



ICASA 2023 MARATHON MEETING

REPORT

SUMMARY

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AGENDA

OBJECTIVES:

- I. Create 23 or less Oral Abstract Sessions (Status of abstract received)
- II. Finalize the best abstract for each category.
- III. Select abstracts (with back-up) to be presented at each session.
- IV. Name Chair/Co-Chairs (with back-up) for each Abstract driven session
- V. Create Track Category groups for abstracts including Poster Exhibition
- VI. Align the programme.
- VII. Scholarship allocation
- VIII. Review ICASA 2023 speakers and backup for special sessions, NADS, workshop, and plenary sessions and fill the gaps.
- IX. Select and validate ICASA 2023 community village programme activities (name youth for the opening ceremony, **community programme only**)
- X. Finalize ICASA 2023 programme.

Chair & Co-Chair:

1. Hon. Dr. David Pagwesese Parirenyatwa, SAA/ICASA 2023 President
2. Hon. Dr. Douglas Mombeshora, Minister of Health and Child care, Government of Zimbabwe

Day 1: 15th September 2023

| Time | Activities | Discussion Lead |
|-------|--|---------------------------------------|
| 09:00 | Registration of participants | Secretariat |
| 09:15 | Opening Session <ul style="list-style-type: none"> - Welcoming address - Opening remarks - Introduction of participants - Endorsement of the agenda | ICASA 2023 President & Vice President |
| 09:30 | Session 1: Update from ICASA Secretariat Progress report to date followed by Q/A | ICASA Director |
| 09:45 | Session 2: Status of Abstracts received Presentation of Abstract driven session time slot/Abstract sessions | ICASA 2023 Scientific Programme Chair |
| 10:00 | Session 3: Group work – Track A, B, C, D & E <ul style="list-style-type: none"> - Review of remaining abstract - Select abstract (With Back up) for each session. - Discussions of discordant score - Name session chairs & co-chairs | ICASA 2023 Scientific Programme Chair |
| 10:45 | Tea Break | |
| 11:00 | <ul style="list-style-type: none"> - Finalize Oral Abstract driven sessions. - Create Track Category grouping oral & posters. - Selection of Best Young Investigator per track | ICASA 2023 Scientific Programme Chair |
| 11:30 | Lunch | |
| 12:30 | Session 4: Repartition of oral abstract See draft session planner for repartition of oral abstracts | ICASA 2023 Scientific Programme Chair |

| | | |
|--|---|---|
| 13:00 | Session 5: Fixing the gaps in ICASA 2023 concurrent sessions. (Workshops, Non-Abstract Driven Sessions & Special sessions) | Head of Local ICASA 2023 Secretariat |
| 14:00 | Session 6: Scholarship Allocation (Abstract driven session/General Delegates/Community) | ICASA Director |
| 14:45 | Wrap up of Day 1 | ICASA 2023 President |
| Day 2: 16th September 2023 | | |
| 09:00 | Session 7: Finalize ICASA 2023 Plenary programme. Fixing the gaps | ICASA 2023 Scientific Programme Chair |
| 10:00 | Session 8: Draft alignment of ICASA 2023 programme Update of session planner with committees' feedback | ICASA Director |
| 10:30 | Tea Break | |
| 11:00 | Session 9: Select and validate community activities Community programme only (proposition of a youth [preferably with disability] for opening ceremony) | Community Chair & Co-chair |
| 12:00 | Lunch | |
| 13:30 | Session 10: Review of upcoming milestones Followed by Q/A | Senior Programme Officer (SAA) |
| 14:00 | Recap of the Marathon meeting & End of the meeting | ICASA President/Vice President |
| 14:15 | Press Conference | ICASA President/Vice President/ICASA Director |

ICASA 2023 VALIDATED PLENARY TOPICS AND SPEAKERS



Prof. Glenda Gray
South Africa

Plenary Topic: Fast-tracking pandemic vaccines: lessons to learn from COVID-19 to HIV vaccine development?



Prof. Quarraisha Abdool Karim
South Africa

Plenary Topic: Finding the missing targets: what more to do for HIV, Tuberculosis, STIs and Hepatitis?



Mr. Gerald Macharia
Kenya

Plenary Topic: Delivery and access to innovative biomedical interventions, remove barriers, and build capacity in Africa (prevention, diagnostics, and therapeutics, adherence).



Prof. Mehdi Karkouri
Morocco

Plenary Topic: Human centered inclusion of key and vulnerable populations and implementation of differentiated service delivery approaches to overcome barriers.



Dr. Lynda Stranix-Chibanda
Zimbabwe

Plenary Topic: Optimization of innovative Paediatric therapeutics and prevention (DTG, TAF, bNAbS, etc).



