

# **AIDS 2016**

**21ST INTERNATIONAL  
AIDS CONFERENCE**

**DURBAN, SOUTH AFRICA** JULY 18–22, 2016

**WWW.AIDS2016.ORG**

 **#AIDS2016 | @AIDS\_conference**



# A reflection on **AIDS 2016**

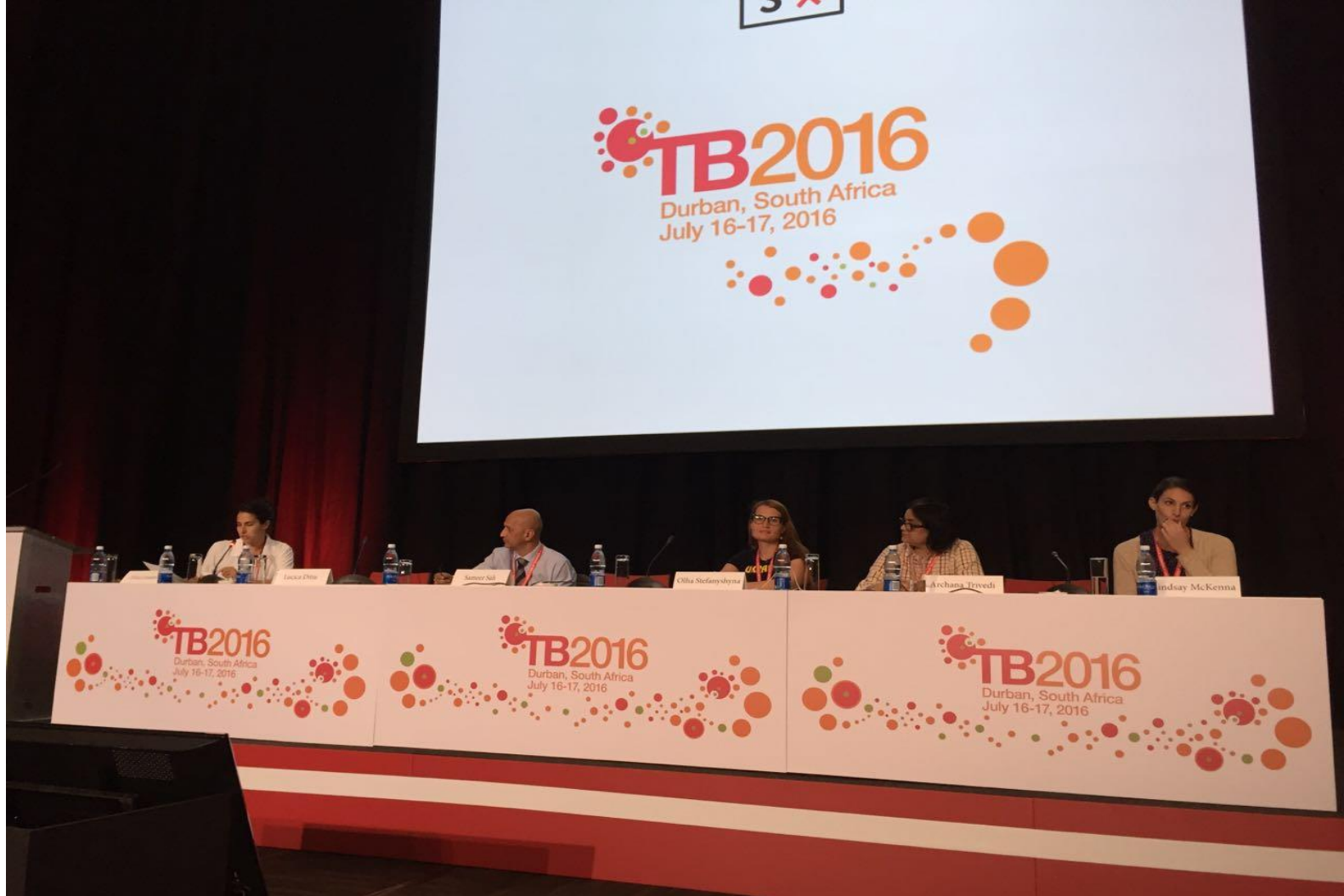
Somsri Tantipaibulvut

Thai Red Cross AIDS Research Centre

# AIDS 2016 features an expanded pre-conference program

- The IAS Towards an HIV Cure Symposium
- The 3rd International HIV/Viral Hepatitis Co-Infection Meeting
- The 2-day TB 2016 conference
- The Global Forum on MSM and HIV (MSMGMF) pre-conference meeting
- A meeting of the Global Network of Transgender Women and HIV
- The Global Network of People Living with HIV's LIVING 2016: The Positive Leadership Summit





Researches reveal that 56% of people with TB has HIV. In the case of Zimbabwe, this percentage rises to 69%. These figures highlight the importance of programs coordinated to fight against both diseases.



