



World AIDS Day 2021

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**Key Note Address made at Lubaga Hospital in
Commemoration of World AIDS Day 2021**



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www.ucmb.co.ug

About Uganda Catholic Medical Bureau (UCMB)

- UCMB is the health department of Uganda Episcopal Conference (UEC)
- The UCMB network of health facilities spans 33 Hospitals, 263 lower level units, 15 Health Training Schools across Uganda
- About 10,194 health workers operate the health ministry of the Roman Catholic Church in Uganda
- UCMB is currently directed supported by CDC/PEPFAR to provide HIV care and treatment for 33,173 PLHIV across health facilities in Kampala and Masaka regions with 126,788 (8.9%) PLHIV accessing care nationally (out of the estimated 1,414,183 PLHIV in Uganda) as of Jul-Sep 2021 quarter



1 December 2021 - World AIDS Day

**End inequalities.
End AIDS.
End pandemics.**

**END INEQUALITIES.
END AIDS. GLOBAL AIDS
STRATEGY 2021-2026**

National Theme



***“HIV Stigma Free Work Place:
Journey to Ending AIDS by 2030”.***



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Getting to Zero

*WAD Theme 2011 is
foundational to the
subsequent themes
every following year*



Getting to **ZERO**

ZERO New HIV Infection

ZERO Deaths from AIDS-related illnesses

ZERO Discrimination

Background to the HIV Pandemic

- The history of the HIV and AIDS epidemic began in illness, fear and death as the world faced a new and unknown virus over 4 decades ago.
- However, Scientific advances, such as the development of antiretroviral drugs, have enabled people with access to treatment to live long and healthy lives with HIV.
- As the world moves towards ending HIV as a public health threat by 2030, the need to accelerate access to much-needed HIV services for underserved communities and sub-populations has never been more pronounced.
- The Universality of Health services is in keeping with the Sustainable Development Goals (SDGs)



SUSTAINABLE DEVELOPMENT GOALS



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Ending AIDS by 2030

- The international community has committed to ending the AIDS epidemic as a public health threat by 2030 – an ambitious target of the 2030 Agenda for Sustainable Development adopted by the United Nations General Assembly in September 2015.
- Interim targets (909090) were established for 2020, (959595) by 2025. This strategy describes the health sector contribution towards the achievement of these targets.
- If implemented, these fast-track actions will accelerate and intensify the HIV response in order for the “end of AIDS” to become a reality.



What does the End of AIDS look like?

- In the context of controlling HIV/AIDS, **epidemic control** will be reached when

the total number of new HIV infections

falls below

the total number of deaths
from all causes among HIV-positive individuals.

New HIV Infections < Deaths in PLHIV

How will we achieve Epidemic Control?

PREVENT NEW HIV INFECTIONS

- *Combination HIV Prevention*
- *Targeted HIV Testing and linkage to services*
- *Treatment for Prevention*
- *Messages of Hope (Sensitization / Education)*
- *Prevention with Positives*
- *Zero Stigma & Discrimination*
- *Favorable Policy Environment*



PREVENT DEATH IN PLHIV

- *Access to Antiretroviral Therapy (ART) for all PLHIV*
- *Support HIV treatment for treatment success (Good adherence and Retention on ART)*
- *Zero Stigma & Discrimination*
- *Favorable Policy Environment*



Treatment for Prevention

U = U

**Undetectable
means
Untransmittable**



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UNAIDS Global HIV Data

- **38.0 million** [31.6 million–44.5 million] people globally were **living with HIV** in 2019
- **26 million** [25.1 million–26.2 million] people were **accessing antiretroviral therapy** as of the end of June 2020.
- **1.7 million** [1.2 million–2.2 million] people became **newly infected** with HIV in 2019.
- **690 000** [500 000–970 000] people **died** from AIDS-related illnesses in 2019.
- **75.7 million** [55.9 million–100 million] people have become **infected** with HIV since the start of the epidemic (end 2019).
- **32.7 million** [24.8 million–42.2 million] people have **died** from AIDS-related illnesses since the start of the epidemic (end 2019).