Dr. Nertila Tavanxhi
Geneva

Plenary Topic: Innovative financing for HIV in the context of Universal Health Coverage: What works?



Dr. Ann Phoya
Malawi

Plenary Topic: Refocusing HIV finance in closing HIV equity gaps in Africa and prevention for youth.



Christine Stegling
Botswana

Plenary Topic: Supporting Innovation and People-Centered, Integrated Responses to End AIDS



Dr. Ruth Laibon Masha

Kenya

Plenary Topic: From boutique to systemic and sustainable scale up: The case for HIV Prevention



Hon. Joy Johannah Phumaphi

Bostwana

Plenary Topic: Pandemic Preparedness Framework, implication for Africa



Richard Lusimbo

Uganda

Plenary Topic: Community-Led data Driven responses: What works and what doesn't. The case of Key and Vulnerable Populations during COVID-19.



Maximina Jokonya

Zimbabwe

Plenary Topic: We are still getting HIV: Address the HIV Prevention crisis, accelerate access to biomedical prevention services/tools for women, adolescent girls and young people.



Dr. Lilian Benjamin Mwakyosi

Tanzania

Plenary Topic: Africa, where are our SRHR? - Understanding the importance of youth involvement in developing and implementing national, regional and continental SRHR policies.



Christine Kafando

Burkina Faso

Plenary Topic: People living with HIV- Led responses - Gaps in Domestic resource mobilization/financing towards ending new HIV infections in Africa.



Yatma Fall

Senegal

Plenary Topic: Recognizing disability in the HIV continuum of care with a cross-impairment approach.

VALIDATED ICASA 2023 CONCURRENT SESSIONS

| | |
|-----------------------------|--|
| Non-Abstract driven session | |
| Special session | |
| Workshop | |

Scientific Programme

NON-ABSTRACT DRIVEN SESSIONS

| | |
|------------------|---|
| SESSION 1 | Managing Tuberculosis in children and adolescents |
| SESSION 2 | The growing epidemic of non-communicable diseases in Africa and considerations for HIV management |
| SESSION 3 | High HIV incidence for AGYW: What are the programming gaps? |
| SESSION 4 | Tuberculosis, HIV and the challenges with managing migrants, refugees and internally displaced population in Africa |
| SESSION 5 | Management of Advanced HIV disease and opportunistic infections |
| SESSION 6 | Aging and HIV |
| SESSION 7 | Are People living with HIV (PLWH) at increased risk of infections with resistant organisms? |

SPECIAL SESSIONS

| | |
|------------------|---|
| SESSION 1 | Making it last longer: considerations for HIV treatment optimization for children |
| SESSION 2 | Gender Based Violence among young people at risk for HIV or living with HIV: impact on mental health, sexual risk behaviour and PrEP/ART uptake/adherence/persistence |
| SESSION 3 | Management of Cervical Cancer among women living with HIV |
| SESSION 4 | The triple burden of HIV, Hepatitis and Tuberculosis in Africa |
| SESSION 5 | Shortening the time for access to new HIV, tuberculosis and malaria prevention technologies in Africa |

WORKSHOPS

| | |
|------------------|--|
| SESSION 1 | Sexual and reproductive health for Persons with disabilities |
| SESSION 2 | Men and HIV: Breaking Barriers, Empowering Change! |
| SESSION 3 | Diagnosis and management of Cryptococcal Meningitis |

Leadership Programme

NON-ABSTRACT DRIVEN SESSIONS

| | |
|------------------|---|
| SESSION 1 | A Whole Government Approach: Addressing a multi-layered Challenge of New HIV Infections, SGBV and Adolescent Pregnancy (Triple Threat) |
| SESSION 2 | Intensifying Youth-led Social Accountability to accelerate the SRHR and HIV Response |
| SESSION 3 | Role of civil society and community actors in the resilience of HIV programs during the COVID-19 pandemic in Togo |
| SESSION 4 | Nécessité de la prise en compte des problèmes de droits humains et genre pour mettre fin au Sida en 2030. |
| SESSION 5 | Accelerating HIV prevention through a continuum lens: <ul style="list-style-type: none"> • Multisectoral approaches for AGYW • Older women of reproductive age |
| SESSION 6 | Strengthen integration for better SRHR outcomes: <ul style="list-style-type: none"> • Exploring linkages between unintended pregnancies, unsafe abortion, and HIV • WLHIV |

SPECIAL SESSIONS

| | |
|------------------|---|
| SESSION 1 | Socio-Economic empowerment policies for HIV prevention among adolescent girls and young women: End Gender inequalities to end AIDS |
| SESSION 2 | Education Plus investment cases for transformative results –leveraging girls completion of secondary education for HIV prevention”. |
| SESSION 3 | Promoting criminal justice reform and prison health reform in Africa |

