

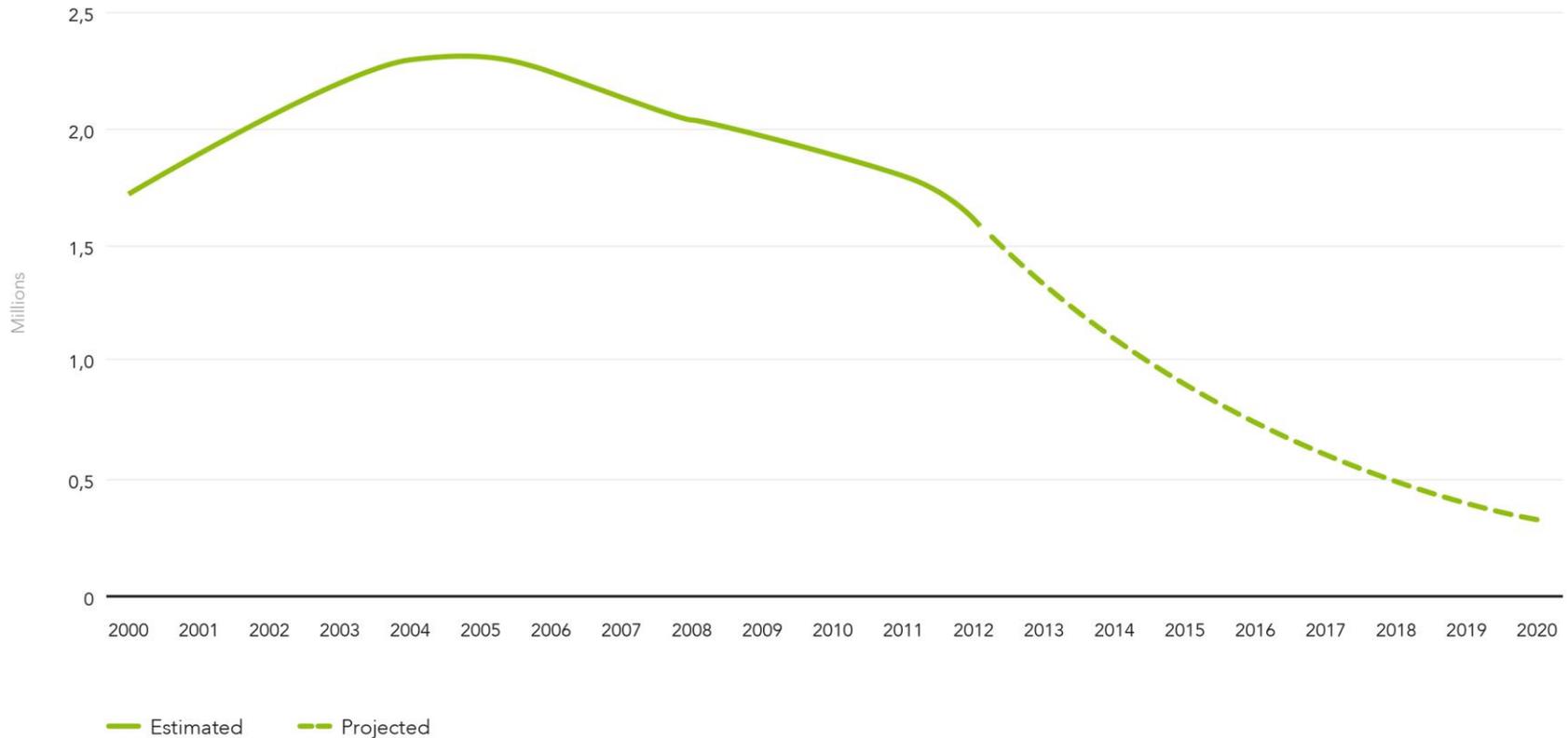
50
million

Zero new HIV infections.
Zero discrimination.
Zero AIDS-related deaths.



What can we achieve

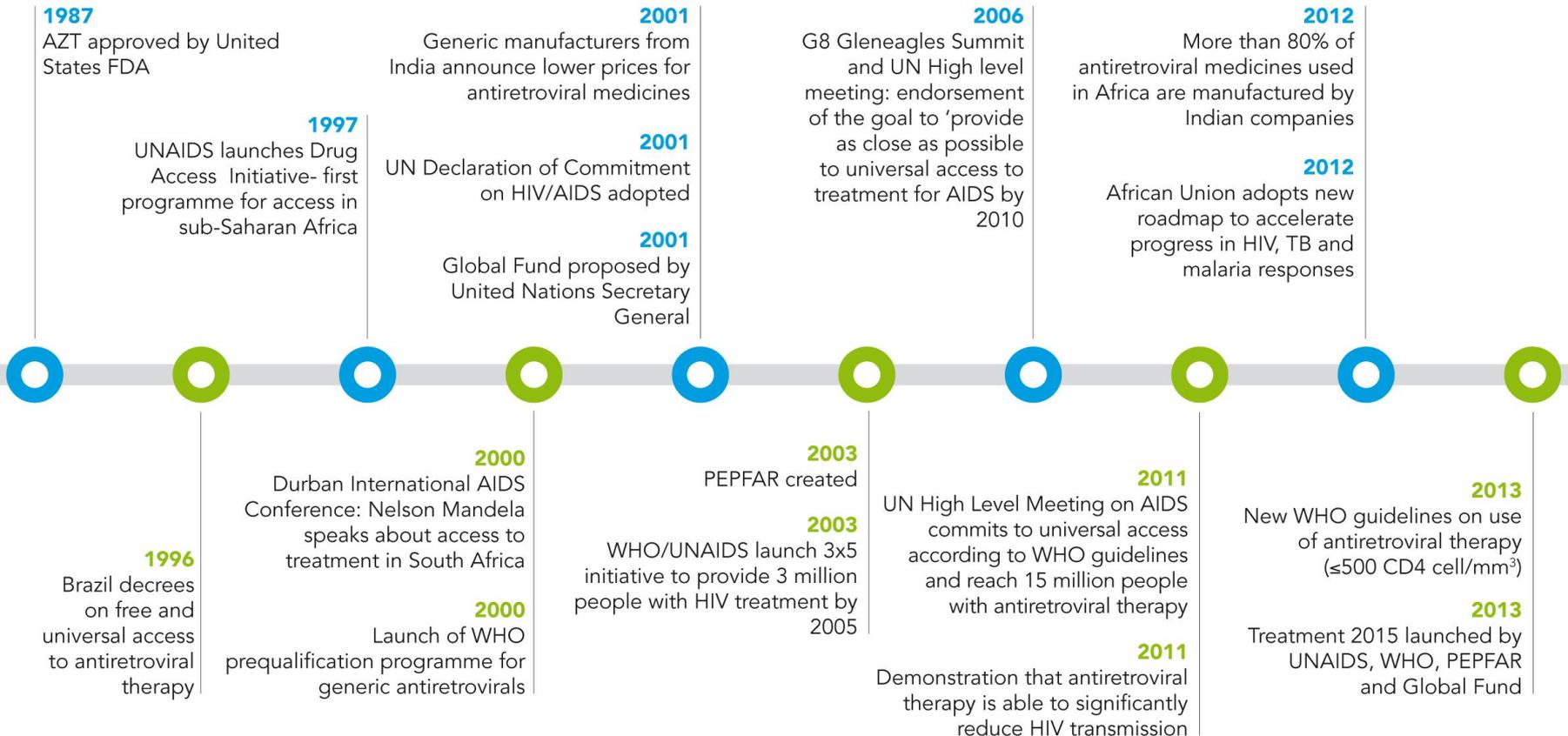
Projected annual AIDS-related deaths, assuming scale up to 95% coverage by 2020



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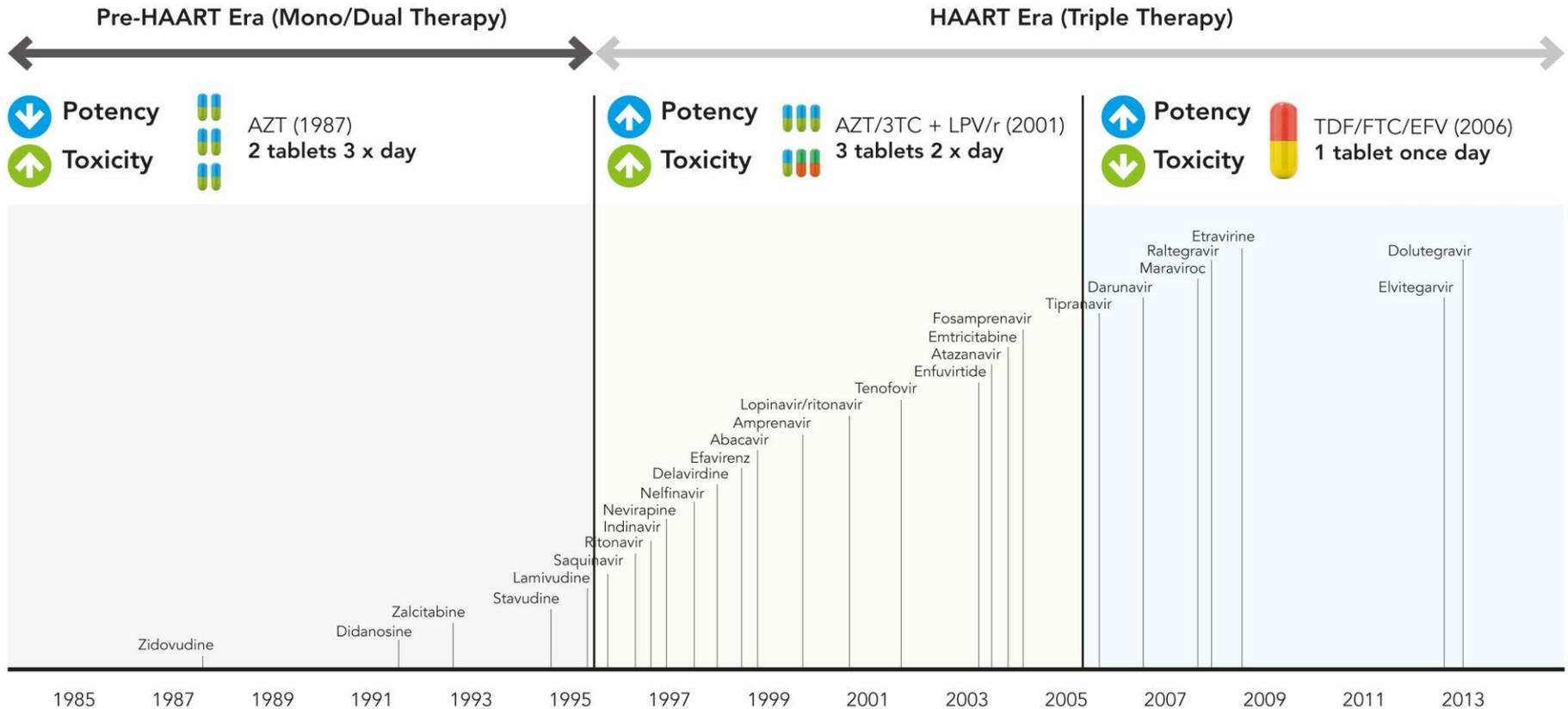
Access to treatment: the journey so far



