

Global **AIDS** Response Progress Reporting

including the Additional UA Health Sector Indicators

Reporting overview for 2015

February 2015

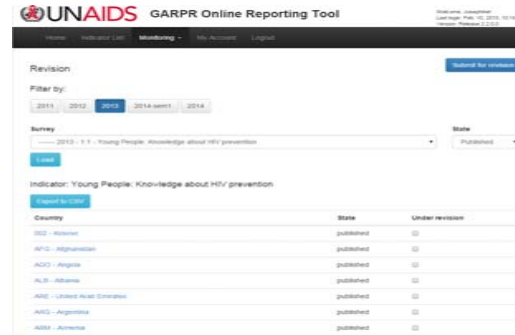
GARPR 2015 Reporting process

Reporting tool and indicator updates
(Oct 2013-Jan 2015)

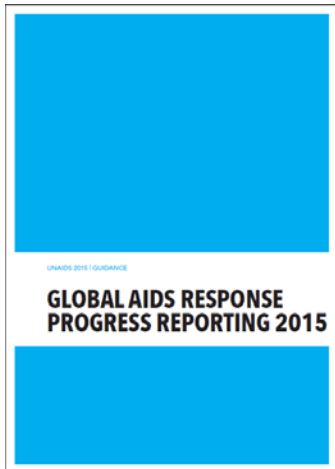


AIDS reporting tool
(Feb-Mar)

Data Validation and Revisions with countries
(April-June, 2014)



Guidelines out
(February 2015)



Draft
Spectrum
files
(31 Mar)

