



PEPFAR

U.S. President's Emergency Plan for AIDS Relief

Guiding Principles for the Next Phase of PEPFAR

Thanks in large part to nearly two decades of strong bipartisan American leadership and generosity, we are closer than ever to controlling the global AIDS epidemic as a public health threat. Not since the Marshall Plan has the United States brought together critical U.S. government agencies and deployed its financial assistance, ingenuity, and scientific and technical capacity with such scope, scale, and speed as with the President's Emergency Plan for AIDS Relief (PEPFAR). Much as the Marshall Plan assisted Europe to recover from the ravages of World War II, PEPFAR has supported over 50 countries in Africa and around the globe to emerge from the devastation of HIV and move toward a brighter future, all while improving the health and well-being of millions of people.

In community after community, where there was once unfathomable death and despair due to AIDS, there is now vibrant life and hope. The figures speak for themselves – 20 million lives saved, millions of HIV infections prevented, and the AIDS epidemic being controlled and in retreat in a growing number of countries – but the numbers cannot fully capture the magnitude of what the U.S. government has accomplished through PEPFAR, working in close partnership with countries and communities around the world.

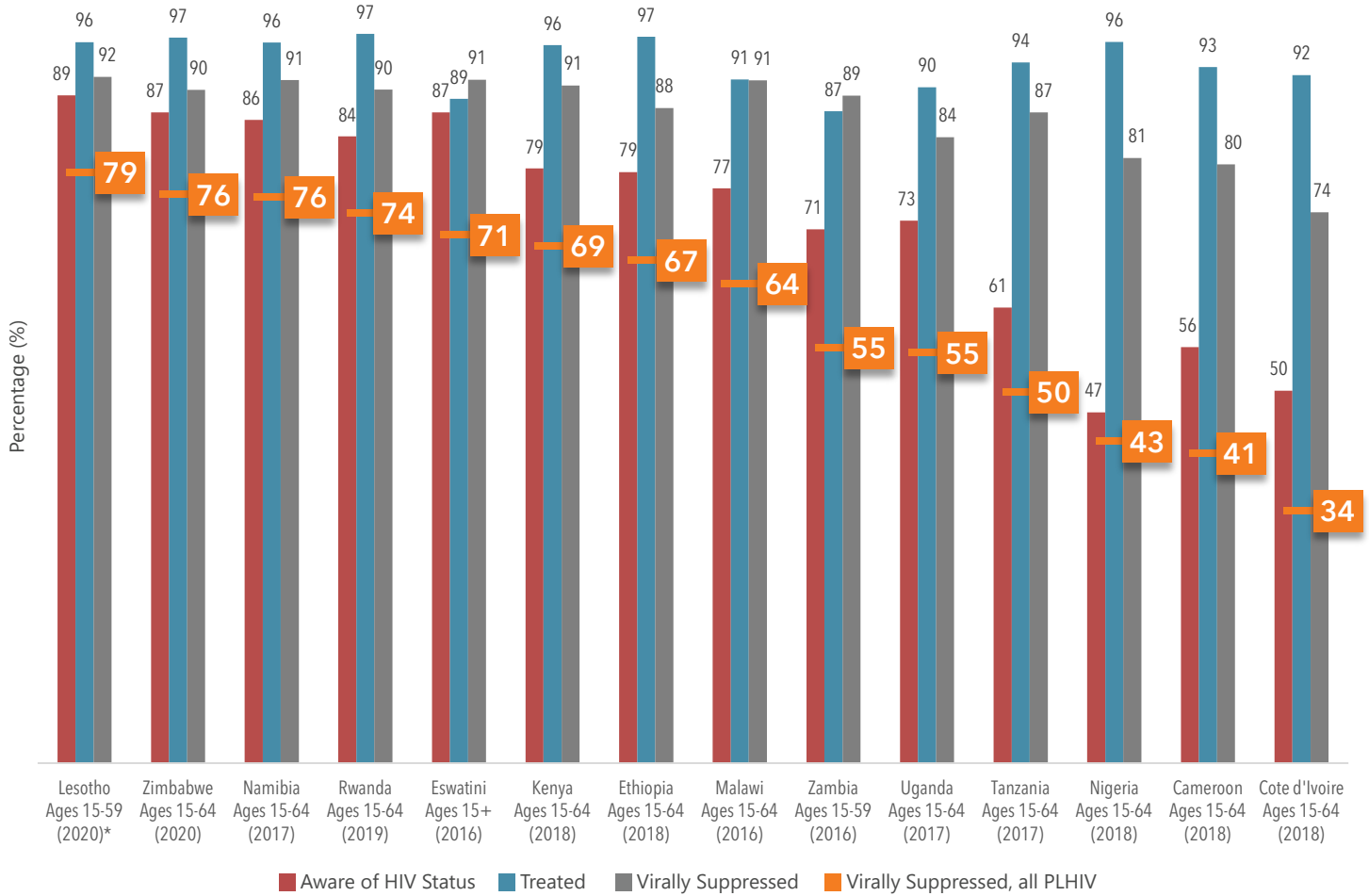
Over the past 18 years, with sustained bipartisan support across U.S. presidencies, U.S. congresses, and because of the generosity of the American people, PEPFAR has helped transform the global AIDS response. Today, some of the first babies born HIV-free with PEPFAR support are starting college. Millions of parents living with HIV have been healthy to nurture, protect, and teach their children along their journey to adulthood. And countless aunts, uncles, grandparents, cousins, and friends are still alive to enrich the next generation with their wisdom, support, and love. While our work is not yet done, PEPFAR has unequivocally made the world a safer and more secure place from HIV and other health threats.

