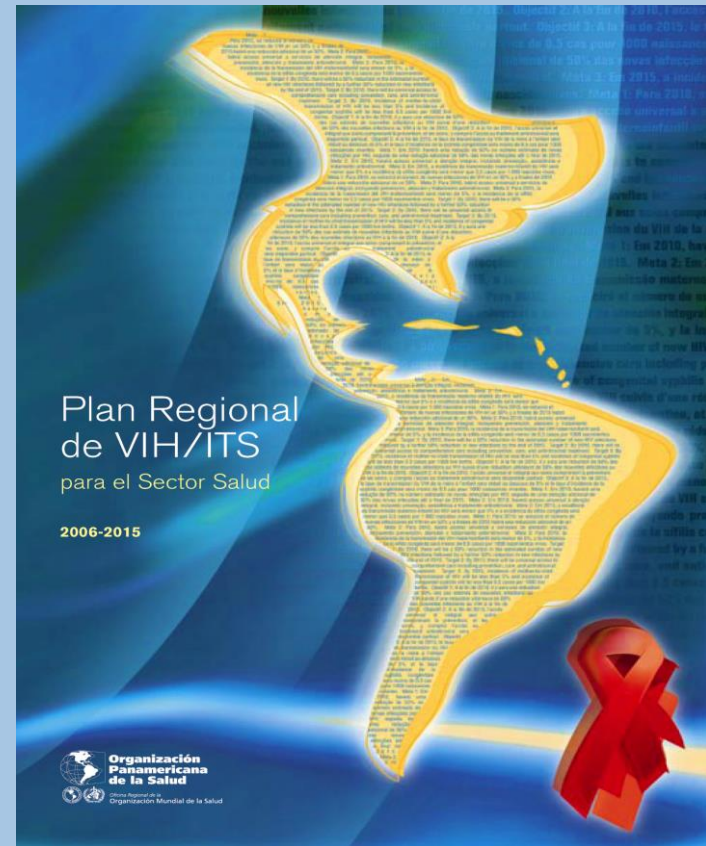


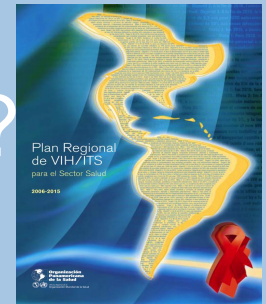
# Regional HIV/STI Plan for the Health Sector 2006- 2015



**Pan American  
Health  
Organization**

*Regional Office of the  
World Health Organization*

# What is the objective of the Plan?



## OBJETIVE

- By 2015, to halt and begin to reverse the spread of HIV/AIDS as well as STI in the Region by providing *universal access to prevention, care, and treatment*

## OVERALL TARGETS

- By 2010, there will be a 50% reduction in the estimated number of new HIV infections followed by a further 50% reduction in new infections by the end of 2015
- By 2010, there will be universal access to comprehensive care including prevention, care and antiretroviral treatment.
- By 2015, incidence of mother-to-child transmission on HIV will be less than 5% and incidence of congenital syphilis will be less than 0.5 cases per 1000 live births

## OTHER TARGETS AND MILESTONES

- 74 targets and milestones will assist countries in monitoring the Plan



Thursday Sep 25 2003. All times are London time.

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## **Latin Americans lead price-cut drive AIDS DRUGS**

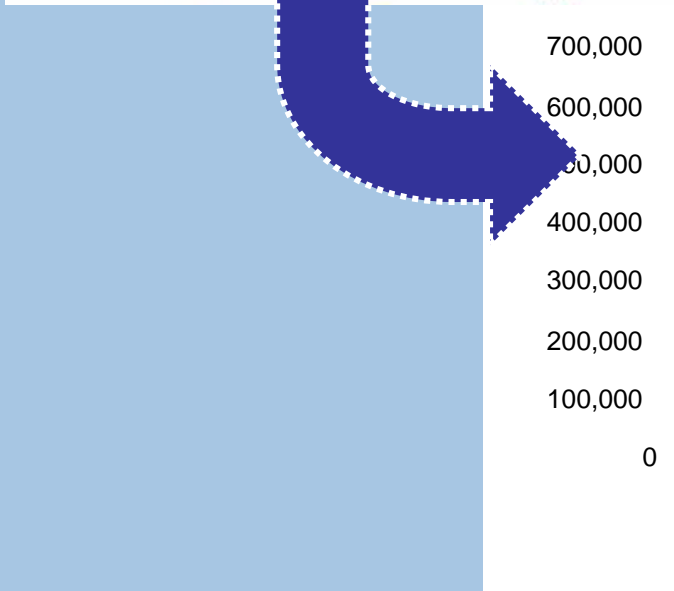
"Countries in Latin America have been taking an increasingly aggressive stance towards the pharmaceuticals industry over patented Aids treatments, which could set a pattern for other developing nations".

"The prices they have achieved are in some cases lower than in sub-Saharan Africa," says James Fitzgerald, a drug procurement specialist at the Pan American Health Organization in Washington".