HIV Situation in Uganda



Uganda (2019)

1.5m people living with HIV

5.8% adult HIV prevalence (ages 15-49)

53,000 new HIV infections

21,000 AIDS-related deaths

85% adults on antiretroviral treatment*

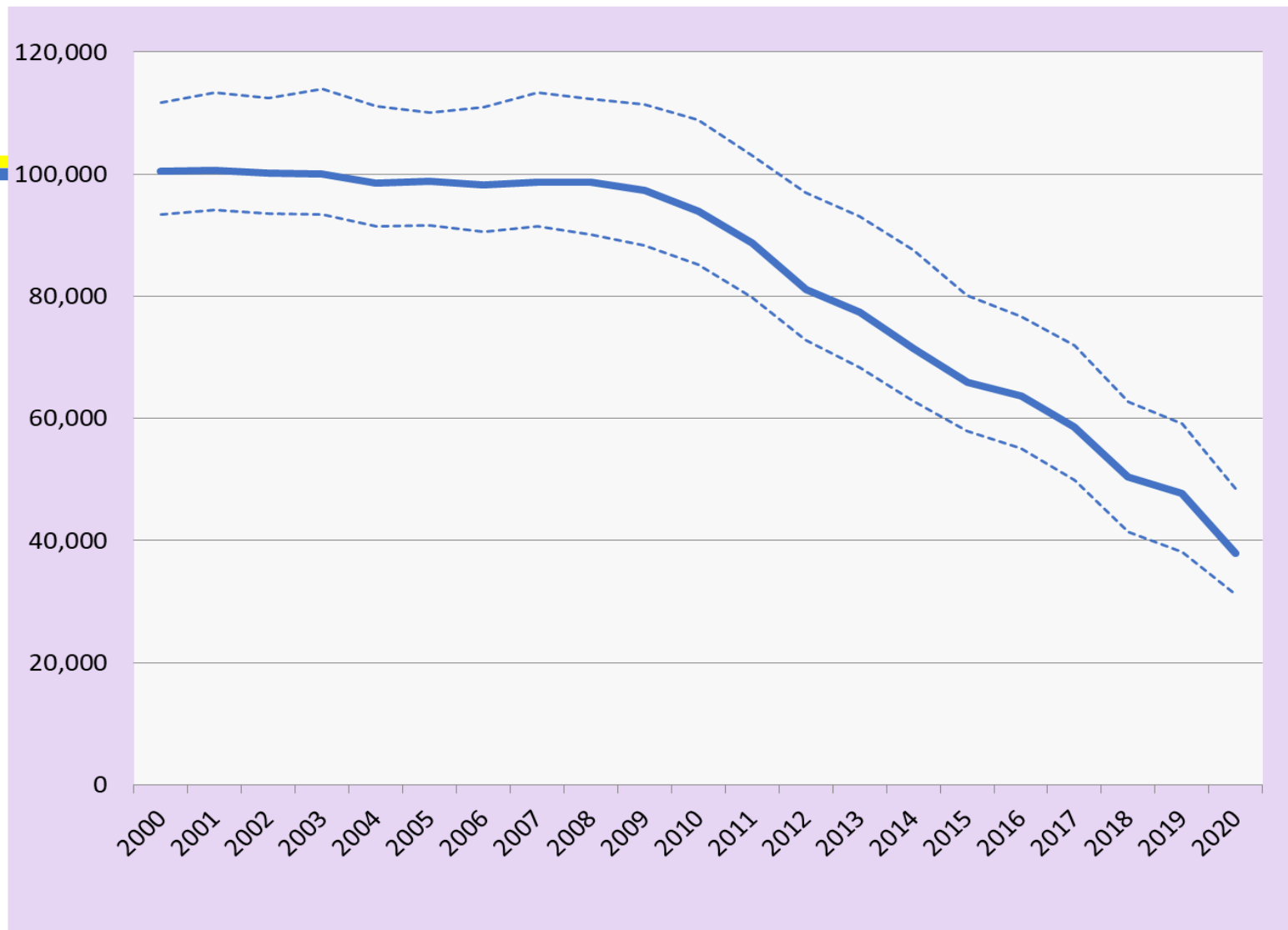
65% children on antiretroviral treatment*

