

THSA01 The unfinished business of pediatric HIV case finding: intensifying efforts to diagnose HIV-Infected children and adolescents

Non-Commercial Satellite

Venue: Hall 11A

Time: 07:00-08:30

Organizer: Elizabeth Glaser Pediatric AIDS Foundation, ELMA Philanthropies, Clinton Health Access Initiative

As new pediatric HIV infections decline, and young adolescents become adults, reaching the 57% of children living with HIV and not yet on ART will become increasing challenging. The continuing decrease in the number of undiagnosed, HIV-infected children and young adolescents will require smart, targeted, and intensified case-finding efforts. The expansion of pediatric-centered HIV testing in facilities and targeted community approaches is promising, but substantial gaps still exist and these approaches need to be optimized. Additional emphasis is also needed to reach children and young adolescents aged 5-14 years. This group represents a "testing gap," as they have less interaction with the health system if they are missed by PMTCT and under 5 services, but are not yet old enough to access reproductive health services. A range of implementing partners, donors and government will showcase evidence-based and game-changing approaches for improving pediatric case finding, and discuss forward-looking priorities.

Opening Remarks

A.Kekitiinwa, Baylor College of Medicine Children's Foundation, Uganda

Intensifying efforts to diagnose HIV-infected children and adolescents

K.Suggu, , United States

Innovative pilots to improve diagnosis of HIV-infected children and adolescents aged 5-14 years

T.Wolters, , United States

Optimizing HIV testing strategies in Johannesburg and Kwa-Zulu Natal, South Africa

J.Dunlop, Right to Care, South Africa

Audience questions

Panel discussion and audience questions

A.Kekitiinwa, Baylor College of Medicine Children's Foundation, Uganda; U.Munyaburanga, Kigali Hope Association, Rwanda; A.Mushavi, Zimbabwe Ministry of Health and Childcare, Zimbabwe; P.Oyaro, , United States; G.Siberry, US Department of State, United States

THSA02 Breaking down barriers: HIV interventions in sub-Saharan Africa

Non-Commercial Satellite

Venue: Hall 11B

Time: 07:00-08:30

Organizer: European & Developing Countries Clinical Trials Partnership (EDCTP); South African Medical Research Council (SAMRC)

Considerable advances in HIV treatment regimens have sharply reduced HIV-related morbidity and mortality in recent years, yet barriers to the development, use, delivery and access to HIV prevention, diagnostic and treatment tools persist, particularly in sub-Saharan Africa (SSA), where the HIV/AIDS burden is highest and vulnerable populations such as adolescents, children, women and co-infected individuals remain difficult to reach. This symposium will highlight specific challenges for reducing new HIV infections and containing the epidemic in key SSA populations and will demonstrate how African researchers are trying to overcome them together with international partners, including through locally developed solutions. A panel will discuss how future collaborative African HIV research can address the challenges and needs identified and explore how best to engage the relevant actors to ensure the successful development and translation of research results into practical, accessible and affordable products and to improve their delivery and uptake in SSA.

Welcome & introduction

C.Hankins, The Amsterdam Institute for Global Health and Development (AIGHD), Netherlands; Q.Abdool Karim, Centre for the AIDS Programme of Research in South Africa (CAPRISA), South Africa

Overview of EDCTP and SAMRC funding priorities and opportunities

M.Makanga, European & Developing Countries Clinical Trials Partnership (EDCTP), Netherlands; G.Gray, South African Medical Research Council (SAMRC), South Africa

Improved Urogenital Infection Management by Targeted Point of Care Testing in Women in Kigali, Rwanda

J.Van De Wijgert, University of Liverpool, Netherlands

Building research excellence in HIV vaccine science

L.Morris, University of the Witwatersrand, South Africa

Panel discussion: How can future collaborative African HIV research address barriers to the development, use, delivery and access to HIV interventions in sub-Saharan Africa?

