

Global Progress Report 2021:

HIV, viral hepatitis and sexually transmitted infections

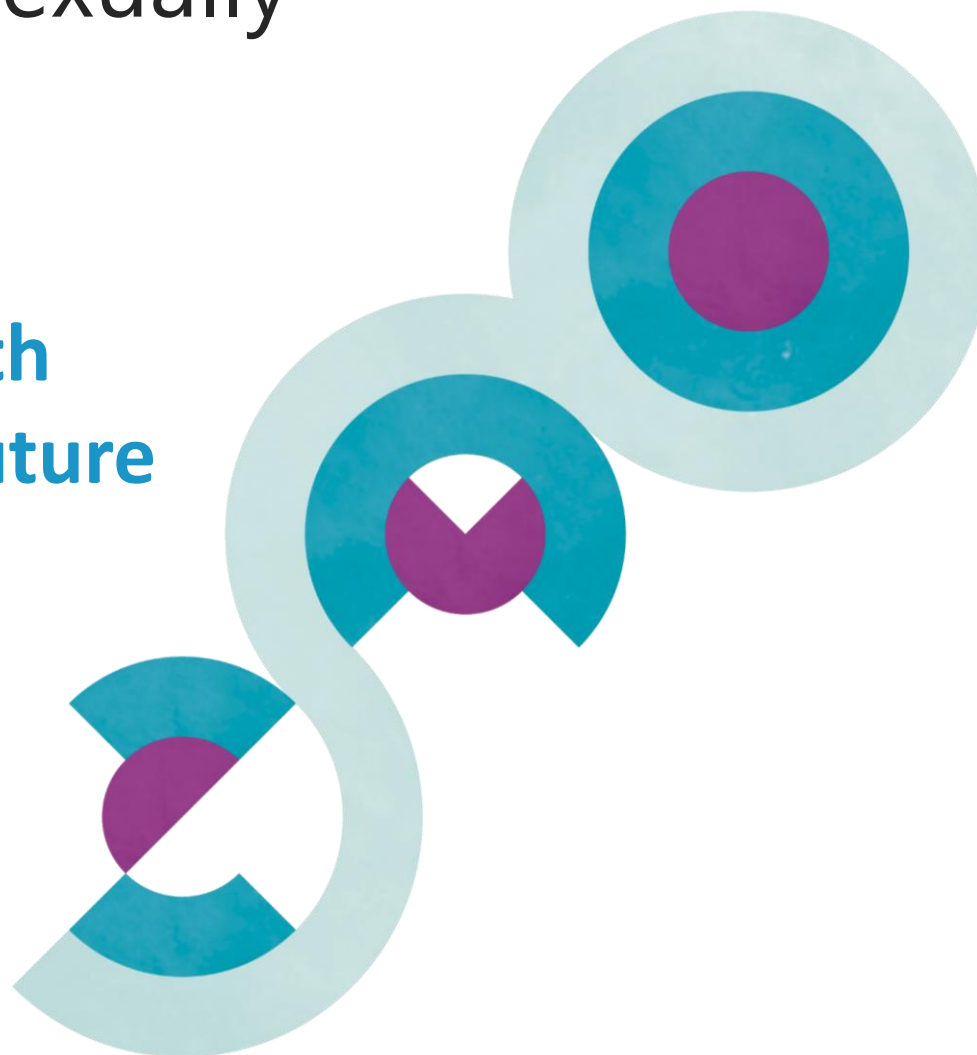
Overview of the Global Health Sector Strategies, past and future

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Director Global HIV, Hepatitis and STIs Programmes

World Health Organization

20 May 2021



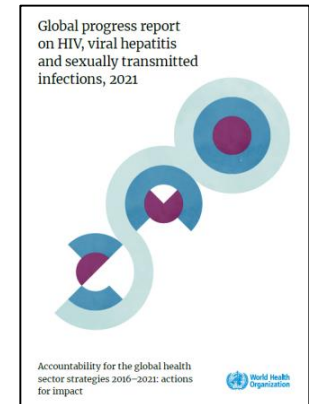
Contents



- **Three Interlinked Global Health Sector Strategies on HIV, Viral Hepatitis and STIs 2016-2021 – what have we accomplished?**
- **New estimates as a baseline for our new Strategies for 2022-2030**
- **Synergies with other UN strategies**
- **The Future Strategies – towards elimination by 2030**



Global Health Sector Strategies on HIV, Viral Hepatitis and Sexually Transmitted Infections, 2016-2021



Closing the gap to 2030

- **WHA74** will consider Executive Board decision requesting new strategies 2022-2030
- **This Global Progress Report provides the baseline for developing new strategies**

HIV

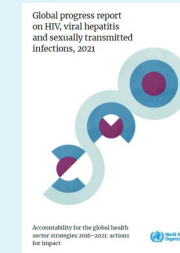


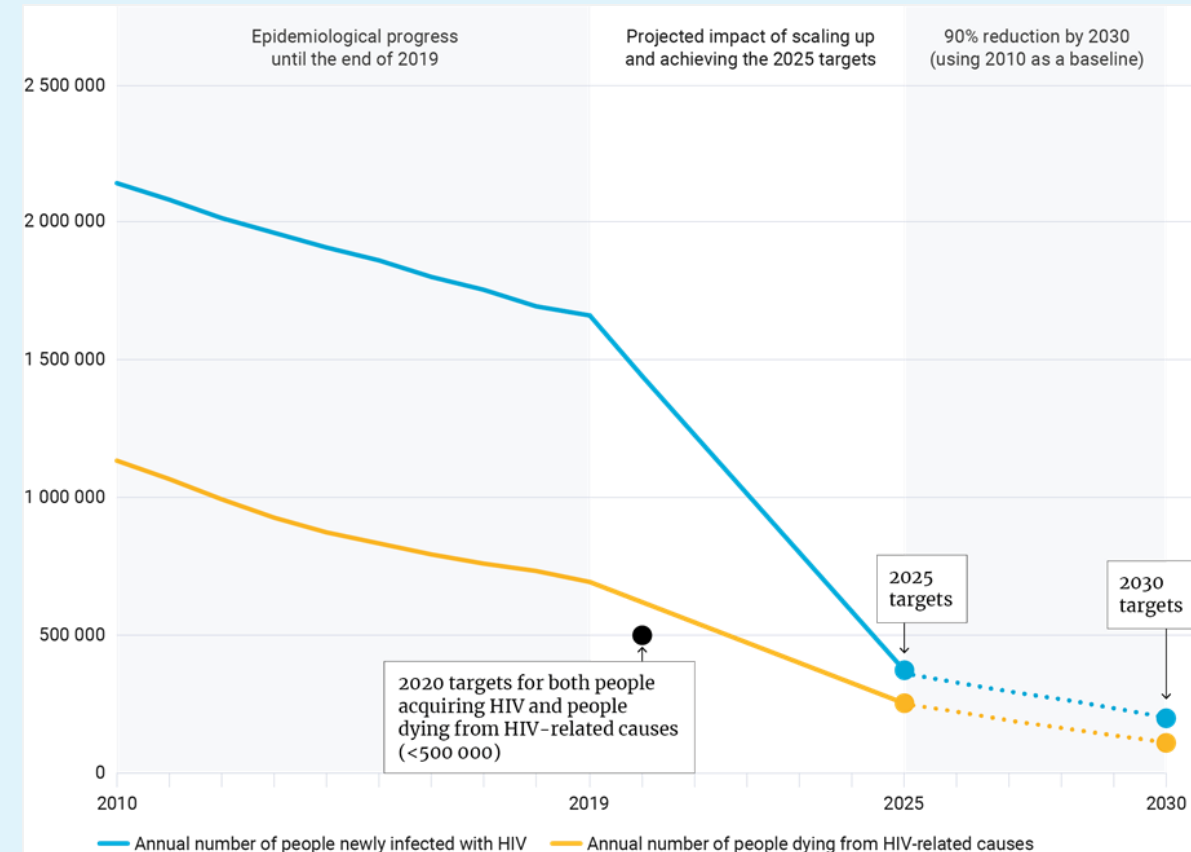
Table 1. Global health sector strategies for HIV, viral hepatitis and STIs 2016–2021: targets and results

