
REACHING 90% OF PEOPLE AT RISK OF HIV WITH COMPREHENSIVE PREVENTION

CONTROLLING THE HIV EPIDEMIC SUMMIT,
May 3-4, 2018, Geneva, Switzerland

Karl Dehne

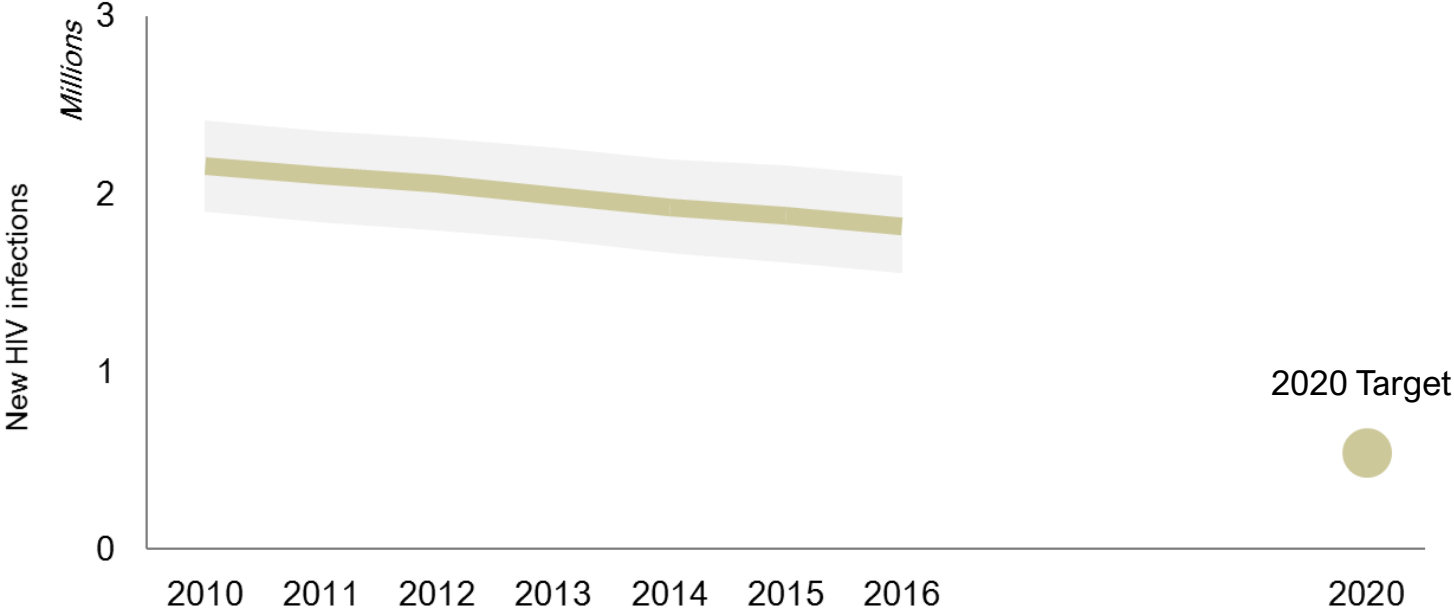


Outline

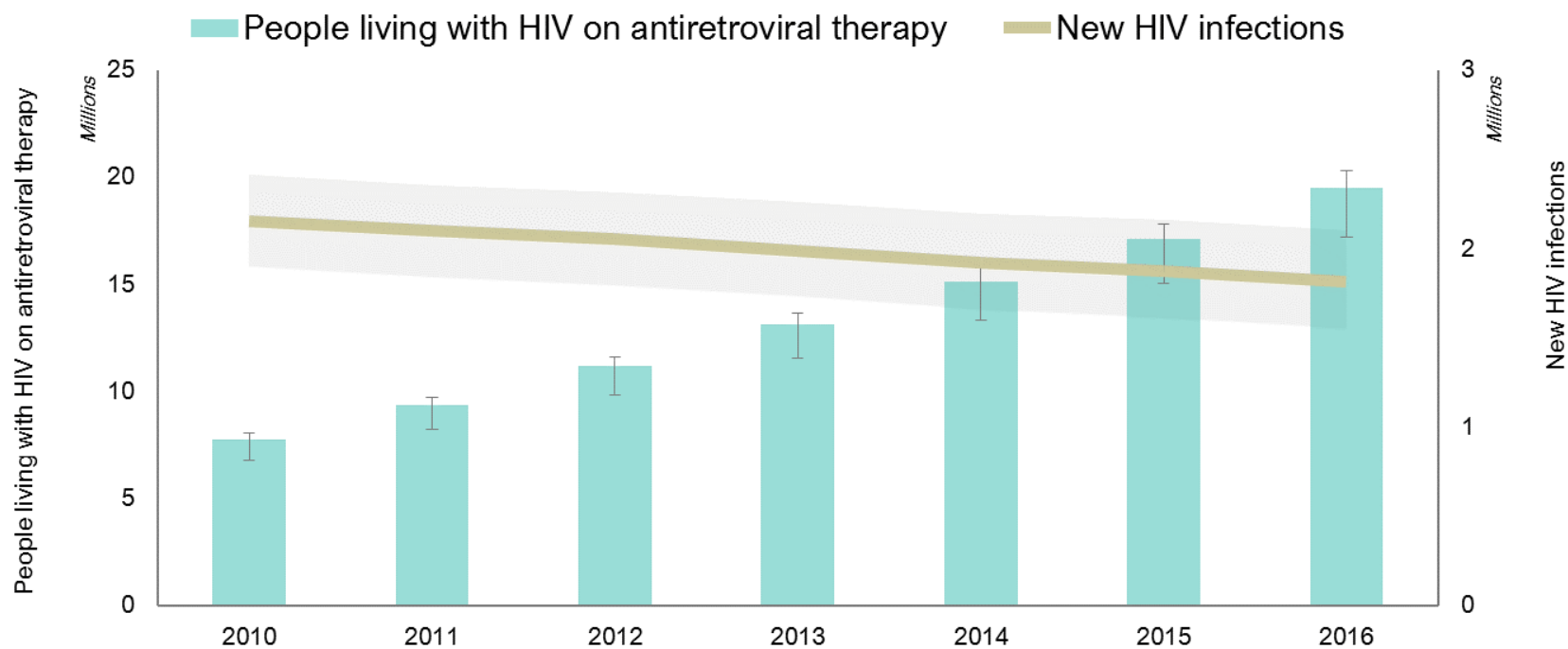
- Why primary prevention
- Recap of what works
- Prevention programme targets
- Gaps in prevention coverage
- Global HIV prevention coalition and HIV Prevention Roadmap 2020
- Conclusions

Why primary prevention?

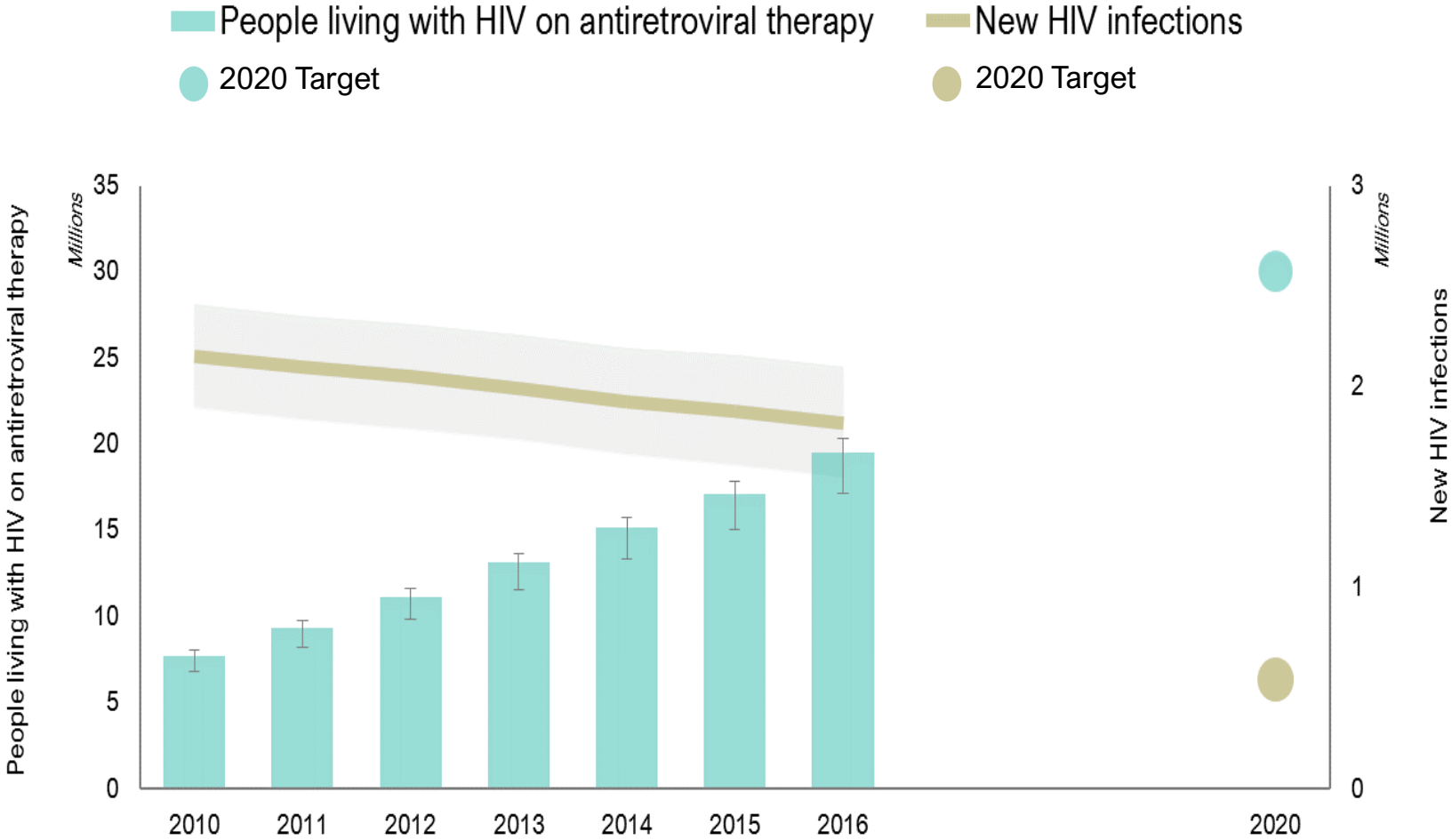
New HIV infections are not declining fast enough



