Global Health Sector Strategies
Pre-Executive Board Information Session

Dr Gottfried Hirnschall

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Programme

1. Introduction:
   – Dr Gottfried Hirnschall, Director, WHO Department of HIV and Global Hepatitis Programme

2. Presentation:
   – Executive Board documents (HIV, viral hepatitis, STIs)
   – Additional documents - Full versions of 3 strategies
   – Issues flagged by Member States

3. Moderated Discussion:
   – WHO Secretariat staff to respond to questions.
This Presentation

- Introduction
- Timeline review
- Key features of complete strategies
- Overview of key issues
- Discussion
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WHO DG, Dr Margaret Chan: “Next year the World Health Assembly will address strategies for HIV, viral hepatitis and sexually transmitted infections.”
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3 strategies contribute to 2030 Agenda for Sustainable Development:

- **HIV**: Sustain and build on successes, address “unfinished business” and guard against epidemic “rebound”

- **Viral hepatitis**: First global strategy and first global targets

- **STIs**: Revitalize the “neglected” response
2030 Agenda for Sustainable Development
A common structure and framework

Common structure

Universal Health Coverage

SDGs

Cascade of services

Vision, Goals and Targets

Costed Actions

SDGs: Sustainable Development Goals

Common structure

Cascade of services

Vision, Goals and Targets
Vision, Goal and Targets

Frameworks for action: Universal health coverage; the continuum of services; and, a public health approach

Strategic Direction 1: Information for focused action

Strategic Direction 2: Interventions for impact

Strategic Direction 3: Delivering for equity

Strategic Direction 4: Financing for sustainability

Strategic Direction 5: Innovation for acceleration

The three dimensions of UHC

The who and the where

The what

The how

The financing

Strategy Implementation: Leadership, Partnership, Accountability, Monitoring & Evaluation
HIV

- Health sector contribution to UNAIDS multisectoral strategy

- 16 million reasons to celebrate yet:
  - Continuing at the current pace will not end the epidemic;
  - Service coverage is inequitable and inadequate;
  - Need for quality assurance and improvement – e.g. treatment failure, HIVDR
  - HIV incidence increasing in some countries and regions;
  - Interventions poorly focused - populations and locations most in need
  - Shifting donor priorities and squeezed resources – implications for MICs

- Focus on “Fast Track” and building sustainability
UNAIDS and GHSS Targets Aligned

75% reduction in new HIV infections to less than 500,000 (compared to 2010); zero new infections among infants

Reduce HIV-related deaths: below 500,000 (and by 80% between 2010 and 2030)

Treatment: 90% PLHIV tested; 90% treated; 90% virally suppressed
Viral hepatitis

- Seventh highest cause of mortality globally - 1.4 million deaths
- Target 3.3 of the 2030 Agenda for Sustainable Development “specific action to combat viral hepatitis”
- First global strategy and set of global targets
- Five priority intervention areas:
  - Vaccination (particularly HBV)
  - HBV mother-to-child transmission
  - Injection, blood and surgical safety
  - Harm reduction for people who inject drugs
  - Treatment for chronic viral hepatitis B and C infection.
Impact targets for Hepatitis B and C

6-10 million infections (in 2015) to 900,000 infections (by 2030)

1.4 million deaths (in 2015) to under 500,000 deaths (by 2030)
## Hepatitis coverage targets

<table>
<thead>
<tr>
<th>Intervention</th>
<th>2030</th>
<th>2020</th>
<th>Baseline 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. HBV vaccination</td>
<td>90%</td>
<td>90%</td>
<td>82%</td>
</tr>
<tr>
<td>2. HBV MTCT; birthdose</td>
<td>90%</td>
<td>50%</td>
<td>38%</td>
</tr>
<tr>
<td>3. Safe injection</td>
<td>90%</td>
<td>50% coverage</td>
<td>5%</td>
</tr>
<tr>
<td>4. Harm reduction</td>
<td>300 (75% coverage)</td>
<td>200 (50% coverage)</td>
<td>20</td>
</tr>
<tr>
<td>5. HBV Treatment</td>
<td>80%</td>
<td></td>
<td>&lt;1%</td>
</tr>
<tr>
<td>6. HCV Treatment</td>
<td>80%</td>
<td>8 million treated (5m HBV, 3m HCV)</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>
Sexually transmitted infections (STIs)

- Neglected area
- Estimated 357 million annual new cases of 4 curable STIs
- Broad impact:
  - fetal and neonatal deaths;
  - cervical cancer
  - Infertility
  - contribute to the risk of HIV transmission
  - compromise quality of life
- Three priority areas:
  - **Gonorrhoea** – risk of resistance and untreatable gonorrhoea
  - **Syphilis** - elimination of congenital syphilis
  - **Human papillomavirus (HPV)** – vaccination

Reduce incidence by 90% by 2030 (2018 baseline)
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Member States: broad support - some concerns

- Resource constraints
  - Who will pay?
  - Strategies for middle-income countries?
- Sensitive areas
  - Definition of *key populations*
  - Specific interventions – e.g. harm reduction
  - Human rights
- Balance of interventions
  - Biomedical prevention
  - Focused/targeted versus comprehensive
Resources

Challenges

• Who will pay?
• Transition to domestic funding
• Specific issues for Middle Income Countries and for Low Income Countries
• Effective partnerships with private sector and other non-state actors?

Opportunities

• Building investment cases
• Universal Health Coverage as the underpinning platform
• WHO technical support for sustainable financing:
  • Price reduction strategies
  • Focus on efficiency
  • Innovations in revenue raising
  • Health systems financing – pooled funding and risk sharing
Key Populations

Challenges

• Continuing high incidence
• 'Ending epidemics' requires a key populations focus
• Sensitivities in some contexts: increasingly difficult policy, technical and resource environment

Opportunities

• Evidence-based policies and interventions - WHO guidelines
• Public health approach
• Partnering across sectors (eg UNAIDS and civil society)
• Shared interest in achieving equity – 'nobody left behind'
• Existing WHA and UN language and commitments
Balance of interventions

Challenges

• Resource constraints force prioritization
• Focus on populations, locations and settings with highest burden
• Need to focus on high-impact interventions - without compromising comprehensive approach

Opportunities

• Strategic information – 'know your epidemic, know your response' - Investment case
• WHO norms, standards, guidelines
• Define essential package & integrate into health benefit package
• Innovation for improved technologies and service delivery models
• Synergies across the strategies
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Reference Materials

WHO Secretariat reports introducing and summarizing the draft strategies on the Executive Board (EB138) website
http://apps.who.int/gb/e/e_eb138.html

Full versions of the draft strategies are available at:

http://www.who.int/hiv/strategy2016-2021/en/
http://www.who.int/reproductivehealth/ghs-strategies/en/