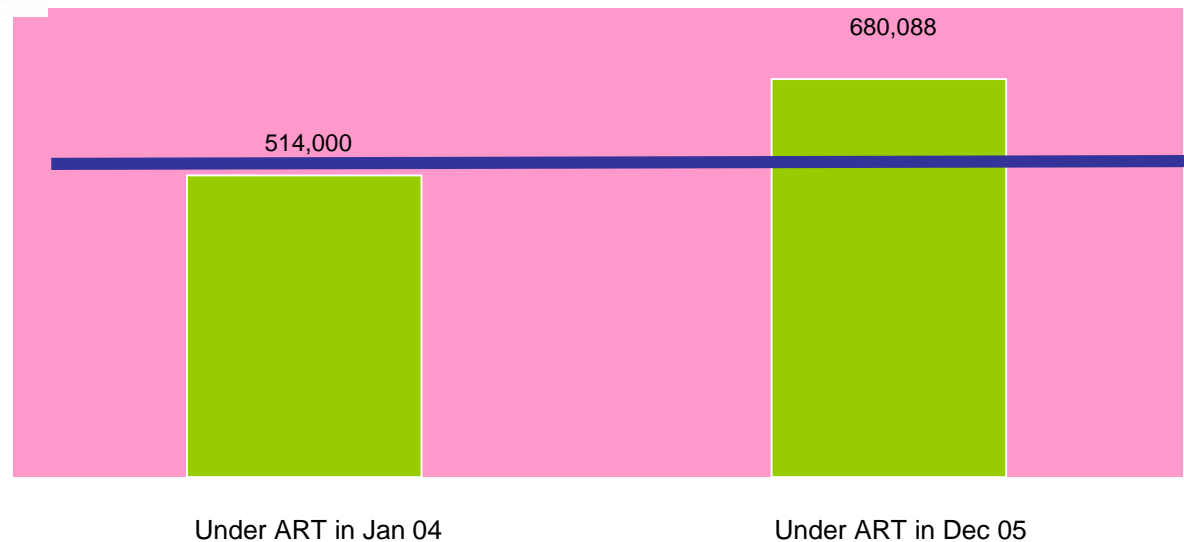
## Are the targets achievable?

Negotiations between Latin American governments and pharmaceutical companies resulted in substantial reductions in ARV prices

- Bahamas, 2002
- Panama City, 2003
- Lima, 2003
- Buenos Aires, 2005



## Estimated Number of People Under ART in the Americas 2004 and 2005

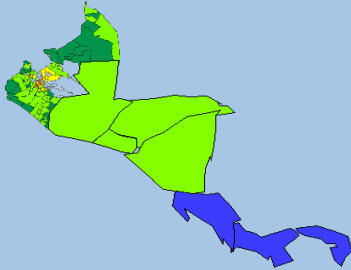


# Countries treating over 50% of patients in need



# Examples of successful stories

## Central America



## Caribbean sub-region



### Belize, Honduras & Nicaragua

Gender violence clinics as entry point for HIV/STI services

### El Salvador

Comprehensive program including prevention & retraining of community health workers

### Guatemala

Surveillance bulletin on HIV/AIDS created

### Trinidad & Tobago

Partnership between PLWH & health providers



# 3 by 5 outcome: Fighting stigma and discrimination

Brazil



Argentina

Unprecedented, **high-profile, mass media campaigns** against homophobia were launched several countries.

These campaigns, conducted by national authorities, **generated a public debate** that is helping to change the landscape for HIV prevention in the Region.



Mexico

Colombia



# Universal treatment – still a challenge

Geographical region	Estimated number of people receiving antiretroviral therapy, December 2005 [low estimate–high estimate] <sup>b</sup>	Estimated number of people 0–49 years old needing antiretroviral therapy, 2005 <sup>a</sup>	Antiretroviral therapy coverage, December 2005 <sup>c</sup>	Estimated number of people receiving antiretroviral therapy, December 2004 [low estimate–high estimate] <sup>b</sup>	Estimated number of people receiving antiretroviral therapy, December 2003 [low estimate–high estimate] <sup>b</sup>
Sub-Saharan Africa	810 000 [730 000–890 000]	4 700 000	17%	310 000 [270 000–350 000]	100 000 [75 000–125 000]
Latin America and the Caribbean	315 000 [295 000–335 000]	465 000	68%	275 000 [260 000–290 000]	210 000 [160 000–260 000]
East, South and South-East Asia	180 000 [150 000–210 000]	1 100 000	16%	100 000 [85 000–115 000]	70 000 [52 000–88 000]
Europe and Central Asia	21 000 [20 000–22 000]	160 000	13%	15 000 [13 000–17 000]	15 000 [11 000–19 000]
North Africa and the Middle East	4 000 [3 000–5 000]	75 000	5%	4 000 [2 000–6 000]	1 000 [750–1 250]
<b>Total</b>	<b>1 330 000</b> <b>[1 200 000–1 460 000]</b>	<b>6 500 000</b>	<b>20%</b>	<b>700 000</b> <b>[630 000–770 000]</b>	<b>400 000</b> <b>[300 000–500 000]</b>

**Note:** some numbers do not add up due to rounding.

<sup>a</sup> See Annex 2 for an explanation of the methods used.

<sup>b</sup> Data on children are included.

