



# FIFTEEN YEARS

# 90-90-90

## Targets Workshop

July 21-22, 2018 • Amsterdam

Sponsored by:



In partnership with:



BRITISH COLUMBIA  
CENTRE for EXCELLENCE  
in HIV/AIDS



GLOBAL NETWORK OF  
PEOPLE LIVING WITH HIV



FIGHTING FOR CHANGE

# Investment Case: Quantifying Civil Society Contributions towards 90-90-90

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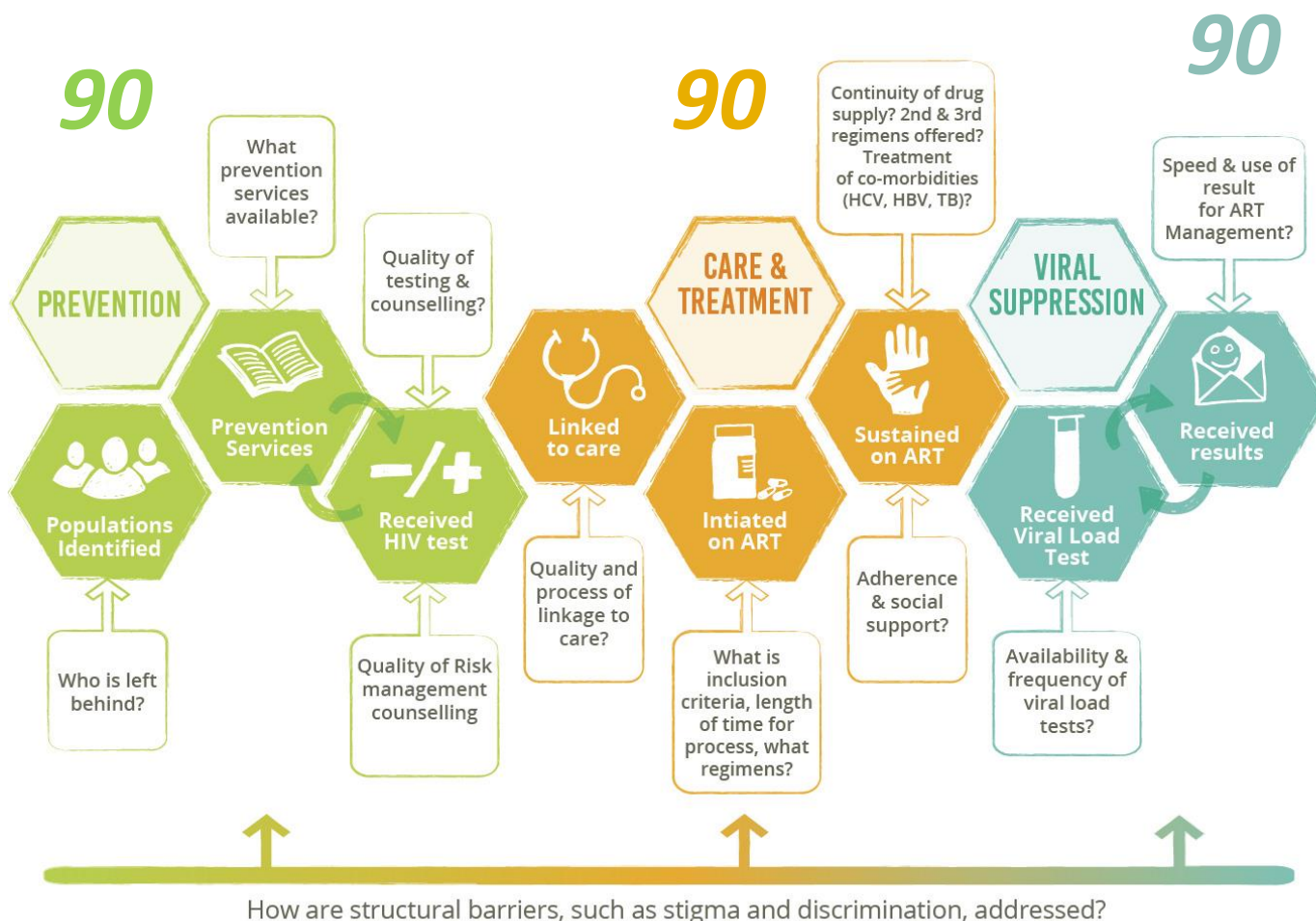
July 21, 2018

International Treatment Preparedness Coalition (ITPC)

# How do communities measure progress towards 90-90-90 targets?

## COMMUNITY MONITORING

Along the HIV Continuum of Prevention, Care and Treatment





# COMMUNITY MONITORING

Along the HIV Continuum of Prevention, Care and Treatment

CONTINUITY





Is doing the best for most,  
doing enough?