*All adults/children living with HIV

Source: UNAIDS Data 2020



Trends of New HIV Infections -2000 to 2020



New HIV infections have fallen steadily since 2010

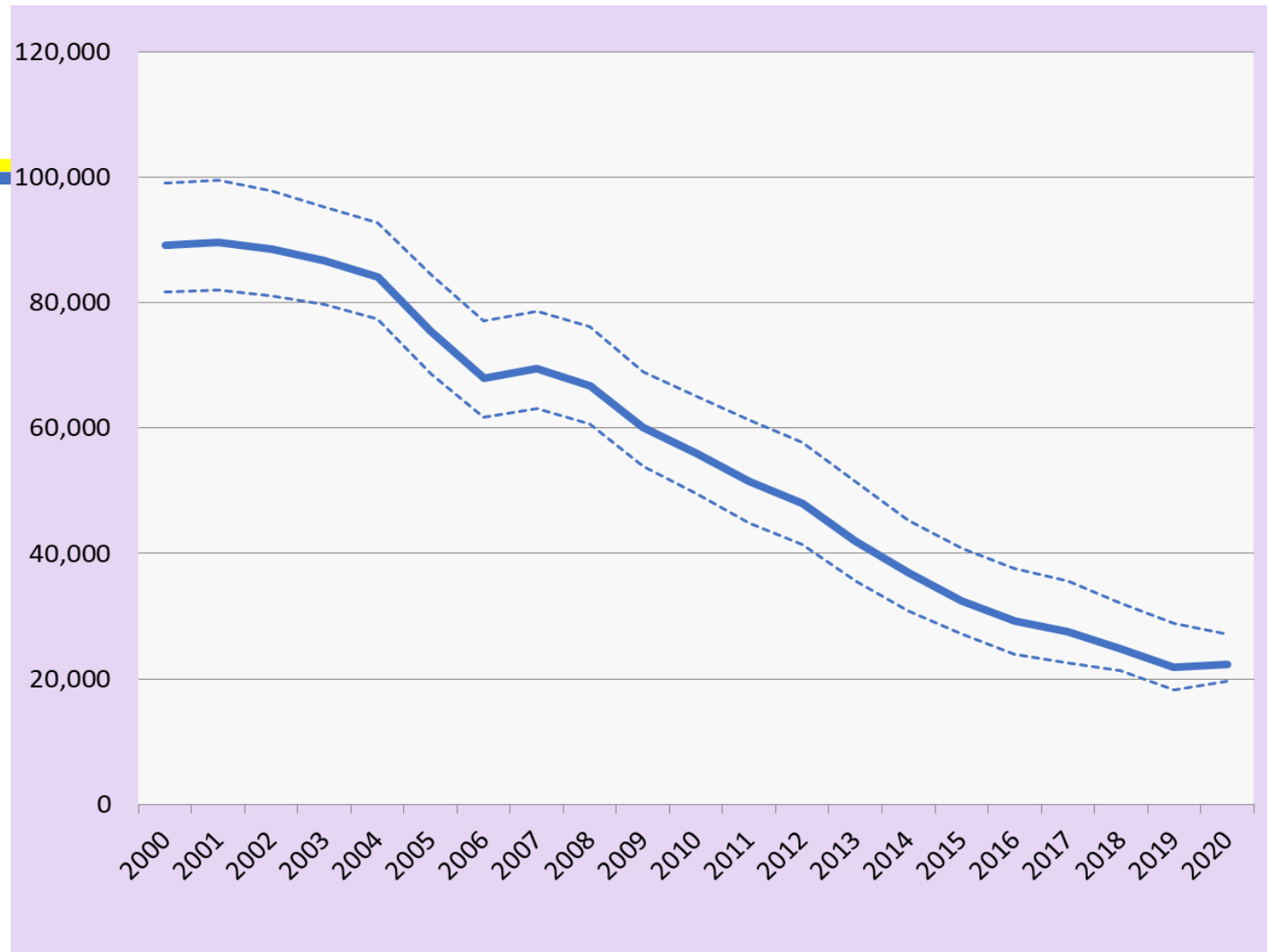
Spectrum Modeling Annual outputs

Source: Ministry of Health, ACP-Uganda



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AIDS-Related Mortality -2000 to 2020



- *AIDS-related mortality has steadily fallen since 2003, when the countrywide roll out of ART services commenced*