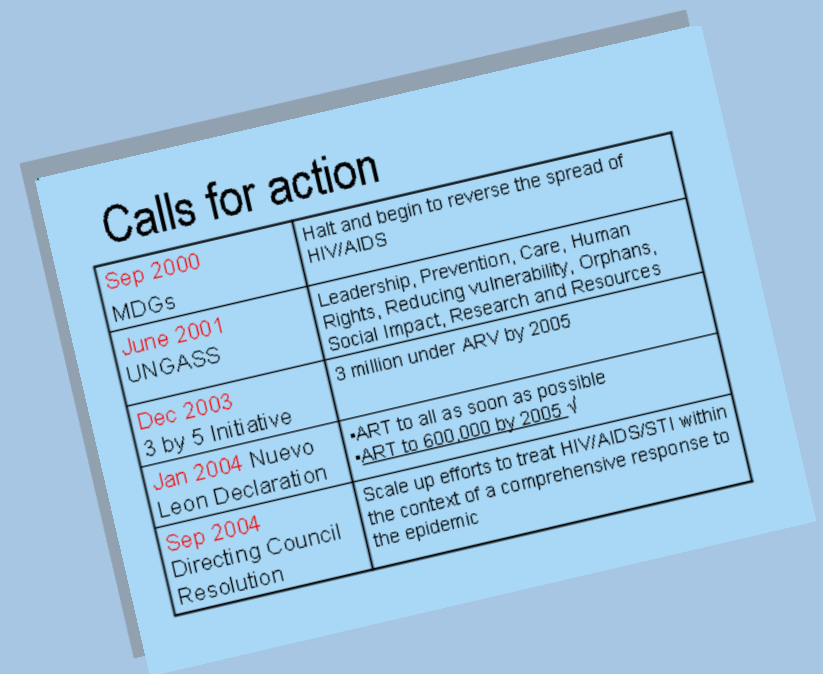
<sup>c</sup> The coverage estimate is based on the estimated number of people receiving antiretroviral therapy and need for antiretroviral therapy.



# Why a Regional HIV/STI Plan?

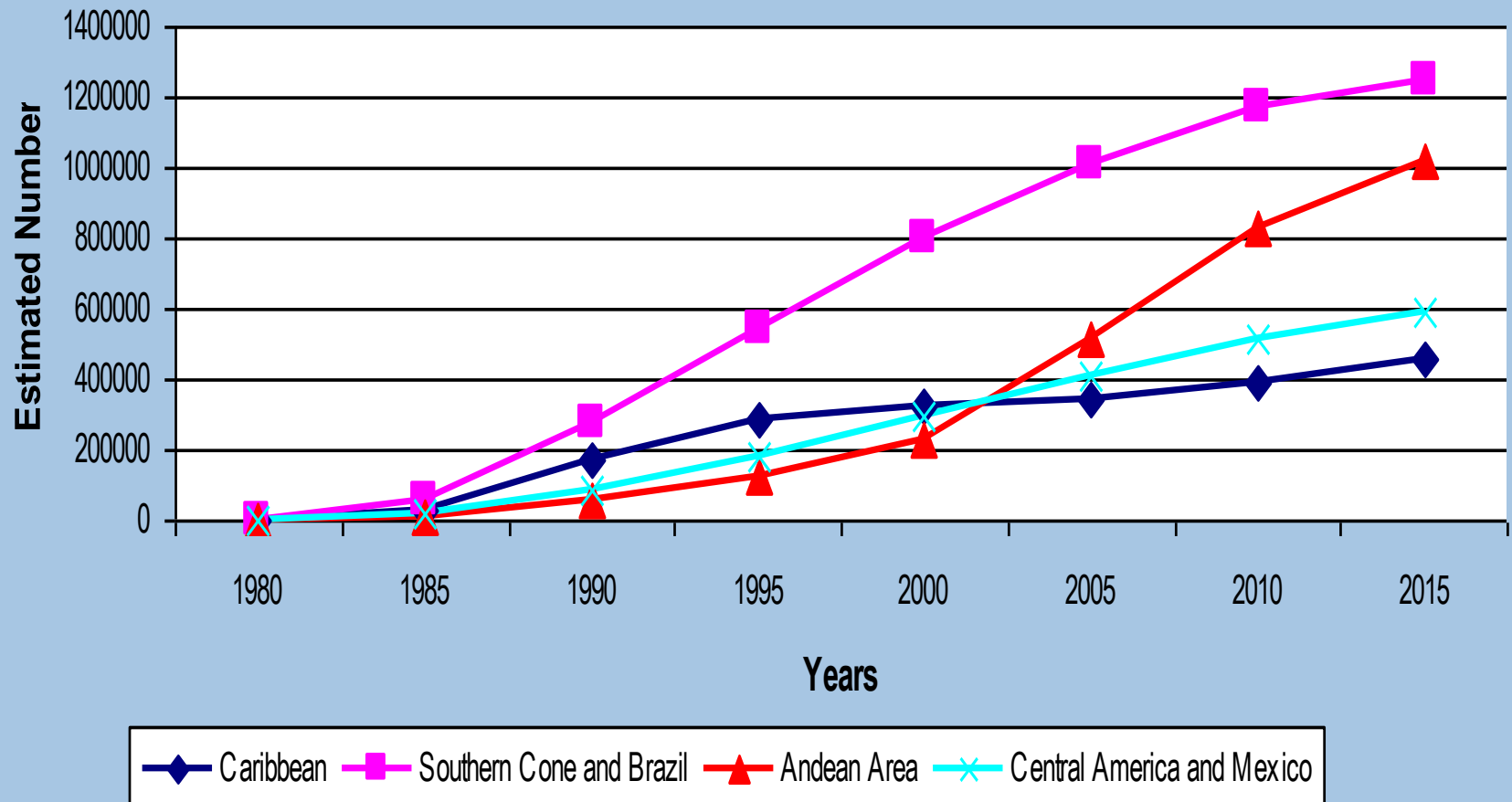
As the year 2015 approaches, we still have a long way to go to show impact on the Millennium Development Goals (MDGs) indicators:

- Prevalence of HIV infection in pregnant women 15-24
- Condom use rate
- Number of orphans due to HIV/AIDS



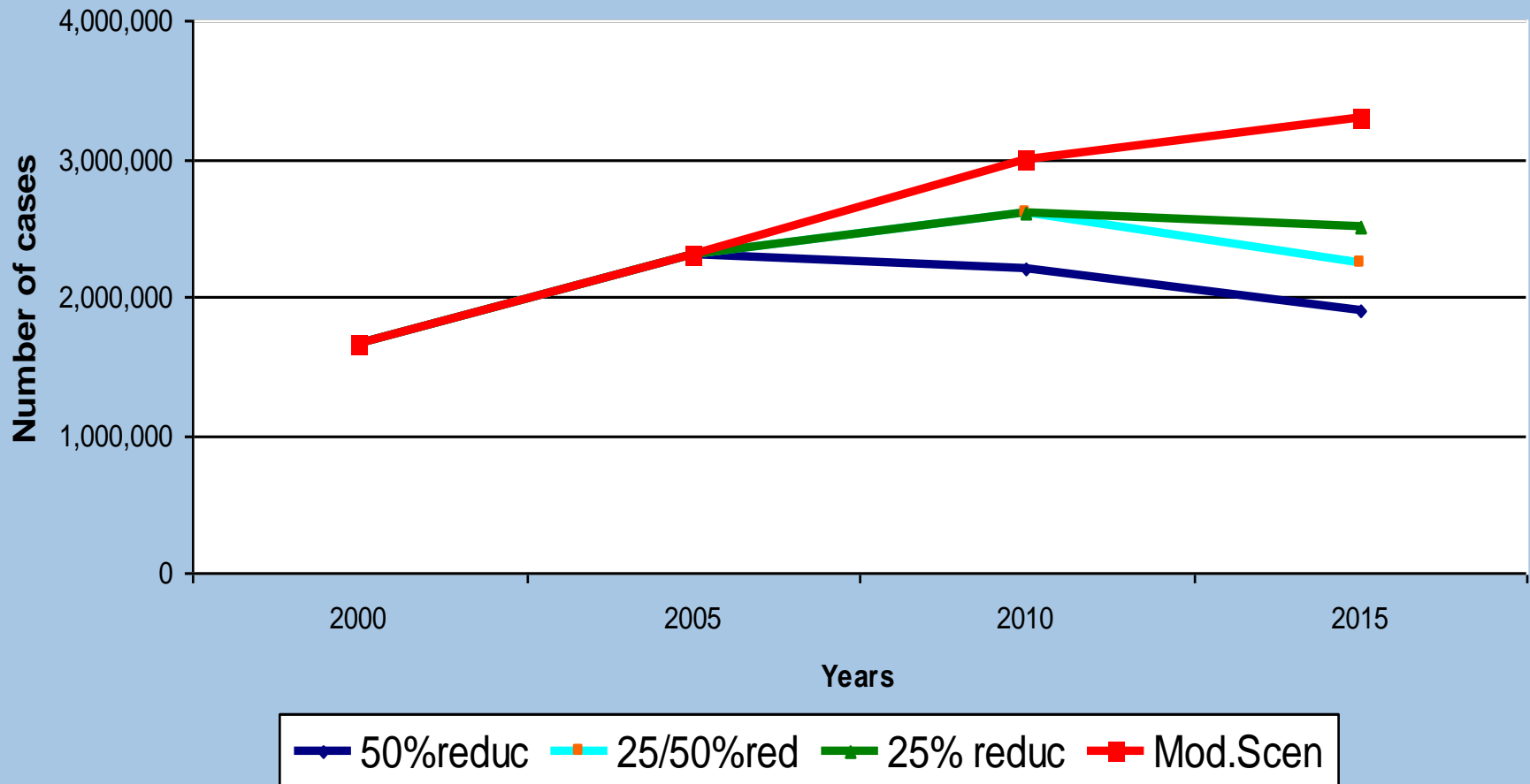
Sep 2000 MDGs	Halt and begin to reverse the spread of HIV/AIDS
June 2001 UNGASS	Leadership, Prevention, Care, Human Rights, Reducing vulnerability, Orphans, Social Impact, Research and Resources
Dec 2003 3 by 5 Initiative	3 million under ARV by 2005
Jan 2004 Nuevo Leon Declaration	• ART to all as soon as possible • ART to 600,000 by 2005 ✓
Sep 2004 Directing Council Resolution	Scale up efforts to treat HIV/AIDS/STI within the context of a comprehensive response to the epidemic