New HIV Infections and People Living with HIV on Antiretroviral Therapy, 2010–2016



New HIV Infections and People Living with HIV on Antiretroviral Therapy, 2010–2016 and 2020 Targets



Treatment cannot do it all

- UNAIDS modelling: treatment can avert 60% of new infections (UNAIDS, 2015)
- Phylogenetics: Recent HIV infections at least 30 times more infectious than older infections (Fraser C, HIV Phylogenetics: Lessons for HIV Prevention. CROI, 2017)
 - Swiss Study: 50% of MSM transmission may occur within one year of infection (Marzel A et al, Clin Infect Dis, 2015)
- Quality of treatment/adherence: Patients in US 25% of time disruptions of viral transmission (> 1500 copies) and at risk of transmission (Marks G et al, AIDS Care, 2015)
- Evidence from high treatment performing countries/cities:
e.g. Botswana, San Francisco

HIV PREVENTION IS A RIGHT

Fulfilling this right begins with providing people who are at increased risk of HIV infection with unhindered access to effective prevention services and empowering them to protect themselves.



Lancet Paper 2016: Key results by 2020

Impact

Reduce new infections to 500,000 by 2020
(by 75 % compared to 2010)

Key Locations
/Populations

90 % of young & adult
women/men

High-incidence countries/settings

90 % of key populations
(sex workers, men who have sex with men,
transgender, people who inject drugs)

All countries

Outcome
targets

90 % condom
use at high-risk
sex
(non-regular or paid partners)

90-90-90 for
ART; 3 million
on PrEP

90 % of men
aged 15-29
circumcised
(14 priority countries)

90 % use of
NSP/OST
(by people who inject drugs)

Packages

Condoms & safe
behaviors

ARV-based
prevention

Voluntary medical
male circumcision

Harm reduction

DEMAND

DELIVER

ADHERE

Communications - service delivery and supplies - community outreach

Service delivery platforms for scale

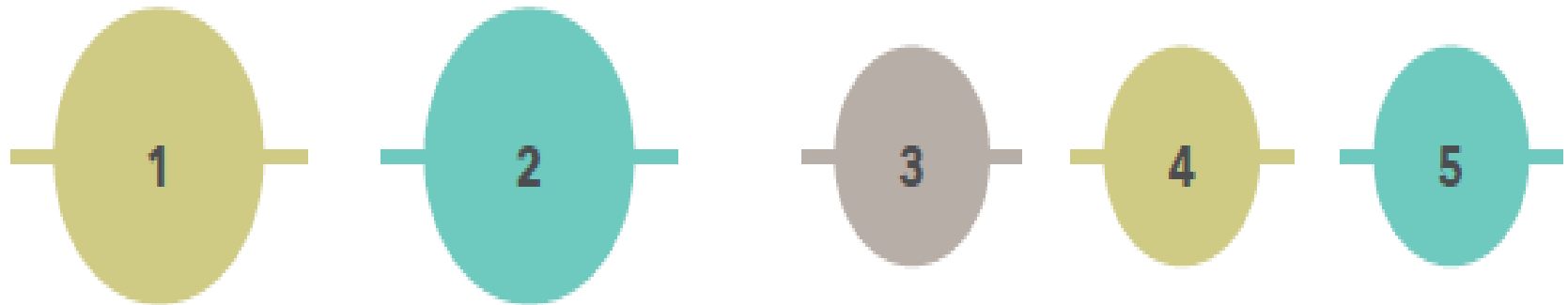
Health services, schools, community-based organizations

Enablers and synergies

Sexual and reproductive health, community engagement, economic empowerment, gender norms, legal environment

Outputs
(country specific targets)

The 5 pillars of Combination Prevention



Combination prevention
for adolescent girls
and young women

Combination prevention
with key populations

Comprehensive
condom
programmes

Voluntary medical
male circumcision
and sexual and
reproductive
health services for
men and boys

Rapid introduction
of pre-exposure
prophylaxis

Source: Prevention Gap report 2016.

What works

Combination prevention – proven impact

- Condom programmes
- Pre exposure prophylaxis
- Voluntary medical male circumcision
- Needle-syringe programmes and OST
- Treatment to reduce onward transmission

