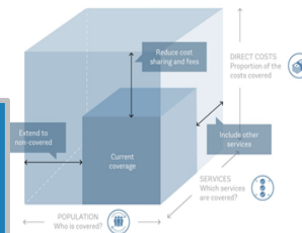


## Common structure



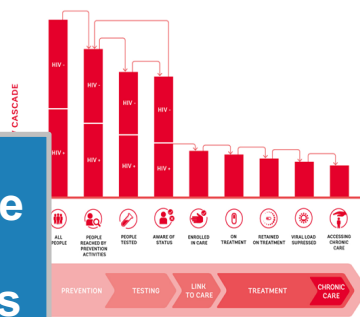
## Universal Health Coverage



## SDGs



## Cascade of services



## Vision, Goals and Targets

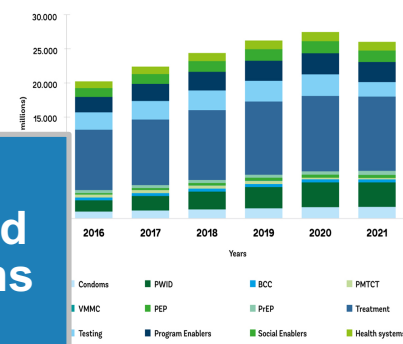


STI surveillance systems in place at least 95% of pregnant women screened for syphilis and 95% tested for HIV and 95% of hard-to-reach women receiving effective treatment  
 (a) STI services or links to such services in all primary, HIV, reproductive health, family and post-natal care services  
 or HIV vaccines through the national immunization programme  
 or an antiretroviral resistance in N. gonorrhoea



70%  
 of key populations have access to a full range of STI & HIV services, including condoms

## Costed Actions



# WHO Global Health Sector Strategy on HIV 2016-2021 one year on – the challenges ahead

Andy Seale WHO HIV Department, 1 June 2017

HIV Outcomes: Beyond viral suppression. New political priorities for HIV: Long-term health, comorbidities and health system sustainability

# Presentation overview

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- Setting the scene
- The global health sector strategy and regional action plan on HIV 2016-2021 – adopted in 2016
- Strategy innovations related to chronic care
- Monitoring progress: TB/HIV and other comorbidities
- Future challenges