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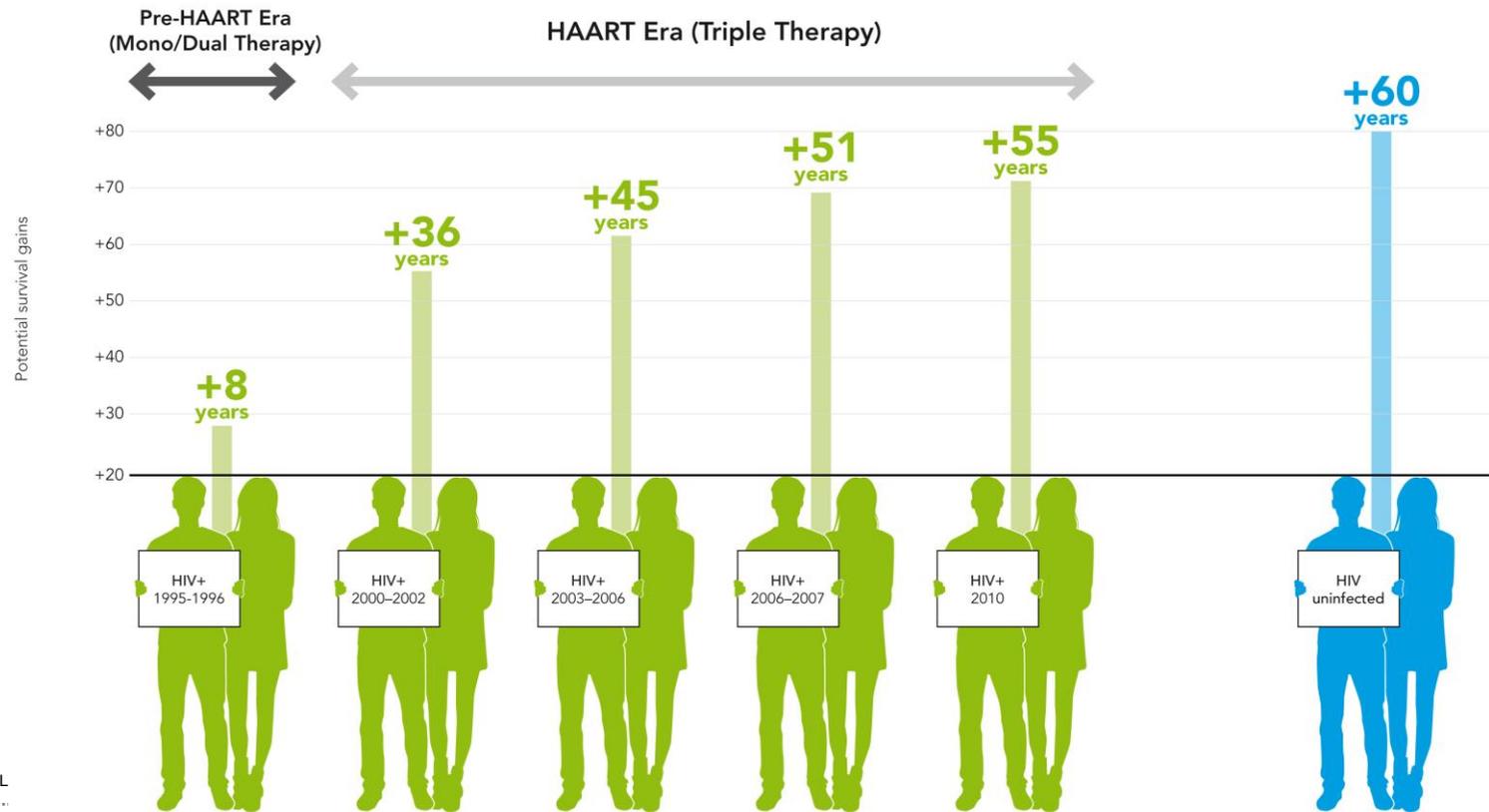
Science evolved: smarter and better HIV treatment options now available



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HIV treatment can normalize survival

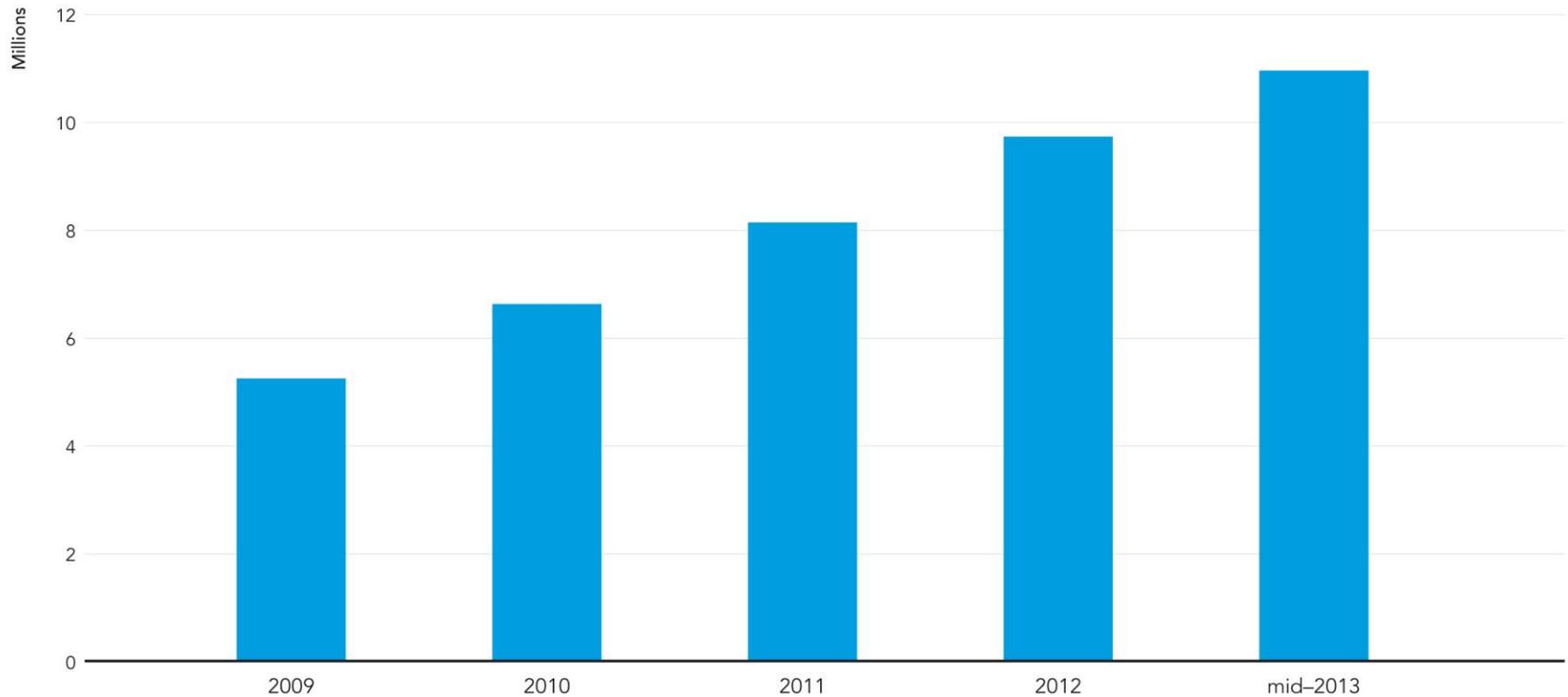
Expected impact of HIV treatment in survival of a 20 years old person living with HIV in a high income setting (different periods)



Adapted from L

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By mid 2013 nearly 11 million people were on antiretroviral therapy

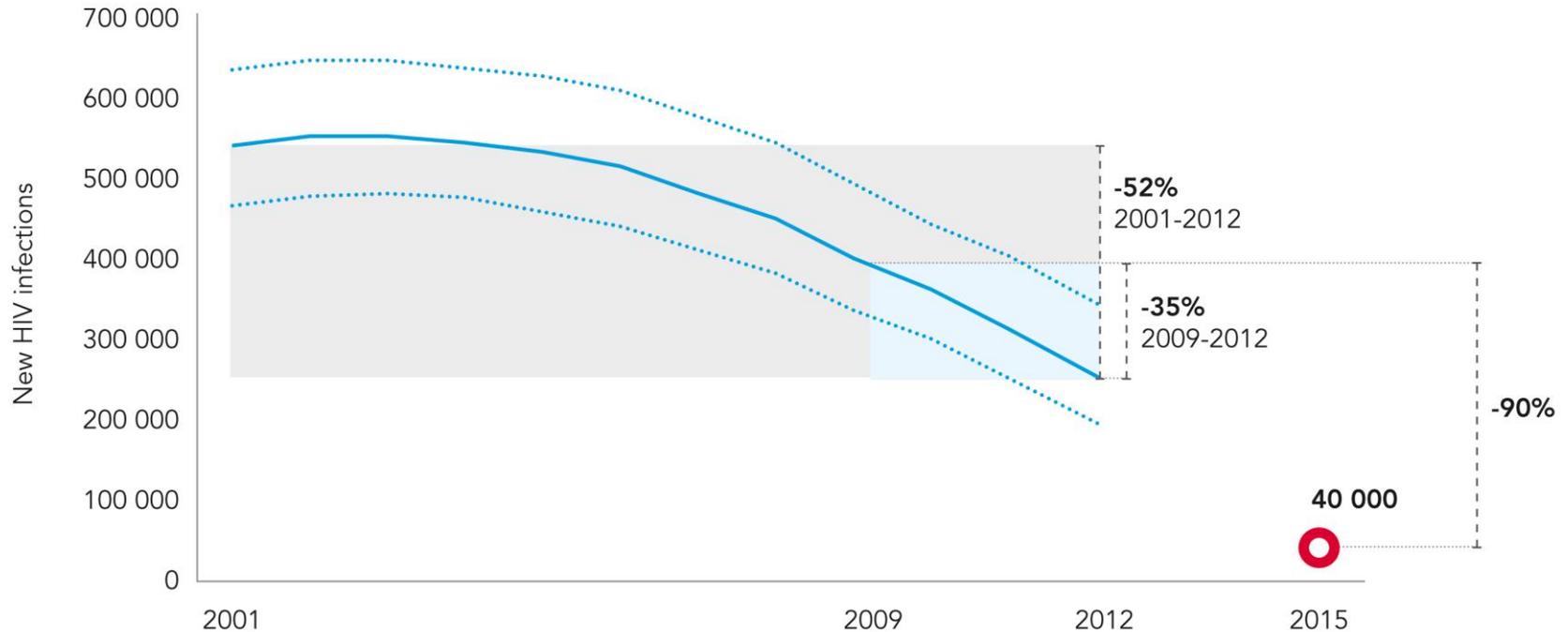


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ARV- critical to preventing new HIV infection among children