# COMMUNITY MONITORING

Along the HIV Continuum of Prevention, Care and Treatment



90

90

90



What does this picture look like by **sub-population**?

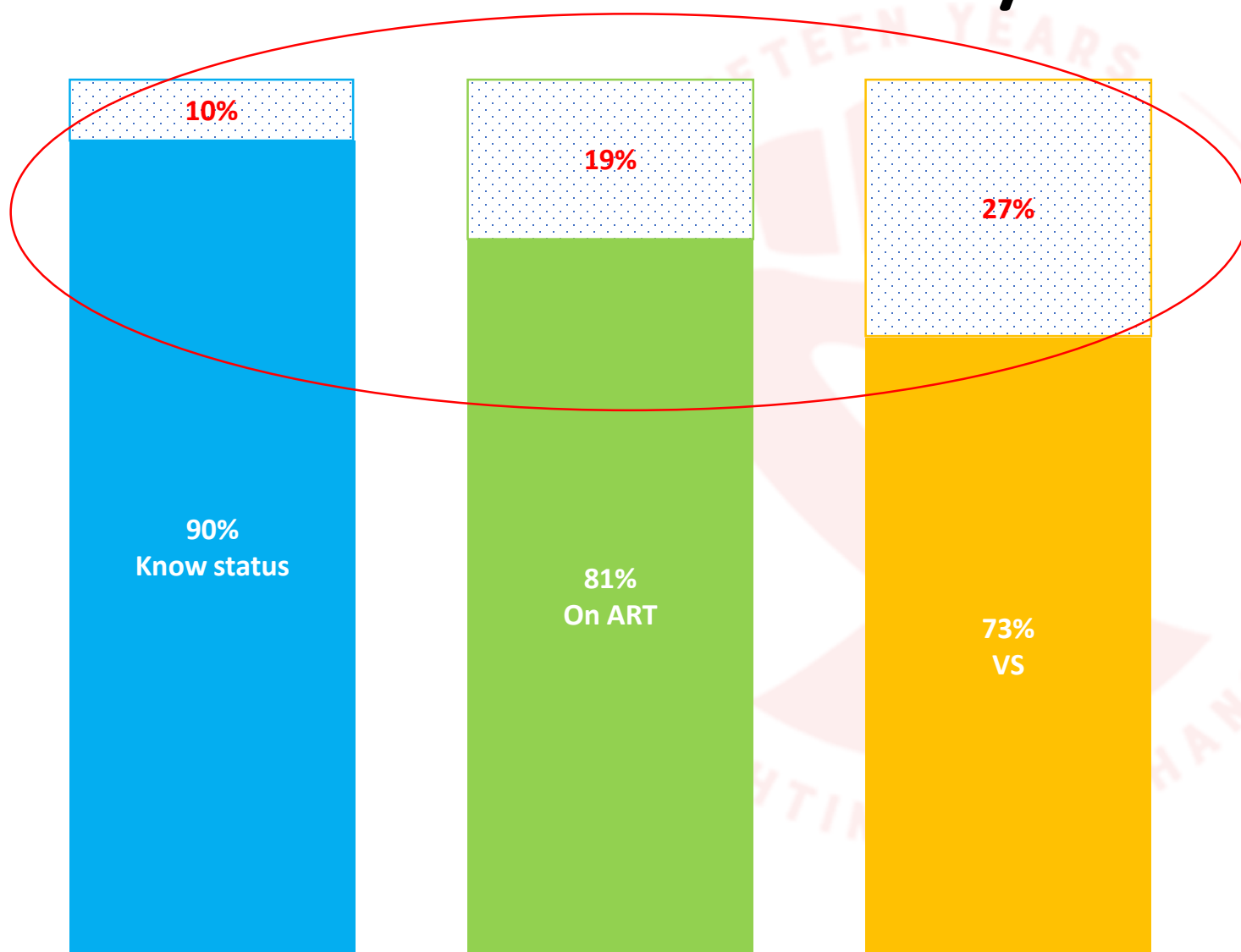
What does this picture look like by **age disaggregation**?

