# SA AIDS CONFERENCE 2023 ACT, CONNECT and END the EPIDEMIC

#### THE OPENING PLENARY: DEPARTMENT OF HEALTH



Referring to the 95-95-95 statistics, the Minister revealed that South Africa is currently at 94 percent of people living with HIV who know their status; 77 percent of those who know their status and are on antiretroviral treatment; and 92 percent of those on treatment who have a suppressed viral load.

He added that it remains imperative "that we keep in mind that in 2025, it will be the deadline year for the 95-95-95 targets, which are outlined in the current Global AIDS Strategy" and emphasised that in the remaining two years, South Africa needs to accelerate its efforts in order to meet the targets.

The Minister described South Africa's launch of the National Strategic Plan for HIV, TB and STIs for the period 2023 to 2028.(NSP) as a "game-changer" emphasising that the strategy places people and communities at the centre of the country's efforts to overcome inequities in the response to HIV, tuberculosis, and sexually - The 11th SA AIDS conference took place in Durban, Kwazulu-Natal province from the 20th -23rd June 2023 under the theme: Act, Connect and End the Epidemic.

Health Minister, Dr. Joe Phaahla acknowledged that South Africa has made progress in achieving some of the HIV targets but the country remained "far off in ensuring people are on treatment and lowering their viral suppression" adding that the country lags behind reaching these targets among males and children. "More effort is needed to place and retain people on treatment."

transmitted infections, as well as to end AIDS, hence, dubbed "The People's NSP".

#### "It is a game-changer in many respects. It was created to be pandemic-ready, and it delves deeper into social and structural drivers of the epidemics." Minister Joe Phaahla

The five-year plan provides a strategic framework for a multi-sectoral approach that is people-centred to eliminate HIV, TB and STIs as public health threats by 2030.

Concluding his remarks, Minister Phaahla said that "this NSP emphasises the need to break down barriers and maximise equitable and equal access to services through resilient and integrated health systems to guarantee the health and social protection of all South Africans."

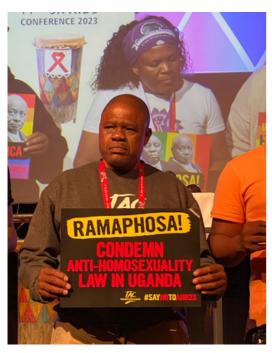
#### THE OPENING PLENARY: CIVIL SOCIETY

"Our people are dying. We should not allow them to die when we have a successful ARV programme. We can't. Let's not lose this investment where we can live longer."

This was the plea from the co-chair of the South African National AIDS Council (SANAC), Steve Letsike during one of the opening remarks renderedon behalf of civil society organisations in South Africa.



Letsike shared that she had just returned from visiting the Hillcrest AIDS Trust Centre, an AIDS hospice in the Kwazulu-Natal province hours prior to the opening of the SA AIDS conference. She added that the youngest person living there was 14-years old and that 80 percent of the patients admitted, who are living with HIV, are at the end stage of their lives. This is despite the fact that South Africa has the world's largest ARV treatment programme.





Other key issues raised by civil society organizations include the structural drivers of the HIV and TB epidemic with Letsike driving home the harsh reality of the lives of many adolescent women and young girls in South Africa.

"The same \*Mbali who is 22 years old, is the same Mbali who is HIV positive, with a 5-year-old child, who has been raped multiple times in her young life and is going through intimate partner violence from the father of her child. "

Solutions therefore need to take an integrated approach to ensure that at each level, from the community to the clinic, to the police services where Mbali seeks help, her needs are met holistically, " added Letsike.

Organisations also expressed their condemnation on the legislative move by the Ugandan government to criminalise same-sex relationships urging intervention by the South African government. They undermine the health agenda," Letsike said, "and they undermine human rights of citizens in those countries. Injustice there means injustice everywhere. For all of us."

The decriminalisation of sex work was also one of the themes fiercely discussed at the conference, with activists calling for the speedy passing of the Amended Sexual Offences and Related Matters Bill. This comes after progress was halted in December 2022 to allow for further consultations.

