

What do the regional and country-level data tell us?

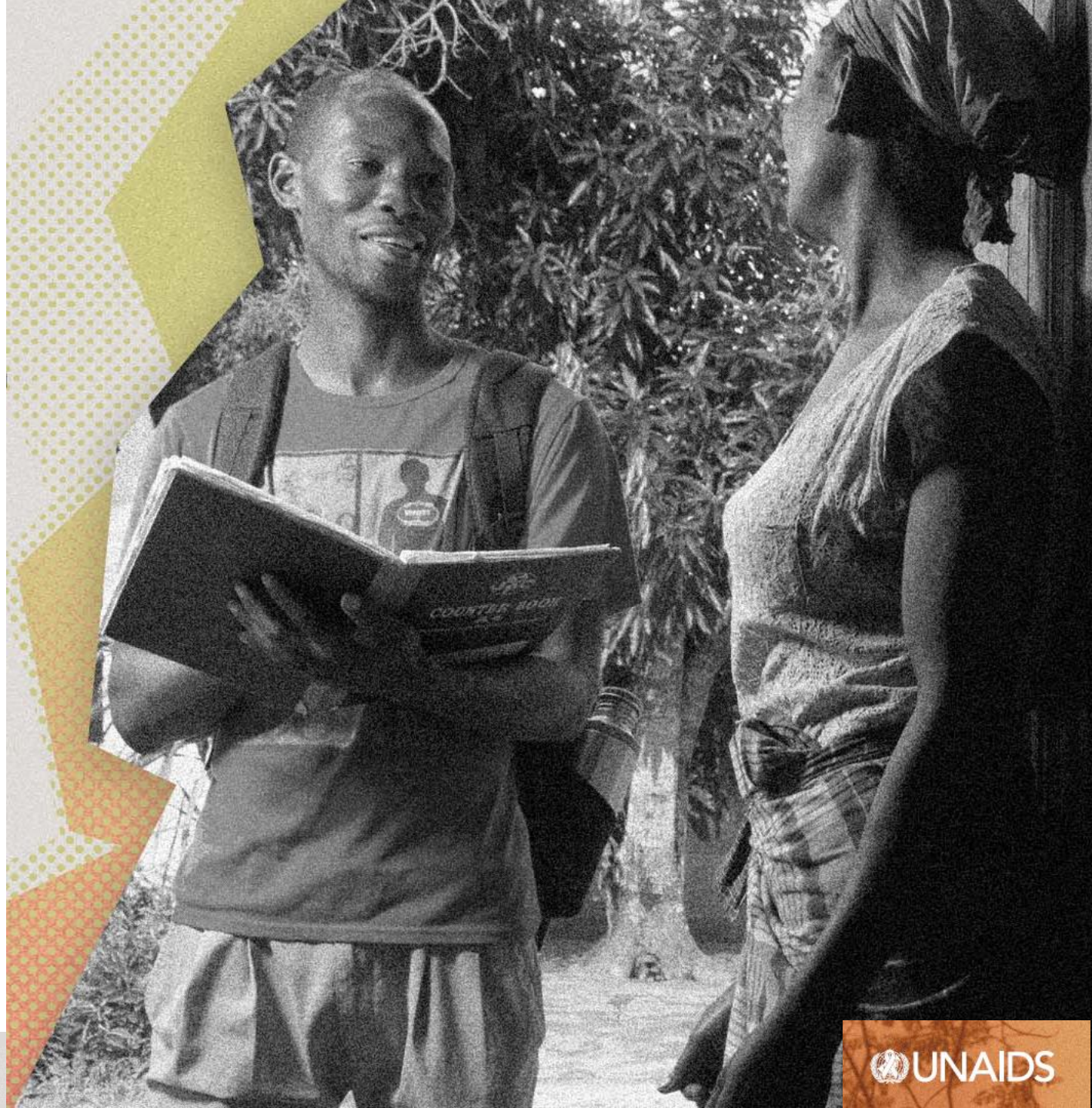
Are we listening?

Are we ACTING?

Leveraging data, technologies, & innovation to meet 2025 and 2030 goals

PCB THEMATIC SEGMENT
Session overview

Friday, 10 December 2021



END INEQUALITIES. END AIDS. END PANDEMICS.

