
ANNUAL PROGRESS REPORT ON HIV PREVENTION 2020

DECEMBER 2019



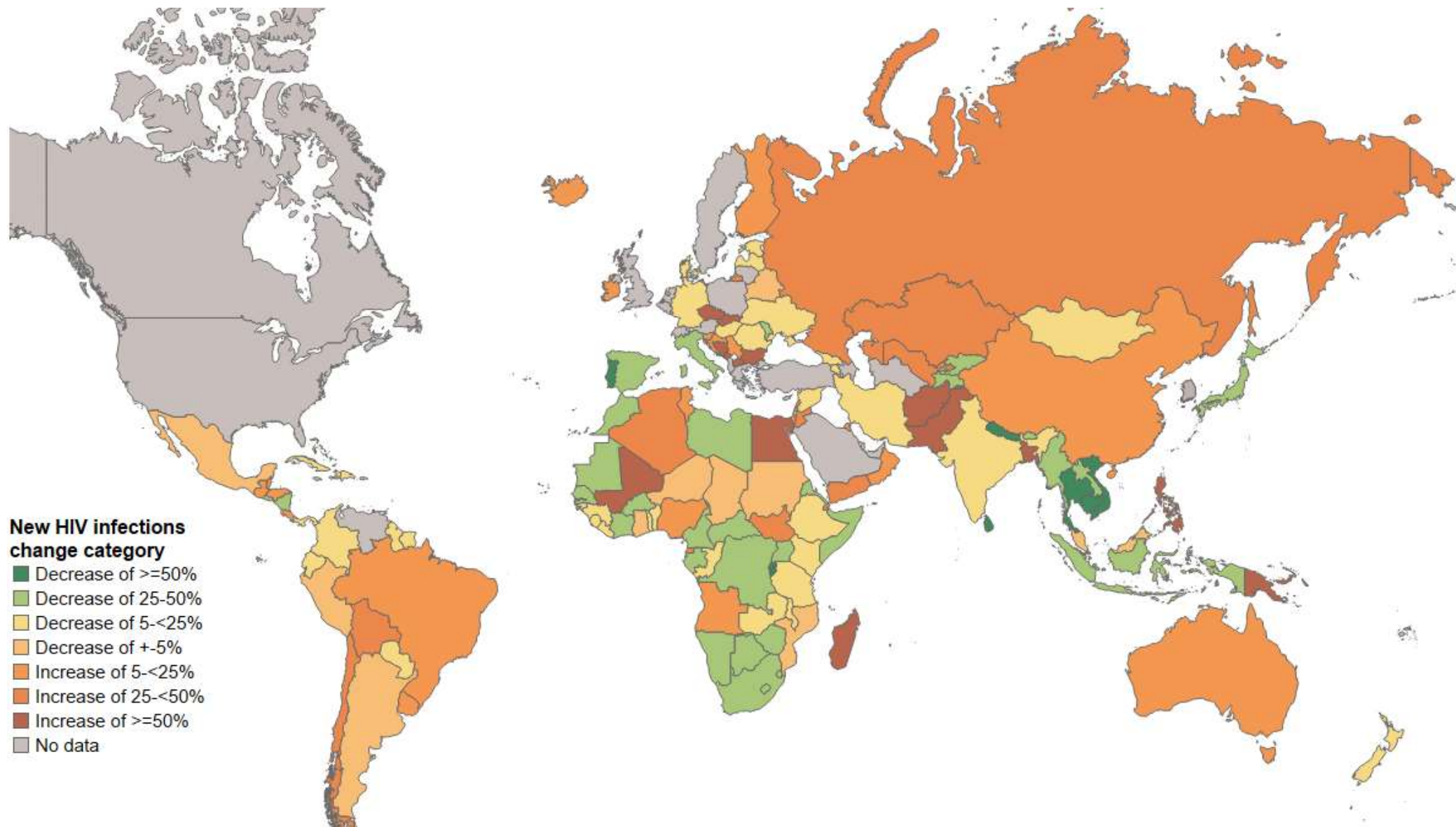
Photo credit: UNFPA



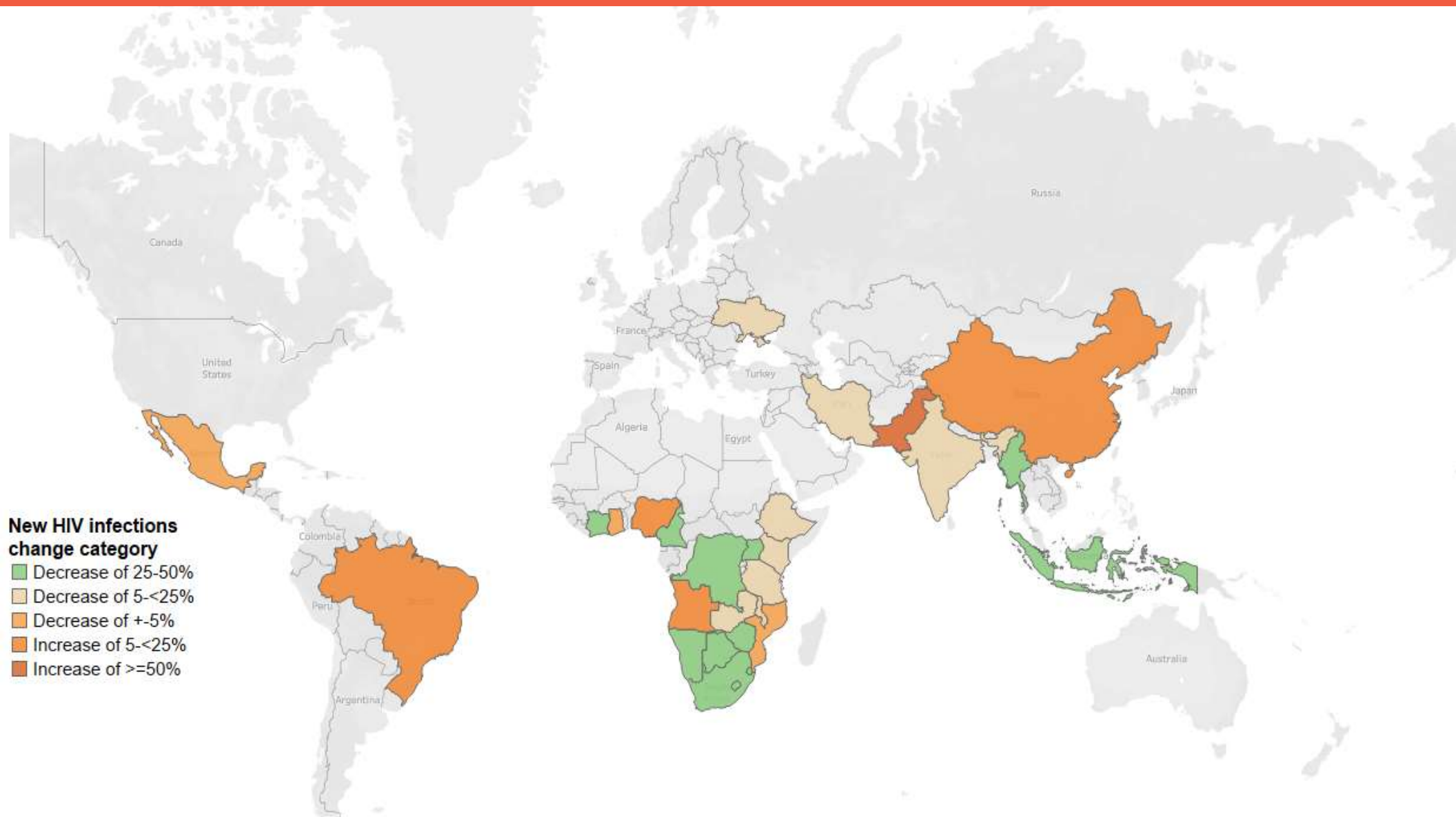
Annual progress report on HIV prevention 2020