Accelerating Progress Toward Achieving HIV/AIDS Epidemic Control

Building on the foundation of longstanding PEPFAR investments since 2003, the PEPFAR Strategy for Accelerating HIV/AIDS Epidemic Control (2017-2020) set a bold course for achieving control of the HIV/AIDS epidemic in high-burdened countries through laser-focused programs, quarterly analysis, and partner alignment for maximum impact. Under this Strategy, the U.S. government has supported several countries to reach documented HIV epidemic control, validated through the PEPFAR-supported Population-based HIV Impact Assessments (PHIAs) [Figure 1]. A series of additional countries are also on pace to achieve epidemic control soon. Two second-generation PHIAs, in Lesotho (Figure 2) and Zimbabwe (Figure 3), were able to be completed during the COVID-19 pandemic, of the ten such surveys that were originally planned. Their findings clearly demonstrate the achievement of community viral load suppression, exceeding 81 percent in women and with additional work to do for children and men. The other eight second-generation PHIAs are being deliberately launched in accordance with all COVID-19 safety precautions.

With PEPFAR support, several countries have also reached or surpassed the Joint United Nations Programme on HIV/AIDS (UNAIDS) 90-90-90 targets for 2020 – a critical milestone toward achieving the Sustainable Development Goal 3 target of ending the AIDS epidemic as a public health threat by 2030 – and many other countries are close to attaining these same targets.

Figure 1. PEPFAR-funded PHIA – Countries Showing Achievements toward the Global HIV SDG 90/90/90 Goals



*Lesotho results are viral load-adjusted; other countries are ARV-adjusted

Figure 2. 2020 Progress Toward 95-95-95 Targets in Lesotho by Age and Sex (Viral Load-adjusted Results)