# UNAIDS: SOUTH AFRICA'S LEADERSHIP IN THE GLOBAL HIV RESPONSE



#### South Africa's Leadership in the Global HIV Response

Dr Angeli Achrekar, UNAIDS Deputy Executive Director, <u>Programmes</u>

11th SAAIDS Conference Opening Plenary Tuesday 20 June 2023



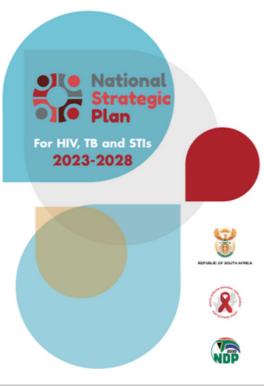
In a video message titled: South Africa's Leadership in the Global HIV response, at the opening plenary at the conference, UNAIDS Deputy Executive Director, Angeli Achrekar, shared and reinforced the positive contribution of South Africa in the global response to the fight against HIV as well as the advances made to date.

Congratulating South Africa on its new National Strategic Plan (NSP), the Deputy Executive Director said that "there is strong alignment between the NSP and the Global AIDS strategy, which features bold targets so that every country and community can be on track to end AIDS as a public health threat by 2020

public health threat by 2030.

Sharing statistics on the rate of new infections across southern Africa, Achrekar indicated that the region has showed a decrease with South Africa showing a decline of 50 percent of new HIV infections between the period 2010 to 2021. While this is significant progress, sadly though, adolescent girls and young women account for 30 percent of new HIV infections.

Achrekar emphasised that to address this "we must target interventions to the populations most at need."



South Africa has also made progress in reducing the number of AIDS -related deaths with statistics showing a steep decline by 62% for the period 2010 to 2021. According to Achrekar, this is a testament to "great leadership" and commitment to the fight against HIV/AIDS in the country.

" It will take all of us working together in close collaboration with governments, with communities, and with partners to ensure we sustain the HIV response. We need to move urgently forward together."

> Concluding her presentation, Achrekar highlighted six key actions countries must take in order to end AIDS by 2030.

These include:

- 1. political will and leadership to end inequalities,
- 2. a greater push for the expansion of HIV prevention,
- 3. Realize human rights and gender equality and decriminalisation of key populations,
- 4. support and effectively resource community-led responses,
- 5. address inequalities in prevention, testing and treatment access and outcomes and;
- 6. ensure sufficient and sustainable financing.

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## MESSAGE OF SUPPORT FROM THE UN RESIDENT COORDINATOR



While progress has been made, the RC shared concerns that the world remains off track to ending AIDS by 2030 saying the curves are simply not bending fast enough to stop the AIDS pandemic. Last year, approximately 200 000 South Africans became newly infected with HIV and 51 000 died from AIDS-related illnesses with partuclar concern around the fact that infections and deaths are following the fault-lines of inequality.

Focusing specifically on adolescent girls and young women, Muffuh urged participants and activists that the time to act is now as women and girls account for the majority of new infections in South Africa. Adolescent girls and young women aged 15 to 24 years are four times more likely to be infected with HIV than boys and men of the same age.

#### "We must deepen our push to eliminate the disproportionate vulnerability of girls to HIV. "

The RC highlighted the impact of education initiatives such as Education Plus, the ESA Commitment and Generation Unlimited, in mitigating the risk to infection for key populations. He said that through COVID and HIV we have seen the protective effect of education and that keeping girls in secondary school can reduce their risk of HIV infection by a third or more. The Resident Coordinator (RC) for the UN in South Africa, Nelson Muffuh, delivered a message of support at the opening plenary of the SA AIDS conference. The RC said that the UN stands in solidarity with the 8 million people in the country living with HIV and believes that South Africa is a beacon for the rest of the world about what is possible, when "leaders are acting boldly and collectively, bringing together cutting-edge science, delivering services that meet the people's needs, protecting human rights and sustaining adequate financing."