HIV

Impact	
Targets (by 2020)	Status
<ul style="list-style-type: none"> Reduce the annual number of people dying from HIV-related causes to less than 500 000 globally by 2020 Reduce the number of people living with HIV dying from tuberculosis (TB)-related causes by 75% by 2020 Reduce the number of people living with HIV dying from hepatitis B- and C-related causes by 10%, in accordance with the mortality targets for all people with chronic hepatitis B and C infection Reduce the annual number of people acquiring HIV infection to less than 500 000 by 2020 Zero new infections among children (0–14 years old) by 2020 	<ul style="list-style-type: none"> 690 000 [500 000–970 000] people died from HIV-related causes globally in 2019 208 000 [177 000–242 000] people living with HIV died from TB-related causes in 2019 No data 1.7 million [1.2 million–2.2 million] people acquired HIV infection in 2019 150 000 [94 000–240 000] children acquired HIV infection in 2019
Service coverage	
<ul style="list-style-type: none"> Ensure that 90% of people living with HIV know their HIV status Ensure that 90% of the people who know their HIV-positive status receive antiretroviral therapy Ensure that 90% of people living with HIV receiving treatment have suppressed viral loads 	<ul style="list-style-type: none"> 81% [68–95%] of people living with HIV knew their HIV status globally in 2019. 82% [66–97%] of those who knew that they were HIV-positive were accessing treatment in 2019 88% [71–100%] of people receiving treatment had suppressed viral loads in 2019

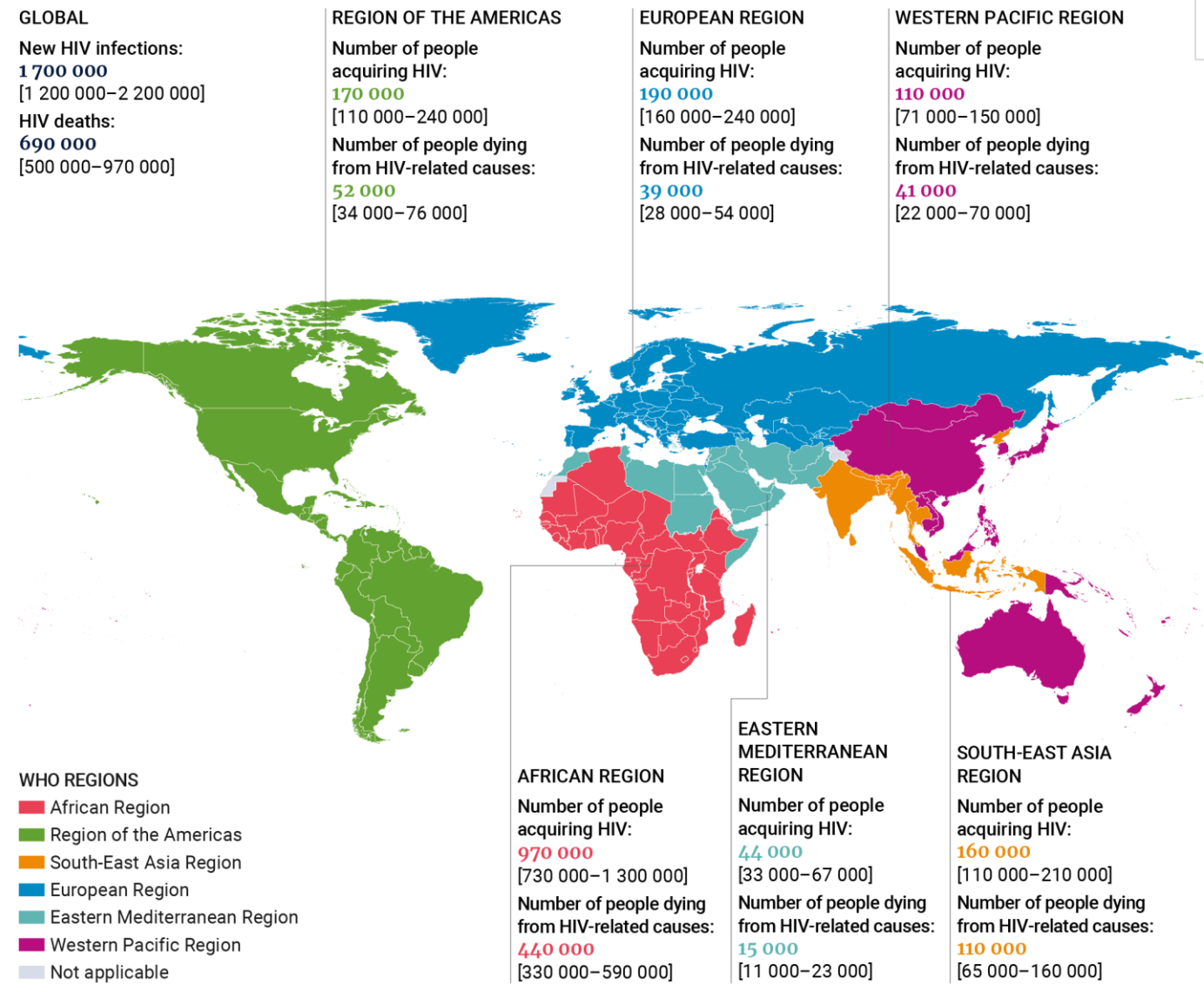
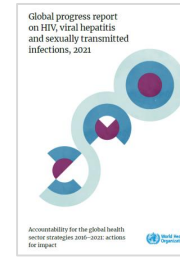
Annex 1 provides a complete set of global and regional data and sources.

Global trends in people acquiring HIV and people dying from HIV-related causes, 1990–2019 and projections to 2030



Source: Avenir Health using 2025 targets and UNAIDS/WHO epidemiological estimates, 2020.

Number of people acquiring HIV and number of people dying from HIV-related causes by WHO region, 2019



WHO REGIONS

- African Region
- Region of the Americas
- South-East Asia Region
- European Region
- Eastern Mediterranean Region
- Western Pacific Region
- Not applicable

Source: UNAIDS/WHO estimates, 2020

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Viral Hepatitis



Viral hepatitis

Impact

Targets (by 2020 and 2030)

- 30% reduction in new cases of chronic viral hepatitis B and C infections by 2020, 90% reduction by 2030
- 10% reduction in viral hepatitis B and C deaths by 2020, 65% reduction by 2030

Status

- 1.5 million [1.1 million–2.6 million] people were newly infected with chronic hepatitis B infection in 2019
- 1.5 million [1.3 million–1.8 million] people were newly infected with chronic hepatitis C infection in 2019
- 820 000 [450 000–950 000] people died from hepatitis B infection-related causes in 2019
- 290 000 [230 000–580 000] people died from hepatitis C infection-related causes in 2019