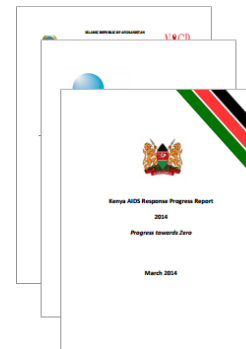
**GARPR
submission
deadline
(31 Mar)**



**Final
Spectrum
files
(10 May)**



**Country
Narrative
Reports
(15 Jun)**

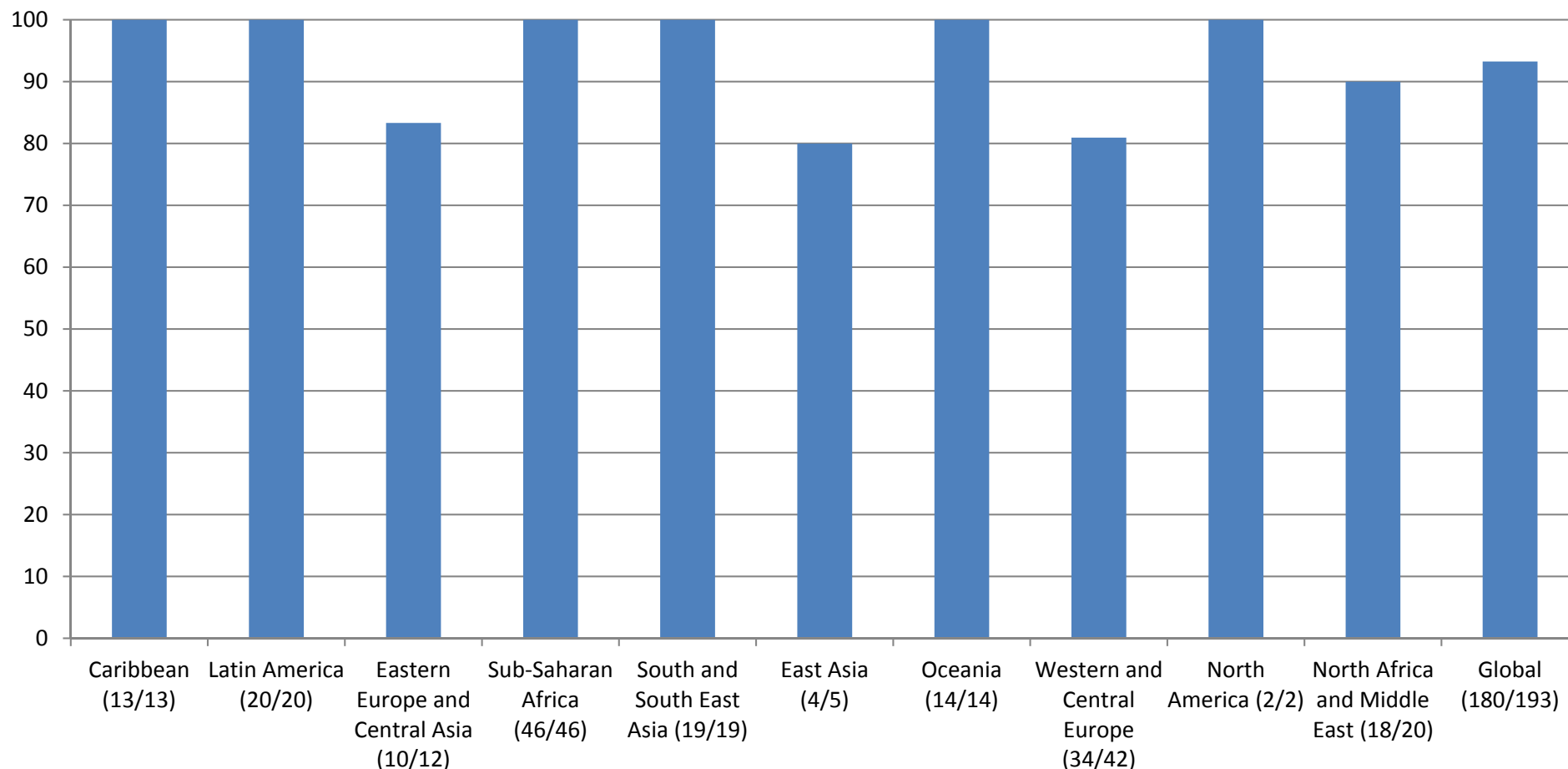


- Global AIDS Report
- World AIDS Day Report (Nov)
- Data in AIDSInfo



Global AIDS Reporting in 2014

– Response rates by region



Source: GARPR 2014 country reports

(Countries reporting / total number of UN Member States in the region)

High response rates across regions, and standardized validation process, enables utilization of AIDS data through global reporting mechanism.

Global targets for 2015



1. Halve sexual transmission of HIV by 2015
2. Reduce transmission of HIV among people who inject drugs
3. Ensure that no children are born with HIV by 2015
4. Increase access to antiretroviral therapy to get 15 million people on life saving treatment by 2015
5. Reduce TB deaths in people living with HIV by 50% by 2015
6. Reach a significant level of annual global expenditure (between \$22 billion and \$24 billion) in low and middle-income countries
7. Eliminate gender inequalities and gender-based abuse and violence and increase the capacity of women and girls to protect themselves from HIV
8. Eliminate stigma and discrimination against people living with and affected by HIV through promotion of laws and policies that ensure the full realization of all human rights and fundamental freedoms
9. Eliminate HIV-related restrictions on entry, stay and residence
10. Eliminate parallel systems for HIV-related services to strengthen integration of the AIDS response in global health and development efforts

Fast-Track Targets

by 2020

90-90-90

Treatment

500 000

New infections among adults

ZERO

Discrimination

by 2030

95-95-95

Treatment

200 000

New infections among adults

ZERO

Discrimination

How are indicators different in 2015? (1)

- **Key populations** (Indicators 1.7-1.14 and 2.1-2.5): provide disaggregation by site/administrative area
- **PMTCT** (Indicator 3.1) and **ART** (Indicator 4.1: since 2014 mid-year reporting, countries are asked to report any available subnational data
- **AIDS Spending** (Indicator 6.1): has a refined conceptual framework of the National Funding Matrix, with revised classification of AIDS programmes and a new National Funding Matrix.
- **Intimate Partner Violence** (Indicator 7.1): additional comment box included for data on gender-based violence towards women, men and key populations, including people living with HIV, that may be available for their country.

How are indicators different in 2015? (2)

- **Discriminatory attitudes** (Indicator 8.1): When using data from DHS question ‘Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had the AIDS virus?’ to respond to question 1, the numerator should only include “No” responses.
- **External economic support to the poorest households** (Indicator 10.2): has been updated with more information about the method of measurement.
- **Narrative report** is requested
- **National Commitments and Policy Instrument (NCPI)** is not requested