Continuing on the topic of financing, the RC congratulated the South African government for financing 69% of its HIV response adding that the UN looks forward to working with South Africa and its partners to implement the recently approved National Health Insurance Bill to address health care financing challenges.

He hoped that these initiatives, would empower adolescent girls enough to make the right decisions about their bodies and reduce their risk of unintended and early pregnancy.

It is evident that there is a correlation between inequalities and pandemics. Sharing his sentiments, Muffuh emphasised that gender inequalities and harmful gender norms are driving HIV. Gender based violence remains a scourge in South Africa and this increases a woman's risks of HIV infection and constraints the access of women living with HIV to lifesaving services. Unsurprisingly and sadly, women subjected to intimate partner violence face up to a 50% higher chance of acquiring HIV.



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#### **U EQUALS U**

UNAIDS joined PEPFAR, USAID, CDC South Africa, Peace Corps and the National Department of Health at the launch of the U=U campaign. During the session, UNAIDS South Africa Country Director, Eva Kiwango explained the essence of U=U adding that scientific studies concur that U=U does WORK.

U=U, which stands for Undetectable = Untransmittable, is a vital public health message for the HIV response. Undetectable = Untransmittable means that people living with HIV who achieve an undetectable viral load through consistent antiretroviral treatment and monitoring cannot transmit HIV.

The message of U=U also helps in combatting the stigma which people living with HIV can face in healthcare settings and wider society.

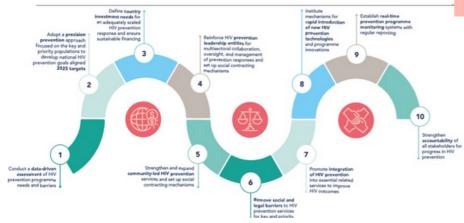
PEPFAR South Africa Coordinator, Suzy Jed, added that South Africa plays a vital role in the fight against HIV as " what happens here in South Africa affects the region and the entire world so we must acknowledge the incredible work South Africa does in the field of HIV."







#### How Will We Get There – 10 Point Action Plan



#### **HIV PREVENTION 2025**

UNAIDS Country Director for South Africa, Eva Kiwango speaking at a session on HIV prevention, announced support for the development of a South Africa prevention coalition roadmap, prevention campaign and scorecards.

These tools will be used to help better monitor HIV response and focus investment on where it'll bring the greatest impact and sustainability.



Speaking at the session, UNAIDS Country Director, Eva Kiwango said that "the gap between adults and children is widening, it's an inequality that should break all our hearts as no baby should be born with HIV and no child should be without treatment."

These sentiments were supported by UNICEF South Africa, Resident Representative Christine Muhigana and partners including the Department of social Development who added that "We can win this fight and ensure that children are on life-saving treatment."

"This plan needs to work! Why? Because the statistics for children living with HIV and not on treatment are heartbreaking." Eva Kiwango



# RAISING AWARENESS: THE GLOBAL ALLIANCE TO END AIDS IN CHILDREN

UNAIDS together with UNICEF and partners including the South African National AIDS Council and the Department of Health raised awareness on the Global Alliance to end AIDS in children by 2030. The session provided audience members with an understanding of what the Global Alliance is including the four pillars.

Globally, only half (52%) of children living with HIV are on life-saving treatment, far behind adults where three quarters (76%) are receiving antiretrovirals.





In 2021, there were an estimated 160,000 new HIV infections in children (0-14 years)

The number of children on

treatment is not increasing, and 800,000 children (0-14 years) and 400,000 adolescents (15-19 years) living with HIV are not on treatment

In addition to the United Nations agencies, the Alliance includes civil society movements, including the Global Network of People living with HIV, national governments in the most affected countries, and international partners, including PEPFAR and the Global Fund.

Twelve countries have joined the Alliance in the first phase: Angola, Cameroon, Côte d'Ivoire, the Democratic Republic of the Congo (DRC), Kenya, Mozambique, Nigeria, South Africa, Uganda, the United Republic of Tanzania, Zambia, and Zimbabwe.