# Estimated N° of People with HIV (Adults & Children) in LAC, 1980-2015 (Middle Scenario)



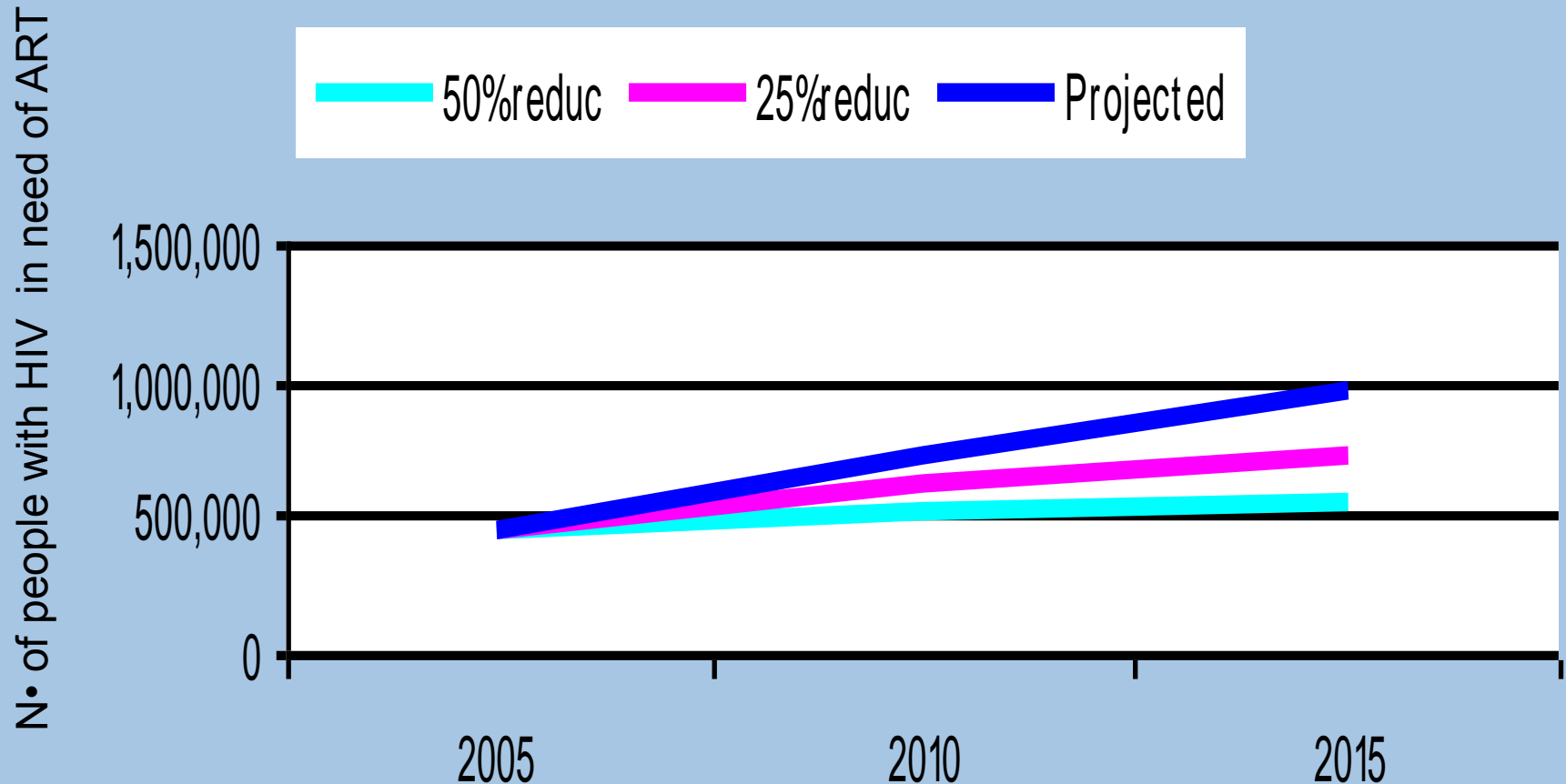
**Source: WHO/UNAIDS**

# Impact of the Reduction in New HIV Infections on the No of people with HIV: 2005-2015



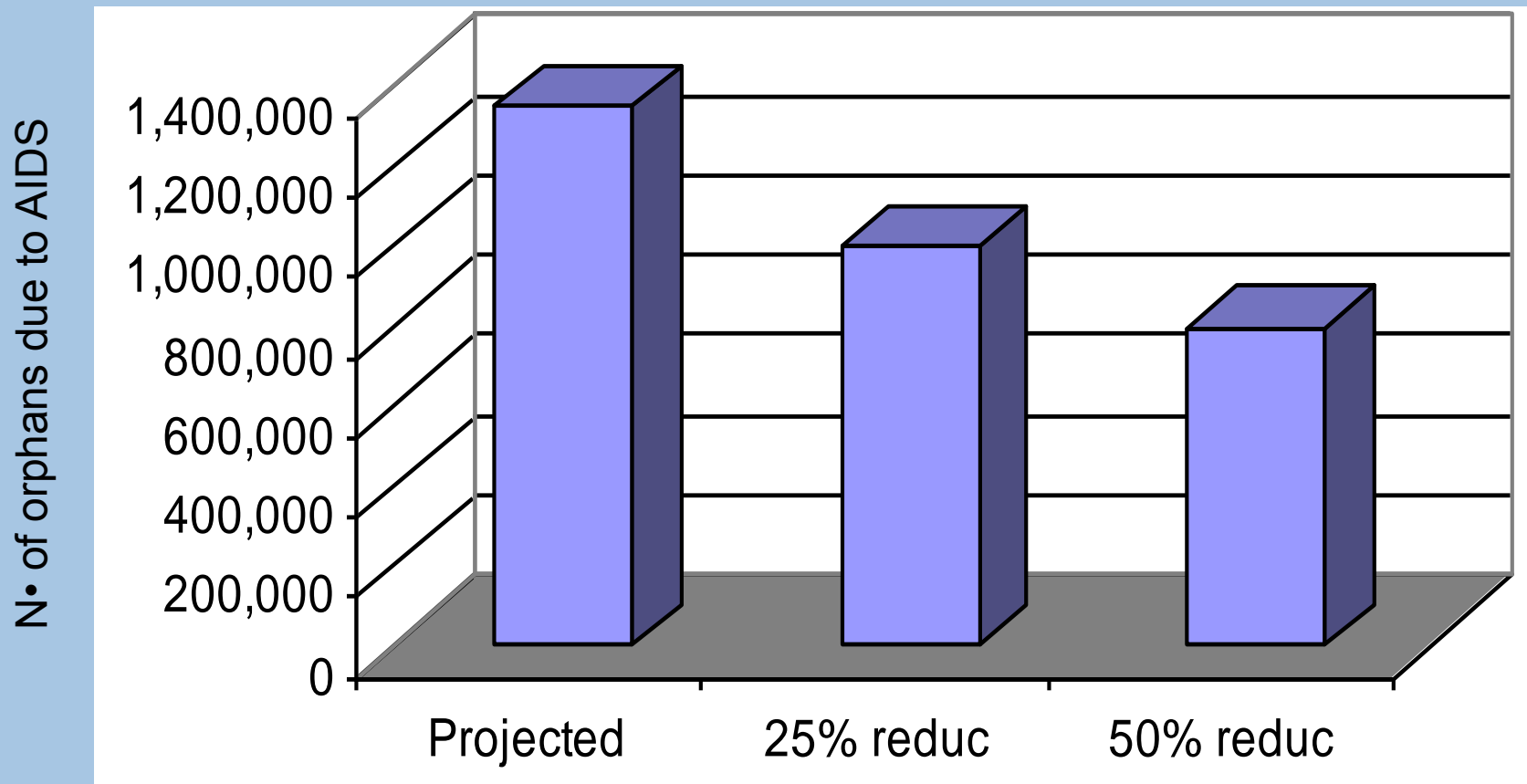
Source: PAHO/WHO

# Impact of the Reduction in New HIV Infections on ART Needs: 2005-2015



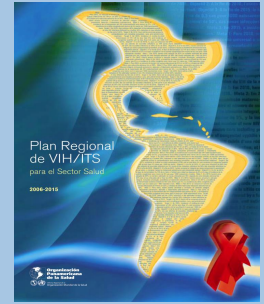
Source: PAHO/WHO

# Impact of the Reduction in New HIV Infections on the No of AIDS orphans: 2005-2015



**Source: PAHO/WHO**

# Lines of Action



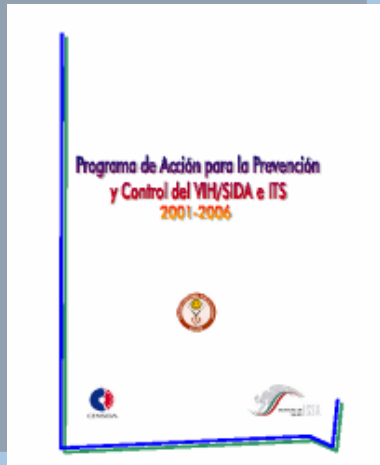
- Leadership in the health sector and the participation of civil society
- Design and implementation of effective and sustainable HIV/AIDS/STI programs
- Expansion of health services
- Strengthening of laboratory and supply systems, including access to medicines
- Improvement in information systems, monitoring, and evaluation

Each line of action represents challenges and opportunities for the health sector and other involved parties



# Country level planning:

Evaluate the Regional Plan in regards to their specific contexts



Examine existing plans and determine possible links, where appropriated

Make use of the Plan in order to guide and facilitate the policy formulation and national health sector planning processes