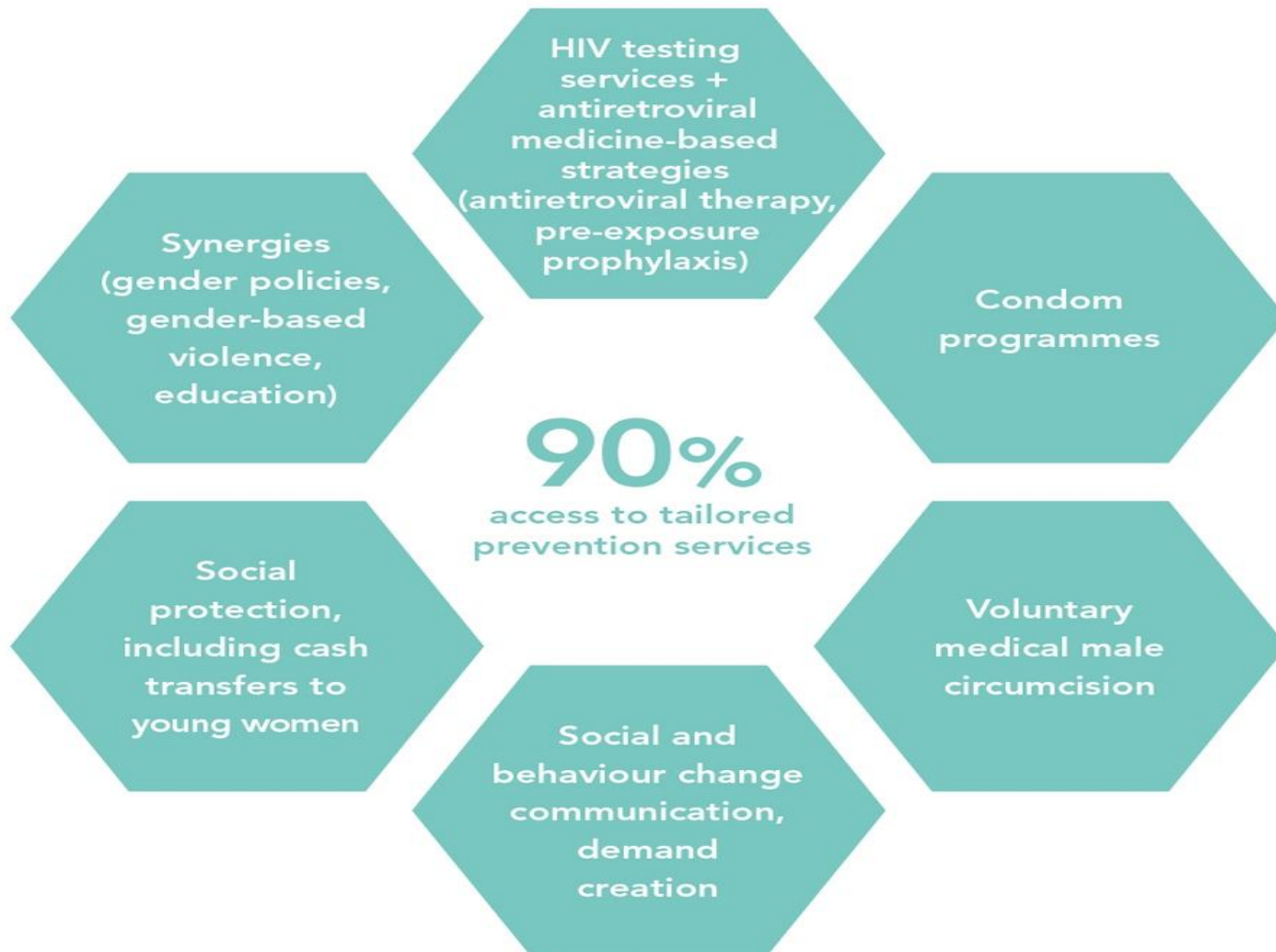


Combination prevention – proven impact

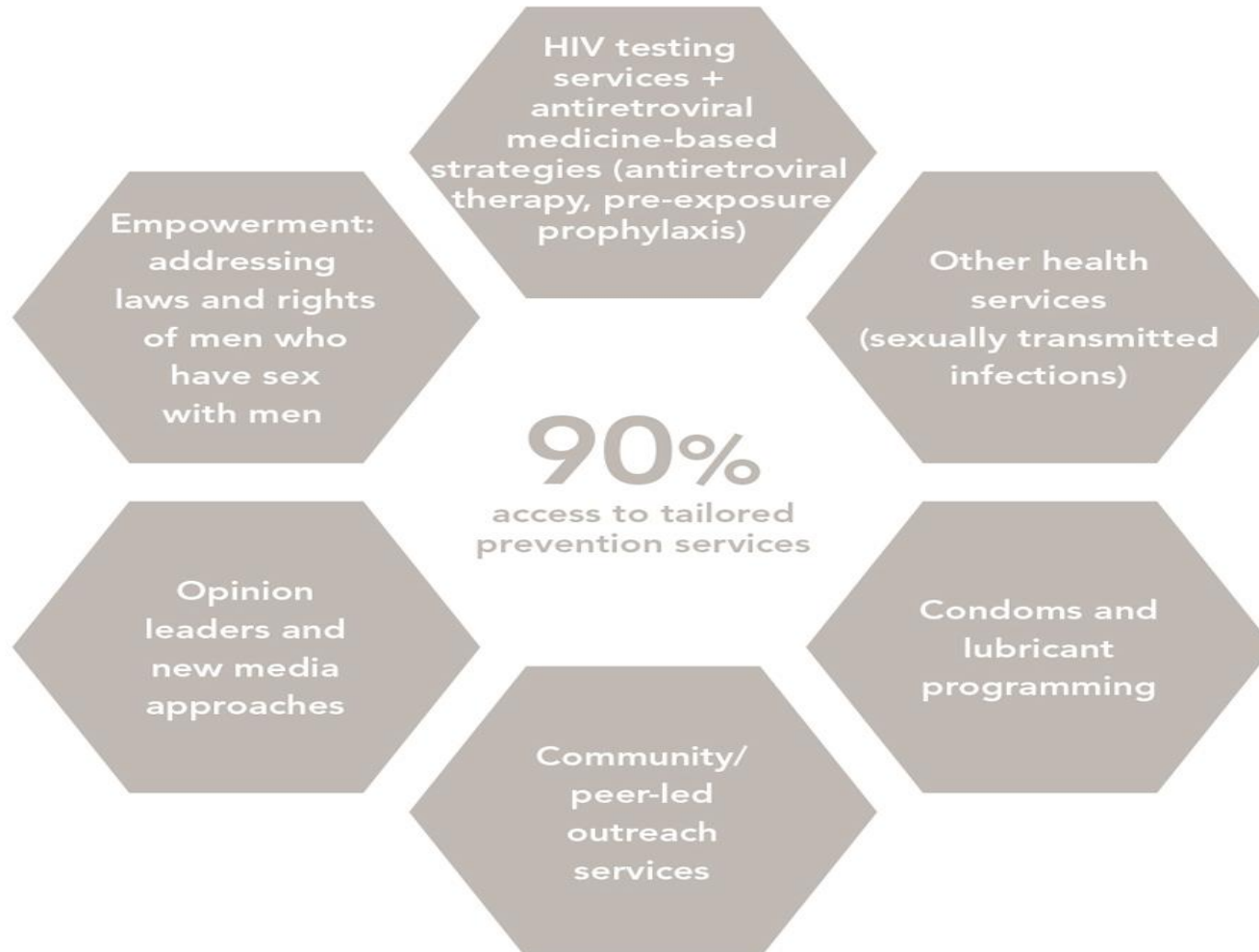
- Empowerment of women - cash transfers
- Secondary education for girls and young women and girls
- Community empowerment of sex workers
- Harm reduction policies



Example of a combination HIV prevention package for young people in high prevalence sites in southern Africa



Example of a combination HIV prevention package for gay men and other men who have sex with men



Example of a combination HIV prevention package for sex workers



Prevention Programme Targets

Political Declaration 2016

Prevention Commitments

Ensure **access to combination prevention** options, including PreP, harm reduction, VMMC and condoms **to at least 90% of people (at risk) by 2020, especially young women and girls in high prevalence countries and key populations** – gay men and other men who have sex with men, transgender people, sex workers, people who inject drugs and prisoners

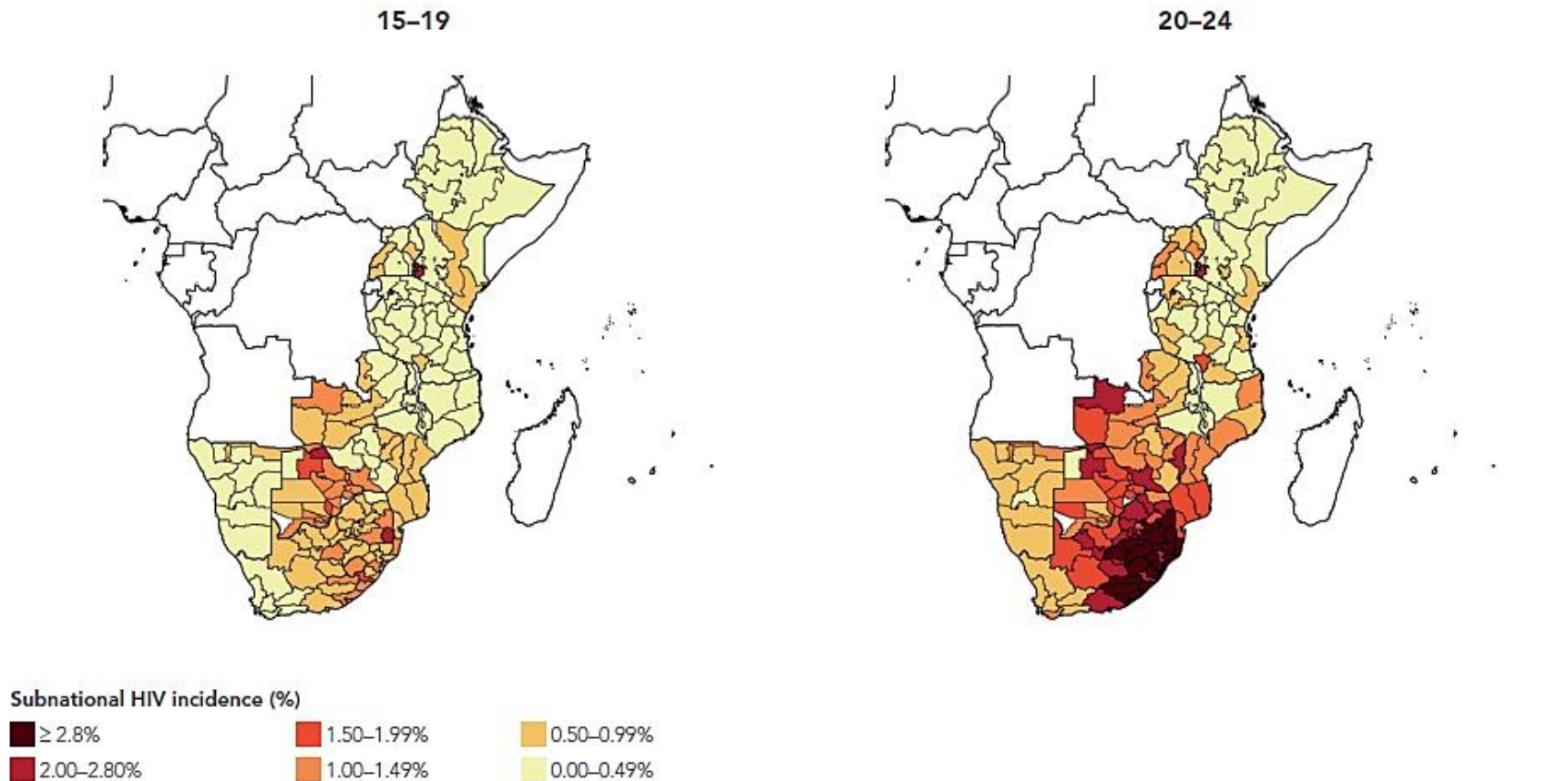
Output targets (by 2020):

- **Reach 3 million with PrEP**
- **Reach 25 million men with VMMC**
- **Make 20 billion condoms available in LMIC**

Corresponding country targets

- 90% of key populations reached with effective combination prevention packages
- 90% of adolescent girls and young women in priority settings
- 90% men 15-49 circumcised in 14 countries
- 25-50 condoms distributed per man and year across African countries
- About 10% of (key) populations at high risk on PrEP

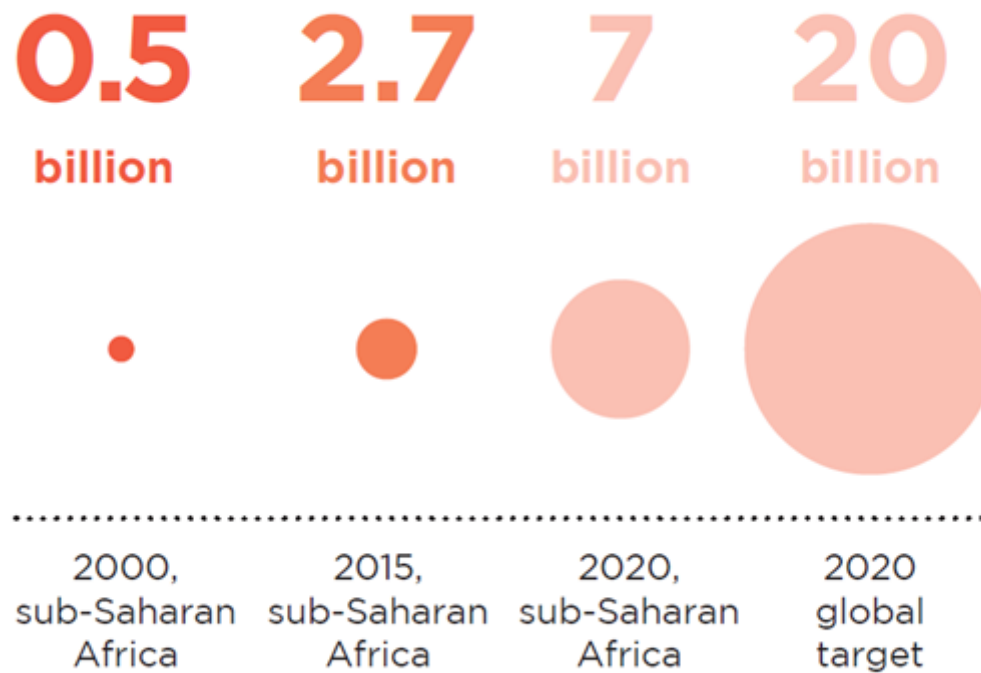
Subnational focus: HIV Incidence among adolescent girls and young women