WORKSHOPS

| | |
|------------------|---|
| SESSION 1 | Optimizing HIV self-testing and PREP to expand access and address inequities in HIV prevention response among young people from Key Populations |
| SESSION 2 | "Le suivi par les communautés des services VIH au TOGO" |

Community Programme

NON-ABSTRACT DRIVEN SESSIONS

| | |
|------------------|---|
| SESSION 1 | Lessons learned about leveraging sub-regional strategies to strengthening community programmes in decolonizing context |
| SESSION 2 | Accelerating combination prevention for key Populations; Addressing structural barriers, provision of services and social inclusion for People who use Drugs, Sex Workers and Trans Communities |
| SESSION 3 | HIV Financing: resources optimization to meet the 2030 targets amid the global health financing crisis |
| SESSION 4 | HIV Prevention-Right Place, Right time |
| SESSION 5 | Improving Data utilization to better address stigma and discrimination: Fixing the Gap of financial resources, policies, strategies, and ownership |
| SESSION 6 | Knowledge and Access to SRHR Services to Prevent HIV/AIDS among youth |

SPECIAL SESSIONS

| | |
|------------------|---|
| SESSION 1 | CLM as part of national monitoring: Are we ready? |
| SESSION 2 | Diagnosis and management of Advanced HIV disease. |
| SESSION 3 | Diversity, Tolerance and Equity at the heart of the HIV/AIDS response |
| SESSION 4 | Human Rights & Legal Environment |
| SESSION 5 | Ending AIDS in pediatric and children by 2030 |

WORKSHOPS

| | |
|------------------|--|
| SESSION 1 | CLM (community-led monitoring) – a good tool to support HIV response in the region |
| SESSION 2 | Digital health and Rights: Participatory Action Research Project |
| SESSION 3 | Lifting Our Voices: Human Rights, Community Engagement And Gender Equality On The Path To World Health Organisation (WHO) Validation For EMTCT |

ICASA 2023 ORAL ABSTRACT DRIVEN SESSIONS

| TRACK | NUMBER OF SESSIONS PER TRACK | NUMBER OF ORAL ABSTRACTS PER TRACK |
|---|------------------------------------|------------------------------------|
| TRACK A - BASIC SCIENCE (HIV AND PATHOGENESIS) | 2 sessions | 6 oral abstracts |
| TRACK B – CLINICAL SCIENCE, TREATMENT AND CARE | 4 sessions | 12 oral abstracts |
| TRACK C – EPIDEMIOLOGY AND PREVENTION SCIENCE | 4 sessions | 12 oral abstracts |
| TRACK D – LAW, HUMAN RIGHTS, SOCIAL SCIENCE AND POLITICAL SCIENCE | 9 sessions | 27 oral abstracts |
| TRACK E – HEALTH SYSTEMS, ECONOMICS AND IMPLEMENTATION SCIENCE | 7 sessions | 21 oral abstracts |
| TOTAL | 26 abstract driven sessions | 78 oral abstracts |