F.Bompart, Drugs for Neglected Diseases initiative (DNDi), Switzerland; A.Kambugu, Infectious Diseases Institute (IDI), Makerere University, Uganda; P.Bahati, IAVI, Kenya; F.Abdullah, , South Africa

Discussion and questions from attendees

THSA03 The Elusive 90:90:90: The Experience of Kenya as an Early Adopter of Evidence

Non-Commercial Satellite

Venue: E105-108

Time: 07:00-08:30

Organizer: Kenya National AIDS Control Council

In 2016, in reference to UNAIDS 90:90:90 treatment targets, Kenya made deliberate decisions to reduce the know-do gap in the HIV treatment cascade. National policy & technical guidelines were reviewed to include HIV self-testing, partner notification and test & treat based on evidence, with self-testing dispensed through private pharmacies. A plan to accelerate treatment scale-up among children, 'the ACT initiative', was implemented across the Country. To support technical and policy actions, political support from the President with targets assigned to enrolling children to treatment, and commitments by Governors were key to scale-up. Retention to care has been innovatively enhanced, increasing ART coverage to 75% (adults), viral load coverage to 97% & 79% viral suppression (adults). A shift from CD4 count to Viral Load testing was initiated countrywide. We aim to share Kenyan experiences as early adopters of evidence, successes & challenges and lessons other countries may learn.

Introduction to session and welcome remarks

B.Kigen, Kenya National AIDS & STI Control Programme (NASCOP), Kenya

Reaching the 90-90-90 in Kenya; where are we?

J.Wamicwe, Kenya National AIDS & STI Control Programme (NASCOP), Kenya

Targets and Denominators – Monitoring the 90-90-90 at Global and country level

M.Mahy, Joint United Nations Programme on HIV/AIDS (UNAIDS), Switzerland

What does 90-90-90 mean to PLHIV?

N.Otwoma, NEPHAK, Kenya

Panel Discussion and Q&A Session:

Topical Areas:

- **Achieving 90:90:90 for men and adolescents**
- **90:90:90 and Dolutegravir**
- **Sustaining resources needed to achieve 90:90:90**

M.Doherty, World Health Organization, Switzerland; M.Mahy, Joint United Nations Programme on HIV/AIDS (UNAIDS), Switzerland; E.Ngugi, Centers for Disease Control and Prevention (CDC Kenya), Kenya; R.Matiru, UNITAID, Switzerland; K.Sikwese, African Community Advisory Board (AFROCAB), Zambia

THSA04 Adolescent HIV prevention and treatment implementation science alliance

Non-Commercial Satellite

Venue: G102-103

Time: 07:00-08:30

Organizer: National Institutes of Health/ Fogarty International Center

Adolescent HIV prevention and treatment require multifaceted approaches that are complex and don't always work in real world settings. Implementation science (IS) can help address important implementation challenges. Indeed, effective use of evidence from IS can be enhanced through more robust collaborations between researchers, program implementers, and policymakers. This satellite session will give insight into how the Fogarty International Center's Adolescent HIV Prevention and Treatment Implementation Science Alliance (AHISA) helps to enhance the effective use of evidence to help overcome implementation challenges related to HIV among adolescents in Africa by catalyzing collaboration and communication between researchers, program implementers and policymakers. Members of the Alliance will discuss the use of IS to inform prevention and treatment of HIV among adolescents, IS capacity needs in this area, and present case studies of their work as it relates to critical IS topic areas for this population.

Welcome and Introduction

L.Bekker, Desmond Tutu HIV Centre, South Africa

Overview of Adolescent HIV Prevention and Treatment Implementation Science (AHISA)

R.Sturke, Fogarty International Center, NIH, United States

Using Implementation Science to Address Adolescent HIV

G.Donenberg, University of Illinois, Chicago, United States

Capacity Needs for Implementation Science and Adolescent HIV

A.Pettifor, University of North Carolina, United States

Case Studies from AHISA Members

K.Agot, Impact Research and Development Organization, Kenya; K.Beima-Sofie, University of Washington, United States; M.Lightfoot, University of California, San Francisco, United States; A.Mwebembezi, Reach the Youth, Uganda; N.Rosenberg, University of North Carolina at Chapel Hill, United States

Nigerian Implementation Science Alliance

N.Sam-Agudu, University of Maryland, Baltimore, United States

THSA05 SHE is the Future Adolescent Girl and Young Women's Engagement in a more effective prevention response

Non-Commercial Satellite

Venue: G104-105

Time: 07:00-08:30

Organizer: UNICEF, PEPFAR, IAS

There is considerable concern that the world will miss its target of reducing new HIV infections among adolescent girls and young women (AGYW) below 100,000 by 2020. Yet, never before have the evidence, tools, and science on effective prevention been more readily available than they are now. There is consensus on the effectiveness of combination prevention, including mobilization for structural factors such as gender inequality and Gender-Based Violence. Game-changers such as pre-exposure prophylaxis, HIV self-testing, and cash transfers promise to accelerate results if scaled-up effectively. What is needed is a considered utilization of the available data to ensure targeted interventions, and inspired leadership to tackle policy and social barriers.