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# Background

- The International AIDS Conference is the largest conference on any global health or development issue.
- To provide a unique forum for the intersection of science and advocacy, and an opportunity to strengthen policies and programmes to ensure an evidence-based response to the epidemic
- It is a chance to assess where we are, evaluate recent scientific developments and lessons learnt, and collectively chart a course forward

# Background on AIDS

- Sixteen years ago, It was the first time in Durban. The 13th International AIDS Conference (AIDS 2000) was the catalyst for historic change, ushering in a global movement to bring life-saving antiretroviral treatment (ART) to developing countries.  
Access to Care
- Durban 2016: Chris Beyrer called Access to PrEP

# Theme

- Access Equity Rights Now

: A call to action to work together and reach the people who still lack access to comprehensive treatment, prevention, care and support services.

: A call to action to strengthen the commitment to HIV research evidence-based interventions.

# Theme

- Access Equity Rights Now

: A call to action to all HIV stakeholders to unite and overcome injustices caused by violence and the exclusion of people on the basis of gender, class, race, nationality, age, geographic location, sexual orientation and HIV status.

: A call to action to repeal laws that infringe on people's human rights and deny communities the ability to participate in the world as equals.

: Reminds us that all our gains will be lost if we do not continue to push forward and build a strong global movement to change the course of the epidemic.



# AIDS 2016 Conference Objectives

AIDS 2016 aims to reinvigorate the response to HIV and AIDS by:

1. Bringing together the world's experts to advance knowledge about HIV, present new research findings, and promote and enhance scientific and community collaborations around the world;

2. Promoting HIV responses that are supported by and tailored to the needs of at risk populations or people living with HIV, including women and girls, men who have sex with men, transgender people, sex workers, young people, and people who use drugs;

3. Promoting activism and community mobilization that holds leaders, industry, and governments accountable and increases their commitment to an evidence-based, human-rights-affirming HIV and AIDS response;

4. Advancing a clear agenda for HIV in a post-2015 framework, including the cross-cutting issues of criminalization, gender-based violence, sexual and reproductive health, rights, and stigma and discrimination that keep people living with HIV at the center of the HIV response; and

5. Building innovative partnerships with businesses, community, government, and science to strengthen HIV prevention and treatment efforts.





21st International AIDS Conference, 18-22 July 2016  
Deputy President Ramaphosa delivers an address during  
official opening session of the 21st International AIDS  
Conference at the Durban International Convention Centre

# At AIDS 2016:

- More than 15,000 participants attended the conference from 153 countries
- 157 sessions and workshops on the latest in HIV science, programmes and advocacy
- 6 plenary sessions featured leaders and experts from all walks of life
- 992 volunteers contributed their time and energy
- More than 800 media delegates reported from the conference
- 933 delegates attended thanks to an AIDS 2016 scholarship
- 130 clinicians and 80 advocates participated through the IAS Educational Fund
- 135 exhibitors showcased their work in the Global Village and Exhibition
- 128 satellite sessions were held by partner organizations
- 42 awards and grants were announced for researchers, organizations and companies
- 6,000+ AIDS 2016 mobile apps were downloaded from the App Store and Google Play
- 33,934 people visited the AIDS 2016 website during the conference
- More than 144,000 tweets were published on the #AIDS2016 hashtag
- 726,268 people were reached by posts on the AIDS 2016 Facebook page



# Across the five days of AIDS 2016 we heard about:

- Advances in HIV prevention, including new data on access to and use of PrEP; HVTN 702, the study that could lead to the first approved vaccine for HIV; and new research advancing the search for microbicides, long-acting prevention, and multi-purpose prevention technologies.
- Successes in treatment scale-up, and new efforts to close the treatment gap and move towards the global 90-90-90 targets for testing, access to treatment and viral suppression.
- The extraordinary impact of HIV on young people, especially on adolescent girls and young women, and the vital contributions of young people to the AIDS response.
- The detrimental impact of laws and policies that stigmatize or criminalize sexuality, sex work, transgender identity, drug use, and living with HIV.
- And hundreds of other topics related to every aspect of the global epidemic and response.