ICASA 2023 ABSTRACT MANAGEMENT

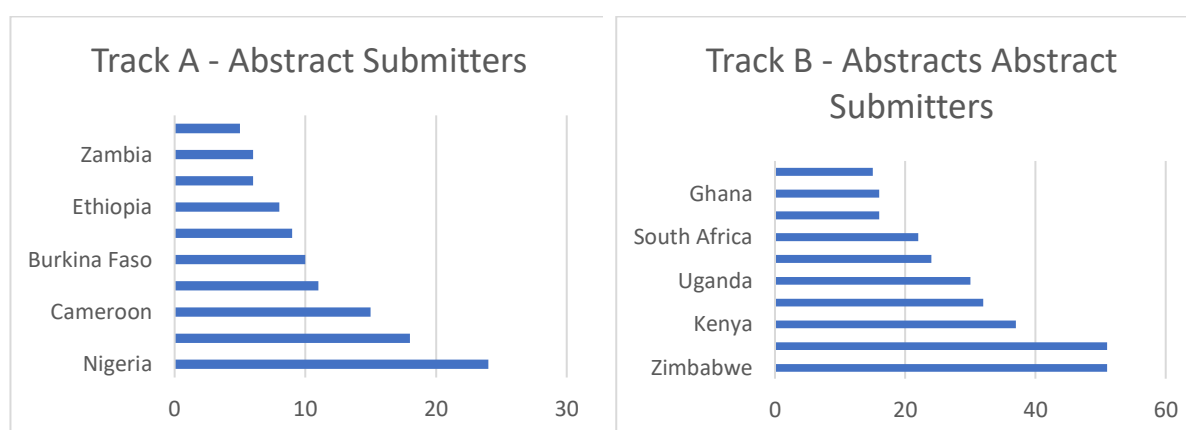
Total Number of Abstracts received 2600

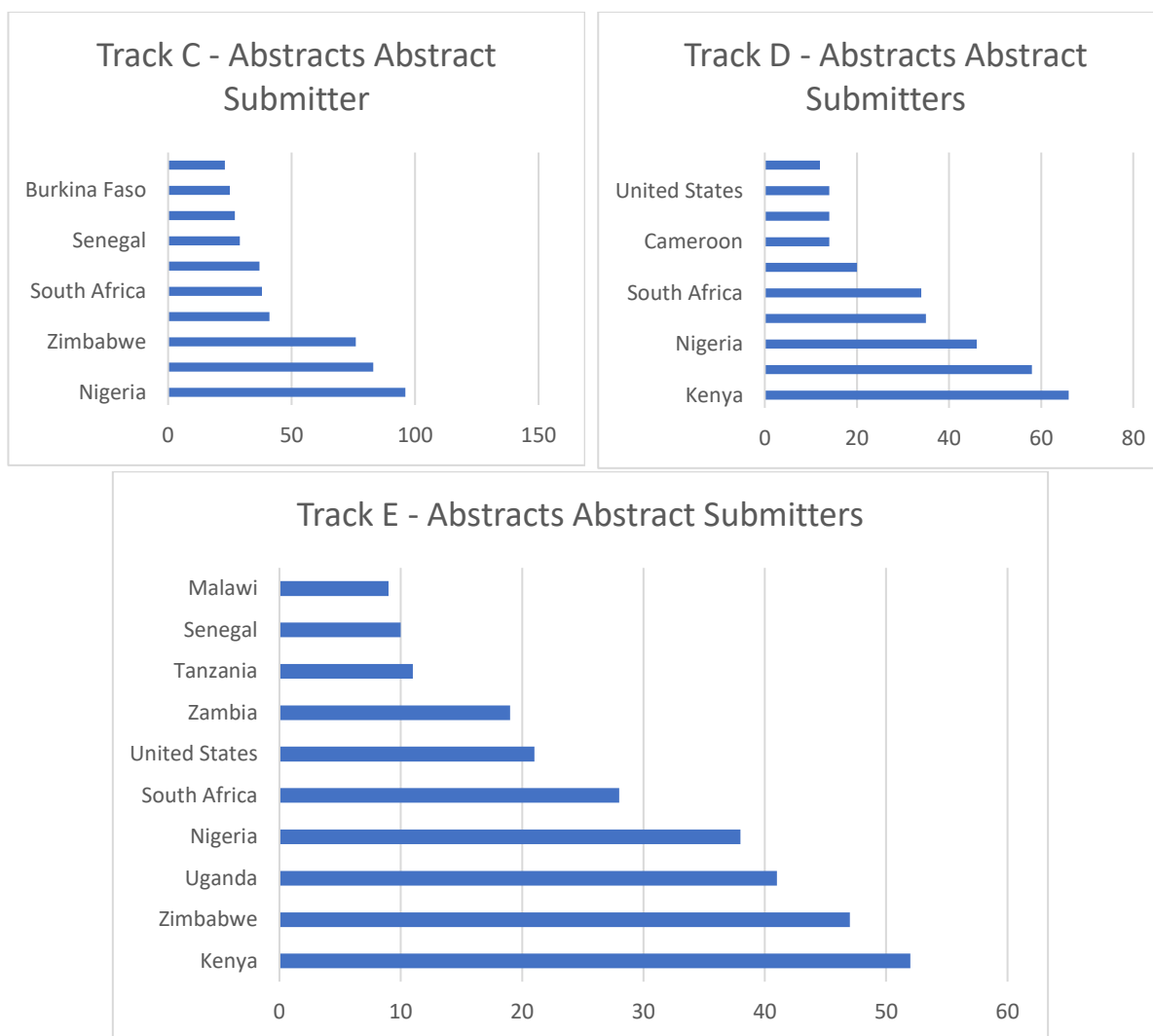
| | |
|--|------|
| Total Number of English Abstracts received | 2198 |
| Total Number of French Abstracts received | 402 |

| Submitted Abstracts per Track Category | Abstracts submitted in English per Track | Abstracts submitted in French per Track |
|--|--|---|
| Track A: Basic Science (Biology & Pathogenesis) | 141 | 43 |
| Track B: Clinical Science, Treatment & Care | 442 | 126 |
| Track C: Epidemiology & Prevention Science | 716 | 128 |
| Track D: Law, Human Rights, Social Science & Political Science | 484 | 75 |
| Track E: Health systems, Economics and Implementation Science | 415 | 30 |
| Total | 2198 | 402 |

| YEAR | ABSTRACTS RECEIVED | SELECTED ABSTRACTS | ORAL | POSTER |
|------|--------------------|--------------------|------|--------|
| 2019 | 3017 | 1570 | 120 | 1450 |
| 2021 | 1601 | 1325 | 78 | 383 |
| 2023 | 2600 | 898 | 78 | 820 |