This high-level forum will stimulate dialogue on the extent to which nascent, country-owned responses have elevated AGYW participation in the national and regional discourse; showcase innovative campaigns to galvanize a sustainable movement; and examine whether existing investments are sufficient to turn the tide.

Opening Remarks

H.Fore, UNICEF, United States

Lessons Learned from DREAMS and the challenge that lies ahead

A.Birx, MD, U.S. Ambassador-at-Large & U.S. Special Representative for Global Health Diplomacy, United States

Setting the Scene - Reflections on state-of-the-art in girl-centred and combination prevention approaches, and the current response on AGYW prevention in the African Region

L.Bekker, , South Africa

Panel Discussion Part I: Mounting Effective National Responses to the AGYW Prevention Gap

V.Ganesh, UNICEF, Botswana; T.Magure, National AIDS Council, Zimbabwe; Y.Pillay, National Department of Health, South Africa

Message: Global Fund's Commitment to accelerating HIV Prevention among AGYW

M.Wijnroks, The Global Fund to Fight AIDS, Tuberculosis and Malaria, Switzerland

Panel Discussion Part II: A Changing of the Guard - How ready are we?

J.Pulerwitz, Population Council, United States; H.Fore, UNICEF, United States; H.Geingos, First Lady, Namibia

Closing Remarks

C.Luo, UNICEF, United States

THSA06 Should PrEP be included as a standard of care in SRH trials and services?

Non-Commercial Satellite

Venue: E102

Time: 07:00-08:30

Organizer: WHO

HIV prevention Standard of Care in Sexual and Reproductive Health trials and services is an evolving concept. Traditionally for patients and participants this has included counselling on HIV risk reduction, promotion of dual methods for prevention of pregnancy and STI, providing HIV testing and screening, treating STIs and offering male and/or female condoms. For partners voluntary counselling and testing, and referral for ART if HIV infected are frequently included. However, new effective prevention strategies such as PrEP are less frequently included?

This session explores whether PrEP should be included as a standard of care in SRH trials and services. The policy environment, challenges, opportunities and experience in implementing PrEP in SRH trials and services will be discussed. The session is aimed at researchers, policy makers and advocates who are considering integrating PrEP in these settings.

Welcome

HIV prevention in SRH services challenges and opportunities

P.Steyn, Human Reproduction Team, WHO Department of Reproductive Health and Research, Switzerland

Implementation of PrEP in SRH settings

E.Bukusi, Kenya Medical Research Institute (KEMRI), Kenya

Policy on PrEP in SRH services and trials: The South African experience

S.Delany-Moretlwe, Wits Reproductive Health and HIV Institute (WRHI), South Africa

What's the the advocacy agenda for PrEP as standard of care in SRH services and in trials?

M.Chatani-Gada, AVAC: Global Advocacy for HIV Prevention, United States

Discussion

THSA07 HIV Stigma, Discrimination and Human Rights Violations: Global Extent, Impact & the Way Forward.

Non-Commercial Satellite

Venue: Emerald Room

Time: 07:00-08:30

Organizer: The Global Network of People Living with HIV (GNP+)

This session explores the political, economic and sociological manifestations of HIV related stigma, discrimination and human rights violations on the global level articulated by civil society through our 2018-2022 organizational strategic planning survey, the State of People Living with HIV around the World: Back to Basics.

The session will provide attendees with:

- An up-to-date global perspective of where stigma, discrimination and human rights violations are increasing and decreasing
- An understanding of the structural and institutional drivers of these trends
- An overview of the impact, costs and consequences of HIV related stigma from the individual to societal level
- An examination of innovative ways that community concerns can be addressed via pragmatic interventions at the local, national and global levels.

Do Dang Dong

Shauna Olney

S.Olney, , Switzerland

Stefan Baral

S.Baral, Johns Hopkins School of Public Health, United States

THSA08 Times are changing: rethinking viral suppression* (*Please note that due to the promotional nature of this symposium, only healthcare professionals are invited to attend)

Major Industry Sponsor Satellite

Venue: Elicium 1

Time: 07:30-08:30

This symposium will consider the potential benefits and desired profile of a 2-drug regimen for the treatment of virologically suppressed people living with HIV. The session will review recently available clinical data, supported by experts' real-world experience and advice on when, and how to use this regimen in practice. Please note that due to the promotional nature of this symposium, only delegates legally authorised to prescribe or those who are employees of pharmaceutical, diagnostic, or medical device companies are able to attend.