ShangRing

## Male circumcision device for single use

- Safe
- Minimally invasive
- Simple
- Aesthetically pleasing

Manufactured by:  
Wuhu Snnda Medical Treatment Appliance Technology Co., Ltd

Address:  
4F Overseas Student Pioneer Park,  
Science Innovation Centre, Economic & Technology Zone  
North Yinhui Road, Wuhu 241007, Anhui, China  
Tel: +86-553-5963971; +86-553-5962513  
Fax: +86-553-5844880; +86-553-5964571

CE  
US FDA 510 (K) Clearance



Gift from God

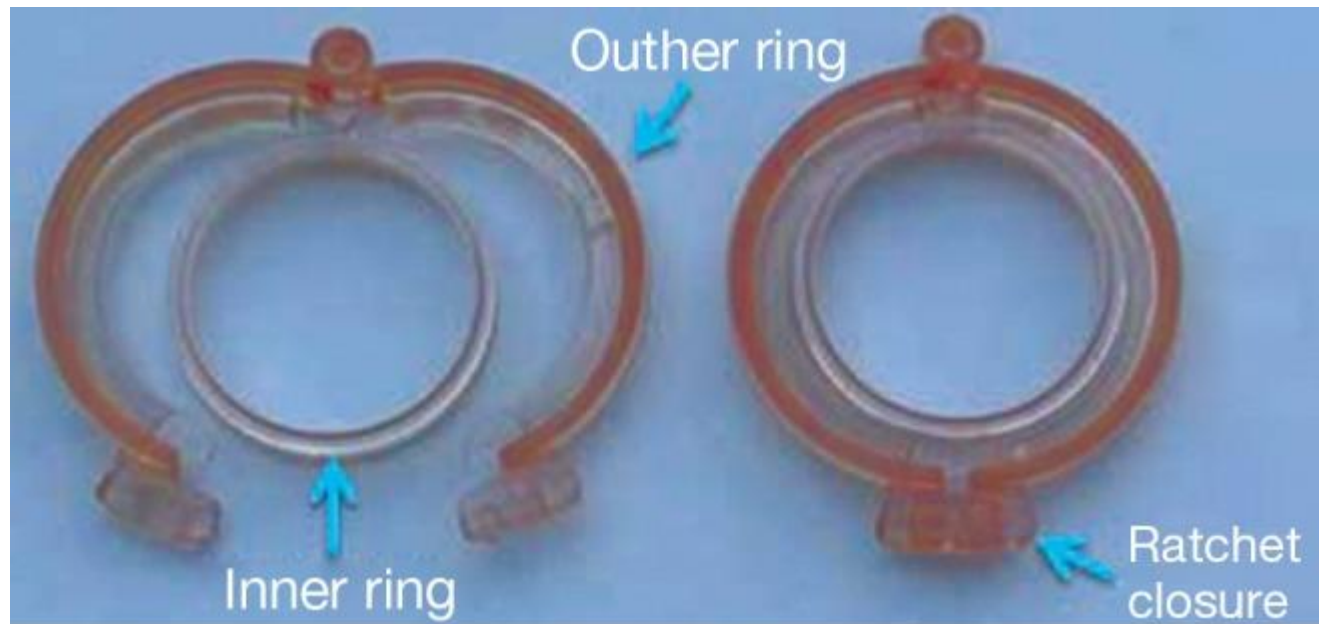
- Successful clinical usage with over a million users
- Achieve safety, precision and reliability with surgical procedure standardization
- Self-locking design, superior surgical results
- ShangRing core technology, 10-year dedication in male circumcision
- Minimum post-surgical interference with daily life
- Advance the reproductive health of human beings

SR-B-01	SR-B-02	SR-B-03	SR-B-07	SR-B-08	SR-B-09
A1	A3	A2	A1	A	B
SR-B-04	SR-B-05	SR-B-02	SR-B-01	SR-B-03	SR-B-05
C	D	E	F	G	H
SR-B-05	SR-B-06	SR-B-04	SR-B-02	SR-B-03	SR-B-05
I	K	M	O	Q	S

For more information, please visit the website for ShangRing at:  
[www.snnda.cn](http://www.snnda.cn)







The Shang Ring male is a sterile, single use, disposable male circumcision device that consists of two concentric plastic rings, the inner of which is lined by a silicone pad. The outer ring consists of two halves that are hinged together at one end with a ratchet closure. Hemostasis is realized by the pressure applied by the interlocking rings which minimizes bleeding and eliminates the need for sutures.

- The Shang Ring circumcision procedure: (A) measure the penis to determine which size device to use; (B) administer local anesthesia after preparing the site with antiseptic; (C) place the inner ring onto the penis at the level of the coronal sulcus; (D) grasp the edges of the foreskin with clamps; (E) flip the foreskin over the inner ring; (F) place the out ring over the inner ring, with the foreskin in-between; (G) cut the foreskin on the underside of the device using scissors; (H) make 8-10 slices in the foreskin on the underside of the ring using a scalpel blade. These slits are necessary to allow the skin to spread as healing occurs and to allow for 'expansion' of the scab during an erection; (I) the completed procedure. The device remains in place for seven days.