I Status and progress on HIV prevention

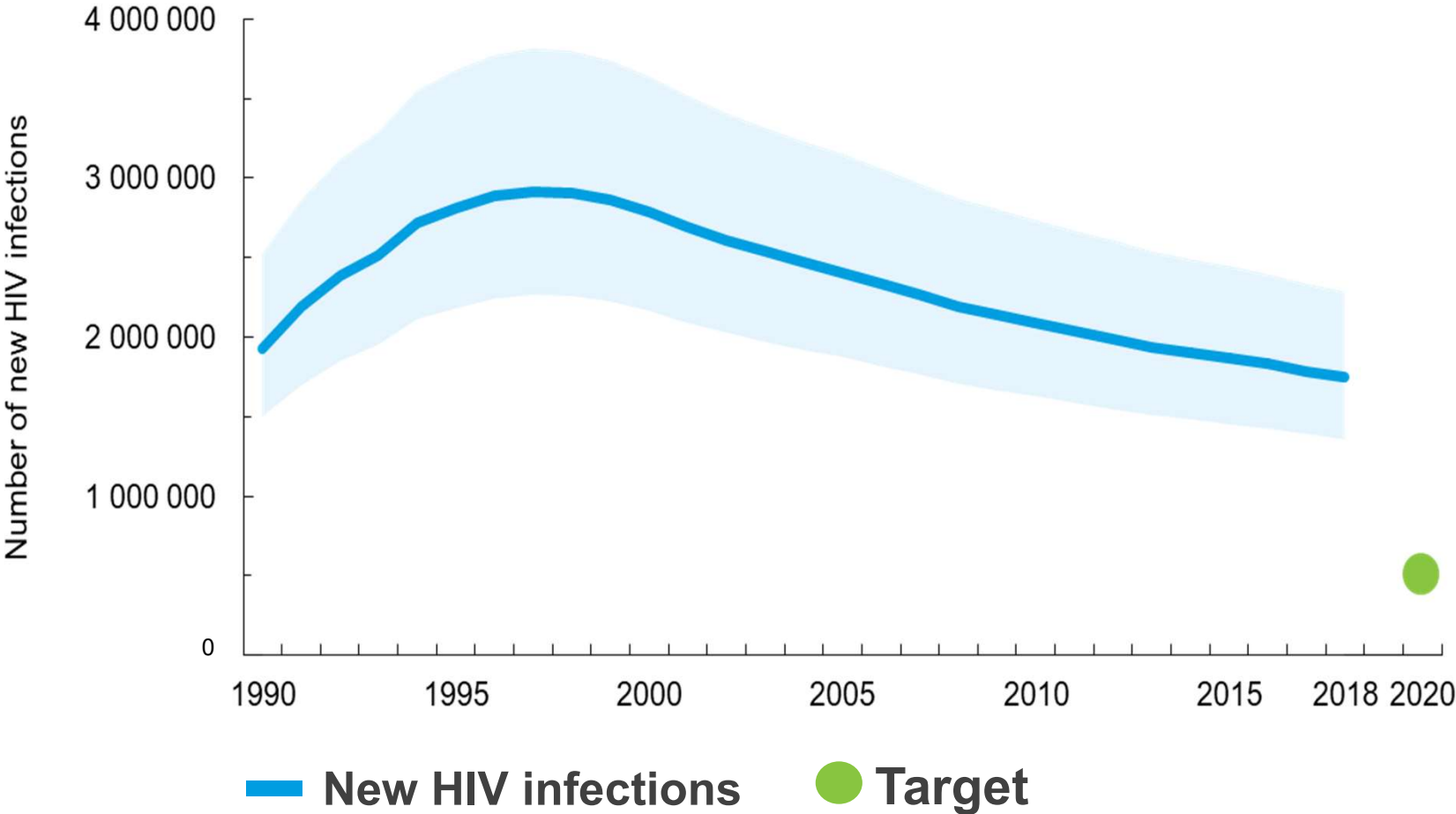
Progress in HIV prevention varies greatly by region and country