THSA09 Harm reduction and war on drugs : community-based work in a challenging environment in Africa and the Caribbean

Non-Commercial Satellite

Venue: Auditorium

Time: 18:30-20:30

Organizer: Coalition PLUS (union of community-based NGO fighting against HIV/AIDS) & AIDES (the largest French NGO fighting against HIV/AIDS)

In 2011, the UN member states committed to reduce by 50% new HIV infections among people who use drugs (PWUD) by 2015. However, new HIV infections have increased by 30% the past 5 years among PWUD.

While the efficiency of harm reduction services is clearly documented and demonstrated, their implementation and scale-up remains impeded by several barriers such as repressive laws, stigmatization of PWUD and violations of human rights.

In francophone African and Caribbean countries, community-based actors are implementing both harm reduction programs for PWUD and advocacy campaigns to foster an enabling environment in favor of access of PWUD to the health services they need, despite challenging contexts hit by the damaging effects of repressive policies.

This symposium aims to bring together implementers, advocates, policy makers, communities and donors, and discuss an operational roadmap for the implementation of harm reduction tools and the decriminalization of PWUD in Africa and the Caribbean.

Opening Remarks

A.Fordham, International Drug Policy Consortium, United Kingdom; N.Burke Shyne, Harm Reduction International, United Kingdom; V.Simionov, International Network of People who use Drugs, United Kingdom

Panel Discussion I: Initiation of Harm Reduction Services and advocacy for PWUD inclusion

C.Anoma, Espace Confiance, Cameroon; M.Samassekou, ARCAD SIDA, Mali; C.Some, REVS PLUS, Burkina Faso

Panel Discussion II: Scaling up efficient experiment and advocacy to overcome political tensions, stigma and Human Rights violations

M.Karkouri, Association de lutte contre le Sida (ALCS), Morocco; A.Martin, COIN, Dominican Republic; N.Ritter, Coalition Plus, France

Debate

M.Naik, PILS, Mauritius; M.Beg, United Nations Office On Drugs and Crime (UNODC), Austria; B.Diouf, UNODC, Senegal; R.Jürgens, The Global Fund to Fight AIDS, TB and Malaria, Switzerland; P.Brenny, UNAIDS, Senegal; N.Ritter, Coalition Plus, France

THSA11 Launch of the IAS-Lancet Commission on the Future of Global Health and the HIV Response

Non-Commercial Satellite

Venue: Hall 10

Time: 18:30-20:30

Organizer: IAS and the Lancet Commission

Join the International AIDS Society (IAS) and The Lancet at the launch of a new report, "Advancing global health and strengthening the HIV response in the Sustainable Development Goal era". This satellite session will present the key findings from the Commission, share the evidence base for building on the the successes of the HIV response towards integration, and highlight the need for a global movement that links the HIV community and the global health field in a common undertaking. The plenary presentations and moderated discussion will be followed by a reception where the audience will have the opportunity to meet and further debate with the Commissioners.

Welcome and overview

L.Bekker, Desmond Tutu HIV Centre, South Africa; P.Das, The Lancet, United Kingdom; C.Beyrer, Johns Hopkins University, United States

Highlights of the science

J.Cepeda, University of California - San Diego, United States; L.Johnson, RTI International, United States; P.Kasaie, Johns Hopkins University, United States; B.Weir, Johns Hopkins University, United States

Moderated panel discussion

L.Pace, Global Health Council, United States; G.Garnett, Bill and Melinda Gates Foundation, United States; N.Kilonzo, National AIDS Control Council (NACC), Kenya; K.Makofane, Harvard University, United States

THSA13 Anal sex from top to bottom: Beliefs, behaviors and policies for better health

Non-Commercial Satellite

Venue: Elicium 1

Time: 18:30-20:30

Organizer: Microbicide Trials Network, AVAC, Anova Health Institute, APCOM, European AIDS Treatment Group, GayLatino, International Rectal Microbicide Advocacy, UHAI EASHRI

Anal sex is enjoyed world over by all genders and sexualities, but stigma, cultural taboos and criminalization prevent people from getting the information and care they need to maintain anal health and hygiene. Changing the discourse about anal sex from shame to celebration is a vital step to improving anal health. To that end, this session will address the many facets of anal health, including basic anal and rectal anatomy, the prevention and treatment of anal conditions (generally and related to the use of PrEP and TasP), HIV prevention candidates in the research pipeline and, of course, pleasure. Session speakers will also address customs and laws related to sexuality and anal sex that can facilitate or impede access to care. Importantly, attendees will be engaged in a discussion on how best to shed stigma, scientific misinformation and punishing policies to ultimately improve anal health in communities most vulnerable to HIV.