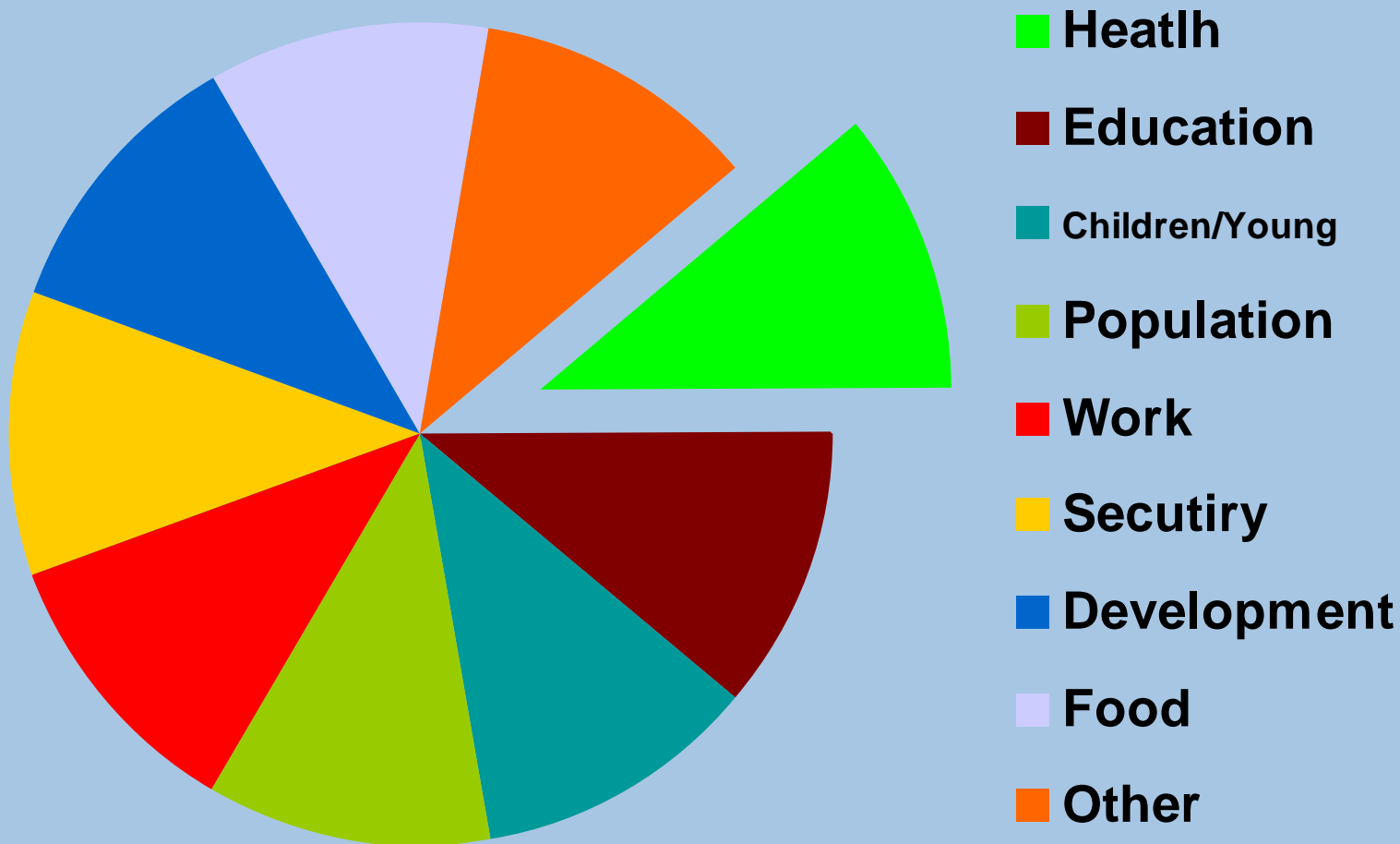
Active participation –including people with HIV and NGOs, relevant UN agencies, private organizations, and major stakeholders- in the roll out of the Plan, including its implementation, monitoring and evaluation