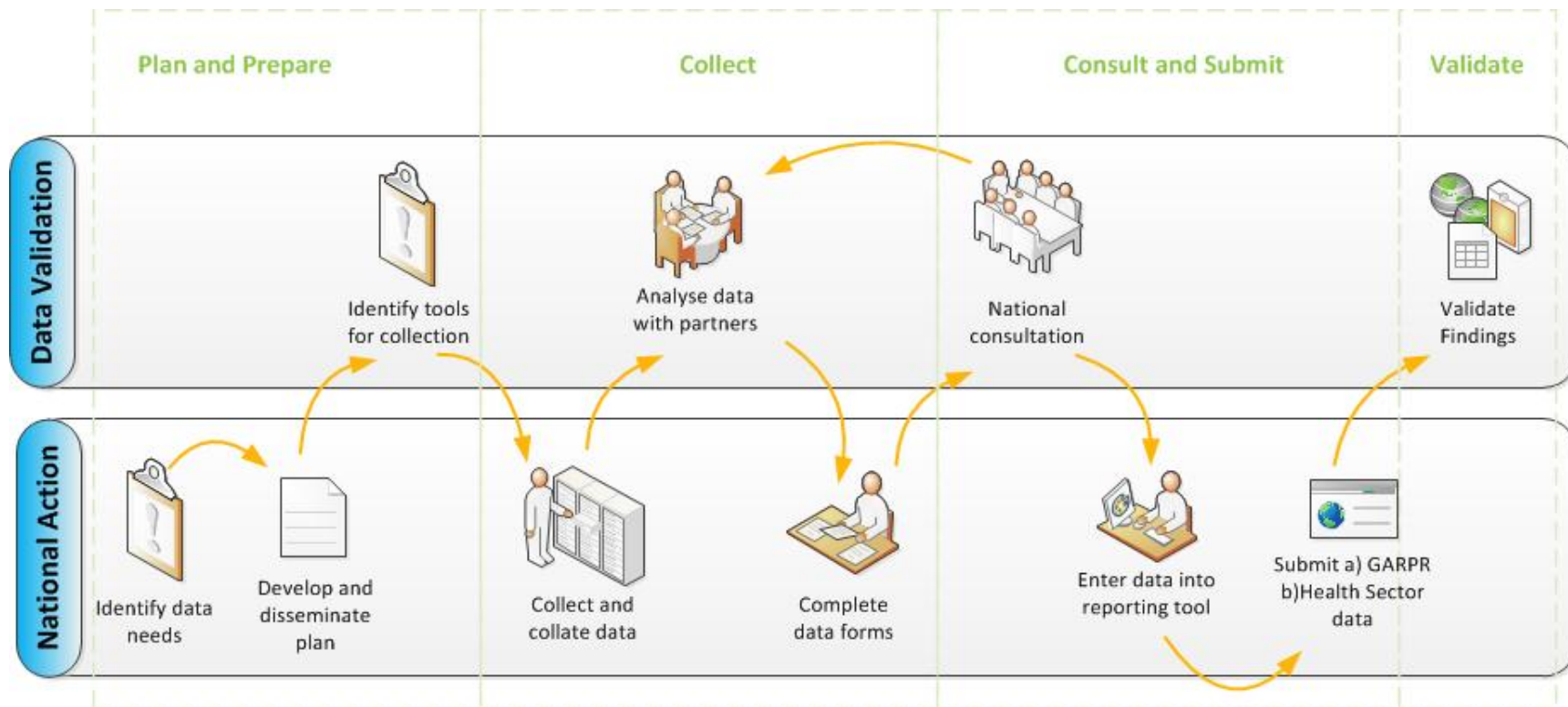
Highlights of new things in 2013 and 2014 taken to 2015? (1)

- As in the last three reporting rounds, survey data not changed since the last reporting round do not need to be re-entered (i.e. indicators 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14, 1.22, 2.2, 2.3, 2.4, 2.5, 7.1, 10.1, 10.2).
- Two indicators about male circumcision that were added in 2013 for the 16 countries with high HIV-prevalence and low prevalence of male circumcision are still included and can be found in Appendix 5.
- Transgender as a possible disaggregation for sex-workers (Indicators 1.7, 1.8, 1.9 and 1.10), introduced in the 2014 reporting round is still available.
- In the 2014 reporting round, the PMTCT indicator (Indicator 3.1) had updated language to clarify the disaggregations and the links to Spectrum.
- The indicator to measure coverage of PMTCT during breastfeeding was added directly after this indicator (labelled Indicator 3.1a)

Highlights of new things in 2013 and 2014 taken to 2015? (2)

- The indicator for ART coverage (Indicator 4.1) has the same denominator as in 2014, including all people living with HIV, not only those eligible for treatment. Further, the disaggregation of those newly initiated on ART (in the last 12 months) is still available as in 2014.
- As in the 2014 reporting, the 12-month ART retention indicator (Indicator 4.2) includes possible disaggregations for pregnancy status and breastfeeding status at initiation.
- The change in 2014 reporting remains on the indicator for co-management of tuberculosis and HIV treatment (Indicator 5.1) where “adults” was changed to “adults and children” in the numerator and “advanced” deleted from “advanced HIV infection”.
- The indicator Discriminatory attitudes towards people living with HIV (Indicator 8.1) is kept under target 8.
- Joint reporting of the Global AIDS Response Progress Reporting indicators and additional health sector indicators from WHO and UNICEF are included.