Welcome and Introductions

J. Bauermeister, University of Pennsylvania, United States

Introduction to Anal Health

H. de Vries, Public Health Service of Amsterdam (GGD); Academic Medical Center, University of Amsterdam, Netherlands

Transgender People and Anal Health

T. Kgositau, AIDS Accountability International, South Africa

MSM & The Double Delights of Douching

A. Carballo-Diequez, Columbia University, United States

Criminalization & Access to Care

E. Castellanos, GNP+, Global Action for Trans Equality (GATE), Belize

Embracing Anal Health Through HIV Research

J. Bauermeister, University of Pennsylvania, United States

Panel Discussion: Where do we go from here? Improving global anal health

M. Leonard, UHAI EASHRI, Kenya; S. Lope, GayLatino, Paraguay; C. Mubanga, Transbantu Association, Zambia; I. Rendon, APCOM, Thailand; K. Vance, ARC International, Canada

Closing Remarks

K. Block, European AIDS Treatment Group, Belgium

THSA14 How Far are We from HIV Remission?

Non-Commercial Satellite

Venue: Hall 11A

Time: 18:30-20:30

Organizer: ANRS

Scientific and Organizing Committee:
M. Muller-Trutwin (Chair) F. Barre-Sinoussi, S. Ciancia, F. Dabis, L. Pedroza-Martins, A. Saez-Cirion and C. Rouzioux

Long-term control of viremia after interruption of anti-retroviral treatment has been reported worldwide in some individuals (post-treatment controllers) inspiring the hope that a state of durable HIV remission is achievable. Although some studies revealed that early treatment initiation favors HIV remission, early initiation only infrequently leads to long-term post-treatment control, while control after treatment initiated during chronic infection may also occur. Novel therapeutic strategies toward HIV remission that might achieve durable control through different means are being tested, and some recent pre-clinical and clinical studies provided promising evidence of transient control of viremia. This symposium, organized by ANRS, seeks to summarize the state of the art on these studies in order to gain some insight on the mechanisms underlying post-treatment control and get a better idea of how far we really are from achieving sustainable remission of HIV infection.

Welcome

P. Dabis, Director, ANRS, France

An Update on Post-Treatment Controllers in France and Worldwide

L. Hocqueloux, CHR d'Orléans - La Source, France

Insights on Mechanisms of Post-Treatment Control

A. Saéz-Cirion, Institut Pasteur, France

Discussion

Lessons from Research Interventions aiming at HIV Remission

Very early ART Initiation during "Hyperacute" HIV Infection

T. Henrich, University of California, United States

Stem Cell Transplantations: ICISTEM

M. Nijhuis, University Medical Center Utrecht, Netherlands

Interventions with broadly neutralizing antibodies (bNAb)

M. Nussenzweig, Howard Hughes Institute, The Rockefeller University, United States

HIV Remission Research: Expectations and Questioning

A. Volny-Anne, EATG, France

Discussion

Concluding Remarks

F. Barré-Sinoussi, Institut Pasteur, France

THSA15 The transgender response to the epidemic in Latin America at AIDS 2018

Non-Commercial Satellite

Venue: Hall 11B

Time: 18:30-20:30

Organizer: Eventos Fundación Huésped

Presenting a review of TGW's health burdens in Latin America and related factors such as current legal recognition and rights in different countries, violence and hate crimes; living conditions and quality of life, with special focus on HIV. This will be presented by researchers in adherence to the antiretroviral treatment, ethical issues in researches with the trans population, mental health while receiving hormonization. Promoting the exchange of experiences in order to identify successful experiences that should be strengthened and those that could constitute best practices for the social inclusion of TWG and its consequent benefits for their healthcare. Leverage in and improve of REDLACTRANS network for ensuring the sustainability and focus on an integrated regional work, which will result in strategies that favor HIV testing, access and retention and overall improvements in health outcomes.