Abstracts Submitters per Country





ICASA 2023 Best Abstract Recipients per Track

| Track | Abstract Title | Name | Country |
|---|--|--------------------------------------|----------|
| Track A: Basic Science (Biology & Pathogenesis) | DIVERSITE GENETIQUE DU VIH-1 ET MUTATIONS DE RESISTANCE CHEZ LES ENFANTS INFECTES ET SUIVIS EN ROUTINE AU BENIN. | Madame.EDWIGE HERMIONE DAGBA GBESSIN | Benin |
| Track B: Clinical Science, Treatment & Care | ANALYSIS OF CAUSES AND CLINICAL DETERMINANTS OF MORTALITY AMONG PEOPLE LIVING WITH HIV AT MPIOLO CENTRE OF EXCELLENCE, BULAWAYO, ZIMBABWE | Dr. Nkazimulo Immaculate Tshuma | Zimbabwe |
| Track C: Epidemiology & Prevention Science | Amplifying Voices: Enhancing Beneficiary Experience via Virtual Anonymous Feedback for Adolescents and Young People's Program in Siaya County, Kenya | Mr. Wayne Otieno | Kenya |
| Track D: Law, Human Rights, Social Science & Political Science | Beyond Metrics: How the Simple Participatory Assessment of Real Change (SPARC) Tool Provides a Holistic Approach to Advocacy Measurement | Miss.Princess Rudo Mharire | Zimbabwe |
| Track E: Health systems, Economics and Implementation Science | Differentiated Service Delivery Programme Monitoring during Scale – Up _ A description of Innovations from Zimbabwe, 2017 - 2022 | Dr. Clorata Gwanzura | Zimbabwe |

ICASA 2023 SCHOLARSHIP ALLOCATION

| | |
|--|-------|
| Total number of registered applicants | 1,446 |
| Number of Countries | 66 |
| Registered applicants (Zimbabwe only) | 174 |
| Registered applicants without Zimbabwe | 1,272 |

| | | | |
|--------------------------|------|--------------------------|-----|
| General Scholarship | 1446 | Abstract Scholarship | 703 |
| Full Scholarship | 1261 | Full Scholarship | 634 |
| Partial Scholarship | 124 | Partial Scholarship | 62 |
| Full Virtual Scholarship | 50 | Full Virtual Scholarship | 7 |

BUDGET ALLOCATION

Budget allocation by scholarship type Summary of budget allocation per participant type:

| Category | Minimum % of Total Budget | Approximate number of Scholarships |
|-------------------------------|---------------------------|------------------------------------|
| Abstract presenters | 30 | |
| Workshop facilitators | 10 | |
| Programme Activity Organizers | 20 | |
| General Delegates | 35 | |
| Media Representatives | 5 | |
| Total Scholarship Recipients | 100 | ≤ 500 |

ICASA 2023 HIGH LEVEL MEETINGS

Concept Note on Addressing the Prevention of Mother-to-Child Transmission (PMTCT) and Elimination of New-born Infections in Africa

High Level Meeting ICASA 2023, 2nd December, Elephant Hills Hotel, Victoria Falls, Zimbabwe

Introduction

In Africa, the burden of mother-to-child transmission (MTCT) and new-born infections remains high, primarily due to various factors such as limited access to quality healthcare services, inadequate awareness among healthcare providers and communities, and weak healthcare systems. Mother-to-child transmission refers to the transmission of HIV and other infections from an infected mother to her child during pregnancy, childbirth, or breastfeeding. Pregnant women often face difficulties in accessing timely and comprehensive services, including HIV testing and treatment.

During the early stages of life, new-born infections, particularly bacterial and viral infections, pose significant threats to the health and survival of infants. Preventing mother-to-child transmission (PMTCT) of HIV and eliminating new-born infections are major public health priorities in Africa. These efforts are crucial not only for the well-being of mothers and children but also for Africa's broader objective of significantly reducing the number of infants living with HIV to zero and achieving sustainable development.

At the Society for AIDS in Africa (SAA), our aim is to contribute to the UNAIDS goal and the African Union's catalytic framework of ending the AIDS epidemic by 2030 and achieving the 95-95-95 targets by 2025 in Africa. We also strive to support the African Union's Agenda 2063 and strengthen healthcare systems in Africa towards universal coverage.

