World Health Organization

A Sustainable Health Sector

Response to HIV

Global Health Sector Strategy for HIV/AIDS

2011-2015

(DRAFT OUTLINE FOR CONSULTATION)

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GLOBAL HEALTH SECTOR STRATEGY FOR HIV/AIDS 2011-2015 OUTLINE

INTRODUCTION


II. CONTEXT
   A. Progress and challenges
   B. Changing global architecture
   C. The need for a new strategy

III. GLOBAL VISION AND GOALS: WHAT NEEDS TO BE ACHIEVED BY 2015
   A. Vision
   B. Goals, indicators and targets
   C. Coherence with other targets
   D. Guiding principles

IV. COUNTRY PROGRAMMES: STRATEGIC DIRECTIONS
   A. Expanding coverage and impact of HIV interventions
   B. Linking and integrating programmes and services
   C. Building sustainable systems
   D. Creating supportive environments for HIV responses

V. WHO ACTION: SUPPORTING NATIONAL RESPONSES
   A. WHO mission
   B. WHO focus areas for each Strategic Direction
   C. WHO Strategic Approaches
   D. WHO accountability framework

VI. STRATEGY IMPLEMENTATION
   A. Optimizing the WHO HIV/AIDS programme structure
   B. Interfacing with other sectors and partners
   C. Monitoring and evaluating progress and reporting
INTRODUCTION

Aim of the Strategy

The Global Health Sector Strategy for HIV/AIDS 2011-2015 aims to:
1. Set global goals for the health sector response to HIV/AIDS;
2. Guide national HIV responses; and
3. Provide a framework for concerted WHO action at global, regional and country levels

The strategy builds on the achievements and experiences of the "3 by 5" initiative and the WHO HIV/AIDS Universal Access Plan 2006-2010 and aims to align with broader strategic frameworks, including the Millennium Development Goals, primary health care renewal, Universal Access commitments and the UNAIDS Strategy for 2011-2015. It takes into consideration the changing public health architecture and aims to incorporate the principles of the Paris Declaration on Aid Effectiveness.

Structure

This document is divided into six sections:
- Section I provides a summary of the strategy;
- Section II presents the HIV and broader health context within which the strategy is posited;
- Section III sets out the global vision, goals, indicators and targets that should guide country responses;
- Section IV outlines the four Strategic Directions for a comprehensive national health sector programme for HIV/AIDS, and the associated priority health sector policies, approaches and interventions for countries to implement;
- Section V defines the role of WHO in supporting countries to implement national programmes and achieve their HIV targets, outlines the areas that WHO will focus on during 2011-2015 and describes the strategic approaches to be taken by WHO; and
- Section VI explains how the strategy will be implemented, monitored and evaluated, including the comparative advantage of WHO and the role of partners in supporting the health sector response.
I. GLOBAL HEALTH SECTOR STRATEGY FOR HIV/AIDS AT A GLANCE

This section will provide an executive summary of the strategy, including:

- Global action
  - Global vision
  - Global goals
  - Guiding principles

- Country action
  - Four Strategic Directions

- WHO role
  - WHO mission
  - Focus areas for WHO under each of the four Strategic Directions
  - WHO Strategic Approaches
II. CONTEXT

A. Progress and Challenges

This section will provide an overview of the status of the HIV/AIDS epidemic and the health sector response, drawing on the latest data from:

- UNAIDS/WHO AIDS Epidemic Update
- WHO/UNAIDS/UNICEF Universal Access Progress Report
- MDG progress reports
- Other relevant progress reports relating to sexual, reproductive, maternal and child health, tuberculosis health, harm reduction and health systems
- Progress reports of key partners

B. Changing Aid and Development Architecture

This section will review the current global architecture for HIV, public health and development:

- Global health initiatives (e.g. IHP+)
- Financing mechanisms
- Principles for harmonization and alignment (including Paris Declaration on Aid Effectiveness, Global Task Team on Improving AIDS Coordination among Multilateral Institutions and International Donors)
- Global and regional commitments (including UN General Assembly Declaration of Commitment, Universal Access, MDGs)
- Development partner initiatives
- UNAIDS strategy and structure
- Civil society engagement

