UNAIDS PROGRAMME COORDINATING BOARD WORKING GROUP

THEMATIC SEGMENT:

HIV and men, in all their diversity, how can we get our responses back on track?

MEETING SUMMARY: SECOND MEETING OF THE WORKING GROUP

DATE: Friday 4 November 2022

MEETING AGENDA

- Welcome and introduction
- Presentation of and discussion on the first draft of the background note on "HIV and men, in all their diversity, how can we get our responses back on track?"
- Presentation of and discussion on the zero-draft agenda for the thematic half-day
- Next steps

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SUMMARY

1. Welcome and introduction

Mr. Morten Ussing, Director Governance, UNAIDS Secretariat, welcomed the PCB working group to its second meeting for the preparation of the thematic segment of the 51st PCB (16 December 2022) on HIV and men, in all their diversity, how can we get our responses back on track?.

Mr. Ussing mentioned that it was likely to be the last meeting of the working group given the compressed timeline that the group had been working with.

The Secretariat reminded 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. The thematic segment is one half day (in virtual and hybrid mode) on the PCB agenda and allows for an in-depth discussion on a specific programmatic area within the AIDS response. The members of the working group play an important role in shaping the day and the documentation that informs it.

Mr. Ussing underlined that the call for submission of good practices had been sent out on 27 October 2022 to the PCB members and all permanent missions and that 6 case studies had been received to date. All regions were expected to be well represented. A selected set of case studies would be used to illustrate key parts of the background note. Mr. Ussing recalled that all case studies would be compiled into a conference room paper that would

accompany the background note. As had been mentioned at the last meeting, UNAIDS uses case studies to inform other publications, extending the impact beyond the thematic segment.

The Secretariat confirmed that the main expected outcome of the second meeting was to listen to the comments, inputs and suggestions from the working group on the draft background note and zero-draft agenda as well as suggested speakers.

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

Lycias Zembe, Adviser, HIV Prevention Coalition and Adolescent Health at the UNAIDS Secretariat, thanked the working group members for the comments they made after the first meeting. He proceeded to introduce how the draft background note had been expanded following the comments received, on the basis of the below structure:

- I. SUMMARY
- II. INTRODUCTION

WHY FOCUS ON MEN?

Men's vulnerabilities to HIV

Fully including and involving men and boys is essential to ending AIDS

WHY IS PROGRESS SLOWER ON MEN'S HIV?

WHO ARE WE TALKING ABOUT?

BACKGROUND NOTE STRUCTURE

III. BUSTING THE MYTHS, CHANGING THE NARRATIVES

MYTH: IF MEN GAIN. WOMEN LOSE. REALITY: IT'S NOT A ZERO SUM GAME

MYTH: ONLY WOMEN ARE VULNERABLE. REALITY: MEN AND BOYS ARE VULNERABLE TOO

MYTH: ONLY WOMEN AND GIRLS FACE SEXUAL AND GENDER BASED VIOLENCE. REALITY: MEN AND BOYS DO TOO.

MYTH: MEN ARE POOR HEALTH SEEKERS. REALITY: MEN ACTIVELY SEEK OUT HEALTH SERVICES

MYTH: MEN ARE ALL THE SAME. REALITY: MEN ARE DIVERSE AND THERE ARE MANY WAYS TO BE A MAN

IV. PROGRESS TOWARDS GLOBAL TARGETS IN MEN LAGS BEHIND: GAPS AND CHALLENGES

GAPS IN TESTING

GAPS IN PREVENTION

GAPS IN TREATMENT AND OUTCOMES

HUMANITARIAN CRISES, HIV AND MEN

WHO IS LEFT OUT?

Black and indigenous men

Heterosexual men

Clients of sex workers

Male sex workers

Gay men and other men who have sex with men

Transgender men

Men with disabilities

V. WHAT WORKS?

MEN AND CONDOMS

NEEDLES, SYRINGES AND OPIOD SUBSTITUTION THERAPY

PRE-EXPOSURE PROPHYLAXIS WITH KEY POPULATIONS

DECRIMINALISATION AND HUMAN RIGHTS SUPPORT

COMMUNITY-LED RESPONSES

IMPROVING HEALTH SERVICES FOR MEN AND BOYS

VOLUNTARY COUNSELLING AND TESTING AT WORK

INCLUDING MEN AND BOYS IN HUMANITARIAN RESPONSES

SHIFTING GENDER NORMS AND INEQUALITIES, AND TACKLING STIGMA AND HOMOPHOBIA

INVOLVING MEN IN PREVENTING VERTICAL TRANSMISSION OF HIV FROM PARENT TO CHILD

MALE FOCUSSED INTERVENTIONS

Voluntary Medical Male Circumcision

Community leadership and participation by gay men and men who have sex with men

Rapid initiation of ARTs with MSM in West Africa

The Botswana Combination Prevention Project – universal testing and treating with targeting of men

