The road towards universal access

Scaling up access to HIV prevention, treatment, care and support

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Governments, donors, private sector and civil society discuss how to scale up the AIDS response.

The second meeting of the Global Steering Committee on scaling up towards universal access was held in Geneva on 21-22 February 2006. UNAIDS Executive Director, Dr Peter Piot, opened the meeting and put the process into its overall context: "The mobilization towards universal access marks a new phase in the AIDS response, one that will set the course for the next few years." Referring to his recent joint mission to Rwanda and Tanzania, Dr Piot stressed: "Scaling up towards universal access must be made real for people on the ground, for people in communities everywhere. We must acknowledge the reality that economic and cultural barriers, gender, discrimination and stigma undermine access. People who cannot afford a bus ticket may not be able to travel to get an HIV test or to utilize the prevention, treatment, care and support services that are available, much less pay user fees for these services."

Dr Peter Piot, UNAIDS Executive Director, opened the 2nd meeting of the Global Steering Committee on scaling up towards universal access.

In order to accelerate and expand the delivery of AIDS services and to reach vastly greater number of people on the ground, the Global Steering Committee emphasized the importance of establishing mechanisms to monitor the accountability of all actors, the international community along with country partners.

The Global Steering Committee (GSC), which first met in Washington on 9-10 January (see bulletin dated 23 January 2006), has been working to identify actionable recommendations for the international community to help countries overcome the major obstacles to scaling up AIDS services.

The meeting consisted of half a day's meeting in the five original working groups:

- Human rights, stigma, discrimination and gender equity
- Affordable commodities and low-cost technologies
- Human resources and health and social systems
- Sustainable financing; and
- Targets and milestones.

Another half day was dedicated to reporting back in plenary. The groups benefited from the input of the national and regional consultations held so far. They were asked to identify 10 concrete proposals to move forward the global agenda on scaling up towards universal access. The GSC is providing important advice to UNAIDS in preparing an "assessment" of the broadly inclusive country, regional and global consultations on scaling up towards universal access. The assessment will be presented to

the United Nations General Assembly at its May 2006 review of the United Nations Declaration of Commitment on HIV/AIDS made in 2001.

The results that came out of the working groups clearly showed how cross-cutting all five issues are. A strong concern for human rights ran through all issues and was repeated by all groups. Sustainable finance was also seen as a key element for success by all groups. A number of concrete actions proposed by the various groups to scale up services through better mechanisms, whether financing, human resources, or commodities, will be undermined if stigma, discrimination and disempowerment of women and young people continue to deter them from utilizing services.

Sustainable financing

Credible plans should not become shorthand for "less ambitious".

The group working on finance considered a series of actions linked to the importance of credible funding to sustain national AIDS plans, in line with the Global Task Team and Three Ones commitments, including costing and budgets, and the direct support to non-governmental actors. Donors should commit to increase financing for AIDS in predictable and long-term ways, limiting conditionality to those that are nationally driven or derived, along with fiduciary requirements. Finally the group discussed a series of linked actions to increase the effectiveness and efficiency of resource use, including transparent financial processes, direct support to civil society and not allowing macro-economic considerations to block additional resources to the AIDS response. Masood Ahmed, GSC Co-Chair, pointed out that "credibility and sustainability" should not become excuses for donors or governments to reduce funding. "We want national authorities and the international community to commit not to reduce funds in order to achieve sustainability, but find other ways." The working group considered the importance of pursuing a two track approach: encouraging donor and national governments to meet widely agreed development assistance and national budgetary targets, along with establishing

GSC members Professor Michel Kazatchkine, French AIDS Ambassador (center) and Mr Sandeep Juneja from Ranbaxy (right) at the plenary session on 22 February 2006

new and innovative mechanisms for financial resource mobilization for the response to AIDS.

Human resources and systems

New models for social support are needed.

These financial issues were also addressed by the group working on human resources and health and social systems strengthening: the group's own ultimate recommendations would depend significantly on sustainable financing and increased resources. The group underlined the importance of expanding training significantly and broadening the partnership network of providers beyond the health and AIDS service community to include broader social services and development workers. The group also considered the importance alternative service system of simplifying health and social system interventions, building in more continuity and linking HIV and AIDS to primary health care, sexual and reproductive health, services for Tuberculosis and other opportunistic infections, so as to promote holistic and integrated care. The idea is to use HIV and AIDS services to strengthen overall systems while at the same time using existing services to expand access to AIDS services. The group emphasized the importance of channelling funding to the local level, through decentralization of resources and decision-making – and of ensuring sufficient resources to improve working conditions, salaries, incentives, training and social systems support for the retention and motivation of staff. The group recognized the need for "task shifting" to allow health workers to exercise the maximum responsibilities within their competencies.

Describing the efforts needed to train, recruit and retain skilled health workers, GSC member Dr Anarfi Asamoa-Baah, WHO Assistant Director-General for AIDS, Tuberculosis and Malaria, emphasized that "health systems need generals, but they especially need "foot soldiers".