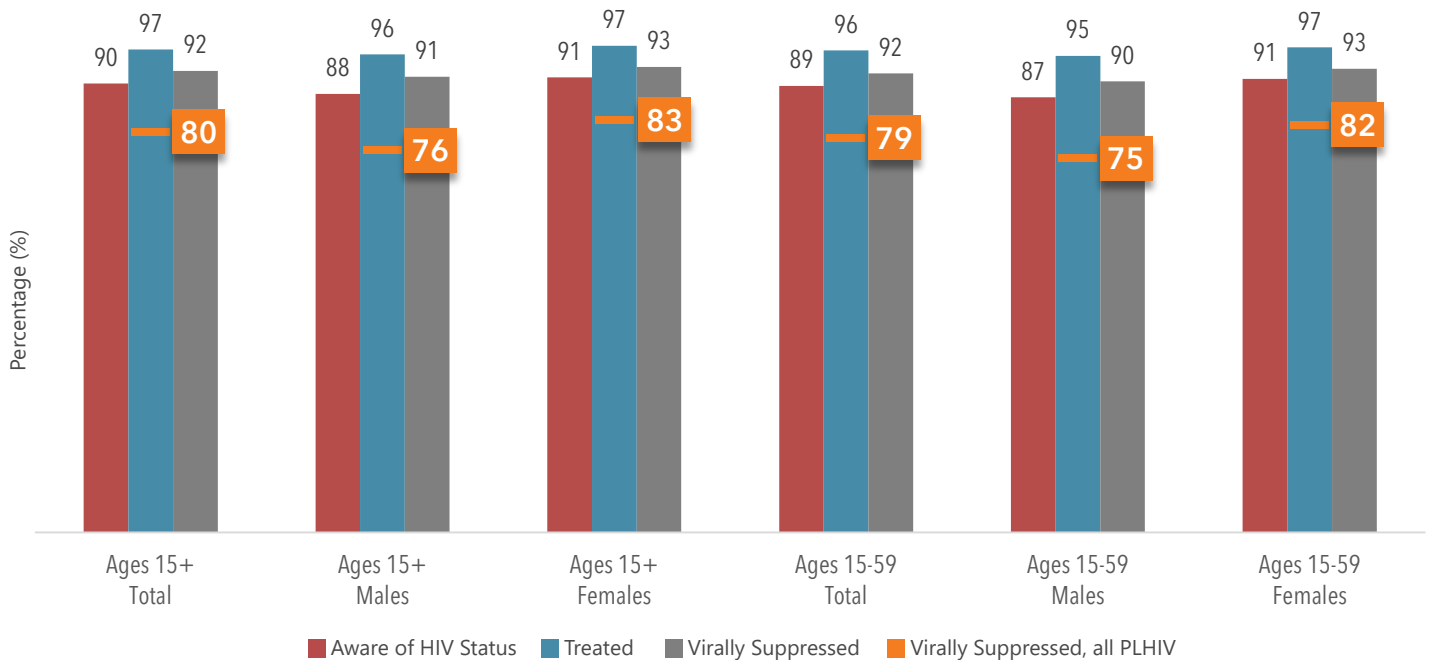
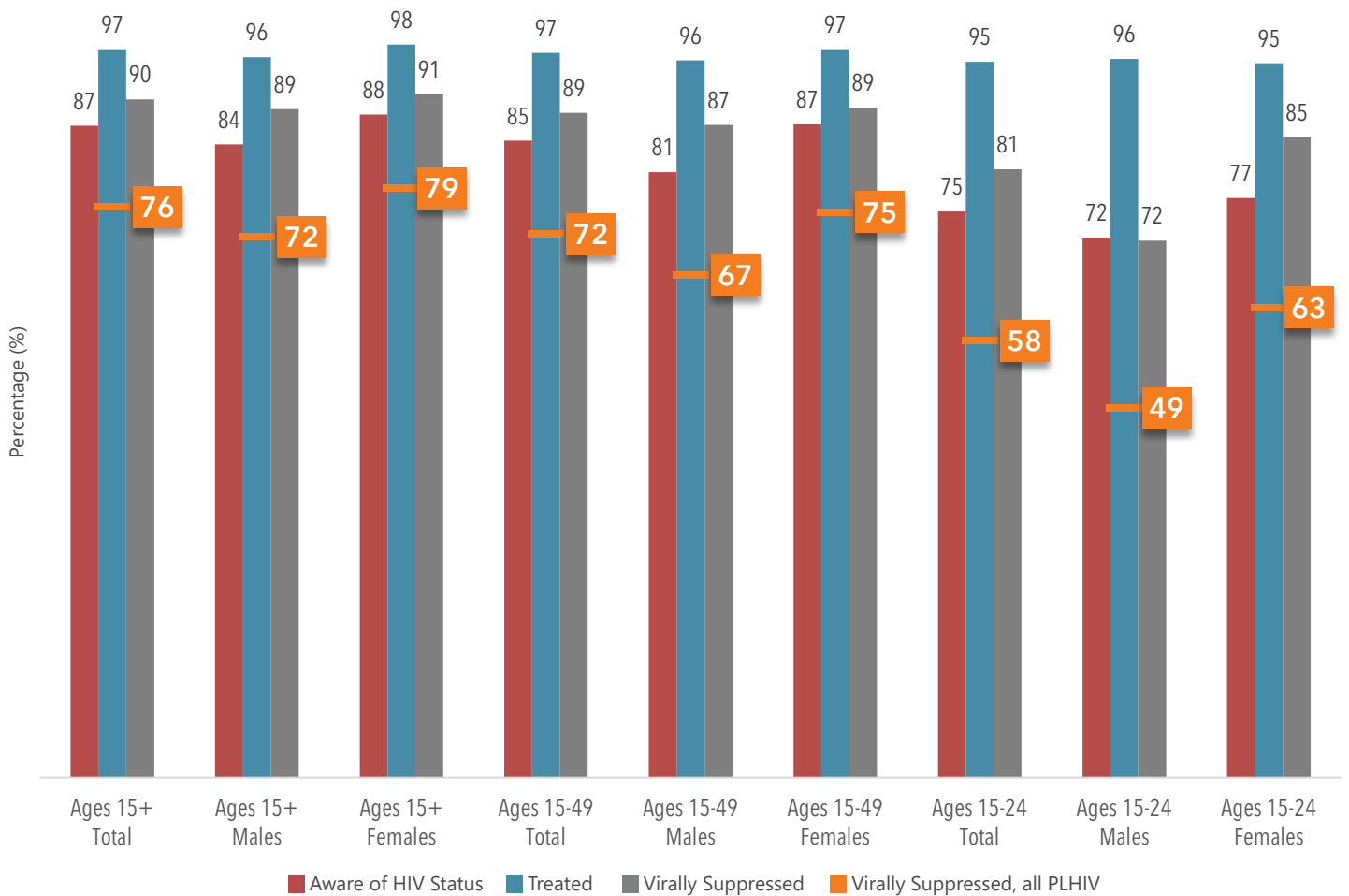