- Removal of the Shang Ring and healing of the penis: (A) seven days after the procedure; (B) open the outer ring; (C) remove the outer ring; (D) carefully pull back the inner ring from the wound edge; (E) cut the inner ring in two places with the special scissors and remove; (F) after ring has been removed on day 7 post-circumcision; (G) day 14 post-circumcision showing normal healing; (H) day 28 post-circumcision showing normal healing; (I) completely healed at day 42 post-circumcision.







- It's amazing how quick it is.



You can see for yourself the result while you're in the room.

# At the Conference







Harry also called for a "new generation of leaders" to take up the cause, saying it is "time for us to step and acknowledge that stigma and discrimination still act as the greatest barrier to us defeating the disease one and for all."



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## Prince Harry, Elton John Join Forces at 2016 International AIDS Conference

## One Woman, Many Choices: Hormonal Contraception and HIV Communication and Action in the Context of Uncertainty

- To build understanding of the current state of the research, policy, communications and advocacy regarding hormonal contraception and HIV, including: (1) an update on the current state of the science regarding DMPA (Depo Provera) and other progestogen-only contraceptives and risk of HIV acquisition, and specific methods and interactions with ART in women living with HIV; (2) a review of the Strategic Framework for Communication on hormonal contraception and HIV (developed by USAID, piloted in Malawi and Swaziland); (3) a report on advocacy/coalition building for action in the context of uncertainty from the co-chair of the HC-HIV Advocacy Working Group; (4) update on the status of research, including the ECHO trial.

# Stories in Sisterhood: Using Digital Storytelling to Enhance Knowledge and Internet to Use PrEP

- Self-identified women of color are at an even greater risk for HIV/AIDS and other health related issues. Digital storytelling can serve as an effective health education strategy to increase knowledge and awareness about shared experience of marginalized groups by providing them the opportunity to serve as content experts through the use of personal narratives. Digital storytelling is a form of community based participatory research that combines narratives, images, videos and sound to create a short narrative about one's personal experience for a specific topic. The "Be PrEPared!" Digital Storytelling Project used digital stories related to the marginalized experience of cis and transwomen of color to inform intervention development of the "Be PrEPared!" Increasing Knowledge & Awareness about HIV Prevention and PrEP. Utilizing a Comprehensive Women's Health Approach health education curriculum. This presentation will highlight the methods and process for developing digital stories with eight cis and transwomen from the US (Texas) during a three-day training workshop to share knowledge and increase intent to use PrEP, and advocating for PrEP within a comprehensive women's health approach.





# Regulatory Pathway for HIV Prevention Products: The Dapivirine Vaginal Ring as a New Drug Application

The HIV prevention field welcomed the results from two pivotal phase III studies that showed that the dapivirine vaginal ring is both safe and effective as an HIV prevention tool that women may use. This result changed the vaginal microbicide landscape as it is the first time that two studies demonstrated statistical significance for product efficacy. Results from these studies have been communicated to key stakeholders in Africa and also globally. The product developer and regulatory sponsor, The International Partnership for Microbicides (IPM), will move forward with submitting a dossier of studies to medicines regulatory authorities for licensing the product for public use.

Four key areas will be addressed:

- Regulatory pathway for the dapivirine ring as a new drug application — what the process involves
- What advocates need to know and how they could assist in the meanwhile
- Implementing dapivirine ring Open Label studies — what needs to be done differently and does adherence matter
- Post results: Managing expectations in study communities who have seen both futile and efficacious study results

# Breaking Down Silos: Community Engagement Across Diseases and Donors

The Good Participatory Practice guidelines (GPP) are a set of recommendations for including a broad set of individuals and groups who have influence over a trial into the research process. This workshop will examine various models of GPP implementation across research phases, diseases and donor requirements.

Participants will be able to use or adapt models of GPP for use within their own programs or contexts and hear/share successes and challenges of GPP implementation in real-world settings.

# PrEP Preposition 4 Prevention: Who's Prepared 2 Know?

Sub-Saharan Africa continues to be noticeably the axis of the HIV epidemic, with adolescent girls and young women aged 15 - 24 helplessly at risk of new HIV infections. Historically there has been over reliance to ABC which has clearly not worked for everyone. Currently, Truvada, which is used as a form of pre-exposure prophylaxis (PrEP) to prevent HIV, has been approved by a number of countries, including South Africa and Kenya in Africa. This session looks to engage participants in the basics of PrEP and its science including what and how advocates can get involved.