Number of new HIV infections among children in low- and middle-income countries, 2001–2012 and 2015 target



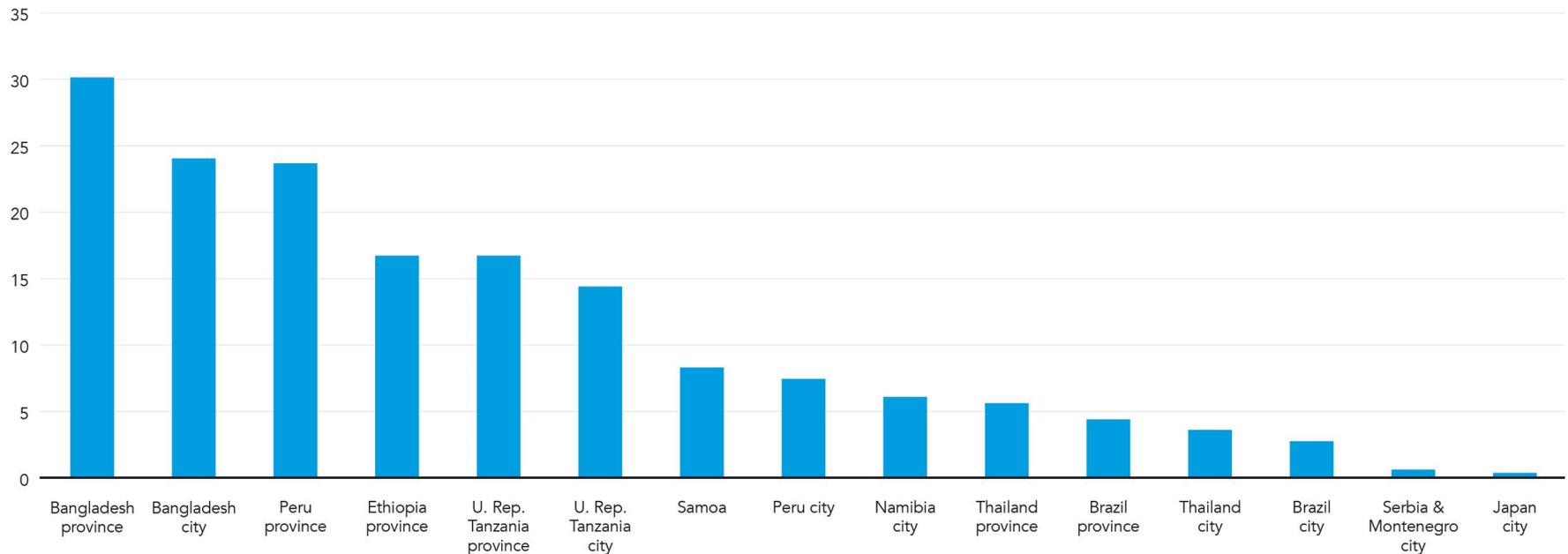
Source: UNAIDS 2012 estimates

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Much early sex is forced- access to post exposure prophylaxis (PEP) crucial

Percentage sexually experienced women reporting forced first sex



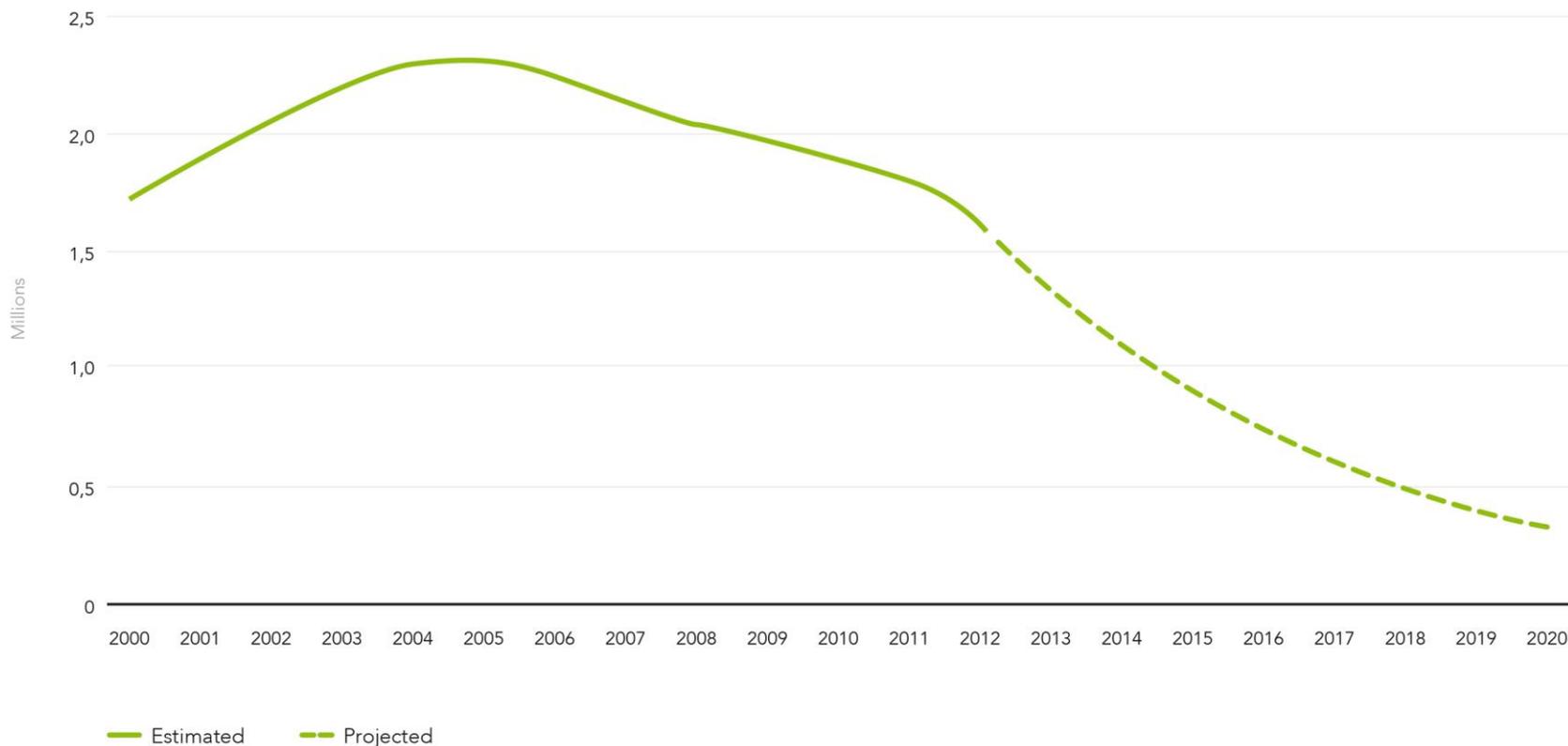
Source: WHO Multi-Country Study on Domestic Violence and Women's Health 2005.