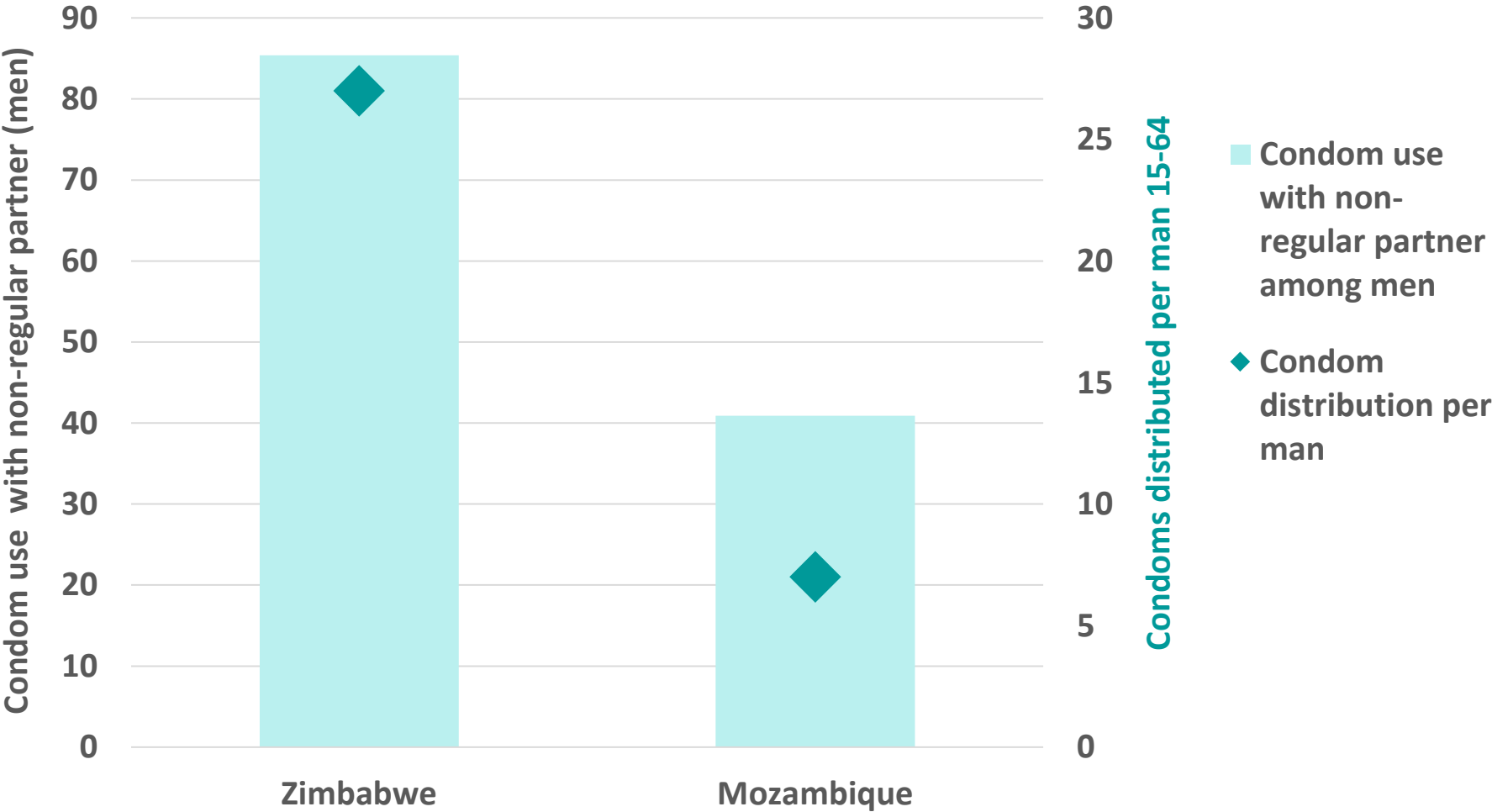
Source: UNAIDS 2016 estimates

Prevention Programme Gaps

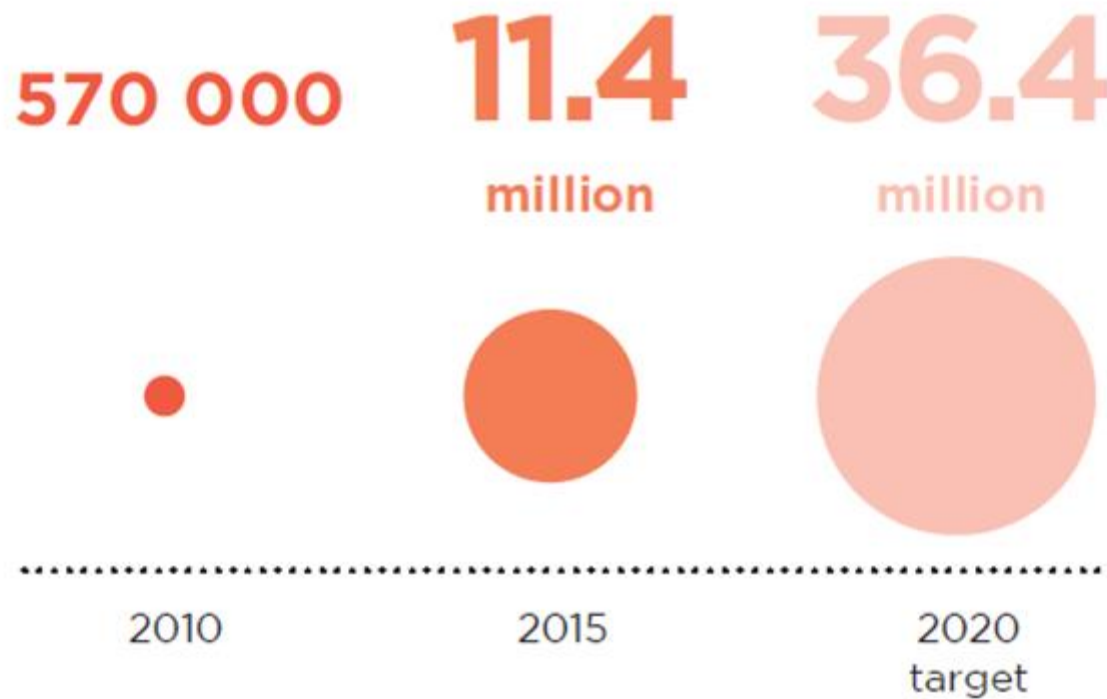
Gap in condom procurement and distribution



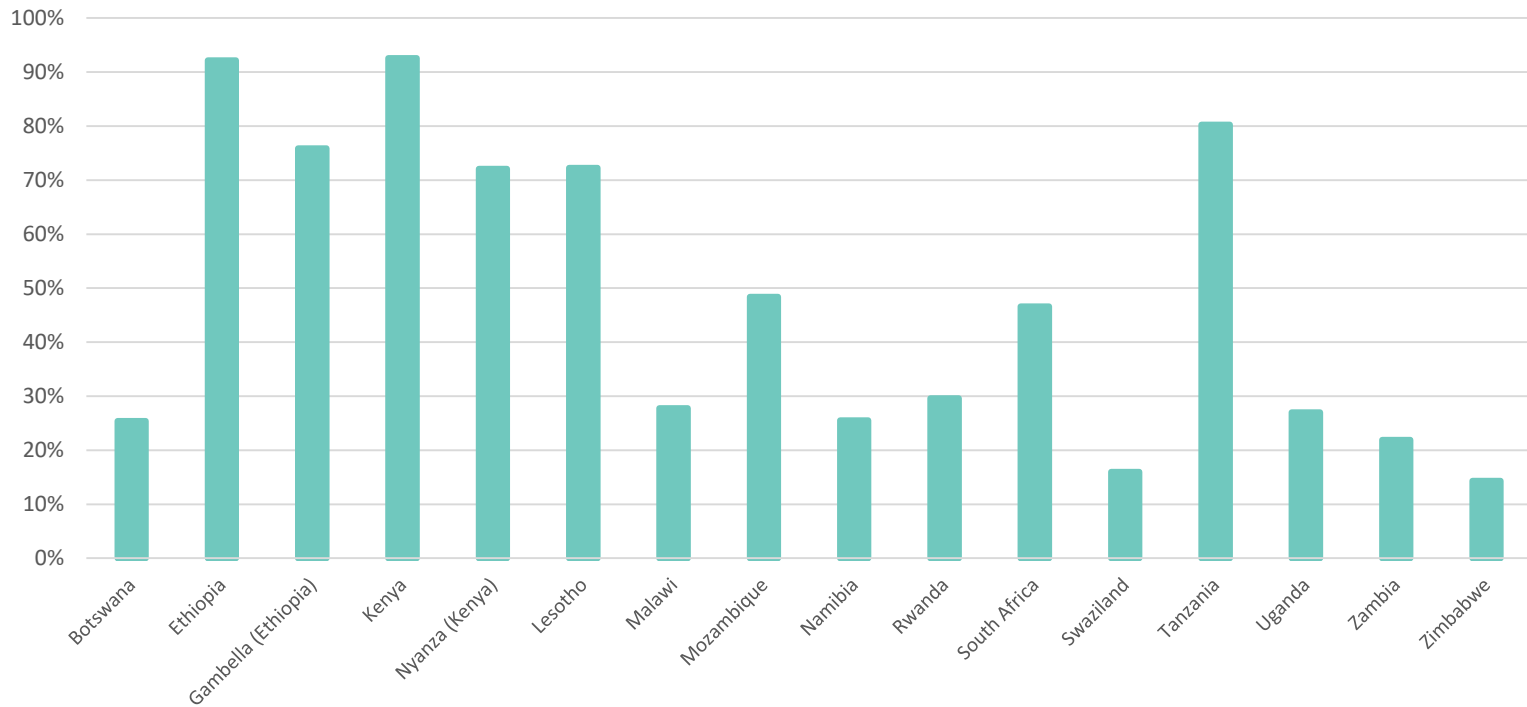
Condom distribution and use in Mozambique & Zimbabwe



Gap in Voluntary Medical Male Circumcisions (14 priority countries in Africa)