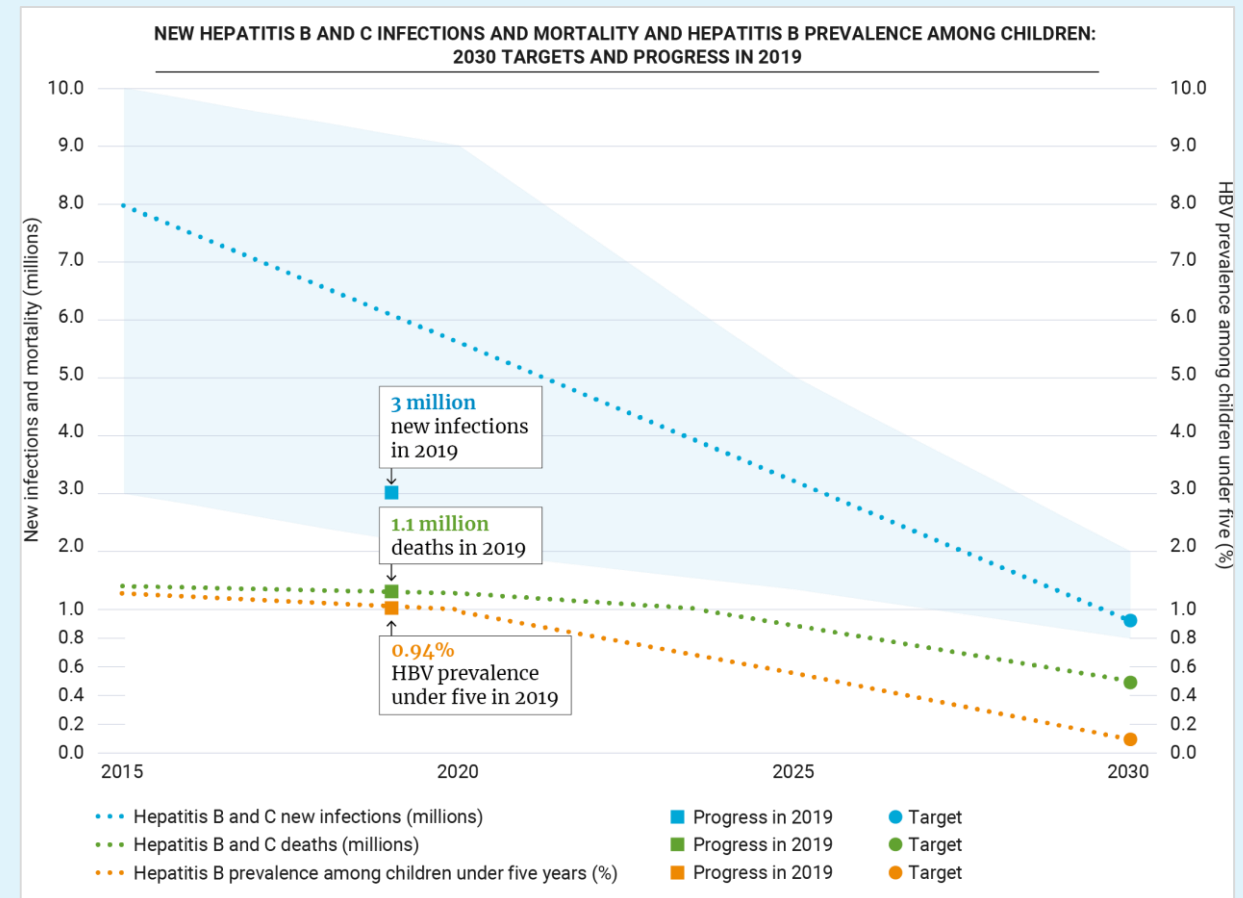
Service coverage

- 90% coverage of hepatitis B virus vaccine (third dose) by 2020
- 50% coverage of prevention of mother-to-child transmission of hepatitis B virus by 2020, 90% coverage by 2030
- 95% of blood donations screened in a quality-assured manner by 2020, 100% screened by 2030
- 50% of injections administered with safety-engineered devices in and out of health facilities by 2020, 90% by 2030
- 200 sterile needles and syringes provided per person who injects drugs per year by 2020, 300 by 2030
- 30% of chronic viral hepatitis B and C infections diagnosed by 2020, 90% by 2030
- 80% of eligible people with chronic hepatitis B and C virus infection treated by 2030, respectively

- 85% coverage of hepatitis B vaccine (third dose) in 2019
- 43% global coverage for timely birth dose of hepatitis B vaccine in 2019
- Only baseline data available: 97% of donations screened with quality assurance in 2015
- 3.9% reuse of injection equipment in 2017
- 33 syringes or needle sets per person who injects drugs per year in 2017
- 30.4 million [24.3 million–38.0 million] people living with hepatitis B knew their hepatitis B status in 2019
- 6.6 million [5.3 million–8.3 million] people diagnosed with hepatitis B received treatment in 2019
- 15.2 million [11.2 million–19.0 million] people living with hepatitis C knew their hepatitis C status in 2019
- 9.4 million [7.5 million–11.7 million] people diagnosed with hepatitis C infection had been treated using direct-acting antiviral drugs between 2015 and 2019

Annex 1 provides a complete set of global and regional data and sources.

New hepatitis B and C infections and mortality, hepatitis B prevalence among children and estimated cancer deaths attributable to hepatitis B



Hepatitis B and C new infections and mortality by WHO region, 2019

GLOBAL

Hepatitis B
New Infection: **1 500 000**
[1 100 000–2 600 000]
Deaths: **820 000**
[450 000–950 000]

Hepatitis C
New Infection: **1 500 000**
[1 300 000–1 800 000]
Deaths: **290 000**
[230 000–580 000]

REGION OF THE AMERICAS

Hepatitis B
New infections: **10 000**
[5 100–26 000]
Deaths: **15 000**
[8 500–23 000]

Hepatitis C
New infections: **67 000**
[63 000–73 000]
Deaths: **31 000**
[19 000–84 000]

EUROPEAN REGION

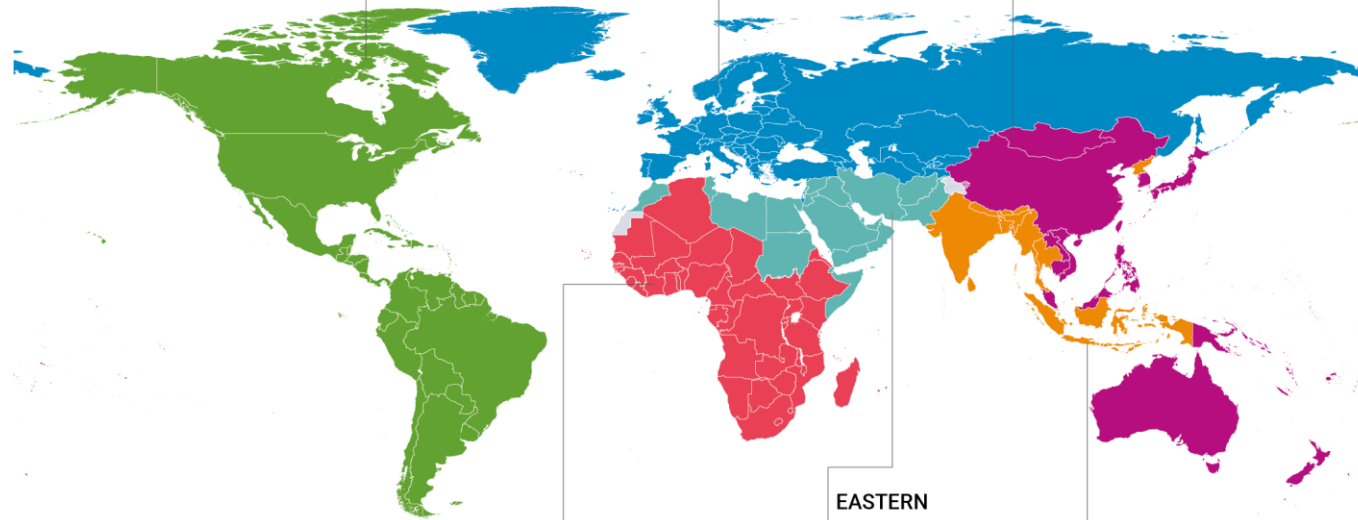
Hepatitis B
New infections: **19 000**
[9 400–38 000]
Deaths: **43 000**
[34 000–51 000]

Hepatitis C
New infections: **300 000**
[240 000–320 000]
Deaths: **64 000**
[39 000–72 000]

WESTERN PACIFIC REGION

Hepatitis B
New infections: **140 000**
[96 000–210 000]
Deaths: **470 000**
[200 000–490 000]

Hepatitis C
New infections: **230 000**
[220 000–260 000]
Deaths: **77 000**
[77 000–140 000]



WHO REGIONS

- African Region
- Region of the Americas
- South-East Asia Region
- European Region
- Eastern Mediterranean Region
- Western Pacific Region
- Not applicable

AFRICAN REGION

Hepatitis B
New infections: **990 000**
[660 000–1 600 000]
Deaths: **80 000**
[47 000–110 000]

Hepatitis C
New infections: **210 000**
[150 000–370 000]
Deaths: **45 000**
[23 000–72 000]

EASTERN MEDITERRANEAN REGION

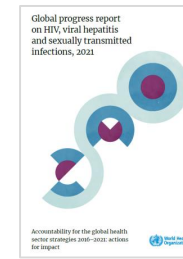
Hepatitis B
New infections: **100 000**
[79 000–140 000]
Deaths: **33 000**
[26 000–60 000]

Hepatitis C
New infections: **470 000**
[240 000–520 000]
Deaths: **31 000**
[31 000–74 000]

SOUTH-EAST ASIA REGION

Hepatitis B
New infections: **260 000**
[180 000–590 000]
Deaths: **180 000**
[140 000–300 000]

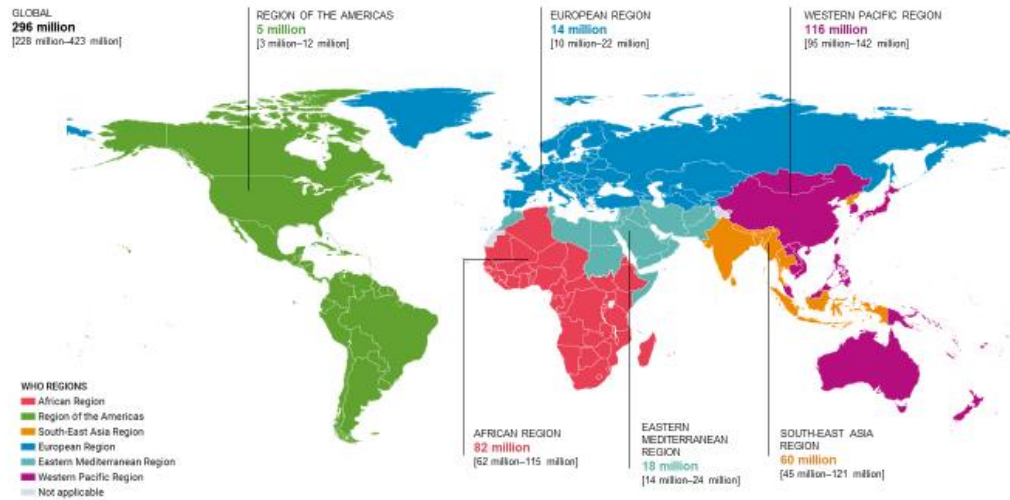
Hepatitis C
New infections: **230 000**
[200 000–430 000]
Deaths: **38 000**
[37 000–130 000]