What does this picture look like by a **rights-based focus / lens**?

What does this picture look like by **region or geographical location**?

What does this picture look like by **investment, policy, skill and interest**?

# What does 90-90-90 really mean?



So, how do we bend the curve, achieve epidemic control, deal with this gap, what's the critical investment?

## INVEST IN COMPREHENSIVE COMMUNITY RESPONSES!

Broad Agreement that **More Robust** Investments in Communities are needed to achieve Epidemic Control.



# Investments in Community Responses are Critical to Achieving 90-90-90

## UNAIDS:

– ...strong civil society engagement is **critical** for the implementation of its 2016-2021 **strategy**. The strategy recognizes **civil society's role** in the AIDS response as a **global public good**, with mounting evidence of its positive impact, which requires **legal and social space**, as well as **financial resources** to ensure its effectiveness.

[UNAIDS (2016). On the Fast-Track to end AIDS – UNAIDS 2016–2021 Strategy. Page 49. Online at [http://www.unaids.org/sites/default/files/media\\_asset/20151027\\_UNAIDS\\_PCB37\\_15\\_18\\_EN\\_rev1.pdf](http://www.unaids.org/sites/default/files/media_asset/20151027_UNAIDS_PCB37_15_18_EN_rev1.pdf)]

# Investments in Community Responses are Critical to Achieving 90-90-90

## PEPFAR:

- ...strengthen commitment to inclusiveness and building a stronger civil society by **supporting** and **building** the **capacity** of **global and regional civil society networks**.
- ...implement **civil society and human rights frameworks** in all their priority countries.

[Birx, D. (2015). Building a Stronger Civil Society to Achieve an AIDS-Free Generation. Online at <https://blogs.state.gov/stories/2015/09/29/building-stronger-civil-society-achieve-aids-free-generation>; PEPFAR (2013). PEPFAR 3.0 – Controlling the Epidemic: Delivering on the Promise of an AIDS-free Generation. Page 27. Online at <http://www.pepfar.gov/documents/organization/234744.pdf>

# Investments in Community Responses are Critical to Achieving 90-90-90

## GLOBAL FUND:

- The Global Fund's investment case for the 2017-2019 replenishment, recognizes the **importance of increasing funding for community responses**. The Investment Case costing builds in assumptions of **shifting more care from facility to community level**.
- The Global Fund's new strategy for the period 2017-2022 also has a **heavy focus on community systems and responses**, as well as gender and human rights.

# Investments in Community Responses are Critical to Achieving 90-90-90

## GLOBAL FUND:

- ...maximize impact among key populations by focusing on data systems, **strengthening community systems** for increased advocacy, monitoring and service delivery capacity
- ... strategy has the building of resilient and sustainable systems for health as one of its four core objectives, with the aim to ensure **well-functioning and responsive health and community systems**.

## UNAIDS-Lancet Commission:

- Called on the global community to “**invest in activism as a global public good.**”

Increasingly channeling more money towards strengthening community delivery models is **both** more efficient, in that it is **cost-saving**, but also more **effective**, improving the uptake of services by bringing them closer to the people who need them.

[The Global Fund (2015). Investment Case for the Global Fund's 2017-2019 Replenishment: The Right Side of the Tipping Point For AIDS, Tuberculosis and Malaria. Presented on 17 December 2015 at the Global Fund's Fifth Replenishment Preparatory Meeting in Tokyo, Japan.  
Page 17. Online at [http://www.theglobalfund.org/documents/publications/other/Publication\\_InvestmentCase\\_Report\\_en/](http://www.theglobalfund.org/documents/publications/other/Publication_InvestmentCase_Report_en/)]

[http://icaso.org/wp-content/uploads/2017/03/ICASO-Community-Report\\_Final-ZK-Feb-27.pdf](http://icaso.org/wp-content/uploads/2017/03/ICASO-Community-Report_Final-ZK-Feb-27.pdf)

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Compelling evidence that  
there are both allocative and  
technical efficiencies  
to be realized by investing  
more money in strengthening  
community responses.