# Examples of new partnerships with key partners

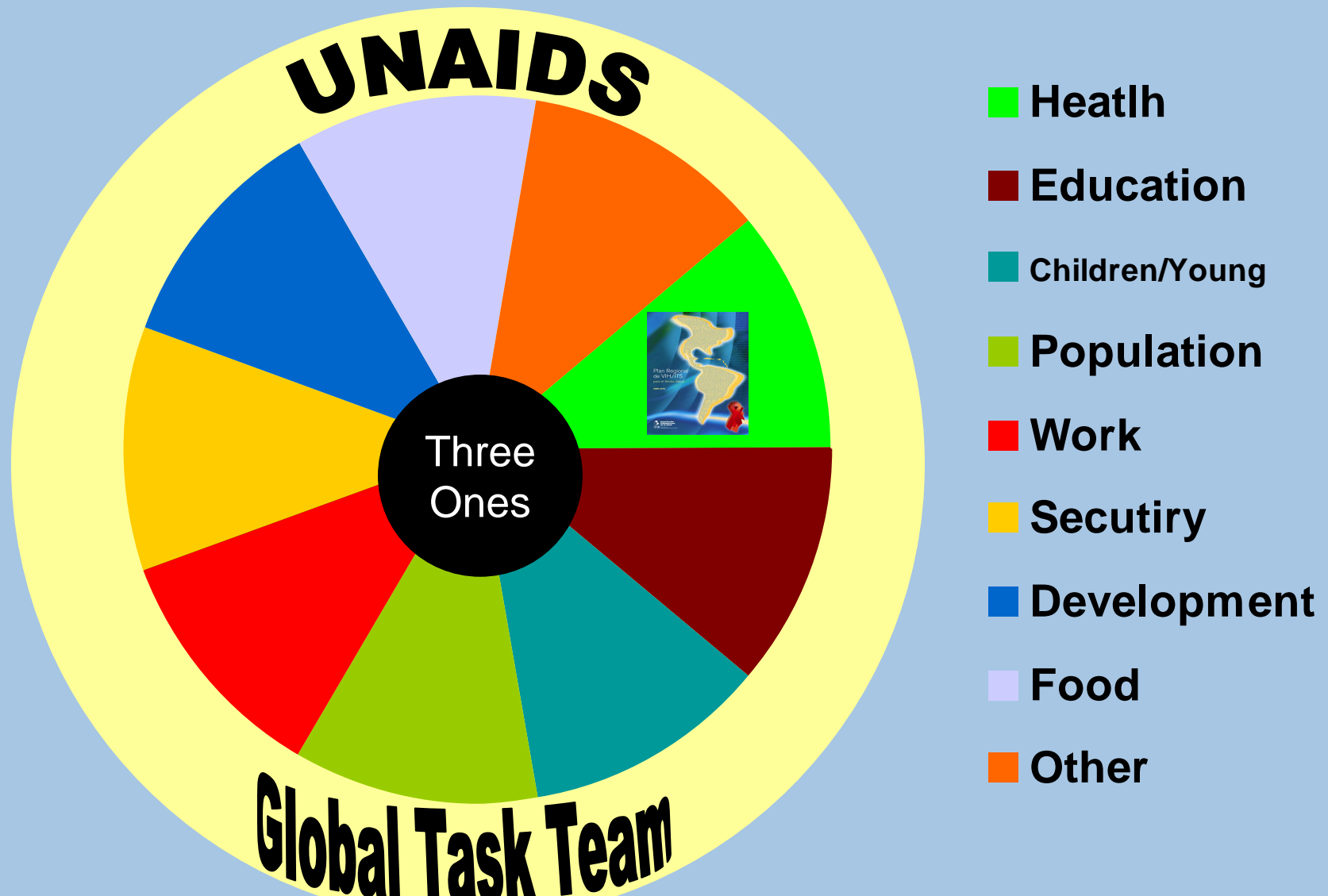


- OAS-PAHO – training in human rights & HIV in Jamaica& Suriname
- Regional Directors Group of UNAIDS Co-sponsors
- UNICEF-PAHO PMTCT initiative for Central America
- Greater integration of CAREC/CARICOM/PAHO activities in HIV
- HIV Central American cooperation in regional surveillance plan
- 2 projects with HIV+ networks & civil society
- Know your status edutainment with CARICOM, CIDA

# The contribution of the Plan with a wider response to HIV



# The contribution of the Plan with a wider response to HIV



# Opportunities for collaboration

## Education sector

- Schools as entry point for HIV education on prevention
- Collaboration in definition of youth-friendly health services
- Involving teachers in fight against stigma & discrimination
- Support to HIV+ teachers

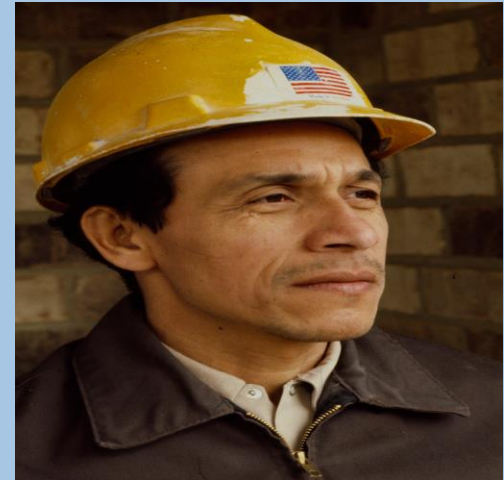


# Opportunities for collaboration

## Labor sector

### Promote workplace policies:

- To eliminate discrimination
- To include measures to ensure implementation
- To protect the rights and health of workers
- To reduce risks (e.g. condom provision)
- To improve treatment coverage, adequacy & comprehensiveness of services (e.g. PEP)
- To assure gender-sensitivity of programs





# Opportunities for collaboration

## Labor sector

- Workplace as entry point for HIV education on prevention, including on voluntary counseling & testing (communications campaigns)
- Incorporate HIV in ongoing training programs
- Tripartite engagement in national AIDS activities, including arrangements to sustain long-term provision of therapy
- Key location for actions to reduce stigma & discrimination
- Participation in national AIDS bodies and CCMs
- Follow up to the ILO/UNAIDS Consultation (*Recent May 2006, Brasilia Meeting*)

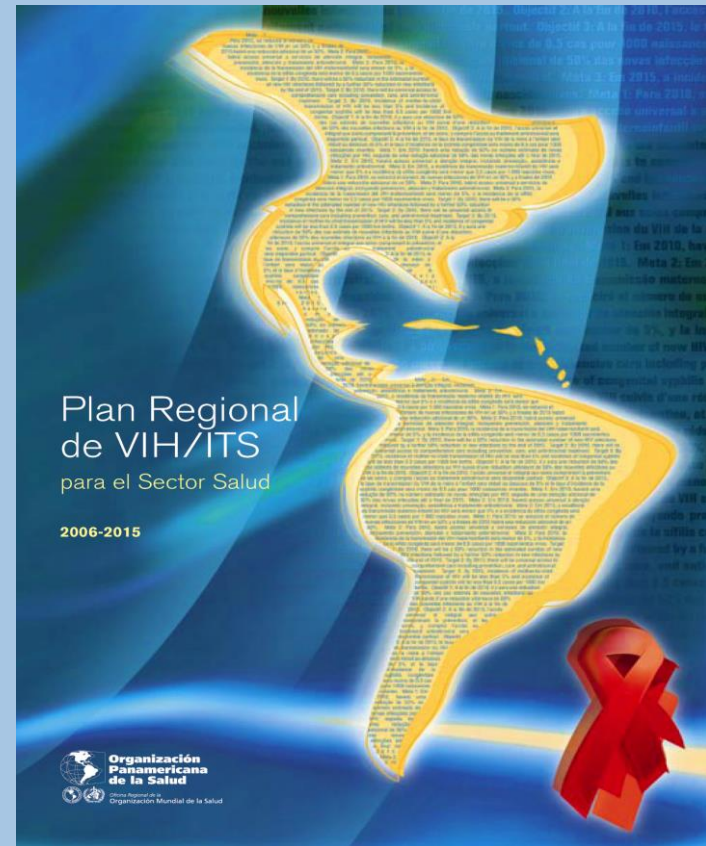
# Opportunities for collaboration Social Security sector

- Integrate workers' health into social security plans
- Entry point for promotion of human rights of people affected by HIV
- Work with other sectors to assure provision of antiretrovirals





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