PEPFAR Update

Katy Godfrey | 9/19/2022

19 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS
Summary of PEPFAR’s Latest Global Results (FY22/Q2)

- Reached 90/90/90 treatment targets
- 12+ high burden countries
- 19.9 million Women, men, and children on life-saving treatment – 17.2M in 2021
- 5.5 million Babies born HIV free due to PEPFAR investments
- 15-30% Increase in investments in vulnerable populations

Specifically during COVID…

- 480% Increase in multi-month dispensing of life-saving ARVs
- 4.3M million People using HIV self tests in FY21 – 200% increase since FY19
- 2 million New clients on PrEP since FY20 – only 300K in FY20

1 Includes both reduction in mother-to-child transmission, and the reduction of incidence and prevalence among AGYW, women of childbearing age, and adult men
2 Nearly 15% key populations, 20% for adolescent girls and young women, and 30% for children planned for FY23 relative to FY22
Sustaining HIV Gains—responding to COVID

**Protecting and Advancing Global HIV Gains**
- Initiated life-saving HIV treatment for 1.7M more PLHIV, now reaching nearly 19M globally
- Supported 2.4M more young men with VMMC, now reaching 27.7M globally
- 1M more clients newly enrolled in PrEP
- Substantially expanded HIV self-testing
- Supported 63M+ HIV tests in this fiscal year alone

**Leveraging PEPFAR Health Platforms for the Global COVID-19 Response**
- Complete tens of millions of COVID-19 tests through well-equipped labs
- Effectively deploy thousands of healthcare workers for COVID-19 vaccine readiness and administration
- Ensure COVID-19 infection prevention and control measures are in place across thousands of health clinics
- Collect and use data on COVID-19 cases, death, and vaccinations from health management information systems
- Deliver COVID-19 test kits, PPE, laboratory reagents, and more through reliable health care supply chains
Responding to COVID-19: the PEPFAR Platform

- PEPFAR offers a care delivery platform to respond to HIV and COVID-19
- Strong PEPFAR supported USG teams and local implementing partners on the ground
- PEPFAR health systems investments (>15 billion) have strengthened the systems that drive responsive, resilient and enduring health care
  - 3000+ laboratories
  - 70,000 health care facilities (granular data and access to people)
  - 290,000+ health care workers
  - Expansive health care commodities supply chain
- PEPFAR has been proactively leveraging the platform to support COVID-19 screening, diagnostics, infection prevention and control and vaccine readiness and administration

"[PEPFAR] investments protect against more than HIV/AIDS. They've helped keep deadly diseases -- including Ebola, H1N1, and cholera -- from raging out of control. And they've been vital in the ongoing fight against COVID-19." – Secretary Blinken, April 1, 2021
Strategic Vision
| Strategic Pillars & Enablers |

1. Health Equity for Priority Populations
2. Sustaining the Response
3. Public Health Systems and Security
4. Transformational Partnerships
5. Follow the Science

1. Community Leadership
2. Innovation
3. Leading with Data

5x3 Strategic Direction
2 Sustainability | How

1 Political
Empowering regional health bodies (e.g., PAHO, ACPHEEN, Gulf CDC, AUC/Africa CDC etc.) and Mobilize Heads of State to elevate HIV/AIDS to the top of their development agendas

2 Programmatic
Reimagine local partnerships by directly strengthening the organizational health of local partners and reforming the donor-led ways of working to reduce management burdens on our local partners

3 Financial
Advocate for increased national funding for HIV and broader health program, and support strengthening government and private co-financing, and financial management capabilities

4 Community
Embed strategic and sustained community leadership (including women and KP-led) in all elements of PEPFAR (i.e., priority setting, funding allocations, program design, results management)
New Infections and Prevention
2025 targets require a much steeper decline in new infections

FIG. 1.01a. Number of new HIV infections, global, 1990–2021, and 2025 target

2025 new infections target
~370,000

2020 Actual
~1,500,000

65% in key populations, 50% females worldwide

AGYW are 10% of population and 25% of new infection in SSA

Annual new Infections decreased by 54% at the peak and 32% between 2010 and 2021.

Reaching the 370,000 target will require a 75% reduction over the next four years.