UNAIDS

Background

- The HIV response has given rise to one of the most comprehensive, granular and timely data systems in global health and development.
- These data are not just for ‘reporting’ or ‘tracking’—they have informed major policy and program shifts and innovations.
- Data have served as a bedrock of the response, yet the collection and USE of HIV-related data has been uneven, underscoring the importance of engaging communities as essential partners.
- The global AIDS response gains have slowed in recent years; we must examine disparities and address persistent inequalities to accelerate.

What do the data tell us?

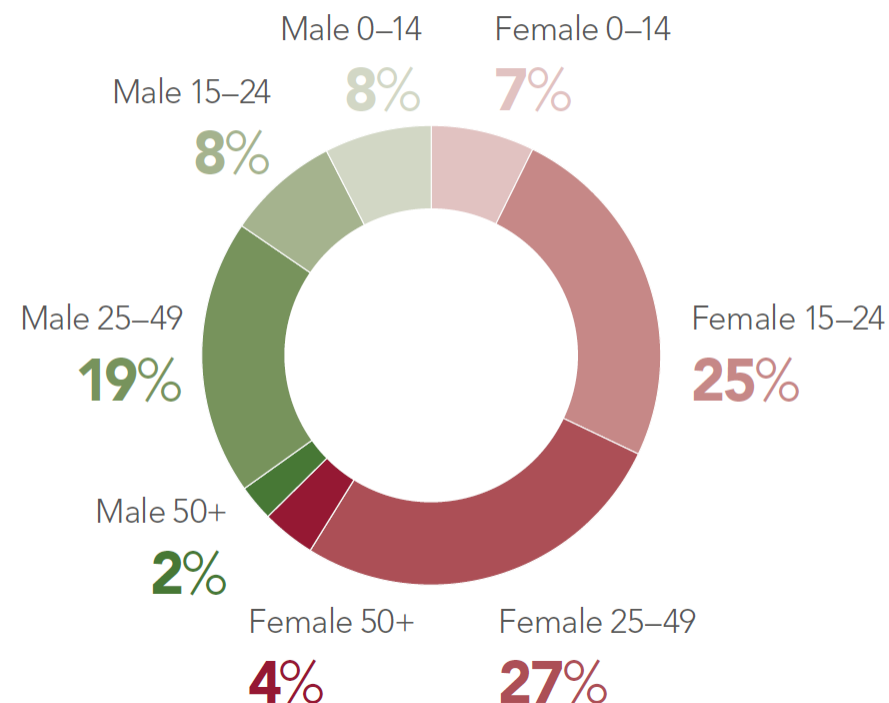
Data show history-making successes and stubborn challenges

- Country data reported to UNAIDS highlight both the history-making successes of the HIV response as well as persistent gaps, inequalities and shortcomings.
- At least 40 countries are on-track to achieve at least a 90% reduction in AIDS-related deaths by 2030, and 35 are on track to reduce new HIV infections by at least 90%.
- However, none of the Fast-Track 2020 targets set by the United Nations General Assembly in 2016 were achieved globally, and no region met the Fast-Track target of reducing new HIV infections by at least 75%.
- Uptake of combination HIV prevention remains wholly inadequate.

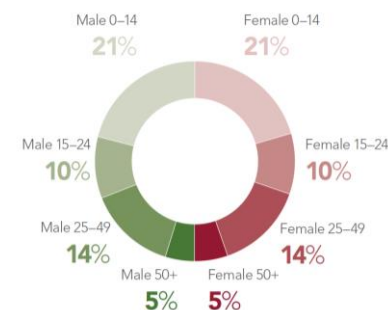
Data are exposing the multiple inequalities that are prolonging the pandemic

- Social and structural barriers continue to impede service uptake and increase HIV vulnerability.
- Violence against women has been linked to delays in HIV treatment initiation and worse treatment outcomes among women living with HIV.
- In sub-Saharan Africa, 6 in 7 new HIV infections among adolescents (aged 15–19 years) are among girls, and young women (aged 15–24 years) are twice as likely to be living with HIV than men.