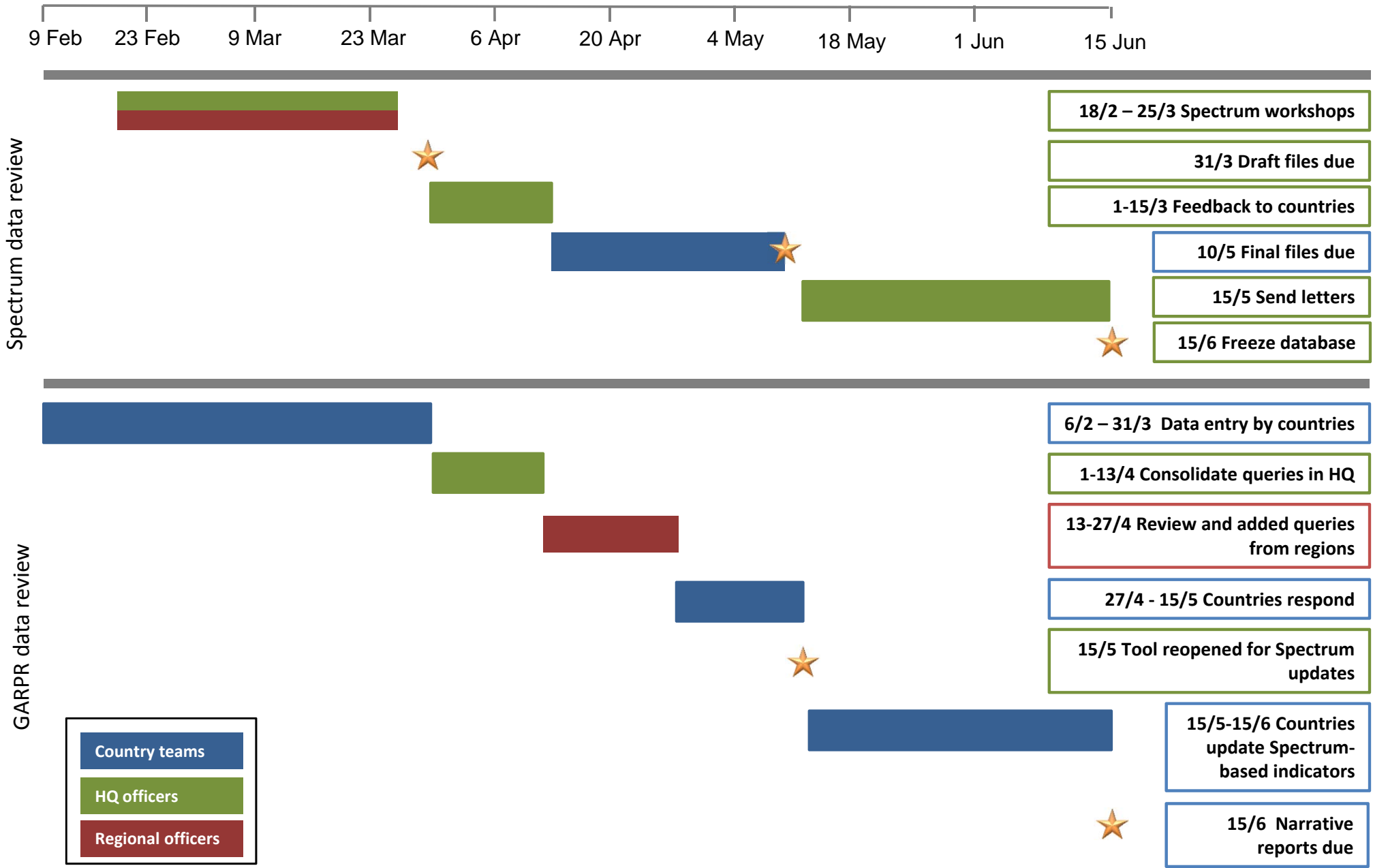
Recommended country level process



National AIDS or health authorities submit their data by 31st of March 2015 to UNAIDS through the online reporting tool.

This is in accordance with the UNAIDS mandate on reporting back to the UN General Assembly on progress made against the targets of the declaration of commitment signed by member states in June 2011.

Timeline: 2015 GARPR submission and validation



Data is accessible through UNAIDS web-site

UNAIDS: www.unaids.org

AIDSinfo: <http://AIDSinfo.unaids.org>

Full database: <http://www.aidsinfoonline.org>



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