# Safer Conception for HIV-affected Individuals and Couples: Synopsis of Findings

Globally, 19 million people living with or affected by HIV want a child. Men and women accept unnecessary HIV risks to meet their reproductive goals. Research has shown that safer conception strategies make it possible for HIV-affected individuals and couples to conceive while keeping partners and children HIV-free. This session will be an interactive workshop. Researchers, people living with/affected by HIV, clinicians, and advocates who are committed to empowering HIV affected individuals and couples to access their desired reproductive and sexual choices will share what we know about safer conception strategies. Synopses of safer conception research studies and programs from around the world will be shared and discussed.



# Addressing Known Causes of Poor Participation by Black MSM in HIV Prevention, Treatment and Research

The most commonly cited causes of poor participation by African Americans in HIV prevention trials are mistrust or fear, stigma, and misinformation. These are also common causes of poor participation by Black MSM (BMSM) and Young Black MSM (YBMSM) in HIV prevention and treatment. This workshop will focus on strategies to improve engagement of BMSM/YBMSM in primary medical care, regular STI testing, PrEP uptake, and HIV prevention and treatment research studies. These strategies include investing in building the research literacy of local BMSM leaders; improving the health literacy of front-line staff and clients of community-based organizations; and providing community role model stories to increase PrEP use and research study participation. At APEB in Oakland, California, staff is working with UCSF to implement the STYLE (Strength Through Livin' Empowered) intervention to improve retention in care for BMSM living with HIV. In addition, efforts to engage members of the Black Church and the House/Ball Community in HIV prevention and treatment research will be discussed by a licensed Baptist minister and a Legendary House Father.

# How is that Rectal Revolution Coming? An Update on Global Rectal Microbicide Research and Advocacy

So what's up with rectal microbicide research? Now that we have PrEP, do we even need a rectal microbicide for HIV prevention? What are the trials, issues, opportunities and challenges we should be paying attention to? Join us as we tackle these questions in a casual, conversational format. #RectalPride







Image: An HIV puppet takes to the streets of Durban during AIDS2016



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A Treatment Action Campaign protest is held in Durban during AIDS2016





A march organised by the Treatment Action Campaign moves through the Durban CBD.



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Condom Couture by Brazilian artist and AIDS activist  
Adriana Bertini.



Grandmothers hold signs at a protest at AIDS2016 in Durban.





Charlize Theron gives the opening speech at the 21st International AIDS Conference.



Sex is a game of roulette for South African girls—only they're not in control of the dice  
Older men, so-called 'sugar daddies'