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Setting new targets to 2020

Projected annual AIDS-related deaths, assuming scale up to 95% coverage by 2020

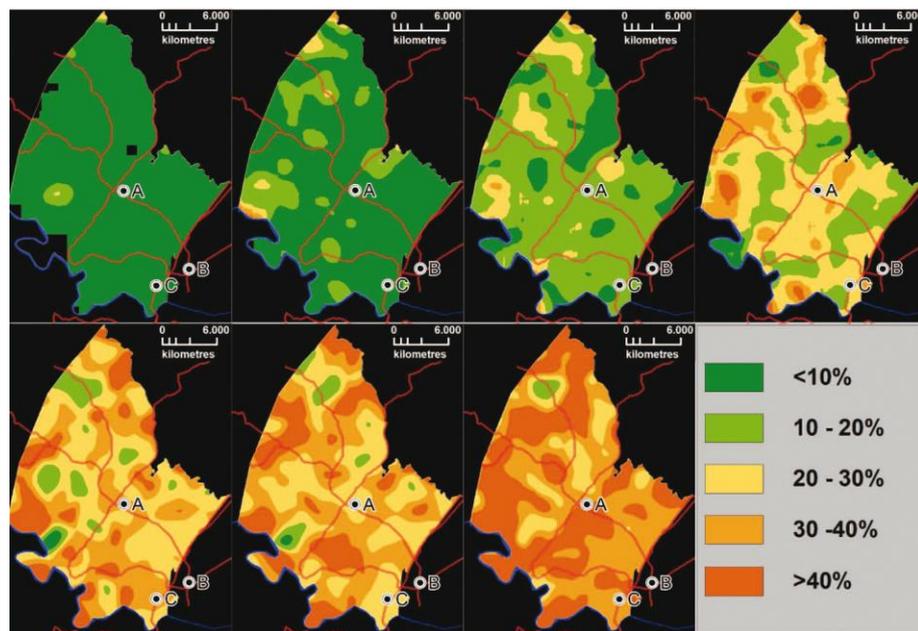


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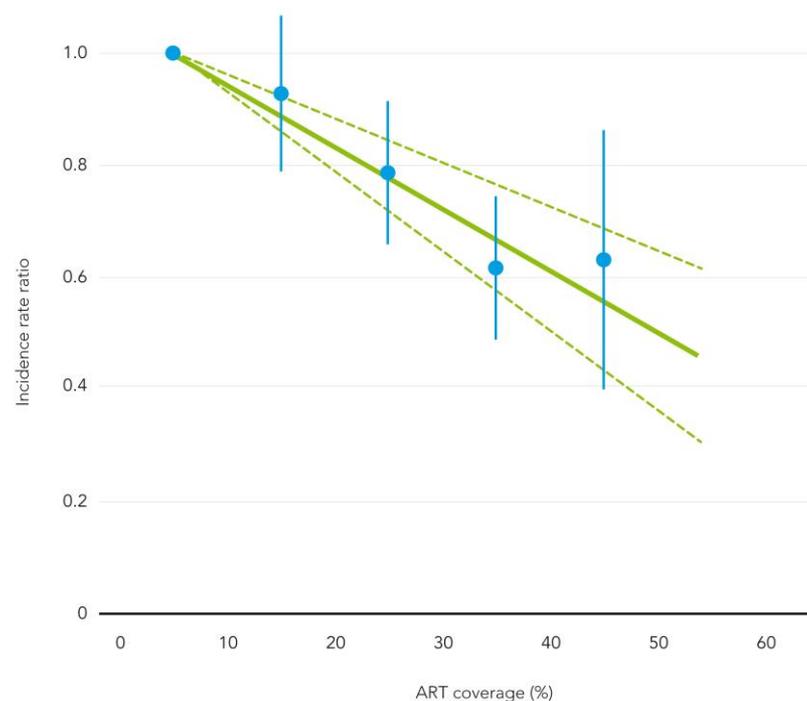
Treatment as prevention- changing the AIDS landscape

Incidence falls by 1.1% [0.8%-1.4%] for each 1% increase in HIV treatment coverage



ART coverage of all people living with HIV 2004-2011, Kwazulu Natal, South Africa

Source: Tanser Science 2013; Williams 2013



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Access to treatment: Non negotiables

- Integral part of right of everyone to enjoy highest attainable standard of physical and mental health
- First and foremost for safeguarding health of people living with HIV
- HIV testing and ART initiation- voluntary and non-coercive
- Ensuring best interests of people living with HIV
- Highest quality of medicines and care

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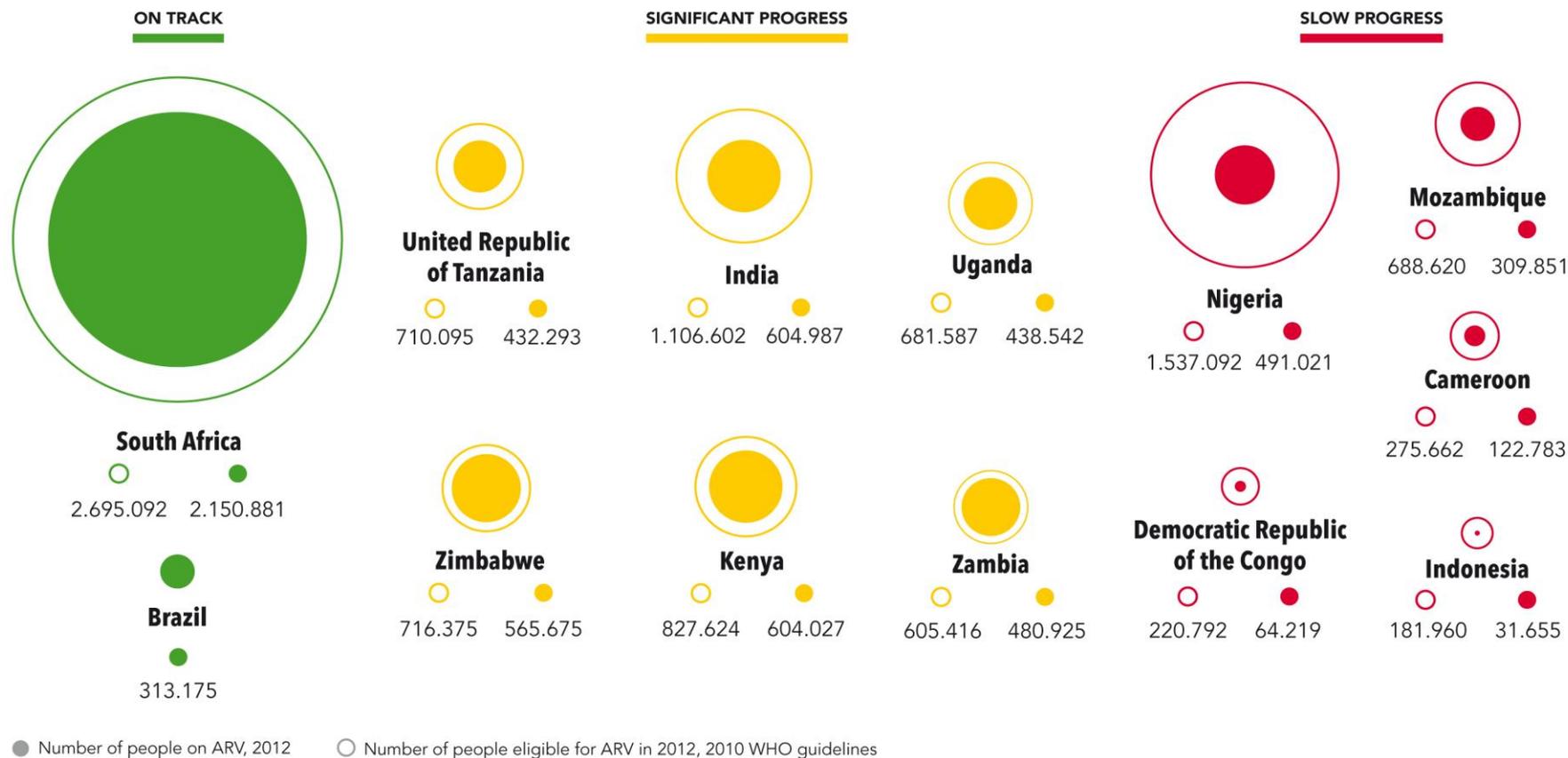


1 MIND THE COUNTRY CONTEXT

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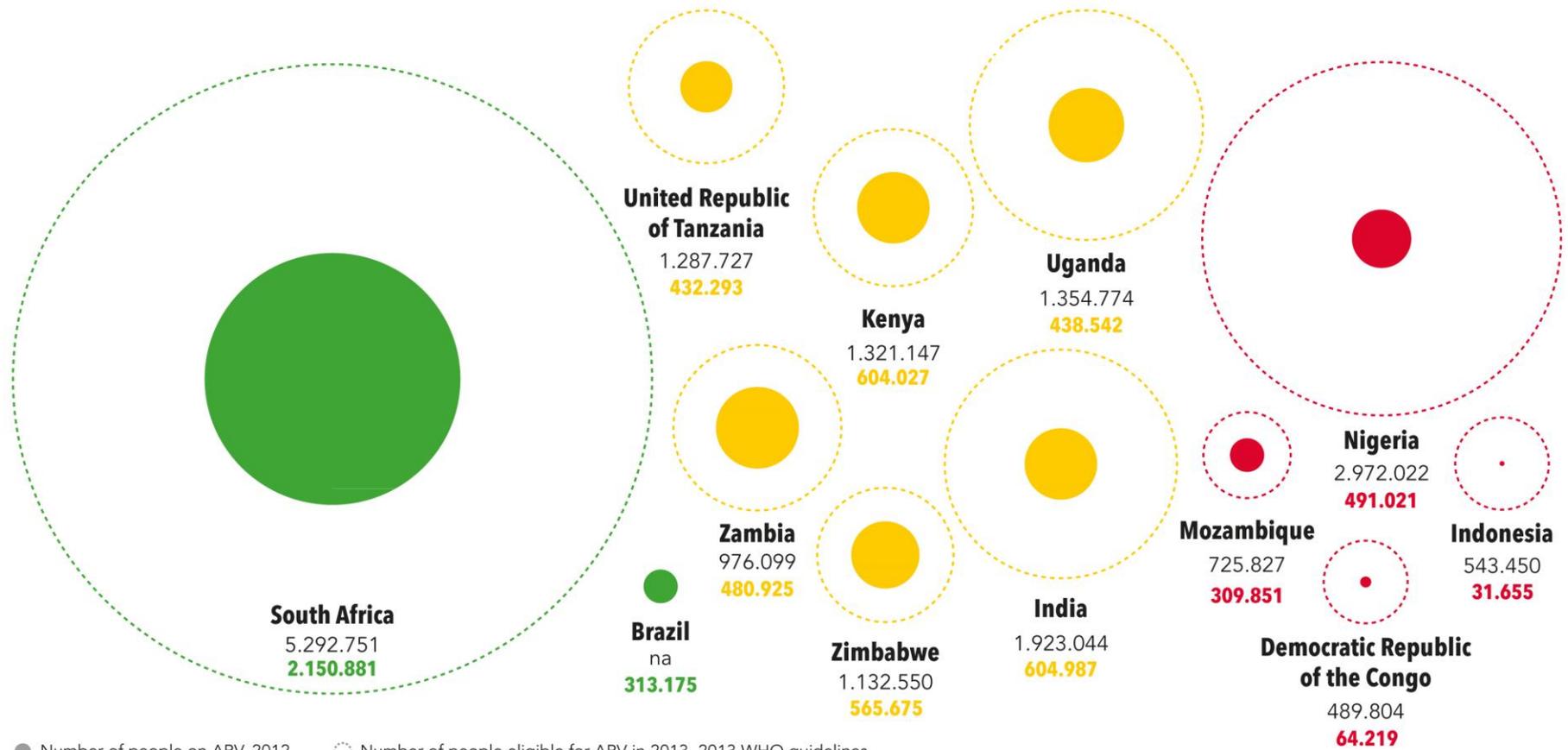