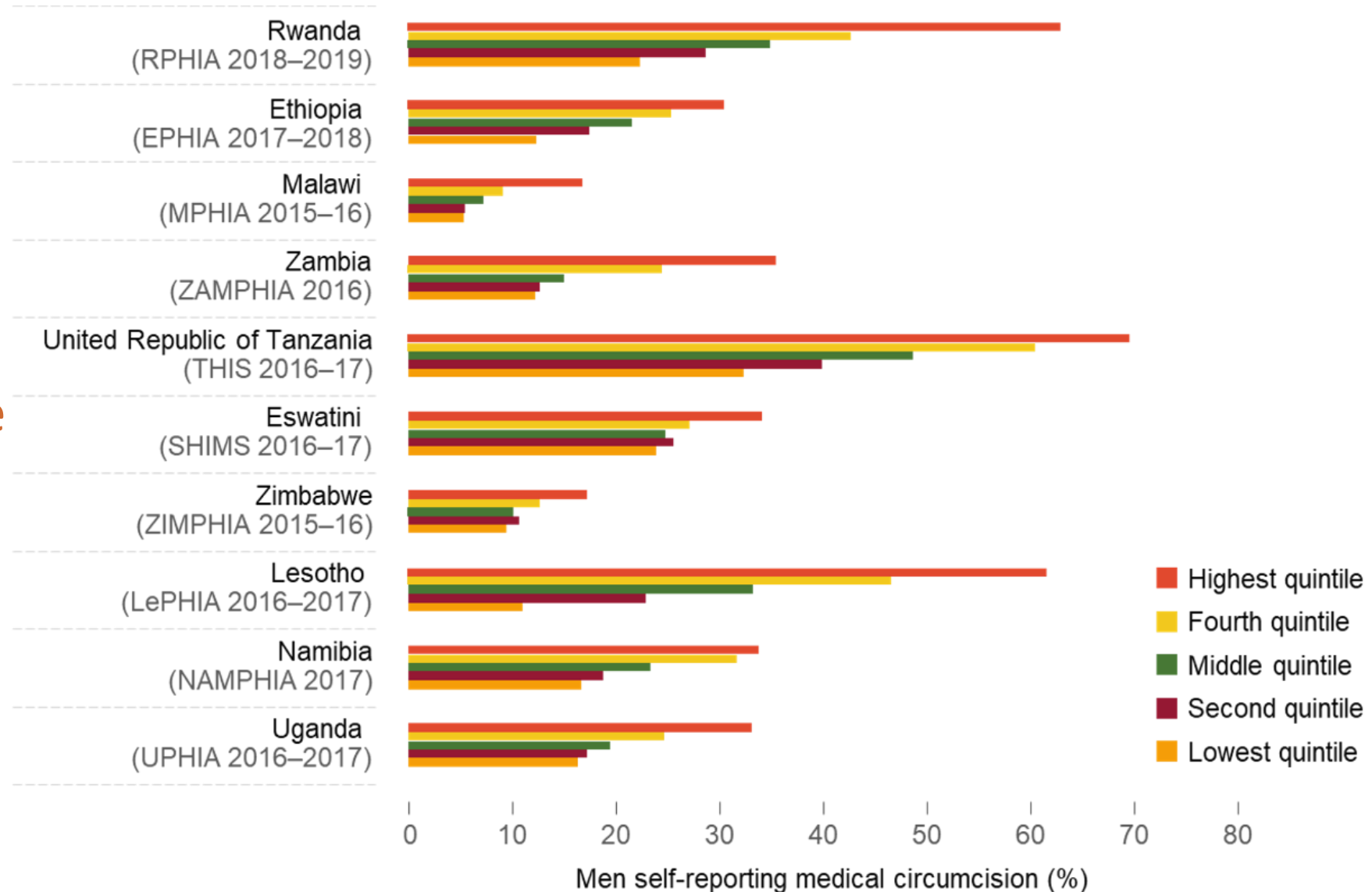
New HIV infections, sub-Saharan Africa



Population distribution, sub-Saharan Africa



Self-reported medical circumcision among men aged 15 years and older, by household wealth, priority countries with available data, 2015–2019



Intersecting inequalities, including Poverty, Lack of Schooling and Discrimination impede access to health and HIV services