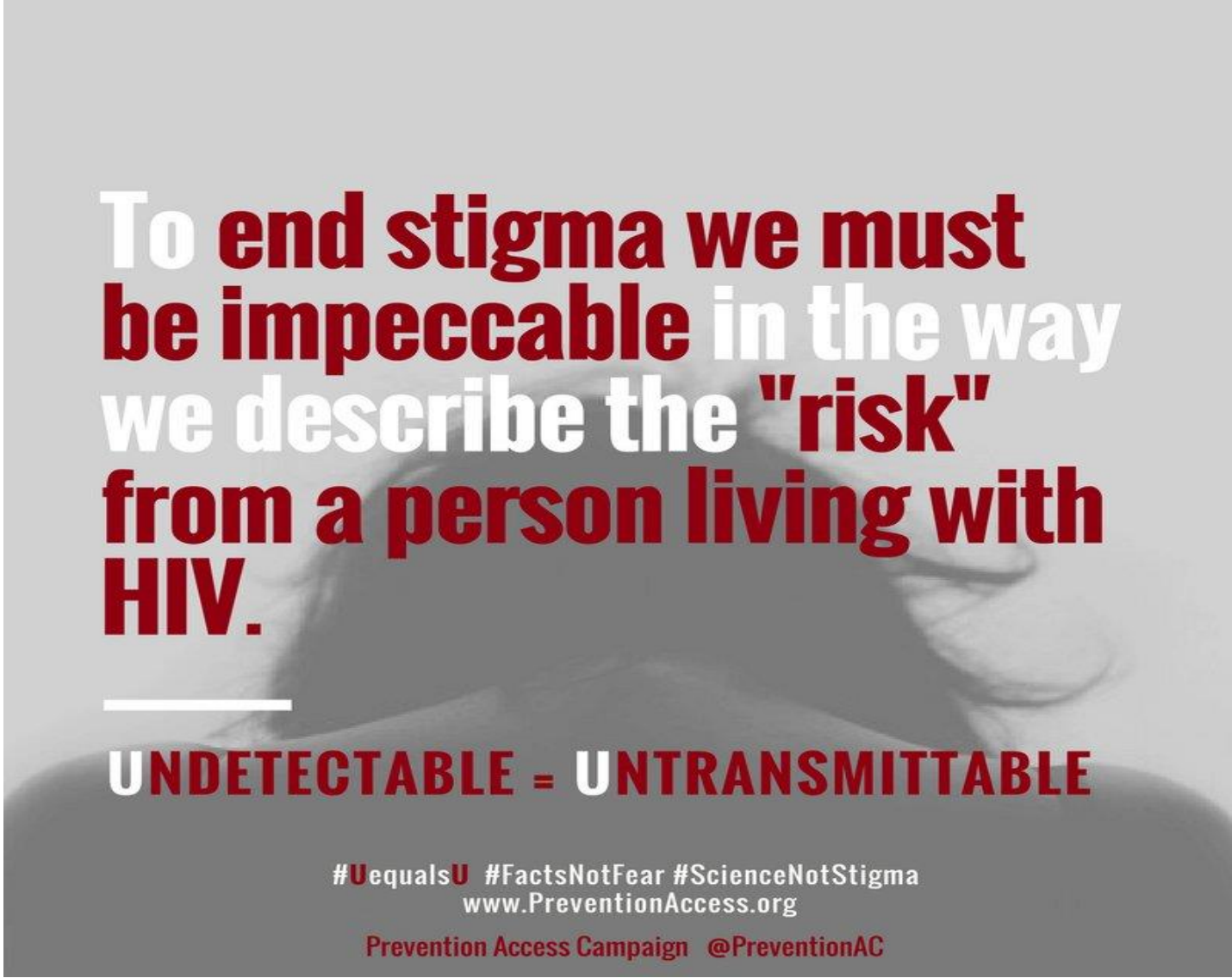


The fight against AIDS is a fight for human rights



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**To end stigma we must  
be impeccable in the way  
we describe the "risk"  
from a person living with  
HIV.**

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**UNDETECTABLE = UNTRANSMITTABLE**

#UequalsU #FactsNotFear #ScienceNotStigma  
[www.PreventionAccess.org](http://www.PreventionAccess.org)

Prevention Access Campaign @PreventionAC

Undetectable = Untransmittable! Stay on treatment to  
Stay undetectable to Stay untransmittable



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**MYTH**

The world cannot afford the \$26 billion per year required to end the AIDS epidemic

In 2015, the world spent...

**\$19**  
billion globally on the AIDS response

**\$65**  
billion on soft drinks in the US alone

**ACTUALLY...**

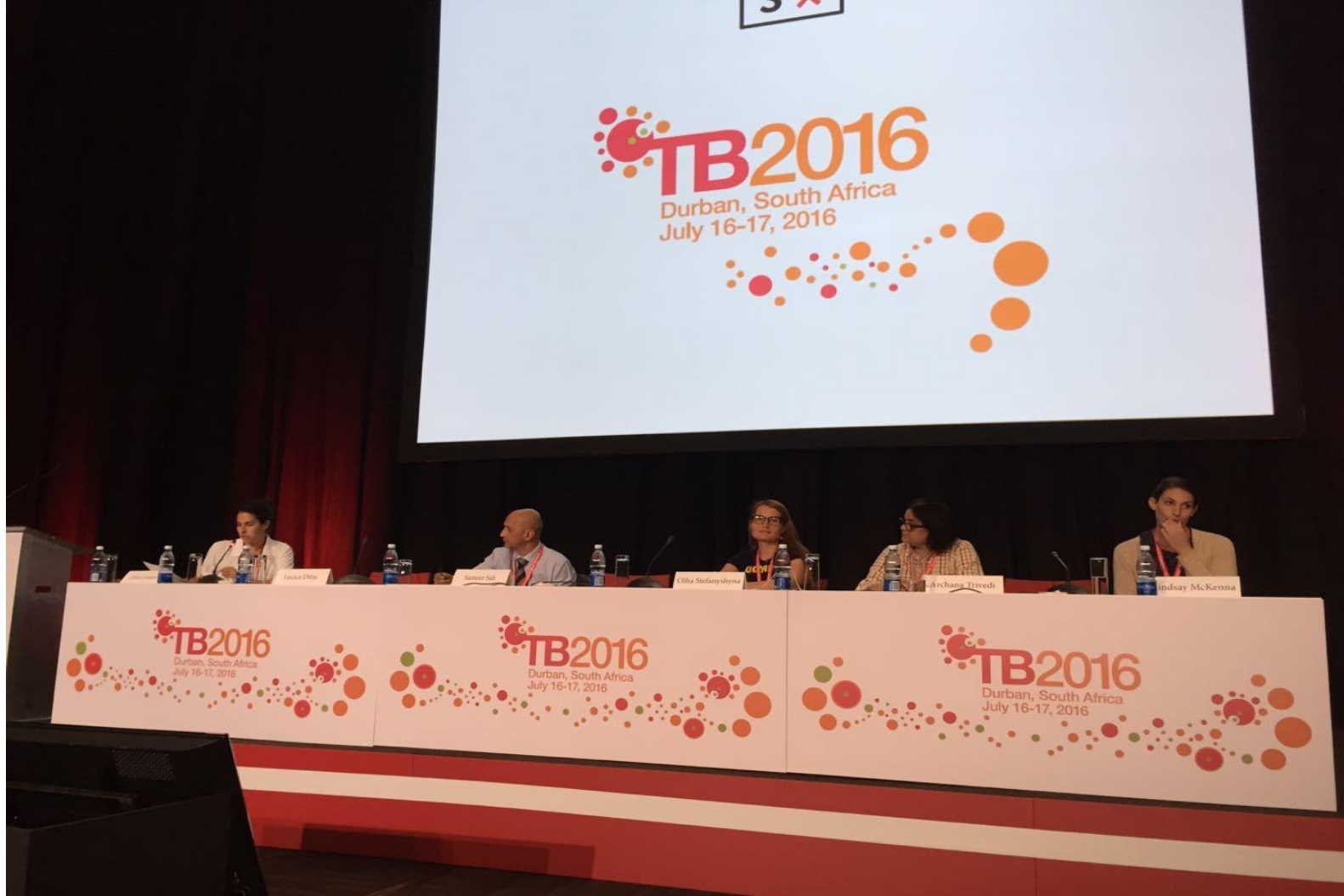
Mobilizing the additional funding needed to put us on track to ending the AIDS epidemic by 2030 is well within the world's reach. It is simply a matter of priorities.