The official launch for South Africa will take place later this year.

While 81% of pregnant v

living with HIV were receiving

antiretrovirals in 2021, only 52% of children living with HIV are

currently receiving ART

# **RESEARCH LITERACY ZONE**

UNAIDS participated in the Research Literacy Zone which included engaging and working with young women in research, and broadly about the importance of ensuring that the priorities and perspectives of AGYW inform HIV prevention research that focuses on this key population. This included discussions on the value of amplifying and centering AGYW voices in HIV prevention research, and AGYW-centred stakeholder engagement advisory mechanisms.

The Zone session was highly informative and engaging. The rationale and considerations for engaging AGYW in HIV prevention research, and discuss what this engagement means for AGYW and research communities alike in Africa was insightful.







# **PREVENTION: YOUNG WOMEN**

The Young Women's HIV Prevention Council was launched at SAAIDs 2023 at the Research Literacy Zone led by the Coalition to Accelerate and Support Prevention Research (CASPR), partners American Public Health Association (APHA) and Global Advocacy for HIV Prevention (AVAC).

Having adolescent girls and young women (AGYW) advocates invested and involved in HIV prevention and sexual reproductive health spaces, particularly those actively involved in advisory groups be part of a regional and global advisory mechanism that will also serve as the primary point of contact for product developers, sponsors, researchers and policymakers on AGYW civil society engagement in HIV research.

The goal of the Council is to ensure connectivity, linkages, and synergies exist amongst advisory mechanisms that serve AGYW's needs and priorities. This structure will support young women to become leading advocates for their rights and direct efforts related to advocacy, policy, and grassroots mobilization and influence.

These young women are at the forefront of addressing systemic issues related to biomedical HIV prevention research and informing research, product introduction, rollout, and equitable access.



## THE SITUATION ROOM

Lifutso Motsieloa from the South African National AIDS Council presented the South African Situation room which is a UNAIDS concept developed with support from the Global Fund.

This platform combines data from many sources on HIV, TB, STIs, and structural barriers to better visualize trends and monitor the national response.

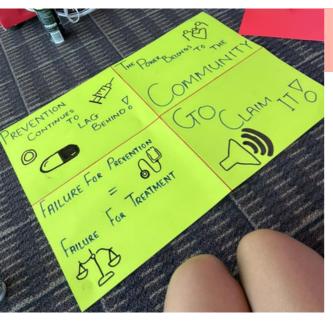
The purpose of the Situation Room is to enable policymakers and programme managers at each level to access relevant health-related data in an easy and interactive manner. This means using automated, frequently updated data visualization tools that are mobile and accessible any time.

## **HIV-RELATED INEQUALITIES**

A session focusing on HIV-related inequalites was chaired by the South African National AIDS Council. UNAIDS South Africa's National Programme Officer, Eric Motau presented on the intersecting HIV inequalities that prevent progress to health outcomes using the Inequalities Framework.

The session was well attended and amplified the importance for sharp focus in the NSP on HIV, TB and STIs 2023-2028 on tackling the HIV inequalities that impedes progress to ending AIDS as a health threat.





## THE COMMUNITY VILLAGE

UNAIDS sponsored the community village as well as 15 youth and People Living with HIV from Kwazulu-Natal to attend the conference.

Young women passionately advocated for a number of issues including the abolishing of the pink tax as well as the right to decide how to use their bodies and the decriminalisation of sex work.

The community village provides an opportunity for NGO's to showcase their work and also increase accessibility to youth on issues relevant to them.



# STRATEGY THIRD TERM



The hybrid session, with primarily in-person participants was attended by more than 200 delegates. Though the session was attended by predominantly people from the mining industry, delegates included people from different sectors of the economy including government, private sector, non-governmental organizations, development partners among others.

They were orientated on the South African Mining Industry's framework in preventing and managing HIV AIDS and TB, provided with highlights on Response of the World of Work to the new NSP.