Last studies focus within the trans population in Latin America

O. Sued, Huésped Foundation, Argentina

Comparative research between Latin America and other regions of the world.

I. Aristegui, Fundacion Huesped, Argentina

Current legal and social situation of the Trans population in Latin America

A. Gun, Centro Médico Huésped, Argentina

Ethical issues regarding research with trans population.

V. Salazar, Fundación Huésped, Argentina

The voice of affected populations: Conversation between TGW

N. Cardozo, Fundación Huésped, Argentina; G. Rosales, RedLacTrans, Argentina; A.D' Marco, RedLacTrans, Bahamas; M. Luzquiños, RedLacTrans, Peru; K. Pankievich, RedLacTrans, Uruguay

Questions & Answers

THSA16 Optimizing the impact of key population programming across the HIV cascade

Non-Commercial Satellite

Venue: E105-108

Time: 18:30-20:30

Organizer: FHI 360/LINKAGES, amfAR, USAID, CDC

Key populations (KP) — including men who have sex with men, sex workers, transgender people, and people who inject drugs — are disproportionately affected by HIV. Reaching members of these communities with interventions that improve their access to and uptake of services across the HIV prevention, care, and treatment cascade is essential to achieving epidemic control. In partnership with the Journal of the International AIDS Society, we sought to expand the evidence base related to optimizing service delivery for KP through a journal supplement dedicated to the topic. This session will launch the supplement, bringing visibility to the latest evidence of what works to reach KP and link them to the prevention, treatment, and retention support they need. Panelists will share new data published in the supplement on innovations, outreach strategies, and delivery modalities for overcoming structural obstacles and improving service uptake with different KP groups across different geographies.

Building the evidence-base for key populations: Confronting the last frontier for epidemic control

C. Wolf, United States Agency for International Development (USAID), United States

Estimating the contribution of key populations towards the spread of HIV in Senegal and South Africa

P. Vickerman, University of Bristol, United Kingdom

Blue-Ribbon Boys: Factors associated with PrEP use, ART use and undetectable viral load among gay app users across six regions of the world

G. Santos, UCSF, United States

Social network methods for HIV case-finding among people who inject drugs in Tajikistan

K. Little, Population Services International, United States

Changes in engagement in HIV prevention and care services among female sex workers in Zimbabwe during intensified community mobilisation

T. Ndori-Mharadze, Centre for Sexual Health HIV and AIDS Research, Zimbabwe

From conventional to disruptive: Up-turning the HIV testing status quo among men who have sex with men in Vietnam

K. Green, PATH, Vietnam

Self-testing, communication and information technology to promote HIV diagnosis among young gay and other men who have sex with men (MSM) in Brazil

V. Veloso, Fundação Oswaldo Cruz, Evandro Chagas Clinical Research Institute and Brazilian Ministry of Health, Brazil

Uptake of HIV self-testing and linkage to treatment among men who have sex with men in Nigeria: A pilot distribution program through key opinion leaders

S. Adebajo, Population Council, Nigeria

Implementing a violence prevention and response strategy for key populations in Kenya

P. Bhattacharjee, University of Manitoba, Kenya

Moderated discussion

R. Wilcher, FHI 360, United States; K. Osborne, International AIDS Society (IAS), Switzerland

Closing remarks

T. Bingham, CDC, United States

THSA17 Start Free: Best practices to achieve an end to vertical transmission of HIV to children

Non-Commercial Satellite

Venue: G102-103

Time: 18:30-20:30

Organizer: UNAIDS and Positive Action Challenges

This symposium focuses on the best practices revealed by UNAIDS' and Positive Action Challenges (PAC) Free Start Challenge. The winners of the Challenge, which sought replicable innovations at a local level to speed up progress towards reaching the superfast-track target to reduce new HIV infections in children to less than 40,000 by 2018 and 20,000 by 2020, will be announced together with winning solutions and notable runners-up. Organizations will share their evidence-based experiences and a hands-on report on replicating best practices will be launched. The objective is to shed light on how to end MTCT in local communities, and encourage the quick replication and scaling of real life practices from around the world.

Speakers include Deborah Waterhouse, CEO of Viiv Healthcare, Chewe Luo, Head of HIV at UNICEF, Owen Ryan, Executive Director of IAS and PAC Judge, and senior UNAIDS leadership.

