



PEPFAR

U.S. President's Emergency Plan for AIDS Relief

Avoiding the Cost of Invisibility

Leaving no one behind as we attain 90-90-90

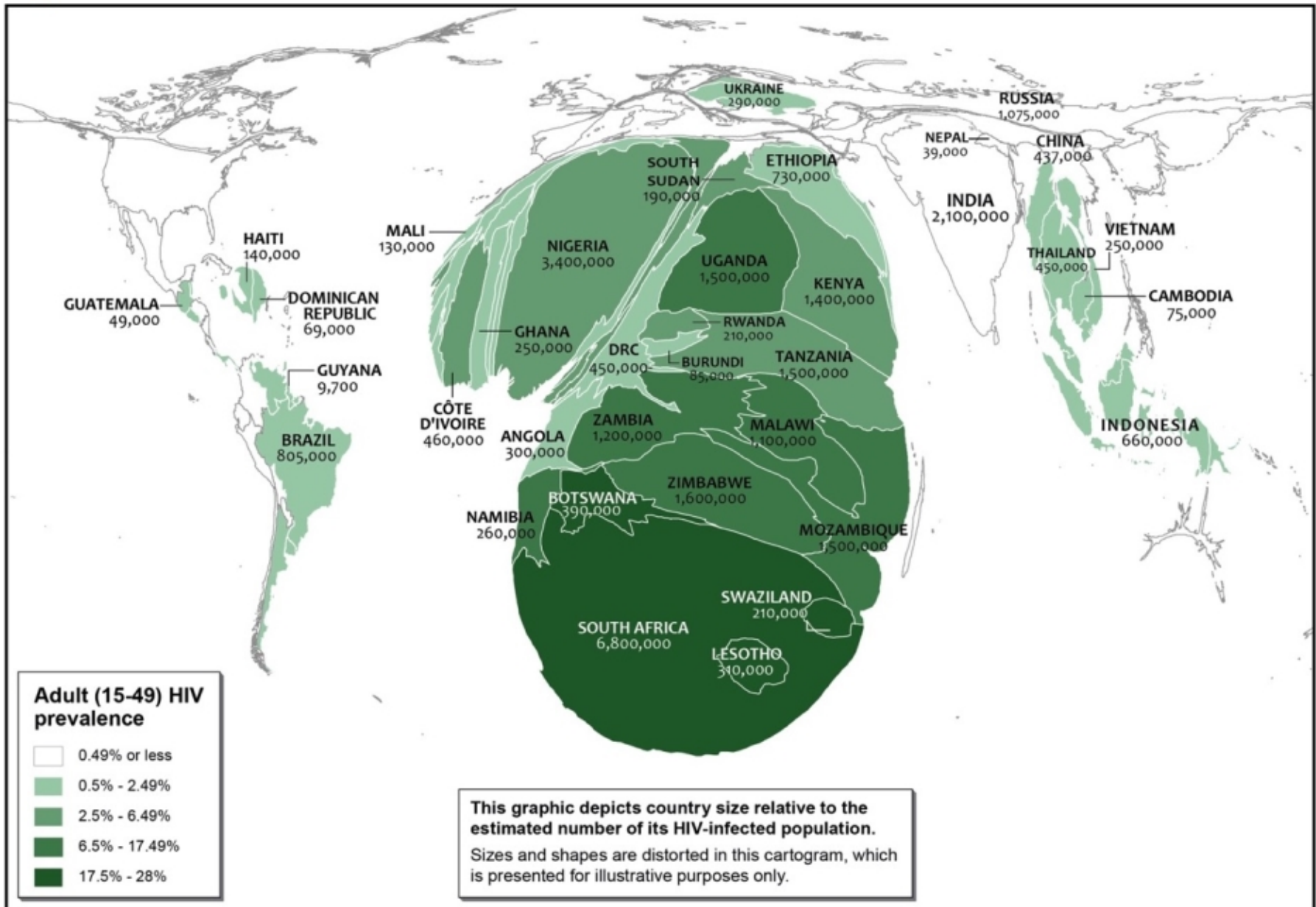
AMB Deborah L. Birx, MD | October, 2016



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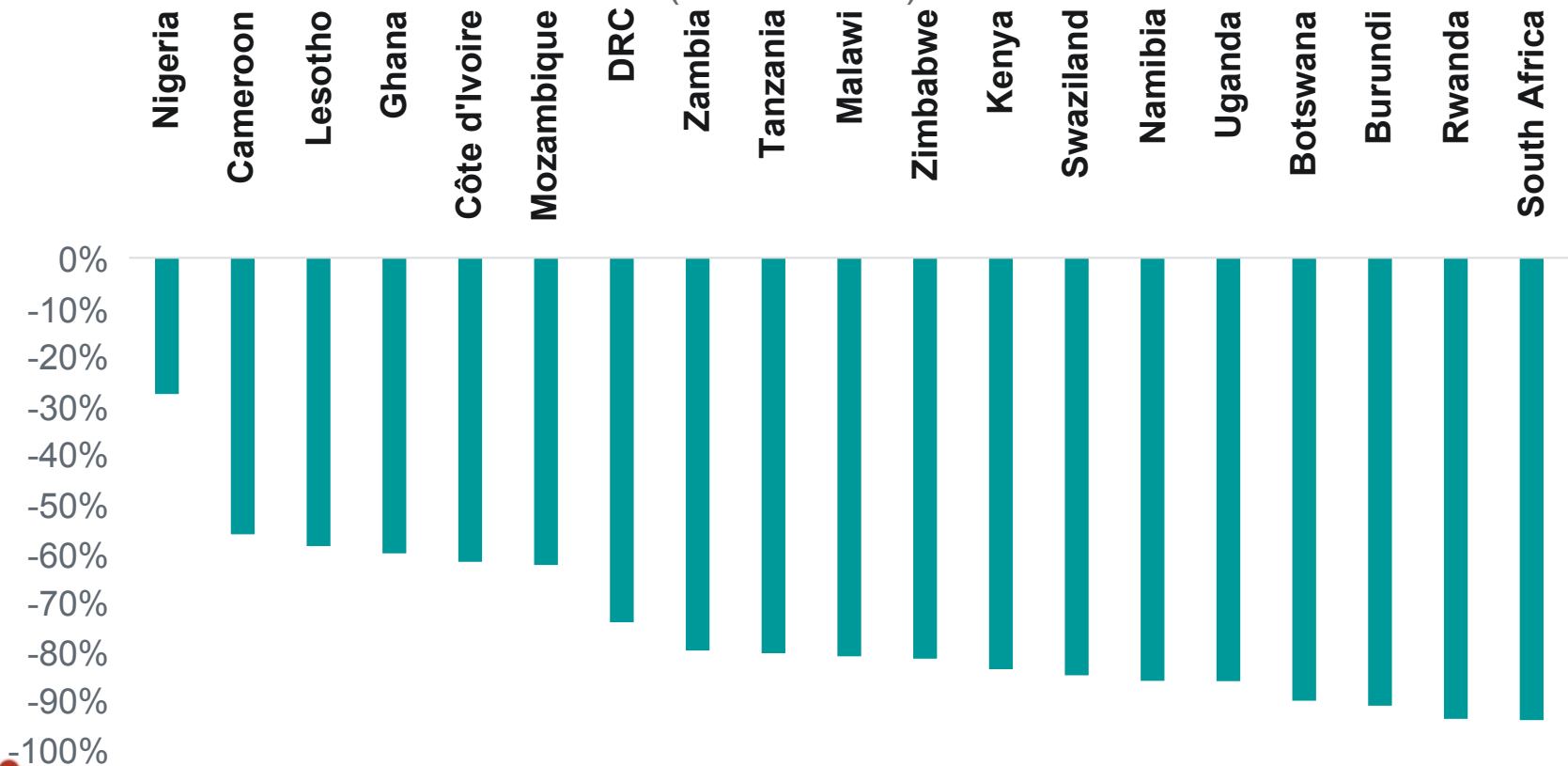
The Global HIV epidemic today

HIV Prevalence and Estimated Number of Adults and Children Infected with HIV, 2014



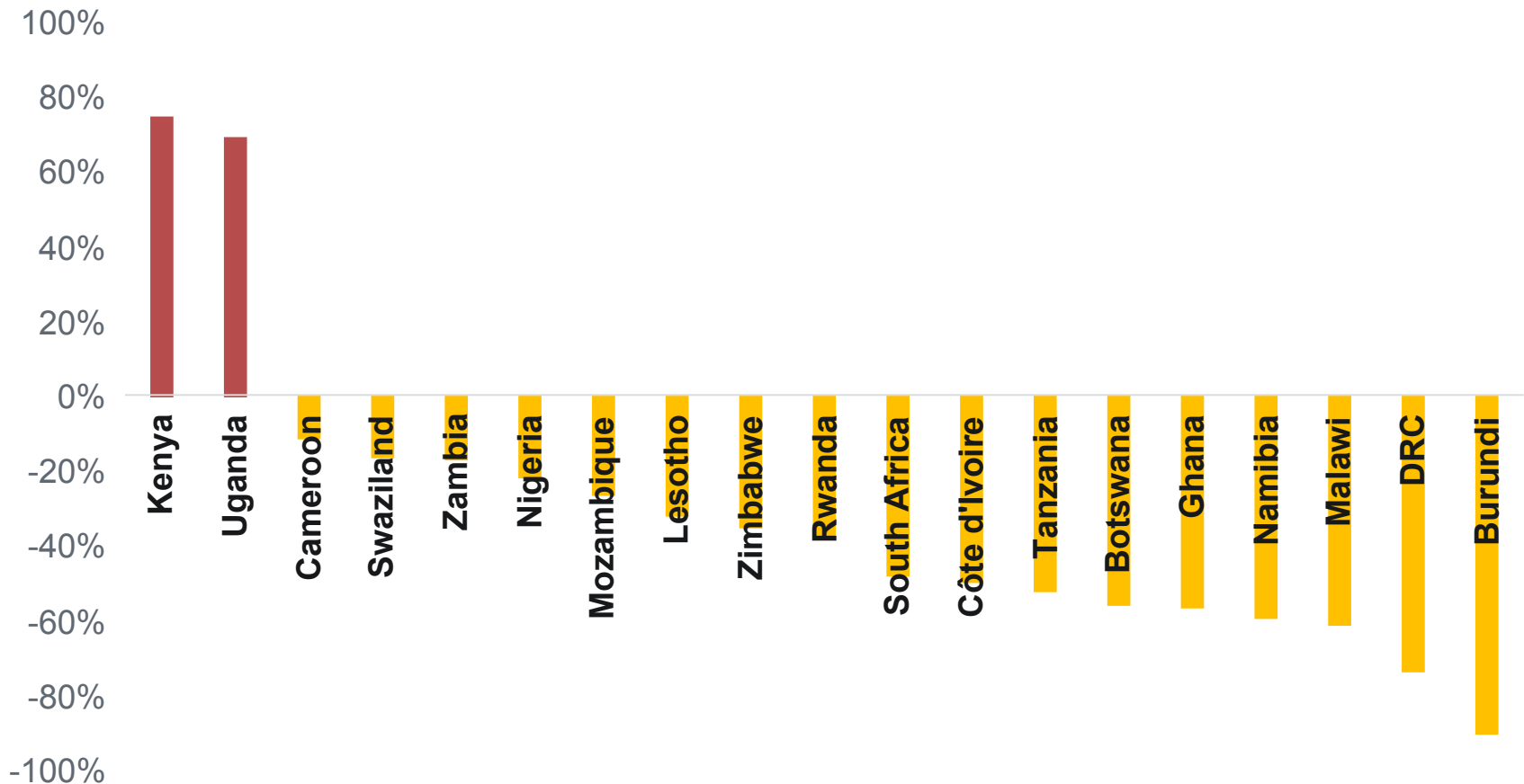
Percent change in new pediatric HIV infections (2000 – 2015)

Percent change in number of new pediatric HIV infections
(2000 - 2015)



Percent change in new adult HIV infections (2000 – 2015)

Percent Change in New Adult HIV Infections (2000 - 2015)



PEPFAR & the Sustainable Development Goals



PEPFAR & the Sustainable Development Goals



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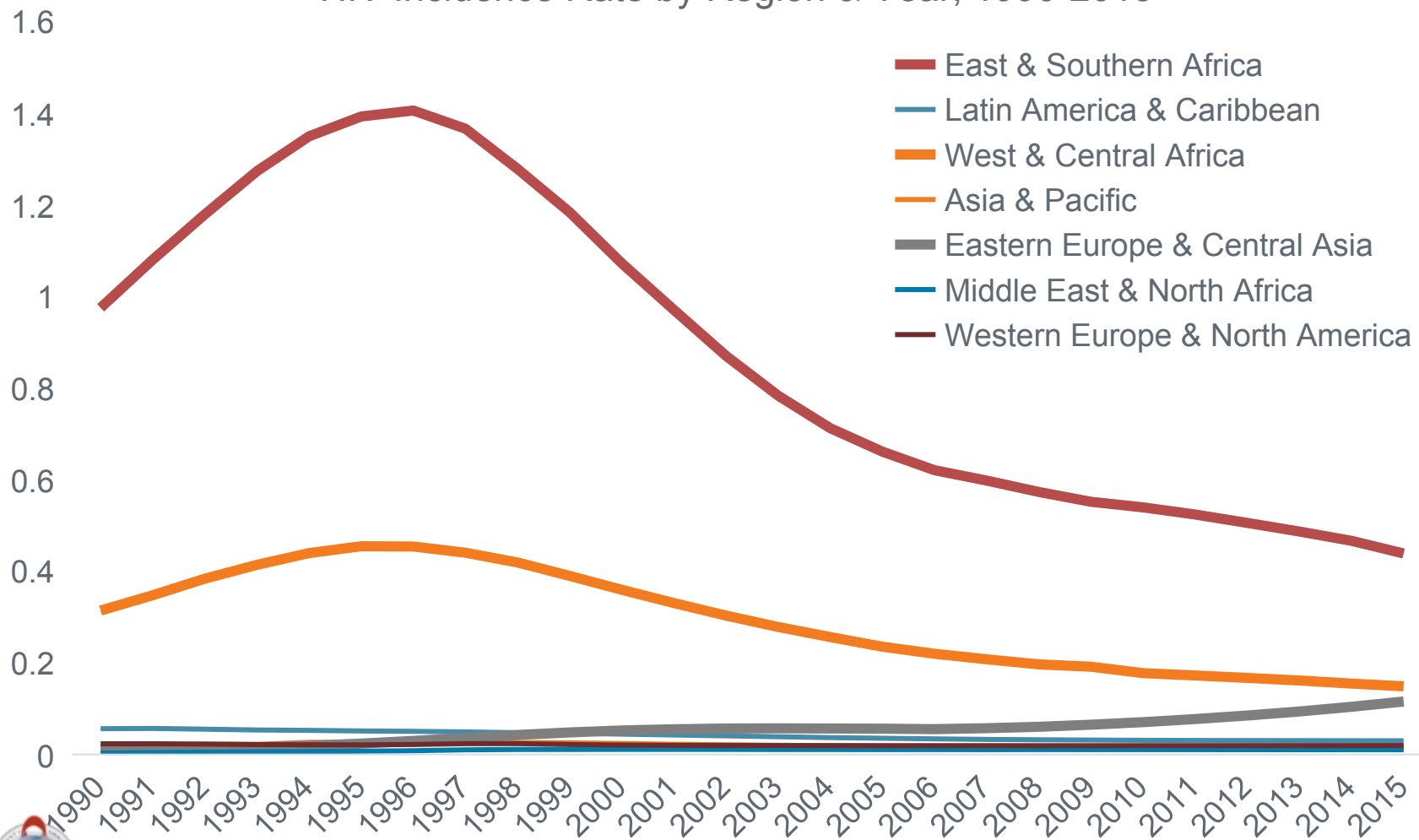
The challenge:

Dramatic increase the number of adolescent girls & women in the highest HIV incident countries and invisible to the current health systems

Dramatic reductions in HIV Incidence Rates

Maintaining momentum is key to achieving epidemic control

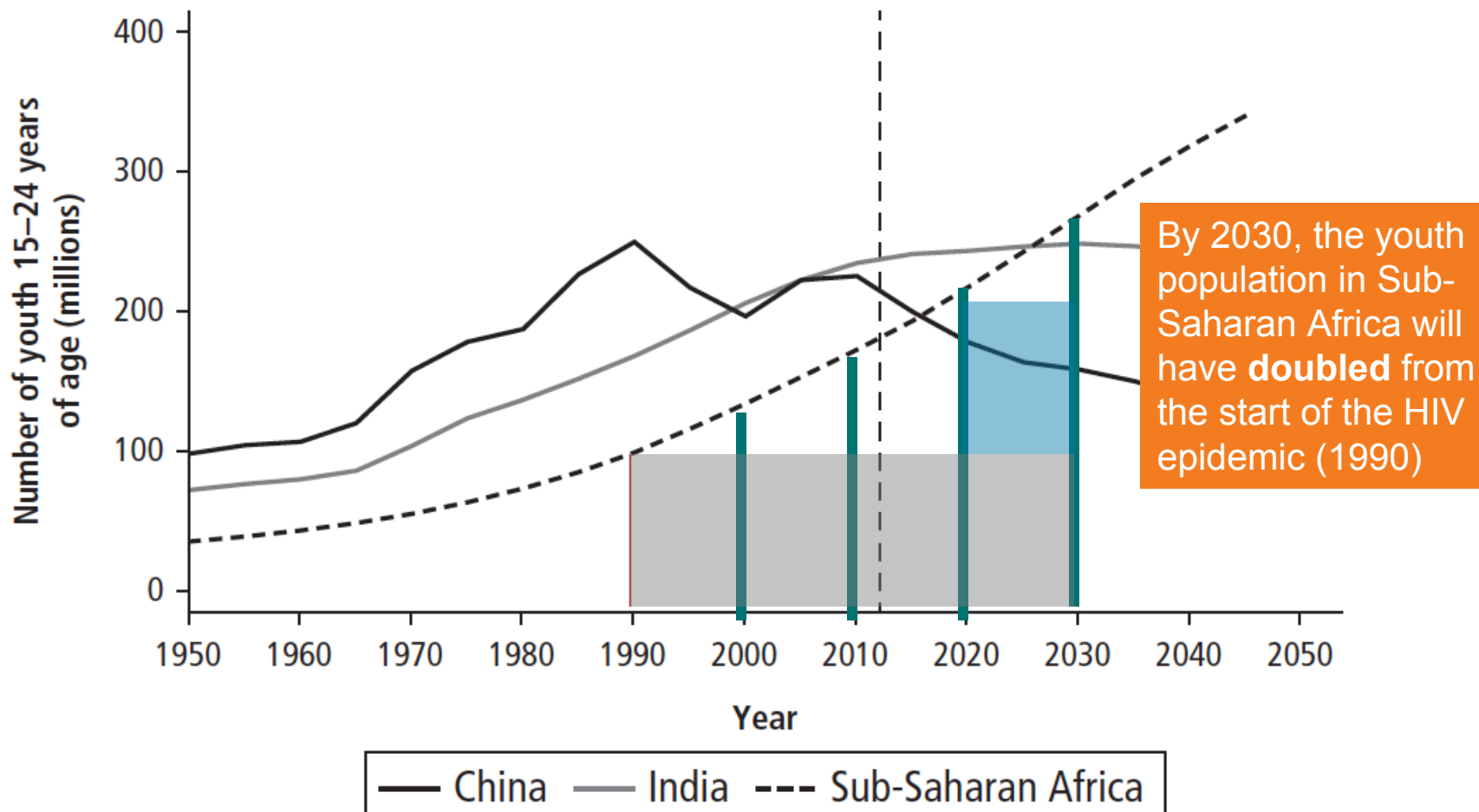
HIV Incidence Rate by Region & Year, 1990-2015