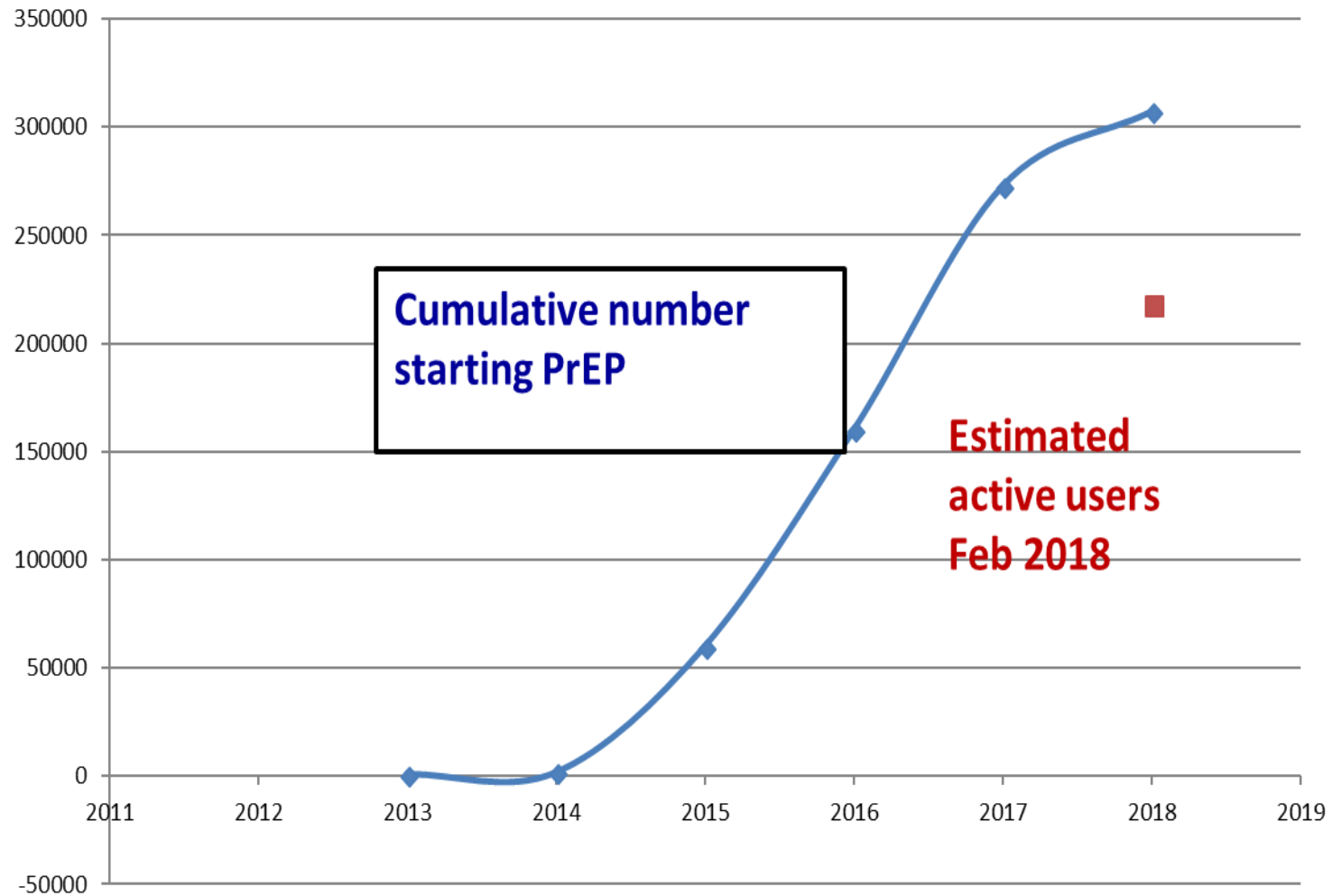


Prevalence of VMMC by Country

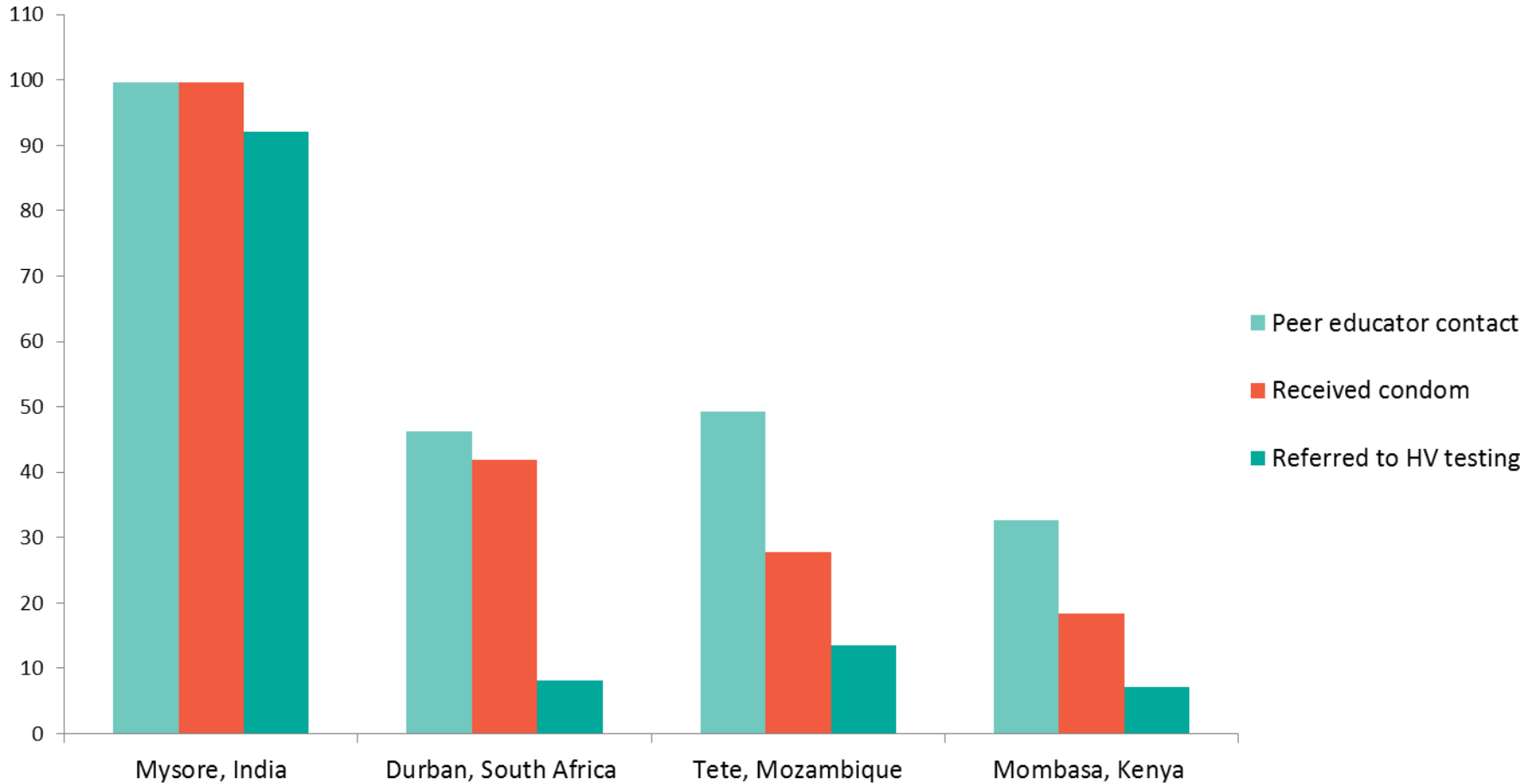


Source: latest available data from population-based surveys. Self-reported and include all type of circumcisions

Estimated Number of People taking PrEP Worldwide

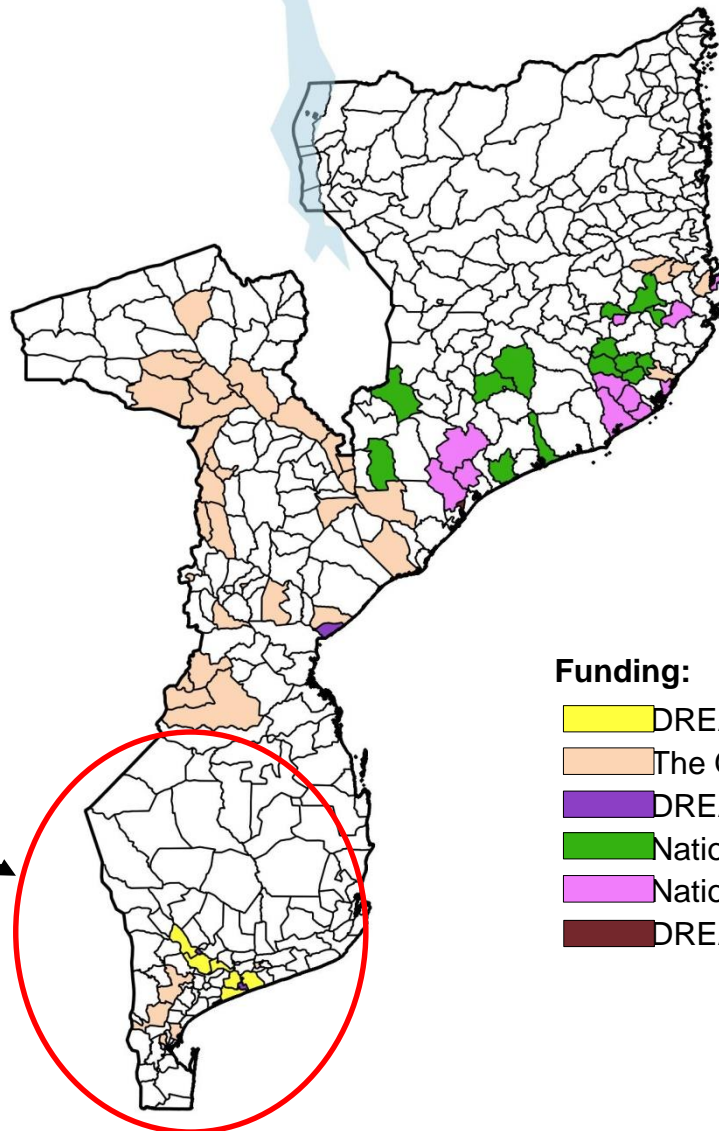


HIV Prevention Services for Sex Workers in 4 Cities



Lafort et al. Trop Med and Int Health. August 2016

Coverage of DREAMS and other programs for adolescent girls and young women, Mozambique



