

37th PCB, 26 October 2015



Overview

1 Strategy process: in short

2 Consultation process: January–August

Consultation process: September–October

4 UNAIDS 2016–2021 Strategy





Development process: in short

In light of the 35th PCB request to update and extend the Strategy

10-month intensive multistakeholder consultation process

January-August

September – October

Large-scale, formal regional, virtual and global consultations

Small group and bilateral consultations and negotiations



January – August

Consultation process

Objectives

Design a consultative, accessible process



Be in "listening mode"

Generate shared understanding of priorities, opportunities and challenges; how to accelerate progress



Consultations

7 regional consultations + 2 in North America +1 inWestern Europe

1st virtual consultation, 280 inputs, 50 countries, 5 languages

Global consultation with 50 MS; 4 PCB NGOs

2nd virtual consultation, 140+ inputs, 4 languages

Outputs

Synthesis and annotated outline delivered to 36th **PCB**



First draft (Aug 3) for consultation



Objectives

Technically validate Strategy and framework

Identify and generate consensus on challenging issues

Produce widely-owned Strategy that is focused, bold, with best practices



September – October

Consultation process

Consultations

Briefings with each constituency

Missions Briefing with EXD

HRRG

Ongoing collaboration with PCB Chair & Co-Chair

CCO

Outputs

Second/final draft, Sept 17 (ahead of Missions Briefing)