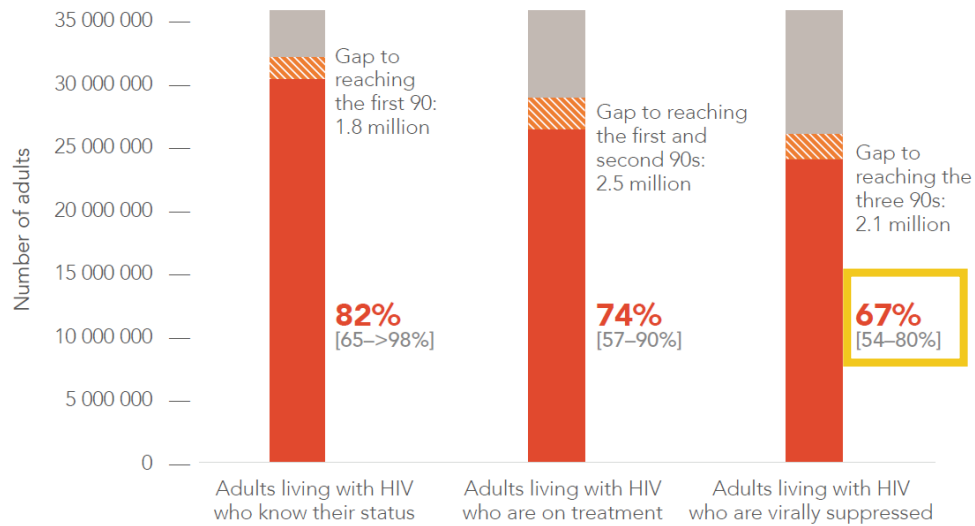
Are we listening?

Progress achieved by listening to the data

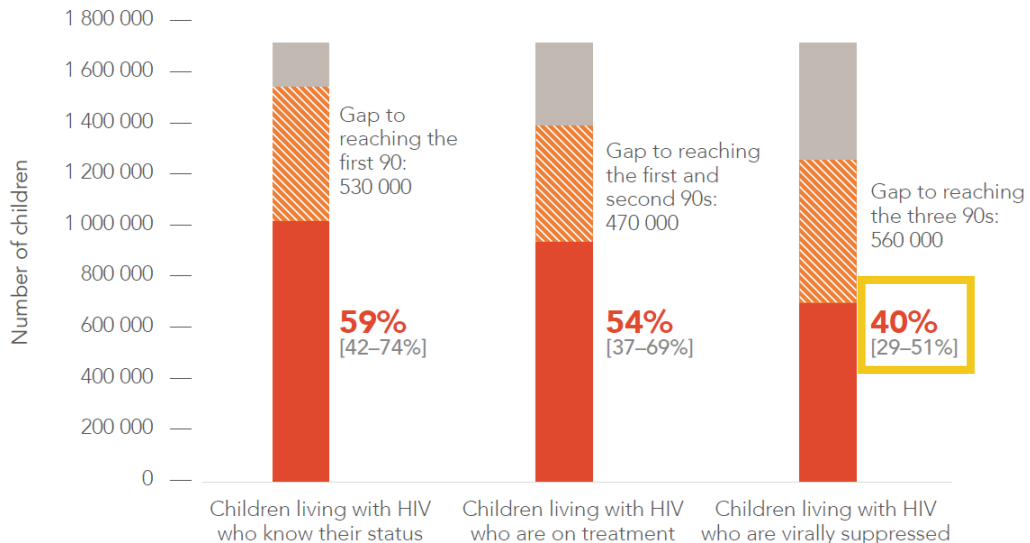
- Where countries and programmes have listened carefully to what the data are saying, high coverage of HIV services has been achieved.
- Data visualization innovations have aided countries in seizing opportunities for programmatic intervention that had previously been missed.
- Data regarding the epidemic's disproportionate impact on adolescent girls and young women has spurred increased action.

Failing to “listen” to data leads to persistent gaps in HIV responses... interrogating further leads to new solutions

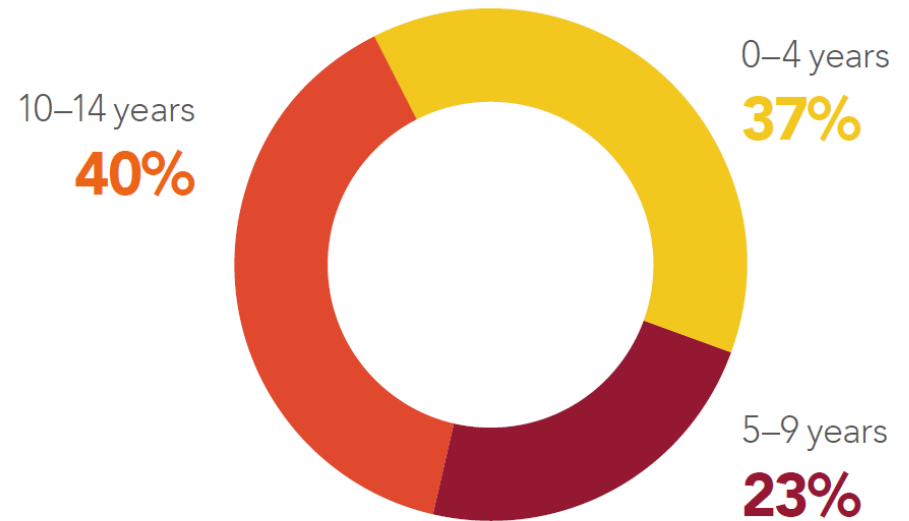
HIV testing and treatment cascade, adults, 2020