Source: UNAIDS, 2016

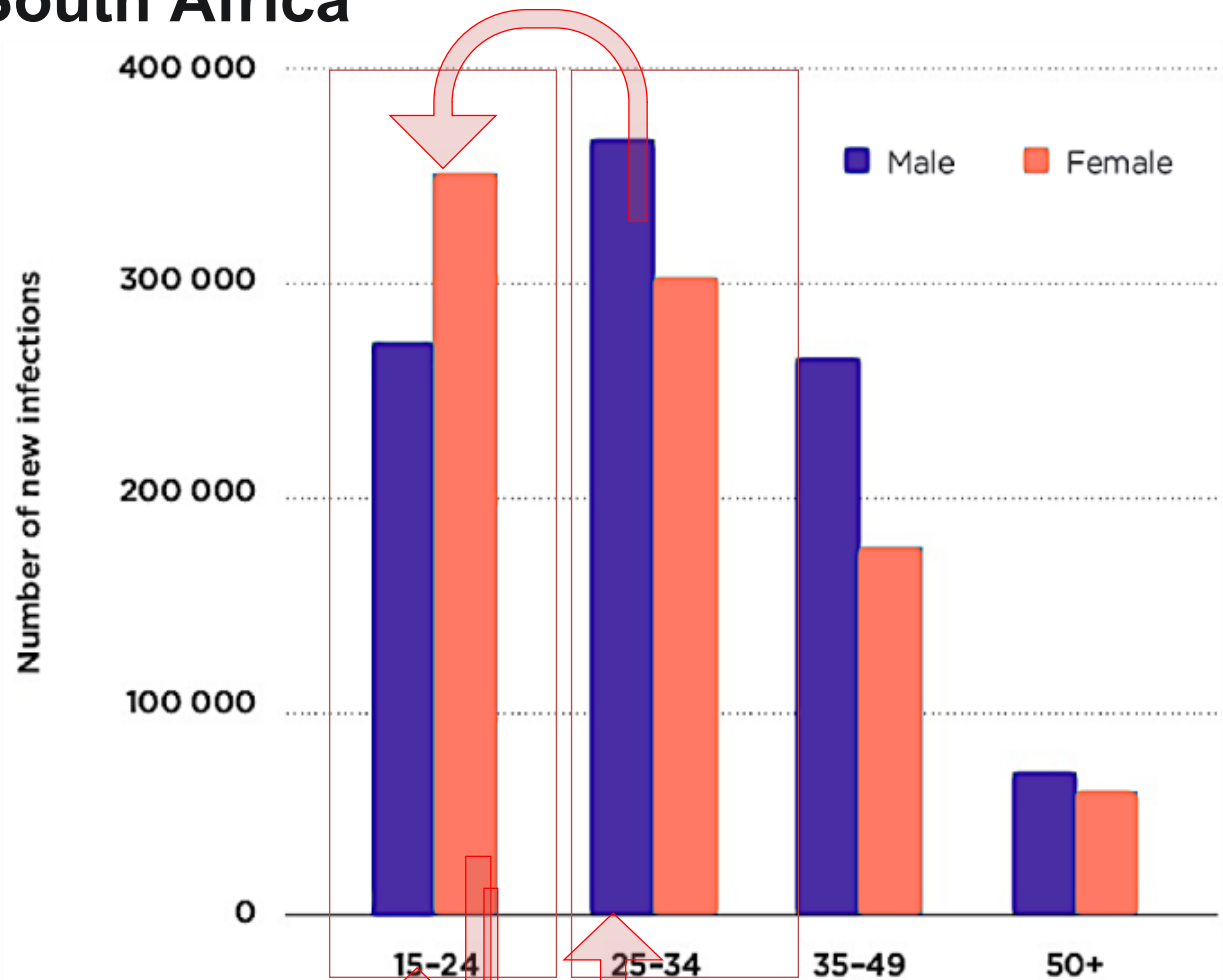
Youth Bulge in Sub-Saharan Africa: Larger than in China and India, with double the number of 15-24 youth compared the start of the epidemic

Figure 4.9 Projected Growth of Youth Population 15–24 Years of Age in Sub-Saharan Africa, China, and India, 1950–2050



Age-Gender Disparity in New HIV Infections Globally, 2014: Example from South Africa

780,000
new infections
primarily
driven
by infection of
young women

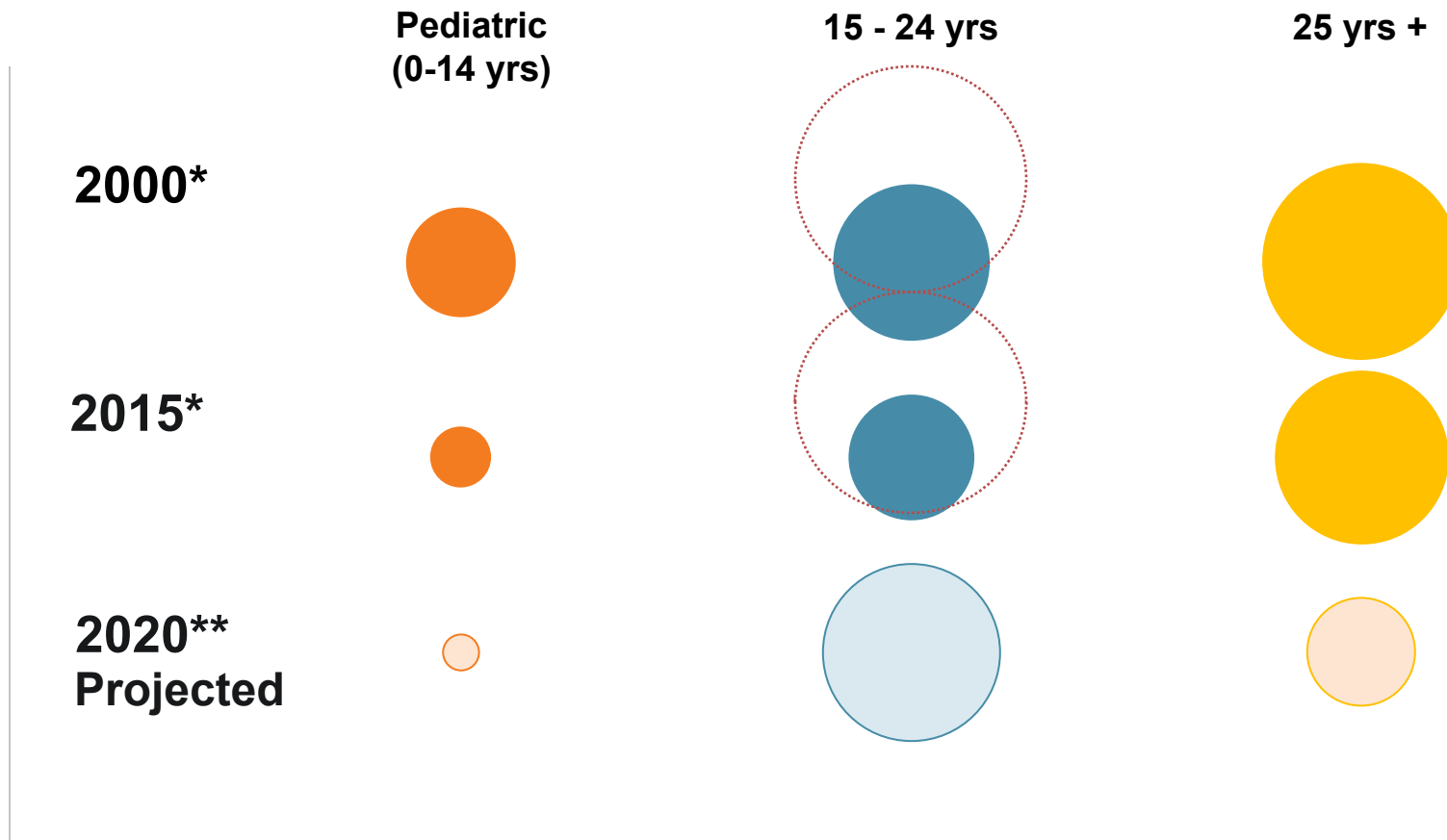


Source: UNAIDS 2014 estimates.

Disproportionate Success by Age Group

In Reducing New HIV Infections Over the Course of the Response

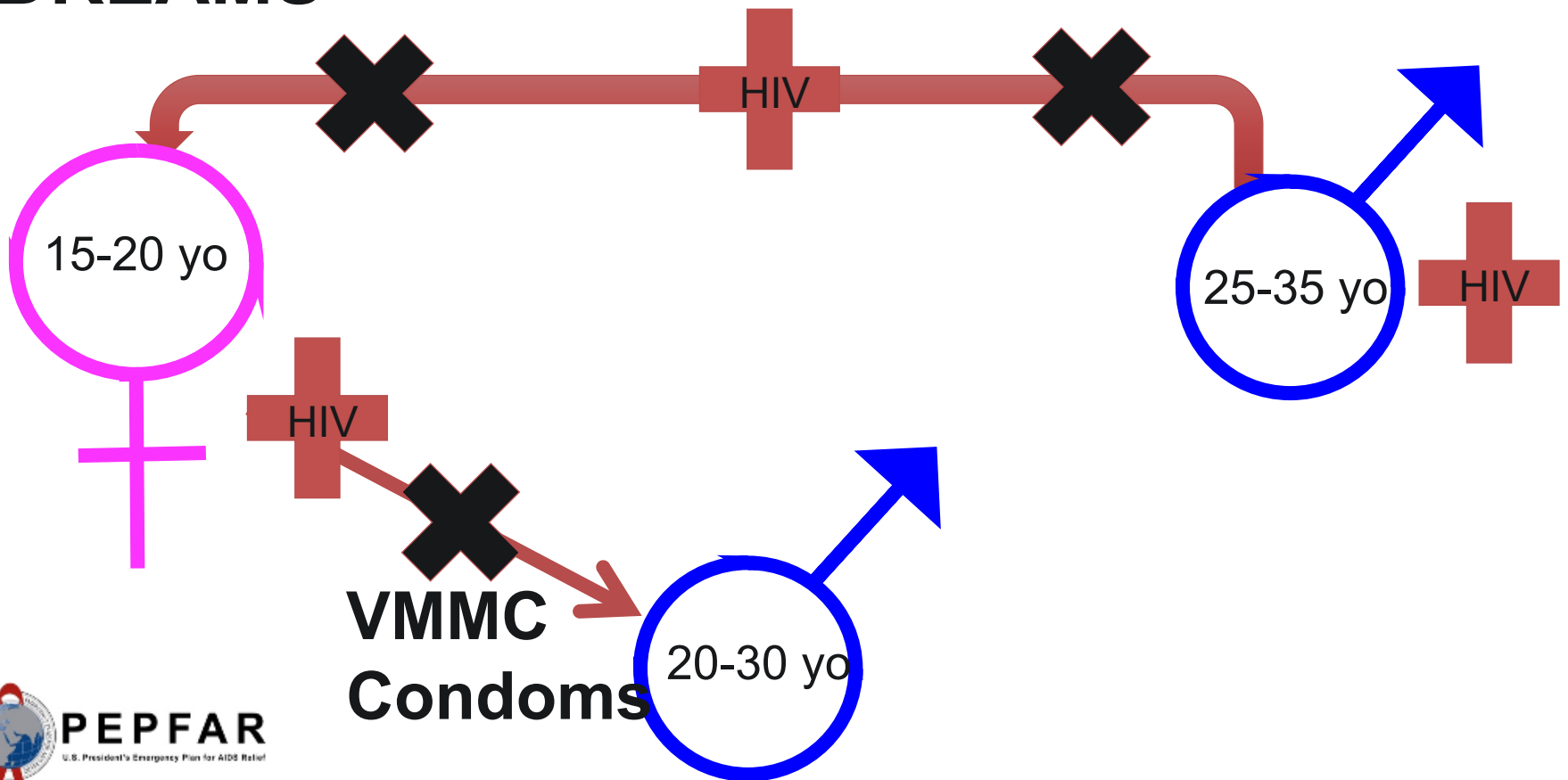
New HIV Infections by Population and Year



Sources: * UNAIDS AIDS info Online Database, 2016; ** 15-24 yrs age group projected based on Africa Development Forum / World Bank 2015, "Africa's Demographic Transition: Dividend or Disaster?"

HIV Lifecycle in SSA and Investment Priority to Control the Epidemic

ARV Treatment



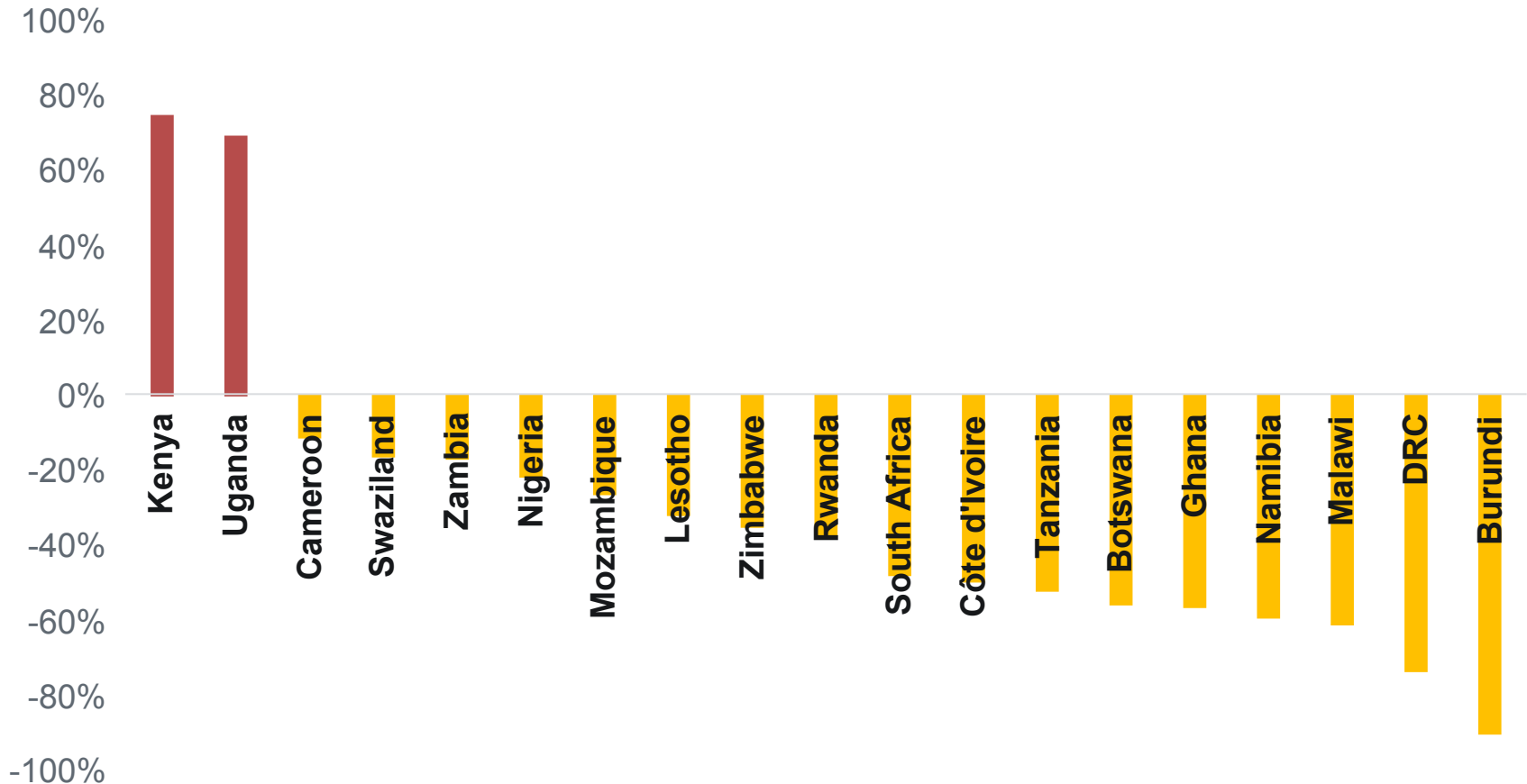
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The challenge:

New infections in adults : invisible and expanding epidemics in populations under 25 yo

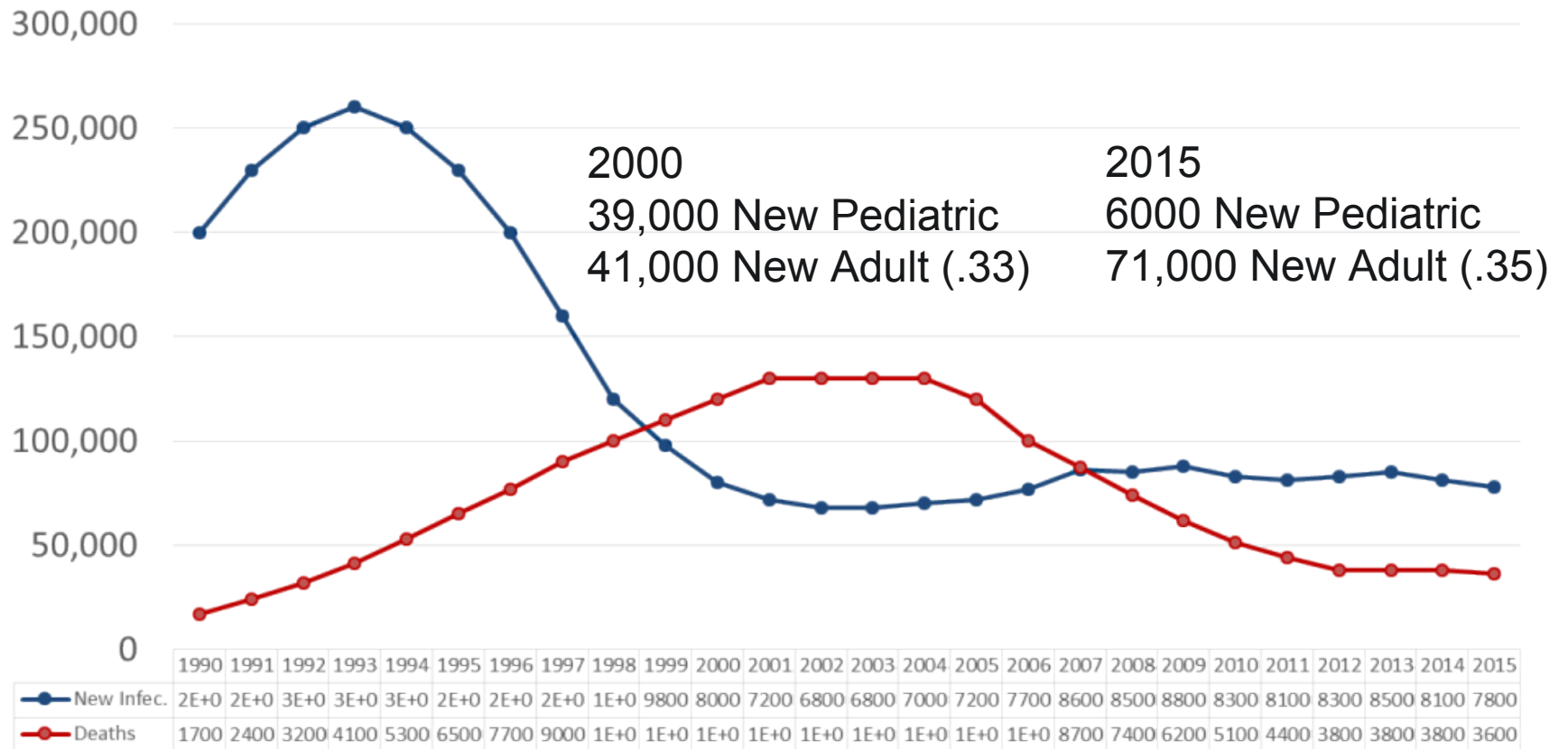
Percent change in new adult HIV infections (2000 – 2015)

Percent Change in New Adult HIV Infections (2000 - 2015)