Decline in new HIV infections | Global Prevention Coalition Countries

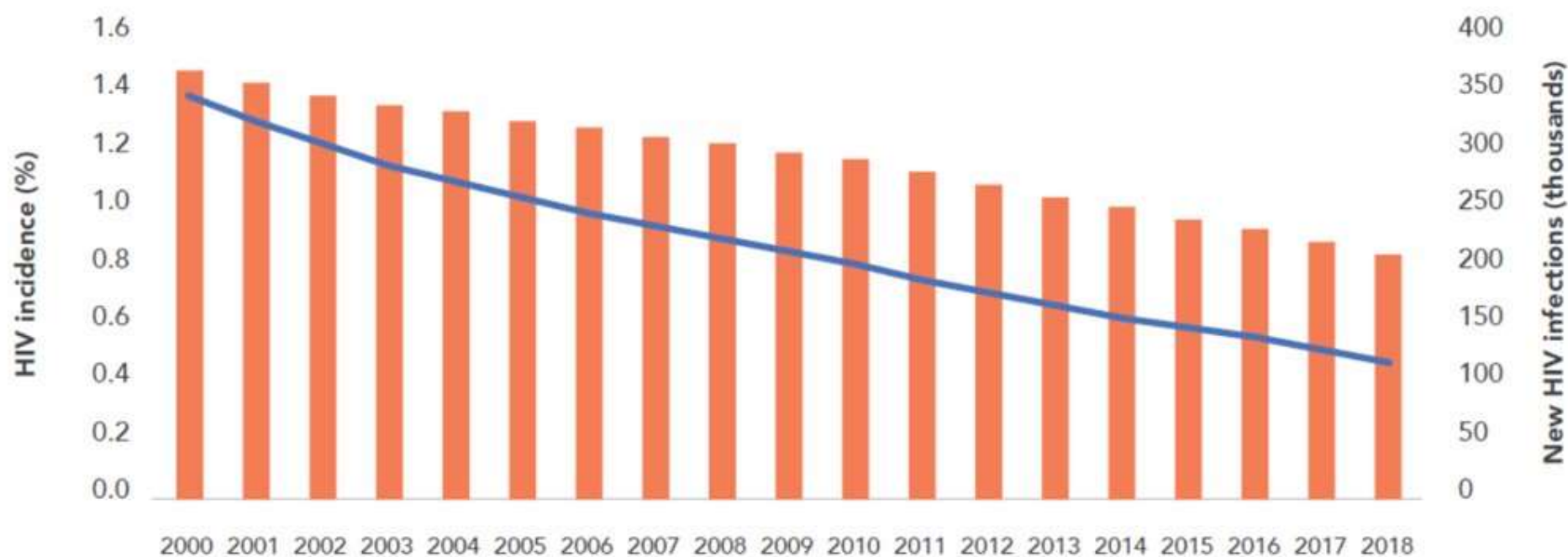


Global progress is not on track to meet the target of fewer than 500,000 new HIV infections by 2020



Adolescent girls and young women continue to face unacceptably high risks of HIV in high-burden countries

HIV incidence and new HIV infections, young women (aged 15–24 years), eastern and southern Africa, 2000–2018



Source: UNAIDS epidemiological estimates, 2019 (see <https://aidsinfo.unaids.org/>).

High-level meeting of the Prevention Coalition at ICPD+25 Nairobi, November 2019 - Overview of commitments



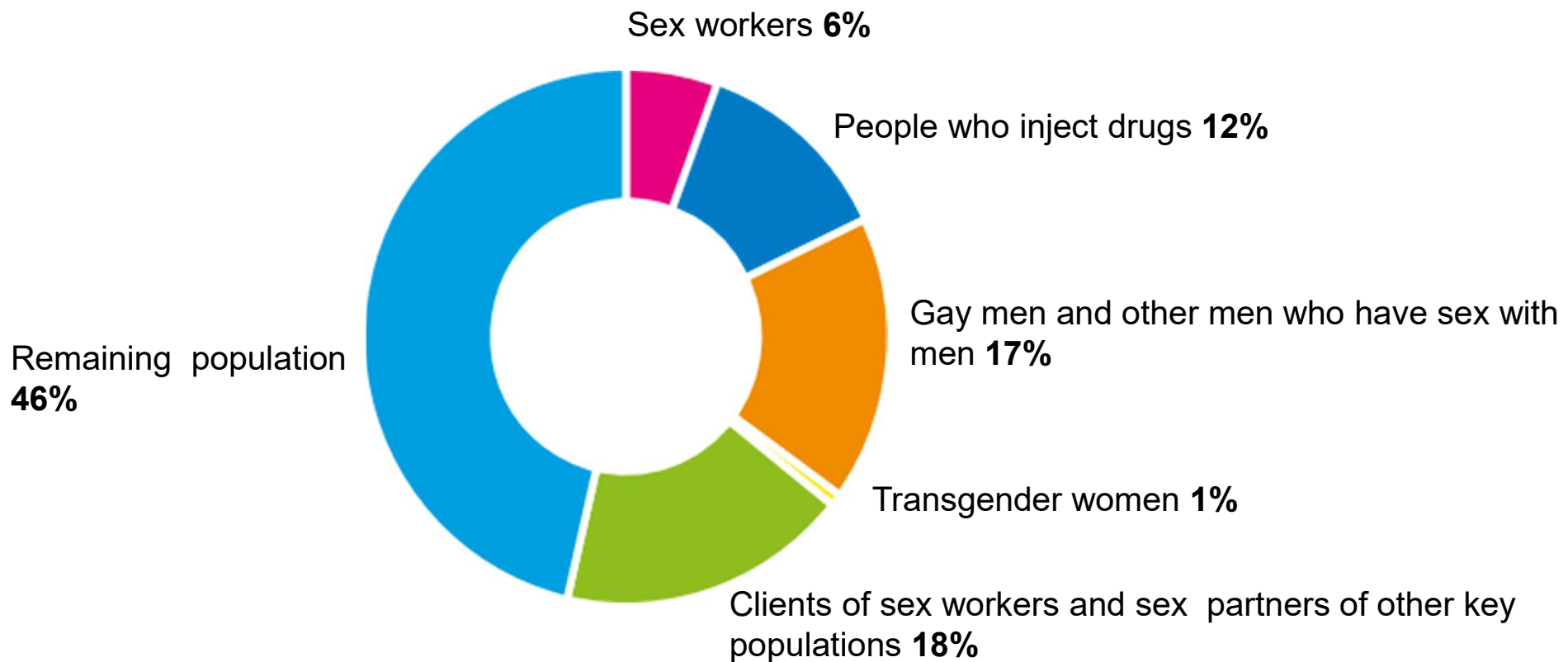
- Fully reflect priority prevention interventions prevention in upcoming National Strategic Plans and fund them
- Increase the number of key populations who access customized HIV prevention services
- Scale up prevention programmes for adolescent girls, young women and key populations to ensure coverage of all high burden locations
- Develop and update strategies and an essential package for prevention among key populations
- Expand and incorporate PrEP
- Ensure engagement of civil society organizations and communities in the design delivery and monitoring of HIV prevention programmes
- Improve data systems and establish mechanisms for monitoring and evaluating the multisectoral prevention response
- Ensure Universal Health coverage and integration of HIV with sexual and reproductive health services and rights