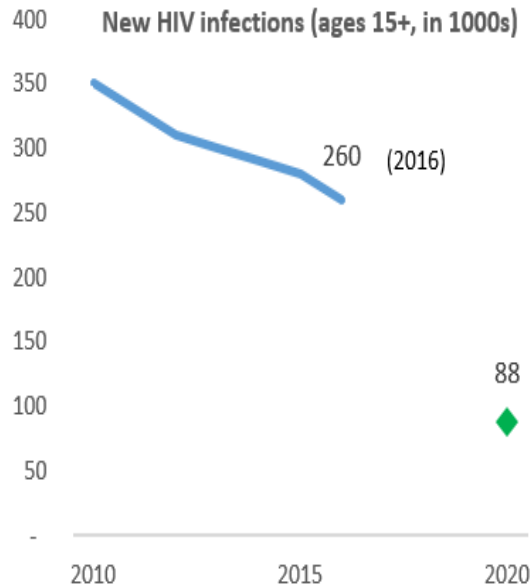
Highest incidence region

Funding:

- DREAMS
- The Global Fund
- DREAMS* and the Global Fund
- National government
- National government and the Global Fund
- DREAMS*, National government, and the Global Fund

Country Example

South Africa



Score	Programme area
Very good (9.0-10.0)	Condom programming: Distribution and use with non-regular partners
Good (7.0-8.9)	Voluntary medical male circumcision: Progress towards national targets
Moderate (6.0-6.9)	Pre-Exposure Prophylaxis: Index of policy and programmatic readiness
Low (5.0-5.9)	Key populations: Program coverage and outcomes (condom use/ safe injections) for 1) sex workers, 2) men who have sex with men and 3) people who inject drugs
Very low (0.0-4.9)	Adolescent girls & young women: Program coverage and outcomes (condom use) in high-incidence settings

Legend including scoring levels

Very good (9.0-10.0)	Very low (0.0-4.9)
Good (7.0-8.9)	No or insufficient data
Moderate (6.0-6.9)	na
Low (5.0-5.9)	Pillar not applicable in country

Detailed information on indicator definitions and values is available on the website of the Global HIV Prevention Coalition. *

* <https://hivpreventioncoalition.unaids.org/global-dashboard-and-country-scorecards>

Country Example

South Africa

2016

Based on available data.

Version 1,16

Back to 'Start'

Output

Outcome

Impact

Prevention strategy & systems

Comments

Strategic results frameworks, operational plans & targets for all priority pillars

Yes

National HIV, TB STI Strategic Plan for 2017-2022, Prevention Strategy 2016

Sub-national management mechanisms for implementation & tracking for all priority pillars

No

In March 2018, Provincial and Multi-sectoral District Implementation Plans that operationalize the NSP contains mechanisms for all prevention areas and includes the priority pillars will be launched.

Condoms

Number of condoms distributed (millions, 2016)

839

Condom use with non-regular partners (%)

Women 15-49

60

Number of condoms distributed/sold per man 15-64

47

Men 15-49

69

% of condom distribution need met

100

Voluntary medical male circumcision (VMMC)

Number of VMMCs conducted/year (in thousands)

497

% of VMMC target achieved

Men

54

National VMMC prevalence (%)

Men 15-24

na

Men 15-49

43

ARV-based prevention

% of PLHIV on ART

56

% of PLHIV virally suppressed

All PLHIV

45

Aggregated PrEP score (0.0 - no progress; 3.0 - most progress)

3,0

% of national PrEP need met

All pop.

nd

Key populations

Sex workers (SW)

Population size estimate for female sex workers available

yes

Condom use /last paid sex (%)

Sex workers

86

% of SWs who received at least two HIV prevention interventions (past 3 m)

45

Condom use /last paid sex (%)

Men 15-49

nd

% of SWs who avoided health care because of stigma/ discrimination

nd

Sex workers <25 years

nd

Sex workers, all

57,7

Men who have sex with men (MSM)

Population size estimate for men who have sex with men available

yes

Condom use /last anal sex (%)

MSM

81

% of MSM who received at least two HIV prevention interventions (past 3 m)

33

MSM, <25 years

nd

MSM, all ages

26,8

% of MSM who avoided health care because of stigma/ discrimination

nd

People who inject drugs (PWID)

Population size estimate for people who inject drugs available

yes

% with safe injecting practices

PWID

nd

% of PWID who received at least two HIV prevention interventions (past 3 m)

24

% of opioid users on OST

PWID

nd

% of PWID who avoided health care because of stigma/ discrimination

nd

PWID, <25 years

nd

PWID, all ages

nd

Young women (YW) & men in high-HIV prevalence settings

% of priority districts (admin. areas) with dedicated programs for YW & partners

31

Condom use with non-regular partners (%)

YW 15-24

62

% of girls who completed lower secondary education

86

YM 15-24

76

% of women 15-49 who experienced physical or sexual violence from a husband/ partner

21

% who had multiple sexual partners

Sex.act.YW 15-24

5

Men 15-49

17



Young women 15-24

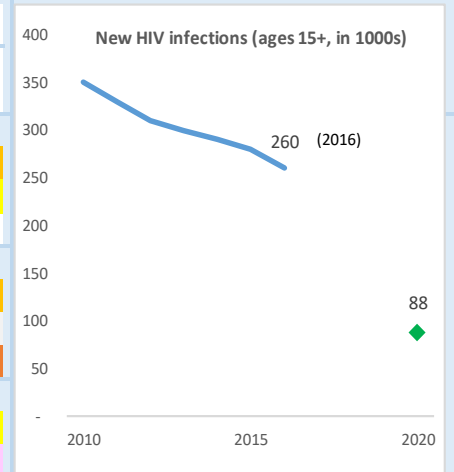
10,4

Young men 15-24

4

Adults 15-49

18,9

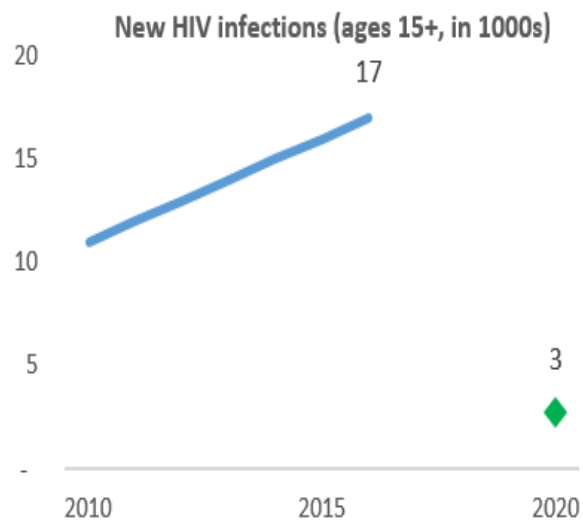


HIV prevalence

2030 | Ending the AIDS epidemic

Acronyms: na ... not applicable; id ... no data; sn ... sub-national

Ghana



Score	Programme area
	Condom programming: Distribution and use with non-regular partners
	Pre-Exposure Prophylaxis: Index of policy and programmatic readiness
3	Key populations: Program coverage and outcomes (condom use/ safe injections) for 1) sex workers, 2) men who have sex with men and 3) people who inject drugs
	Adolescent girls & young women: Program coverage and outcomes (condom use) in high-incidence settings

Legend including scoring levels

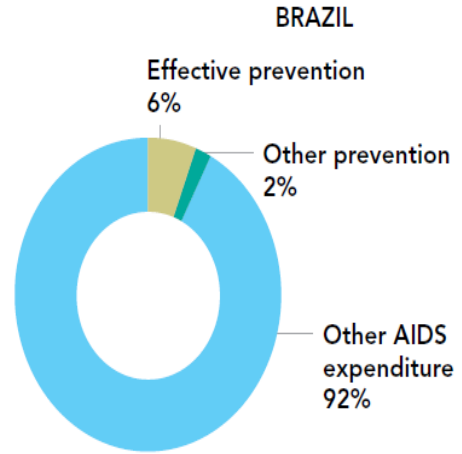
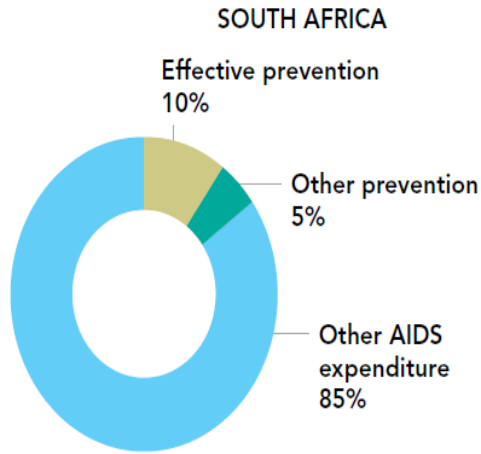
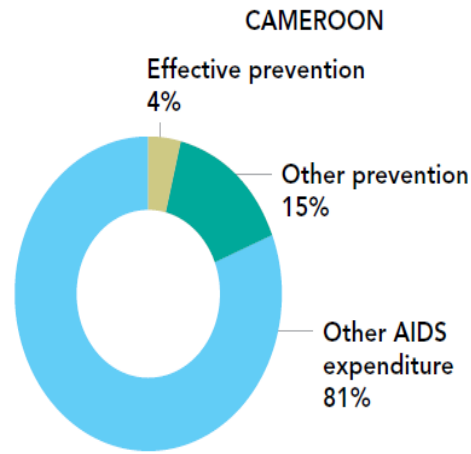
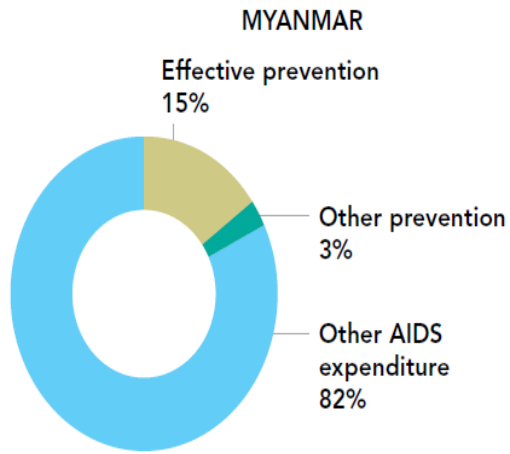
	Very good (9.0-10.0)		Very low (0.0-4.9)
	Good (7.0-8.9)		No or insufficient data
	Moderate (6.0-6.9)		Pillar not applicable in country
	Low (5.0-5.9)		