Estimated Number of New HIV Infections and AIDS Deaths by Year

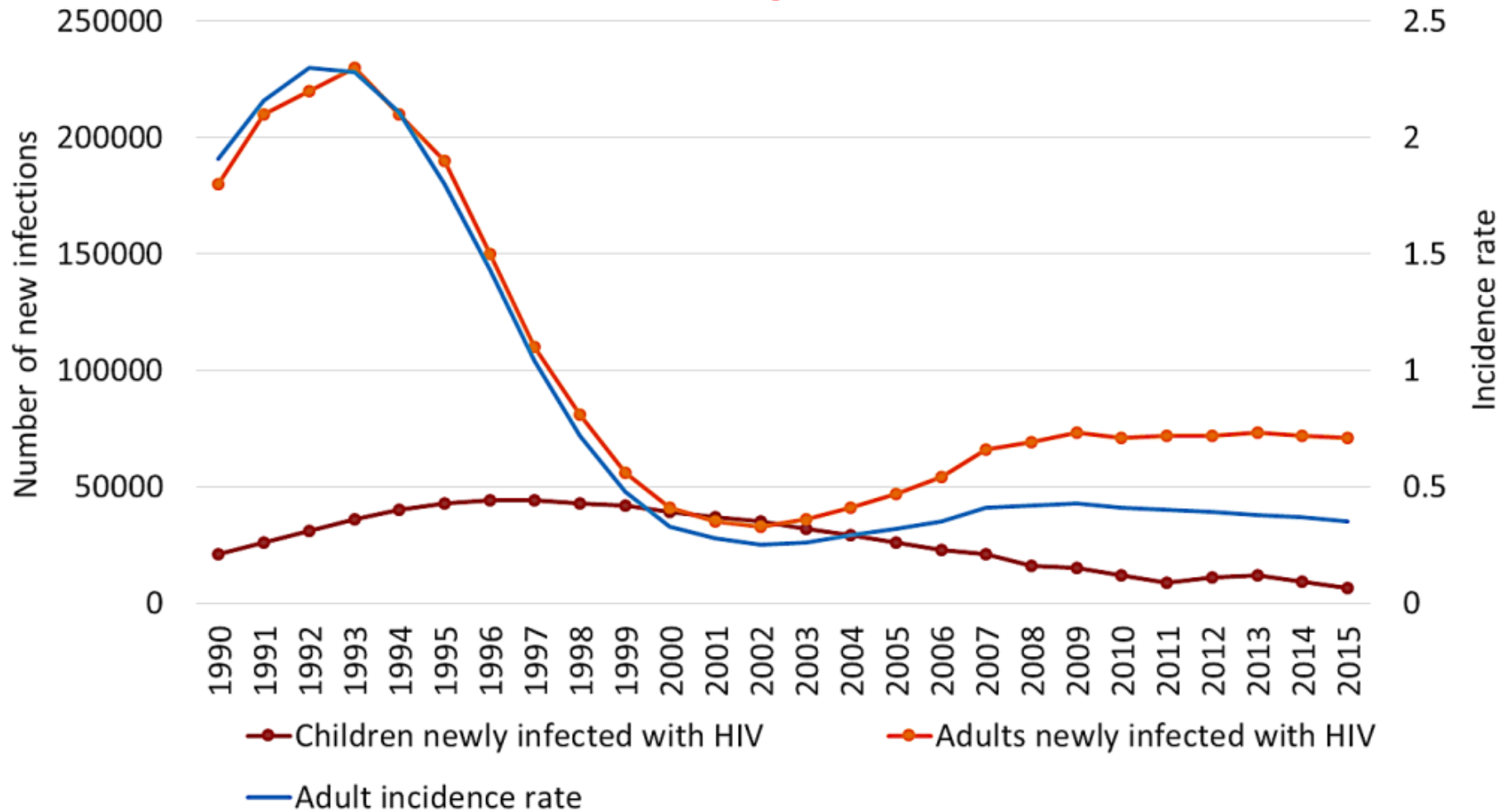
Kenya



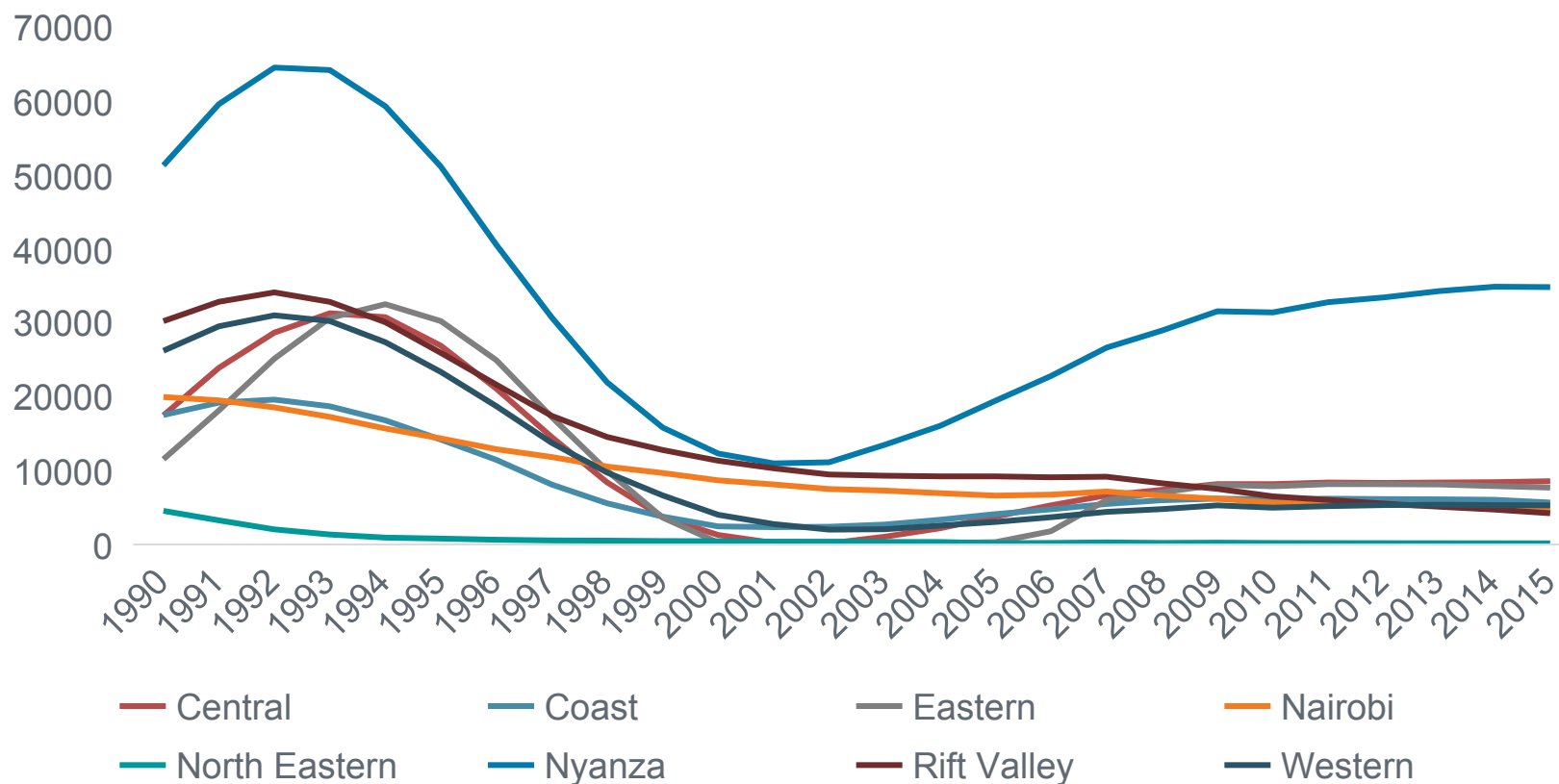
Source: UNAIDS Global AIDS Update 2016– <http://aidsinfo.unaids.org/>

Estimated Number of New HIV Infections and Incidence Rate by Year

Kenya

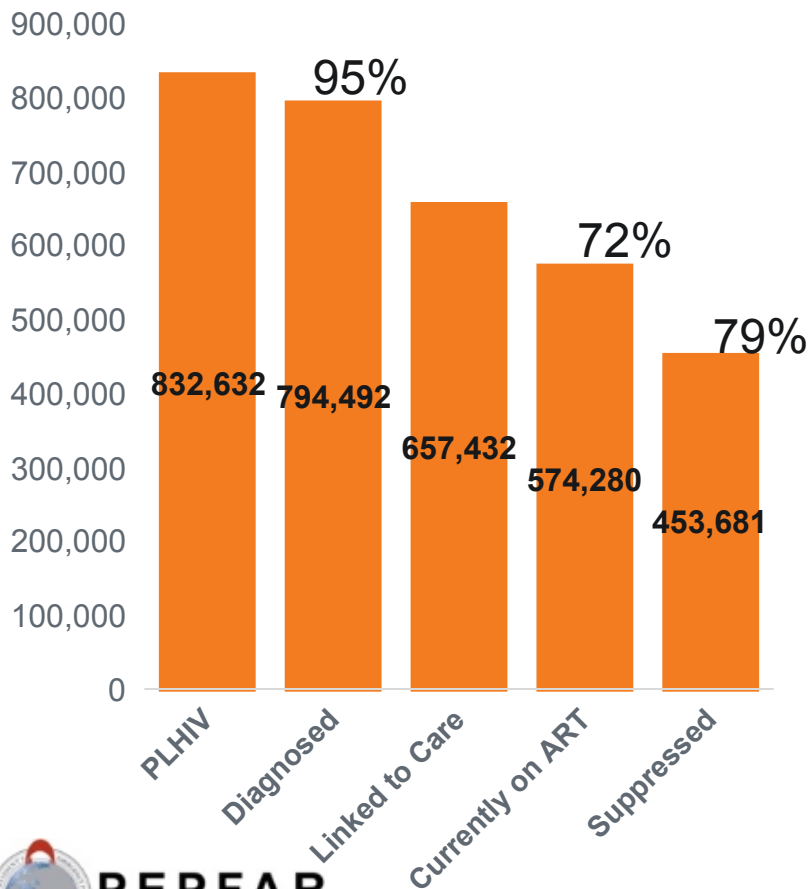


Number of New Adult (15+) HIV Infections in Kenya by Province (1990-2015)

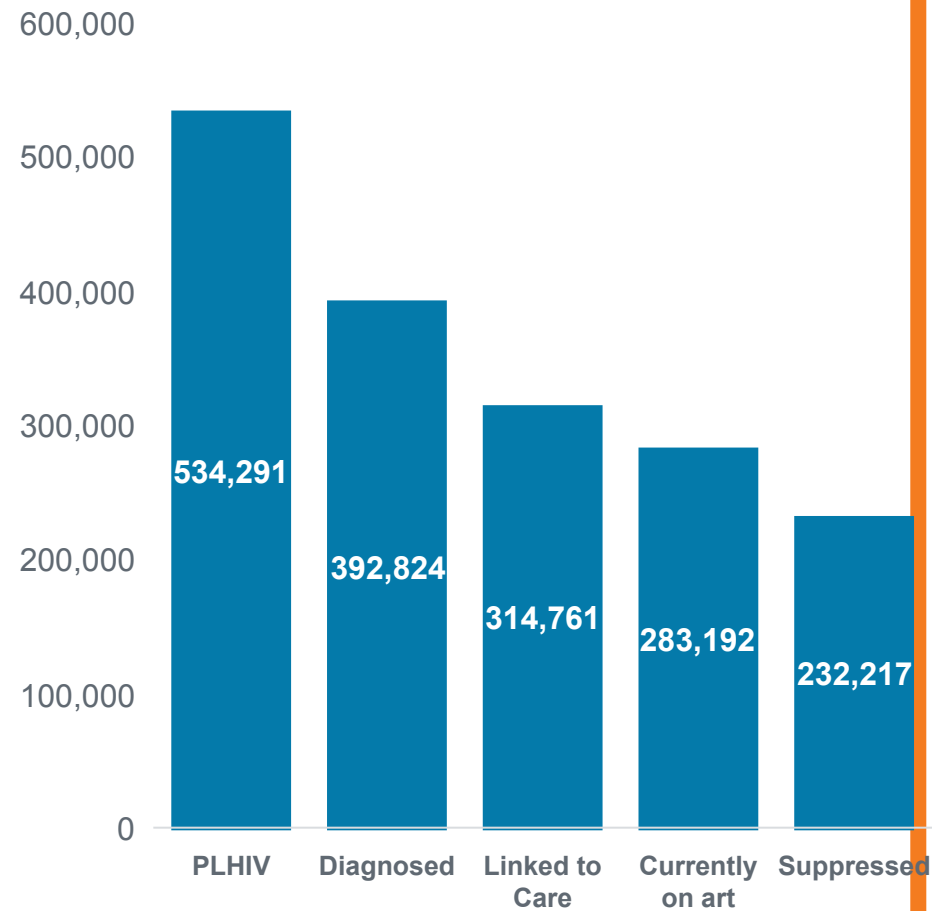


Kenya Clinical Cascade, by Gender, FY15

Female



Male

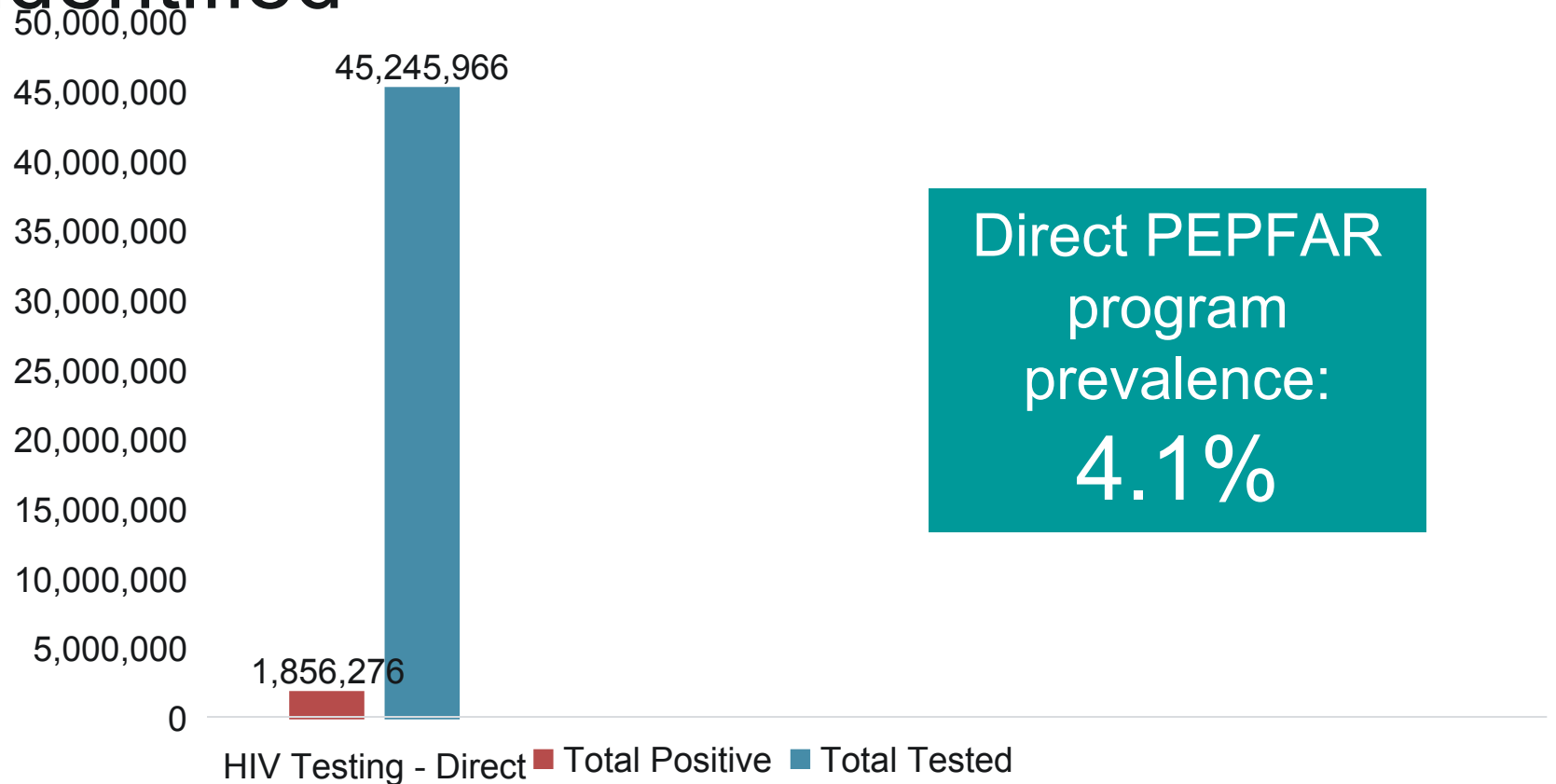


4

The Challenge : Living with HIV & Unaware

Review of Preliminary HIV Testing Data From the AIDS Indicator Surveys

APR15: Total PEPFAR Direct Results for HTC and HIV positive people identified



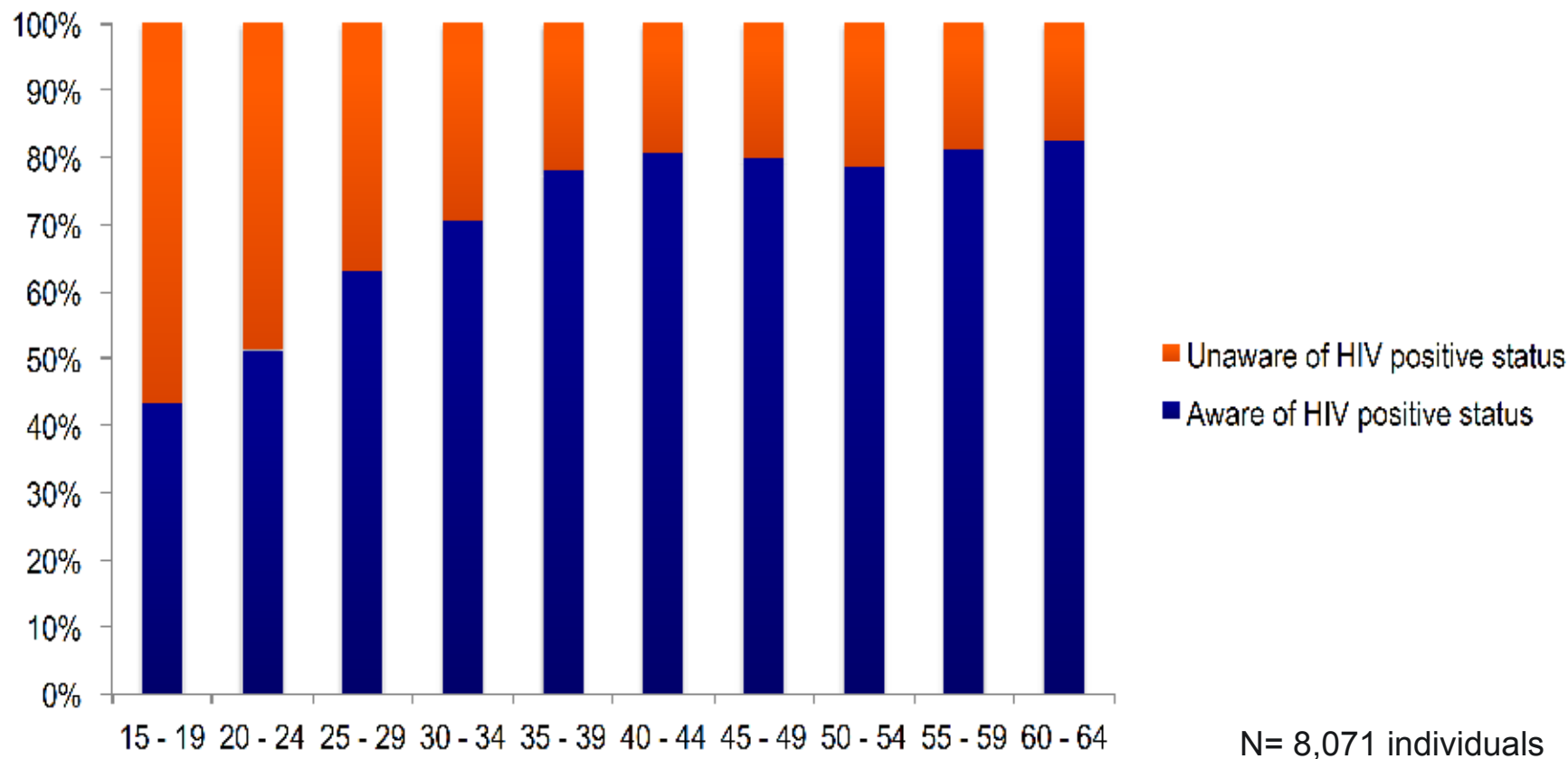


Total – Combined country data

Awareness of HIV positive status by age

Pooled data from Malawi, Zambia, & Zimbabwe

Percent of HIV positive individuals aware of their HIV status, by age,
Pooled data from Malawi, Zambia, and Zimbabwe, 2016