**YET...**



# State of “Community Response” Funding

- UNAIDS suggests that investments in community mobilization **should** increase threefold to 3%, and spending on social enablers should reach 8% of total expenditure by 2020.
- 40% of organizations tasked with implementing community activities reported a **funding decrease since 2013**. Two thirds expected flat or declining funding in the future. PEPFAR reduced its investments in community-based care, treatment and support by 12.6% from 2013 to 2014.
- The Global Fund’s Technical Review Panel has expressed concern that the majority of concept notes are **not including funding requests for the community systems strengthening module at all**. An investment case for community responses is needed to motivate the necessary levels of funding.

# Invest and You Shall Receive...

## Communities:

- Use funds for intended purpose and ultimately save lives
- Know what's best in their context, innovates and scales
- Produce reliable, actionable data
- Sustain work beyond the project as much as is possible
- Demand what they need from their governments
- Are a partner in the HIV response, not a victim

# Value for Money

## REACH & RESULTS

With our networks and partners, we ran projects to improve access to optimal HIV treatment in these countries in 2017:

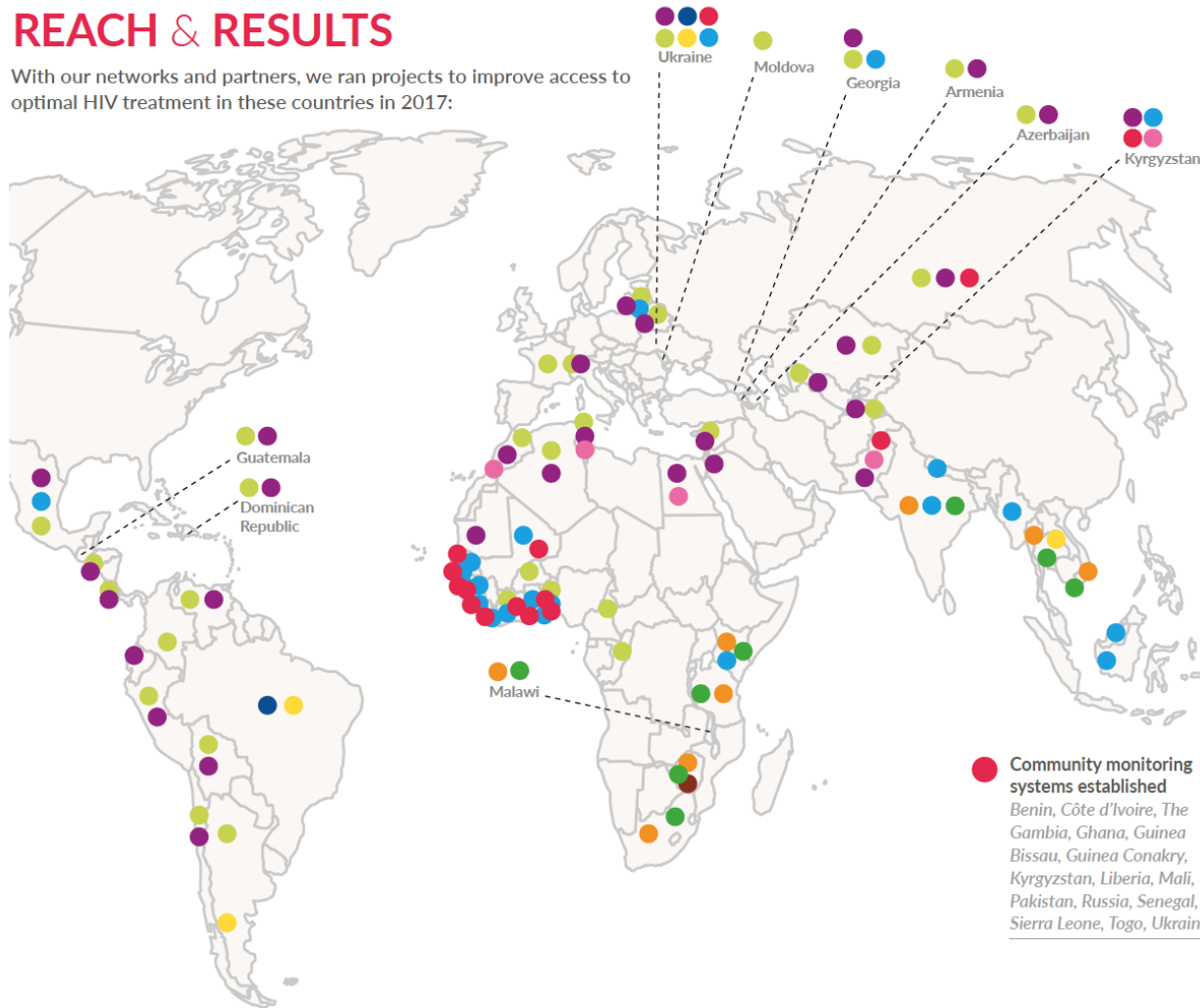
Create & increase demand for optimal treatment access