**HEALTH GAP**  
GLOBAL ACCESS PROJECT





- The South African government also announced the launch of self-service medicine dispensing machines which could soon see South Africans obtaining their medication from self-service ATM-style machines.
- The announcement was made by the South African Ministry of Health today as one of the breakthroughs for the country. The Pharmacy Dispensing Unit (PDU), currently being piloted at Thembaletu clinic in Johannesburg, is a self-service machine where patients can obtain their medication in the same way people withdraw money at an ATM, a process that most South African are familiar with.



Researches reveal that 56% of people with TB has HIV. In the case of Zimbabwe, this percentage rises to 69%. These figures highlight the importance of programs coordinated to fight against both diseases.



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# New anti-HIV vaccine presented at 2016 International AIDS Conference

"HVTN 100 used the same vaccines that RV144 tested, but made them specific to the Clade C subtype of HIV, which is widespread in Southern Africa. We also changed the adjuvant used with one of the vaccines, with the goal of eliciting a more powerful immune response, and added a booster injection to prolong the period of protection," said HVTN 100 Protocol Chair Linda-Gail Bekker, who is also Deputy Director of the Desmond Tutu HIV Centre in Cape Town and International AIDS Society President-Elect.

# Total Control of the Epidemic (TCE)

- To date about 18.5 million people were reached out to with HIV basic counseling and testing information, sexual behavior change, individual mobilization for HIV Voluntary Counseling and Testing, sexual risk reduction planning as well as managing, ART treatment and care.

- Today, more than 17 million people living with HIV are on treatment, and both new HIV infections and AIDS-related deaths are falling. Despite significant progress, more than half of those living with HIV still do not have access to treatment and new prevention tools remain out of reach for most people who are in need.



- The conference is the legacy: access and equity and making sure no-one is left behind.
- Nobody Left Behind



# Outcomes of Home Based Testing and Counseling

- TCE in Zambia and South Africa have carried out home-based Home based Testing and Counseling (HTC) services to bring larger amount of the local population under testing coverage. In Zambia 96,000 people were tested through home-based HTC services within a catchment population of 350,000 in Lusaka (28% of total population) between April – September 2015 (average monthly coverage 16,000 or 5% of catchment population) with detection of around 10% sero-positivity.
- Of the 9,710 people who tested HIV positive in the catchment areas in Lusaka 6,424 completed linkage within 6 months or 66%.



# AIDS conference 2016: the gains, the gaps, the next global steps

- As the 21st International AIDS Conference wraps up in Durban, South Africa, Professor Linda-Gail Bekker, incoming International AIDS Society President, talks to The Conversation Africa health and medicine editor Candice Bailey about what was achieved and what still needs to be done.



# What are the three interventions or innovations that stand out at the conference in terms of taking the fight against HIV forward?

