PURSUING STRATEGIC PARTNERSHIPS TO PUSH INNOVATION

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WAKE UP CALL: US NATIONAL DATA

HIV Treatment Cascade

- 1,178 HIV-infected
- 942 HIV-diagnosed (80%)
- 725 Linked to HIV care (77%)
- 481 Retained in HIV care (66%)
- 427 On ART (89%)
- 328 Suppressed viral load (<200 copies/mL) (77%)

* Numbers in thousands

Engagement in HIV care

CDC, 2011
WAKE UP CALL: NY STATE AND SAN FRANCISCO CITY COMMITMENTS

- NYT, June 28th, 2014: “The Cuomo administration said on Friday that it had developed a plan to aggressively identify, track and treat people with H.I.V. infection with the aim of reducing new infection to the point that by 2020, AIDS would no longer reach epidemic levels in New York State.”
LOCAL CARE CASCADES?

In the USA: Yes.

Figure 1: Percentage of estimated number of HIV-infected persons* in stages of continuum of HIV care in four large United States cities through December 2009

- Chicago (23,799)
- Los Angeles County (47,658)
- Philadelphia (19,691)
- San Francisco (17,665)

* Includes people diagnosed with HIV in 2008 and living with HIV through 2009 and an estimated additional 20% who are unaware of their infection.
LOCAL CARE CASCADES?

In Europe?

- Rome: No city-specific cascade yet
- Paris: No city-specific cascade yet
- Stockholm: No city-specific cascade yet
- Amsterdam: Yes
- ...
WHAT IS CURRENTLY CONSIDERED KEY ELEMENTS FOR SUCCESS?

- Improving delivery systems
- Improving proximity
- Fostering innovation
GLOBAL PRIORITIES...

PEPFAR

The right thing
In the right place
At the right time

UNAIDS

Prioritize
Build local scenarios
Don’t miss the window of opportunity, now to 2020

Michel Sidibé: «We can’t do everything everywhere»
CITIES AS A KEY ACTOR TO ACHIEVE AIDS-FREE STATUS?

- 54% of the world population in urban areas, 2013
- 60% of PLWH in urban areas
- 30% of PLWH in the 220 biggest cities in the world
AIDS FREE CITIES INITIATIVE: A NEW TYPE OF PARTNERSHIP

- A UNAIDS/IAPAC global partnership
- Involving mayors and city governments
- Working with affected communities and civil society
- Involving local healthcare providers
- Public health experts
- And others
SIX PRINCIPLES (1)

At the city level:

- Improve targeted combination prevention – evidence-based biomedical, behavioral, and social interventions;
- Increase testing rates and early diagnosis;
- Recognize the role of specialized and, increasingly primary care and of the healthcare workforce as well as of affected communities, including patient advocates and lay providers;
SIX PRINCIPLES (2)

At the city level:

- Build an enabling environment where stigma and discrimination does not prevent people from accessing health services;
- Acknowledge shared responsibility, at individual- and community-levels as well as government- and civil society-levels, and local accountability;
- Effective monitoring and evaluation (M&E) will inform each city’s response and allow for city officials to measure and report progress to all stakeholders.
FIVE OVERARCHING OBJECTIVES

1. Ensure that at least 90% of people living with HIV know their status
2. Reduce the negative impact of stigma, discrimination, and human rights barriers
3. Improve access to ART for people living with HIV to 90%
4. Increase the proportion of PLWH on treatment with undetectable viral load to 90%
5. Increase utilization of combination prevention services
IMPLEMENTING AND TECHNICAL PARTNERS

- Civil society organizations;
- Human rights organizations;
- Professional associations;
- Implementing agencies;
- Research institutions;
- Corporate sector.
START WITH LOCAL CONSULTATIONS

One three-day meeting per city with:
- Elected officials,
- Public health officials,
- Clinician-leaders,
- Civil society,
- PLWH,
- And other stakeholders.

Build consensus on the «AIDS Free City» concept
Gather and measure local data
Clarify the distribution of roles and tasks
Identify local priorities and areas of focus
BUILD GLOBAL CONSENSUS

One meeting with health officials from VH and HICs

One meeting with health officials from MLIC

One global meeting of Mayors and stakeholders
A TEN-YEARS PROGRAM

- IAPAC’S Rapid Response Teams, UNAIDS offices
- Annual global and local progress reports
- Global and local program adjustments
- AIDS-free status recognition
A WORK IN PROGRESS...

- Implementing and technical partners are being identified;
- «List # One» of participating cities is being selected;
- Timeframe is still in progress.
WHAT DO WE WANT TO DO?

- Focus: go where the needs are and the vision is there.
- Build on global strategies and objectives set by international agencies.
- Wafaa El Sadr: “Break aspirations into operations”.
- Be flexible, work with communities, use the science.
- Badara Samb: “Bridge the gap between HIV stakeholders and politicians”
- Think globally – and locally, act locally – and globally.