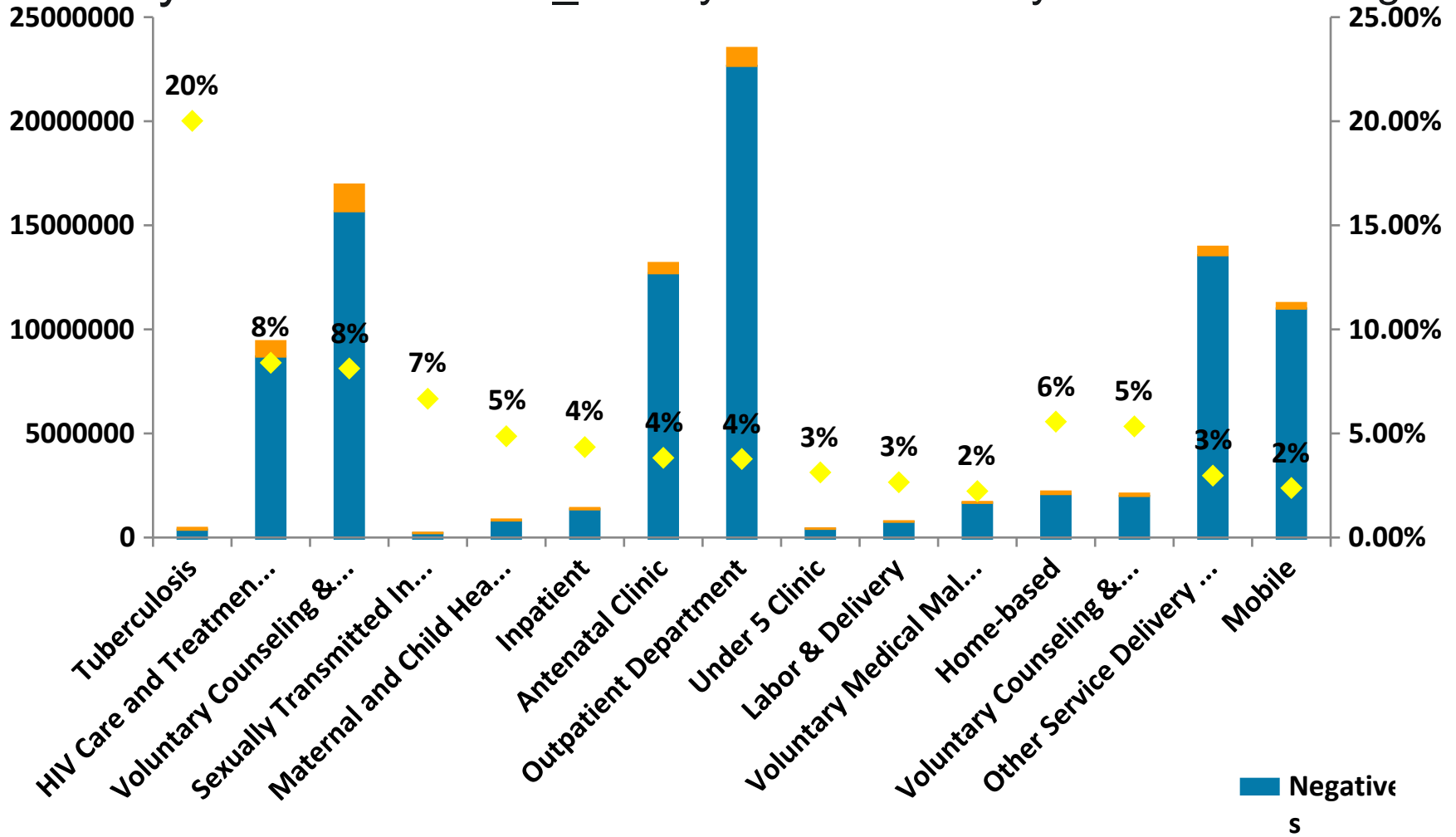




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Solution : Testing the right people

Number of Persons Tested and Yield/Positivity by Service Delivery FY16 Q1-Q3 HTC_TST by Service Delivery and Result Disag

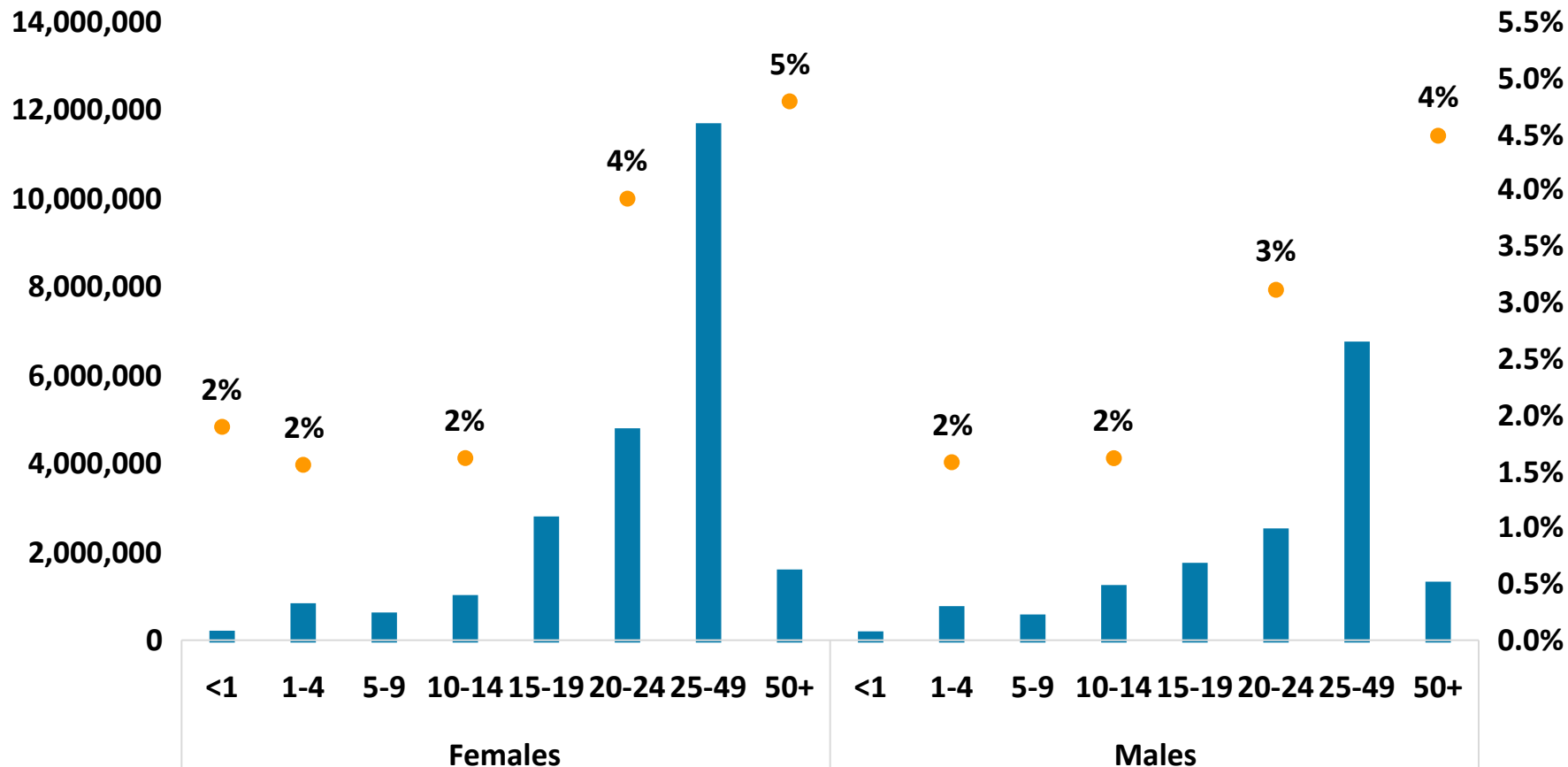


PEPFAR Testing Results by Age and Sex

FY16 Q1-Q3 HTC_TST PEPFAR Results

Number Tested and Yield/Positivity by Age and Sex

Number Testing HIV-Positive by Age and Sex



*Countries excluded from this analysis because they report on coarse age bands only: Uganda, Asia Regional, Burma, Cambodia, and Papua New Guinea.

HTS Priorities

- Focus on achieving first “90” through strategic programming with emphasis on data use and yield
- Ensure quality rapid HIV testing service delivery with accurate results
- Develop tools to support testing for partners and family of index patients as a high-yield approach
- Support social/peer-based network testing as a way of reaching undiagnosed key populations
- Explore innovative approaches for reaching young people, and men with HIV self-testing, multi-disease campaigns, and targeting male-friendly venues



A large blue number '6' is positioned on the left side of the slide. The background is a solid orange color with a faint, dotted world map centered behind the text. The map is composed of small white dots that form the outlines of continents.

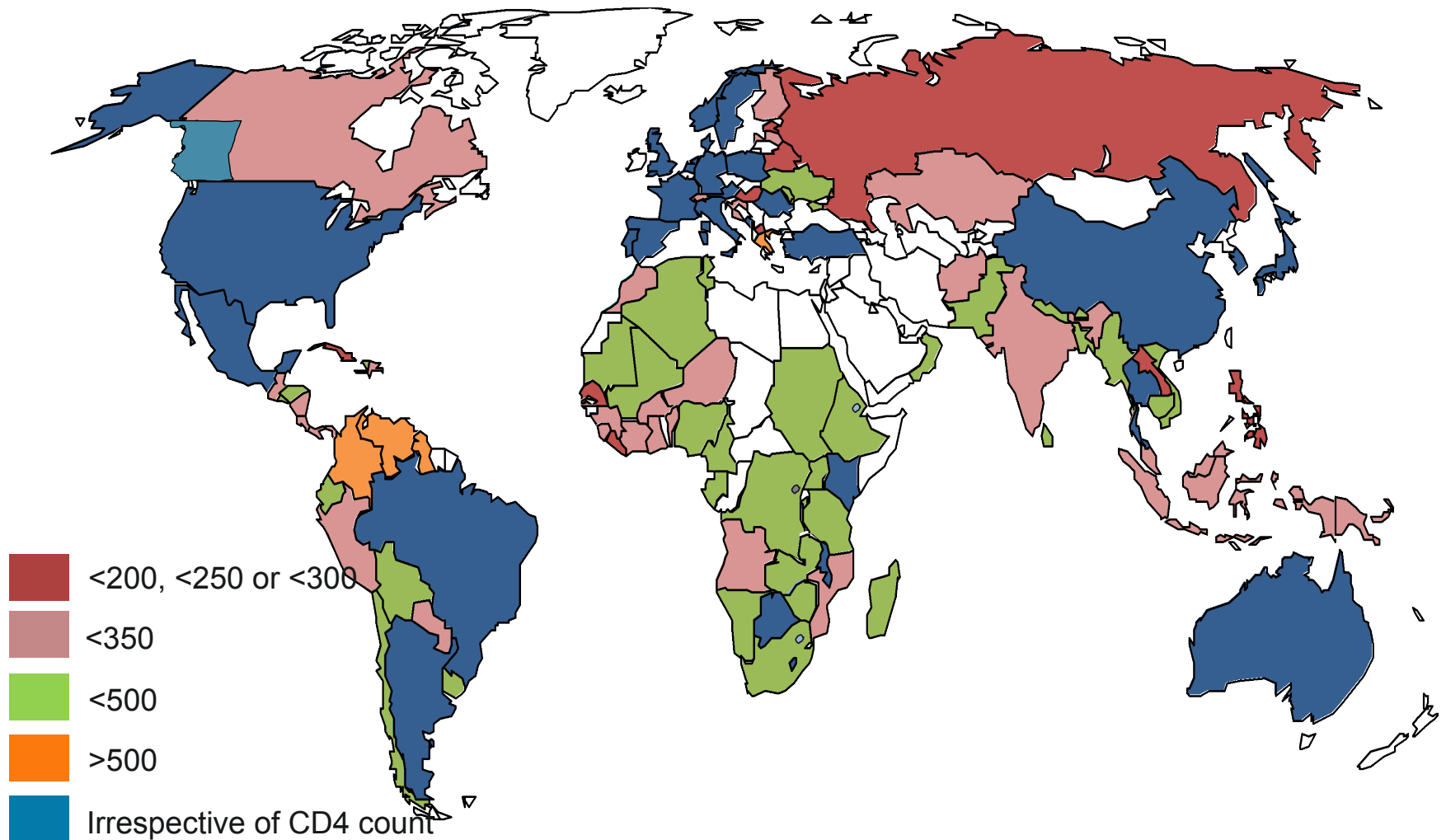
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Solution : Treat All

Translating science into policy & practice : single public health message

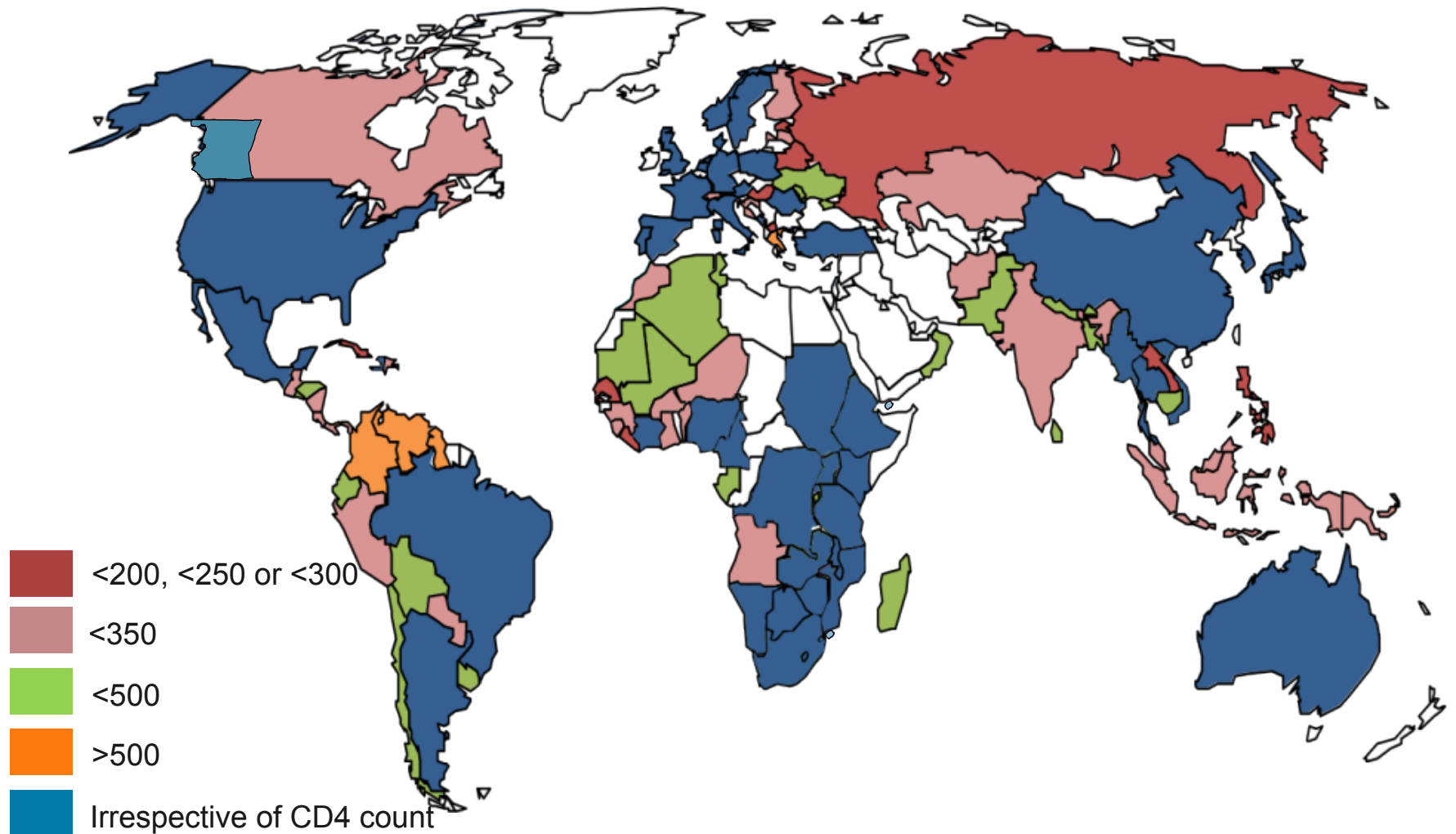
ART initiation policy: 2015






2015 WHO Recommendation : Irrespective of CD4 count



ART initiation policy: 2016

2015 WHO Recommendation : Irrespective of CD4 count



-  <200, <250 or <300
-  <350
-  <500
-  >500
-  Irrespective of CD4 count

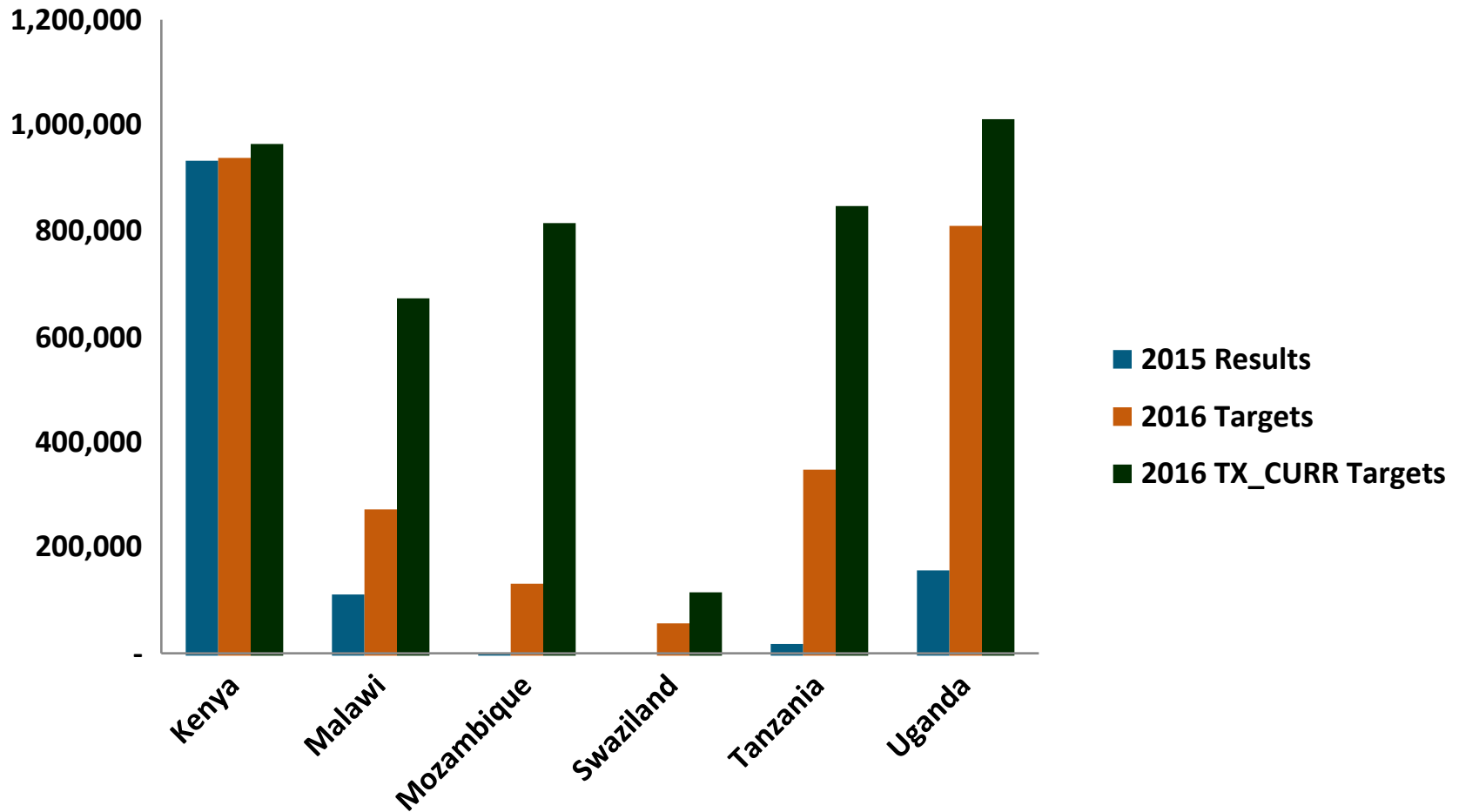
PEPFAR

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Source: Published policy, September 2016