Source: UNAIDS epidemiological estimates, 2022 (https://aidsinfo.unaids.org/)
Prevention:
• Multimodal
• Biomedical
  • Circumcision
  • PrEP/PEP
“DREAMS” is a comprehensive prevention approach that includes structural, behavioral, and biomedical interventions.
DREAMS Core Package

Mobilize Communities for Change

- Community Mobilization & Norms Change
- VMMC (Other PEPFAR Programming)
- HTS & Tx for Men (Other PEPFAR Programming)

Reduce Risk of Sex Partners

- Characterization of Male Partners to Target Highly Effective Interventions (ART, VMMC)
- Youth Friendly Sexual and Reproductive Health Care (Condoms, HTS, PrEP, Voluntary Family Planning, Post Violence Care)

Empower Girls & Young Women and Reduce Risk

- School-Based HIV and Violence Prevention
- Parenting/ Caregiver Programs
- Education Subsidies
- Economic Strengthening
- Social Asset Building (e.g., Mentoring and HIV and Violence Prevention)

Strengthen Families

Determined  Resilient  Empowered  AIDS-Free  Mentored  Safe
DREAMS FY22 Q2 Results

**Over 2 million** girls and young women reached by DREAMS

Over **745,000** completed at least the primary package of DREAMS services

Over **1.2 million** received an HIV and violence prevention curriculum

Over **519,000** received enhanced economic empowerment through skills training and bridge to employment

More than **293,000** were supported to stay in school

Source: PEPFAR MER Data (AGYW_PREV), FY22Q2 initial
By March 2022, over 29M VMMCs had been supported by PEPFAR since 2007

- Over 29M VMMCs done by March 2022;
- Estimated to avert 340,000 HIV infections;
- Estimated to avert an additional 1.8M HIV infections by 2030
- Source: UNAIDS/WHO Progress Brief

SOURCE: DATIM
New PrEP initiations have grown in ambition and performance.
Treatment

• Maintain continuity
  ✓ viral suppression
• Improve mortality
• Improve health quality of life
Treatment

Sustainability: HIV treatment is a life-long endeavor:
The PEPFAR model: simple, scalable, task shifting.
Person centered: the right care, from the right provider at the right time.
Focus on improving the lifespan and the “health-span”
  • Prevent disengagement
  • Target the groups with the highest mortality
    – People over 50
    – Children under 5 and especially under 1
    – People with advanced HIV disease
Engagement and reengagement in ART is not a linear process

- **Engaged**
- **Aware**
- **Disengaged**
- **No longer on treatment or alive**
- **Established on treatment**

- Return to treatment
- Interruption in treatment (IIT)

18 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS
Numbers and proportions of interruptions per 100 persons on treatment

Excludes Senegal
Cycle of interruptions and returns to ART (CIRA)

Cycle of interruption and return to ART (CIRA)
FY22 Q1

-150,000 -100,000 -50,000 0 50,000 100,000

<01 01-09 10-14 15-19 20-24 25-29 30-34 35-39 40-49 50+

137 6,868 5,217 9,198 25,520 43,133 53,045 56,012 78,576 50,553

IIT (Total) Returned

19 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS
Aging
Growth of Population Aged 60 and Older by World Region:
2020 and Projected 2050
(In percent)


https://www.census.gov/content/dam/Census/library/publications/2020/demo/p95_20-1.pdf
Overall age and sex distribution in PLHIV-2021 on ART
Aging population over time

Ageing populations in the PEPFAR program, 2017-2021

- 2017: 11%
- 2018: 15%
- 2019: 17%
- 2020: 19%
- 2021: 21%

PEPFAR
19 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS
Viral suppression—the third 90
VL suppression by sex:

Women

Men
AFRICOS-comorbidities.

- **GFR <60**
  - <50, HIV- (n=390)
  - <50, PLWH (n=2188)
  - 50+, HIV- (n=95)
  - 50+, PLWH (n=761)

- **Dysglycemia**
  - 0.00% (n=0)
  - 1.10% (n=1)
  - 4.30% (n=33)
  - 15.80% (n=161)

- **Elevated BP**
  - 13.60% (n=102)
  - 11.20% (n=245)

- **BMI >30**
  - 15.90% (n=62)
  - 18.90% (n=18)

- **P-values**
  - p=0.12
  - p=0.52
  - p=0.04
  - p=0.52
  - p=0.002

The charts display the percentage of participants with each condition across different categories, with p-values indicating statistical significance.
Preliminary program data from Ethiopia

- Facility based chart review of individuals over 40
- Not comprehensive, charts randomly selected at several sites.
- Looked for HTN, DM, hyperlipidemia, renal insufficiency and obesity and others
- Likely underestimated prevalence of these conditions-data not collected routinely or noted in charts
- HTN occurred in 8.2%, DM 5.3%, CRI 7.3%
- At least 1 NCD: 22%
Mortality related to COVID-19

Female 15-49

Male 15-49

Female 50+

Male 50+

Countries included in the analysis were Angola, Cameroon, Dominican Republic, Eswatini, Lesotho.
Person-centered care of the older adult
Thank You!