The most significant part of this session was the Launch of the new Masoyise Health Programme Strategy for 2023-2024 which was supported by ILO, WHO and UNAIDS.

Overall, the programme is a multi-stakeholder initiative with representatives of Minerals Council member companies, trade unions (NUM, Solidarity, AMCU, UASA), government (Department of Health and Department of Mineral Resources and Energy, the Mine Health and Safety Council, National Health Laboratory Service and National Institute of Occupational Health), SABCOHA and multilateral organisations including UNAIDS, ILO and WHO.

## THE MASOYISE HEALTH PROGRAMME

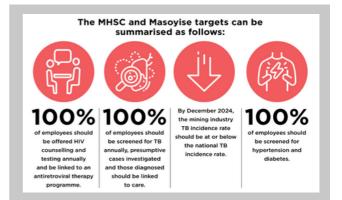
The Masoyise Health Programme in collaboration with ILO and the Mine Health and Safety Council (MHSC) hosted a session on 'Sustainable Responses to HIV, AIDS and TB in the World of Work.' The purpose of this session was to create awareness on the South African mining sector's achievements in fighting HIV, AIDS, and TB; reflect on challenges faced in HIV, AIDS and TB response and initiatives taken to combat these challenges; and launch the 2023-2024 Masoyise Health Programme Strategy.

Among other presentations during the session, was one on the strategy to 'take Masoyise beyond the mining industry and learning from other industries/public.' As a matured workplace programme, the stakeholders of Masoyise believe they can share their experiences and learn from others through a specific approach to Share; Learn; Apply; and Assist (SLAA). Masoyise Health Programme and its stakeholders will share their experiences; learn from others; apply lessons for further improvement of the Masoyise Health Programme; and assist other sectors where required and possible.



The vision of the programme is: "A mining industry that protects and maximises the health and wellness of its employees."

Its goal is to reduce the impact of TB, HIV, Occupational Lung Diseases (OLDs) and Non-Communicable Diseases (NCDs) as occupational health threats in the mining sector.



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# DIRA SENGWE LIFETIME ACHIEVEMENT

Medical doctor and scientist, Professor Jerry Coovadia received the Dira Sengwe Lifetime Achievement Award for his formidable and influential determination that paved the way for HIV treatment in South Africa during an era characterised by a denialism of the AIDS epidemic.

Professor Hoosen "Jerry" Coovadia is an internationally renowned and leading South African researcher in maternal and child health and has led ground-breaking research in mother-to-child transmission of HIV.

# THE GENDER ASSESSMENT

The recommendations from the Gender Assessment Report was shared by UNAIDS community Support Advisor, Tabita Ntuli at The GBVF and HIV Interlinkages Symposium session. The session aimed to:

- Reflect the impact of gender inequalities on key and vulnerable populations in the country.
- Share and reflect on strategies, approaches and tools that increase accessibility to comprehensive services for affected individuals and populations.
- Explore mechanisms for taking lessons learnt to scale through improved harmonised policy, advocacy and implementation.



# FROM THE THE SIDELINES



"Mayor and Councillor of eThekwini Municipality, Mxolisi Kaunda (second from the right) described the U equals U campaign as "groundbreaking".

## MAYOR LAUNCHES U=U

City of eThekwini Mayor, Mxolisi Kaunda launched the U=U on the sidelines of the South African National AIDS Conference in Durban on the 20th of June 2023. The campaign was launched by the City together with People Living with HIV, supported by SANAC, National Department of Health and UNAIDS.

The campaign will promote adherence to ARV treatment and viral suppression among people living with HIV.

#### JULY 2023

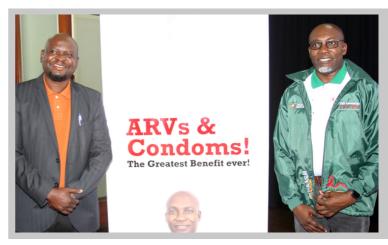
It was developed and launched as part of the combination prevention strategies to prevent new HIV transmission to sexual partners and to enhance Elimination of Mother to Child Transmission (EMTCT). Thus, strong condom programming and voluntary medical male circumcision, Pre-Exposure Prophylaxis and Post-Exposure Prophylaxis are all essential for ensuring primary prevention of HIV and STIs.