- The testing innovations. Addressing all the steps from testing is critical.
- Pre-exposure prophylaxis.
- A fresh approach to adolescents. This conference has reinvigorated the notion that we have to get adolescents to the table. You feel their voice.
- The message I have heard here is that we need to have an integrated approach. We can't just talk HIV treatment or just HIV prevention. It has to take into consideration structural issues, behavioural issues, rights, access – a lot of issues. And I think it becomes a model of how we really look after our adolescents around the world and HIV is a great catalyst within that.



## Based on the discussions at the conference where are the gaps in the global HIV response?

- At the moment it's money. There is a horrible funding gap that we have to address.
- When we get help from Sir Elton John, Prince Harry, Princess Mabel from The Netherlands and Charlize Theron to shine a focus on this we are eternally grateful. We need help from everyone to carry the message that the job isn't done.

# What is the message that is coming out of this conference?

- The job is not done.
- Durban has re-energised the whole sense of community and engagement. Now we need the rest of the world to get on board.

- a study finds that taking antiretroviral therapy from Monday to Thursday, while taking weekends off, maintained undetectable viral loads for the majority of study participants. Another study provides updated analysis on how effective on-demand pre-exposure prophylaxis (PrEP) is at preventing HIV. To beat HIV, you have to follow the science!





# AIDS 2016 Awardees

- The IAS and other conference partners sponsored a number of scientific prizes and awards at AIDS 2016 to reward promising researchers who are doing exceptional work in HIV research. A total of 10 delegates received scientific prizes. Women, Girls and HIV Investigator's Prize
- Prize for Excellence in HIV Research Related to Children
- IAS TB/HIV Research Prize
- Lange/Van Tongeren Prizes for Young Investigator Awards
- Special HIV Cure Prize Awarded





# Commitments

## AIDS 2016 Conference

### Durban South Africa

### 18-22nd July 2017

- In July 2016 delegates from 8 National Societies covering 5 regions and representatives from the Partnership for Drug and Substance Abuse, RedCross+, and Youth met in Durban, South Africa to participate in the AIDS2016 conference and pre-conferences. Delegates attended sessions, engaged in debates and activism and met regularly to discuss future directions for HIV programming and action globally.

- From the global priorities expressed at the AIDS2016 conference and based on the mandates of the various arms of the Movement, attending delegates identified the following priorities:
- Key populations, including but not limited to men who have sex with men, transgender people, prisoners, people who inject drugs and sex workers are consistently missing out on essential HIV services. They are not unreachable but are often unreached, being lost at various points along a continuum of care that fails to provide for their medical, social and community needs. Without them we will not reach the 90-90-90 targets.

- Holistic care for people along the continuum that integrates HIV with the biggest killer of PLHIV, TB, and tackles the needs of those with NCDs, who are aging and who require increased psychosocial support is the only way to ensure the most vulnerable are able to live healthy lives. Programmes should not be siloed and our volunteers who work in and represent the communities affected by these health problems are best placed to understand the intermingling nature of these problems and provide us with solutions to address them.





- Over half of Red Cross Red Crescent volunteers globally are youth. These youth are more likely to engage on sensitive issues, are keen to show leadership when encouraged to do so and are also a priority target group to prevent new infections of HIV.
- Often people are lost within the continuum of care at the point that formal health structures must connect with communities. Red Cross and Red Crescent NS are ideally placed to find these gaps and make these connections using Community Based Service Delivery Models.



To set Red Cross and Red Crescent Societies on the path to contributing significantly to meeting the global 90-90-90 targets, delegates propose a commitment to the following concrete actions:

- Reaffirm and enhance commitment to the Greater and Meaningful Involvement of People Living with HIV (GIPA) principle. The GIPA principle should be applied within all programmes in which HIV is a central or integrated component to ensure that PLHIV participate on an equal basis in the design, planning, implementation and monitoring and evaluation of HIV prevention programmes and projects. To do this, Federation will work with National Societies to reinvigorate the RCRC+ initiative to provide feedback to the Movement`s performance in implementing the GIPA principle.



- Develop a framework for National Societies and based on the successes of National Societies around the globe on how to work with key populations, to be developed with specialised partners, specifically looking at entry points for those who have not previously engaged with these groups.
- Engage in sensitisation activities within the Movement on key populations and in doing so consistently work with key populations to guide the Movement. This speaks to a principle of not speaking on behalf of vulnerable people but of working with them.



- Grounded in the concept of zero stigma, provide guidance on advocacy efforts. This advocacy would be set apart from the significant work that National Societies do to promote the benefits of their work through marketing and communications efforts and be focused on maximising the unique auxiliary relationship that National Societies have with government.
- Finalise the cost analysis exercise with GNP+ and make available for all societies.
- Finalise the HIV in emergencies toolkit and trial its adaptation to the Africa disaster preparedness setting.





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