U=U messaging in South Africa with a focus on men

Virtual campaign to optimize male-friendly service in Nigeria

Working with religious and traditional leaders

VI. RECOMMENDATIONS AND WAYS FORWARD

THE GLOBAL MEN AND HIV TECHNICAL WORKING GROUP

GUIDANCE ON MEN, BOYS AND HIV AND RELATED ISSUES

Male Engagement in HIV Testing, Treatment and Prevention in Eastern and Southern Africa, A framework for action

HIV self-testing at workplaces: approaches to implementation and sustainable financing

Improving men's uptake of HIV testing and linkage to services

HIV prevention, testing, treatment, care and support in prisons and other closed settings: a comprehensive package of interventions

Guidance on supporting male victims of sexual violence

RECOMMENDATIONS

Boost men's use of health services and make services more easily available to men.

Create a supportive legal and policy environment

Mobilize communities and societies

3. Discussion on the first draft

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

Member States

- Commended the quality of the draft background note and expressed gratitude for thoroughly incorporating the feedback received into the draft background note.
- Suggested to consider how we leverage communication strategies. Does this document highlight this for integrated programme strategies?
- Highlighted to address all aspects covered in the background note from a gender perspective.
- Suggested to include information on local epidemics.

• Stressed the importance of giving a unit cost for the "what works" chapter so that member states could implement some of these interventions.

Cosponsors

- Commended the team for putting the paper together in such a short time while reflected the comments provided.
- Explained that more will be sent to build on the life course approach in writing.
- Suggested reworking the tone so that the paper reads less "men vs women", having more gender analysis and tweaking the language accordingly. In addition, the myth about women being vulnerable might not have data supporting it.
- Recalled that Condomize has been a successful campaign for a long time, possibly to be included in the "What works" chapter.
- Proposed to include more on what men can do to help with gender equality, especially against gender-based violence.
- Appreciated the table on page 10 that provides the reader with "what people think and then what men really think", and asked if more could be teased out.
- Suggested adding more on policy vs access to HIV prevention and treatment services.
- Proposed to emphasize populations deprived of liberties which include many men.
- Stressed that greater men involvement in HIV prevention would be helpful. Men could help access services and care for children living with HIV as well.
- With regards to the "men vs women" approach, suggested not pitching men and against women, rather look at broader systemic elements that toxify and could make men problematic.

PCB NGO Delegation

- Commended the Secretariat for this draft for the background note which strongly supports the rationale and the justification for the case of a thematic segment to address solely the needs of men.
- Suggested highlighting the coherence between the description of men, the
 challenges they face and the successful examples that are presented. There are
 populations (men in closed settings, Transgender men, Male Sex Workers & their
 Clients and Men Using Drugs, etc.) that are mentioned throughout the document as
 being left behind, but are not addressed in the proposed male-focused interventions.
- Articulated that interventions need to be innovative, quoting the 50th PCB Chair "we need to move the conversation forward in the global HIV-response". There are several Differentiated Service Delivery Models and Community Led Interventions that not only showcase clear added value and demonstrate successful recognition and engagement of the community as an integral part of the health workforce, especially on models that bring care out of the health facilities and into community based organizations.
- Stressed the aspect of regional representation. If most new HIV infections outside sub-Saharan Africa occur in men and boys, then we should showcase successful examples of other global south regions that can be replicated.
- Emphasized the need for innovative interventions in real-life contexts that can lead to real-life recommendations, to be supported by clear recommendations focusing on its implementation (vs. an outcome that just involves a lot of policies, roadmaps, etc.).
- Mentioned that they would appreciate this session to lead to a better monitoring of programme interventions and for data to be further disaggregated beyond the limits of the figures of "male and female", which aren't even trans-sensitive concepts to

- begin with. Data needs to reflect diversity, because only this will allow future program interventions to be tailored accordingly to the needs of these very diverse groups, but that can't happen without measuring them first.
- Advised to include recommendations around societal enablers such as human rights, criminalization, especially oriented to programming and funding in order to get national programs to invest into providing services.