# HIV, chronic care and ageing

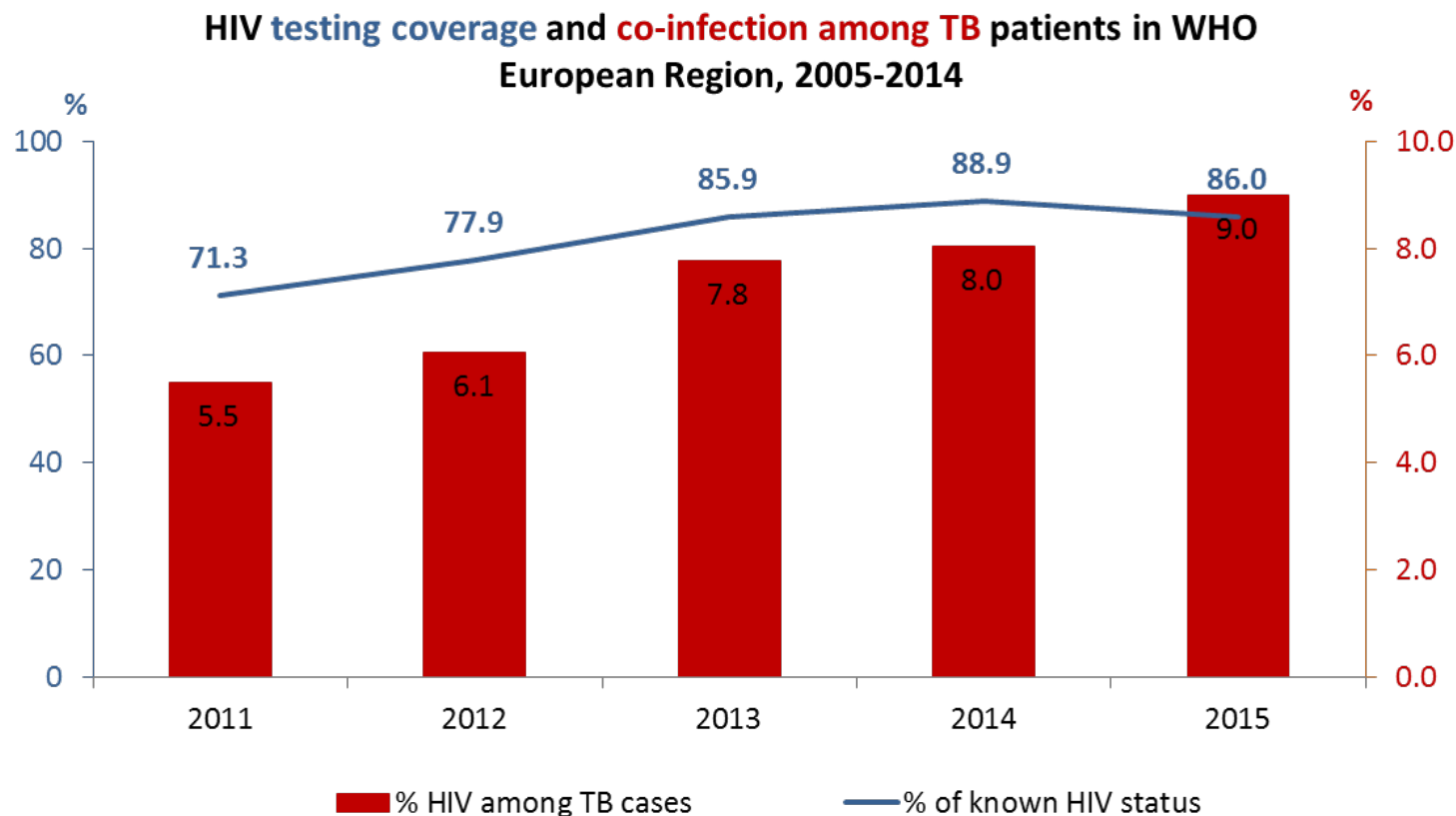
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Professor Peter Reiss summarized existing evidence at the December 2016 PCB Thematic session and concluded by summarizing lessons learned so far:

- Comorbidity burden consistently increased in HIV as people age – co-infections and NCDs – TB is still leading cause of death in eastern part of region
- Traditional lifestyle-related -factors are key drivers
- There is additional risk from ART for some but not all co-morbidities
- Longer time spent at low CD4 counts, rather than longer overall exposure to ART, generally contributes to greater risk
- Persistent inflammation and innate immune activation contributes towards risk for some but not all co-morbidities
- Promotion of healthy lifestyle and management of traditional risk are key
- Early HIV diagnosis and treatment initiation reduces risk

# HIV co-infection among TB patients continues to rise in Europe, 2015

Between 2011 and 2015 percentage of HIV/TB co-infection almost **doubled**, from **5.5%** to **9.0%**



Source: European Centre for Disease Prevention and Control/WHO Regional Office for Europe. Tuberculosis surveillance and monitoring in Europe 2017.

# An accelerated HIV response at global, regional and country levels

Global HIV and Hepatitis Strategies, 2016-21



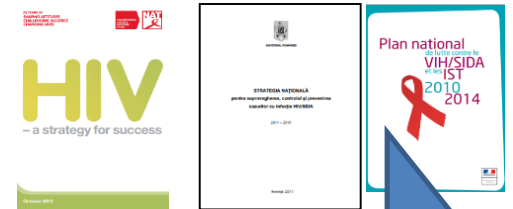
World Health Assembly (WHA69) – Global strategies adopted (May 2016)

European Action Plans, HIV and HEP



Regional Committee (RC66) – Regional Action Plans adopted (Sep 2016)