Commitments to adolescent girls and young women from GPC HLM

- Ensure sustainable financing for HIV prevention and SRHR for adolescent girls and young women (AGYW);
- Reduce unmet need for modern contraception;
- Ensure access for adolescents and youth to comprehensive and age-responsive sexuality education
- Address gender-based violence
- Address early un-intended pregnancies among schoolgirls
- Increase the number of VMMC as part of wider sexual and reproductive health service provision for men and boys
- Ensure meaningful engagement of young women leaders



Key populations and their partners and clients are over half (54%) of new HIV infections and they are important in all regions



Source: UNAIDS 2019 estimates.

Examples of commitments to key populations from GPC HLM

Brazil: Increase the number of people (MSM, sex workers, transpeople and sero discordant partners) who access free-of charge PrEP in the country, via its Unified Health System, from 12k (baseline: Aug/19) to 24k, until December 2020.

Ghana: Roll out PrEP for people at high risk of HIV infection as part of a combination HIV prevention package by the end of 2020.

Namibia: Domesticating the SADC key populations strategy, including creation of a key populations workplan and services for transgender people.

Pakistan: Scale up community-based HIV prevention model through high impact interventions related to Sexual and Reproductive Health, Sexually Transmitted Infections, initiation of PrEP as well as safe and healthy practices for key populations

10-point Action Plan to address the factors holding us back

Leadership | Funding | Implementation at Scale | Legal, Policy & Structural barriers



Coalition countries have transformed how they frame, measure and organise national prevention responses

10-point Roadmap Actions	Timeline	Country																											
		Angola	Botswana	Brazil	Cameroon	China	Cote d'Ivoire	D.R. Congo	Eswatini	Ethiopia	Ghana	India	Indonesia	Iran	Kenya	Lesotho	Malawi	Mexico	Mozambique	Myanmar	Namibia	Nigeria	Pakistan	South Africa	Uganda	Ukraine	Tanzania	Zambia	Zimbabwe
1. Needs assessment	2017																												
2. Prevention targets																													
3. Prevention strategy																													
4. Policy reform																													
5a. KP size estimates																													
5b. Defined KP package																													
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5d. AGYW package																													
6. Capacity & TA plan																													
7. Social contracting																													
8. Financial gap analysis																													
9. Strengthen monitoring																													
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Done
 In progress
 Not done
 Not applicable
 Progress not yet submitted

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II Acceleration on the ground: progress in implementation

Countries are acting to remove legal and policy barriers to effective HIV prevention

Examples:

- Sexual Offences and Domestic Violence Act enacted in **Eswatini** in 2018
- Diverse gender identities recognized in **Argentina, Brazil, Chile, Pakistan** and **Uruguay**
- Key population strategy in **SADC region** calling for law reform
- Laws criminalizing HIV non-disclosure and transmission invalidated in **Colombia** and **Veracruz State of Mexico**

Progress has been made in implementing key elements of combination HIV prevention

Pillar	Indicator	2017	2018	2020 target
HIV prevention AGYW	% of high-incidence locations covered	<25%	34%	90%
Key populations	% of key populations <i>who reported receiving at least two prevention services in the past three months</i>	SW: 46% MSM: 28% PWID: 30%	SW: 47% MSM: 33% PWID: 32%	90%
Condoms	% of condom distribution need met	49%	55%	90%
VMMC	% of VMMC target achieved	6.7 million	11.0 million	+25 million VMMCs
PrEP	Number of people on PrEP	47,000	87,000	3 million (~2.25M GPC)

1. AGYW and their male partners

Declines in new HIV infections among AGYW in Lesotho through increasing coverage of a combination of programmes

90%
coverage
target



100%

- ❖ All 10 high AGYW HIV incidence districts in Lesotho have programmes providing comprehensive package of services for AGYW (DREAMS and GF packages)
- Condom use among young women 15-24 with NR partner increased
- Increased comprehensive HIV knowledge
- Increased HIV testing, linkage to care & ART
- Community approach to PrEP including PrEP clubs – generation Aspire to increase retention