Figure 3. 2020 Progress Toward 95-95-95 in Zimbabwe by Age and Sex (ARV-adjusted Results)



Saving and improving lives

PEPFAR continues to deliver life-saving results, providing people-centered HIV prevention and treatment services to millions of women, men, and children and enrolling them in a continuum of care specific to their individual contexts and evolving needs. As of September 30, 2020, PEPFAR supports nearly 17.2 million people with life-saving antiretroviral therapy (ART) and, every year, the program continues to prevent more HIV infections among children, adolescents, and adults through a comprehensive package of proven interventions.

We continue to build on the robust HIV service delivery platform that PEPFAR has strengthened in partner countries to tackle the unique issues confronting people living with HIV, including cervical cancer, tuberculosis prevention, and other related diseases, so they can enjoy a normal lifespan. PEPFAR has achieved all of this progress virtually without increased financial resources in the last decade, as we have continually innovated and used data-driven decision making to deliver even more life-saving impact with every dollar we invest.

Strengthening responsive and resilient health care systems

Since its inception, billions of dollars in PEPFAR investments have supported the ability of partner countries and communities systems to deliver more effective, efficient, and sustainable health care. PEPFAR currently supports more than 3,000 laboratories, 28 national reference laboratories, and more than 70,000 health care facilities – the vast majority in Sub-Saharan Africa – which has created greater and higher quality diagnostic and surveillance capacity for HIV and other diseases, improving pandemic response and global health security. PEPFAR has also helped train nearly 290,000 health care workers to deliver and improve HIV care and other health services, creating an enduring infrastructure for partner countries to utilize for years ahead.