To fulfil this mandate, we propose a comprehensive approach that involves enhancing healthcare systems and human resources, promoting community engagement and empowerment, and implementing robust monitoring and evaluation systems. Through these efforts, we seek to make significant progress in preventing mother-to-child transmission and eliminating new-born infections, ultimately improving the overall health and well-being of mothers, children, and communities in Africa.

In January 2018, the AU commission co-launched the Free to Shine campaign with the OAFLAD to reinforce the political commitment of African nations to end childhood AIDS and keep mothers healthy. The campaign is implemented in 24 countries by Ministries of Health and respective Offices of the First Lady, national stakeholders, and community leaders.

Goal and Objective

Recognizing the critical situation of vertical transmission of HIV and paediatric HIV in Africa, the Society of AIDS in Africa, in partnership with the OAFLAD, national and international partners, is organizing a High-Level Meeting (HLM) to accelerate the implementation of strategies and interventions aimed at addressing, preventing, and eliminating vertical transmission and preventable child infections across the continent. The significance of the HLM is that it will take place just before the 2023 International Conference on AIDS and STIs in Africa (ICASA) and intended to galvanize political commitment of policy and decision makers towards this critical issue. African First Ladies can leverage on the 2023 ICASA and renew their commitment towards an AIDS-free Africa. The HLM also is an excellent opportunity to affirm OAFLAD's support to the Global Alliance to End AIDS in Children and the Triple elimination of HIV, Syphilis and Hepatitis B agenda.

Objectives of the HLM:

- To share experiences of leadership role that African First Ladies play in eliminating vertical transmission and strengthening paediatric HIV services, and discuss their achievements, challenges, lessons learned and new and emerging opportunities.

- To build and strengthen partnerships to advance the elimination of vertical transmission, agenda with other global and regional initiatives and movements, such as Global Alliance to End AIDS in Children and Triple Elimination of HIV, Syphilis and Hepatitis b.
- To agree on way forward and renew vows to eliminate vertical transmission of HIV, Syphilis and Hepatitis B.

Expected outcomes:

- Increased awareness and understanding of OAFLAD's role.
- Partnerships strengthened to advance the Global Alliance to end AIDS in Children and Triple elimination initiatives in Africa.
- Renewed commitments to eliminate vertical transmission of HIV, Syphilis and Hepatitis B and improve paediatric HIV services.

Participants

1. OAFLAD members
2. Senior Ministry of Health officials (Permanent Secretary or Director-General of the Health Ministries)
3. Partners, including multilateral organizations, donors, and relevant stakeholders
4. Communities, including women living with HIV and community-based organizations

Prevention of Mother-to-Child Transmission (PMTCT) and Elimination of New-born Infections in Africa**LEADERSHIP OF AFRICAN FIRST LADIES IN THE FIGHT AGAINST HIV AND AIDS****Ending AIDS in Children and Mothers by 2030****Date: 2nd December 2023****Venue: Elephant Hills Hotel, Victoria Falls, Zimbabwe**

The high-level event at the 22nd International Conference on AIDS and STIs in Africa (ICASA) will reaffirm the commitment of the African First Ladies and Governments towards an AIDS free generation by presenting and promoting their roles in influencing political ownership, increasing sustainable domestic financing, and strengthening partnerships among governments, civil society, and development partners to end AIDS in children and mothers.

Methodology (Duration: 2 and half hours)

This session will be split into two panel discussions.

The first panel is dedicated to global and regional initiatives for children (the Global Alliance to end AIDS in children by 2030) and mothers (EMTCT), their impact, country action plans and how they will contribute to shape the global AIDS architecture to end AIDS by 2030.

The second panel highlights country actions and experiences in achieving the 95-95-95 goals for children and mothers, including challenges faced. Each high-level speaker will highlight one key area within the allocated time, with agreed/ predetermined questions to bring out the issues during their intervention. Both panels will have a 15-minute discussion period.

The facilitators will also be dedicated to agreeing on key action points with presenters, panelists, and attendees in the room. Each segment will have specific facilitators. Through each discussion commitment from OAFLAD, development partners and all stakeholders to support the Global Alliance to End AIDS in Children.