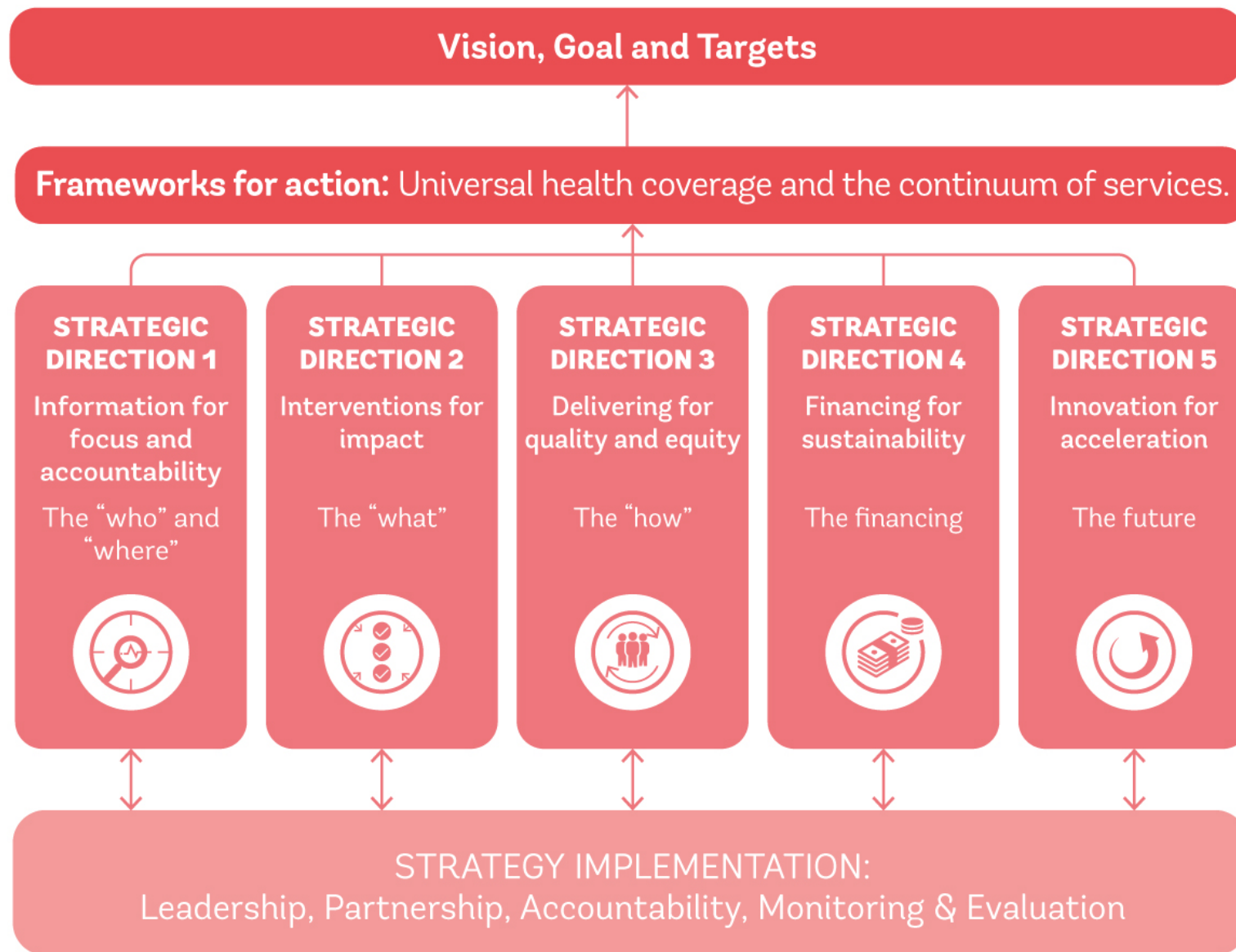
National HIV Strategies and Plans

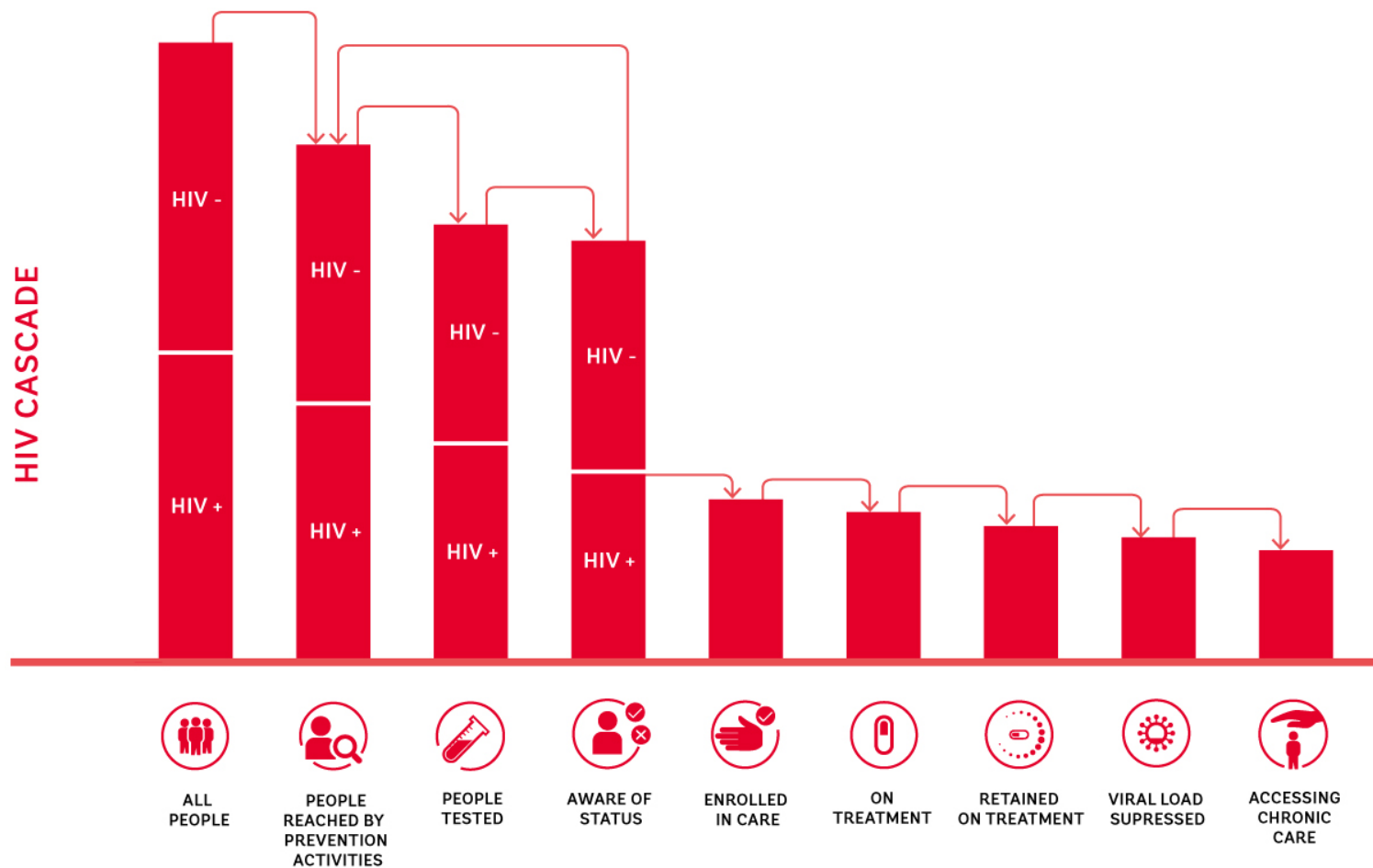


Global strategy  
Strategies

Regional Action Plans

National





**CONTINUUM OF SERVICES**



# 2020 strategic targets

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- Reduce tuberculosis deaths among people living with HIV by 75%
- Reduce hepatitis B and C deaths among people co-infected with HIV by 10%, in line with mortality targets for all people with chronic hepatitis B and C infection
- Provision of access by 90% of countries to integrated health services covering HIV, tuberculosis, hepatitis B and C, reproductive health and sexually transmitted infections\*

\* Not in the regional action plan



# Examples of programmatic indicators

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Progress monitoring supported by a number of programmatic indicators included in the *Consolidated Strategic Information Guidelines for HIV in the health sector* - for example:

- % of PLHIV in HIV care who were screened for TB in HIV care settings
- % of PLHIV and newly enrolled in HIV care who have active TB disease
- % of PLHIV and newly enrolled in HIV care who have started on TB preventive therapy
- % of PLHIV who complete the course of TB preventive therapy
- % of PLHIV in HIV care who were screened for hepatitis B
- % of PLHIV in HIV care who were screened for hepatitis C