HIV testing and treatment cascade, children, 2020



Children living with HIV not receiving treatment, by age group, 2020

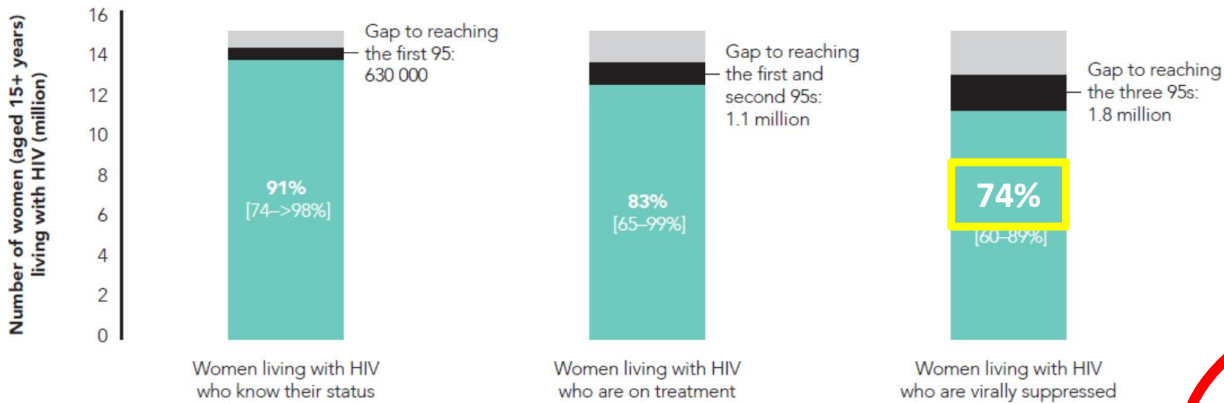


Source: UNAIDS epidemiological estimates, 2021 (<https://aidsinfo.unaids.org/>).