Burden of Hep B and C, by WHO region 2019



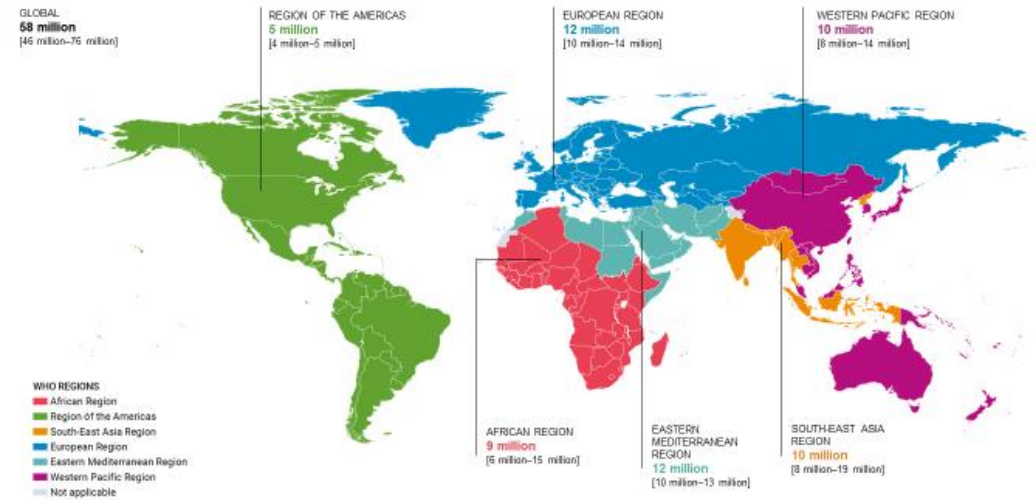
Burden of chronic hepatitis B infection (HBsAg positivity) by WHO Region, 2019



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3

Burden of chronic hepatitis C viraemic infection by WHO Region, 2019

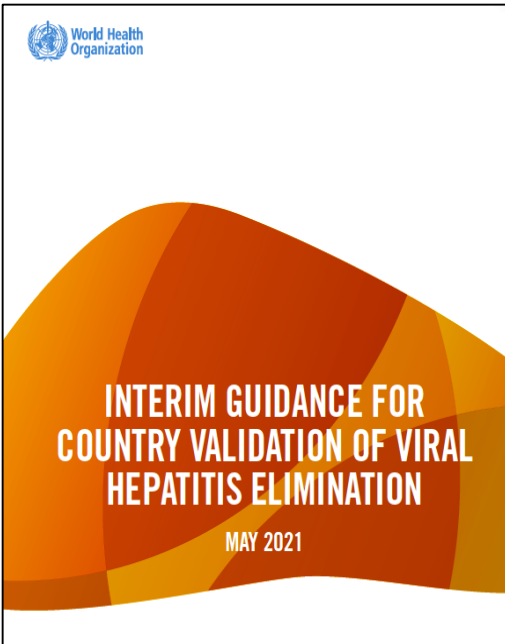


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Interim Guidance for the country validation of viral hepatitis elimination – May 2021



Summary Impact and programmatic targets for country validation of elimination

Elimination targets	Elimination of chronic HBV infection as a public health problem		Elimination of chronic HCV infection as a public health problem	
	Incidence	Mortality	Incidence	Mortality
2030 GHSS relative reduction reference targets (compared to 2015)	95% reduction	65% reduction	80% reduction	65% reduction
HBV- and HCV- specific absolute prevalence, incidence and mortality targets	HBV EMTCT ≤0.1% HBsAg prevalence in ≤5 year - olds ^{a,b}	Annual mortality^c (HBV) ≤4/100 000	Annual incidence (HCV) ≤5/100 000 ≤2/100 (PWID)	Annual mortality^c (HCV) ≤2/100 000
Programmatic targets ^a	Countries with universal HBV vaccine birth dose (BD) ≥90% HepB3 vaccine coverage ≥90% HepB timely hepatitis B BD (HepB-BD) coverage ^d	Testing and treatment ≥90% people with HBV diagnosed ≥80% of people diagnosed with HBV and eligible for treatment are treated ^e	Testing and treatment ≥90% people with HCV diagnosed ≥80% of people diagnosed with HCV are treated ^e	
	Countries with targeted HBV vaccine birth dose (BD) ≥90% HepB3 vaccine coverage ≥90% coverage of those infants at risk with timely targeted HepB-BD ≥90% coverage of maternal antenatal HBsAg testing ≥90% coverage with antivirals for those eligible ^h <i>Additional target: ≤2% MTCT rate^f</i>	Prevention ≥90% HepB3 vaccine coverage ≥90% HepB-BD coverage 0% unsafe injections 100% blood safety	Prevention 0% unsafe injections 100% blood safety 300 needles/syringes/PWID/year	

Sexually transmitted infections

Impact

Targets (by 2020 and 2030)

- 90% reduction of *Treponema pallidum* incidence globally (2018 global baseline)
- 90% reduction in *Neisseria gonorrhoeae* incidence globally (2018 global baseline)
- 50 or fewer cases of congenital syphilis per 100 000 live births in 80% of countries
- Sustain 90% national coverage and at least 80% in every district (or equivalent administrative unit) in countries with the human papillomavirus vaccine in their national immunization programme

Status

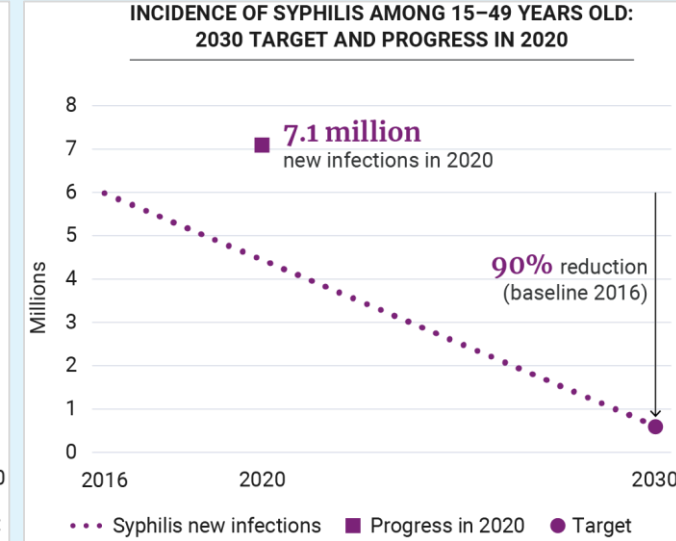
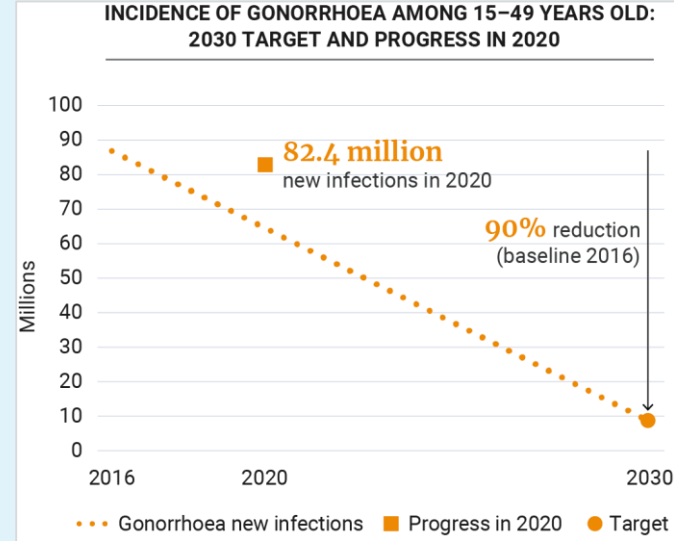
- 7.1 million [2.4 million–11.5 million] people were newly infected with *T. pallidum* in 2020
- 82.4 million [47.7 million–130.4 million] people were newly infected with *N. gonorrhoeae* in 2020
- 473 [385–561] congenital syphilis cases per 100 000 live births in 2016, a decline of 12% in 4 years
- Of 75 countries surveyed, 19 (25%) reported >80% human papillomavirus vaccine coverage in 2019–2020

Service coverage, by 2020:

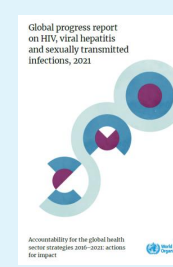
- | | |
|---|---|
| <ul style="list-style-type: none"> • 70% of countries have STI surveillance systems in place that are able to monitor progress towards the relevant targets • 70% of countries have at least 95% of pregnant women screened for HIV and/or syphilis; 95% of pregnant women screened for HIV and/or syphilis with free, prior and informed consent; 90% of pregnant women living with HIV receiving effective treatment; and 95% of syphilis-seropositive pregnant women treated with at least one dose of intramuscular benzathine penicillin or other effective regimen • 70% of key populations for HIV have access to a full range of services relevant to STIs and HIV, including condoms • 70% of countries provide STI services or links to such services in all primary, HIV, reproductive health, family planning and antenatal and postnatal care services • 70% of countries deliver human papillomavirus (HPV) vaccines through the national immunization programme • 70% of countries report on antimicrobial resistance in <i>N. gonorrhoeae</i> | <ul style="list-style-type: none"> • 97 of 110 countries (87%) had STI surveillance or monitoring in place in 2019–2020 • 103 of 111 countries (93%) had policies for antenatal screening and treatment of syphilis in 2019–2020 • No data • Countries provided link to STI services in other health services, such as primary health care (88%), HIV services (91%), reproductive health services (84%), family planning (77%) and pre- and postnatal services (89%) in 2019–2020 • 59% of countries included the HPV vaccine in the national immunization schedule in 2019–2020 • 64% of countries conducted surveillance of gonococcal antimicrobial susceptibility in 2019–2020 |
|---|---|

Annex 1 provides a complete set of global and regional data and sources.

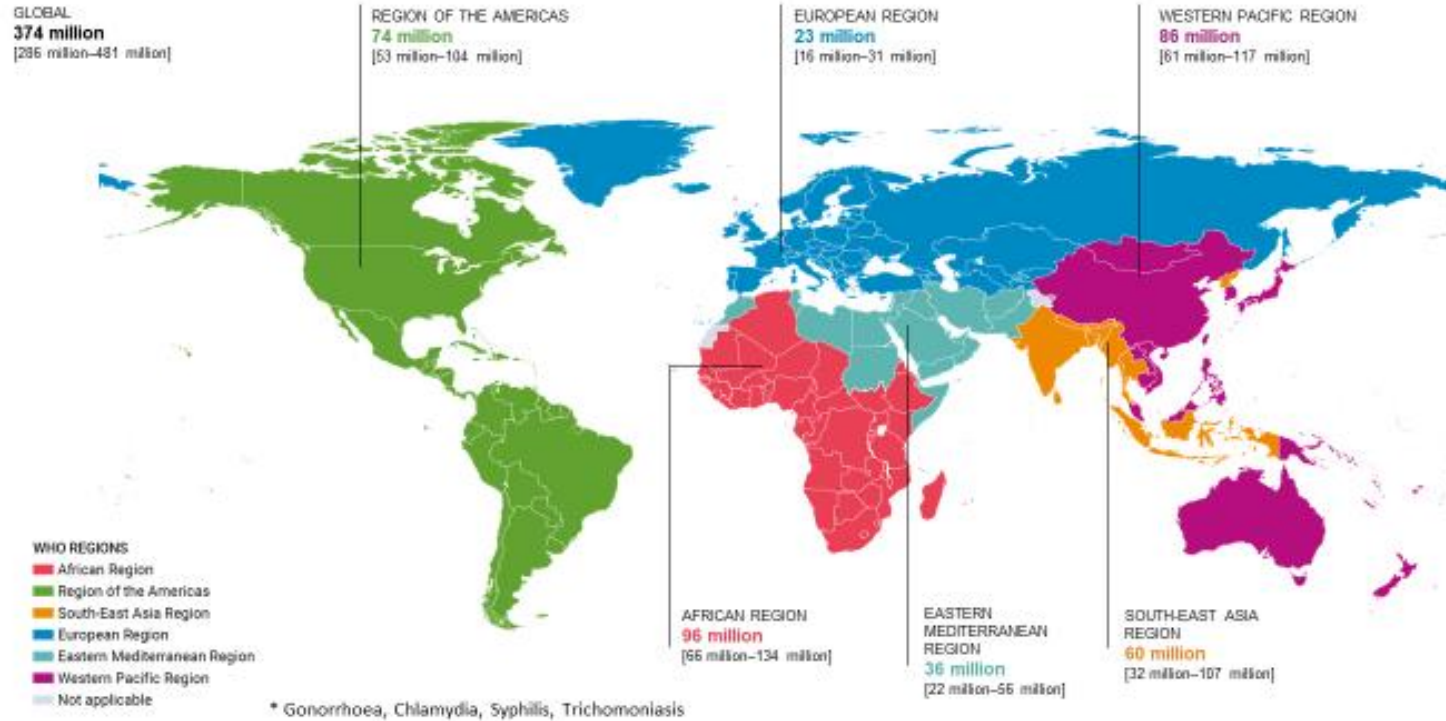
Incidence of gonorrhoea and syphilis: progress towards 2030 targets



Incident cases of four curable STIs, by WHO region 2020



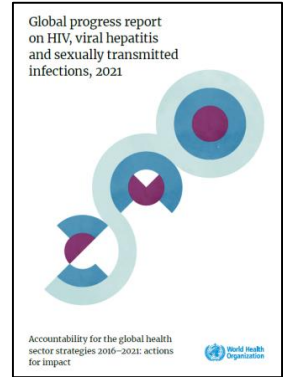
Incident cases of four curable sexually transmitted infections* among adults (15–49 years old), by WHO region, 2020



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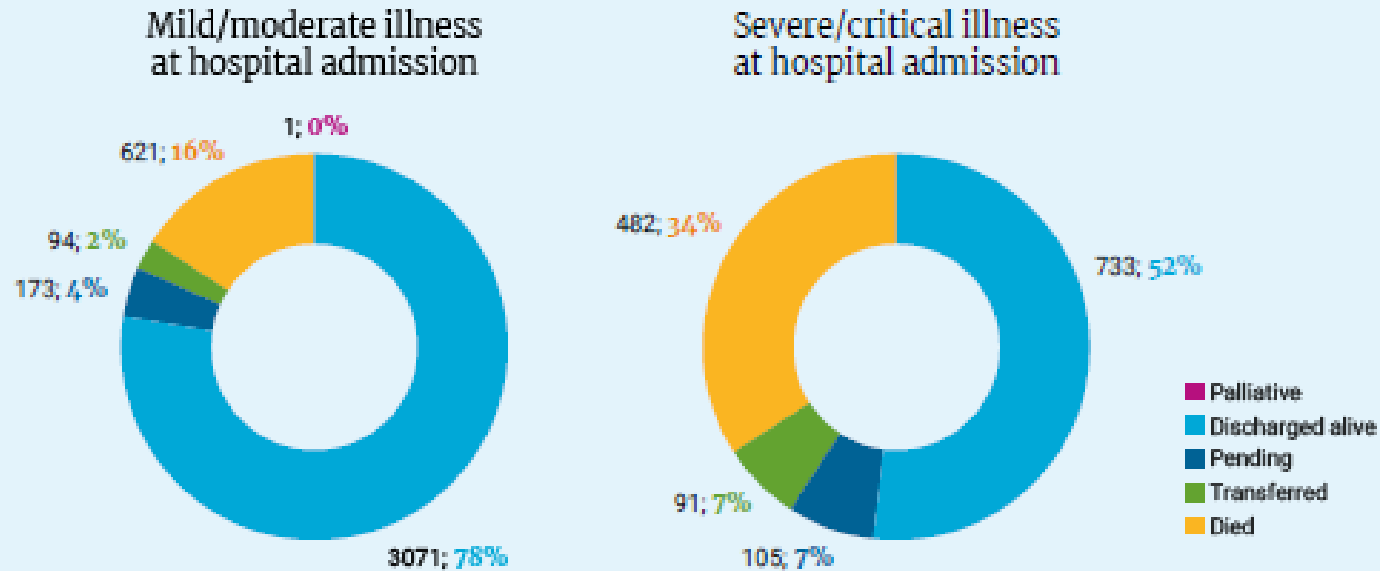
Global Health Sector Strategies on HIV, Viral Hepatitis and Sexually Transmitted Infections, 2022–2030



New Accountability Framework under development

HIV & COVID-19

Fig.15. Outcomes among people living with HIV hospitalised with COVID-19, by severity of illness at hospital admission