Viral Load Results for 2015 and Targets for 2016

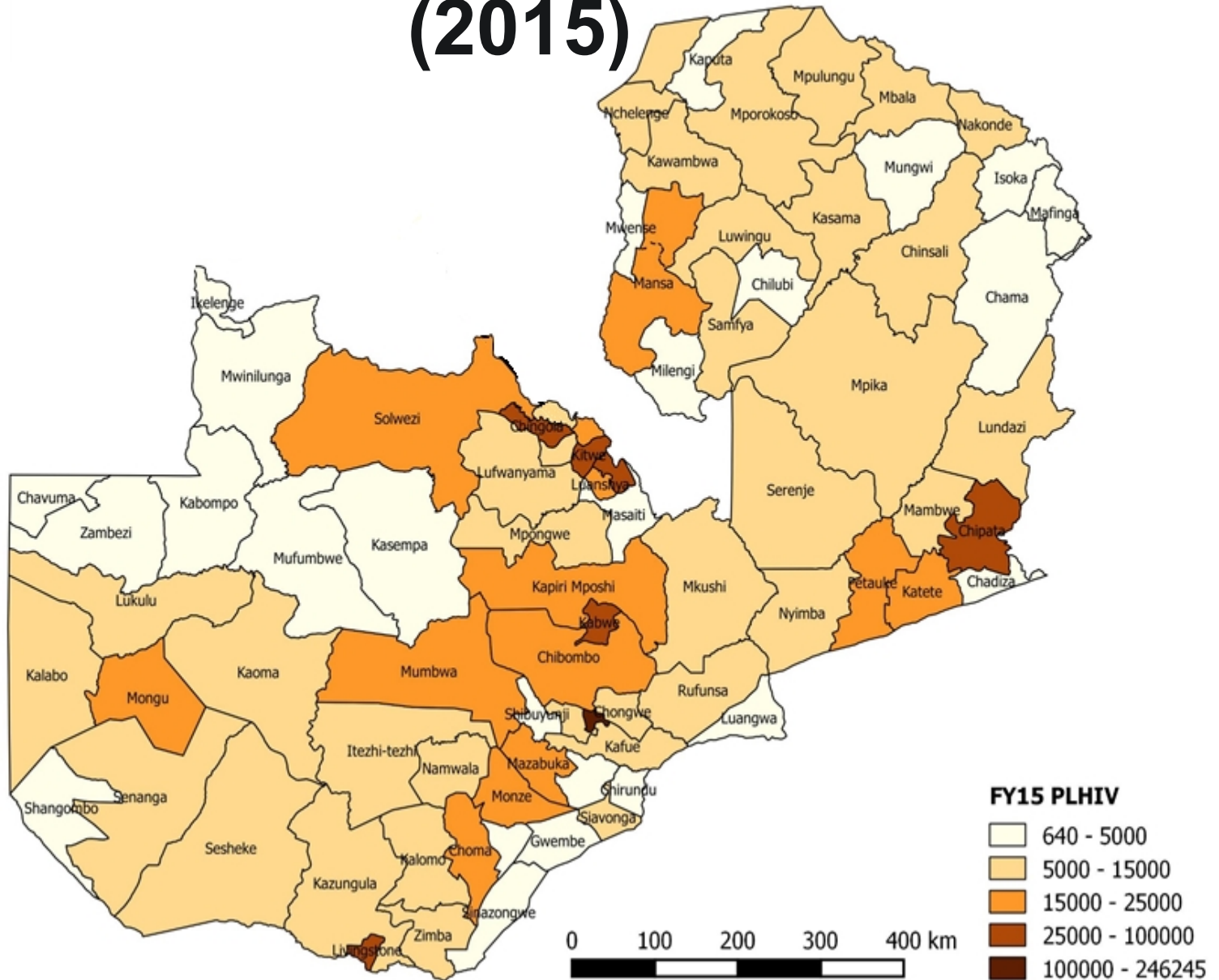
Viral load and treatment targets from six countries with catalytic funding



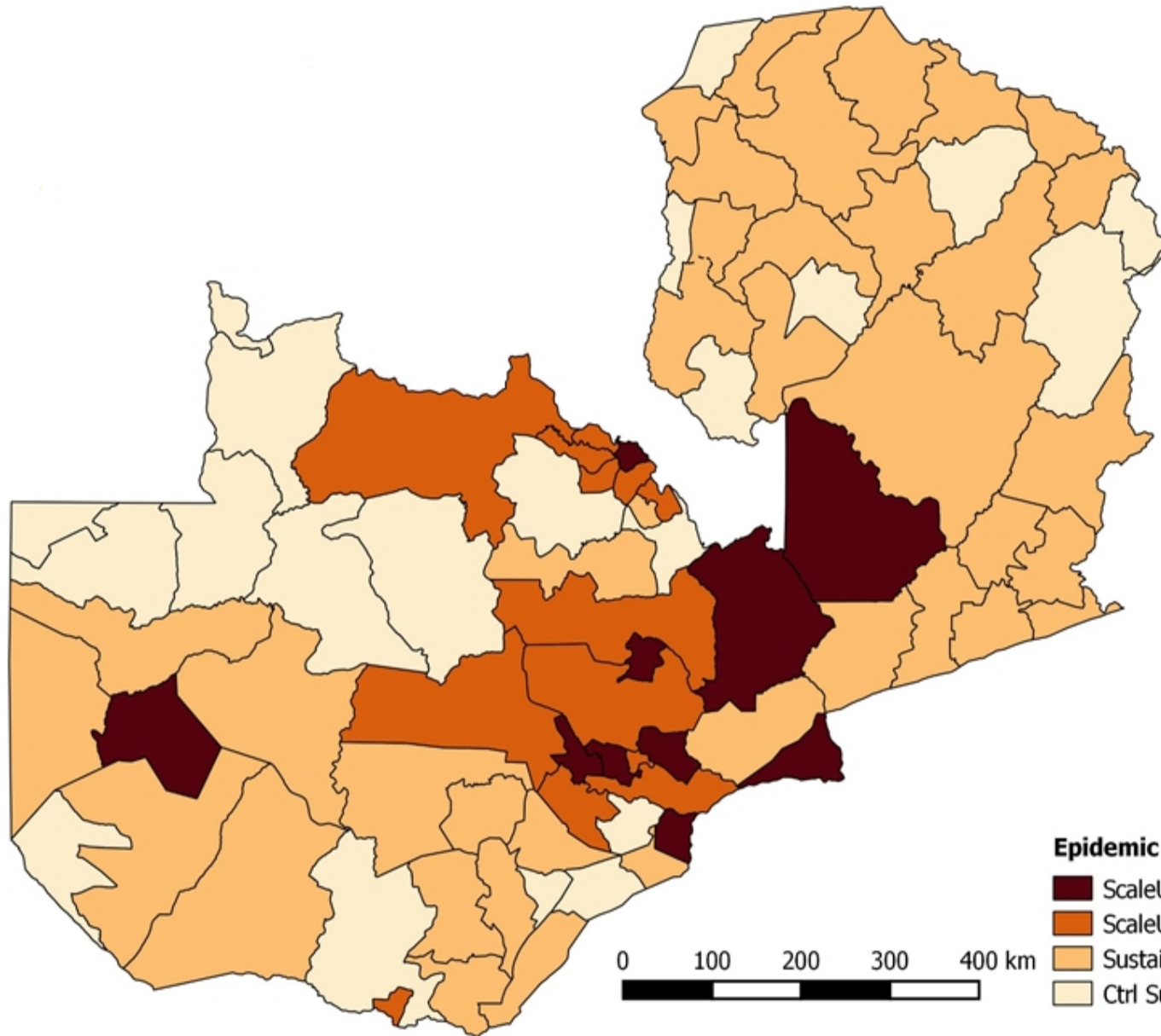


Epidemic control: Zambia

PLHIV Burden In Zambia (2015)

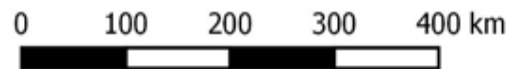


Epidemic Control End of FY 2015



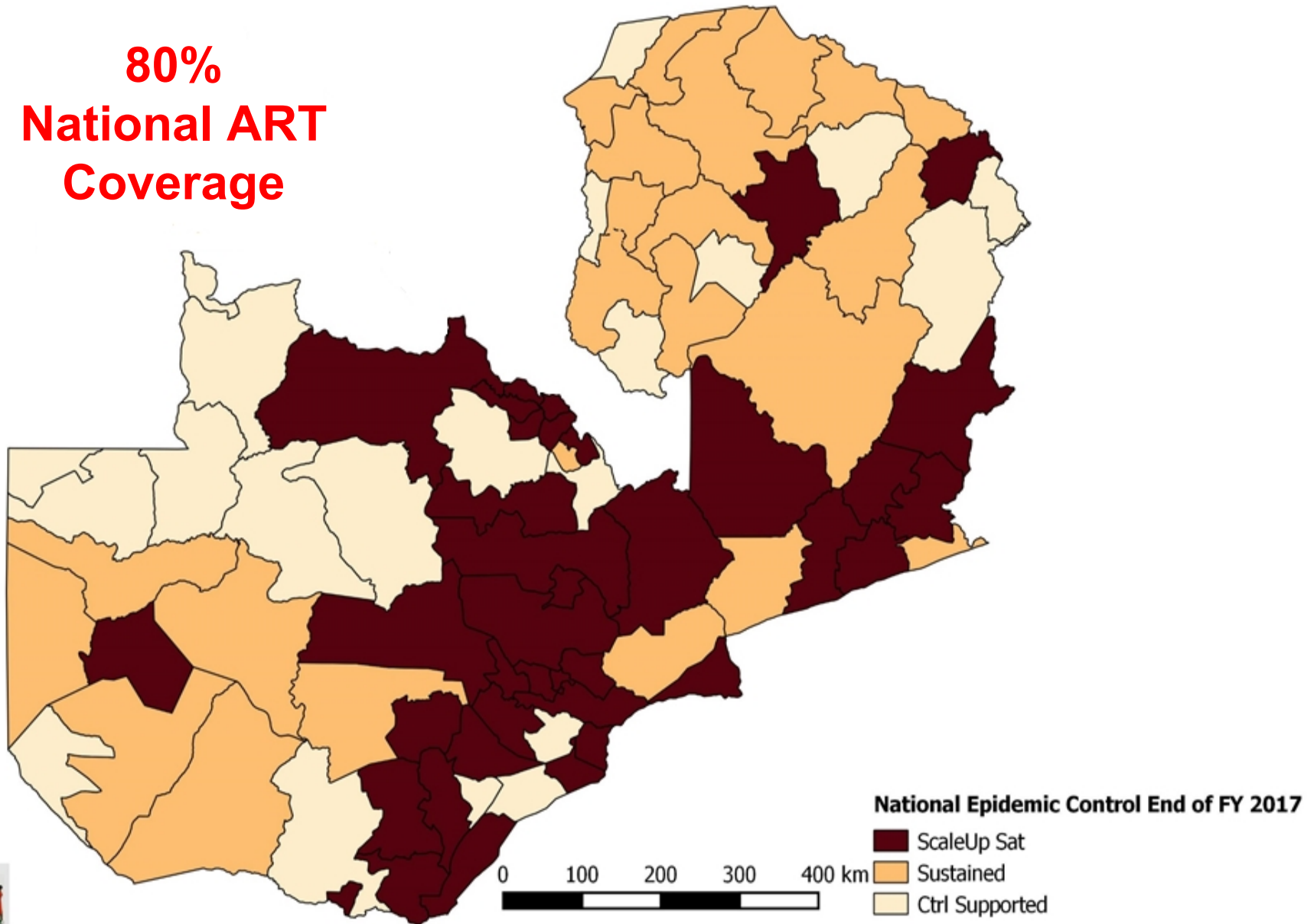
Epidemic Control End of FY 2015

- ScaleUp Sat
- ScaleUp Agg
- Sustained
- Ctrl Supported



National Epidemic Control End of FY 2017

80%
National ART
Coverage



Success is possible

Countries with saturation of VMMC and 90/90 by WAD 2017

Circumcision

South Africa

Kenya

Uganda

90/90 for Treatment

Swaziland

Uganda

Zambia

Rwanda

Botswana

Namibia

Malawi

7

Solutions : Preventing New Infections: **DREAMS** and **VMMC**

Young women and girls
account for

75%

of new HIV infections
among adolescents in sub-Saharan
Africa

This must change.



Determined

Resilient

Empowered

AIDS-Free

Mentored

Safe

The DREAMS Partnership

- Launched on World AIDS Day 2014 for 10 countries
- Initial \$385 million partnership
 - 2014 Launch Partners PEPFAR, Bill & Melinda Gates Foundation, and Girl Effect
 - In 2015 we added Johnson & Johnson, ViiV Healthcare and Gilead Sciences
- DREAMS countries received additional funding (above the \$385M) to scale up VMMC and treatment for men in DREAMS districts
- Innovation Challenge Fund winners announced in



- 800 ideas, 56 winners (60% small CBOs)

DREAMS

COUNTRIES

Solutions must be ready for rapid implementation in one or more of the 10 DREAMS countries

-  Kenya
-  Lesotho
-  Malawi
-  Mozambique
-  South Africa
-  Swaziland
-  Tanzania
-  Uganda
-  Zambia
-  Zimbabwe



Determined

Resilient

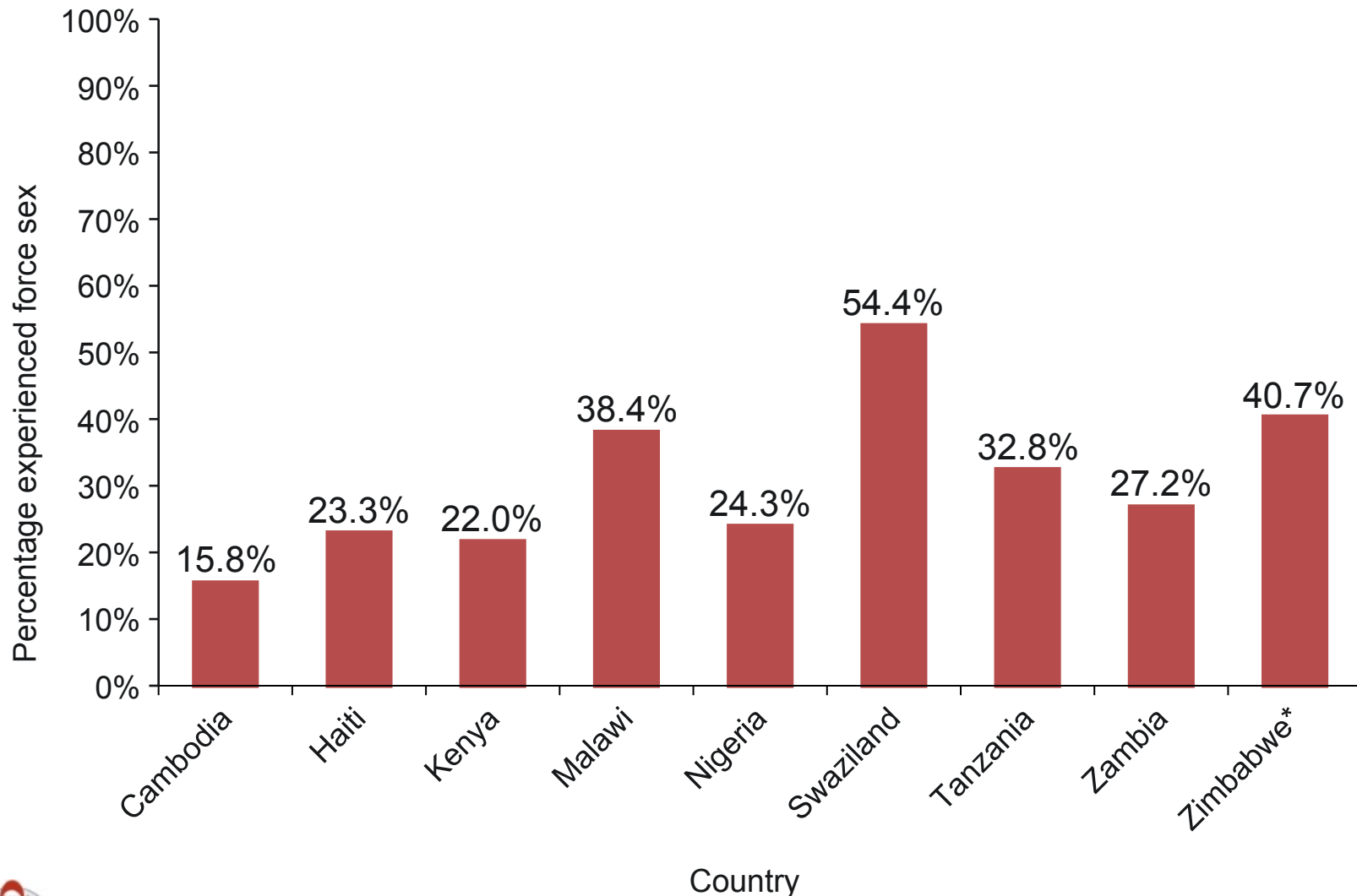
Empowered

AIDS-Free

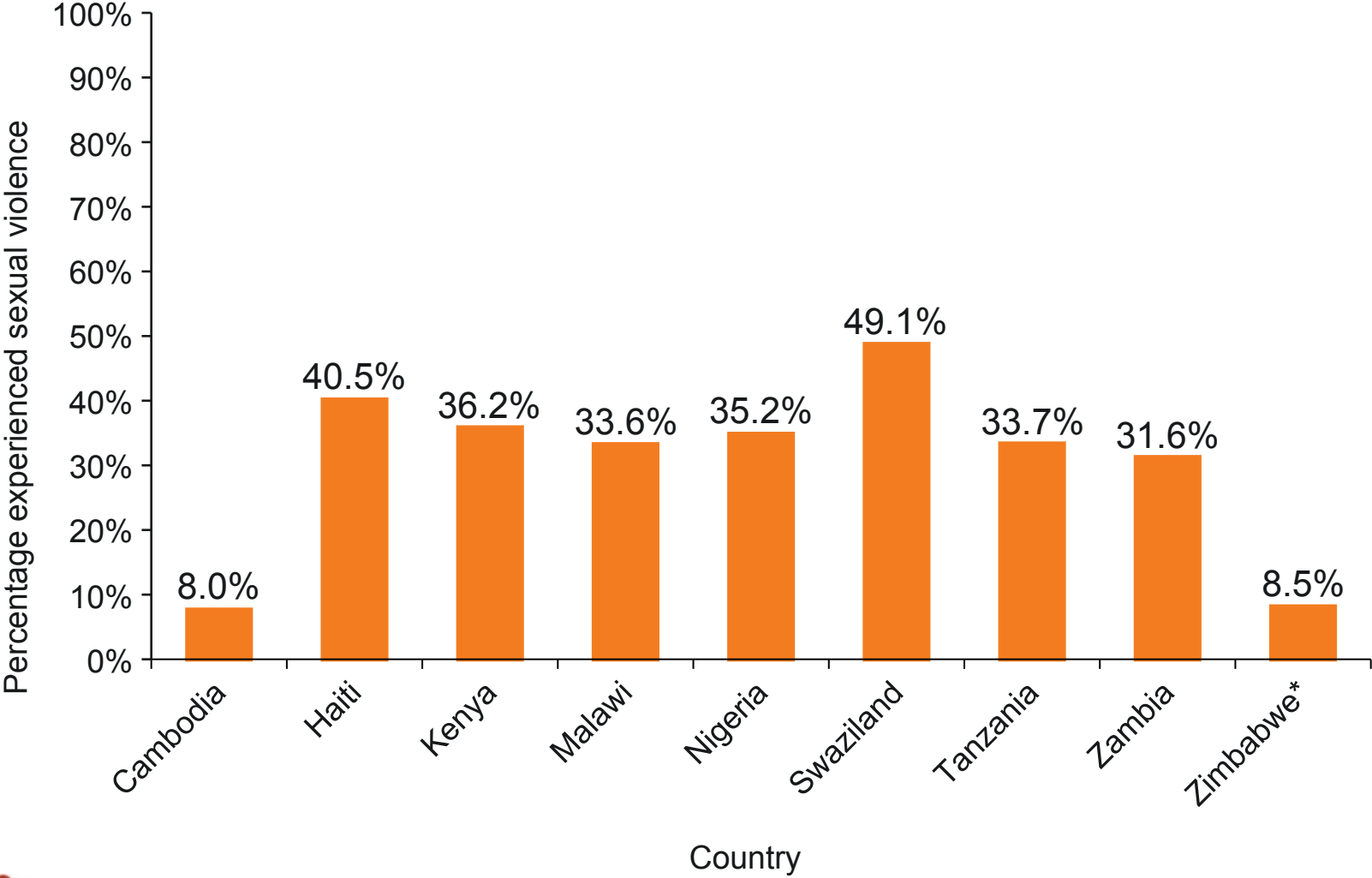
Mentored

Safe

Percentage of 13-24 Year Old Female Respondents Who Reported First Sex as Forced/Coerced -RAPE