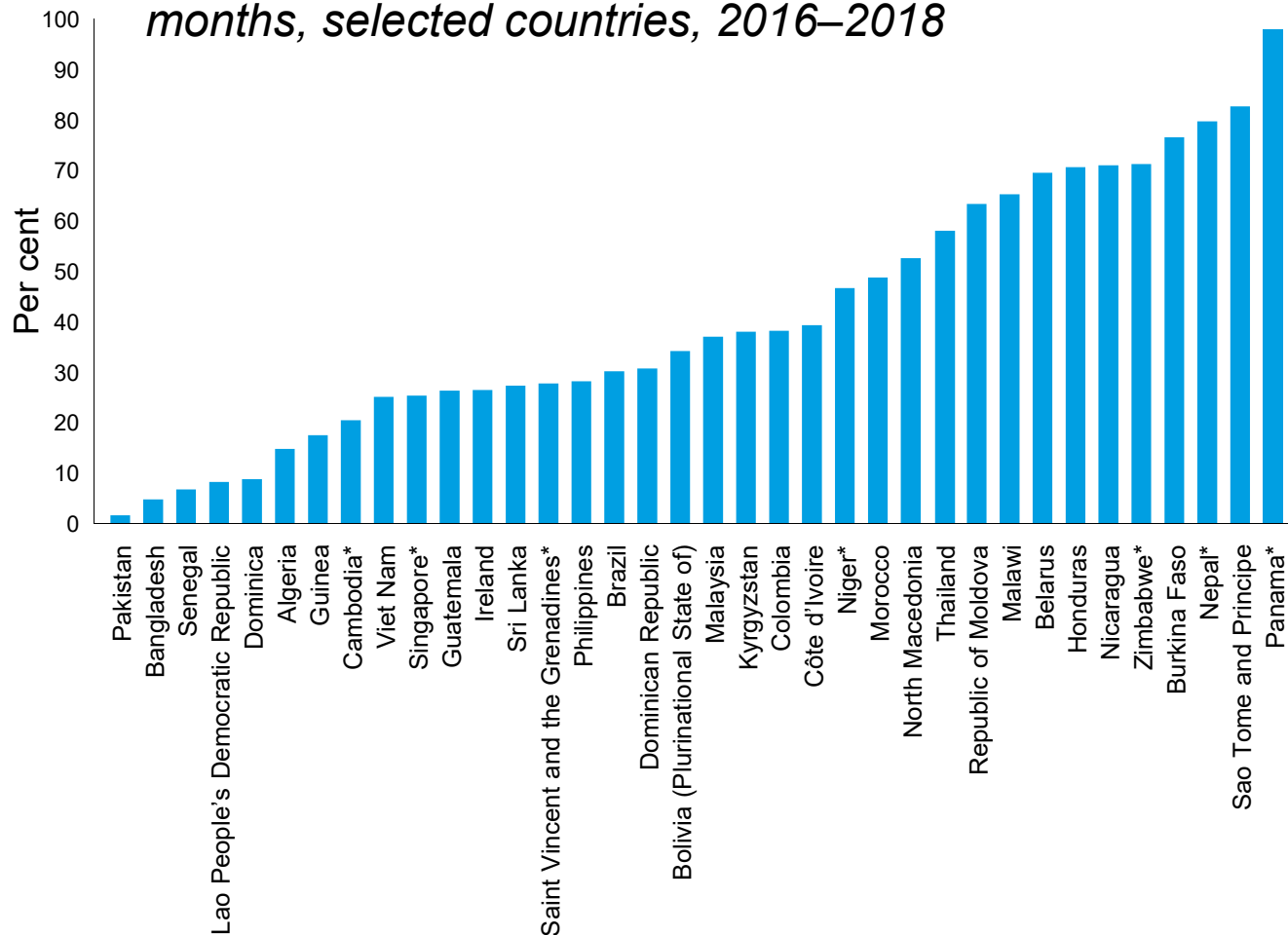
Overall, in **Lesotho** has reduced HIV infections by **41%** among adolescent girls and young women

2. Key Populations

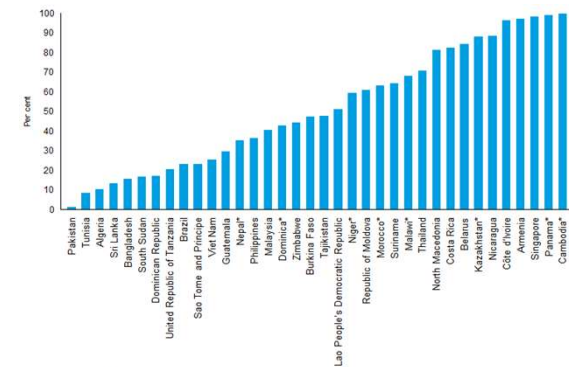
We know what works, but have not taken it to scale

Coverage of HIV prevention for key populations

Percentage of gay men & other MSM who reported receiving at least two prevention services in the past three months, selected countries, 2016–2018

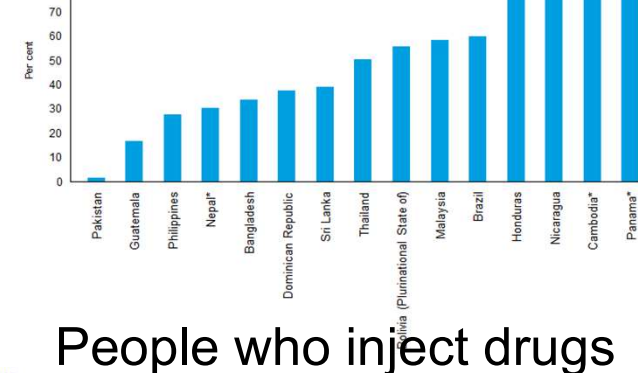


Sex workers

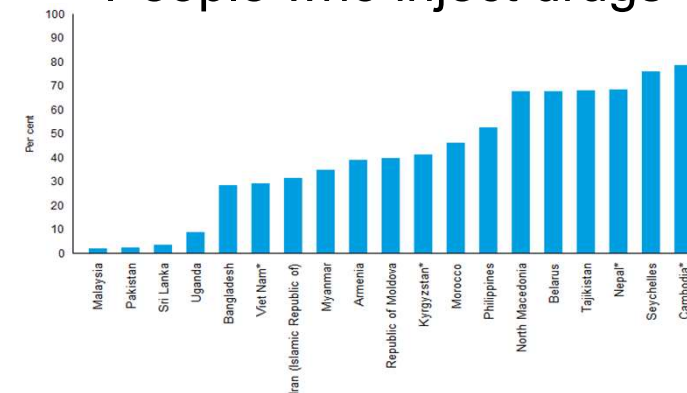


Source: Global AIDS Monitoring, 2016–2018.

