

# ACCESS TO HIV PREVENTION

## CLOSING THE GAP

A REPORT BY THE GLOBAL HIV PREVENTION WORKING GROUP

### KEY FINDINGS AND RECOMMENDATIONS

#### The Worst Case Scenario Is Avoidable

Globally, less than one in five people have access to basic HIV prevention programs — the information and services that can help save lives and reverse the AIDS epidemic. But according to a research team led by UNAIDS and WHO, 29 million of the 45 million new HIV infections that are expected to occur between now and 2010 could be averted if proven prevention strategies, used in combination, are dramatically scaled up.

*Access to HIV Prevention: Closing the Gap*, a new report from the Global HIV Prevention Working Group, provides, for the first time, a region-by-region analysis of gaps in access to HIV prevention interventions, examines current spending levels versus projected need, and recommends funding

and programmatic activities to scale up HIV prevention programs worldwide.

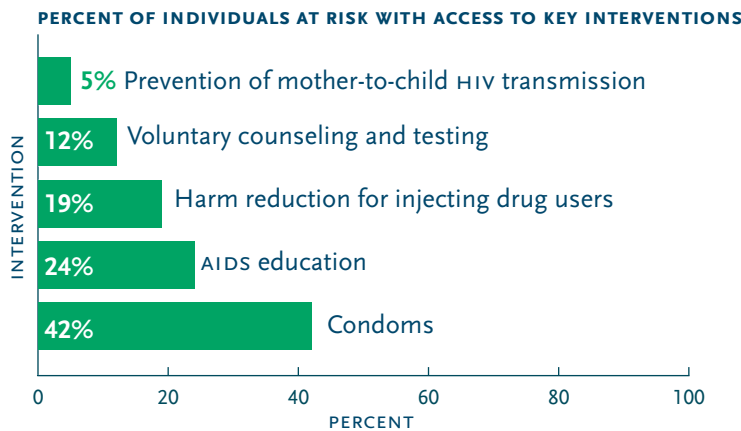
#### Combination Prevention to Reverse the Epidemic

There is no single solution—no magic bullet—to prevent the spread of HIV/AIDS. Instead, the Global HIV Prevention Working Group recommends a combination prevention approach to the epidemic, using a range of science-based strategies. By employing all appropriate tools—from delayed sexual activity to condom promotion, from voluntary counseling and testing to programs for injecting drug users—combination prevention can reduce new HIV infections and help stop the epidemic.

Proven prevention interventions include:

- ▶ Behavior change programs, including efforts to encourage individuals at risk to delay initiation of sexual activity, reduce the number of sexual partners, and use condoms during sexual intercourse
- ▶ Sexually transmitted disease control
- ▶ Voluntary counseling and testing
- ▶ Harm reduction programs for injecting drug users
- ▶ Prevention of mother-to-child HIV transmission
- ▶ Blood safety
- ▶ Infection control in health care settings
- ▶ Programs for people living with HIV

**The Prevention Access Gap** Access to proven prevention interventions is extremely limited in all regions of the world.