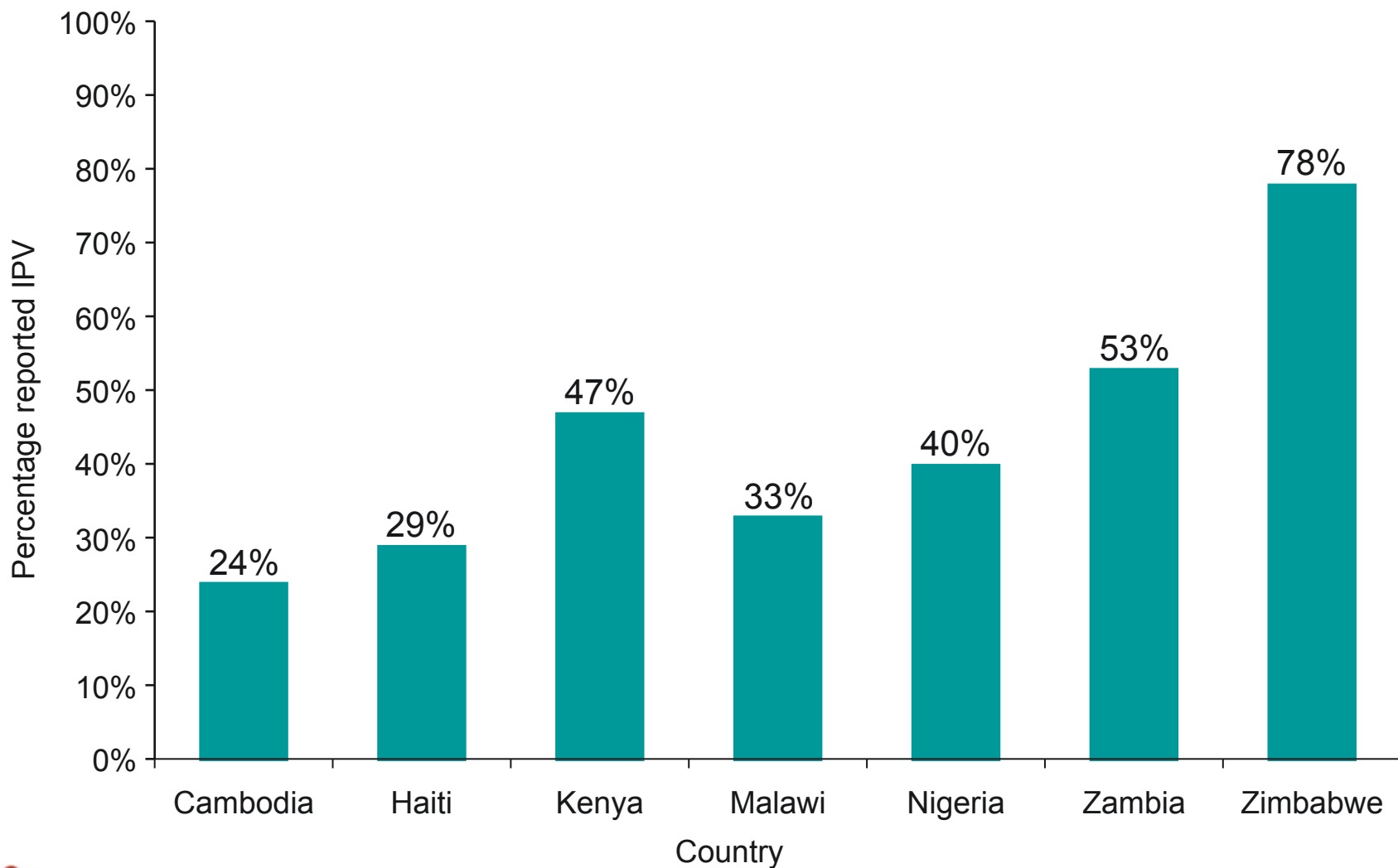
Sexual Violence among 13-24 Year Old Female Respondents Within the Past 12 Months



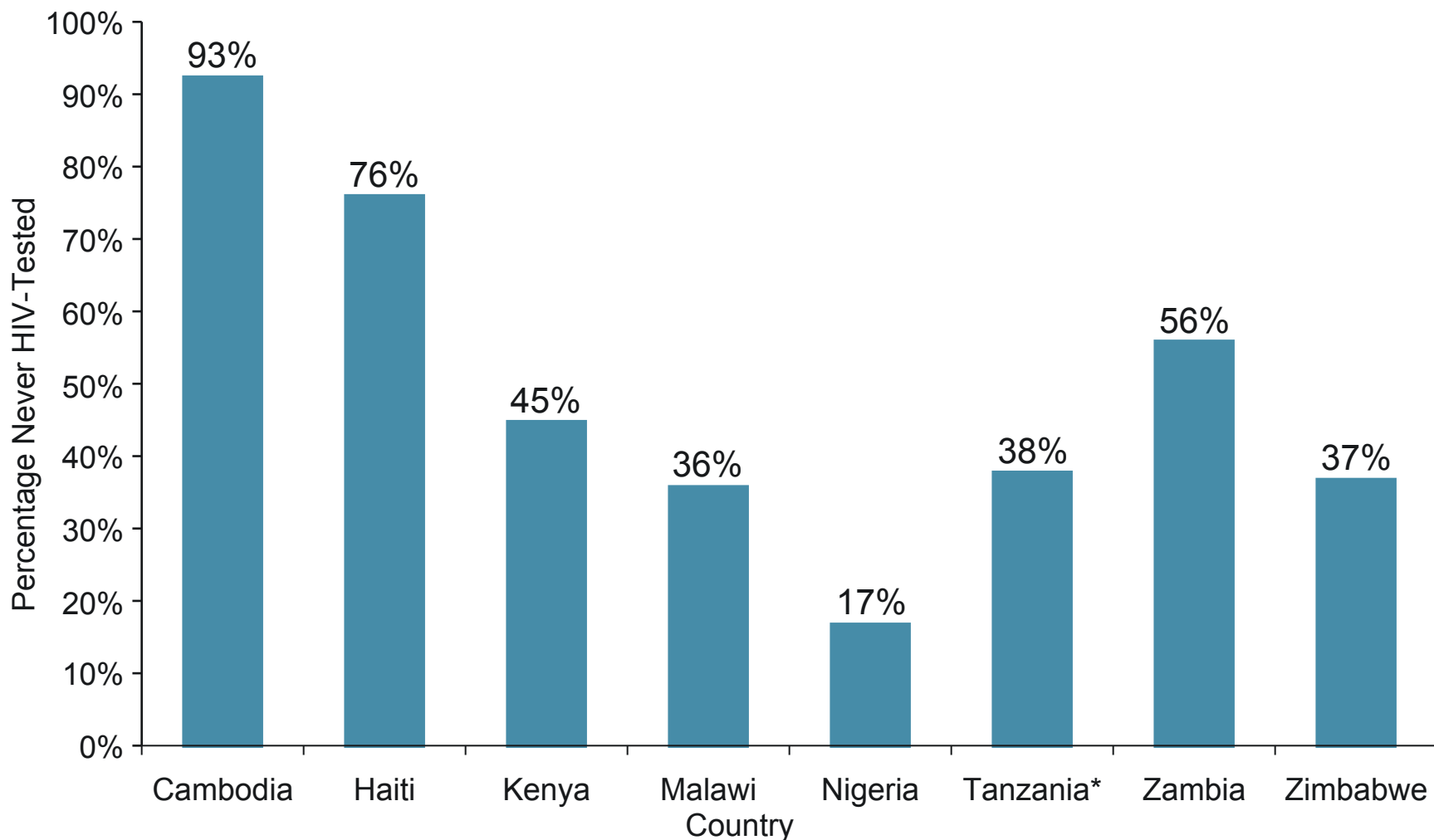
Source: VACS, 2016

*Data for Zimbabwe only available for 13-17 year old female respondents.

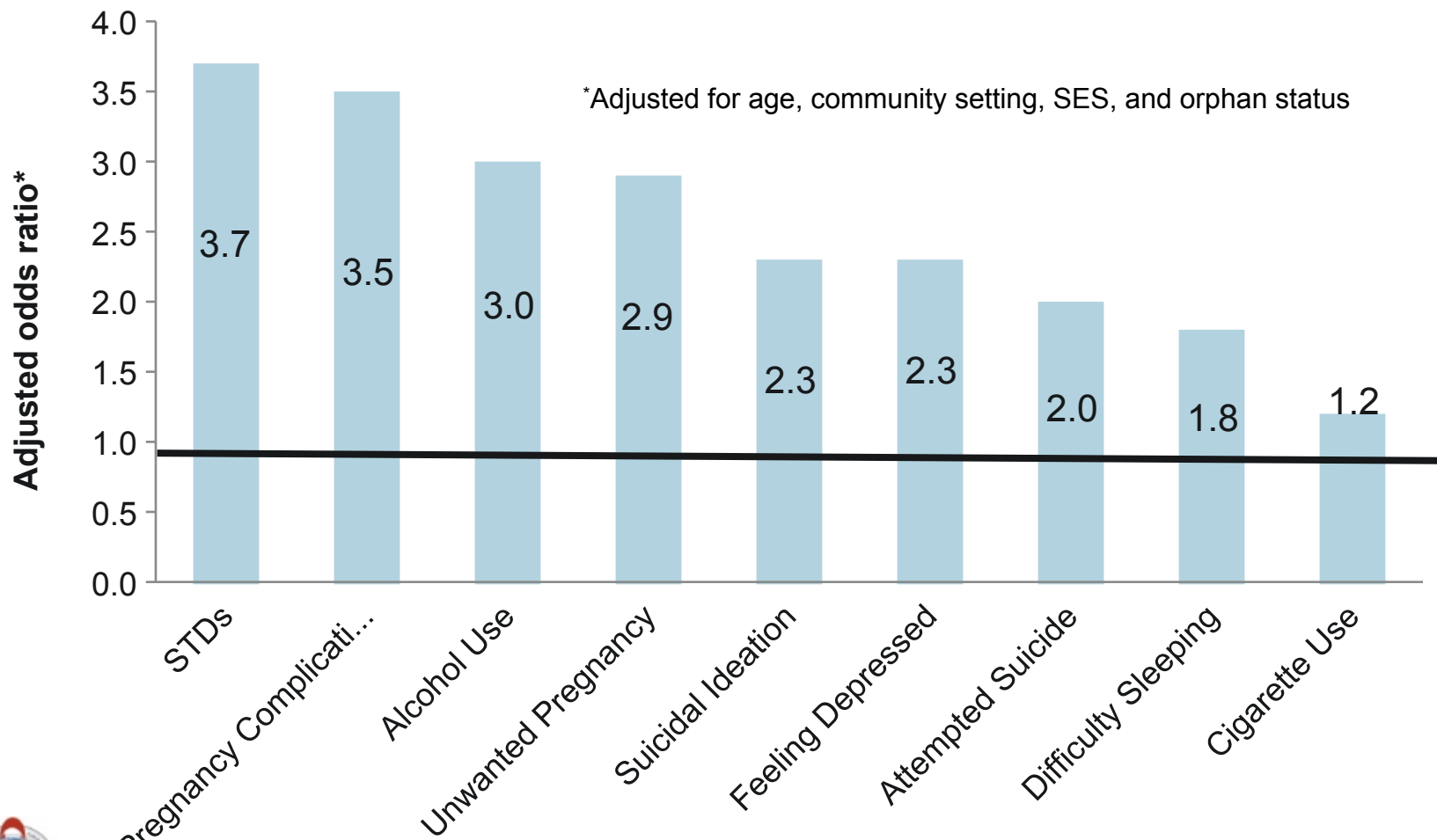
Percentage of Females Reporting First Sexual Violence Incident Prior to Age 18 was Perpetrated by a Boyfriend/Partner



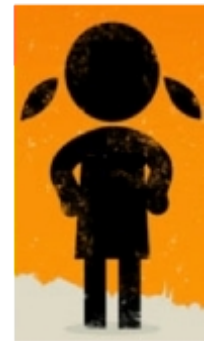
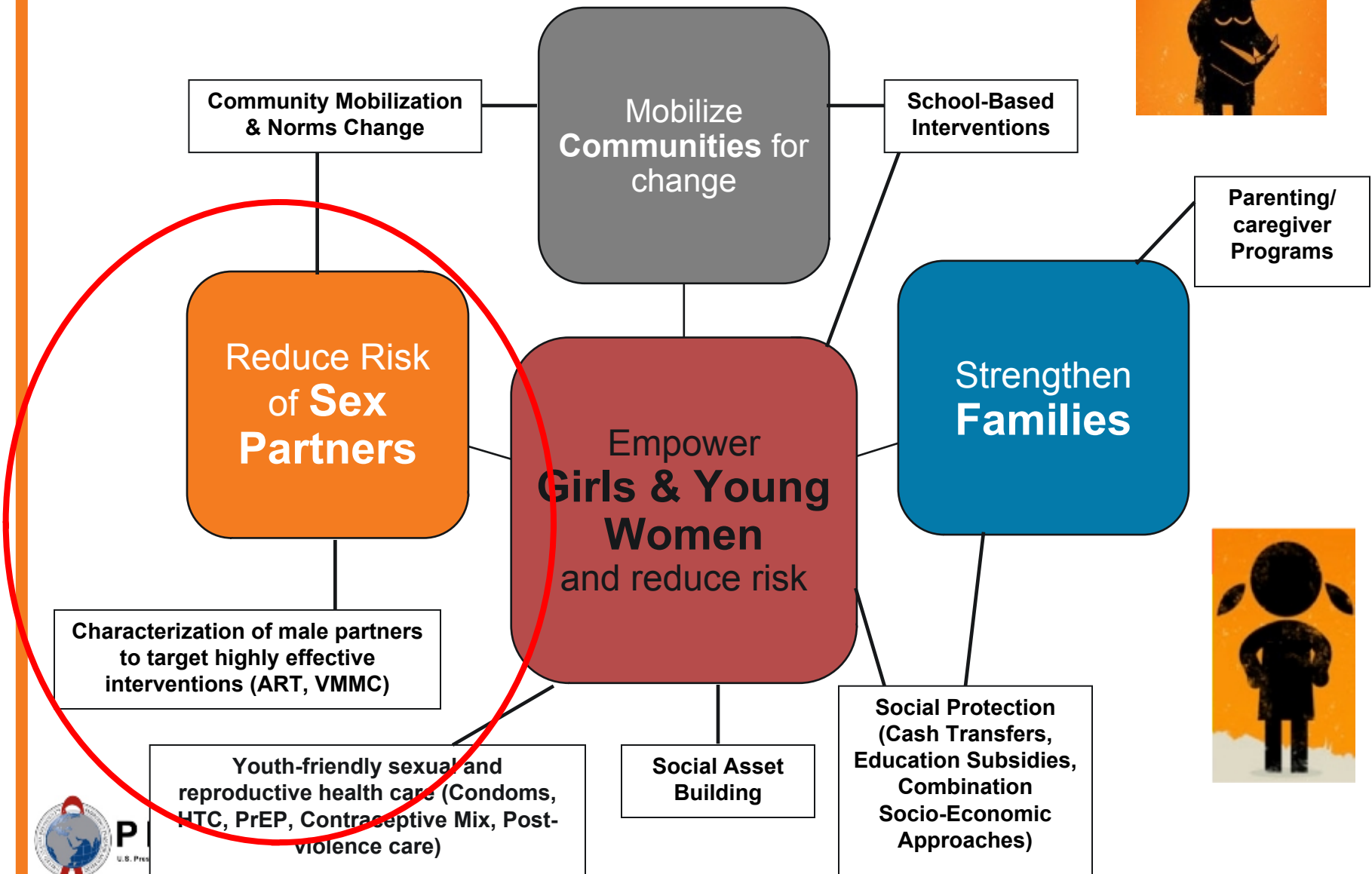
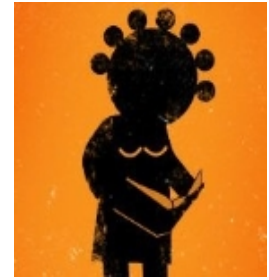
VAC and HIV Testing: Prevalence of 'Never HIV-Tested' among 13-17 Year Olds Reporting Past-Year Sexual Violence



Association Between Childhood Sexual Violence and Selected Health Conditions, Females 13 to 24 Years of Age, Swaziland, 2007



The Core Package



DREAMS Programming

STRENGTHEN THE FAMILY

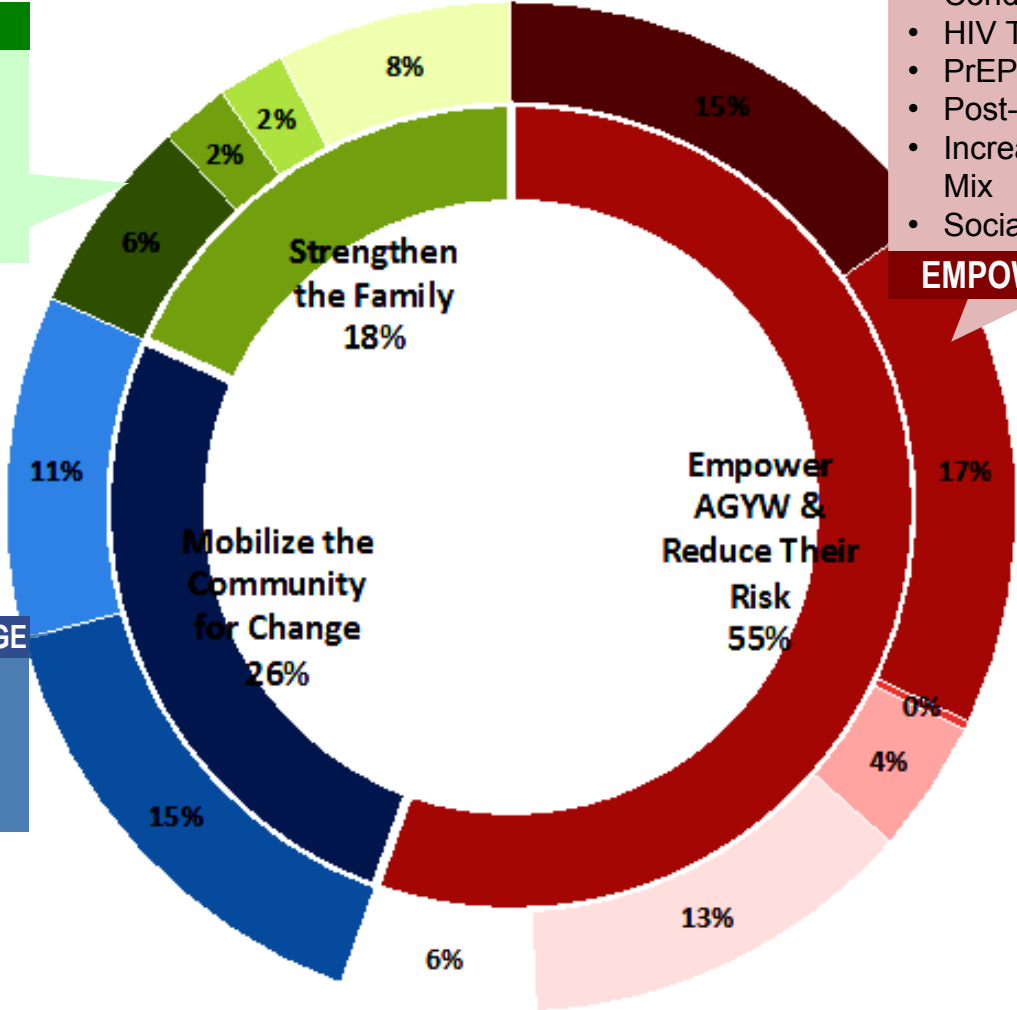
- Parenting/Caregiver Programs
- Cash Transfers
- Education Subsidy
- Socioeconomic Approaches

