



# Follow up to TAC 3 recommendations

Washington DC, October 14, 2009



# Recommendation A

- TAC encourages PAHO to continue to strengthen the existing National AIDS Programs through:
  - a) the **promotion of a M&E system,**
  - b) **Research on epidemic trends,**
  - c) **On-going training of NAP staff,**
  - d) **Promoting increased input in NAP from relevant sectors of civil society.**

Support to information systems,  
integrated biological and behavioral  
studies (Costa Rica, Panama,  
Nicaragua, Guatemala, Venezuela,  
Colombia, Bolivia,...)

Universal access data and analysis  
Training in surveillance

Civil society:

Framework for collaboration.

Consultations with CS: Costa Rica,  
Mexico

Support to FORO comunitario

Strong CS participation in all regional  
and subreg processes (e.g.,  
MARPs workshop Panama,  
Caribbean), and in countries



# Recommendation A

- TAC encourages PAHO to **keep up with new challenges** in prevention, care and treatment of HIV/AIDS and related conditions, such as fostering discussion on male circumcision; emerging ARV drug resistance; disinhibition.
  - IKM on relevant HIV issues: “semana virtual”
  - HIV Drug resistance (national plans in 11 countries)
  - Updating guidelines (PMTCT, Tx)
  - Plan for improvement of retention and quality of care



# Recommendation A

- TAC encourages PAHO to ensure that the actions on **prevention and treatment** should be **inextricable linked**. Work toward the goal of universal access to ARV therapy, including improved programs for positive prevention, for persons living with HIV
- Elimination initiative for vertical transmission of HIV and congenital syphilis
- Essential package for comprehensive care in MSM
- Introduction of integrated approach to clinical care (including prevention) – AIPSA (IMAI)
- Complementary HIV module for children (as part of AIEPI)



# Recommendation B

- TAC urges PAHO to **strengthen** its **emphasis on prevention** based on scientific research
- **Prevention** should be underlined as a **cross-cutting theme** within every critical line of action.
- **Programs** that promote **prevention** of HIV should be **long-term** rather than short, sporadic, interrupted campaigns
- Preventive programs that should be scaled up include:
  - a) **Sexual health programs for young people** (including persons in schools and universities as well as out-of-school youth)...

Standards and recommendation for implementation for comprehensive services for:

- MSM
- Transgender (in 2010)
- HIV and Drug users (in 2010)

Follow up of **Mexico Declaration** of Ministers of Health and Ministers of Education – RDG workplan

- **NORAD project** focusing on Youth
- Integration of HIV prevention in the Vaccination Week of the Americas
- Finalized Document on SRH and programmatic linkages



# Recommendation B

- The practice of prevention must emphasize **early detection of HIV infection** (voluntary, free of cost, and confidential).
- Research related to prevention should include **acknowledgement of structural causes of risk and vulnerability**, e.g. gender discrimination, gender based-violence, poverty and exclusion.

- Inter programmatic work with GEH
- Gender analysis of communication campaigns
- Review our key docs to ensure gender-sensitivity
- Assist countries in GF proposals (gender-perspective)
- Gender-based violence study in Central America
- ECOSOC meeting/background document
- Inter programmatic actions in Human Rights
- Documentary “Translatina”



# Recommendation B6c.

- Preventive programs that should be scaled up include:
  - Guarantee a **100% coverage of perinatal care**, including HIV and syphilis testing and counseling as well as treatment access for all pregnant women and their children.
  - Where scientific evidence is not available, PAHO should support **well-designed research** in the area of prevention. Studies and interventions should be focused on the most vulnerable groups and/or groups with demonstrated high incidence and or prevalence rates of HIV infection.
  - **Confidential testing and counseling** to ensure universal access to HIV diagnoses and follow-up of HIV-infected persons in every PAHO country...

- Elimination initiative
- Direct country support and partnership with UNICEF
- Clear programmatic focus on MARPs (MSM, TG, DU, SW, PP)
- Focus on Provider-initiated T&C and Rapid Testing methods
- Hazte la prueba initiative



# Recommendation C

- PAHO must maintain the strong emphasis on **reduction of stigma and discrimination** caused by the condition of living with HIV in the context of HIV/AIDS prevention, care and treatment.
- IKM (Publications, press releases, videos...) addressing stigma and discrimination, with a focus on MSM, Trans and Sex Workers.
- Human rights group - use of legal instruments
- “Translatina” documentary,
- “RED SALUD” debate with journalists on sex work and health, video on MSM access to health.
- Support to REDTRASEX, support and award to REDLACTRANS,





# Recommendation D

- **Training of health personnel and community-based workers** in all aspects of prevention, care and treatment must be promoted and improved.
  - In **training** and in practice on the field, programs to **reinforce adherence, monitoring of resistance** and the **dissemination of standardized treatment guidelines**, including guidelines for second-line and salvage drug therapy must be emphasized.
- IMAI / AIPSA
  - IMCI / AIEPI
  - IMAN (adolescents)
  - Dissemination of guidelines and review of new evidence to update new guidelines (pediatric, adult, PMTCT)
  - Participation in revision of guidelines at global level (regional experts)
  - HIVDR – a clear priority
  - Strengthening of collaborations with others actors (Gorgas RHTC, CHART, ACOFAEN, USAID, CDC)
  - Academic partnerships



# Recommendation F

- It is vital for **surveillance** and tracking of **ARV** and TB **drug resistance** to be strengthened in PAHO member countries.

## HIV Drug Resistance:

- Advocacy
- Capacity building
- Development of national plans
- Lab capacity and network development
- Technical cooperation
- Resource mobilization (CIDA, Gates)



# Recommendation G

- PAHO should encourage Governments to continue **strengthening alliances** and **synergy with other sectors**, notably the **education** and **labor** ones, in the interest of prevention, care, and treatment of HIV and reduction of stigma and discrimination.
- Mexico Declaration on comprehensive Sexuality Education
- Joint work with UNESCO and other UN partners



# Recommendation H

- **TAC** acknowledges the value of the **strategic PAHO Revolving Fund**, which helps several countries to procure diagnostics, medications and other supplies and **recommends an evaluation** of the strengths and weaknesses of such Fund

- Strategic Fund audit completed Jan 2009
- 13 countries purchasing ARVs in the biennium
- Total value of procurement: \$ 17 Mill
- New countries: Argentina and Turks and Caicos, DOR;
- Costa Rica and Chile under discussion
- Discussions with sub-regional entities (ORAS, Mercosur, SISCA) ongoing.



## SUMMARY...

- TAC recommendations helped to refocus our work
- we live in a dynamic and rapidly changing environment...

- Increased country focus and capacity
- Advanced in areas according to Division of Labor (Surveillance and HIV DR, TX guidelines, PMTCT)
- integration of services (Pediatric HIV prevention and care, elimination of vertical transmission of HIV and syphilis, AIPSA)
- Focus on MARPs
- Human rights approach advanced
- Important inter-programmatic work (HR, TB, Gender, HS..)
- Strong partnerships (UN family, Civil society, technical partners..)
- Strong link with education sector

- Major areas still needing increased focus:
  - Integration of HIV into services with a primary health care approach
  - Quality of services
  - Addressing access barriers, including Stigma and Discrimination
  - Clear formulation of prevention response with focus on MARPs
  - Human resource constraints including training