Affordable commodities and low cost technology

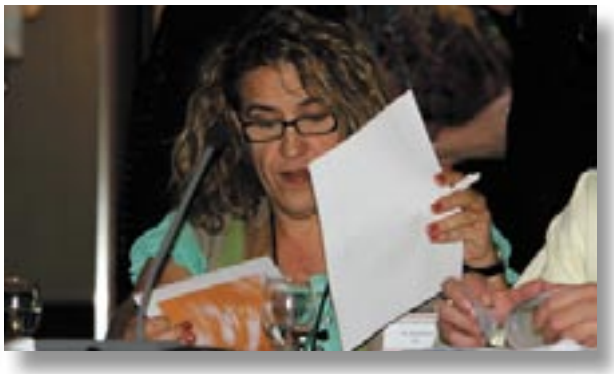
Guaranteeing markets to justify investment.

Health and social services systems were in turn considered in the work on more affordable commodities, which also analyzed financial constraints, the centrality of human rights and trade rules, and a range of issues related to the pricing, demand and availability of commodities. The group noted the importance of removing legal barriers to prevention commodities – such as condoms and substitutive therapies for injecting drug users– and of building a supportive environment in which prevention technologies can be implemented. An number of members in the working group and plenary addressed the issue head on, insisting that policy making be based upon scientific evidence. The international community should consider establishing a global commodities facility and countries should consider transparent accountability mechanisms that address blockages and incentives in meeting national needs for commodities. Both demand and supply had to be far more predictable, so the group considered the need for national, regional and global estimates of demand, and sustainable financing in order to ensure markets and promote investments in production capacity. Defining a package of essential commodities would help to facilitate procurement and the support of governments and donors. The group discussed the important functions of the quality review mechanism led by WHO – known as "prequalification" – and how this can be used to help make essential HIV medicines available in countries on an urgent basis even prior to full registration by the national drug regulatory authority. Finally, the group called for a thorough study of patent flexibilities, to understand why so few countries are implementing them – and encourage them to find ways to do so.

Human rights, stigma, discrimination, and gender

Large scale political commitment and social mobilization is needed.

The flexibilities within global trade rules (e.g., the WTO TRIPS Agreement) also featured in the work of the group focused on human rights, stigma, discrimination, and gender, having acknowledged access to medicines and other commodities as a human right. With the enormous impact of stigma and discrimination on access, the continuing importance and relevance of the International Guidelines on HIV/AIDS and Human Rights which if applied, would make an enormous difference in helping to creating supportive environment necessary for people to utilize services and to move towards universal access. It is crucial to apply these guidelines in practice and to enforce existing laws that protect people living with HIV and members of groups at risk of infection from discrimination. The need for financial and human resources to undertake large-scale social mobilization, including media campaigns with public figures, was raised in the group. Similarly, the work of networks of people living with HIV to expand prevention and treatment literacy in communities



Ms Jaqueline Cortez of the Brazilian National AIDS programme

needs to be resourced. In terms of legal reform, special attention should be paid to decriminalizing sex work, homosexuality and drug use, as well as to ensuring legal protection of the inheritance rights of women and children. Finally, a series of linked proposals were made to support the specific issue of gender and youth inequality. The idea of setting up an emergency task team for youth prevention and

to support countries to expand access to services to prevent mother-to-child transmission was discussed. After hearing the report of the human rights working group during plenary, GSC Co-Chair Michel Sidibe observed that stigma and discrimination are also being raised in country and regional consultations as powerful obstacles in scaling up towards universal access: "Maybe what we need is a new and expanded approach: the scaling up of prevention, treatment, care and support, and also the scaling up of non-discrimination!", he said.

Targets and milestones

Measuring progress and building accountability.

Finally, the targets and milestones group presented the paper prepared by UNAIDS in consultation with the working group co-chair. This paper will be produced and disseminated by UNAIDS to provide guidance to countries on a small set of core indicators:

- Core indicators would be included to assist and identify targets and measure progress.
- Recommended indicators that might be appropriate in a country context would be included.
- All indicators should be already routinely collected by countries and included in UNAIDS annual reporting.

Working group co-chair, Ms Anandi Yuvaraj, from India HIV/AIDS Alliance expressed concern that countries may set their targets too low. "Country targets must be consistent with plans that are both ambitious and credible, she said." She added that "it is essential that civil society be at the table for the target setting process." Core and recommended indicators were proposed in prevention, treatment, care and support and in national commitment. The group also began to consider issues related to international indicators.

At the request of the Co-Chairs, just prior to the closing, Mr Stephen Wallace, Canadian International Development Agency (CIDA), provided a clear synthesis of the gaps he had been asked to identify. Mr Wallace cited, among others, the need to strengthen the operational actions to support the higher level political commitments, the need to clearly articulate actions and the responsible actors, the need to place at the forefront obstacles related to gender equality and access for children, including legal considerations. He noted that stigma and discrimination affect every operational area and should be systematically addressed. He also stressed that the Global Task Team and global health partnerships must be clearly referenced and that an operational framework for accountability remains to be fully elaborated.

GSC Co-Chairs Masood Ahmed and Michel Sidibe

Between now and the next meeting the Committee will continue to receive input from the ongoing country and regional consultations. The Global Steering Committee on scaling up towards universal access is advising UNAIDS in preparing the UNAIDS assessment for submission to the United Nations General Assembly session to review progress made since the 2001 Declaration of Commitment on HIV and AIDS. The assessment will include an analysis of obstacles to scaling up comprehensive AIDS services and propose a number of concrete actions to overcome them. The issue of measuring progress and ensuring accountability of all actions remain high on the agenda and will be a central issue to be considered by the Committee at its third and final meeting scheduled on 14-15 March 2006.

More information and documents available at www.unaids.org