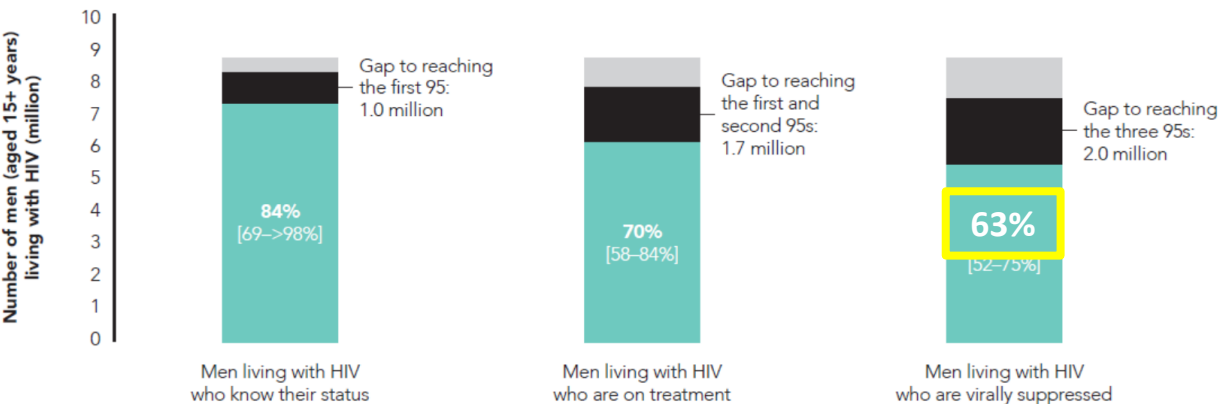
Changing approaches to reach men

HIV testing and treatment cascade, men vs women, sub-Saharan Africa, 2020

Women (aged 15+ years) living with HIV



Men (aged 15+ years) living with HIV

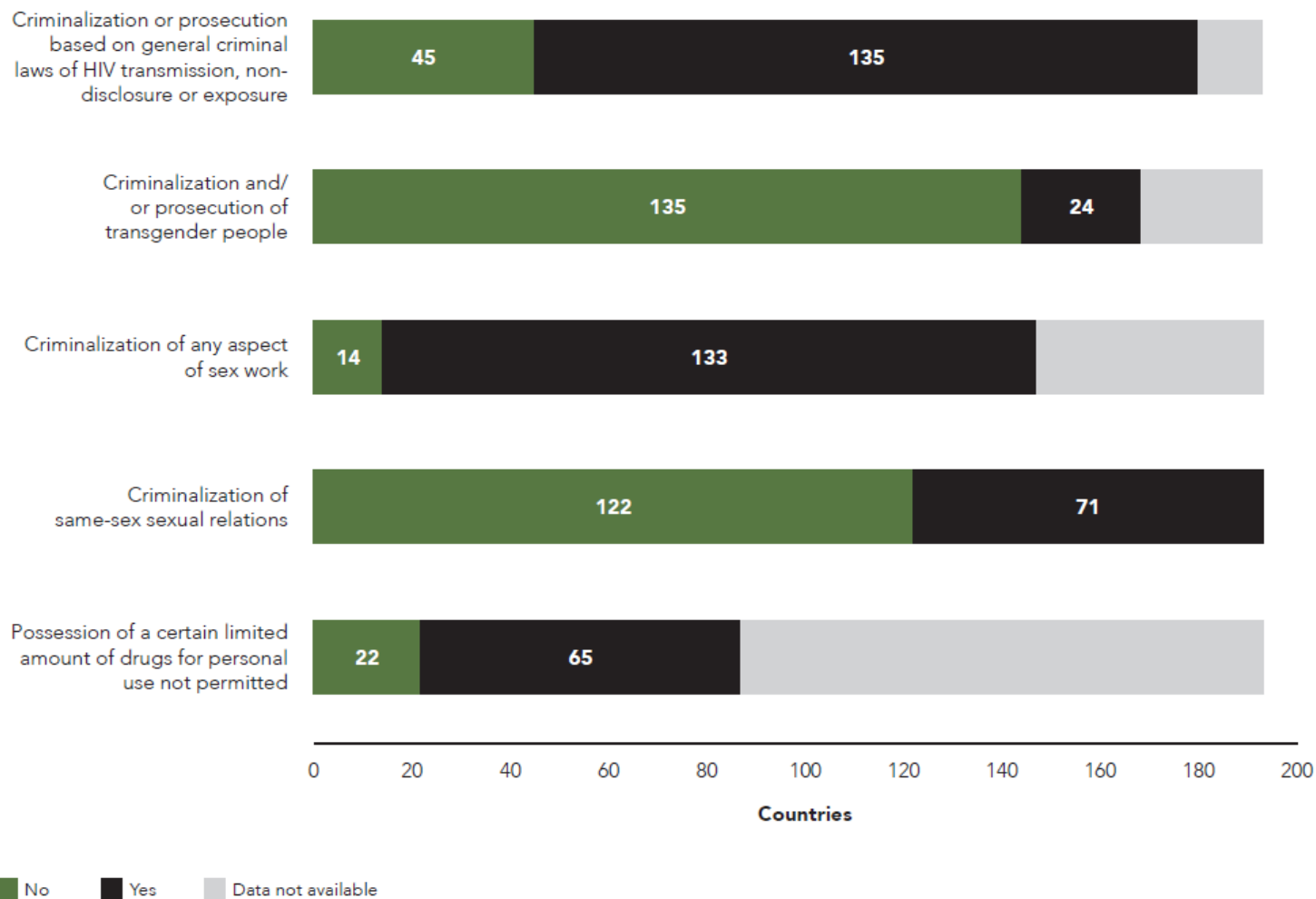


- Knowledge of HIV status, treatment coverage and viral load suppression lower in men compared to women across sub-Saharan Africa.
- Many analyses of this gap blame men for tough guy attitudes and toxic masculinities. Recent work reveals a more complex and nuanced picture.
 - Breaking the Cycle survey in South Africa.
 - Study of 36 villages in Malawi: 70% of men in need of HIV testing had visited a health facility in the previous 12 months, but only 7% of those men were offered HIV testing (Dovel 2021).
 - Most HIV services in southern Africa are organized around reproductive and child health services.

- Two client-centered approaches: MenStar Coalition and Coach Mplio
 - Client-centered approaches that incorporates peer support.
 - By September 2021, MenStar had linked nearly 1.3 million men to HIV treatment in southern Africa, with 91% of them suppressing their viral loads to very low levels.