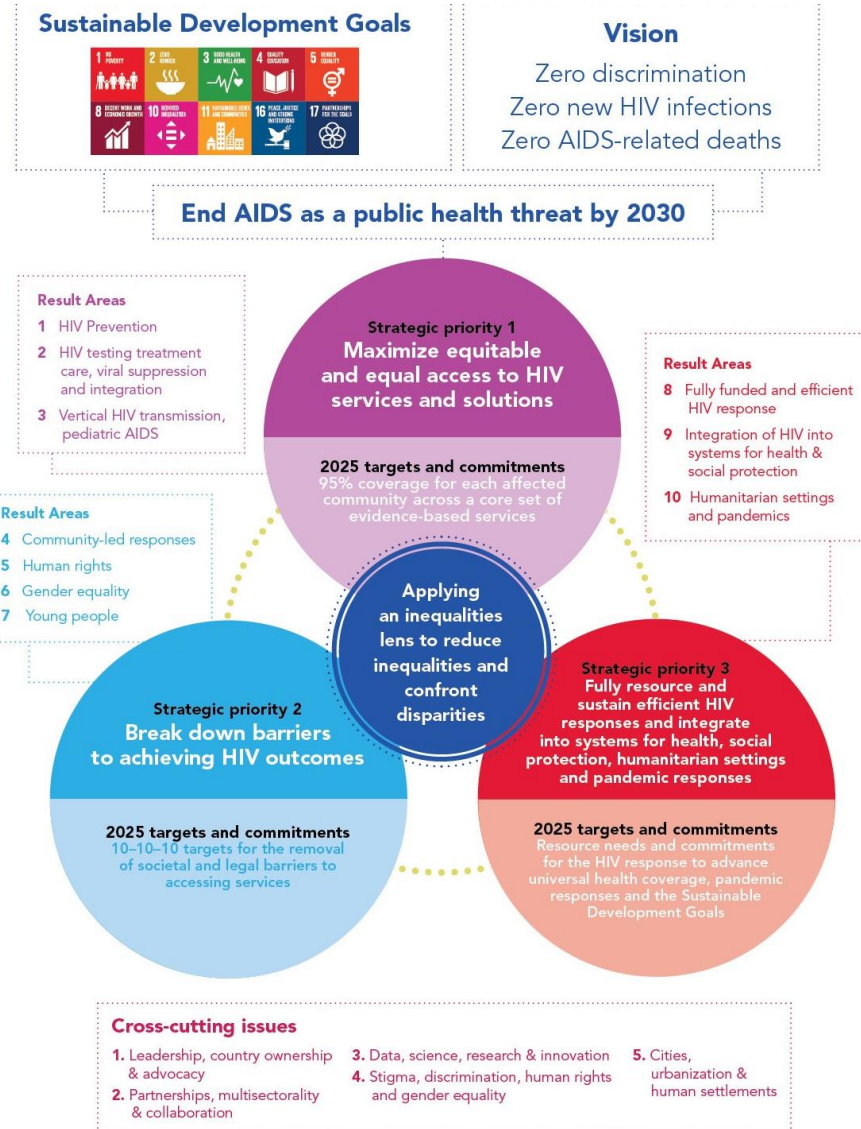
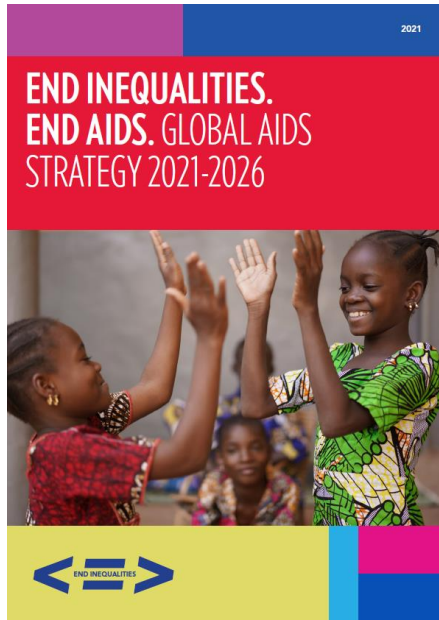


Hospitalized cases from 35 countries submitted to WHO Global Clinical Platform for COVID-19 as of March 17, 2021. N = 5810 of 67 372 (8.6%) with a recorded HIV status were reported as HIV positive. 90.8% (5275/5810) of the people living with HIV were reported from the WHO African Region.

Source: WHO, 2021.



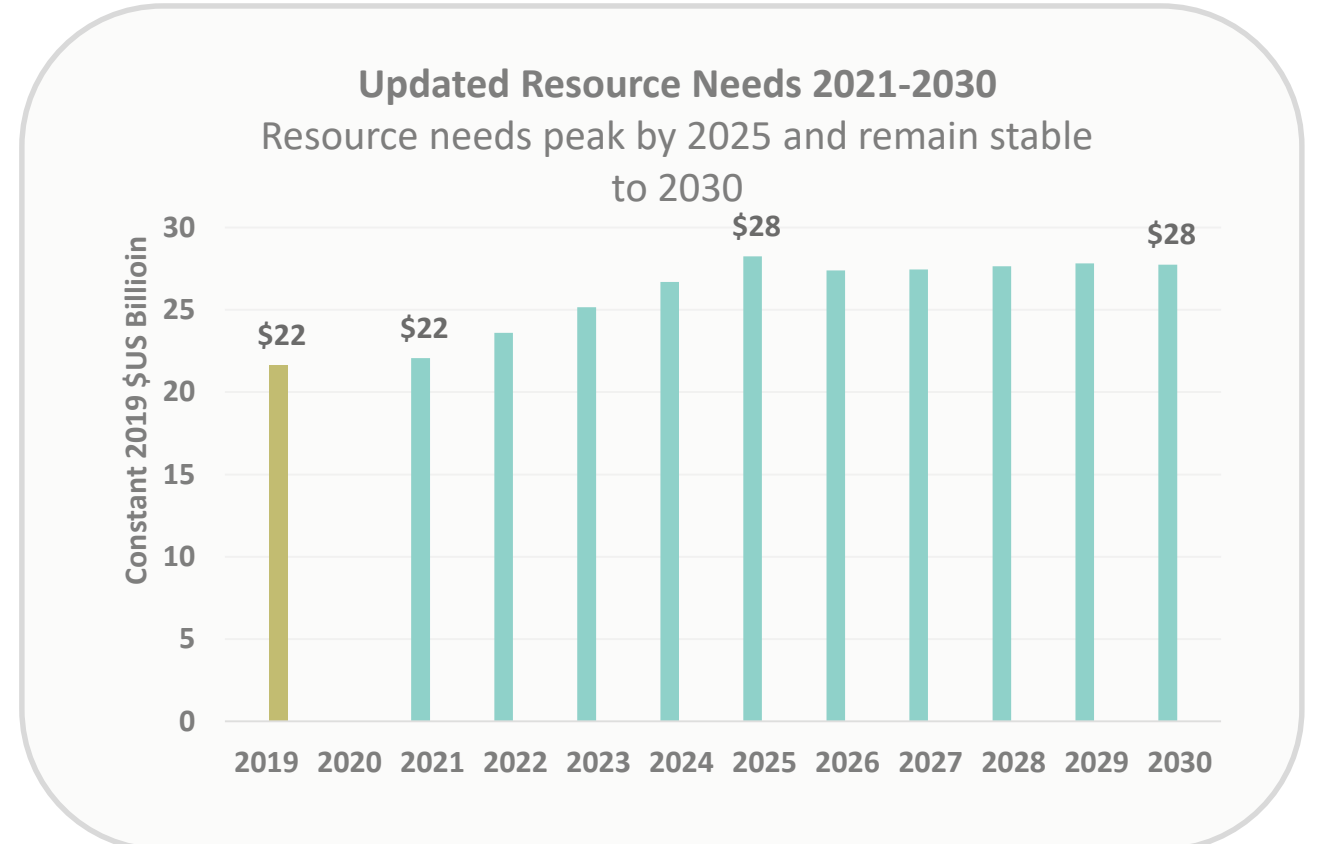
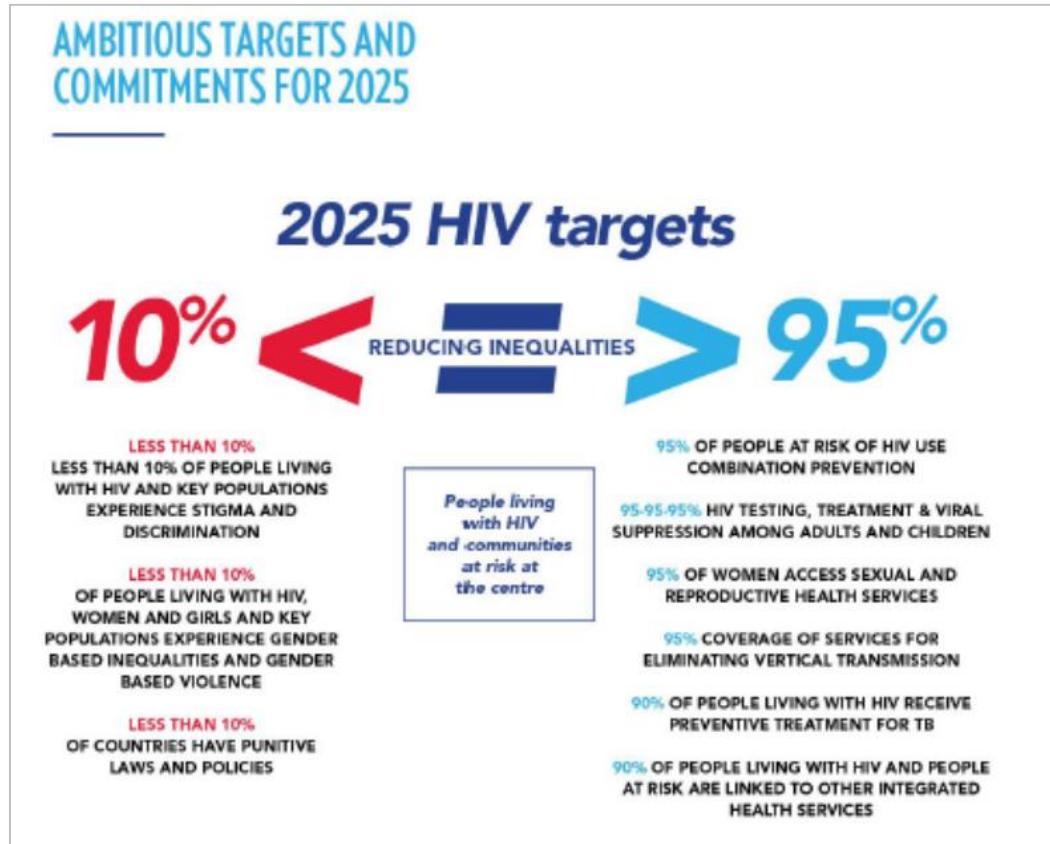
Global AIDS Strategy 2021-2026: Framework