In response to the comments and observations made, the Secretariat said that the aspects highlighted were to a great extent captured in some of the case studies, through the multicomponent question. This way, we have a means of finding out whether programme is linked to the whole cascade or only one aspect. We also asked there why an intervention had worked, which is helpful to be able to decide whether or not to replicate a programme elsewhere.

Mr Zembe referred to the Condomize campaign and ask if a case study on it could be submitted through the case study form. He further stressed that enablers and monitoring would be added to the background note. He also highlighted that the point on how to leverage communication strategies would need to be strengthened in the paper. Mr Zembe also called for participants to submit their case studies. The template also includes questions on cost, an important aspect to take into consideration.

He concluded by mentioning that a policy scan in eastern and southern Africa had showed that if men were not in policies, they were unlikely to be in programmes too. Men involved in prevention of mother to child transmission, for instance, led to better treatment outcomes for children and mothers.

4. Presentation of the draft agenda for the thematic segment

Mr Zembe presented the draft agenda for the thematic segment. He stated that it was standard practice to have keynote addresses after an introduction by a moderator, who would provide strategic vision regarding the session objectives. With regards to the moderator of the session, he said that it was proposed to have Mr Wole Ameyan from WHO.

The Secretariat indicated that Executive Director of UNAIDS, Winnie Byanyima had been suggested as a keynote speaker. The keynote speakers would be followed by a session overview of the main highlights from the thematic segment background note, with a focus on the data and evidence around HIV, and men. The speaker had not yet been identified.

The Secretariat suggested having two panel discussions. The first would focus on clarifying men's diversity, highlighting the different data showing the gap among men in HIV services across the HIV prevention, testing, treatment, and care cascade showing why a focus on men and HIV, and busting the myths regarding men and changing the narrative about men and health seeking behaviours.

The second proposed panel was to focus on showcasing some good best practices on engaging men to enhance HIV services uptake and better health outcomes. The panel will try and cover the different aspects of the identified gaps across the HIV prevention, testing, treatment, and care cascade as well as human rights and gender aspects.

Mr. Zembe explained that the concluding part would provide an overview of the day and highlight key recommendations from the thematic segment.

5. Discussion on the zero-draft agenda

Cosponsors

- Stressed that fewer objectives would be better fitting for a half day thematic segment.
- Emphasized the need for speakers to talk from a gender equality rather than a service delivery perspective.
- Recommended achieving a good geographical balance in the distribution of speakers throughout the half day.
- Highlighted that there was an opportunity to synchronize the thematic segment with World AIDS Day 2022 as some aspects were also going to be linked to men and boys.
- Enquired on whether or not the PCB field visit, to be held in the margins of the PCB meeting in Chiang Mai, would constitute a linkage to the topic of the thematic segment.
- Offered to consider representation from the Caribbean in the agenda.

PCB NGO Delegation

- Civil Society representatives thanked and appreciate the light planned to be given
 to the identification of men in all of their diversity. They felt that it should be these
 populations themselves who should speak for themselves on their challenges and
 opportunities and that the conversation should be led from the perspective of the
 community.
- Stressed that getting the responses back on track does not depend only on addressing issues of men and HIV in all their diversities. Therefore, they suggested that the second panel should heavily focus on showcasing best practices, contributions and recommendations to transform men's narrative, the gaps identified and the structural barriers that distance them from accessing a good quality of life.
- regarding the keynote addresses, highlighted that the NGO delegation would like the PLHIV/civil society global leader to be representative of different intersectionalities.

In response to the comments and observations made, the Secretariat thanked the members for their suggestions. With regards to including as many qualified speakers in the agenda as possible, the Secretariat said that people could be offered to speak from floor as well, if it was not possible to fit them in the agenda formally. Regarding the concern related to the Global Fund vs PEPFAR both being options for speakers, it was indicated that we could try and have both, since we could have one speak from floor, highlighting the need for programme funders to be involved in the session.

6. Next steps

Mr. Ussing thanked the working group members for their comments and encouraged them to send written inputs by the following Wednesday 9 November 2022, on the background note and on the agenda and speakers. He also added that the Secretariat would pay attention to ensure regional and gender balance of the speakers in the agenda.

The Secretariat encouraged working group members to send speaker names as soon as possible, as the Secretariat needed to facilitate travel. The ambition was to have all speakers present in the room for the hybrid thematic segment.

The Secretariat thanked the working group for their time and excellent input and closed the meeting.

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