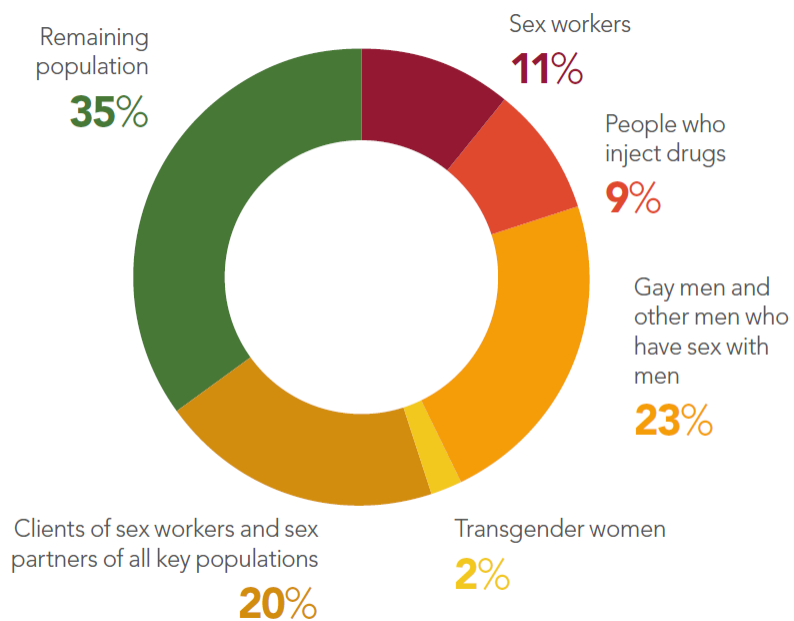
Countries with discriminatory and punitive laws, 2021



Sources: UNAIDS National Commitments and Policy Instrument 2017–2021 (<http://lawsandpolicies.unaids.org/>); supplemented by additional sources.