C. The Need for a New Strategy

This section will provide the rationale for launching a new Global Health Sector Strategy on HIV/AIDS, including:

- A brief review of recent WHO HIV strategies:
  - The "3 by 5" initiative, launched in December 2003
  - The WHO Universal Access Plan 2006-2010
- Adapting to new context:
  - Responding to new epidemic dynamics
  - Optimizing the impact of new interventions and approaches related to HIV prevention, treatment and care
  - Addressing broader health issues
- Positioning HIV on a health systems platform:
  - Promoting country leadership
  - Improving health (and HIV) governance, including universal coverage, health in all policies and primary health renewal
  - Strengthening the building blocks of health systems
  - Promoting integrated service delivery for improved effectiveness, efficiency and sustainability
• Achieving broader health outcomes, including health equity and social inclusion and participation

• Complementing the strategies of key partners
  o UNAIDS family
  o Development partners (e.g. the Global Fund, PEPFAR and other bilateral programmes)
  o Civil society
III. GLOBAL VISION & GOALS: WHAT NEEDS TO BE ACHIEVED BY 2015

A. Vision

A world free of new HIV infections in which all people living with HIV enjoy long and healthy lives.

B. Goals, Indicators and Targets

This section will outline the four broad goals of the strategy and a set of sub-goals, along with a set of indicators and targets for monitoring progress. The targets should be strategic in nature, motivating countries to take action and guiding prioritization of efforts. Where possible and appropriate existing internationally agreed indicators and targets should be used. The indicators and targets listed below are examples of the types of targets that could be used.

Note: All indicators to be sex- and age-disaggregated (as appropriate)

Goal 1: To optimize HIV prevention, treatment and care outcomes

1.1 Reduce HIV incidence through combination prevention delivered by the health sector

1.2 Reduce HIV morbidity and mortality through antiretroviral therapy and HIV care

1.3 Reduce inequities in access to HIV services for most-at-risk populations

- Percentage of women and men aged 15-49 who had more than one partner in the past 12 months who used a condom during their last sexual intercourse
  Target by 2015: 80%

- Percentage of men and women aged 15-49 who received an HIV test in the last 12 months and who know their results
  Target by 2015: 80%

- Percentage of most-at-risk populations who received an HIV test in the last 12 months and who know their results
  Target by 2015: 80%

- Number of adults and children with advanced HIV infection receiving antiretroviral therapy*
  Target by 2015: To be determined

- Number of syringes distributed per injecting drug user per year
  Target by 2015: >100 syringes in at least 100 countries

Goal 2: To maximize the impact of HIV responses on other health outcomes (including achievement of health-related MDGs)

* Millennium Development Goals indicator
2.1 Improve sexual, reproductive, maternal, neonatal and child health (MDGs 4 and 5) outcomes through strengthened programme linkages and expanded prevention of mother-to-child transmission of HIV

2.2 Reduce tuberculosis incidence, morbidity and mortality through improved collaboration between HIV and TB programmes

2.3 Reduce the incidence and impact of common HIV-related co-morbidities and co-infections, including viral hepatitis infection

- **Unmet need for family planning**
  Where available, disaggregated by serostatus
  Target by 2015: <5%

- **Percentage of pregnant women who were tested for HIV and received their results**
  Target by 2015: 80%

- **Percentage of maternal deaths associated with HIV**
  Target by 2015: <5%

- **Percentage of infants born to HIV-infected mothers who are infected**
  Target by 2015: <5%

- **Percentage of deaths among children less than 5 years of age associated with HIV**
  Target by 2015: <5%

- **Percentage of estimated HIV-positive incident tuberculosis cases that received treatment for tuberculosis and HIV**
  Target by 2015: >80%

**Goal 3: To build strong and sustainable health systems to address HIV/AIDS and other major public health threats**

3.1 Integrate HIV/AIDS issues into national health strategies and plans

3.2 Strengthen the organization of health systems (human resources, laboratories, procurement and supply management, strategic information)