- Condom Promotion & Provision
- HIV Testing & Counseling
- PrEP
- Post-Violence Care
- Increased Contraceptive Method Mix
- Social Asset Building

EMPOWER AGYW & REDUCE RISK

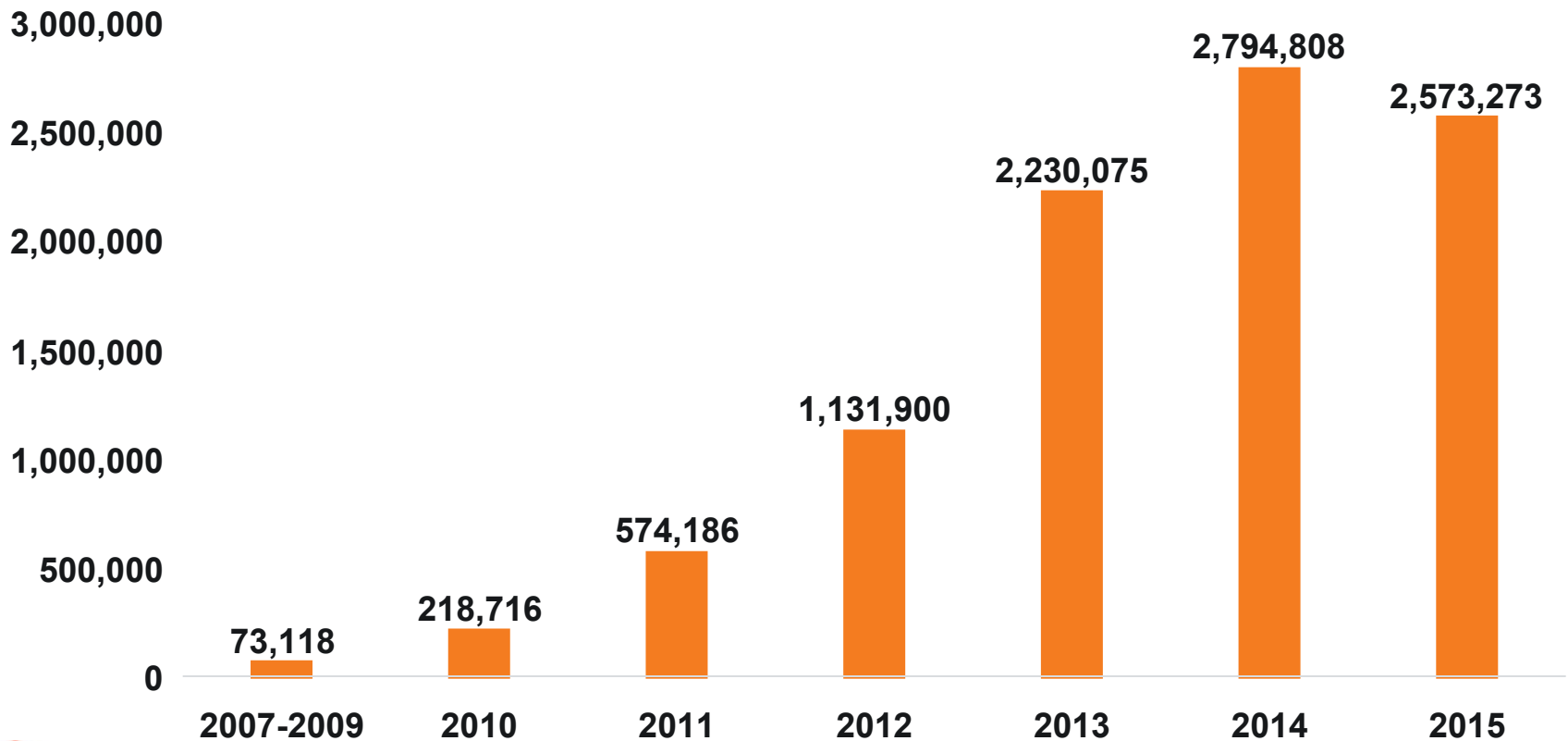
MOBILIZE COMMUNITY FOR CHANGE

- School-Based HIV & Violence Prevention
- Community Mobilization & Norms Change



Annual Number of PEPFAR-Supported Voluntary Medical Male Circumcisions, through 2015 – Impact of Tetanus Vaccination in 2015

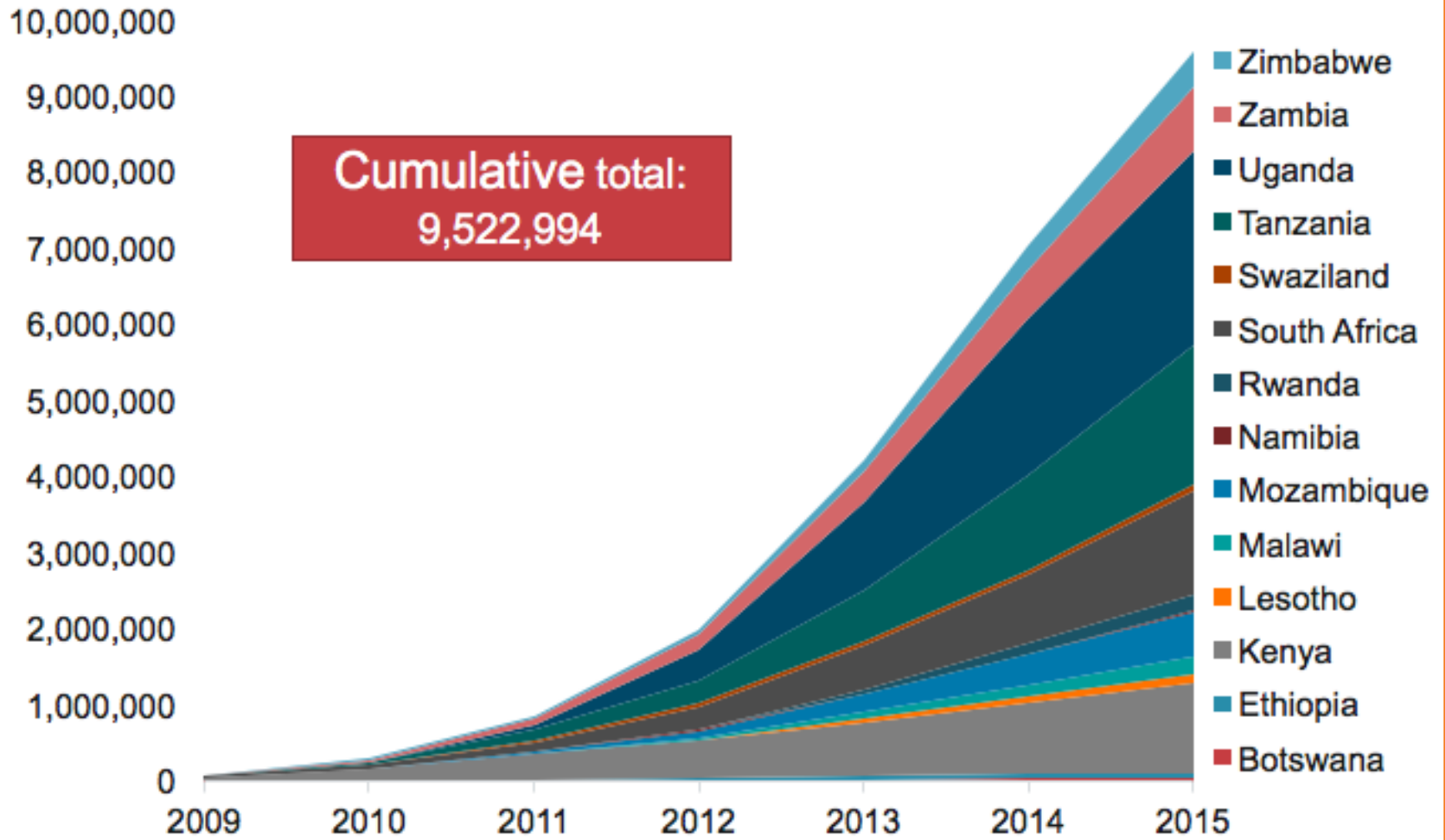
Uganda VMMC down by 500K



Source: PEPFAR, 2015

2015 Decline Primarily Single Country Uganda and Tetanus

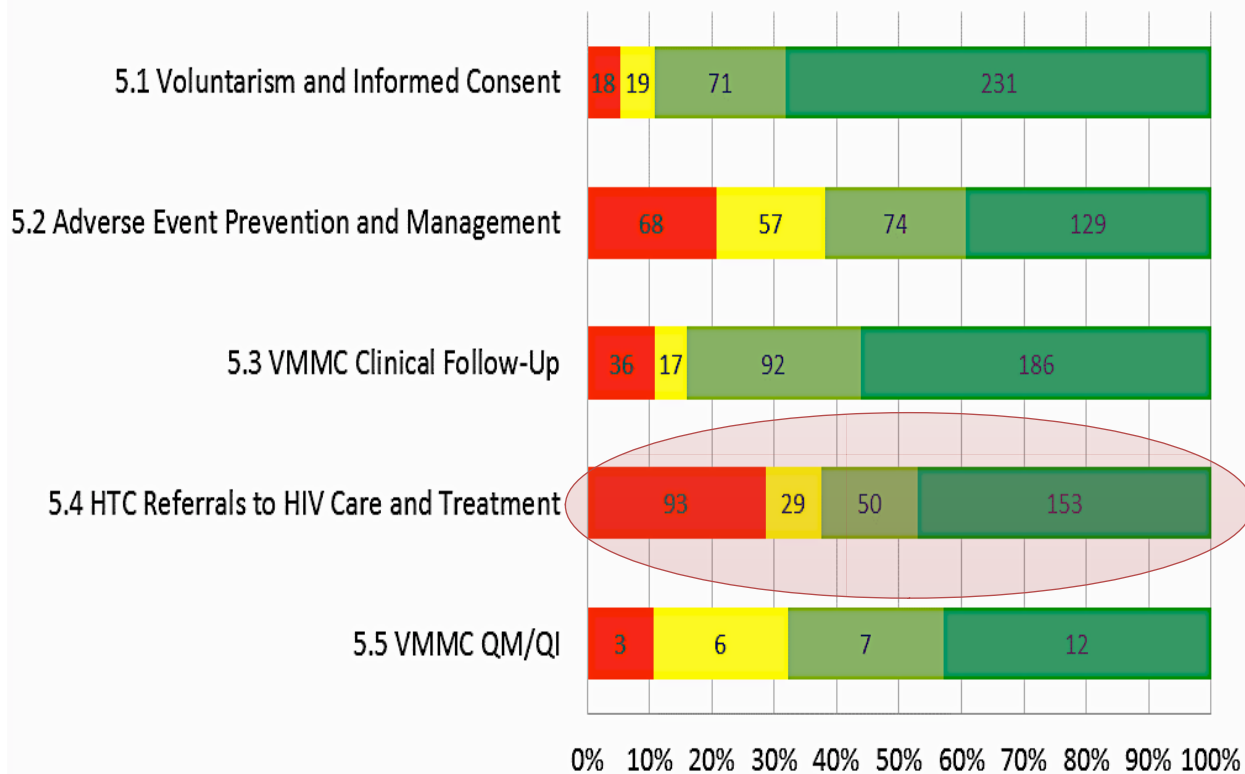
PEPFAR-Supported Voluntary Medical Male Circumcisions, 2009-2015



Site Improvement Through Monitoring System (SIMS) Data for Program Quality

Distribution of SIMS Scores by VMMC CEE
October 2014-September 2015

379 assessment, 339 facility and 28 above site



8

Solution : Preventing New Infections: PrEP

PrEP in DREAMS

Countries implementing PrEP with PEPFAR support

- Kenya
- South Africa
- Swaziland
- Uganda
- Zimbabwe
- Other 5 countries continuing conversations with government

Target Populations

- Sex workers
- Young women engaged in transactional sex
- Young women in serodiscordant couples
- Young women in fishing villages

Implementation Science

- What are potentially effective strategies for introducing PrEP for AGYW (e.g., acceptance, feasibility)? Different for various subgroups?

PEPFAR and PrEP

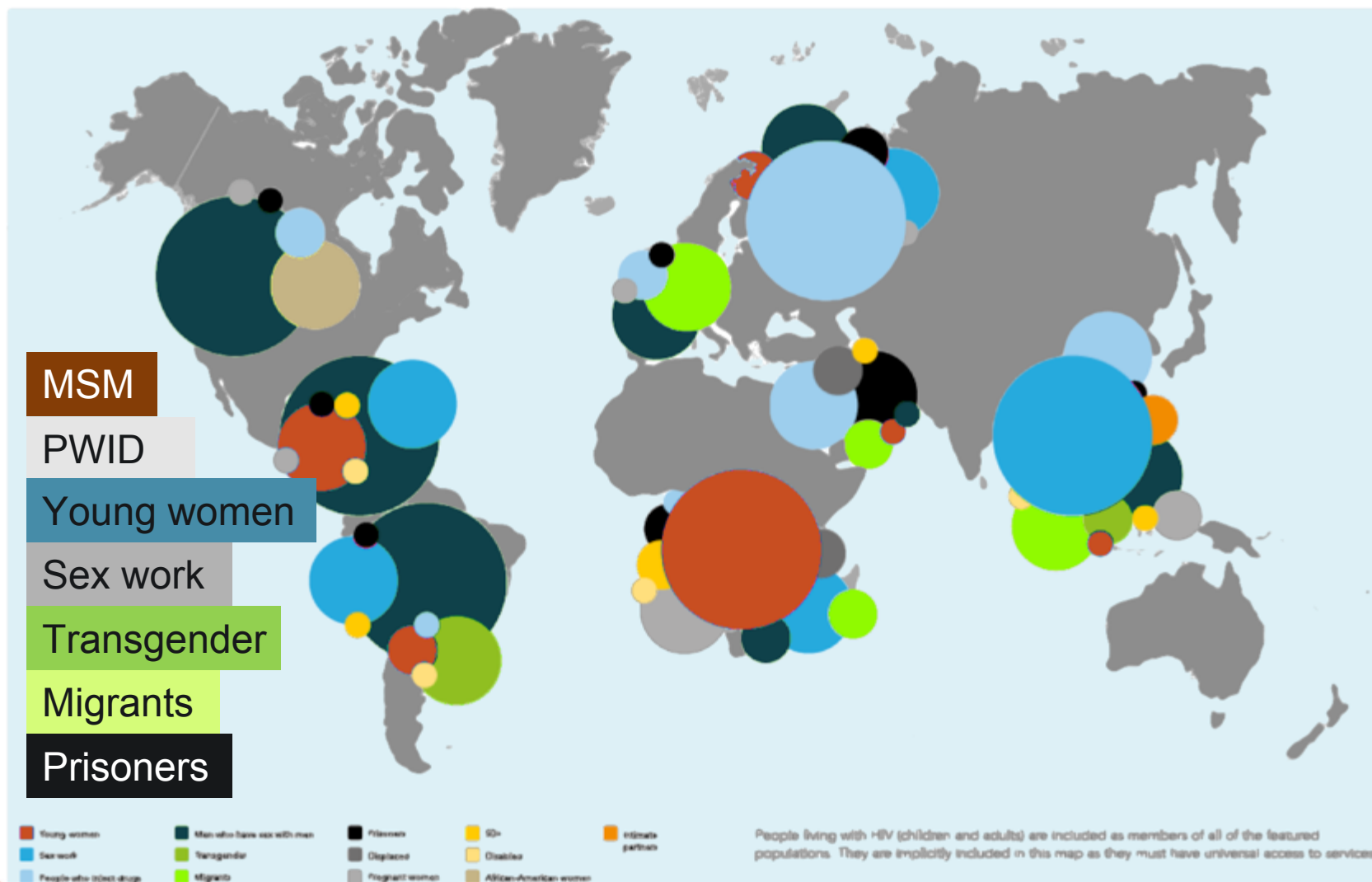
- PEPFAR supporting country teams to
 - Add PrEP as a component of evidence-based combination prevention
 - Work with partner country governments, civil society, and other stakeholders to address issues that are critical to the rapid scale-up of PrEP among populations at substantial risk
- PEPFAR funding may be used for procurement of PrEP commodities in countries where policies include
 - Test and START for all PLHIV,
 - Routine use of at least annual VL testing, and
 - Service delivery models allowing 3-6 months of ARV provision to PLHIV
- PEPFAR supports PrEP programs beyond DREAMS countries and other African countries

9

Key Populations

Addressing stigma and leaving no one behind

Key Populations Vary by Location



Tanzania threatens to ban groups supporting gay rights

REUTERS September 8, 2016

By Kizito Makoye

DAR ES SALAAM (Thomson Reuters Foundation) - Tanzanian governmental groups that "promote" the rights of lesbian and intersex (LGBTI) people in the first public statement against the minority group.

Gay sex is illegal in Tanzania and punishable by up to 30 years in prison.

The East African country has a reputation for being more conservative than its neighbor Uganda but recent comments attacking LGBTI rights and condemnation from activists.

In a statement late on Wednesday, the deputy minister for development and gender, Hamisi Kigwangala, said the government would "protect traditional values seriously and would "always protect the rights of all citizens."