Core  
7%

Influence & hold decision makers accountable



93 CENTS of every



**Treatment activists mobilized to demand differentiated service delivery**  
India, Kenya, Malawi, South Africa, Tanzania, Vietnam, Zimbabwe

**IP intervention resulted in price reduction of 50% or more on at least two ARVs**  
Brazil, Argentina, Thailand, Ukraine

**Community-based research conducted**  
Egypt, Kyrgyzstan, Morocco, Pakistan, Tunisia

**Treatment activists mobilized to demand routine viral load testing**  
India, Kenya, Malawi, South Africa, Tanzania, Thailand, Vietnam, Zimbabwe

**Groundwork laid for expanded community monitoring**  
Zimbabwe

**Training delivered to increase capacity on HIV treatment, rights and advocacy**  
Benin, Côte d'Ivoire, Gambia, Georgia, Ghana, Guinea Bissau, Guinea Conakry, India, Indonesia, Kenya, Kyrgyzstan, Liberia, Lithuania, Malaysia, Mali, Mexico, Myanmar, Nepal, Senegal, Sierra Leone, Swaziland, Tajikistan, Tanzania, Thailand, Uganda, Ukraine, Vietnam, Zimbabwe

**Training delivered on intellectual property and access to medicines**  
Algeria, Argentina, Armenia, Azerbaijan, Belarus, Benin, Bolivia, Burkina-Faso, Cameroon, Chile, Colombia, Congo, Costa Rica, Côte d'Ivoire, Dominican Republic, El Salvador, France, Georgia, Guatemala, Kazakhstan, Kyrgyzstan, Latvia, Lebanon, Mexico, Moldova, Morocco, Peru, Russia, Switzerland, Tajikistan, Tunisia, Ukraine, Uzbekistan, Venezuela

**Treatment activists capacitated to participate in regional Community Advisory Boards**  
Algeria, Armenia, Azerbaijan, Belarus, Bolivia, Chile, Costa Rica, Dominican Republic, Ecuador, Egypt, El Salvador, Georgia, Guatemala, Jordan, Kazakhstan, Kyrgyzstan, Latvia, Lebanon, Mauritania, Mexico, Morocco, Pakistan, Peru, Russia, Tajikistan, Tunisia, Ukraine, Uzbekistan, Venezuela

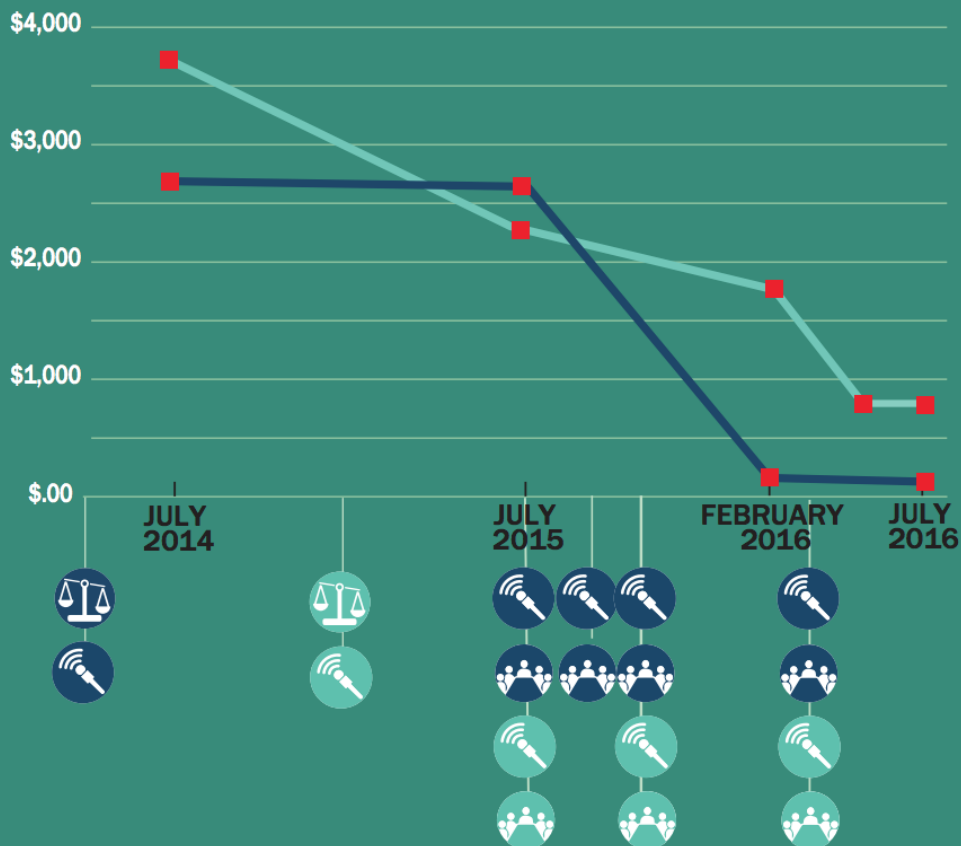
**Patent oppositions filed**  
Brazil, Ukraine