3.3 Improve efficiency and effectiveness of HIV-related health service delivery

- **Percentage of countries that have experienced no stock-out of any required ARV in the last 12 months**
  Target by 2015: >95%

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† Millennium Development Goals indicator
‡ Millennium Development Goals indicator (country estimates will be available in 2010 and 2015)
Goal 4: To reduce HIV vulnerability and address structural barriers to accessing HIV services

4.1 Reduce HIV-related stigma and discrimination in the health sector

4.2 Achieve gender equity in access to HIV services and outcomes

4.3 Address legal barriers to the equitable access to HIV services

C. Coherence with other Targets

This section will review the relationship between the goals and targets of this strategy and other key strategies and commitments, including:

- WHO Medium Term Strategic Plan 2008-2013
- UNGASS targets
- Universal Access targets
- MDGs

D. Guiding Principles

This section will outline a number of guiding principles for the strategy, including:

- Putting human rights at the centre of the health sector response to HIV
- Focusing action where it is most needed and where it will have greatest impact
- Meeting the needs of most-at-risk and vulnerable populations
- Prioritizing equity in health, including gender equity
- Advocating for evidence-based and cost-effective policies and programmes
• Promoting the values and principles of primary health care
• Ensuring national responses are country-driven and owned
• Taking a partnership approach to achieving results
• Supporting the rights of people living with HIV and of marginalised and vulnerable populations and their meaningful involvement in the response
IV. COUNTRY PROGRAMMES: STRATEGIC DIRECTIONS

This section will describe the priority health sector interventions and approaches that countries should adopt if they are to achieve targets set out in this strategy. It is recommended that countries organize their responses around four Strategic Directions, which relate to the four Goals of this strategy. The WHO document *Priority Interventions: HIV/AIDS prevention, treatment and care in the health sector* describes the full set of interventions that constitute a comprehensive health sector response to HIV/AIDS.

This section will also briefly describe:

- The public health approach to HIV/AIDS
- Different levels of intervention - health facility, community, outreach to most-at-risk populations and national measures
- Tailoring programmes to HIV epidemic context (generalized, concentrated, low-level)
- Tailoring programmes to country context (e.g. health system readiness, cultural and social context)
- Tailoring programmes for settings of humanitarian concern

A. Strategic Direction 1: Expanding coverage and impact of HIV interventions

This section will describe the set of HIV-specific interventions and approaches countries should adopt, and will include the following content:

- Context and challenges
- Priority interventions
  - HIV testing and counselling
  - Prevention of sexual transmission of HIV (condoms, STI control, behaviour change, male circumcision)
  - PMTCT, including infant feeding
  - Harm reduction for drug users
  - Post-exposure prophylaxis (and pre-exposure prophylaxis)
  - HIV/AIDS treatment and care
  - Comprehensive HIV prevention, treatment and care for most-at-risk populations (drug users, sex workers, men who have sex with men, transgender individuals, prisoners)

B. Strategic Direction 2: Linking and integrating programmes and services

This section will describe key programmatic and service linkages and integration that should be promoted to ensure a more efficient and effective HIV response and to maximize the impact of HIV investments on other health services and outcomes. This section will include:

- Context and challenges
- Key linkages
  - Tuberculosis
  - Sexual health, including sexually transmitted diseases
  - Reproductive health
  - Maternal, neonatal and maternal health
  - Drug dependence management and harm reduction
  - Viral hepatitis
  - Malaria
• Mental health
• Cancer prevention and treatment
• Palliative care
• Blood transfusion services
• Nutrition
• Prevention for people living with HIV

C. Strategic Direction 3: Building health systems for better HIV and health outcomes

This section will describe what should be done to align health systems strengthening efforts with HIV/AIDS responses in countries - the need to build stronger systems to better deliver HIV/AIDS programmes and the need for HIV/AIDS programmes to strengthen broader health systems. The six building blocks of health systems will be addressed. This section will include:

• Context and challenges
• Governance and leadership
  o Policy coherence, including health in all policies
  o National strategic planning
  o Primary health care
• Health financing
• Health workforce
  o Task-shifting
  o Care for healthcare workers
• Strategic information
  o Health information systems
  o Surveillance
  o Programme monitoring and evaluation
  o Patient monitoring
  o HIV drug resistance surveillance and pharmacovigilance
  o Operational research
• Medicines, diagnostics and other commodities
  o National policies
  o Procurement and supply management
  o Rational use of medicines and diagnostics
• Service delivery
  o Integrated service delivery
  o Quality assurance
  o Occupational health and safety (including injection safety, safe surgical procedures)

D. Strategic Direction 4: Creating supportive environments for HIV responses

This section will describe priority interventions for addressing structural barriers to equitable access to HIV prevention, treatment and care. These include interventions that need to be implemented within the health sector and what the health sector should do to influence other policies and programmes in other sectors. This section will include:

• Context and challenges
• Addressing stigma and discrimination in the health sector
• Addressing policies and laws that increase HIV vulnerability and marginalization and impede access to HIV services
• Gender mainstreaming
- Community mobilization and greater involvement of people living with HIV and key populations
- Addressing risk and vulnerability in settings of humanitarian concern
V. WHO ACTION: SUPPORTING NATIONAL RESPONSES

A. WHO Mission

WHO’s mission is to direct the global health sector response to HIV/AIDS in order to achieve universal access to comprehensive HIV services, improve related health outcomes and strengthen health systems.

B. Strategic Directions: Focus areas for WHO 2011-2015

This section will describe priority areas that WHO will focus on over the period of the strategy, under each of the four Strategic Directions. Proposed priority areas include:

- Expanding coverage and impact of HIV interventions
  - Expand HIV testing and counselling
  - Better target approaches for preventing sexual transmission of HIV (particularly in high HIV prevalence settings and among those most vulnerable)
  - Exploit the role of antiretroviral drugs in HIV prevention
  - Optimize HIV/AIDS treatment for children, adolescents and adults
  - Deliver comprehensive programmes for most-at-risk populations (drug users, men who have sex with men, transgender individuals, sex workers, prisoners)

- Linking and integrating programmes and services
  - Eliminate mother-to-child transmission of HIV
  - Link HIV and TB services
  - Address HIV and viral hepatitis co-infection
  - Promote positive prevention for people living with HIV

- Building sustainable systems
  - Support national strategic planning
  - Strengthen information systems to better inform responses
  - Improve quality and reduce costs of HIV-related medicines and diagnostics
  - Expand human resource capacity with a focus on task-shifting
  - Improve safety of health services
  - Improve the efficiency, quality, effectiveness and equitable coverage of HIV services and programmes

- Creating supportive environments for HIV responses
  - Address HIV stigma and discrimination in the health sector
  - Promote gender mainstreaming through HIV programmes

C. WHO Strategic Approaches

This section will describe the seven strategic approaches that WHO will use to organize its work and to support countries to implement effective HIV/AIDS policies and programmes. These approaches reflect the core functions of WHO:

- Synergy: Advocate for a sustainable and coherent global HIV/AIDS response. The context of the global response to HIV has changed dramatically in the last decade. Health and HIV have become more prominent on the international development agenda with increased financing for both. The number of international partners working in this field has increased and global health partnerships that focus on a set of diseases or issues
have emerged as critical players. HIV/AIDS "Universal Access" goals have yet to be met and an effective HIV response is essential if Millennium Development Goals are to be achieved. WHO has a role to play in promoting greater synergies, linkages and coherence across the HIV response and broader global health initiatives.

- **Guidance:** Set norms and standards for HIV/AIDS prevention, treatment and care interventions to improve cost-effectiveness, quality and coverage of services. WHO has defined a set of priority health sector HIV interventions and has developed various evidence-based guidance to support their implementation. There is much scope for improving these HIV specific interventions, to increase their effectiveness and quality, reduce costs and package them so that they can be delivered more efficiently and reach those populations and communities most vulnerable and at risk. WHO needs to continue to synthesize the evidence and develop and improve normative guidance for HIV policies and interventions.