MC: Tariro Makanga

Draft Agenda

| TIME | SESSION/ACTIVITY | SPEAKER |
|-------------------------|--|--|
| | Cultural performance | |
| 10 MINUTES | Welcome and introduction | SAA President/ First Lady of Zimbabwe |
| 10 MINUTES | Key note address: The role of OAFLAD: achievements, lessons learned and way forward. | OAFLAD President |
| 60 MINUTES | Panel Discussion | Facilitators: UN WHO/UNICEF |
| | Technical update on HIV epidemic situation and response among children and women: Global Alliance to End AIDS in Children by 2030; Triple Elimination of HIV, Syphilis and Hepatitis; AU Sustainable financing and other initiatives (10 minutes) | |
| | Networks of people living with HIV: Roles of communities in achieving results for children and mothers. (10 minutes) | ICW Africa |
| | The African Union and the elimination of vertical transmission of HIV: AU strategic framework Plan specifically for EMTCT, EID, timely HBV birth dose, Viral Load Suppression among Pregnant women and Children between the ages of 0-59 months (10 minutes) | H.E Amb Minata Samate Cessouma, AU Commissioner for Health, Humanitarian Affairs and Social Development |
| | Ensure availability of financing for essential commodities for comprehensive care particularly HIV, syphilis and Hepatitis B virus (HBV) testing and treatment among pregnant women and babies (EMTCT, EID, timely birth dose for HBV, DTGs) (10 minutes) | PEPFAR |
| 10 MINUTES | Cultural performance | |
| 60 MINUTES | Panel Discussion | Facilitators: UN |
| (10 MINUTES) | Where we are (Setting the scene): children and adolescents lag behind and what should be done reduce the gap. | Winnie Byanyima, Executive Director,UNAIDS |
| (40 MINUTES) | Panel discussion: First Ladies and Ministers of Health leadership role in eliminating vertical transmission: achievements and future commitments | Zimbabwe Namibia Botswana DRC Nigeria Benin |
| 10 MINUTES | Reading and adopting OAFLAD's and SAA's communique towards the Global Alliance to End AIDS in Children, Triple Elimination of HIV, Syphilis and Hepatitis B and increased domestic financing. | OAFLAD Secretariat |
| 5 MINUTES | Closing remarks | Hon. Dr. David Parirenyatwa |
| GROUP PHOTOGRAPH | | |

Addressing Domestic Financing of the HIV Response to Reach the United Nations 2025 Goals and the African Union Agenda 2063 Aspirations

2nd December 2023, Elephant Hills Hotel, Victoria Falls, Zimbabwe

Introduction

Globally, governments have made giant strides to fight the Human Immunodeficiency Virus (HIV) and Acquired Immuno-deficiency Syndrome (AIDS). In the past 20 years, national governments, major disease funding donors, and civil society have made significant progress in supporting country programs to expand access to life-saving antiretroviral treatment and prevention options in the fight against HIV. There have been programs, coupled with increased awareness, prevention strategies, and advancements in treatments that are geared towards reducing new infections and improving the quality of lives and health of persons living with HIV and AIDS.

The year 2025 is a very important year for the global community and world-renowned health agencies (multilaterals and bilaterals) as it marks a milestone in the global HIV epidemic response. The Joint United Nations Program on HIV/AIDS (UNAIDS) has set ambitious targets known as the 2025 goals. One of the core objectives of this program is to lead and inspire the world to achieve its shared vision of zero new HIV infections, zero discrimination, and zero AIDS-related deaths by 2030.

On the other hand, the African Union has developed a long-term development framework called **Agenda 2063: The Africa We Want** which is a “blueprint and master plan for transforming Africa into the global powerhouse of the future”. It is the continent’s strategic framework that aims to deliver on its goal for inclusive and sustainable development and is a concrete manifestation of the pan-African drive for unity, self-determination, freedom, progress, and collective prosperity pursued under Pan-Africanism and African Renaissance. The agenda, among others, prioritizes the need to strengthen Africa’s healthcare systems and sustain financing to address public health challenges such as HIV/AIDS.

While progress continues to be made, the fight against HIV/AIDS, one of the world’s leading diseases, is not due to end yet, with the world now trying to address the disruptions in health services caused by the COVID-19 pandemic. Continued funding for the fight is more than paramount.

Several countries depend on external resources such as donor funding to sustain HIV-related programs. and this global support has played a key role in the HIV response program. However, they are subject to fund prioritizations by governments, or face backlash which in turn puts integral HIV programs and services at the risk of halting abruptly.

Several countries have made attempts to increase domestic funding for HIV/AIDS. Unfortunately, this is becoming more challenging. The complex financing landscape in Africa is especially critical, with slow growth, high inflation and challenging debt situations converging in some countries with a high HIV burden and debt distress. UNAIDS has reported for a third year in a row a 2% reduction in domestic financing for HIV. Indeed, the World Bank has forecasted a decline in health investments that would lead to two thirds of the countries in the African region investing the same or less in their health systems than they invested pre-COVID19 unless serious action is taken forward.

The above call for committed and sustained efforts to enhance domestic financial support for the fight against HIV/AIDS in line with the African Union’s Agenda 2023 objectives. Concrete actions and recommendations are required to strengthen the sustainability and national ownership of the HIV/AIDS response, including mobilizing high level political commitment for the needed additional resources, and reducing donor dependency, while taking into consideration the slow growth, high debts and scarce revenues in countries.