Spectrum Modeling Annual outputs

Source: Ministry of Health, ACP-Uganda

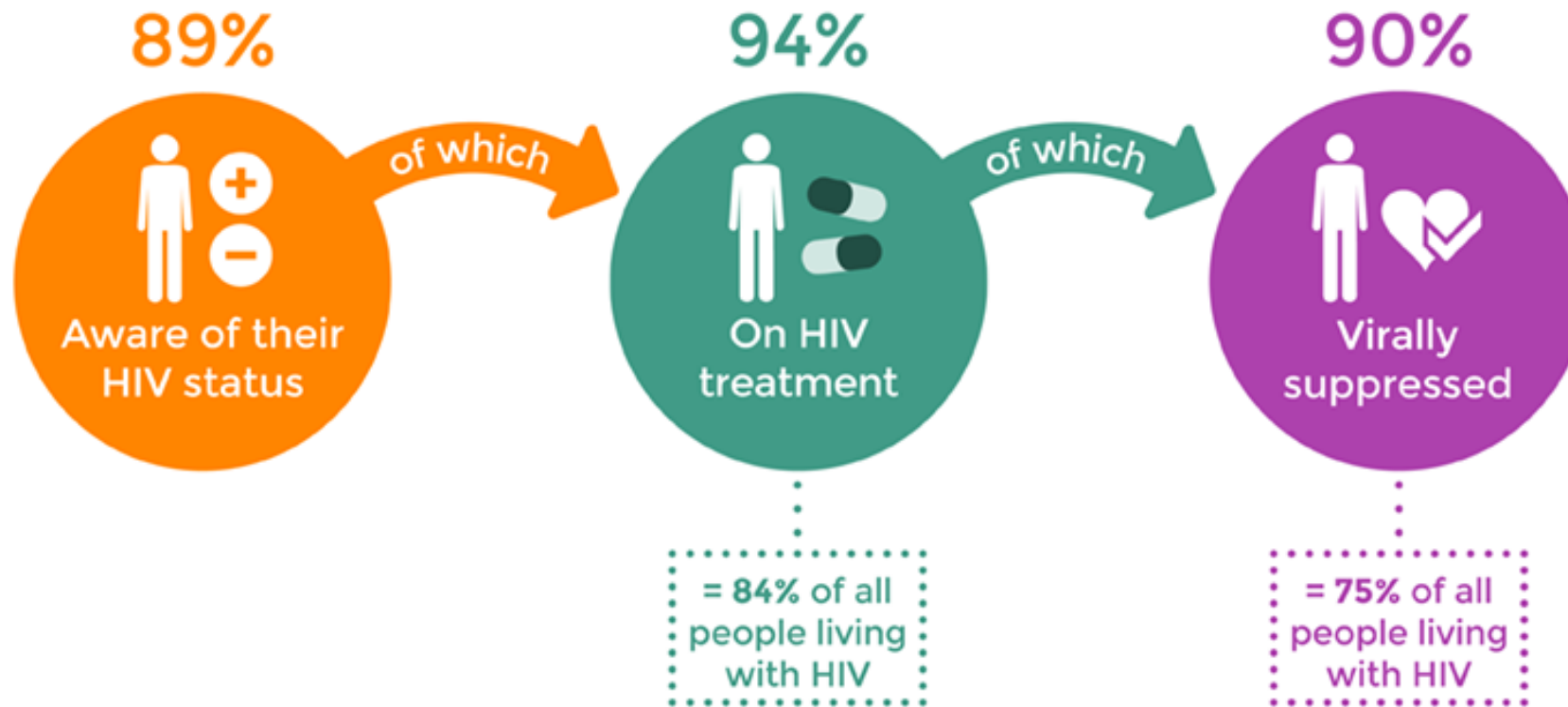


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Flashback; Uganda's 909090 situation by 2020

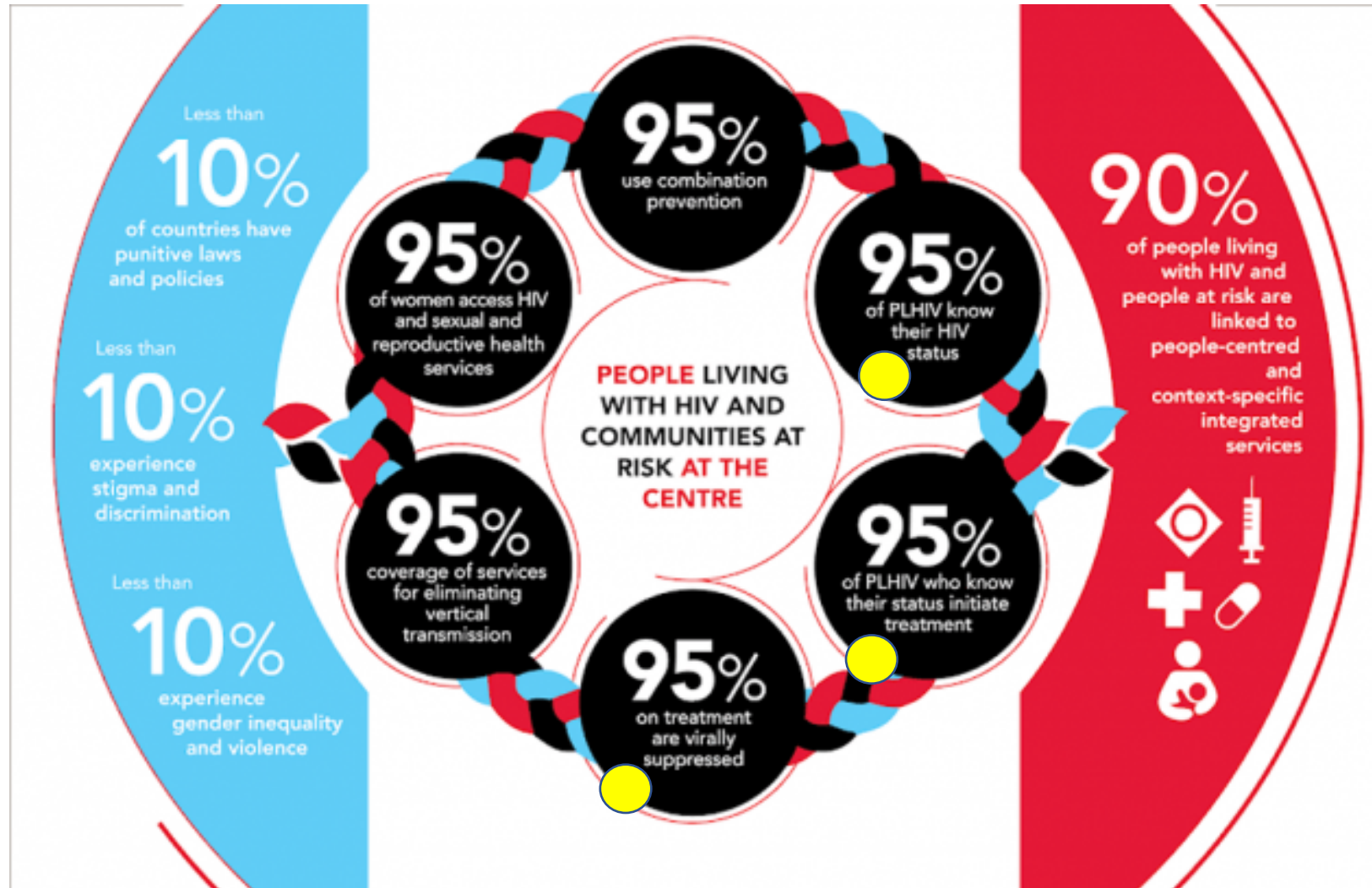
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Progress towards 90 90 90 targets (all ages)