Failing to listen to data leads to persistent gaps in HIV responses

Distribution of HIV infections, by population, global, 2020

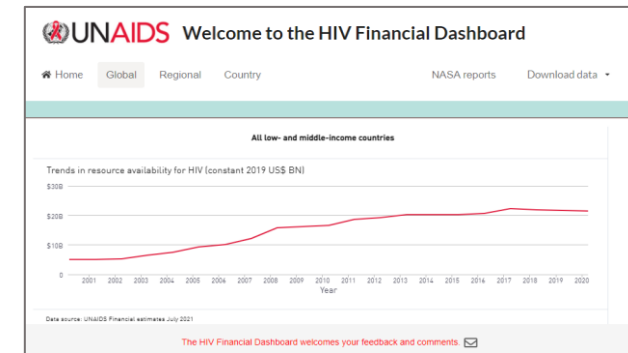
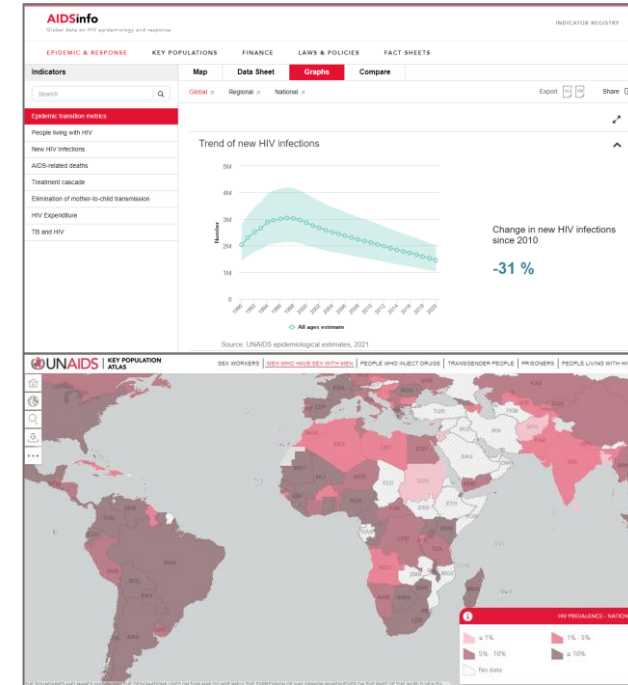
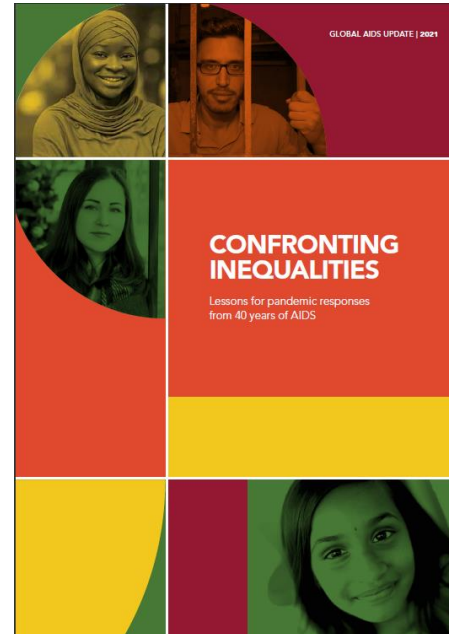
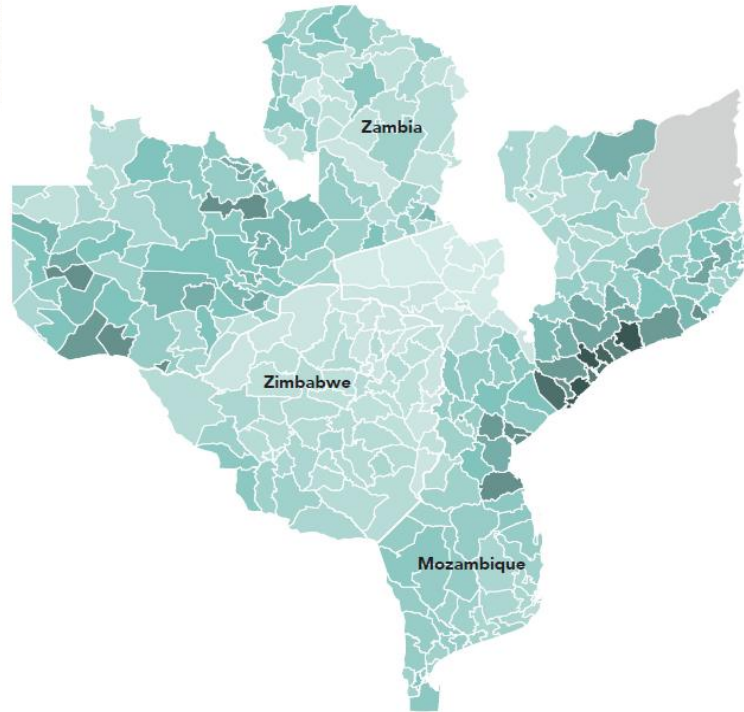
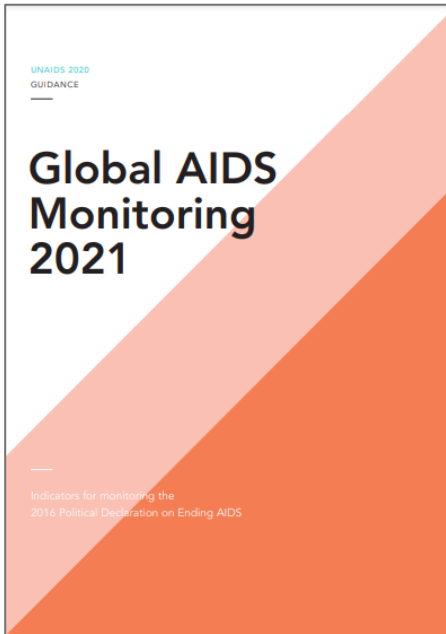


Source: UNAIDS special analysis, 2021.

UNAIDS: global monitoring and country support

AIDSinfo

UNAIDS leads the world's most extensive data collection on HIV epidemiology, programme coverage and finance and publishes the most authoritative and up-to-date information on the HIV epidemic.



END INEQUALITIES. END AIDS. END PANDEMIC.



**How can we leverage data and
related technology to meet our 2025
and 2030 goals?**

The way forward: effective use of data to drive progress

- Sustainable, routine national health information systems
- Focused surveys that reach those being left behind
- Community-generated data as a pillar of HIV response information systems
- Collect data that are geolocated and include age, sex and other relevant metrics
- Maintain the confidentiality of individuals' patient data, risk behaviours and other private information
- Set national targets for HIV responses that reflect the spectrum and granularity of global 2025 targets
- UNAIDS support to country monitoring and reporting

Thank you