Every health care worker that PEPFAR trains, every laboratory that we strengthen, and every local organization that we capacitate to address HIV is also capable of confronting a myriad of other health challenges and supporting health care resilience in the face of adversity. Partner countries leverage these systems and this capacity to dramatically expand broader access to health care within their populations and to swiftly and effectively address other outbreaks, such as Ebola, avian flu, cholera, and COVID-19, all while protecting and advancing the gains made against HIV.

Leveraging partnerships for impact and sustainability

Partnerships remain the cornerstone of PEPFAR's work. PEPFAR continues to strengthen our relationships with partner country governments, civil society (including faith-based and community organizations), the private sector, multilateral institutions, including UNAIDS and the Global Fund to Fight AIDS, TB and Malaria (Global Fund), and people living with HIV.

In the last four years, PEPFAR helped launch a number of new public-private partnerships to address key gaps in achieving HIV/AIDS epidemic control, including the MenStar Coalition, the Go Further Partnership, and the Faith and Communities Initiative as well as significantly expanded our existing DREAMS Partnership. PEPFAR has also increased our investments in communities, including through community-led monitoring of our program by independent local organizations to pinpoint key barriers to HIV service access and continuity at the facility level and find innovative solutions to address them.

Responding to HIV in the context of COVID-19

To serve, support, and protect our HIV clients, communities, staff, and partners around the world in the context of the COVID-19 pandemic, PEPFAR has focused on four priority areas: 1) ensuring continuity of care for people living with HIV; 2) leveraging PEPFAR-supported health systems and infrastructure to protect the HIV gains; 3) reducing exposure of staff and HIV clients to health care settings that may be overburdened and/or sources for potential exposure to COVID-19; and 4) providing flexibility for PEPFAR programs in how to optimally serve our HIV clients in areas affected by COVID-19.

To preserve and expand access to life-saving HIV prevention and treatment services in the context of the COVID-19 pandemic, PEPFAR has issued at least weekly technical guidance to our country teams around the world since early March 2020. This guidance has supported the use of innovative approaches, such as preparing for ART continuity prior to lockdowns, accelerating multi-month (three- or, ideally, six-month supply) dispensing of ART, decentralized drug delivery, virtual engagement of our clients, and empowerment of communities to mitigate the impact of COVID-19 on our HIV programs.

PEPFAR and partner country HIV programs have shown great resilience in the context of the COVID-19 pandemic, but the pandemic has laid bare the depth and breadth of inequities still present across the globe and provided clear evidence that, when constrained, ministries of health and governments make choices that differentially impact specific program areas and specific populations. Prevention efforts were severely impacted, including programs for women and girls and those addressing marginalized populations, specifically key populations. This evidence, combined with the lack of consistent progress across the majority of key populations HIV programming over the past decade, illustrates clearly the need to increase investment in direct prevention and treatment services through peer-led, community-based organizations. This must be treated as the emergency it is, and resources must be realigned to restore prevention and treatment programming for the most vulnerable populations. Equally important is continuous process improvement to ensure all program implementation occurs as designed and intended.

This past year has made clear that the Global Fund and GAVI will need to fully reevaluate their investment strategy. As COVID-19 has disproportionately impacted upper-middle-income and high-income countries, HIV and TB programming will need additional support and investment that transcends their prior economic classification. In addition, co-investment support elements will need to be waived for a number of years. The economic impact of COVID-19 on low- and middle-income countries will disproportionately impact women and girls

putting them at unique and additional risk for both HIV and TB, and investments in these areas will need to be dramatically increased. Finally, the COVID-19 pandemic has reinforced the importance of critical partner country health policy shifts that were implemented over the past three years and increased investment in indigenous organizations, both of which remain critical for sustaining and propelling future progress.

Guiding Principles for the Next Phase of PEPFAR

As PEPFAR enters its next phase, three high-level principles and underlying priorities will help guide the program's ongoing efforts to support global progress toward ultimately achieving the Sustainable Development Goal 3 target of ending the AIDS epidemic as a public health threat by 2030.