Applying an inequalities lens across the strategic priorities

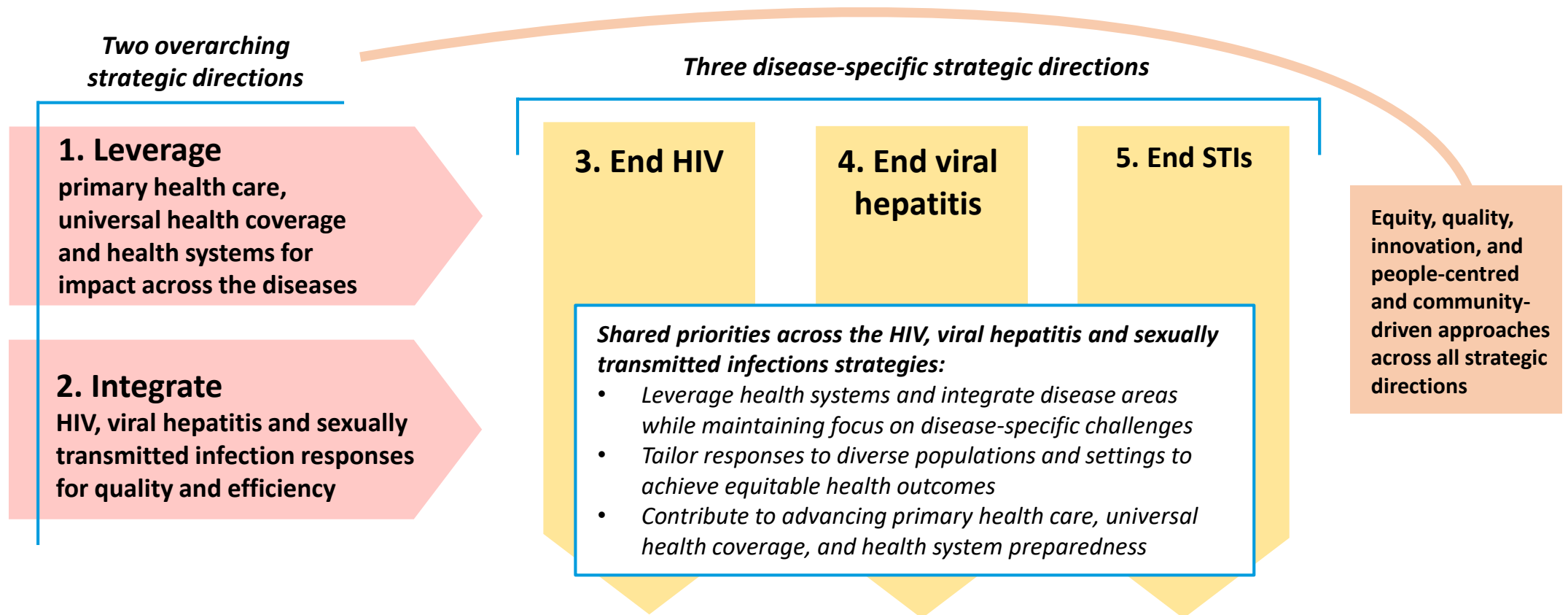
- Acknowledges the pressing challenges and opportunities, recognizes key **shifts are needed to end AIDS.**
- **Aligned to Decade of Action** & makes explicit contributions to advance goals and targets across 10 SDGs
- **Keeps people at the centre** to ensure they benefit from services, to remove social & structural barriers that prevent people from accessing HIV services
- Calls on governments, development & financing partners, communities & the UNAIDS to **identify and address these inequalities**
- **Political Declaration to be presented and discussed at the High-Level Meeting on HIV at the UNGA 8-10 June 2021**

New targets and resources needs are ambitious but need to look for synergies and efficiencies with integration towards PHC/UHC



Global Health Sector Strategies on HIV, Viral Hepatitis and Sexually Transmitted Infections, 2022–2030

Ending Epidemics and strengthening primary health care and health systems



- *Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages*
- *All other Sustainable Development Goals*

The Future – Shared Vision...



Shared: Ending epidemics and strengthening primary health care and health systems (draft, GHSS 2021-2030)

- HIV : Zero new HIV infections, zero HIV-related deaths and zero HIV-related discrimination in a world where people living with HIV are able to live long and healthy lives.*
- VH: A world where viral hepatitis transmission is stopped and everyone living with hepatitis has access to safe, affordable and effective care and treatment.*
- STIs: Zero STI-related complications and deaths, and zero discrimination in a world where everybody, however marginalized, has free and easy access to STI prevention and treatment services resulting in people able to live long and healthy lives.*

... and Goals

Shared: SDG 3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.

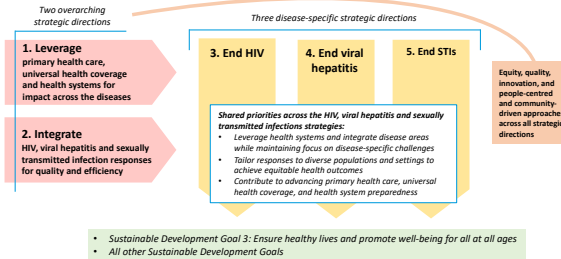
- HIV: End of the AIDS epidemic as a public health threat by 2030, within the context of ensuring healthy lives and promoting wellbeing for all at all ages .*
- VH: Eliminate viral hepatitis as a major public health threat by 2030 .*
- STIs: End the STI epidemics as a major public health concerns (defined by the reduction in N. gonorrhoea and T.pallidum; as well as by the elimination of congenital syphilis and of pre-cervical cancer lesions through the high coverage of HPV vaccines) .*

Accountability - 4 inter-related actions

1) Organisational framework: Visual description of the strategic directions and guiding principles

Global Health Sector Strategies on HIV, Viral Hepatitis and Sexually Transmitted Infections, 2022–2030

Ending Epidemics and strengthening primary health care and health systems

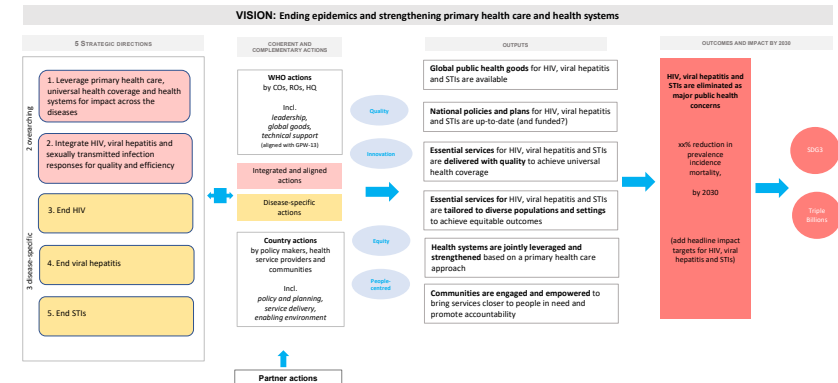


2) Vision, goals, targets, strategic directions and actions

- Clearly articulated and aligned statements of vision and goals
- Targets aligned with other global targets (e.g. UNAIDS)
- Overarching and disease-specific strategic directions
- Fewer actions, linked to the strategic directions and goals

