From 2015 to Now

Deirdre Grant
AVAC
13 February 2018
AVAC Advocacy Partners’ Forum
In 2015: Key populations–key points

- Stand in solidarity but demand disaggregated data; “key populations” consortiums that can unite to push agendas on multiple fronts but recognize that this term can be used to say “it’s all being done” when it’s only being done for “palatable” groups
- As allies to and as “identified” members of key pops: be honest about who is (not) representing who
- Demand real engagement from PEPFAR COP teams amplifying key pops issues as part of broader critique and engagement
- Track, critique and/or support translation of targets into good, smart, well-designed programs to deliver treatment and prevention that meet context-specific key pops needs
By 2018...

- Govts and PEPFAR investing in named key pops
- More investment in CSOs
- Now a PEPFAR indicator that disaggregates LGBT folks from sex workers in Key Pops – although doesn’t disaggregate transgender women from gay men
- CSO engagement in PEPFAR context more robust – the PEPFAR guidance now specifies that country chairs need to have separate meetings with key pops on request
- Tx cascade is still weakest in key pops along with young men and women
- TG ROAR (promote prevention in communities and a research agenda inclusive of TGs) and Africa PxROAR (implementation)
ART

- Recognize that 90-90-90 can either be tremendously powerful or empty rhetoric
- Depends on civil society funding and good service delivery models
- UNAIDS target for increased civil society engagement may be inadequate
By 2018

Since last PF…

- PEPFAR “pivot” to focused scale-up in certain areas
- PHIA data to track impact
- 90-90-90 key focus on a lot of countries
- COPs engagement around tx targets & programming
VMMC

- Ask PEPFAR, GFATM CCMs and national HIV/AIDS programmes: what is spending on and target for VMMC this year? Is it more or less than last year?
- Feed this info back so we can raise regional alarm.
- Catalyze action on $710 million funding gap.
By 2018

- VMMC included in non-ART prevention target in 2016; 27m more for total of 47m by 2020; 1/3 of the way
- COPs engagement on targets
- May begin to see impact of VMMCs from 4-6yrs ago, esp w/PHIA data in places like Kenya
In 2015: Summary by intervention (3)

- PrEP
  - Feedback to UNAIDS/WHO about targets, guidance and operational needs
  - Ask DREAMS Initiatives to include PrEP in all of its country programs; get on in-country DREAMS working groups
  - Demand TDF/FTC registration where not in place
  - Inform and amplify demand among potential users
  - Advocate for PrEP integrated into national strategic plans and/or local clinical guidelines
  - Recognize that PrEP is a women-controlled prevention tool; the only non-sex-linked tool today
By 2018

- UNAIDS fast-track target: 3m on PrEP (only 6% of the way there)
- PrEP in DREAMS and advocate representation on DREAMS in-country working groups
- TDF/TFC registered in 24 countries, nearly half of them in sub-Saharan Africa
- PrEP in 12 national guidelines and WHO global guidance
- Recognize that PrEP is a women-controlled prevention tool
- Continue exploration of African-led and convened research advocacy forum
- Strengthen CAB capacity and non-CAB engagement on all research, including but not limited to communities where a number of types of prevention trials are planned or ongoing (e.g., where a long-acting injectable PrEP trial may be happening now, with AIDS vaccine trials and passive transfer studies planned to follow on)
- Track, discuss and ensure conduct of ECHO trial
By 2018

- African-led forum
  - AFNHI coalition of partners to specifically support African agency around prevention R&D advocacy
  - APHA
  - NHVMAS leadership in the space and development of LENNIB to mentor new champions

Strengthen CAB capacity and non-CAB engagement
- Beyond CAB engagement seen esp in spaces where groups implementing GPP; need for continued advocacy focus on the pipeline given the funding constraints and more-complex trial design

Track, discuss and ensure conduct of ECHO trial
- Continued work on ECHO, GCAB and continued civil society engagement
- Continue rectal microbicide research—don’t do an efficacy trial of rectal tenofovir gel with current applicator; do a trial that helps us understand better what type of topical PrEP gay men and other MSM want to use.

- Request clarity around P5, including implications for regions besides Southern Africa, identification of sites/cohorts for vaccine trials; feed advocates’ perspectives on through the AIDS Vaccine Advocacy Resource Group (VARG) and connect with Pan-African Vaccine Agenda.
By 2018

Rectal microbicide research

- No Phase III after MTN 017 rectal gel trial. Current rectal microbicide studies in development are designed to better understand possibility of “behaviorally congruent” products; what products are preferred? What about a microbicide douche?

The P5

- P5 not the only focus in the vaccine space given other vaccine candidates beyond the pox-vector (e.g., Ad26) in efficacy trials
- Still need for broad stakeholder engagement and transparency with regards to the future direction of the pox-vector candidate, post-HVTN 702 trial results. Desire for continued engagement of the VARG (recent focus has been around PrEP provision in trials)
Start now in preparing for results from the ASPIRE/Ring Studies of dapivirine ring (end 2015/early 2016)—no matter what the results

Continue to follow what the lessons from FACTS and other trials are—and what advocates’ entry points are to shaping future research

Women’s prevention must continue, is continuing, is essential—young women’s lives are on the line; they must be at the table

And PrEP for young women and other women exists today
By 2018

- Field was ready for ring results (Q1 2016)—planned for success (open-label extensions, regulatory submission)

- Women’s prevention, especially prevention for young women and adolescent girls a big focus in 2018, including access to proven options like PrEP and research around potential new options like the dapivirine vaginal ring
In 2015: Summary of Activism

- Time to rekindle AIDS activism at global, national and community levels
- Find our new common agenda, urgency and organizing on the road to ICASA (Tunis) 2015, IAS Vancouver 2015 and IAC Durban 2016
- Use connections to UNAIDS to make asks for the support you need, connect to regional offices, convene high-level meetings
- Integrate key issues into existing advocacy agenda/platforms at several levels
By 2018

A coalition of physicians, AIDS activists, medical students, and women's health and rights advocates protest against Trump’s “global gag rule” [Getty Images]