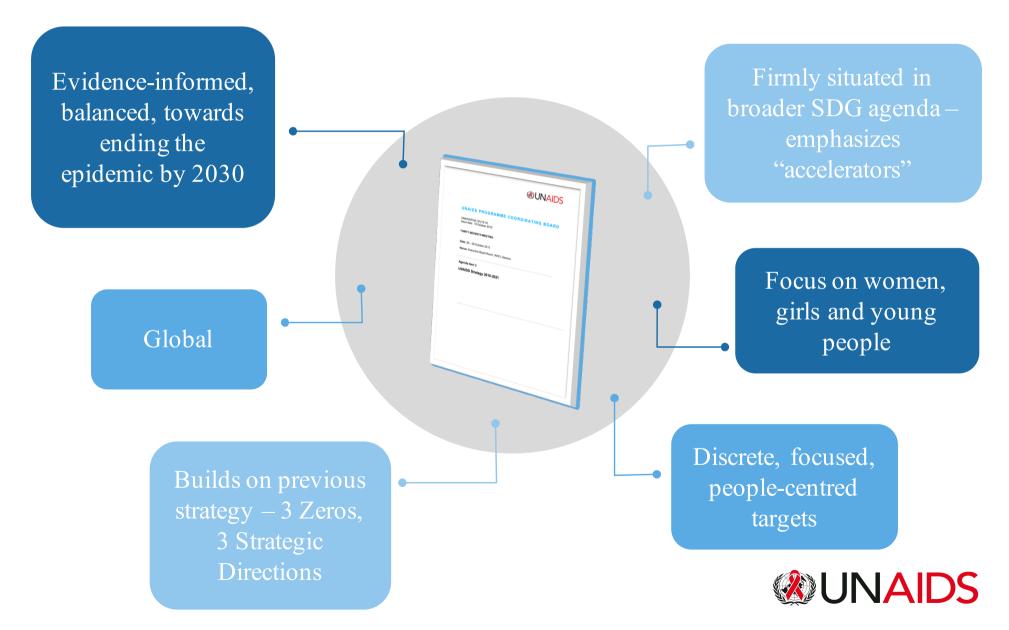
Final Strategy, 19 Oct



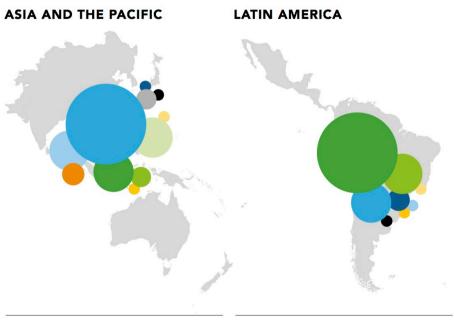


Key features

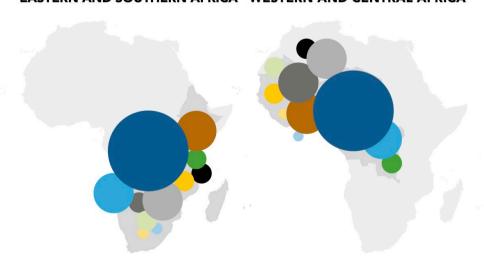
UNAIDS 2016 – 2021 Strategy

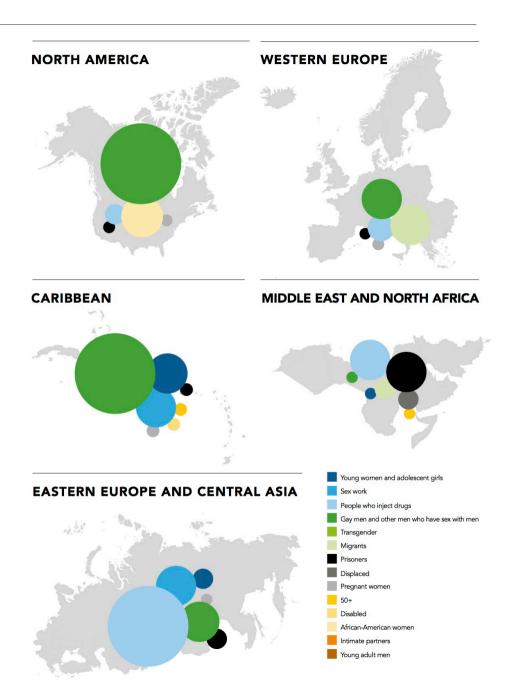


The importance of location and population



EASTERN AND SOUTHERN AFRICA WESTERN AND CENTRAL AFRICA





Strategy Contents

Executive summary

1. Building on solid foundations

- A defining moment
- On solid ground: unprecedented progress under 2011–2015 Strategy
- Imperative for change

2. Time to Fast-Track: strategic leadership agenda

- By Fast-Tracking today, we can end the AIDS epidemic by 2030
- Result areas to Fast-Track the response and accelerate progress on SDGs

3. How UNAIDS will deliver on this Strategy

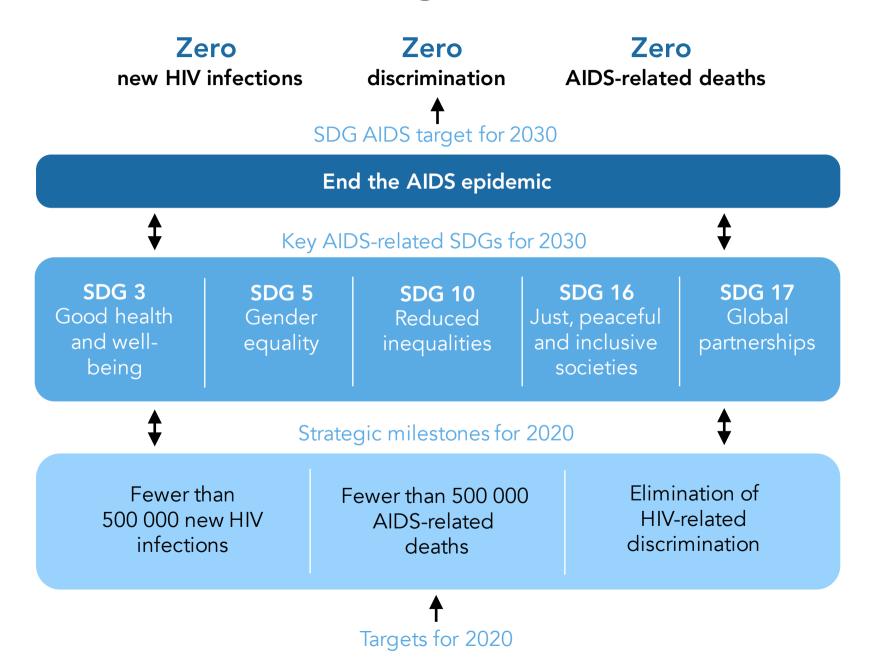
- Optimizing the comparative advantages of the Joint Programme
- Results and accountability of the Joint Programme