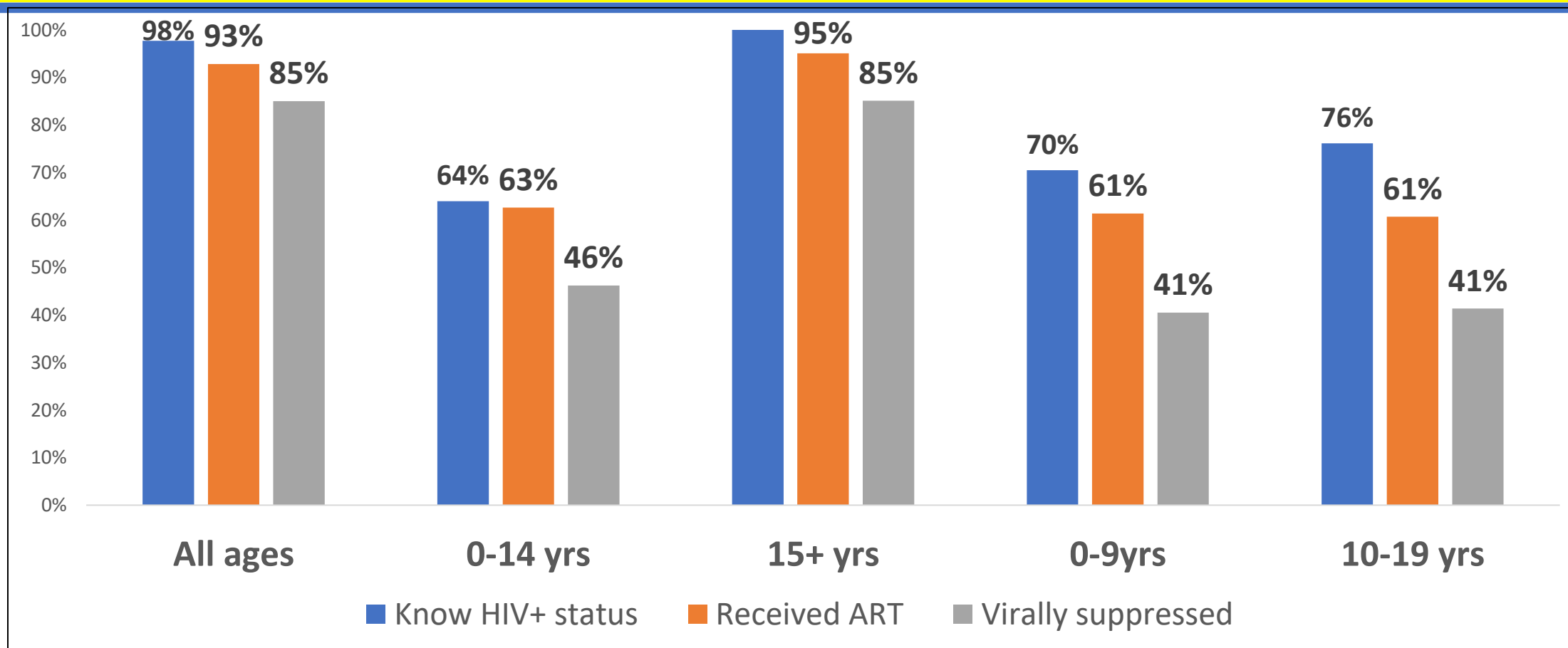


Source: UNAIDS Data 2020

Moving towards 959595 by 2025



Uganda Population 95-95-95 Cascade as at Sept 2021



- Children and adolescents are disproportionately not achieving the 95-95-95 targets