# Accountability Framework for Strategy Implementation

| Strategy Area  | Accountability  |
|--|---|
| <b>A. Goals and Targets</b><br><br>-Incidence, Mortality<br>-90, 90, 90<br><br>-Discrimination<br>-TB, Hep B and C     | <ol style="list-style-type: none"> <li><b>SDG reporting process:</b> HIV responsible progress on HIV incidence, mortality and HIV treatment as part of universal access (2020 targets)</li> <li><b>Global AIDS Monitoring (GAM):</b> progress to 90, 90, 90 by 2020 (WHO responsible for validation of 90, 90, 90 targets)</li> <li><b>Global AIDS Monitoring (GAM):</b> additional indicators with UNAIDS, hepatitis and TB (TB, Hep B and C deaths among co-infected, discrimination PLHIV and health sector, financing and integration see below)</li> <li><b>Global Reports:</b> Baseline, mid-term (2018) and end of strategy (2020) with                         <ul style="list-style-type: none"> <li><b>Formal, process evaluation and review</b> to input and form next strategy</li> </ul> </li> </ol>   |
| <b>B. Strategic Directions 1-5</b><br><br>-Implement strategy directions<br><br>-Financing, integration and innovation | <ol style="list-style-type: none"> <li><b>The “What”, “How” and “Where”</b> – progress to 90, 90, 90                         <ul style="list-style-type: none"> <li><b>Implementation of key guidelines and policy adaptation</b> – country intelligence annual and biannual accountability</li> <li><b>Closing Cascade gaps in fast-track countries</b> – annual review of national and sub-national cascade gaps with cascade data and analysis</li> </ul> </li> <li><b>“Financing”, “Integration”, “Innovation”</b> – finance and domestic investments reach 26 US\$ billion, 90% countries integrated HIV, TB, Hep, STI services                         <ul style="list-style-type: none"> <li><b>Review of country strategies</b> for integration, financing, inclusion innovations, and of key populations (2018). Country Intelligence to track one key innovation per area of guidelines e.g. self testing, new drugs, unique identifiers</li> </ul> </li> </ol> |
| <b>C. WHO Actions –</b><br>country actions and impact  | <ol style="list-style-type: none"> <li><b>Country Intelligence</b> – annual review of WHO actions by strategy action by country. Epi and Impact reviews with each region for 2018 report on implementation</li> </ol>   |

# Future challenges

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- The dynamic nature of the epidemic and response
- Constrained resources and competing health and development priorities
- Working towards greater intersections between health and social care – including on how health systems finance this in the context of ageing populations
- HIV drug resistance
- Monitoring and evaluating progress at each stage of the expanded continuum of services

WHO plans to disseminate new guidelines for patient monitoring and case-based surveillance this year to support country efforts to improve treatment adherence and viral suppression among people on ART and to strengthen chronic care

# Thank you

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## References

Prof Peter Reiss presentation to PCB Thematic

[http://www.unaids.org/sites/default/files/media\\_asset/20161208\\_UNAIDS\\_PCB39\\_Thematic\\_Dr\\_Reiss\\_PPT.pdf](http://www.unaids.org/sites/default/files/media_asset/20161208_UNAIDS_PCB39_Thematic_Dr_Reiss_PPT.pdf)

WHO global health sector strategy on HIV 2016-2021 <http://www.who.int/hiv/strategy2016-2021/ghss-hiv/en/>

WHO Prevent HIV, test and treat all - WHO support for country impact. Progress Report 2016.

<http://www.who.int/hiv/pub/progressreports/2016-progress-report/en/>

WHO Action plan for the health sector response to HIV in the WHO European Region

[http://www.euro.who.int/data/assets/pdf\\_file/0006/318318/European-action-plan-HS-HIV.pdf?ua=1](http://www.euro.who.int/data/assets/pdf_file/0006/318318/European-action-plan-HS-HIV.pdf?ua=1)

WHO Guidelines <http://www.who.int/hiv/en/>