This concept note aims to bring sustainable and domestic resource mobilization as a key component of discussions during ICASA 2023. It also hopes the HLM will outline strategies to enhance domestic financing of HIV programs in order to achieve the goals set for 2025 and align with the 2060 African Union (AU) Agenda.

Goal

The goal of the High-Level Meeting is to explore strategies for increasing domestic financing for HIV programs in Africa¹.

Objectives

At the end of the engagement, the high-level meeting is expected to achieve the following:

- Identify ways to expand domestic funding for HIV/AIDS programs.
- Conceptualize pathways to enhance domestic funding for HIV programs and services, in partnership with civil society organizations and the private sector.

Targeted Participants

It is expected that the HLM will be attended by:

- Government Officials (Ministers of Finance of the abovementioned countries, Director-Generals of State Financing Institutions)
- International Organizations (EU, The Global Fund, AU, UNAIDS, WHO, UNFPA, UNDP, ADB, WORLD BANK, PEPFAR, AFRIMEX, CDC and Africa CDC)
- Key Members of Communities Affected by HIV (people living with HIV, men who have sex with men, sex workers, transgender individuals, and people who use drugs, people leaving with disabilities etc.)
- Local and International Media
- Civil Society Organizations and Private Sector.

¹ <https://www.saafrica.org/pages/wp-content/uploads/2022/02/AI-SAA-Africa-HIV-Financing-Scorecard-05112020.pdf>

Draft Agenda

| TIME | SESSION/ACTIVITY | SPEAKER |
|--------------|---|--|
| 15 MINUTES | Cultural performance Welcome and introduction | TBD SAA President Minister of Finance (Zimbabwe) |
| 10 MINUTES | Keynote Address: Promoting financial sustainability for the HIV/AIDS response in Africa; Maximizing innovative domestic financing mechanism | TBD |
| 60 MINUTES | Mobilizing domestic funding for HIV/AIDS Programs, as part of national efforts towards Universal Health Care and the prevention and response to epidemics in Africa - Country perspectives | Facilitators: TBD |
| | Western Africa Minister of Finance / MOH | TBD |
| | Southern Africa Minister of Finance / MoH | TBD |
| | Central Africa Minister of Finance / MoH | TBD |
| | Eastern Africa Minister of Finance / MoH | |
| | Northern Africa Minister of Finance / MoH | TBD |
| | Discussions | Participants |
| 10 MINUTES | Cultural performance | |
| 60 MINUTES | Creating an enabling environment for African philanthropists and the private sector to support domestic financing for the HIV/AIDS response. | Facilitators: TBD |
| (10 MINUTES) | Setting the Scene: The role of the African Development Bank in the creation of an African domestic financing mechanism towards and AIDS free continent. | African Development Bank |
| (30 MINUTES) | Moving towards the 2030 targets - The role of African philanthropists and the private sector in the mobilization of domestic financing for HIV/AIDS programs in Africa | 3 – 4 Philanthropists to be invited |
| (30 MINUTES) | Discussions | Participants |
| 10 MINUTES | Wrap-up of session and commitments | Facilitators |
| 5 MINUTES | Closing remarks | Hon. Dr. David Parirenyatwa |

ICASA 2023 Review of upcoming milestones

| Key Dates | Open | Close |
|---------------------------------------|---------------------------------|---------------------------------|
| Notice of Acceptance, Abstract | 20 th September 2023 | 25 th September 2023 |
| Announcement of Recipient Scholarship | 20 th September 2023 | 25 th September 2023 |
| ICASA 2023 Online Programme | 30 th September 2023 | |
| ICASA 2023 Conference Date | 4 th December | 9 th December 2023 |

Gallery



Hon. Dr. Douglas Mombeshora, Minister of Health and Child care during his opening remarks of the ICASA 2023 Marathon meeting



Cross section of Track A committee during selection and creation of abstract driven sessions



Cross section of Track B committee during selection and creation of abstract driven sessions



Cross section of Track C committee during selection and creation of abstract driven sessions



Cross section of Track D committee during selection and creation of abstract driven sessions



Cross section of Track E committee during selection and creation of abstract driven sessions



ICASA Director with the SAA Secretary General and immediate past SAA Secretary General



Cross section of members of the SAA Executive Board and Board of Trustees, Heads of Various UN Agencies in Zimbabwe and representatives from the Government of Zimbabwe



SAA PERMANENT SECRETARIAT

P.O.BOX AF2072

Accra, Ghana

Plot 58 Container, Otano Estates

Behind NHTC, Adjiringanor

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