# CAMPAIGN RESULTS IN ARGENTINA

## Civil society actions lead to **PRICE REDUCTIONS** on 2 key HIV drugs\*

Fundación GEP's combined actions:  
legal interventions, meetings with  
government and media activity,  
led to significant price reductions



### KEY

#### HIV DRUGS:



#### CIVIL SOCIETY ACTIONS:



#### PATENT OPPOSITION

Filed opposition to patent



#### MEDIA

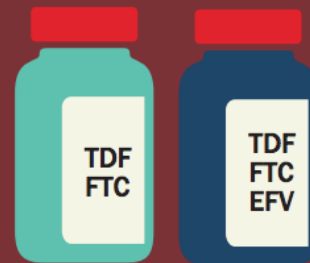
Organized media alerts/briefing



#### MEETINGS WITH GOVT.

Engaged and influenced officials

**REDUCED PRICES**  
mean US \$50 million  
annual savings for  
public health budget



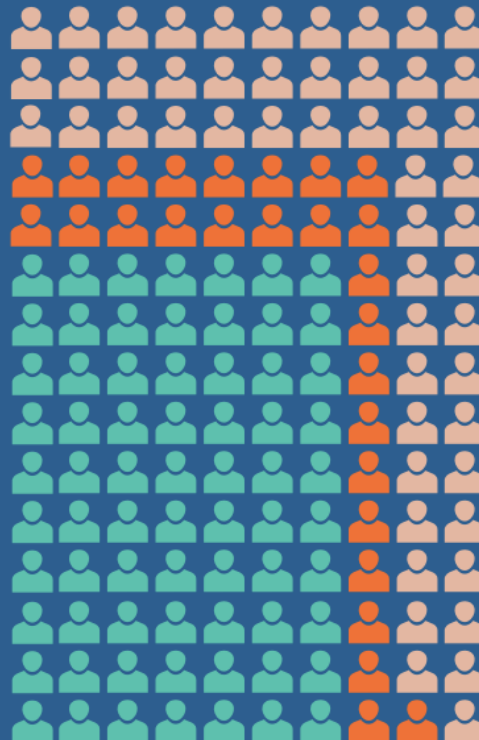
**\$50**  
million  
**ANNUAL  
SAVINGS**

**56,000**  
NOT ON  
HIV TREATMENT

**27,000**  
MORE  
COULD BENEFIT

**70,000**  
ON  
HIV TREATMENT

126,000  
people living with HIV



Savings mean  
**27,000**  
MORE PEOPLE  
could receive  
treatment  
for 10 years

 = 1,000 people

# So, what now?

- Fund community responses **NOW**, to secure the returns from 30+ years of investments already made and to save money in the future.
- Have honest discussions about why donors are hesitant to invest in communities!!
- Conduct better **resource tracking of investments** in community responses.
- Conduct more frequent and more rigorous **impact assessments** for community responses.
- **Fund** communities for: treatment education, monitoring, systems strengthening (organizations, financial, programmatic, governance) and advocacy!

**Invest in communities as a global public good!!**



# ITPC

INTERNATIONAL TREATMENT  
PREPAREDNESS COALITION

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