Detailed information on indicator definitions and values is available on the website of the Global HIV Prevention Coalition. *

* <https://hivpreventioncoalition.unaids.org/global-dashboard-and-country-scorecards>

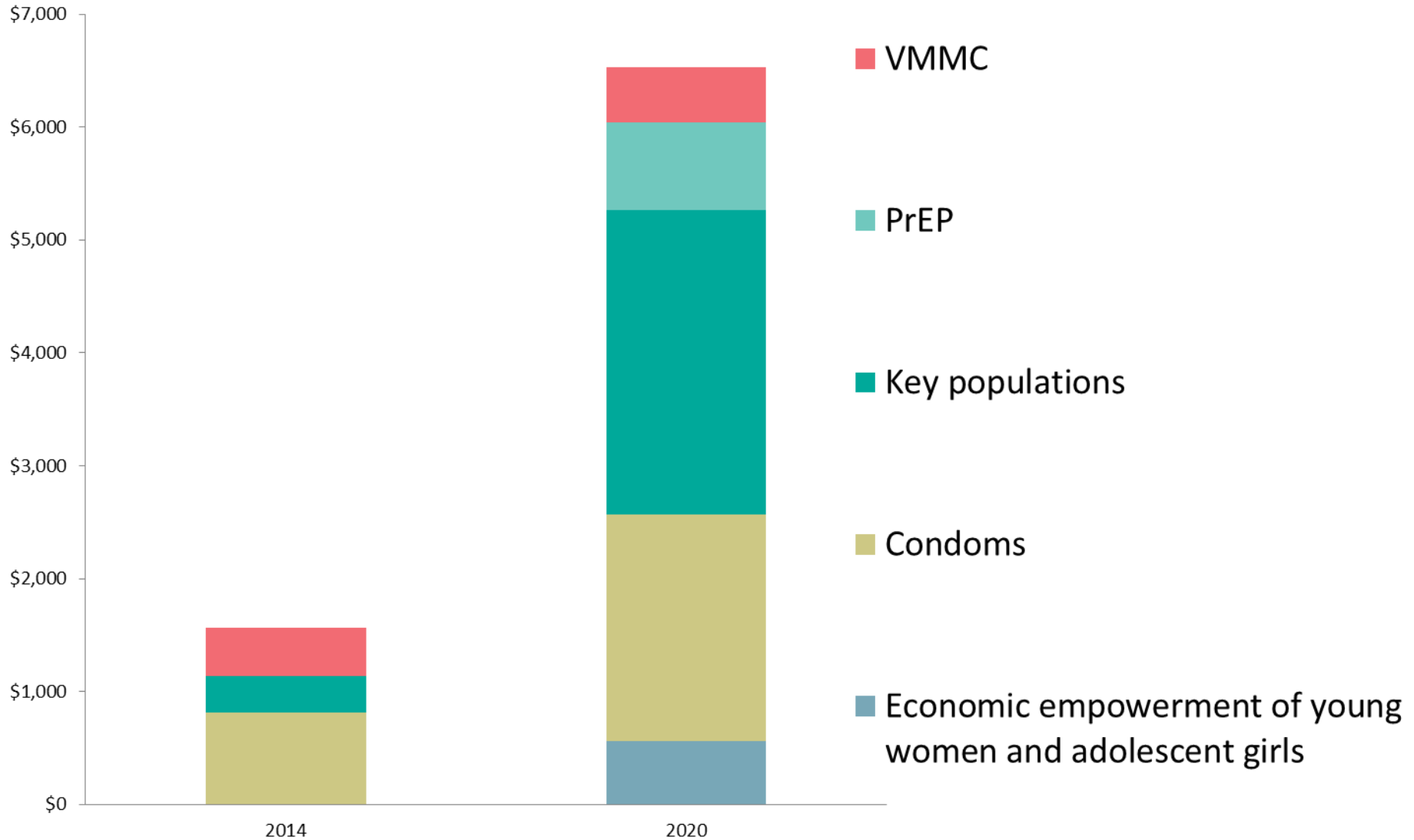
A Word on HIV Prevention Financing

Insufficient Investments: Effective prevention accounts for < 10% of total HIV investments, 4 countries, 2014

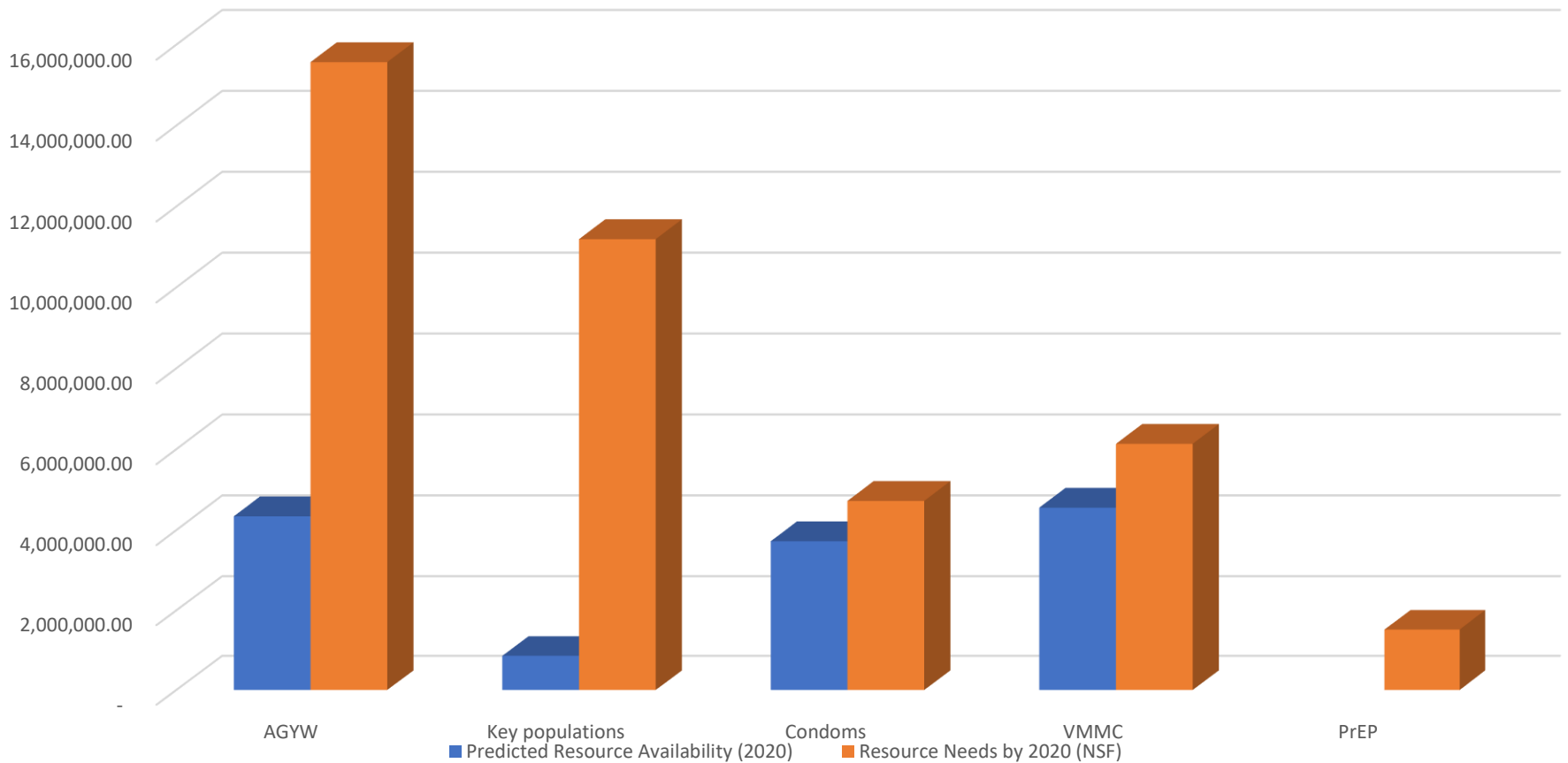


Source: Global AIDS Response Progress Reporting.