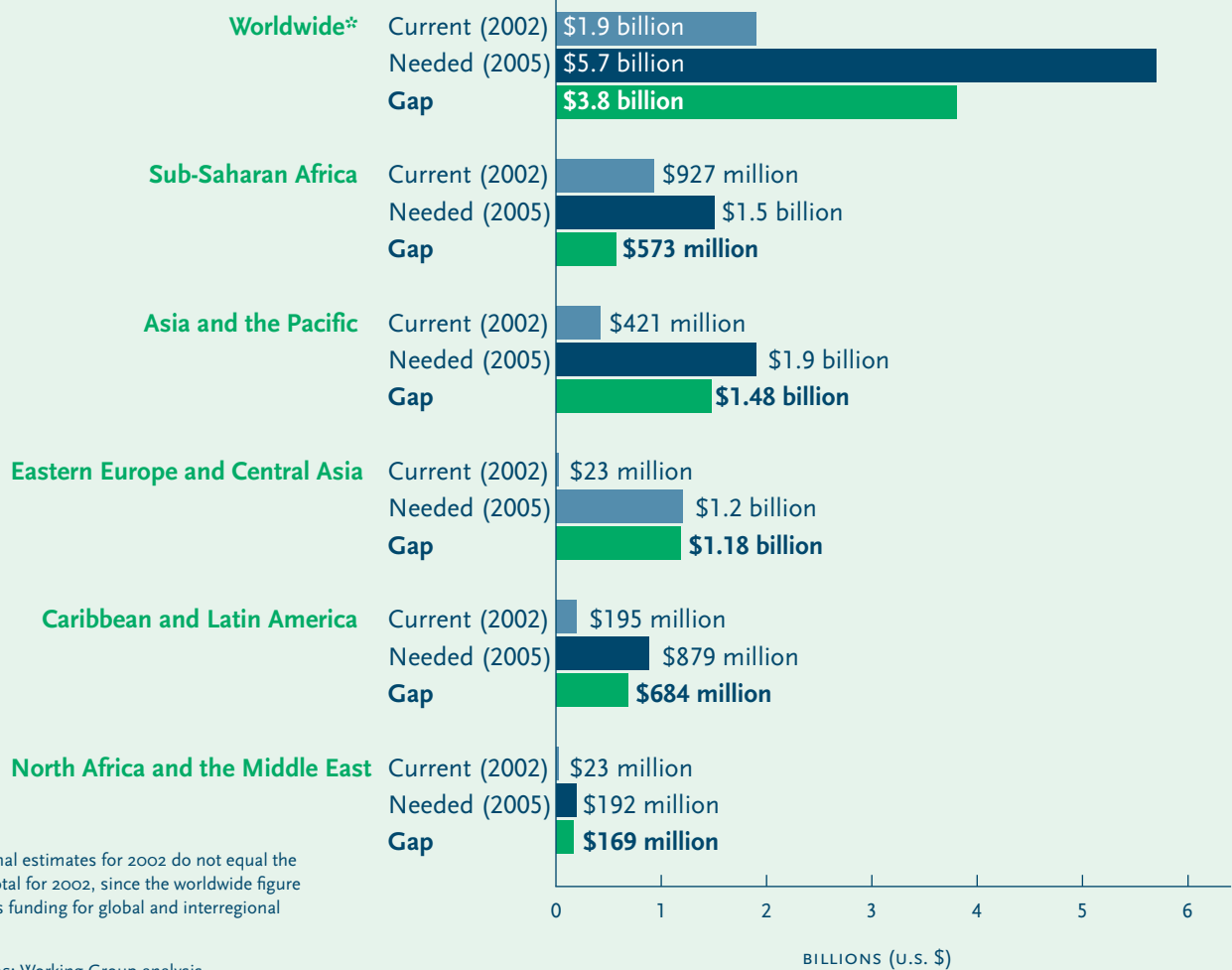
### SOURCES OF FUNDING FOR HIV/AIDS PROGRAMS IN 2002

Funding Source	Total Spending on HIV/AIDS Programs	Estimated Spending on Care and Support	Estimated Spending on HIV Prevention
Developing Countries	\$1.7 billion	\$918 million	\$782 million
Bilateral Donors	\$1.3 billion	\$520 million	\$780 million
Foundations/NGOs	\$200 million	\$40 million	\$160 million
United Nations System	\$150 million	\$50 million	\$100 million
World Bank	\$95 million	\$31 million	\$64 million
<b>TOTAL</b>	<b>\$3.5 billion</b>	<b>\$1.6 billion</b>	<b>\$1.9 billion</b>

Source: UNAIDS; Working Group analysis

## THE FUNDING GAP

Despite the urgent need for HIV prevention and the broad range of proven interventions available, current annual spending on HIV prevention falls \$3.8 billion short of what will be needed by 2005.



## STOPPING THE SPREAD OF HIV: RECOMMENDATIONS

Based on its analysis of the gap between current access to HIV prevention and the level of resources required to reverse the global epidemic, the Working Group recommends that:

- ▶ **Funding:** Global spending on HIV prevention activities from all sources should increase three-fold by 2005 to \$5.7 billion, and to \$6.6 billion by 2007. Donor governments should increase spending on HIV prevention to 0.02 percent of national GDP.
- ▶ **Scale-Up:** Prevention scale-up must be a central priority, focusing on cost-effective, high-impact interventions, including behavior change programs, voluntary counseling and testing, STD control, condom promotion, and prevention of mother-to-child transmission, among other proven strategies.
- ▶ **Prevention and Treatment:** As both prevention and

treatment programs are brought to scale, these initiatives should be carefully integrated.

- ▶ **Building Capacity:** In addition to funding for prevention interventions, donors should provide extensive additional support to build long-term human capacity and infrastructure.
- ▶ **Policy Reforms and Aid:** Policy reforms and international aid should address the social and economic conditions—such as gender inequality, stigma, and poverty—that increase vulnerability to, and facilitate the rapid spread of, HIV/AIDS.
- ▶ **Prevention Research:** Research into new prevention strategies and technologies should be significantly accelerated.

**To Learn More** For more information on HIV prevention or to obtain a full copy of *Access to HIV Prevention: Closing the Gap*, visit [www.gatesfoundation.org](http://www.gatesfoundation.org) or [www.kaisernetwork.org](http://www.kaisernetwork.org).

**About the Working Group** The Global HIV Prevention Working Group is a panel of nearly 40 leading public health experts, clinicians, biomedical and behavioral researchers, and people affected by HIV/AIDS. The Working Group seeks to inform global policy-making, program planning, and donor decisions on HIV prevention, and advocate for a comprehensive response to HIV/AIDS that integrates prevention and care. The Working Group was convened in 2002 by the Bill & Melinda Gates Foundation and the Henry J. Kaiser Family Foundation.