Country context for treatment access varies



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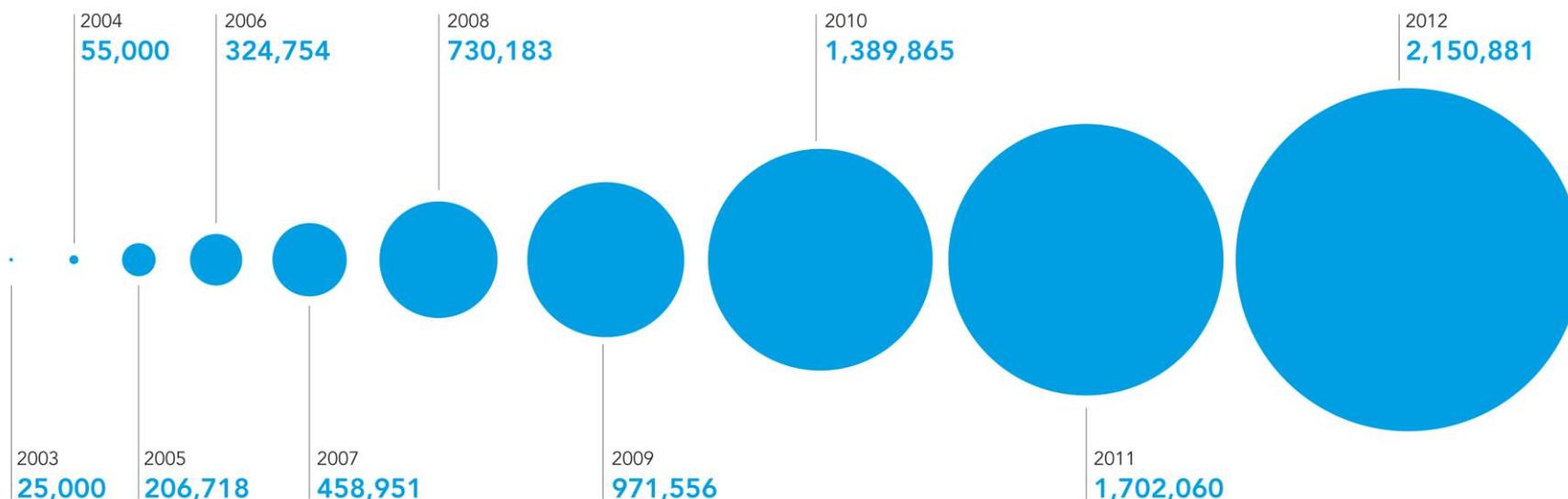
Applying new treatment guidelines: the access gap widens



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South Africa: rapid scale up in a single decade

Total number receiving ART



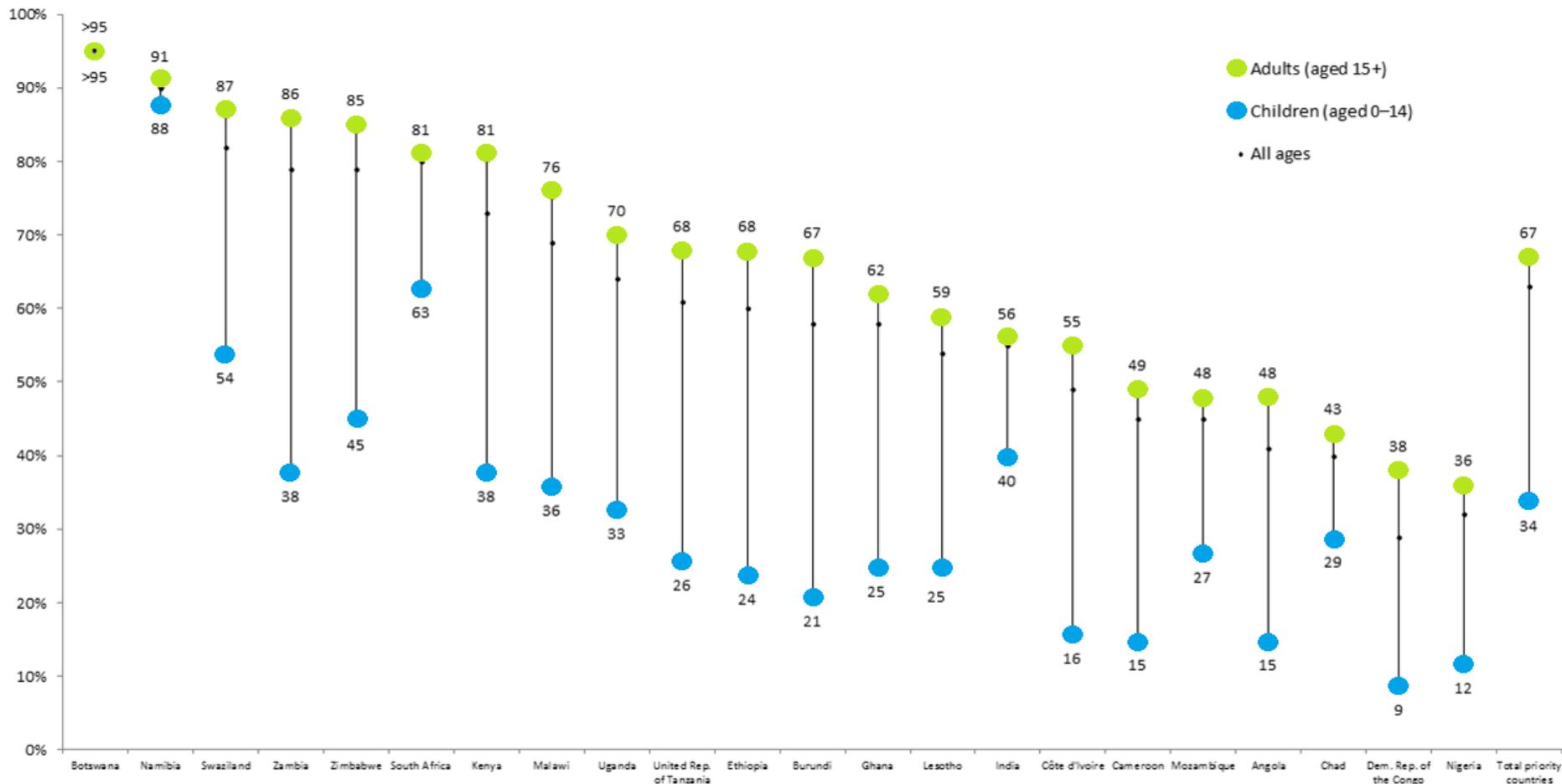
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2 NO ONE LEFT BEHIND

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Children have inequitable access to treatment—two out of three do not have access

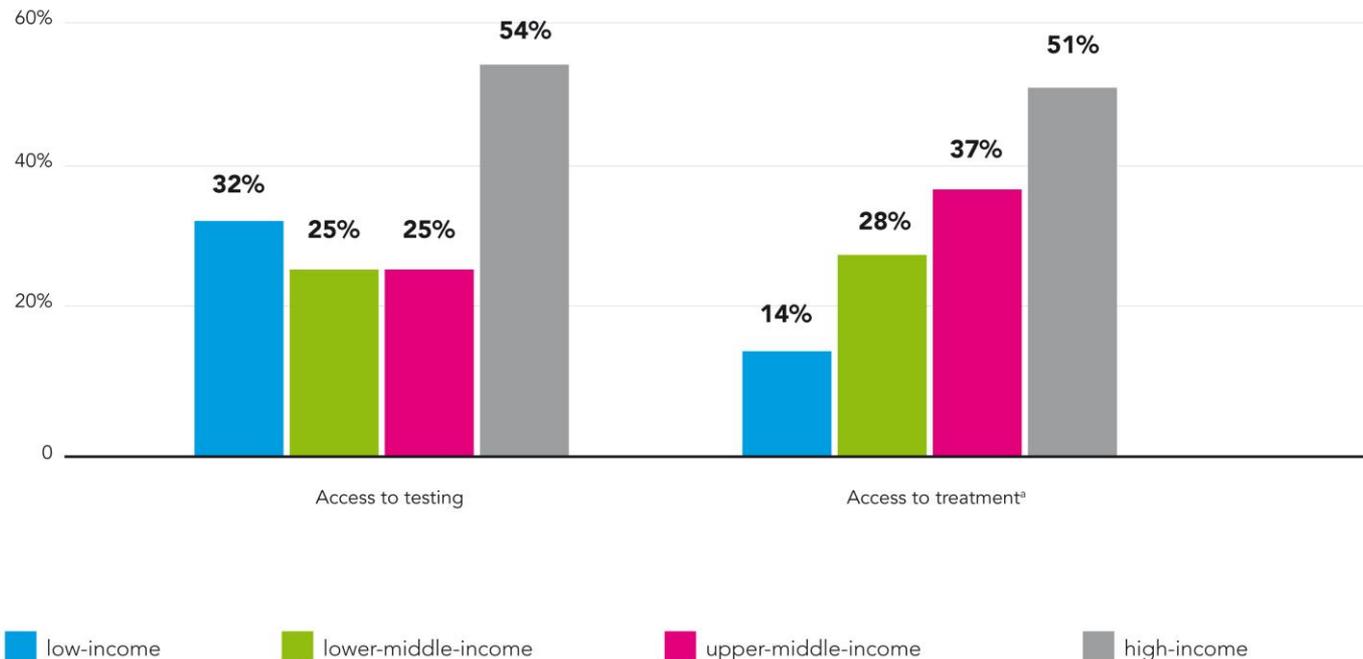


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Treatment access to key populations lagging behind

Percentage of men who have sex with men reporting that HIV testing and HIV treatment are easily accessible, by country income level, 2012



^a Access to HIV treatment was measured only among respondents who reported living with HIV.