AFRICA

Uganda says police will arrest planners of gay pride parade

Published September 21, 2016 · Associated Press



SECTIONS

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SEARCH

The New York Times

AFRICA

Nigeria Tries to 'Sanitize' Itself of Gays

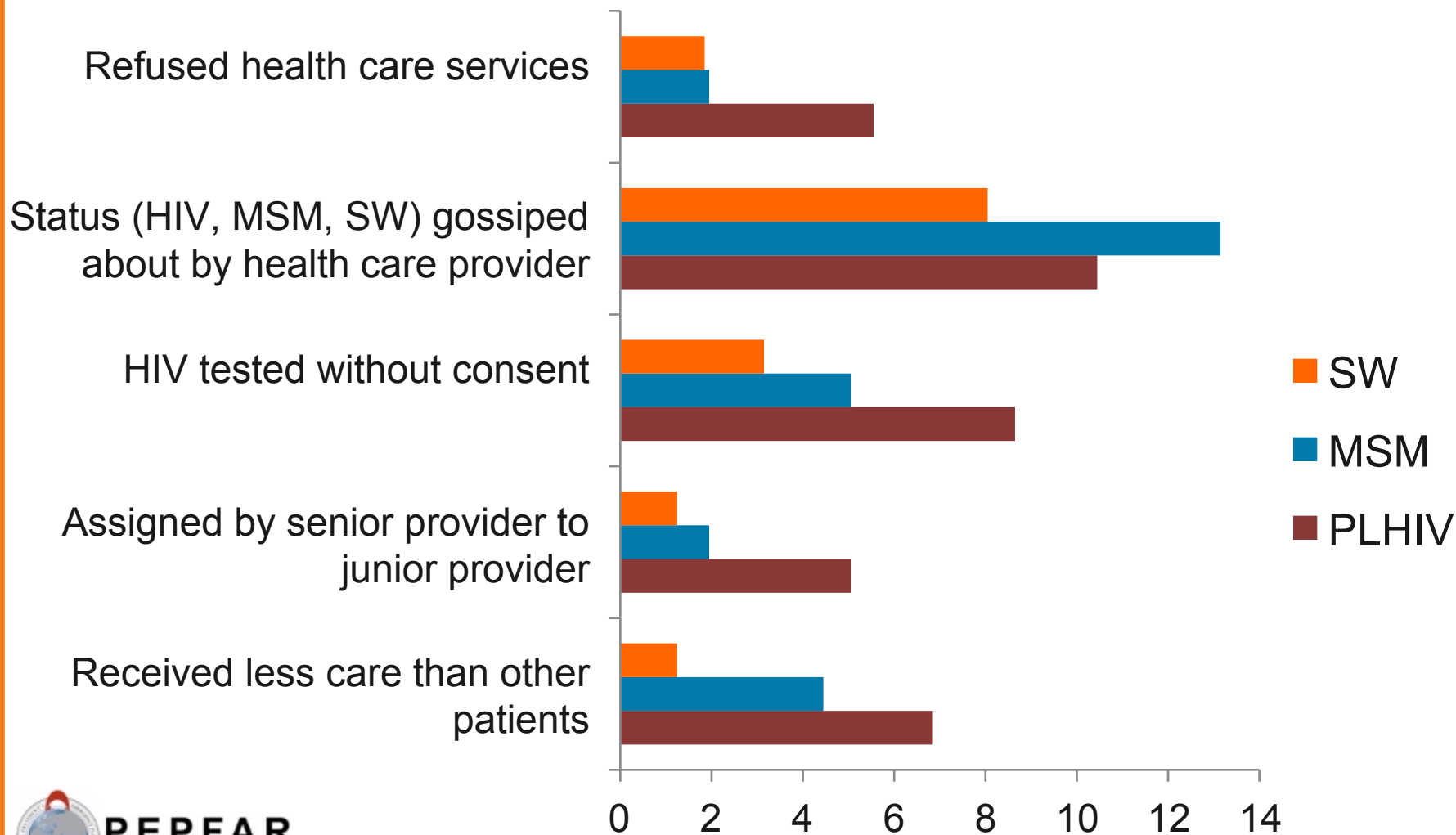
By ADAM NOSSITER FEB. 8, 2014



A bailiff in Bauchi, in mostly Muslim northern Nigeria, re-enacted the lashing of a man convicted of homosexuality. Benedicte Kurzen for The New York Times

Sources: Reuters, 2016; The New York Times, 2014; Associated Press, 2016; All Africa, 2016

Stigma in Jamaica – Reported by Health Care Staff



Key Populations

Key populations supported by PEPFAR include:

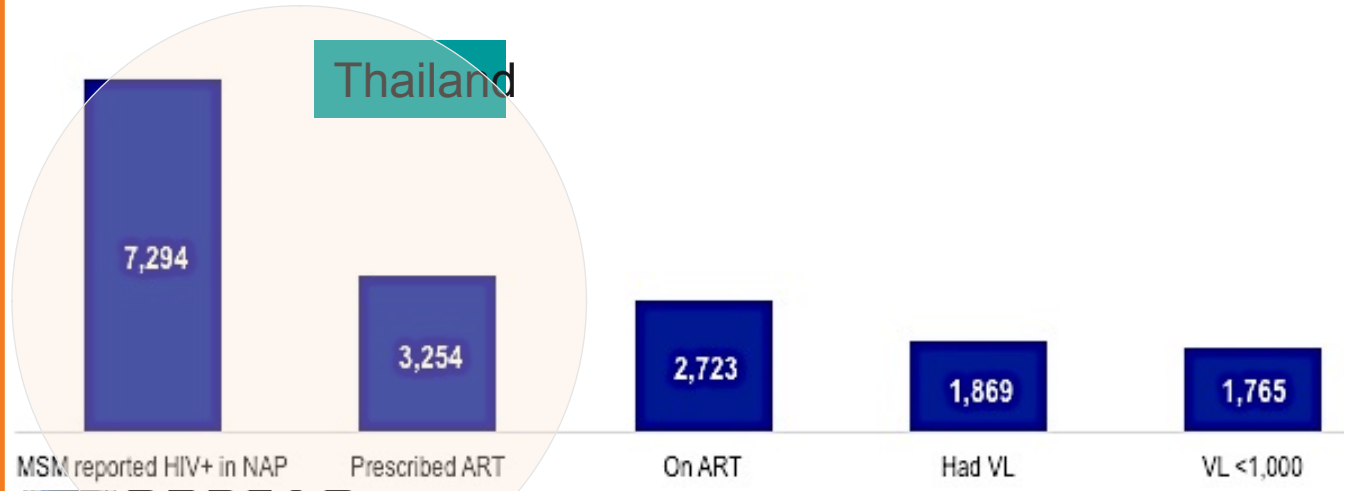
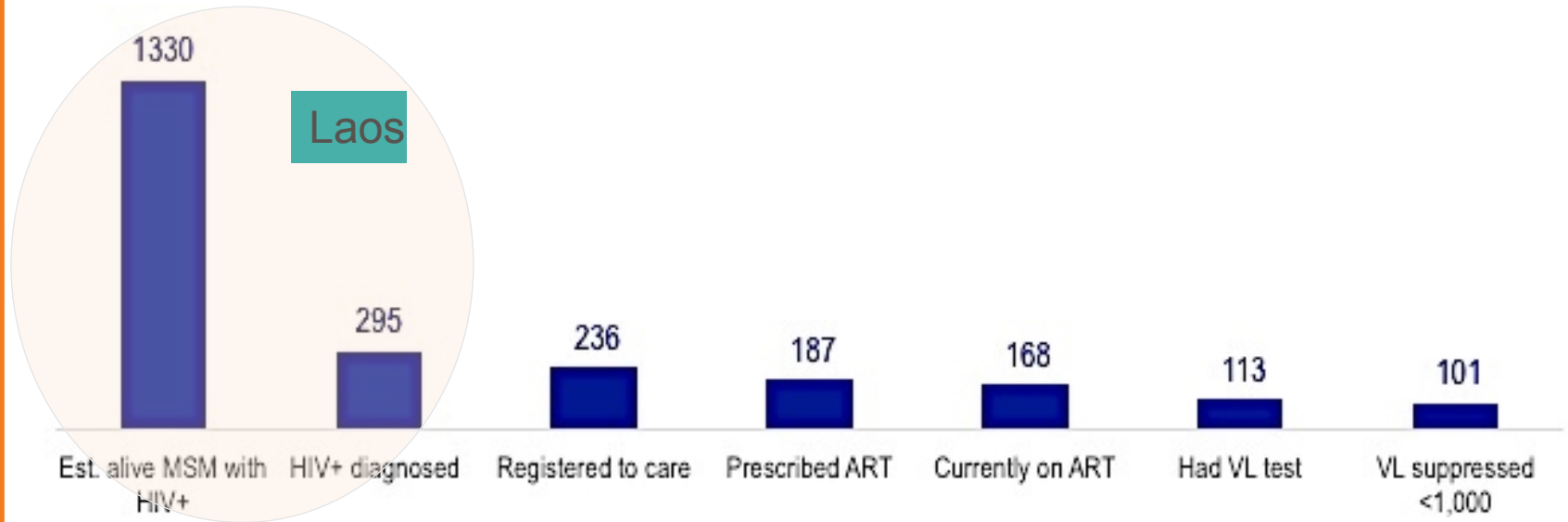
- Sex workers (SW),
- People who inject drugs (and other people who use drugs) (PWID),
- Men who have sex with men (MSM),
- Transgender persons, and
- People in prisons and other closed settings

THAILAND

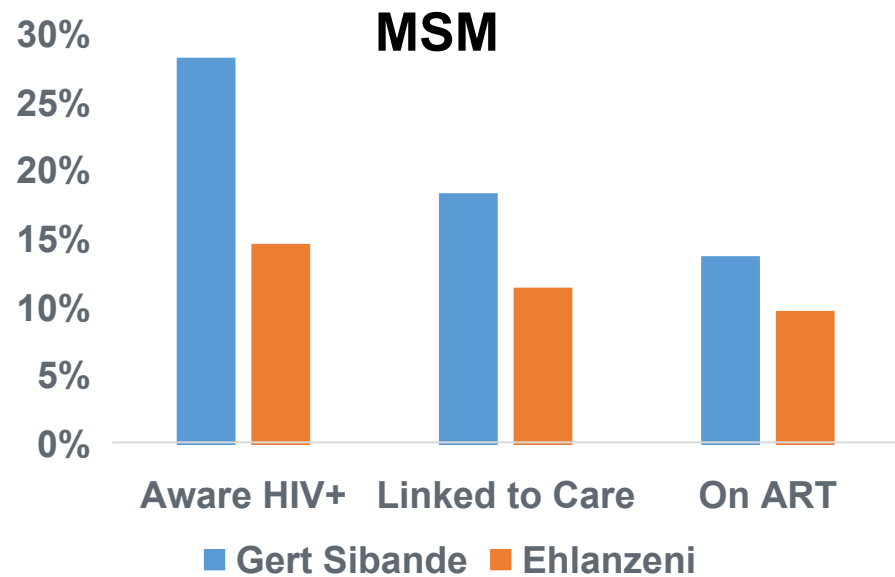
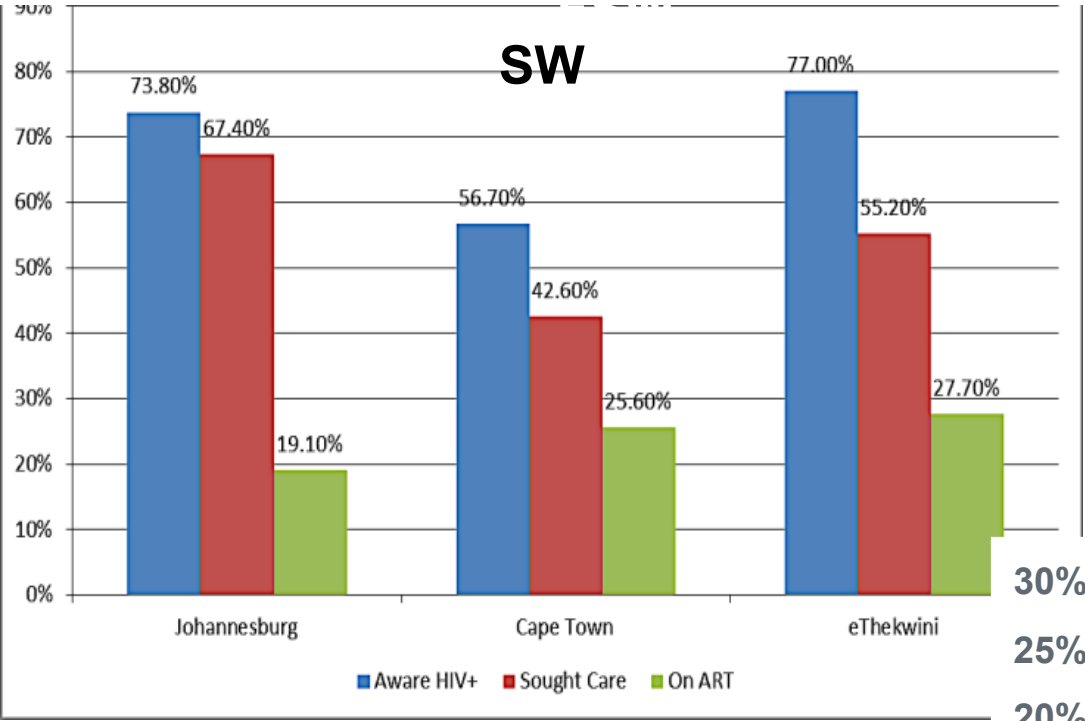
LAOS

SOUTH AFRICA

MSM Clinical Cascades in Laos & Thailand : Gap in testing part of the cascade not linking



South Africa : Different clinical cascade issues with different key populations – data allowing teams to focus on precise issues

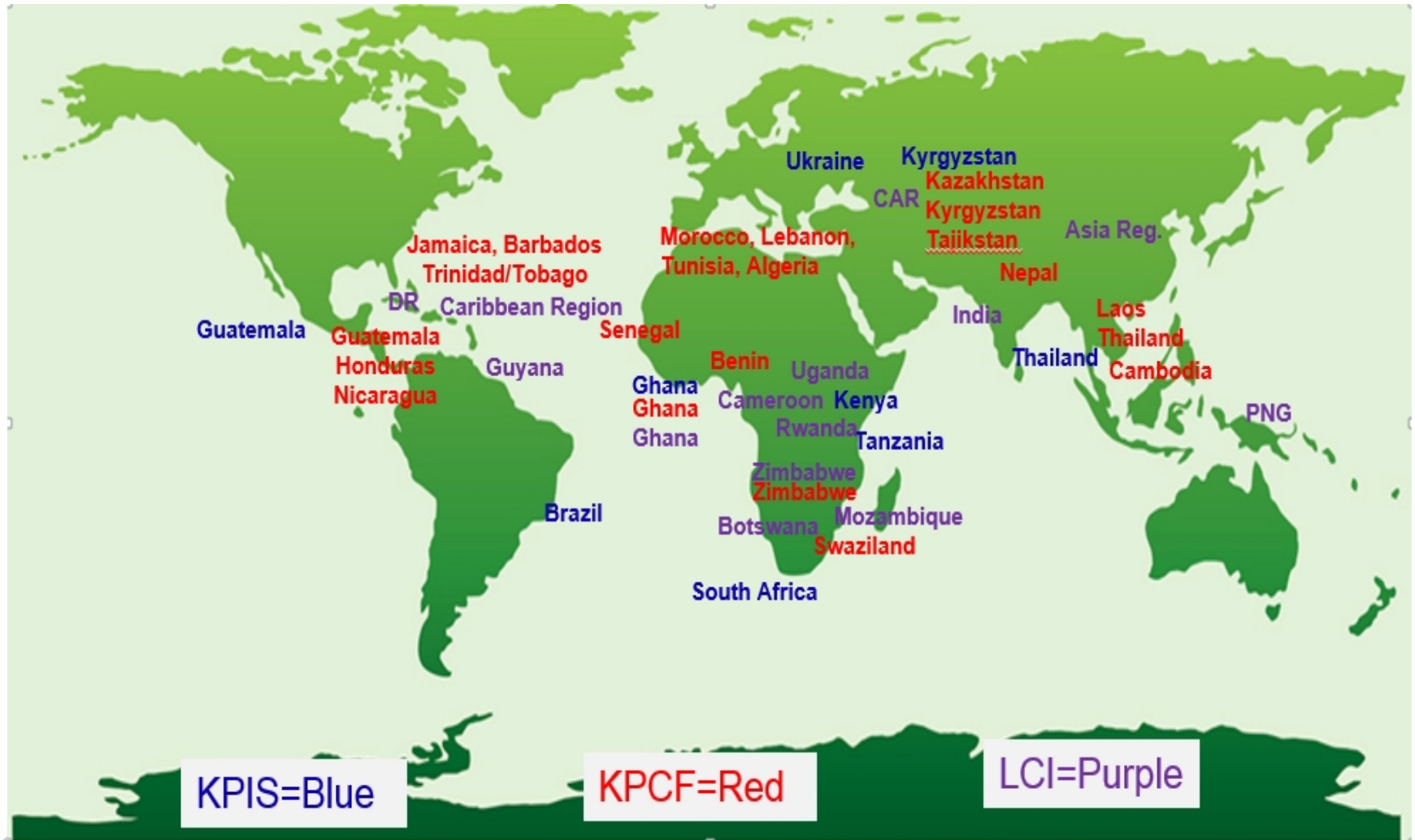


Key Populations

- Overall greater PEPFAR engagement on stigma, human rights, and legal barriers, and engagement of civil society that includes and benefits key populations
- Geographic pivots must also include ensuring coverage for key populations, and can include urban settings and hotspots as priority sites outside of areas with HIV prevalence in the general population
- Special Initiatives that support Key Populations in addition to regular annual country or regional program funds:
 - **Key Populations Challenge Fund** (5 countries & 6 regional programs) for additional program support and expansion of successful KP service delivery models
 - **Key Populations Implementation Science Initiative** (9 countries)
 - **Local Capacity Initiative** with a KP component (6 countries & 2 regional programs)
 - Support to Robert Carr Foundation
 - DREAMS included focus on young FSW (7 countries)
 - New collaboration with Elton John Foundation
 - Key Population Investment Fund \$100 million



Key Population Initiatives



Key Populations Investment Fund

PEPFAR launched \$100M Key Populations Investment Fund at the UN High Level Meeting in June, 2016

- Supports multi-year and comprehensive approaches with **direct funding to key population-led community based organizations** to develop and improve their capacity for sustainable HIV responses at the local level **driven by data** and accountability.
- Supports innovative, tailored, **community-led approaches** to address critical issues and gaps that exist for key populations in the HIV/AIDS response
- PEPFAR is committed to **engaging civil society in planning and implementation** of the Investment Fund

Complex factors driving stigma & discrimination that must be measured and addressed

Identify

Measure

Change

Key Populations Investment Fund: Addressing Specific Barriers

In order to ensure **nobody is left behind**, we must address the lack of:

- Acceptance of **human rights of all persons**, without distinction;
- Systematic and **rigorous measurement** and monitoring of **stigma and discrimination** and clear actions to mitigate;
- Access to **quality services** for key populations;
- Availability of **disaggregated data** by key populations; and
- Focus on improving the **capacity of key populations-led community based organizations** not only to advocate for changes in policies but also directly implement services.



10

Empowering civil society

The World Was Slow to Recognize the AIDS Crisis



Civil Society Plays Critical Role in HIV Response

- We would not have a global HIV response if not for civil society groups that demanded it
- People living with HIV should play a meaningful role in shaping HIV programs & have powerful voices within their countries
- Support from donors has been inadequate
- We can all do more to support efforts of networks of PLHIV and civil society groups

Engaging Civil Society in PEPFAR

- Civil Society is actively engaged in **quarterly PEPFAR Oversight and Accountability Response Team (POART) meetings**; country teams are charged with soliciting input and providing feedback to CSOs on quarterly data and POART meetings
- PEPFAR HQ conducted **regional webinars**, in conjunction with UNAIDS, to outline **COP 16 guidance**, solicit input on the draft guidance, and highlight best practices in CSO engagement
- Most PEPFAR country teams debriefed community and CSOs on outcomes of DCMM and proposed changes from COP15 SDS including goals, budgets, targets, and current performance

11

Summary

Key take-away messages : using data to identify the issues and the solutions

Core PEPFAR Issues Moving Forward

Need Prevention Cascade for DREAMS and VMMC

Clear **denominator** : Number needed to be reached at the district or county level disaggregated by age and gender

Clear **numerator** : Number reached with DREAMS, OVC adolescent prevention, VMMC

Gap and plan to close the gap

Mobilizing resources, addressing core policy and implementation issues

Importance of a community engagement plan for both advocacy as well as community led program implementation

Key population Cascades for each risk group

Accurate denominator : Number needed to be reached at the district or county level disaggregated by age

Gap and plan to close the gap

Mobilizing resources, addressing core policy and implementation issues

Need for Continuous Assessment of The Epidemic in Real Time

- Recency assay in ANC
- Rapid an interim utilization of PHIA data as it maybe regionally applicable and extend beyond the specific country to provide critical insights
 - Treatment coverage and viral suppression in the <30yrs is most likely less than 25% with status awareness less than 50%
- Improved partner performance using quarterly data and cost analysis
- Clear measurement of stigma and holding all of us accountable for progress

Going forward

- It is not enough to know there are areas of higher transmission but need to understand the primary transmission zones by age group and population
- More aggressive prevention for young women 15-19 utilizing any successful elements out of the DREAMS districts and expansion of PrEP in the highest transmission zones
- Continued expansion of VMMC
 - Expanding to under 14 in high performing countries
- PrEP for men found to be negative in the 20-30 age range in high transmission zones and ensure all men under 30 have been tested

Human rights remain central to a successful HIV response

- History has shown that both in the US and globally, we cannot fight the HIV/AIDS epidemic without prioritizing protection of basic human rights for all.
- Key populations including sex workers, men who have sex with men, and people who inject drugs tend to be particularly vulnerable to human rights abuses and **we must work together to protect and promote rights for all people.**

Our work is far from done.



Over 2,000 children died this week from HIV

Over 19,200 adults died this week from HIV

Over 2,800 babies were infected with HIV

Over 37,000 adults were infected with HIV, of which more than 7,500 were young women



Thank You!



PEPFAR

U.S. President's Emergency Plan for AIDS Relief