Transgender people



People who inject drugs



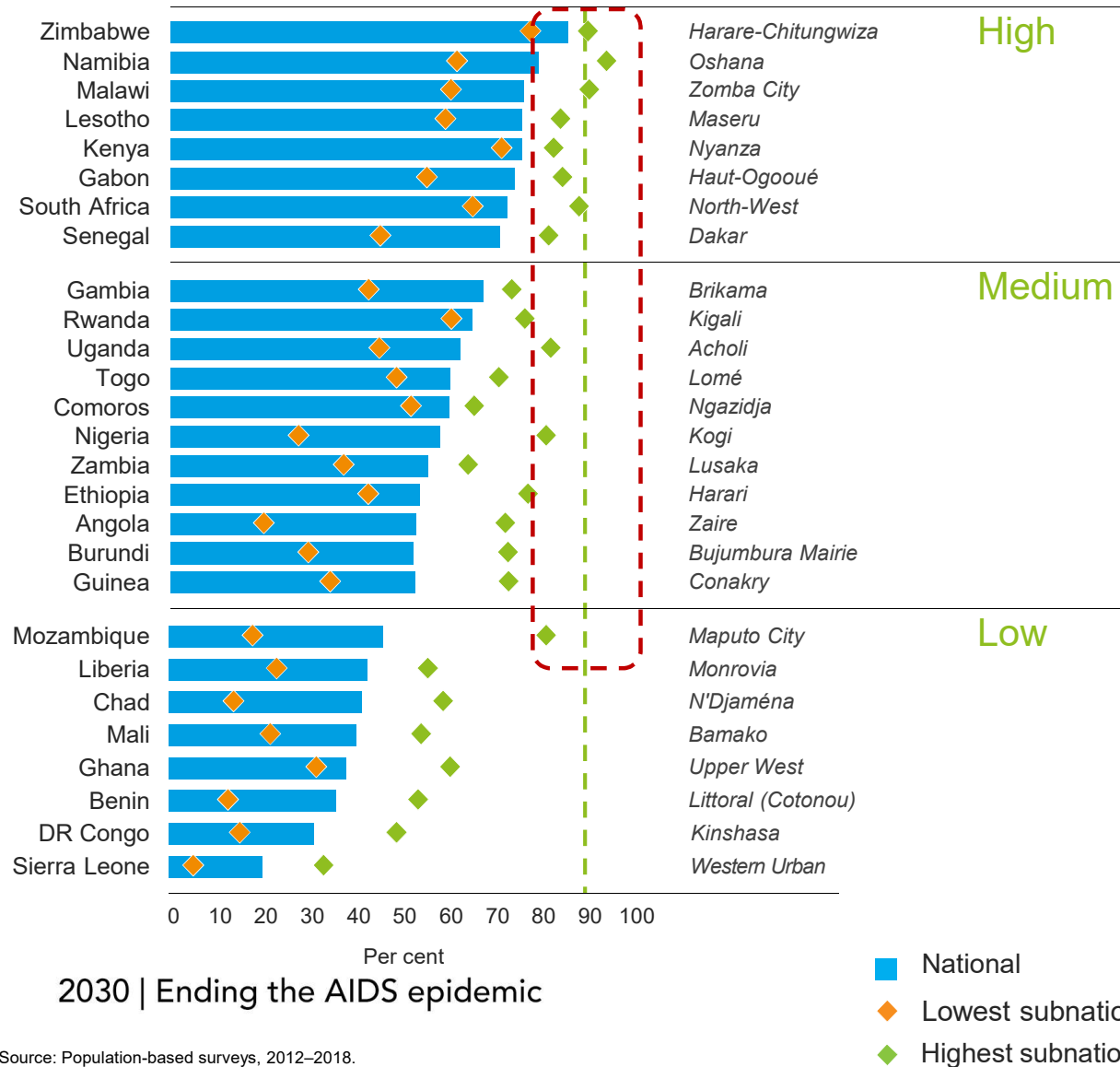
Source: Global AIDS Monitoring, 2016–2018.

3. Condoms

High condom use is achievable with active promotion and distribution

Condom use among men (aged 15–49 years) at last high risk sex with a nonmarital, noncohabiting partner, national and subnational, countries with available data, 2012–2018

Global target (90%)



Successful programmes go beyond procurement

- **Government leadership** and market stewardship;
- Analytics, **population and location** data
- Investment in **demand** creation;
- **People-centered** programmes with non-health sector access
- Better, more targeted, provider-initiated **efficient public sector** distribution
- **Link** to HTS/ART, new prevention options and broader HIV, SRH

