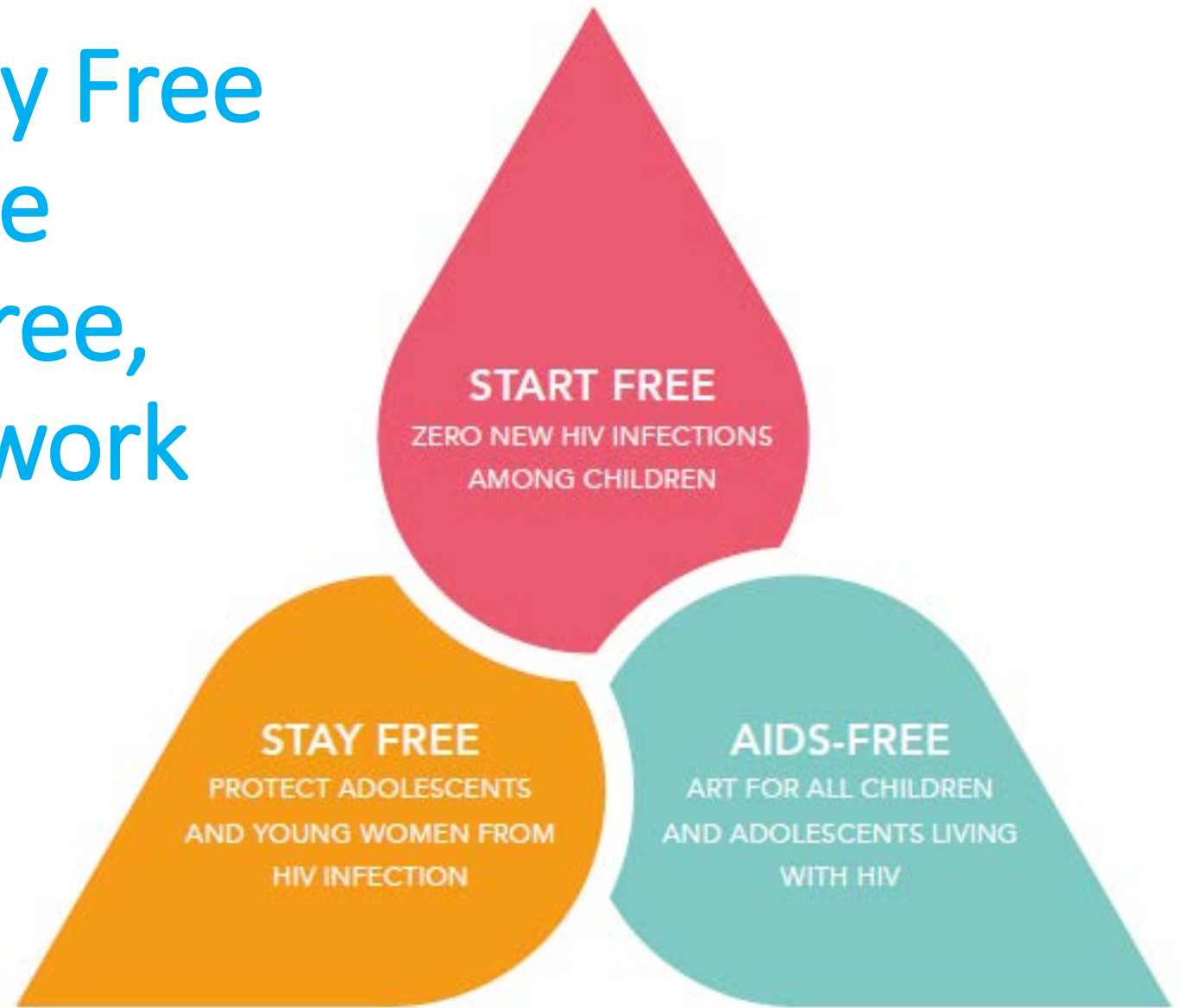


Linking to the Stay Free Component of the Start Free, Stay Free, AIDS Free Framework

WHO Meeting on Implementing the
2017-2021 Framework for VMMC
Durban, South Africa
27 February 2017

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The Start Free Stay Free AIDS Free Framework is:



- A new collaborative agenda, globally co-chaired by UNAIDS and PEPFAR, to accelerate the end of the AIDS epidemic among children, adolescents and young women by 2020
 - It is founded on the belief that children, adolescents and young women have a right to Start HIV Free, Stay HIV Free and be AIDS-Free
 - It builds on the progress made and lessons learned from the Global Plan toward elimination of new infections among children by 2015 and keeping their mothers alive
 - The Framework calls for a full-scale-up by 2018, leading to 2020

Super-fast track targets for children, adolescents and young women



START FREE

- Eliminate new HIV infections among children by reducing the number of children newly infected annually to less than 40 000 by 2018 and 20 000 by 2020.
- Reach and sustain 95% of pregnant women living with HIV with lifelong HIV treatment by 2018

STAY FREE

- Reduce the number of new HIV infections among adolescents and young women to less than 100 000 by 2020.
- Provide voluntary medical circumcision for HIV prevention to 25 million additional men by 2020, with a focus on young men

AIDS-FREE

- Provide 1.6 million children (aged 0–14) and 1.2 million adolescents (aged 15–19) living with HIV with lifelong antiretroviral therapy by 2018. [Reach 95% of all children living with HIV]
- Provide 1.4 million children (aged 0–14) and 1 million adolescents (aged 15–19) with lifelong HIV treatment by 2020. [Reach 95% of all children living with HIV]



STAY FREE Every adolescent and young woman should be able to protect themselves from HIV infection and realize their full potential without fear of sexual violence, abuse or exploitation. Co-convened globally by PEPFAR and UNICEF

Policy Agenda, reforms to enable

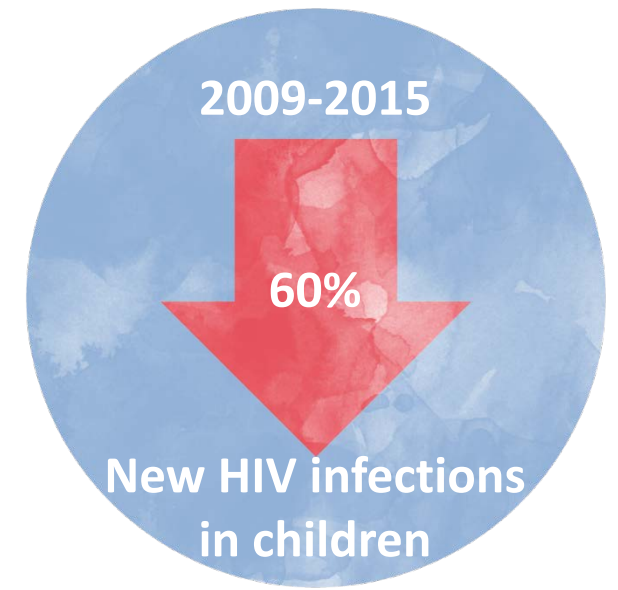
- Evidence based behavioural change and social norms work
- Biomedical (e.g., PrEP, **VMMC**, new prevention technologies)
- Structural (e.g., Cash-plus care programmes, especially those that keep adolescent girls in school)

Delivery Agenda

- Integrate SRH and HIV
- Improve access to combination prevention
- Innovate in the delivery of new options (e.g., PrEP)

Lessons learnt from the Global Plan

- **Working together** (governments, implementing partners, the United Nations, civil society, faith-based organizations and communities) **is most efficient and effective**, especially when
 - **Country ownership** and leadership;
 - Focusing on **evidence-based interventions**;
 - Driven by **common goals and targets**
 - Leveraging linkages and **integration**;
 - **Inter-agency** groups to support coordination;
 - Shared responsibility with joint **accountability**; and
 - **Sharing knowledge and learning**, across and within countries, on what is working and what is not.



Taking the learning forward



1. Opportunity to **support countries to improve data** collection, analysis and utilization. To help fill the data gap on adolescents and to strengthen planning and programme prioritization.
2. Platform to foster **meaningful involvement of adolescents** in programming and advocacy.

Next steps



- UNAIDS and PEPFAR encouraging Ministers of Health, other country leaders and key stakeholders to:
 - Adapt the Framework and the targets to their national context
 - Align existing resources and initiatives to accelerate progress toward these targets (e.g., DREAMS, All In!)
 - Develop an implementation plan based on evidence and including work from national to community level.

Three global working groups have been formed that will provide quarterly updates. As was done for the Global Plan, **annual progress reports** will be issued highlighting progress made and lessons learned in each country.

Thank you