Source: Access to HIV prevention and treatment for men who have sex with men: findings from the 2012 Global Men's Health and Rights Study (GMHR) (44)

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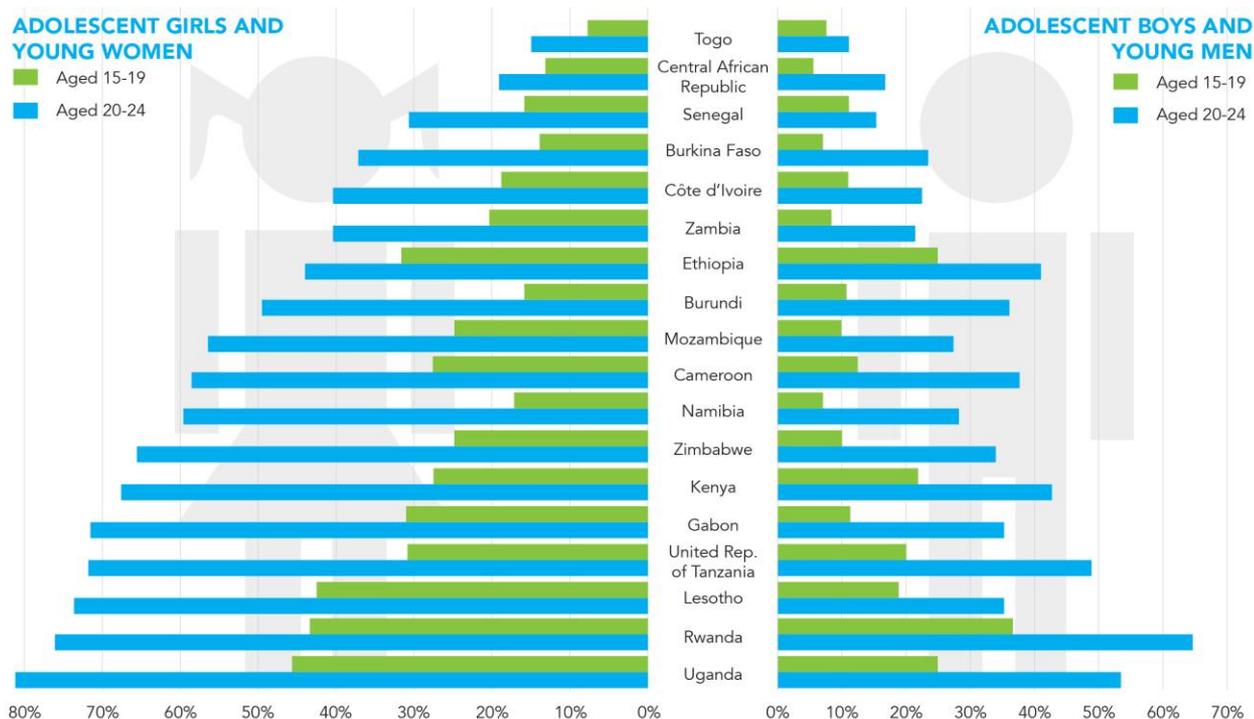
3 PRO-TEST

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Rethinking HIV testing to increase access to HIV prevention and treatment

Percentage of adolescent girls and boys aged 15-19 and young women and men aged 20-24 who have ever been tested for HIV and received results, in selected sub-Saharan African countries



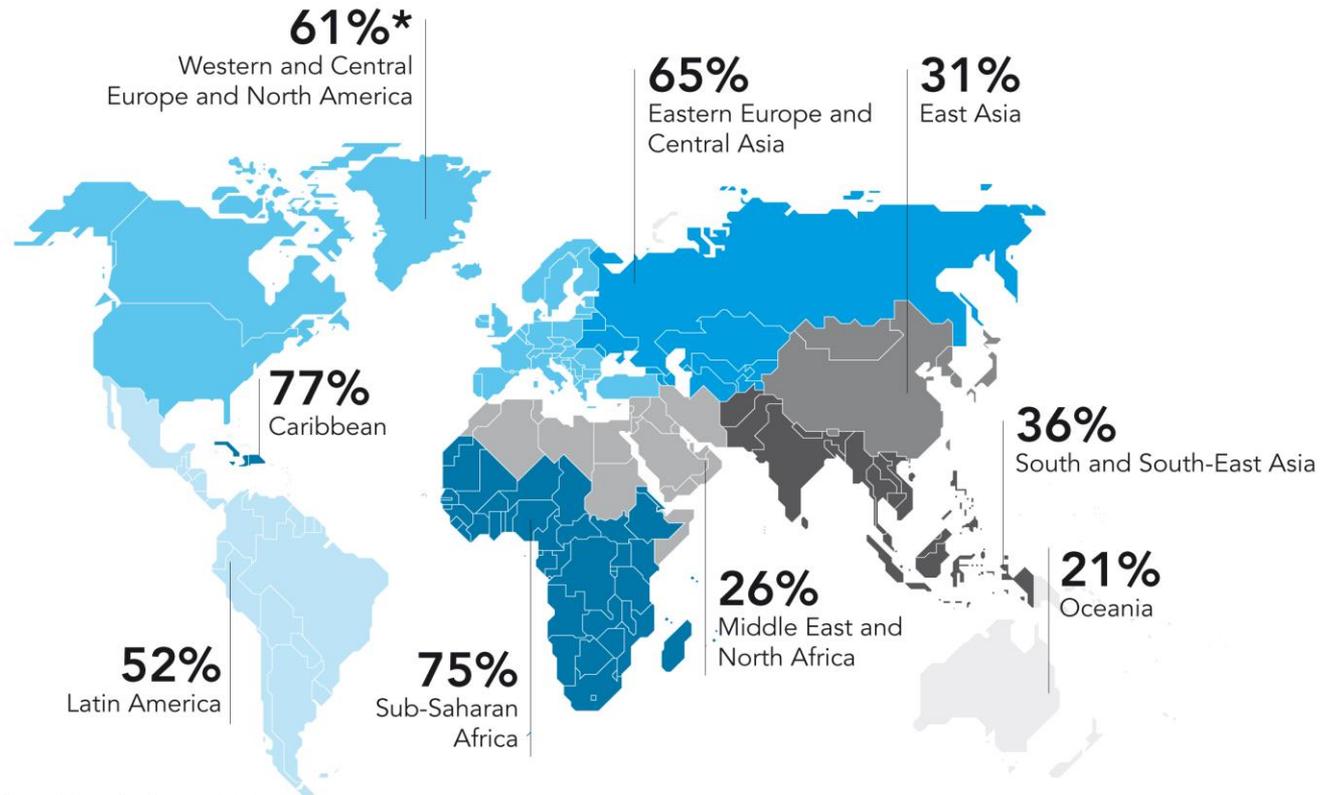
Nota: Countries were selected on the basis of data availability.

Source: UNICEF global databases, 2013, based on Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys, 2006-2012.

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Percentage of notified tuberculosis patients tested for HIV, by region, 2012



* Median value of Western and Central Europe (43%) and North America (79%)

Source: UNAIDS Global report 2013

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4 SCALING UP

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Investment case: scaling up for treatment of key populations

Thailand key features

2012

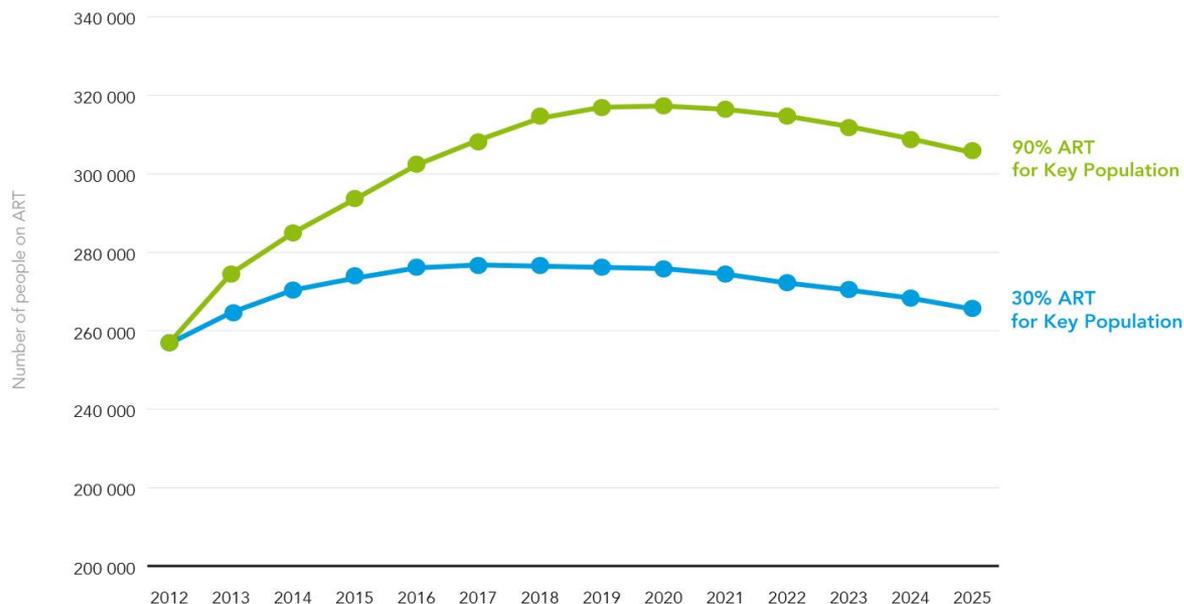
1. High coverage of prevention services for Sex and MSM- more than 80%
2. Low HIV testing and treatment uptake- less than 30%

2013

1. Maintain high prevention coverage.
2. Accelerate prevention services for people who inject drugs
3. Increase testing and treatment uptake for key population to 90%

Investment case:

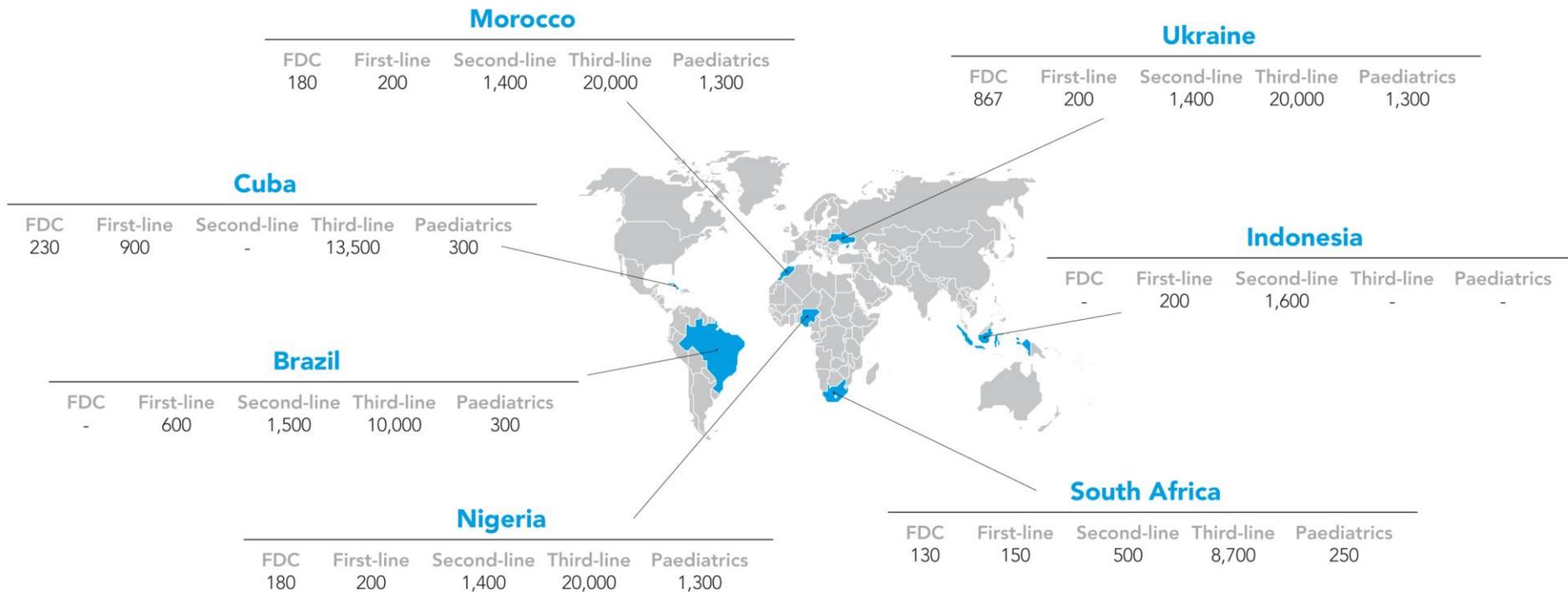
Additional US\$ 100 million towards key populations prevents 22 000 AIDS-related deaths and prevents 20 000 new HIV infections