The campaign is a media and community mobilisation campaign using various media platforms, including community radio stations, social media, mobile billboards and community dialogues led by People Living with HIV sector in eThekwini.

"For people living with HIV, reaching an undetectable viral load improves their health and prevents HIV sexual transmission. An undetectable viral load can be reached and maintained if one starts on ART and is able to consistently take their medication as prescribed" said the Mayor.

"Youth is our target ... and we must encourage them to get tested and if they test positive we must encourage them to take treatment" - Mayor Mxolisi Kaunda





"Dr Siyabonga Nzimande, chairperson of eThekwini Civil Society, said that they wanted to "educate people who were HIV positive about the importance of being on treatment to suppress their viral load."

Dr Thembisile Xulu, CEO of the South African National Aids Council, said that cities have a critical role to play in the fight against the spread of HIV. The campaign emphasises reaching the 95-95-95 global targets. It further encourages people living with HIV to commence, maintain or resume treatment and for those without HIV to use condoms, be faithful to their partners and to regularly get tested for HIV.

## HAPPY 20TH BIRTHDAY PEPFAR!

UNAIDS, government officials, activists, medical scientists, researchers and civil society friends joined the United States of America's Consular service in Durban in celebrating, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) 20th anniversary in the global fight against HIV/AIDS.

In January 2003, former US President George W. Bush announced the establishment of PEPFAR during his State of the Union Address, leveraging years of HIV/AIDS research, coordinated humanitarian effort, bipartisan support from Congress, and engagement from community and faith-based organizations, and the private sector to create an unprecedented response to a global health crisis. Today, PEPFAR supports nearly 65 million people with HIV treatment and testing services, providing more than 20 million men, women, and children with life-saving antiretroviral treatment (ART).





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#### **PICKET FOR LOVE**

Civil Society Forum (CSF) brought the streets of Durban into a beehive of activity during the "Love Picketing" March for Sexual and Reproductive Health and Rights. The march took place on 20 June 2023 ahead of the official opening of the 11th SA AIDS Conference bringing together over 300 members of civil society in all the diversities.

Presenting the Memorandum to Health Minister Joe Phaahla, Mmapaseka Steve Letsike, in her capacity as SANAC Civil Society Forum Chairperson, said South Africa has made strides to provide access to sexual and reproductive health commodities, but that this access cannot be enjoyed without rights and comprehensive access for ALL, regardless of gender expression.

She added that these rights can only be enacted by following a gender transformative approach to build knowledge and skills to be popularised within the communities they should serve and embedding the principle of judgement free services across all healthcare and social service providers.

Key recommendations from the memorandum include:

South Africa takes the necessary measures to prevent all forms of violence by eliminating the root causes of violence, including homophobic discrimination, preconceptions and stereotypes based on gender identity, real or perceived sexual orientation, and prejudices of masculinity and virility, irrespective of their source.

South Africa takes measures to guarantee effective and timely access to justice for all victims of sexual violence and scale up models that work, such as Thuthuzela Care centres that provide a one-stop-point of care for survivors.

Campaigns address the root causes of violence against women and LGBTQI+ individuals, combat genderbased stereotypes, raise awareness of the unacceptable nature of this violence, and help people to understand

that it represents a grave violation of the rights of all people in Africa.

South Africa ensures that organisations engaged in SRHR service provision, education and advocacy are adequately resourced and directly participate in an ongoing manner in prevention activities, and in all stages of the development, implementation, and monitoring of national SRHR action plans.

Schools must be safe spaces hence the need for swift access to justice for adolescent girls and young learners who fall pregnant. They should be comprehensively supported to complete their schooling, and where a teacher is implicated in a learner pregnancy legal redress must be swift.



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# **IN PICTURES**