrEP* perspectives — noting that such a voice would add valuable authenticity to the discussions. However, finding an individual who can effectively bridge both experiences may be challenging.

NGO Delegation

- Welcomed the inclusive approach to panel composition but noted an important gap regarding representation, andobserved that while the proposed panels cover key thematic areas such as planning for access and lived experiences, they do not yet

include voices from men who have sex with men (MSM) and transgender communities, particularly from countries where restrictive laws and policies — such as puberty blockers or other medical and legal barriers — impede access to HIV treatment and prevention.

- Urged the Secretariat and the Working Group to include speakers from these communities to highlight their specific challenges, strategies for overcoming them, and perspectives on how to ensure equitable access to long-acting ARVs, emphasizing that such representation would enrich the thematic discussions and ensure that the segment reflects the lived realities of those most affected.

In response to the comments on logistics and participation, the Secretariat confirmed that the thematic segment will operate in a hybrid format. While it is formally described as an *in-person meeting with virtual participation*, it was clarified that this terminology reflects internal legal and procedural requirements — but that in practice, it will function as a hybrid session.

The Secretariat informed that the PCB meeting would take place in Brazil at the request of the PCB Chair and emphasized that the preference is to have as many speakers as possible physically present, particularly given Brazil's substantial investment and commitment in hosting the PCB meeting. Nonetheless, the Secretariat would make full use of virtual technologies to enable participation by those unable to attend in person.

Mr. Ussing noted that virtual engagement will be especially encouraged for interventions from the floor, ensuring that remote participants can actively contribute to the debate. In conclusion, Mr. Ussing reiterated the aim of achieving the broadest possible participation, combining in-person and virtual modalities.

Ms. Auberson-Munderi acknowledged the suggestions regarding lived experience representation in the panels. She noted that while firsthand experience with long-acting ARV products may currently be limited mainly to participants in clinical trials or those in post-trial access programmes, it should still be possible to identify speakers with meaningful, long-term perspectives.

Mr. Seale agreed, observing that many trial participants have accumulated significant experience over the years and could speak credibly about product use. He also supported the NGO delegation's proposal to include a speaker representing the challenges of access — such as from communities still struggling to obtain treatment — to balance the panel with both perspectives: those who have used the products and those still facing barriers. Mr. Seale added a further point: as the panels are developed, it will be important to ensure that advocacy for long-acting formulations does not inadvertently diminish the value of oral ARVs or oral PrEP. He cautioned that messages should highlight choice and complementarity between available tools, not replacement, and encouraged to keep this in mind when selecting and briefing speakers.

5. Next steps

In closing, Mr. Morten Ussing thanked participants for their active engagement and outlined the next steps in the preparatory process. He reiterated that written comments on both the Background Note and the draft agenda are due by close of business on Tuesday, 21 October, noting that submissions will be accepted across time zones. Inputs received by that

date will inform the development of a more detailed draft of both documents, including proposals for speakers, which will be shared with the working group at its next meeting.

He emphasized the importance of country case studies, urging members to respond quickly once the call is circulated. Early submissions will allow the Secretariat to integrate selected examples directly into the background note, in addition to compiling all received studies into a conference room paper. Mr. Ussing noted that these case studies are frequently used beyond the thematic segment, contributing to broader UNAIDS reporting and publications.

Working Group members were invited to propose both thematic areas and specific speaker names, ideally with multiple options to ensure balance in terms of gender, region, and constituency. He stressed that timely suggestions would help the Secretariat secure travel and visa arrangements, given the goal of having the maximum number of speakers present in Brazil.

Mr. Ussing announced that the second meeting of the working group is expected to take place in the first week of November, once the background note and agenda reach an advanced stage. Documents will be circulated in advance to allow members to provide targeted feedback. He also reminded participants of the upcoming Multistakeholder Consultation on the Global AIDS Strategy (22–23 October 2025), noting that several themes discussed in this meeting will also be relevant there.

Lastly, Mr. Ussing expressed appreciation for the valuable contributions made by all participants and encouraged them to submit any additional reflections in writing. He thanked the Secretariat team and Working Group members for their collaboration and officially closed the meeting, looking forward to continued engagement in the next phase of preparations.

[End of document]