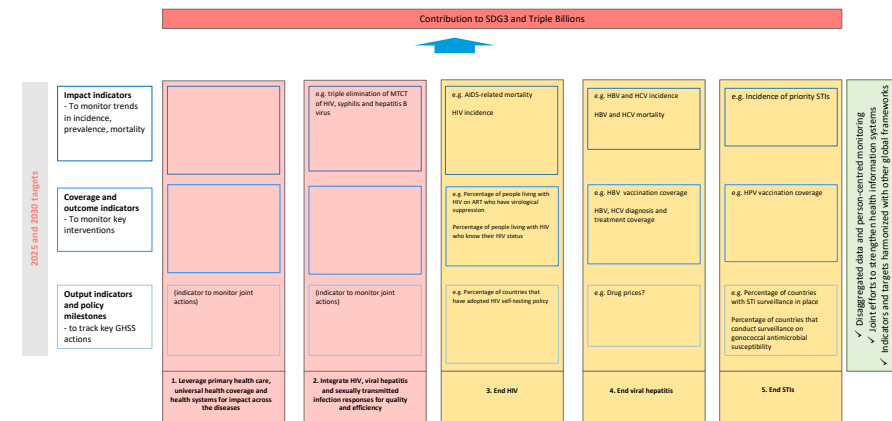
3) Theory of change (ToC): Visual description of the causal pathway through which actions lead to goals

Theory of change



4) M&E framework: Set of indicators, targets and milestones to monitor and report on the implementation of the strategy

M&E Framework – illustrative example



“

The accountability report would have looked very different a year ago, before COVID-19”, says Dr Meg Doherty, Director of WHO’s Department of Global HIV, Hepatitis and STI Programmes. “Our progress to date demonstrates that we have the interventions and approaches to make a great impact and build back stronger against COVID-19, HIV, viral hepatitis, and STIs. **The report is a call to action – we have 9 years to reach our SDG targets – we need all stakeholders to accelerate action across the three diseases to achieve our ambitious yet achievable goals by 2030.**



High-Level Meeting on AIDS

END INEQUALITIES. END AIDS.

8 - 10 June 2021

The **2021 high-level meeting** will be the springboard for a decade of action to reduce inequalities and root out the social determinants that fuel the HIV epidemic.

Furthermore, the high-level meeting comes at a historic moment for the AIDS response, 40 years after the emergence of the first cases of HIV and 25 years since the creation of UNAIDS.

Thematic Panels:

1: Addressing inequalities to End AIDS: 10 Years to 2030

2. Putting people and communities at the center of the response to AIDS

3. Resources and funding for an effective AIDS response

4. Advancing Gender Equality and empowering women and girls in the AIDS response

5. Addressing the impact of the COVID-19 pandemic on the AIDS response and building back better for pandemic preparedness



More information:
<https://www.un.org/pga/75/2021/05/07/high-level-meeting-on-hiv-aids-2/>

! HEP CAN'T WAIT!



LUCY CAN'T WAIT



Lucy may be living with hepatitis and not know it, and so could you. Your life could be cut short as a result.

Don't wait. Get tested.
Treatment could save your life.



World Hepatitis Day
28 July 2021



#WorldHepatitisDay
worldhepatitisday.org

World Hepatitis Alliance

STEPHEN CAN'T WAIT

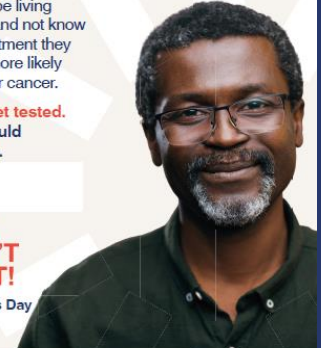


Stephen may be living with hepatitis and not know it. Without treatment they are 20 times more likely to die from liver cancer.

Don't wait. Get tested.
Treatment could save your life.



World Hepatitis Day
28 July 2021



#WorldHepatitisDay
worldhepatitisday.org

World Hepatitis Alliance

DAVID CAN'T WAIT

David has hepatitis C and doesn't know it. Now they are at risk of developing liver cancer.

Don't wait. Get tested.
Treatment could save your life.



World Hepatitis Day – 28 July 2021
#WorldHepatitisDay | worldhepatitisday.org



RODGERS CAN'T WAIT

Rodgers was born with hepatitis B but doesn't know it. Left untreated, it could shorten his life.

Don't wait. Get tested.
Treatment could save your life.



World Hepatitis Day – 28 July 2021
#WorldHepatitisDay | worldhepatitisday.org



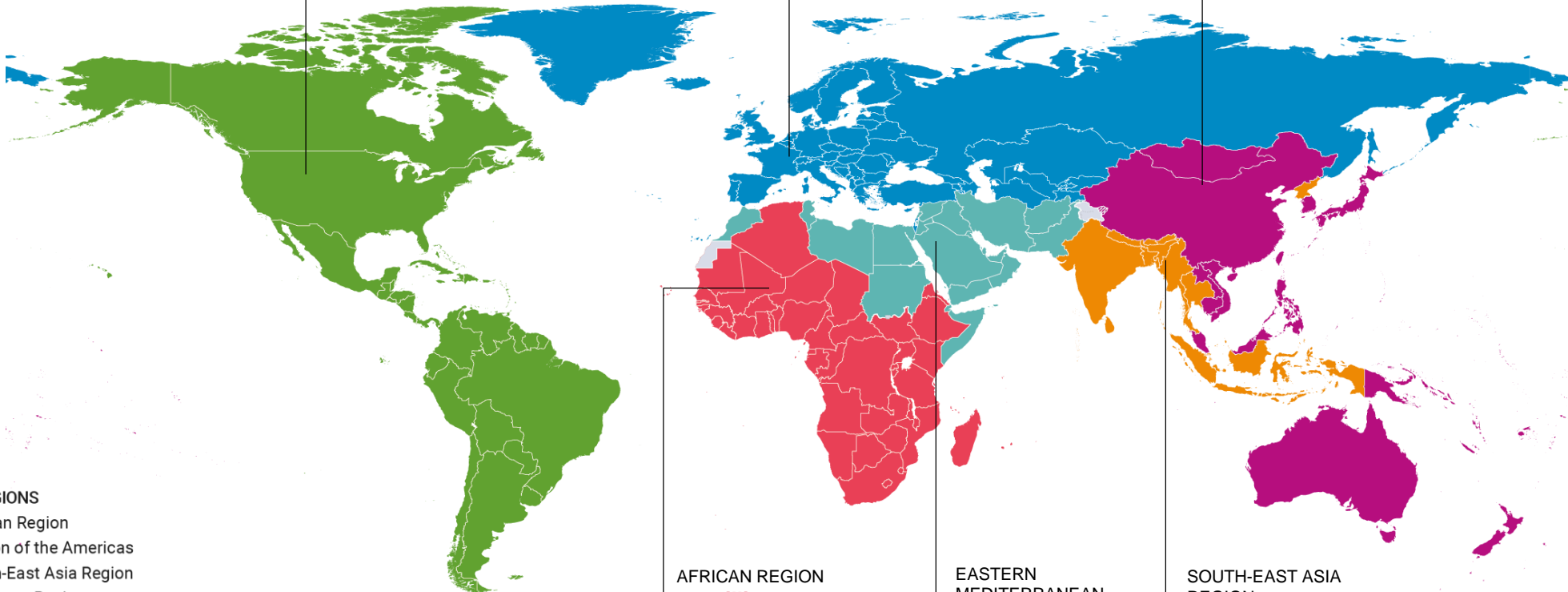
Prevalence of four curable sexually transmitted infections* among adults (15–49 years old), by WHO region, 2020

GLOBAL
284 million
[248 million–329 million]

REGION OF THE AMERICAS
56 million
[44 million–71 million]

EUROPEAN REGION
17 million
[13 million–22 million]

WESTERN PACIFIC REGION
62 million
[51 million–76 million]



WHO REGIONS

- African Region
- Region of the Americas
- South-East Asia Region
- European Region
- Eastern Mediterranean Region
- Western Pacific Region
- Not applicable

AFRICAN REGION
78 million
[65 million–94 million]

EASTERN MEDITERRANEAN REGION
29 million
[20 million–43 million]

SOUTH-EAST ASIA REGION
42 million
[26 million–70 million]

* Gonorrhoea, Chlamydia, Syphilis, Trichomoniasis