Source: Ministry of Health, ACP-Uganda

ART COVERAGE AND DISTRIBUTION BY LINE; Sept - 2021

ART COVERAGE

Category	Estimated PLHIVs	Current On ART	ART Coverage
Overall	1,414,183	1,312,974	92.8%
Male	543,297	463,246	85.3%
Female	870,886	849,728	97.6%
<15yrs	98,326	61,582	62.6%
15+yrs	1,315,857	1,251,392	95.1%
Male 15+yrs	493,599	433,831	87.9%
Female 15+yrs	822,257	833,012	101.3%
Children (0-9 Yrs)	53,714	32,177	59.9%
Adolescents (10-19 Yrs)	103,358	60,385	58.4%
Young persons (20-24 Yrs)	108,896	80,079	73.5%
20+	1,257,111	1,140,333	90.7%

ART DISTRIBUTION

Category of Clients	Number	Percent
No. of clients on ART	1,312,974	100.0%
Adults (20 yrs +)	1,220,412	93.0%
Adolescents (10-19 yrs)	60,385	4.6%
Children (0-9 yrs)	32,177	2.5%
First Line	1,247,109	95.0%
Adults (20 yrs +)	1,165,789	93.5%
Adolescents (10-19 yrs)	53,066	4.3%
Children (0-9 yrs)	28,254	2.3%
Second Line	64,479	4.9%
Adults (20 yrs +)	53,544	83.0%
Adolescents (10-19 yrs)	7,073	11.0%
Children (0-9 yrs)	3,862	6.0%
Third Line	1,386	0.1%
Adults (20 yrs +)	1,079	77.8%
Adolescents (10-19 yrs)	246	17.7%
Children (0-9 yrs)	61	4.4%

What are the Challenges we are facing in HIV Epidemic Control?

1. New HIV Infections

2. Not starting ART

3a. Attrition from ART

3b. Non-suppression



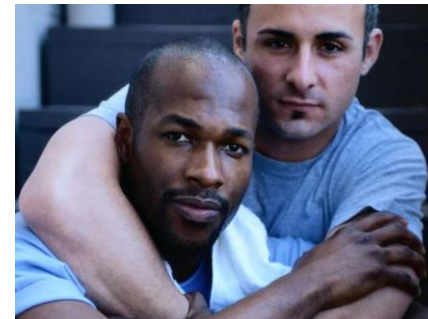
Testing &
Prevention

Linkage

Retention

Which people are facing the highest unmet need?

- Adolescent girls and Young Women (AGYW) 15-24
- Men
- Children (0-15) and Adolescents (10-19)
- **Key populations**
 - Sex workers, Transactional Sex
 - Men who have sex with men
 - Transgender
 - People who inject drugs
 - Incarcerated Populations
- **Other populations**
 - Mentally ill
 - People with disabilities
 - Priority Populations
 - Fishing communities
 - Migrating populations including Truck drivers
 - Uniformed personell



Why these Sub-Populations?

• Structural

- Poverty
- Policy Environment
- Stigma
- Discrimination

• Behavioral

- Lifestyle
- Substance abuse
- Cultural practices
- Gender Norms
- Transactional Sex