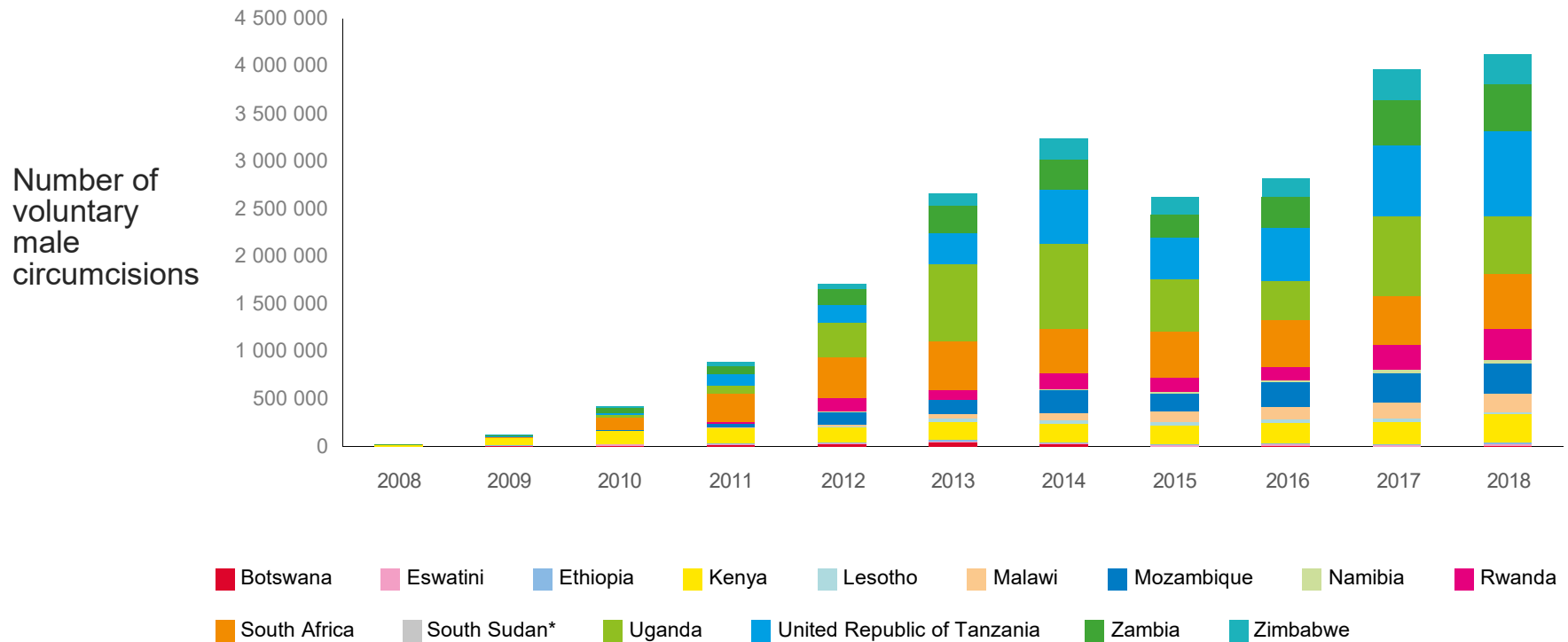


4. Voluntary medical male circumcision

Rate of scale up differs by country

11 million VMMC performed in 15 priority countries since 2016

Annual number of voluntary medical male circumcisions, 15 priority countries, 2008–2018



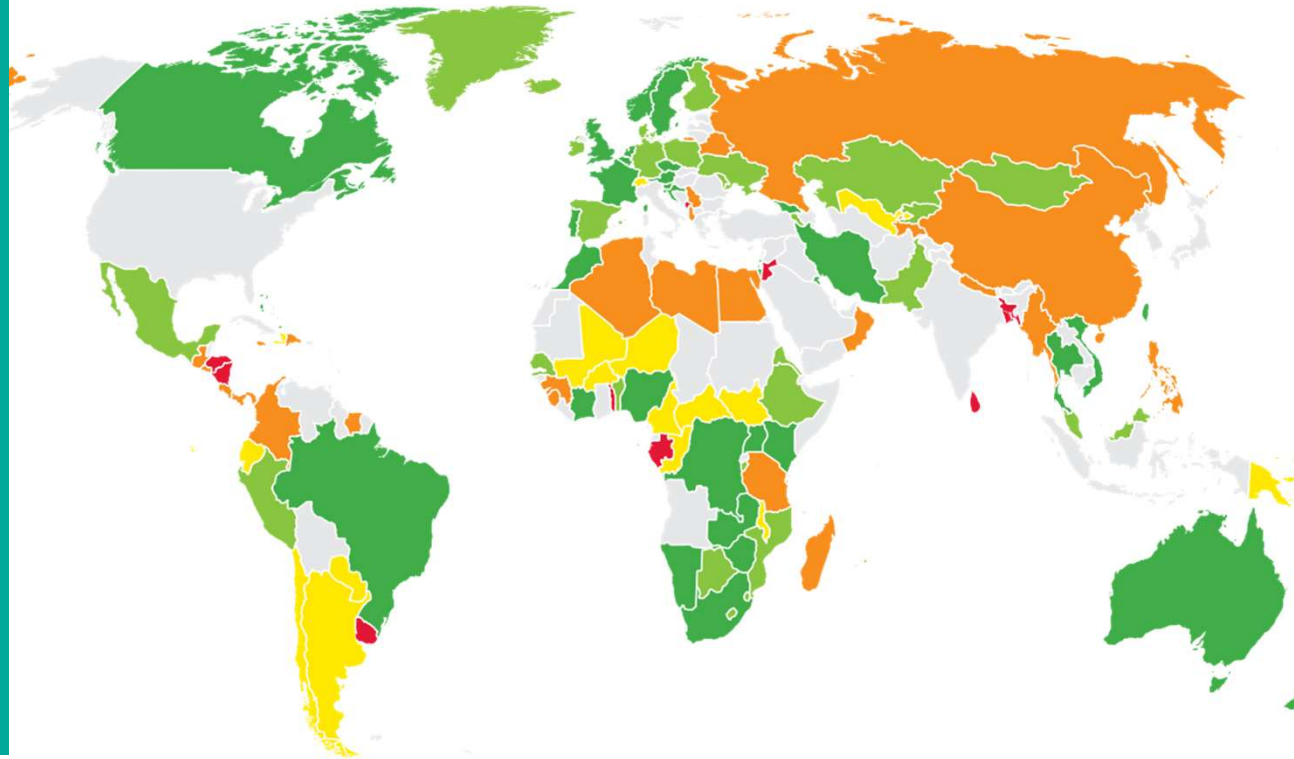
*South Sudan has only recently initiated a pilot voluntary medical male circumcision programme, and data were reported for the first time in 2018. This is the reason for low numbers.

Source: 2019 Global AIDS Monitoring.

5. ARV-based prevention

Countries are gradually adopting pre-exposure prophylaxis (PrEP) as an additional HIV prevention option, but access to PrEP in LMICs less is than 5% of target

Adoption of World Health Organization PrEP recommendation and guideline development, 2018



New South Wales, Australia:

- 3700 people on PrEP vs. 295 new diagnoses;
- Only 2 new infections among PrEP users*
- New diagnoses declined to 221 (25% reduction in 12 months)

28 GPC countries

- 87,000 on PrEP vs. 1.2 million new HIV infections
- Namibia, Kenya, Lesotho with highest coverage

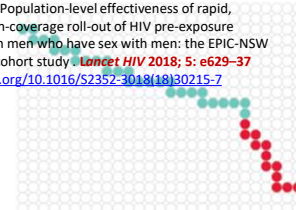
- Recommendation adopted, guidelines implemented
- Recommendation adopted, no guidelines developed
- Recommendation not adopted

- Recommendation adopted, guidelines pending
- Recommendation adoption is pending
- No data

Source: 2019 National Commitments and Policy Instrument; Hodges-Mameletzis I, Dalal S, Msimanga-Radebe B, Rodolph M, Baggaley R. Going global: the adoption of the World Health Organization's enabling recommendation on oral pre-exposure prophylaxis for HIV. Sex Health. 2018;15(6):489-500.