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ARV medicine prices around the world 2013



Source: WHO/GPRM; MSF/UTW; Country reports

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Making it work: African Union road map

- Sustainable financing models
- Access to medicines - Local production and regulatory harmonization
- Leadership, governance and oversight

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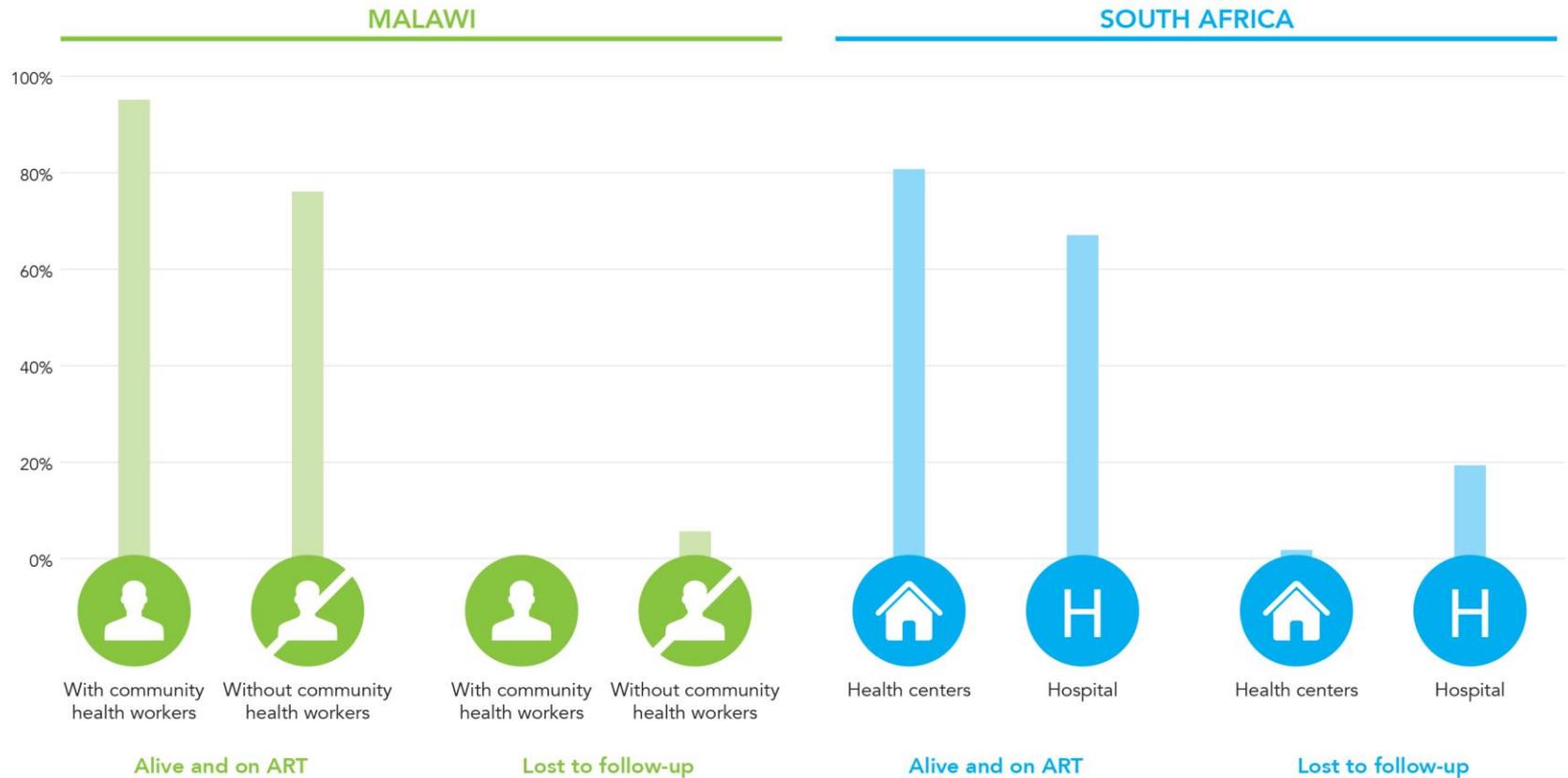


5 COMMUNITIES AT THE CENTER

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Communities deliver



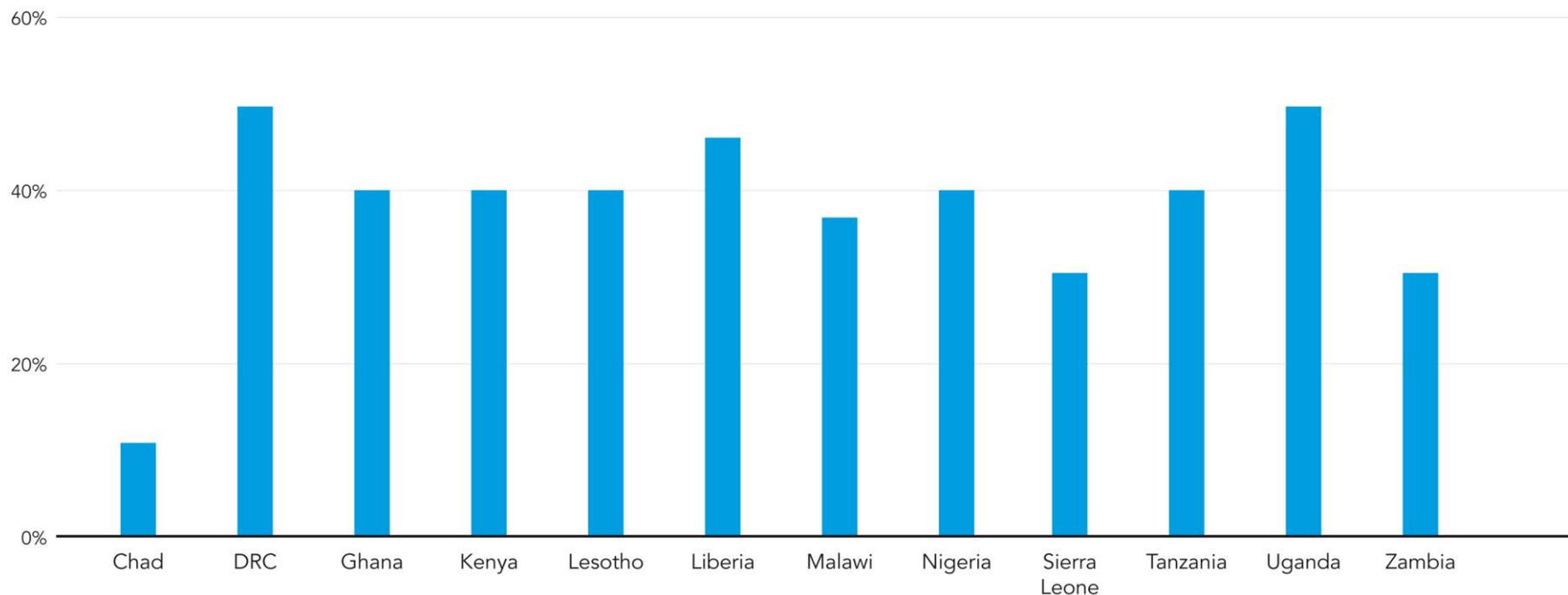
Task Shifting in HIV/AIDS: opportunities, challenges and proposed actions for sub-saharan Africa. Zachariah et al. 2009. Transactions of the Royal Society of Tropical Medicine and Hygiene (2009) 103, 549—558.

