

Ministerial Conference

Fighting against HIV/AIDS ten years after the Dublin Declaration: Leaving
No One Behind – Ending AIDS in Europe

Rome, 28 November 2014

Shared responsibility, global solidarity Role and contribution of the Global Fund

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Director of External Relations
Rome, November 2014

"The HIV/AIDS epidemic threatens to become a crisis of unprecedented proportions in our region, undermining public health, development, social cohesion, national security and political stability in many of our countries".

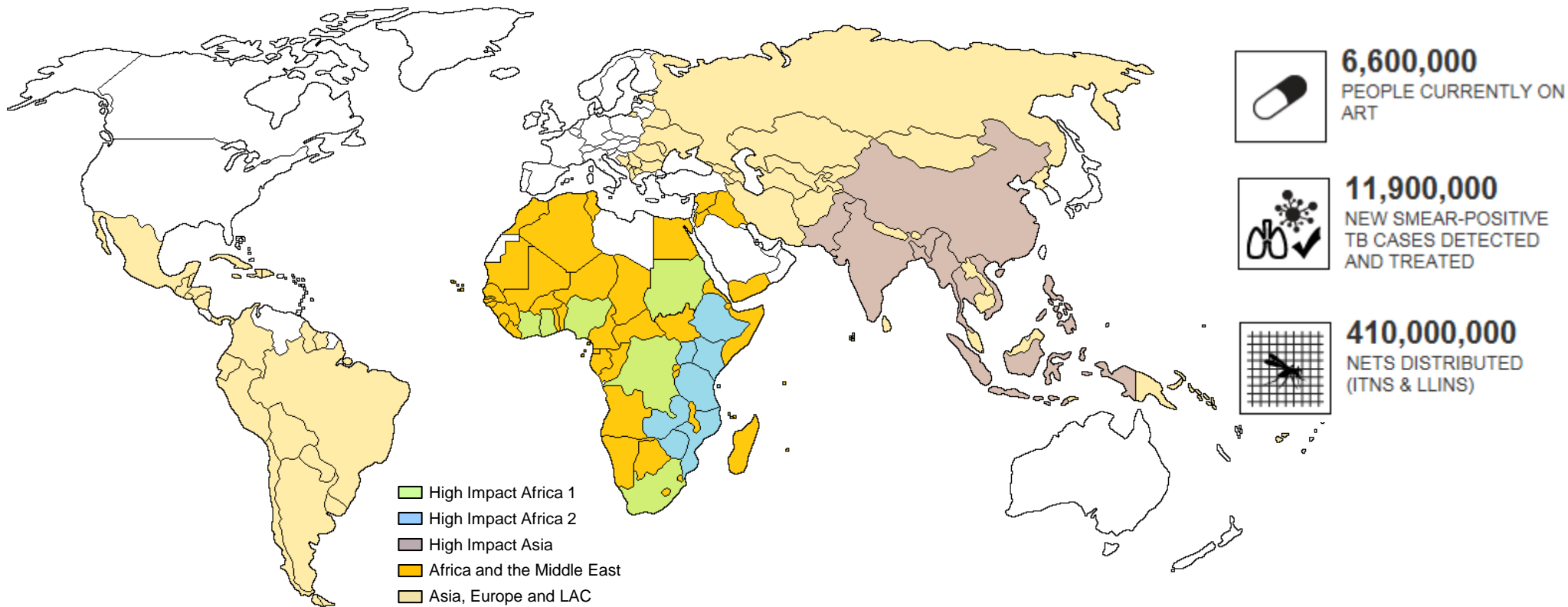
(Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia, Feb 2004)

In Feb 2004, the Global Fund had just completed its first full year of operations, with grant implementation starting.

In creating the Global Fund, the world sent a clear message: HIV/AIDS, TB and malaria are killers on an unprecedented scale — yet they don't need to be. They are preventable and treatable.