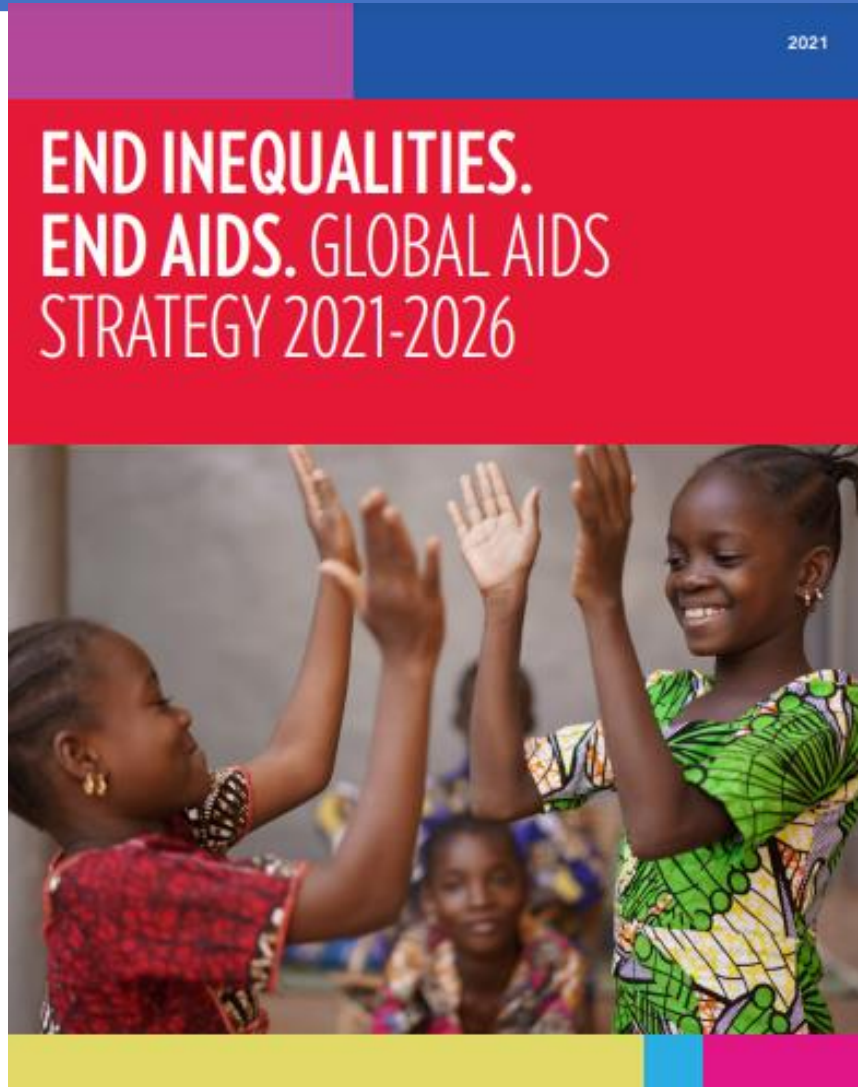
• Biomedical

- Non-linkage to ART for treatment or prevention (HAART, PEP, PrEP)
- Poor access to Biomedical Prevention Services



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End Inequalities. End AIDS. End Pandemics.



- End Inequalities. End AIDS. Global AIDS Strategy 2021-2026 is a bold new approach to use an inequalities lens to close the gaps that are preventing progress towards ending AIDS.
- The Global AIDS Strategy aims to reduce these inequalities that drive the AIDS epidemic and prioritize people who are not yet accessing life-saving HIV services.
- The Strategy sets out evidence-based priority actions and bold targets to get every country and every community on-track to end AIDS as a public health threat by 2030.

Achieving the vision of the Three Zeroes

STRATEGIC PRIORITY 1: MAXIMIZE EQUITABLE AND EQUAL ACCESS TO HIV SERVICES AND SOLUTIONS

- **Result Area 1:** Primary HIV prevention for key populations, adolescents and other priority populations, including adolescents and young women and men in locations with high HIV incidence
- **Result Area 2:** Adolescents, youth and adults living with HIV, especially key populations and other priority populations, know their status and are immediately offered and retained in quality, integrated HIV treatment and care that optimize health and well-being
- **Result Area 3:** Tailored, integrated and differentiated vertical transmission and paediatric service delivery for women and children, particularly for adolescent girls and young women in locations with high HIV incidence



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Achieving the vision of the Three Zeroes

STRATEGIC PRIORITY 2: BREAK DOWN BARRIERS TO ACHIEVING HIV OUTCOMES

- **Result Area 4:** Fully recognized, empowered, resourced and integrated community-led HIV responses for a transformative and sustainable HIV response
- **Result Area 5:** People living with HIV, key populations and people at risk of HIV enjoy human rights, equality and dignity, free of stigma and discrimination
- **Result Area 6:** Women and girls, men and boys, in all their diversity, practice and promote gender-equitable social norms and gender equality, and work together to end gender-based violence and to mitigate the risk and impact of HIV
- **Result Area 7:** Young people fully empowered and resourced to set new direction for the HIV response and unlock the progress needed to end inequalities and end AIDS .



Achieving the vision of the Three Zeroes

STRATEGIC PRIORITY 3: FULLY RESOURCE AND SUSTAIN EFFICIENT HIV RESPONSES AND INTEGRATE THEM INTO SYSTEMS FOR HEALTH, SOCIAL PROTECTION, HUMANITARIAN SETTINGS AND PANDEMIC RESPONSES

- **Result Area 8:** Fully funded and efficient HIV response implemented to achieve the 2025 targets
- **Result Area 9:** Integrated systems for health and social protection schemes that support wellness, livelihood and enabling environments for people living with, at risk of and affected by HIV to reduce inequalities and allow them to live and thrive
- **Result Area 10:** Fully prepared and resilient HIV response that protects people living with, at risk of and affected by HIV in humanitarian settings and from the adverse impacts of current and future pandemics and other shocks