Global HIV Prevention Coalition

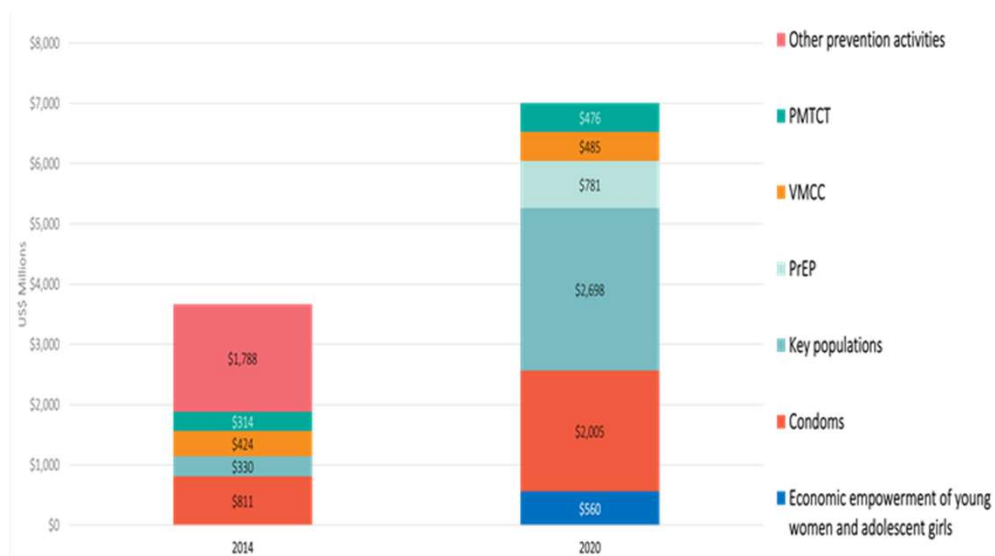
* In 4100 person years
 Grulich et al. Population-level effectiveness of rapid, targeted, high-coverage roll-out of HIV pre-exposure prophylaxis in men who have sex with men: the EPIC-NSW prospective cohort study. *Lancet HIV* 2018; 5: e629-37
[http://dx.doi.org/10.1016/S2352-3018\(18\)30215-7](http://dx.doi.org/10.1016/S2352-3018(18)30215-7)



HIV prevention financing: Fast-track financing targets were missed

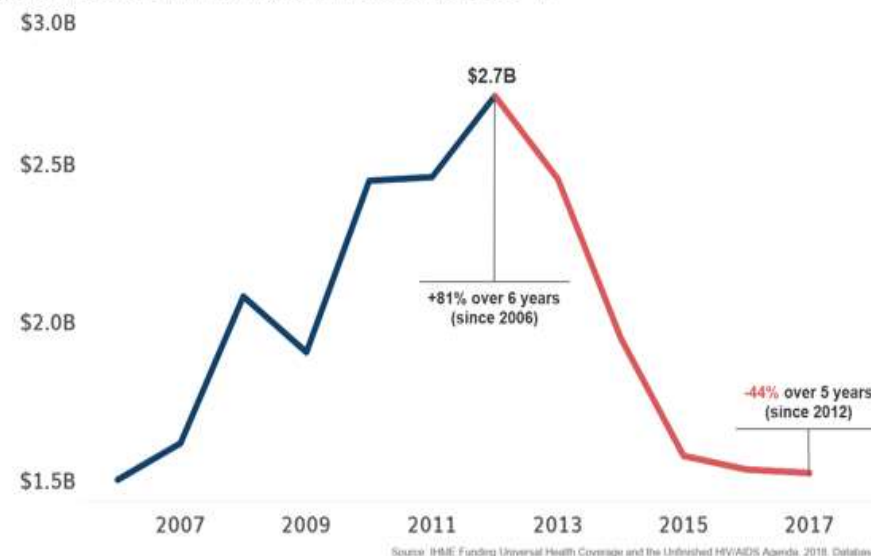
Reducing new infections NOW reduces treatment and other costs in FUTURE

Estimated resources for Prevention in LMIC 2014 reporting vs need to meet 2020 targets



Global DAH Funding for HIV prevention

Figure 4. Global DAH funding for HIV prevention 2006-17



- International development assistance for HIV prevention decreased by 44% between 2012 and 2017
- Major opportunity afforded by successful Global Fund replenishment to address gaps in investment
- BUT: Limited domestic financing needs to be addressed

Joint UN support to addressing major barriers

Leadership

- 28 Global Prevention Coalition countries reinvigorated prevention
- Regional prevention initiatives strengthened (AU, SADC, MENA ...)

Address policy barriers

- Barriers to prevention among key populations removed
- Global Partnership on Stigma and Discrimination
- Gender-responsive HIV programming

Implement at scale

- Support to priority programmes by UNAIDS and cosponsors):
- Young women (UNESCO, UNFPA, UNICEF)
 - Key populations (UNDP, UNFPA, UNODC, WHO)
 - Condoms (UNFPA)
 - VMMC (WHO)
 - PrEP (WHO)

Close financing gaps

- Framing of Global Fund support to HIV prevention
- Technical assistance to prevention requests and grants
- Support to country financial gap analyses

Conclusions & Recommendations

- **Accelerate** for key locations and key/priority populations needs to remain the core focus of the HIV prevention response
- Strengthen **community platforms** for prevention, testing, treatment and rights – and take them to scale
- Re-enforce **multisectoral response**: recruit non-health leadership & investments
- Increase **financing** and efficient **resource allocation**: Develop a full expression of prioritized need
- Build critical **prevention capacities** at country level: oversight, technical, implementation and programmatic monitoring

Suggested Decision Points

Recalling the decisions from the 41st PCB meeting on the “Follow-up to the thematic segment on HIV prevention 2020: a global partnership for delivery”:

- Take note of the 2018 progress report on HIV prevention 2020
- *Request* Member States, with CBOs, civil society and partners to accelerate prevention responses in line with 2016 commitments and lessons learned through the Coalition and focus countries
- *Request* that Member States, with the support of the Joint Programme, move expeditiously to reflect full expressions of priority needs of HIV prevention in funding proposals
- *Request* the Joint Programme to support countries in developing and implementing comprehensive HIV prevention plans, and report back on progress to the PCB in 2020

THANK YOU