

UNAIDS Targets, Engaging More Men and Boys in the context the SDGs

WHO Meeting on Voluntary Medical Circumcision, 27th February -1st March 2017

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Zero new HIV infections.
Zero discrimination.
Zero AIDS-related deaths.



90-90-90



1

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020.

2

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018.

3

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners.

4

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020.

5

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year.



6

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020.

7

Ensure that at least 30% of all service delivery is community-led by 2020.

8

Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers.

9

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights.

10

Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C.

**FAST-TRACK
COMMITMENTS
TO END AIDS
BY 2030**



Political Declaration Commitment 3

Ensure **access to combination prevention** options, including PreP, harm reduction, VMMC and condoms **to at least 90% of people (at risk) by 2020, especially young women and girls in high prevalence countries and key populations** – gay men and other men who have sex with men, transgender people, sex workers, people who inject drugs and prisoners

Expanded targets (by 2020):

- **Reach 3 million with PrEP**
- **Reach 25 million men with VMMC**
- **Make 20 billion condoms available in LMIC**

FIVE PREVENTION PILLARS

1

Young women and adolescent girls and their male partners

2

Key populations

3

Condoms

4

Voluntary medical male circumcision

5

Pre-exposure prophylaxis

United Nations General Assembly prevention targets

Ensure that **90%** of people at risk of HIV infection access comprehensive prevention services.

Reduce **below 100 000** per year the number of adolescent girls and young women aged 15–24 years newly infected with HIV globally by 2020.

Ensure that **90%** of people at risk of HIV infection access comprehensive prevention services, including harm reduction by 2020.

Make **20 billion** condoms annually available in low- and middle-income countries by 2020.

Reach **25 million** additional young men in high HIV incidence areas with voluntary medical male circumcision by 2020.

Reach **3 million** people at higher risk of HIV infection with pre-exposure prophylaxis by 2020.

Male engagement of the AIDS response

- Men boys engagement, Game changer
- Global Platform for engagement of men and boys
- Roll out of the Global Platform in the ESA Region
 - Partnership and Synergies: Letters to partners;
 - Implementation of CSW60;
 - Technical and adaptive leadership;

Global Framework for Action

UNAIDS 2016 | MEETING REPORT

Male engagement
in the HIV response
—a Platform for Action



1. Generate and use evidence for decision-making at the local level
2. Expand access to and use of people-centred health services for men and adolescent boys, and strengthen community-led responses
3. Promote positive social norms to advance gender equality and improve the health of men, women, and adolescent boys and girls
4. Sustain the HIV response through increasing community engagement, expansion of partnerships and scale-up of financing

Men Making a difference in the AIDS response



Xolela Vinqi
South Africa



Fred Mutyaba
Uganda



Salem Embashu
Namibia

Properties of adaptive work for successful male engagement

- Distinguish technical problem from non technical issues
- Adaptive work demands responses outside the current repertoire.
- Adaptive solutions are conservative as well as innovative.
- The people with the problem are the problem, and the solution.
- Adaptive solutions often lie within the society or organization.
- Solutions involve direct loss and indirect loss as people re-fashion loyalties and develop new competencies.
- Adaptive work generates disequilibrium and avoidance because losses generate resistance.
- Adaptive work takes more time than technical work.

Engaging men and boys in the HIV response will not just benefit themselves but will also benefit their partners, their families and the community as a whole



“There is no such thing as a single-issue struggle, because we do not live single-issue lives.”

—Audre Lorde