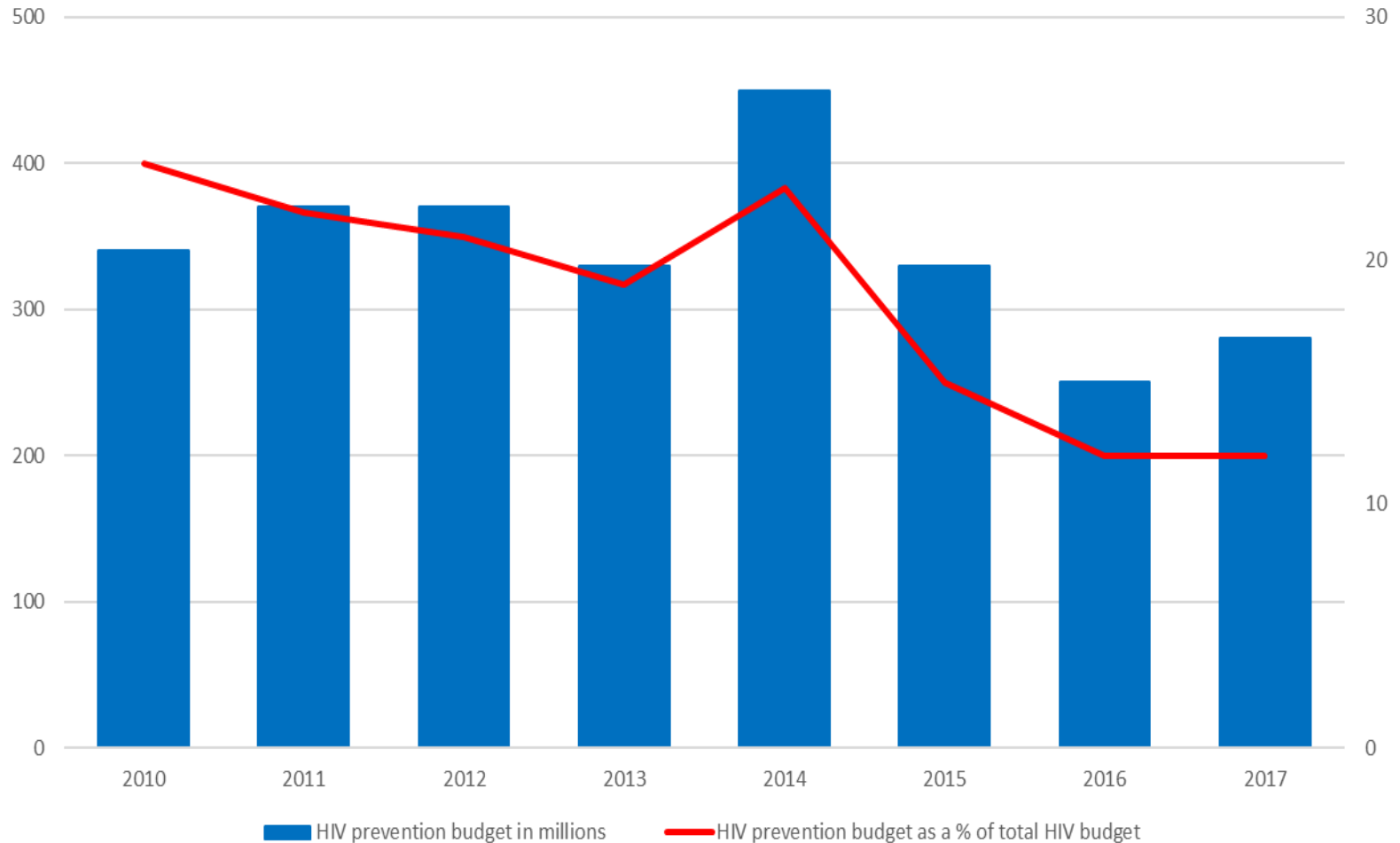
Estimated Prevention Spending and Resource Needs to reach 90% prevention coverage targets (per five pillars)



Namibia Estimated Funding Gap By 2020- Five Pillars



Global Fund HIV Prevention budget: total expenditure and as % of total HIV budget



The Global HIV Prevention Coalition



<https://hivpreventioncoalition.unaids.org/>

Global HIV Prevention Coalition

Founding Members of the Global HIV Prevention Coalition

CO-CONVENERS

Michel Sidibé, Executive Director, Joint United Nations Programme on HIV/AIDS

Natalia Kanem, Executive Director, United Nations Population Fund

UNITED NATIONS MEMBER STATES

Angola	Mexico
Brazil	Mozambique
Cameroon	Namibia
China	Netherlands
Côte d'Ivoire	Nigeria
Democratic Republic of the Congo	Pakistan
Ethiopia	South Africa
France	Swaziland
Ghana	Sweden
Germany	Uganda
India	Ukraine
Indonesia	United Kingdom of Great Britain and Northern Ireland
Kenya	United Republic of Tanzania
Lesotho	Zambia
Malawi	Zimbabwe

OTHERS

Centre for the AIDS Programme of Research in South Africa (CAPRISA)

Hornet, International AIDS Society (IAS)

Joint United Nations Programme on HIV/AIDS Reference Group on HIV and Human Rights

StarTimes, China

CIVIL SOCIETY ORGANIZATIONS & NETWORKS

African Youth and Adolescent Network on Population and Development (AFRIYAN)

AVAC

Global Action for Trans Equality (GATE)

Global Forum on Men who Have Sex with Men and HIV (MSMGF)

Global Network of People living with HIV (GNP+)

Global Network of Sex Work Projects (NSWP)

International Community of Women Living with HIV (ICW)

International HIV/AIDS Alliance

International Network of People Who Use Drugs (INPUD)

International Network of Religious Leaders Living with or personally affected by HIV and AIDS (INERELA+)

International Planned Parenthood Federation (IPPF)

INTERNATIONAL ORGANIZATIONS

Bill & Melinda Gates Foundation

Children's Investment Fund Foundation

Joint United Nations Programme on HIV/AIDS Secretariat and Co-sponsors

The Global Fund to Fight AIDS, Tuberculosis and Malaria

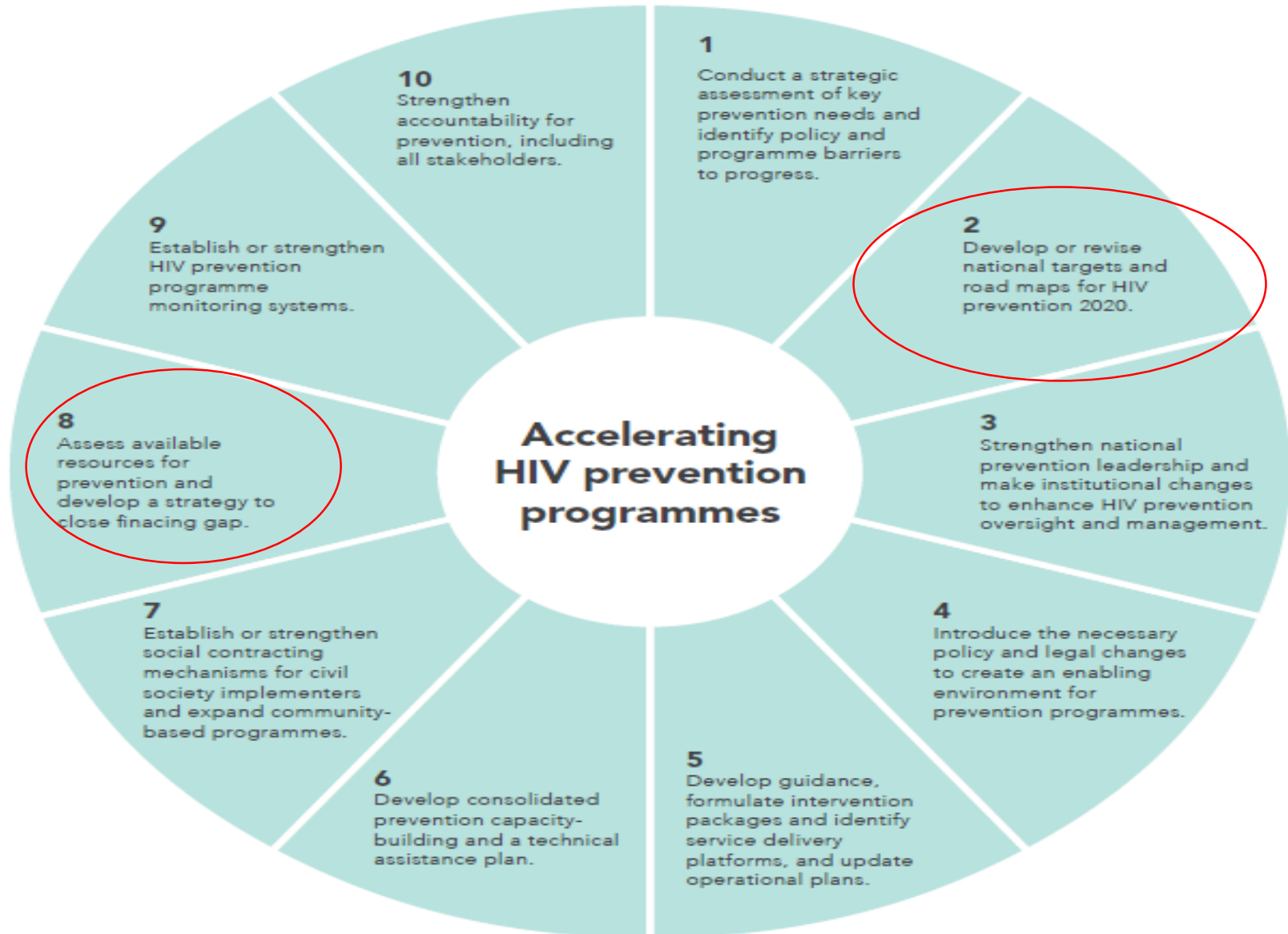
United States President's Emergency Plan for AIDS Relief

HIV Prevention 2020 Road Map

Accelerating HIV prevention to reduce new infections by 75%



Ten-point plan for accelerating primary HIV prevention at the country level



Conclusions & Recommendations

- ▶ Primary prevention requires strengthening as treatment alone cannot end the epidemic by 2030
- Ambitious prevention targets were adopted in 2016 and need to be domesticated and used, together with 90:90:90 treatment targets
- Prevention program gaps need to be estimated and funding gaps closed, and programs systematically implemented
- The newly launched global HIV Prevention Coalition and HIV Prevention Roadmap 2020 provide platform
- IAPAC is very welcome to join the effort, perhaps starting with helping cities set their own prevention targets