- **Innovation:** Promote debate, thinking and research to identify new approaches and interventions for HIV/AIDS prevention, treatment and care. The past decade has witnessed significant achievements in the HIV response, with decreasing HIV incidence in communities in which effective HIV prevention approaches have been implemented and rapid scale up of antiretroviral therapy (ART) in most regions. However, the epidemic continues to outpace progress being made. Doing more of the same isn't enough. The existing repertoire of HIV interventions needs to be expanded and new approaches to delivering HIV interventions, services and programmes are required.

- **Linkage:** Advance programmatic linkages and promote models of integrated service delivery to achieve people-centred care, improve efficiencies and ensure health equity. WHO has defined six building blocks for a well functioning health system. An effective and sustainable HIV response requires strong health and social systems and investments in the HIV response have the potential to strengthen systems that will result in broader health benefits. Comprehensive and integrated service delivery is a key building block for health systems strengthening. There are a number of areas where linkages between HIV and other health-related programmes are critical if Universal Access goals and broader MDGs are to be achieved and sustained. There needs to be a strengthening of linkages across different WHO programmes and areas of work to support the health systems and integration agendas, and to provide guidance on service integration, such as through IMAI, IMCI and IMPAC.

- **Information:** Generate and use strategic information to improve effectiveness and strengthen accountability. Effective HIV policies and programmes need to be guided by high quality and timely intelligence. A well functioning health information system is a critical component of a strong health system. WHO has a key role to play in strengthening national health information systems and in monitoring and reporting on HIV/AIDS epidemics and responses.

- **Technical Assistance:** Provide an efficient technical support platform to deliver and maximize impact in countries. Major new investments in national HIV responses, changing epidemic dynamics, the development of new policies and approaches and low levels of service coverage, all contribute to increasing demands from countries for technical support. At the same time, a proliferation of technical support providers pose major challenges to avoiding duplication of efforts and ensuring high quality and sustained support. WHO has a key role to play in promoting high quality evidence-based
policies and interventions and providing support to countries for their adaptation and implementation. There is a need to deliver technical support more efficiently, to coordinate across different health areas and to build national and regional capacity to provide relevant and long-term assistance.

- **Partnership:** Expand strategic and operational partnerships to promote coherence, maximize reach and ensure inclusiveness. As a technical agency WHO depends on broad partnerships to ensure that good public health policies and practices are implemented and sustained in countries. Different types of partnerships are required, covering such areas as advocacy and leadership, research and development, policy and programmatic guidance, implementation, and community development and inclusion.

### D. WHO accountability framework

This section will describe the various accountability mechanisms by which WHO will monitor, evaluate and report on its HIV/AIDS work:

- **WHO mechanisms:**
  - WHO governance, World Health Assembly and resolutions
  - WHO Medium Term Strategic Plan
  - WHO Programme Budget
  - Programme reporting

- **UNAIDS mechanisms:**
  - UNAIDS Strategy 2011-2015
  - Unified Budget and Workplan
  - UNAIDS Outcome Framework
  - UNAIDS Division of Labour

- **Partnership agreements**
VI. STRATEGY IMPLEMENTATION

This section will describe how the strategy will be operationalized with the support of partners and how it will be monitored and evaluated.

A. Optimizing WHO HIV/AIDS programme structure

This section will describe the structure of the WHO HIV/AIDS programme, the division of labour across different offices and the comparative advantage of WHO vis-à-vis other partners.

B. Interfacing with other sectors and partners

This section will describe how this strategy is positioned within a broader multi-sectoral response to HIV/AIDS and the role of different partners. It will include:

- Interface of the health sector with other key sectors in the HIV response
- Working within the UNAIDS family and broader UN system
- Working with key partners:
  - Member States
  - Civil society, including people living with HIV and key populations
  - Non-governmental organizations
  - Development and funding agencies
  - Academic and technical partners
  - Private sector

C. Monitoring and evaluating progress and reporting

This section will describe how implementation of the strategy will be monitored and evaluated and how this will be reported. Progress will be measured against the global targets outlined in the strategy.