1. Deliver Inclusive, People-Centered HIV Prevention and Treatment Services

To achieve and sustain control of the HIV/AIDS epidemic, PEPFAR must continue to deliver inclusive, people-centered HIV prevention and treatment services for millions of men, women, and children. These efforts can provide lasting, life-saving impact for the individuals PEPFAR serves through a focus on the following priorities.

- *Meet clients where they are with what they need through differentiated HIV service delivery to improve access, ART continuity, and outcomes*
- *Drive down HIV infections, including for key affected populations, through robust, targeted prevention and care programs embedded within the community*
- *Achieve durable viral suppression for clients on ART, including the young and/or asymptomatic, to improve their health and prevent onward transmission*
- *Sharpen approaches for case-finding, recency testing, public health surveillance, and outbreak response to quickly identify and contain new HIV cases*
- *Pinpoint and address key barriers to HIV service access, uptake, and continuity, including through community-led monitoring and other means of direct client engagement*
- *Embrace innovation, including rapidly onboarding new scientific breakthroughs and technologies*

2. Support Resilient and Capacitated Partner Country Health and Community Systems, Communities, and Local Partners

PEPFAR must continue to strengthen the partner country and community systems that are required to sustainably control the HIV epidemic, and which can be leveraged to deliver effective, efficient, and sustainable health care. These investments can enhance global health security by not only equipping countries to confront the HIV epidemic, but also to address other outbreaks, through a focus on the following priorities.

- *Bolster the resilience of partner country health systems and communities to avoid HIV resurgence, tackle other health challenges, expand overall access to health care, and adapt to adversity*
- *Evolve greater responsibility for, and control of, the HIV response to partner country governments and communities to support and monitor enduring impact and sustainability*
- *Institutionalize robust and transparent partner country data capacity to drive and monitor HIV response, disease detection, and outbreak control*
- *Embed greater health service delivery in the community through local, indigenous partners, enabling their comparative advantage in targeted service delivery and resilience in the context of adversity*

- *Institutionalize a next generation, client-centered health care supply chain that is more responsive, efficient, and sustainable, including through private sector partnerships*
- *Capacitate an enduring cadre of partner country public health leadership*

3. Partner for Greater Impact, Burden Sharing, and Sustainability

PEPFAR, leveraging the power of its position with the U.S. Department of State to convene across the U.S. government and multiple sectors, must continue to forge and foster partnerships with partner country governments, civil society (including faith-based and community organizations), the private sector, multilateral institutions, and people living with HIV. These partnerships can enable PEPFAR to broaden, deepen, and institutionalize its impact with greater effectiveness, efficiency, and sustainability, through a focus on the following priorities.

- *Achieve strategic alignment and complementarity across all available HIV and broader health resources to maximum impact and value of PEPFAR, Global Fund, and partner country investments*
- *Link HIV/AIDS service delivery plans to relevant health issues and coordinate with key multilateral institutions in support of Sustainable Development Goal 3*
- *Capitalize on private sector core capacities, investments, and innovations for greater program efficiency and effectiveness*
- *Support and utilize the unique assets and capacities of communities, including faith-based organizations, civil society organizations, and people living with HIV, to drive meaningful and sustained impact*
- *Leverage the very best of American capacity and ingenuity, including the U.S. scientific community, academic institutions (including HBCUs), and faith- and community-based organizations*
- *Coordinate with other development donors to optimally leverage their broader investments and further bolster American leadership on improving the health of the world's most vulnerable*

As we approach the fortieth anniversary of the first reported cases of AIDS, it is breathtaking to see how far the global community has come in saving and improving millions of lives touched by the HIV epidemic and transforming the response to it around the world. But our work is not yet complete. It will take all of us, pulling together, to achieve inclusive, resilient, and sustainable control of the global HIV epidemic. The U.S. government, through PEPFAR, is poised to continue leading this historic endeavor.