About the Global Fund

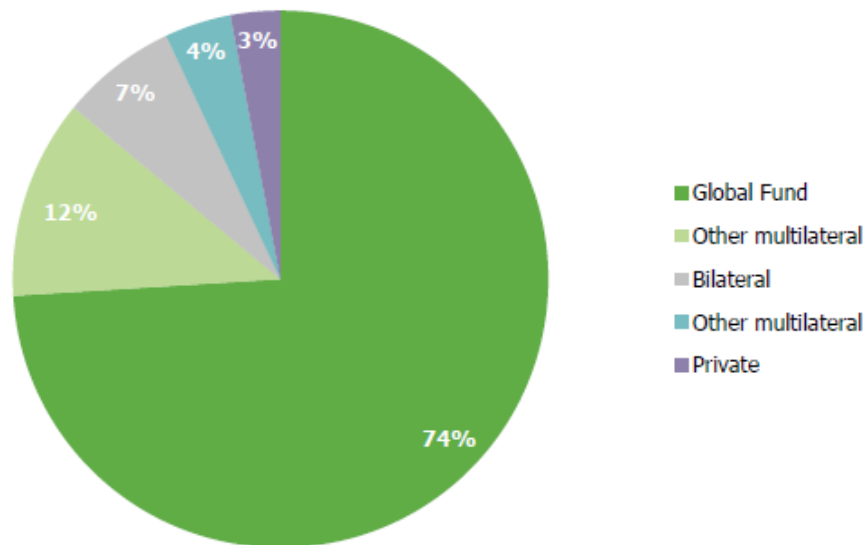
The Global Fund mobilizes and invests nearly **US\$4 billion a year** to support programs run by local experts in more than **140 countries**. As a partnership between governments, civil society, the private sector and people affected by the diseases, the Global Fund is accelerating the end of AIDS, TB and malaria as epidemics.



Source: Global Fund Grant Data, mid-2014

Global Fund investments in the EECA region (mid-2014)

Reported sources of funding for national HIV response other than domestic public resources, 2009-11



Source: ECDC 2012 progress report on the implementation of the Dublin Declaration

Signed Funding to fight HIV/AIDS in EECA (cumulative, Mid-2014):
USD 1.4 bn

- HIV - **Counseling and Testing** encounters: 39 millions
- **Condoms** distributed: 208 millions
- People currently on **ART**: 85'000
- Seropositive pregnant women receiving **ARV prophylaxis for PMTCT**: 39'000
- HIV - Basic care and support services provided to **orphans and vulnerable children**: 52'000
- **HIV/TB - Associated infections**:
People receiving treatment for TB/HIV: 290'000

EECA Situation

Since 2004, considerable progress has been achieved in combating HIV and TB, developing enabling environments and strengthening health and community systems thanks to the work of all partners. Nevertheless, EECA continues to face serious challenges.

- Fastest-growing HIV epidemic globally, with significant increases in mortality from AIDS.
- Number of people living with HIV in EECA has increased by 860,000 to 1.3 million between 2001 and 2013.
- Reported deaths among people with AIDS increased by 58% between 2006 and 2012.

Specific **key populations at higher** risk of HIV exposure and infection: people who inject drugs (IDUs) and their sexual partners, men who have sex with men, sex workers, prisoners and migrants.

And Challenges

Key factors accounting for the continued spread and high mortality rate of HIV in EECA:

- HIV testing and counseling among key populations remains insufficient, leading to delayed diagnosis of HIV infections and late treatment initiation
- Varying levels of treatment quality and inconsistent adherence to treatment
- Inadequate coverage of prevention measures and ARV therapy, resulting in the continued rise of HIV and AIDS cases.

More specifically:

- Despite significant efforts to increase the number of HIV positive patients on **treatment, coverage remains low** with only 35% of people eligible for HIV treatment in EECA receiving ARV therapy.
- **Treatment among IDUs** in the region is particularly low: it comprises 62% of those living with HIV but yet only 22% of IDUs receive ARV therapy.
- **Access to harm reduction services** - including opioid substitution therapy and needle and syringe exchange programs - remained limited, despite the fact that these interventions are key to reducing the transmission of HIV among people who inject drugs and their sexual partners. In 2010, only 10% of IDUs in Eastern Europe and 36% in Central Asia had access to needle and syringe exchange programs.

Financial Resources going forward

Global Fund vision and goals for the EECA region

US\$679.5 million committed to the region for the period 2014-2016 to support the HIV/AIDS and TB response. The largest funding allocation within the region is to Ukraine (28%), followed by Uzbekistan (10%) and Georgia (9%).



Goals within the current allocation period::

1. Stabilize prevalence and reduce incidence of HIV

2. Contain spread of X/MDR-TB

- Reduce HIV transmission among people who inject drugs
- Increase and sustain coverage of 80% of those in need of ARV therapy
- Diagnose at least 85% of TB patients, especially multidrug/extensively drug-resistant TB patients
- Successfully treat at least 90% of patients with drug-sensitive TB and at least 75% of patients notified as having multidrug-resistant TB

Conclusion

- The Global Fund remains a large funder of the HIV/TB response in the EECA region.
- However, it is a shared responsibility and the Global fund can only complement investments from domestic sources.
- It is absolutely urgent and critical to improve program quality and coverage rates particularly for key affected populations
- It is only through effective longstanding partnerships at the country and regional levels, beginning with leadership of the countries themselves and supported by the collective determination of all stakeholders, that the vision of controlling the HIV epidemic and containing the spread of drug-resistant TB in the EECA region can be realized.

Thank You