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Engagement with faith organizations for treatment delivery

% estimated share of health services provided by faith based organizations

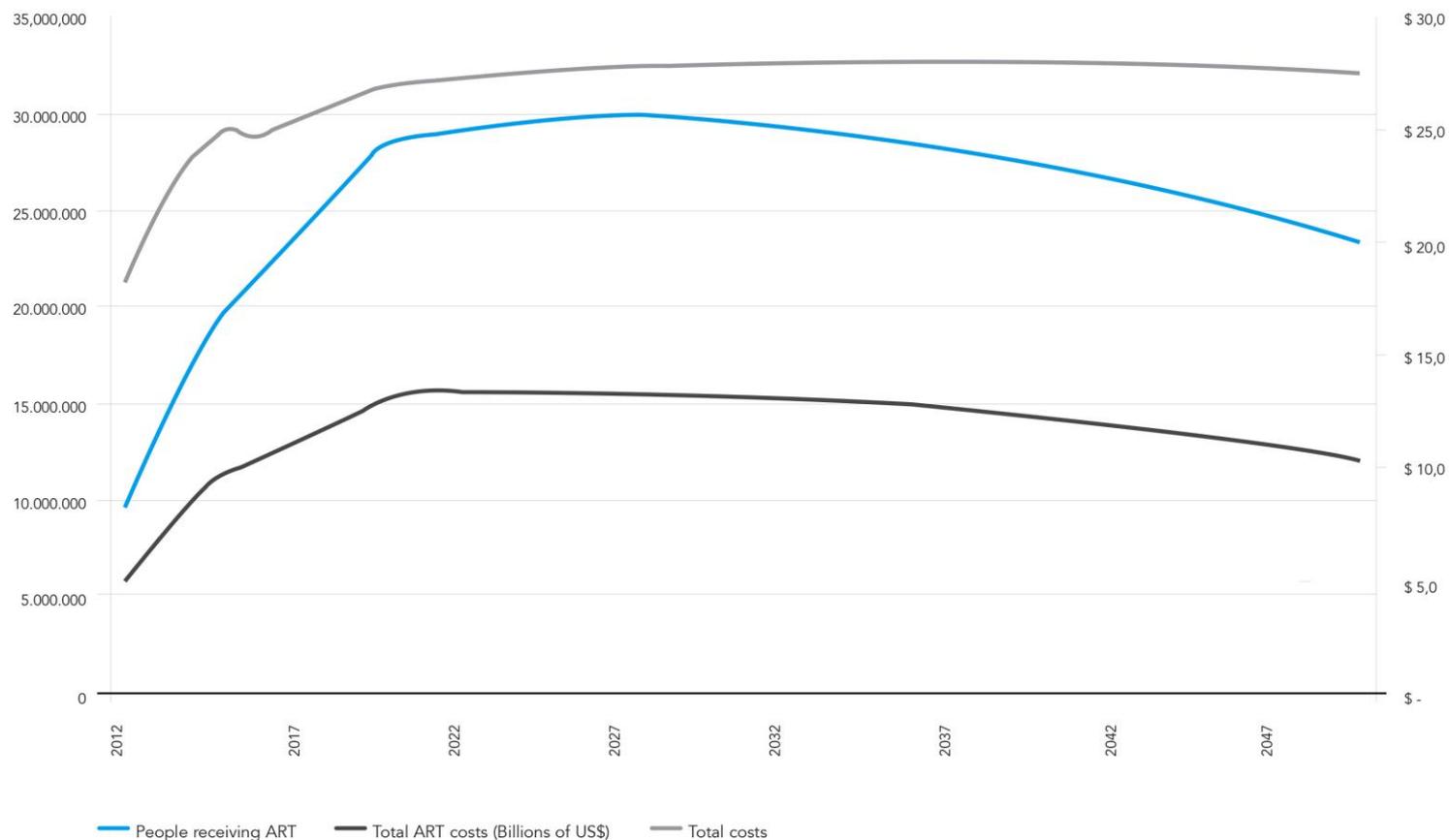


Sources: Boulenger et al 2009; Kintaudi 2006; EPN 2005; Mwenda 2007; MOH-Lesotho 2007; Chand and Patterson 2007; Mhango 2006; CHAN 2007; CCIH 2005; Dimmock 2007; Todd et al 2009; HERA 2005; MOH-Zambia 2002; Green et al 2002.

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Estimated resource needs for scaled up access to HIV treatment

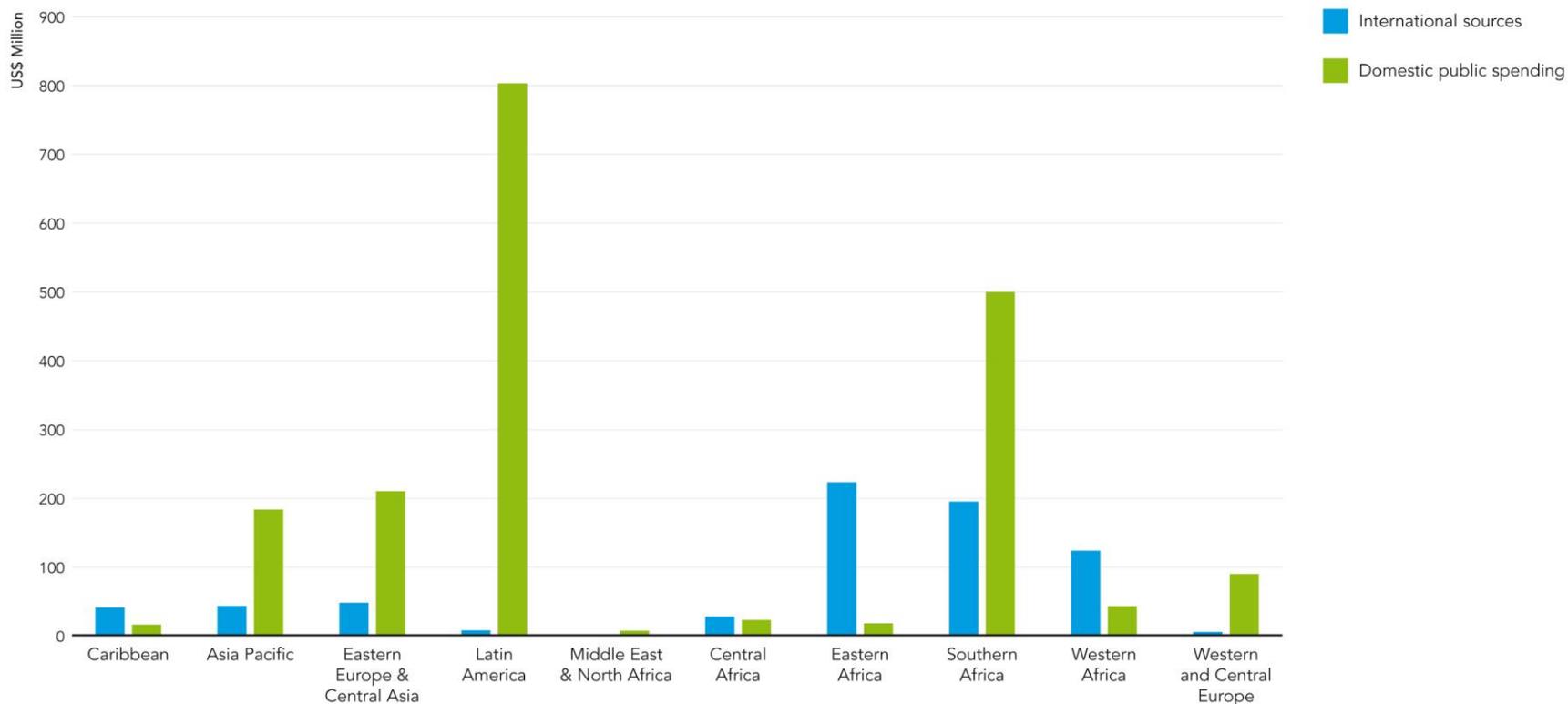


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Treatment access has been possible thanks to global solidarity, shared responsibility

Investments in HIV treatment



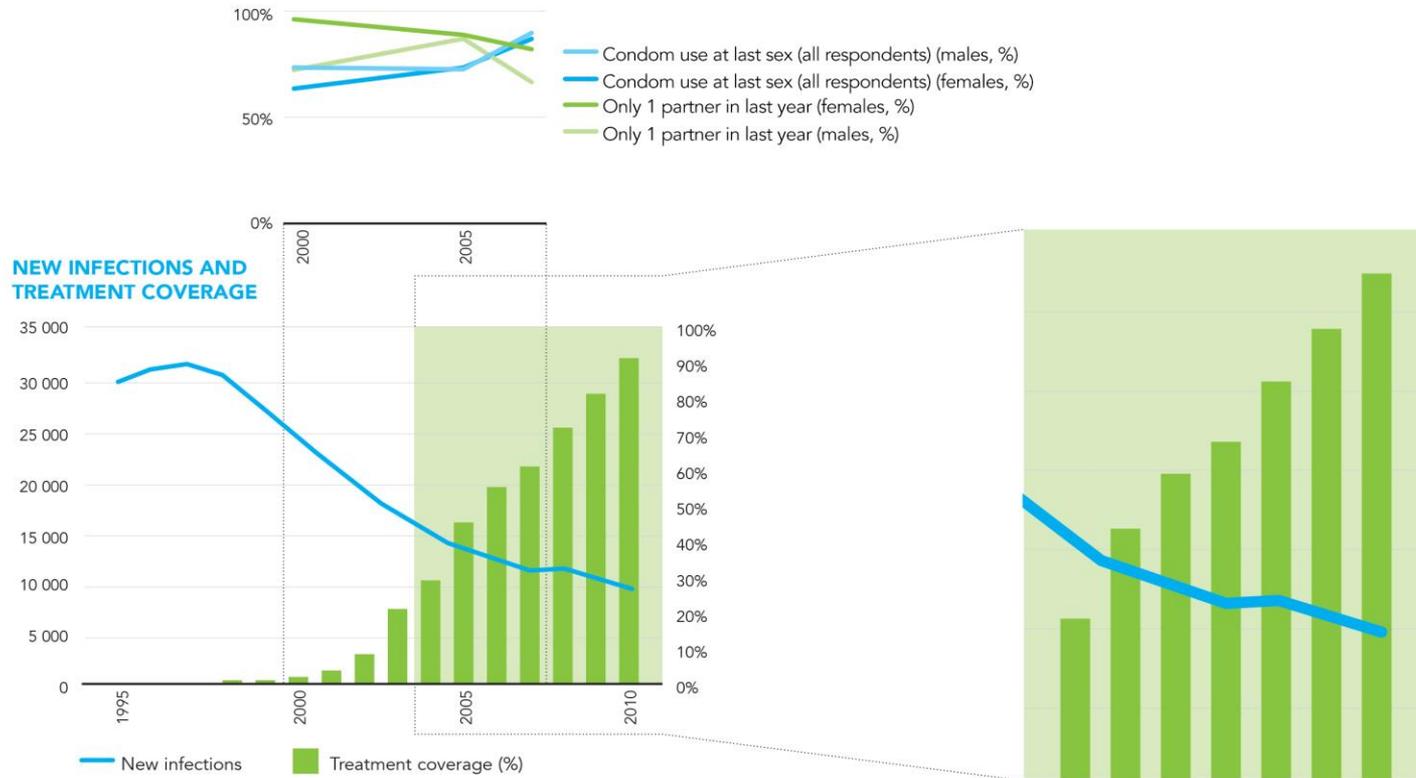
Source: GARPR 2013.

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Getting the balance right

New infections, behaviour change and treatment coverage in Botswana



Source: Botswana AIDS indicator survey; UNAIDS; WHO.

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