Part 1: Set the scene

Session introduction

Start Free progress update

D. Von Zinkernagel, UNAIDS, Switzerland

Positive Action Challenges: Start Free Challenge

D. Kemps, Viiv Healthcare, United Kingdom

Part 2: Learn from practitioners

D. Kemps, Viiv Healthcare, United Kingdom

Outreach - bringing services to community

t., Baylor, Swaziland

Tech-led community connectivity

t., Baylor, Swaziland

Mother to Mother model

t., Baylor, Swaziland

C3 - Clinic Community Collaboration toolkit

H. Chorlton, PATA, South Africa

Part 3: Moderated discussion and interaction with audience

D. Kemps, Viiv Healthcare, United Kingdom

Part 4: Ask your burning questions

Part 5: Follow-up and action plans

THSA18 Key Considerations and Implementation Tools for Introducing New Point-of-Care HIV Diagnostic Technologies into National Health Programs

Non-Commercial Satellite

Venue: G104-105

Time: 18:30-20:30

Organizer: United Nations Children's Fund (UNICEF) African Society for Laboratory Medicine (ASLM) Clinton Health Access Initiative (CHAI) Elizabeth Glaser Paediatric AIDS Foundation (EGPAF) Unitaid

With the increasing availability and rapidly growing interest in point-of-care (POC) molecular technologies for early infant diagnosis (EID) and viral load (VL) testing, many countries in Africa have introduced and are scaling up routine POC EID, and are also considering the targeted use of POC VL testing within their national health programs. To address the accelerating interest from countries, global health partners recently launched two resources to support countries with integrating new POC diagnostic technologies into their national health programs: Key Considerations for Introducing New HIV Point of Care Diagnostic Technologies in National Health Systems and the HIV Point-of-Care Diagnostics Toolkit. This session will highlight the specific contributions of these new resources, which are based upon robust implementation experience and the technical expertise of numerous stakeholders. Implementation experience to date, lessons learned, and best practices in scaling up these new technologies across diverse country contexts will be highlighted.

Welcome and Introduction

G.McCullough, Unitaid, Switzerland

Key Considerations for Introducing New HIV Point-of-Care Diagnostic Technologies in National Health Systems & the HIV Point-of-Care Diagnostics Toolkit

A.Costa, UNICEF, United States

Evidence on the impact of POC testing for addressing pediatric HIV and optimizing POC platforms

J.Cohn, Elizabeth Glaser Pediatric AIDS Foundation, Switzerland;
J.Sacks, Clinton Health Access Initiative, United States

Video

Introducing and Scaling up HIV POC Diagnostic Technologies: Implementation Approaches, Lessons Learned, and Best Practices

H.Watts, Office of the Global AIDS Coordinator, US Department of State, United States; A.Couto, Mozambique Ministry of Health, Mozambique; J.Kandulu, Ministry of Health, Malawi; P.Fassinou Ekouévi, Elizabeth Glaser Pediatric AIDS Foundation, Cote D'Ivoire; S.McGovern, Clinton Health Access Initiative, United States; L.Vojnov, World Health Organization, Switzerland; F.Anam, The International Community of Women Living with HIV, Kenya

Questions and Answers

Closing Statement

N.Nqobile, African Society of Laboratory Medicine, Ethiopia

Closing Statement

C.Luo, UNICEF, United States

THSA19 Getting PrEP to where it's needed most: A global conversation led by African men who have sex with men (MSM)

Non-Commercial Satellite

Venue: E102

Time: 18:30-20:30

Organizer: AVAC, FHI 360/LINKAGES, Jhpiego

Oral PrEP is a highly-effective prevention tool with the potential to dramatically curb HIV epidemics if taken to scale via 'real world' public health programs. Recommended by WHO as safe and effective for those at substantial risk of HIV, oral PrEP use is gaining traction among gay men and other MSM in some high income countries; elsewhere, progress is mixed. In Africa, PrEP programs for MSM are largely non-existent, with only a handful in early stages. Taking full advantage of the global nature of the International AIDS Conference, this session will: 1) take stock of the status of PrEP programming for MSM in Africa; 2) discuss how successful PrEP introduction efforts in the US and other countries can inform efforts in Africa; and 3) explore the roles civil society must play – through advocacy and programming – to mobilize resources and expand the access to PrEP among MSM in Africa that is sorely needed.