Annexes:

- 1. Overview of the process of developing the UNAIDS 2016–2021 Strategy
- 2. Enhancing the leadership role of the regions: regional profiles
- 3 Illustrative list of indicators
- 4. Glossary
- 5. Abbreviations



Goal and target framework



10 targets for 2020

90% of PLHIV (children, adolescents and adults) know their status; 90% PLHIV who know their status are receiving treatment; 90% of people on treatment have suppressed viral loads

Zero new HIV infections among children, and mothers are alive and well

90% of young people are empowered with the skills, knowledge and capability to protect themselves from HIV

90% of women and men, especially young people and those in high-prevalence settings have access to HIV combination prevention and SRH services

27m additional men in high-prevalence settings are voluntarily medically circumcised, as part of integrated SRH services for men 90% of key pops, incl. SWs, MSM, PWID, TG people, and prisoners, as well as migrants have access to HIV combination prevention services 90% of women and girls live free from gender inequality and gender-based violence to mitigate risk and impact of HIV

90% of people living with, at risk of and affected by HIV report no discrimination, esp. in health, education and workplace

Overall financial investments for the AIDS response in low- and middle-income countries reach at least USD 30 billion, with continued increase from the current levels of domestic public sources

75% of people living with, at risk of and affected by HIV, who are in need, benefit from HIV-sensitive social protection

Result areas 1 and 2

Good health and well-being SDG 3



Children, adolescents and adults
living with HIV access testing, know
their status and are immediately
offered and sustained on affordable
quality treatment

- Testing
- Infant diagnostics
- Services upon diagnosis
- Regular monitoring
- Affordable treatment
- Humanitarian emergencies
- R&D



New HIV infections among children eliminated and their mother's health and well-being is sustained

- Immediate treatment for pregnant women
- HIV, SRH, FP, TB, MCH integrated
- Services for male partners



Result areas 3 and 4

Reduced inequalities SDG 10



Young people, especially young women and adolescent girls, access combination prevention services and are empowered to protect themselves from HIV

- Independent and equal access to services
- Combo prevention, including primary
- 20 billion condoms
- 27 million VMMC
- CSE
- Young people engaged



Tailored HIV combination prevention services are accessible to key populations, including SWs, MSM, PWID, transgender people, and prisoners, as well as migrants

- Combo prevention, including primary
- New media
- 3 million on PrEP
- Harm reduction
- Crisis affected populations
- PLHIV and key pops engaged



Result area 5

Gender equality SDG 5



Women and men practice and promote healthy gender norms and work together to end gender-based, sexual and intimate partner violence to mitigate risk and impact of HIV

- Women, girls, men, boys involved
- Supportive laws, policies and practices
- [SRR]
- Economic empowerment
- Women, including WLHIV, engaged



Result area 6

Just, peaceful and inclusive societies *SDG 16*



Punitive laws, policies, practices, stigma and discrimination that block effective responses to HIV are removed

- Punitive laws removed
- Know your rights
- Access to justice
- Non-discrimination in health, workplace, education
- Violence against key pops prevented



Result areas 7 and 8

Global partnership



AIDS response is fully funded and efficiently implemented based on reliable strategic information

- > \$31b available
- Sustainability transition plans
- Strategic info
- Efficiencies
- Technology transfer
- Support to civil society



People-centred HIV and health services are integrated in the context of stronger systems for health

- HIV-sensitive UHC
- Social protection
- Community systems
- HR for health
- Procurement and supply chain



Thank YOU