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Fighting Pandemics

- As we fight COVID19, we face an unprecedented challenge of fighting multiple pandemics including HIV, TB and Malaria
- This has evidently put a strain on meagre resources and led to a spike in infectious-disease mortality
- Political commitment from our government is key in prioritizing interventions and keeping the spotlight on HIV
- Ringfencing funding for HIV Vaccine Research, treatment and improved therapeutics towards a cure should remain global and national priorities



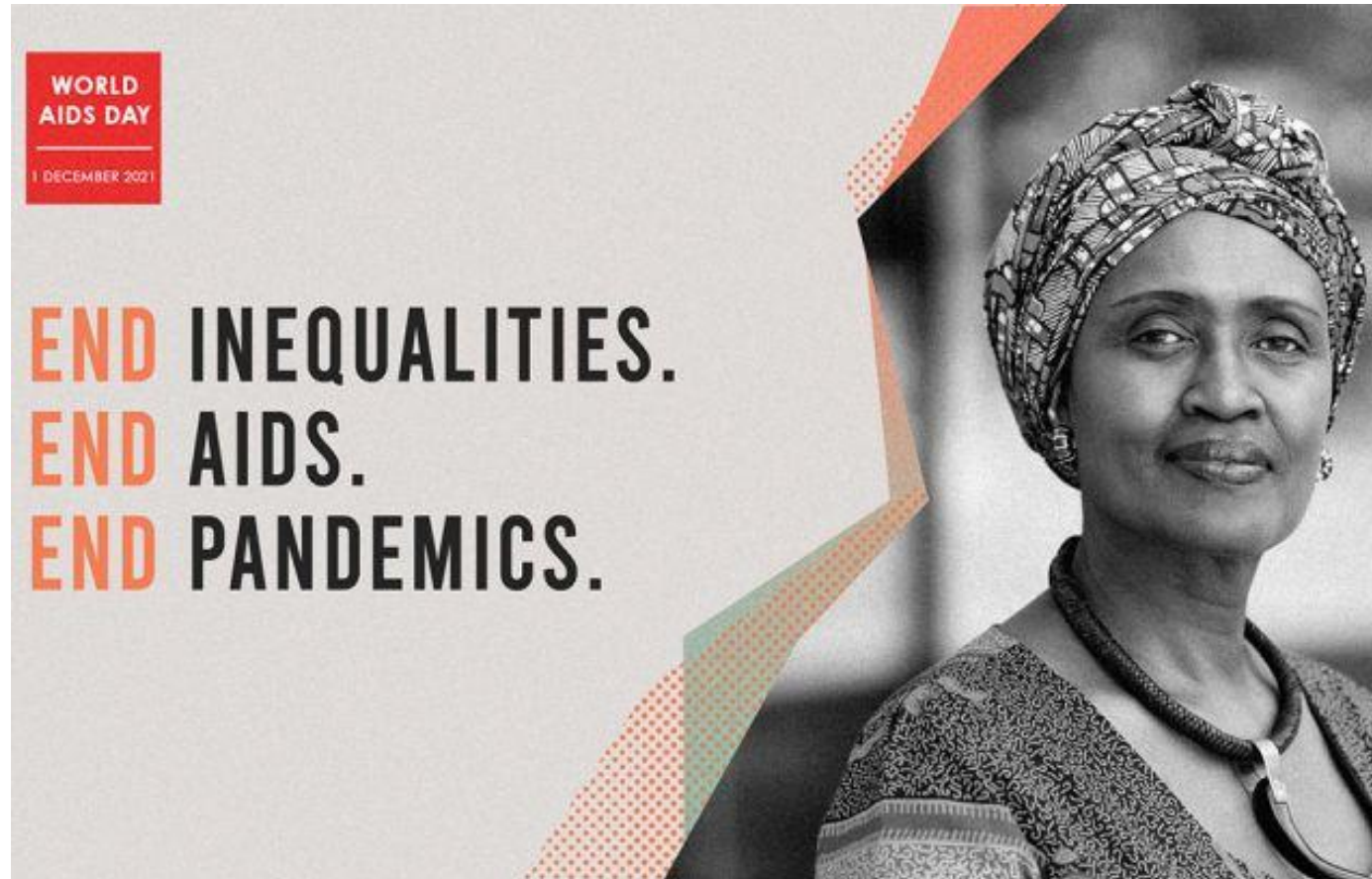
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End Pandemics

“Progress in AIDS, which was already off track, is now under even greater strain as the COVID-19 crisis continues to rage, disrupting HIV prevention and treatment services, schooling, violence prevention programmes and more.”

- Winnie Byanyima

UNAIDS Executive Director



Take home message

- What can you do as a health worker to contribute to the World AIDS Day theme?
- What are you doing?
- What will you do?



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