Introduction

B.Kanyemba, University of Cape Town, South Africa; C.Akolo, FHI 360, United States

Telling it like it is: what MSM organizations in Africa are saying about PrEP in their countries

M.Ighodaro, AVAC, United States

Africa countries at the forefront of PrEP programming

J.Musimbi-Mbole, NASCOP Key Populations Technical Support Unit, Kenya; H.Sudebar, , South Africa

It takes a global village: landscape of national PrEP strategies, civil society engagement/advocacy, donor support and international normative agencies

R.Baggaley, World Health Organization (WHO), Switzerland; C.Pulliam, US Department of State, Office of the U.S. Global AIDS Coordinator and Health Diplomacy, United States; S.Matse, Ministry Of Health (Swaziland National AIDS Program), Swaziland

The Role of CSOs in Expanding PrEP Access Among MSM in Africa

W.Rashidi, Queer Alliance Nigeria, Nigeria; J.Mathenge, Health Option for Young Men on HIV/AIDS/STIs, Kenya; H.Sakala, Friends of Rianka, Zambia; M.Poonkasetwattana, Asia Pacific Coalition on Male Sexual Health (APCOM), Thailand; B.Brown, ANOVA, South Africa; G.Trapence, CEDEP, Malawi; T.Molefe, Men for Health and Gender Justice Organisation, Botswana; M.Simelane, Rock of Hope, Swaziland

Closing remarks

C.Akolo, FHI 360, United States; B.Kanyemba, University of Cape Town, South Africa; G.Ayala, Men Who Have Sex With Men Global Forum (MSMGF), United States

THSA20 Transition and sustainability: Lessons, questions and priorities

Non-Commercial Satellite

Venue: Emerald Room

Time: 18:30-20:30

Organizer: ICAP at Columbia University

As countries strive to reach and sustain epidemic control, issues of sustainability and transition move to center stage. This panel will explore lessons learned about crafting sustainable health programs that can be transitioned from donor-supported to country-owned models. Drawing upon experience from Ministries of Health, academics, implementers, donors, and civil society, the panel will highlight key challenges and lessons learned.

Introductions and framing remarks

W.El-Sadr, ICAP at Columbia University, United States; D.Barr, Freemont Centre, United States

Sustainability: the view from PEPFAR

M.Ruffner, Office of the Global AIDS Coordinator, United States

Sustainability: the view from the Global Fund

A.Fakoya, The Global Fund to Fight AIDS, Tuberculosis and Malaria, Switzerland

Do less harm: modeling of HIV program contraction

E.Hyle, Harvard University, United States

The impact of the PEPFAR "pivot" on non-priority sites in Uganda

H.Zakumumpa, Makerere University, Uganda; J.Wilhelm, Johns Hopkins Bloomberg School of Public Health, United States

Q&A

The impact of Global Fund transition strategies on national HIV programs in Central Asia

A.Deryabina, ICAP at Columbia University, Kazakhstan

What happens to HIV programs when donors leave?

S.Lynch, Médecins Sans Frontières, United States

Zimbabwe's approach to HIV program transition and sustainability

G.Gwinji, Ministry of Health and Child Care, Zimbabwe, Zimbabwe

South Africa's approach to HIV program transition and sustainability

Y.Pillay, National Department of Health, South Africa

Q&A

THSA10 Perspectives on the HIV treatment landscape

Major Industry Sponsor Satellite

Venue: Elicium 2

Time: 18:30-20:30

This highly interactive scientific exchange symposium will explore existing and new HIV treatment paradigms. Michael Aboud (ViiV Healthcare, UK) will invite attendees to prioritize the discussions that take place. An expert international faculty including Dr José Arribas (Madrid, Spain), Professor Pedro Cahn (Buenos Aires, Argentina), and Professor Chloe Orkin (London, UK) will then present and invite attendee comment on topics ranging from current and future antiretroviral regimen design, to managing the impact of life-long antiretroviral therapy, and public health implementation.

Introduction: landmarks in a changing landscape

Thursday 26 July | Satellite Sessions



M.Aboud, ViiV Healthcare, United Kingdom

A window on antiretroviral therapy

J.Arribas, Hospital La Paz Institute for Health Research, Spain

A window on life-long treatment

C.Orkin, Royal London Hospital - BHIVA, United Kingdom

A window on public health, challenges and implementation

P.Cahn, Fundacion Huesped, Argentina

Concluding panel discussion and meeting close
