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AWA Consultative Expert Committee Meeting
African Union Commission
27–28 May 2014
Nouakchott, Mauritania

SUMMARY REPORT

I. INTRODUCTION

While significant progress has been made in responding to the AIDS, TB and Malaria epidemics, these three diseases remain major global public health challenges threatening Africa's development trajectory. Created at the Abuja 2001 Special Summit, AIDS Watch Africa (AWA) is an Africa-led instrument to stimulate leaders into action and mobilise the resources needed to address AIDS, TB and malaria in an effective, sustainable and accountable manner. The AIDS Watch Africa Experts Consultative Committee meeting which took place in Nouakchott, Mauritania from 27-28 May 2014 deliberated on the key issues and prepared documents to be considered by the African Union, AWA Heads of State and Government (HOSG) Action Committee which will meet in Malabo, Equatorial Guinea in June, 2014. This report presents the objectives, deliberations and outputs of the meeting.

Attendance

Participants included African Union (AU) Member States, namely the Republic of Benin, the Republic of Burundi, the Republic of Chad, the Republic of Cote d'Ivoire, the Republic of Gabon, the Republic of Guinea, the Republic of Malawi, the Islamic Republic of Mauritania, the Republic of Mauritius, the Republic of Mozambique, the Federal Republic of Nigeria, the Republic of Senegal, the Republic of South Africa, the South Sudan, the Kingdom of Swaziland, the Republic of Togo, the Republic of Uganda, the Republic of Zimbabwe, African Union Commission (AUC), NEPAD Planning and Coordinating Agency, the Regional Economic Communities, SADC, ECCAS, EAC, COMESA, ECSA-HC IGAD, UMA, civil society (Medecins sans Frontières, Stop AIDS Alliance, FAO, Croix Rouge Francaise, and OXFAM), private sector – Federation of African Pharmaceutical Manufacturers Association (FAPMA) and development partners, including, Global Fund, African Leaders Malaria Alliance (ALMA) and the UN agencies – UNDP, UNICEF, UNAIDS and WHO.

II. OPENING SESSION

i. Welcome Remarks by Dr Ndoungou Salla Ba, Executive Secretary of the National AIDS Committee of the Islamic Republic of Mauritania

Dr. Ba welcomed delegates from Member States and all participants from various organisations to Mauritania. She noted that the AWA Consultative Experts Committee statutory meeting is of paramount importance in defining the health priorities especially AIDS, TB and malaria in the post 2015 context and setting the health goals to be achieved by 2030. She noted that Mauritania supported by their partners will this year prioritise accelerating access to antiretroviral treatment, care and the adoption of the malaria elimination programme.

ii. Opening Remarks by Ms Linda Mafu, Representative of the Global Fund

The Global Fund noted that AIDS, TB and malaria can be defeated if various organisations work together with the African countries. She further noted that health investment is needed and that responsibility lies with countries to come up with innovative domestic financing mechanisms to increase the resources allocated to health. She informed the

meeting that the Global Fund is looking at investing in high impact interventions to defeat the three diseases.

iii. Opening Remarks by Dr Halima Mwenesi, Representative of ALMA

ALMA underlined that it is committed to pushing the implementation of the AU Roadmap on Shared Responsibility and Global Solidarity through sustained advocacy for malaria action in Africa. The presentation noted that the ALMA Scorecard had become a key tool to monitor government accountability in implementing malaria commitments by African leaders. The presentation further noted the importance of promoting partnerships in the response to the three diseases.

iv. Opening Remarks by Dr Marie-Goretti Harakeye of the African Union Commission

The African Union Commission expressed gratitude to the Chairperson of the African Union and President of the Islamic Republic of Mauritania and his government for hosting the meeting and for the warm reception of delegates in Nouakchott. In addition the Commission's representative thanked Regional Economic Communities, civil society and development partners for their participation and support. The AU Commission representative noted the significant progress and challenges that remain in responding to the AIDS, TB and malaria epidemics. The Commission highlighted the importance of continued leadership support and underscored the need for sustainable support for AIDS Watch Africa in its advocacy and accountability initiatives.

v. Opening Remarks by Dr Mamadou Diallo, UNAIDS Regional Director for West and Central Africa on behalf of UN Agencies

UNAIDS welcomed the choice of the city of Nouakchott to host the AWA Experts' meeting. The presentation noted that the Islamic Republic of Mauritania has made remarkable progress on the way to achieving the goals set for 2015 and beyond. The success was attributed to the hard work of various partners on the ground and the leadership of President Mohamed Ould Abdel Aziz of the Islamic Republic of Mauritania who has kept AIDS high on the political agenda.

vi. Opening Statement by Honorable Ahmedou Ould Hamedine Ould Jevloun, Minister of Health of the Islamic Republic of Mauritania

In his opening statement on behalf of the Chairperson of the AU H.E President Mohamed Ould Abdel Aziz, the Hon. Minister of Health pointed out that that the Islamic Republic of Mauritania had the honour to host AWA Consultative Experts meeting. He emphasised the importance of investment in health to reach the MDGs. He noted that provision of services for people will remain Mauritania government's key goal. He also highlighted the importance of the meeting of the experts of AWA as a good forum to deliberate on key issues for consideration by Heads of State and Government . He noted that AIDS, tuberculosis and malaria remain a burden on the African continent with the highest morbidity and mortality. He concluded by welcoming all participants to the Islamic Republic of Mauritania and declared the meeting opened.

1. Procedural Matters:

a) Adoption of Agenda and Organisation of work

The Provisional Agenda and Provisional Programme of Work were adopted without amendments.

b) Nomination of Rapporteurs

The following Member States were nominated as rapporteurs: Côte d'Ivoire, Nigeria and Mauritania. UNDP and UNAIDS also joined the team of rapporteurs.

2. Objectives and Expected Outcomes of the Meeting

Objectives

- Briefing on the milestones in the implementation of AU policy frameworks and defining and shaping future directions of health in the context of the Post-2015 agenda and 2030 targets with a specific focus on AIDS, TB and malaria;
- Advocate for accountability and country ownership approaches on domestic financing for health and value for money;
- Consider and endorse recommendations for accelerating access to antiretroviral treatment as a catalytic action for ending AIDS;
- Consider and endorse the African Malaria Elimination Agenda as exemplified by the Elimination 8 countries in Southern Africa.

Expected Outcomes

- Documents for the AWA Heads of State and Government Meeting prepared and reviewed;
- Communique prepared and finalised for consideration by AWA Heads of State and Government.

III. SUMMARY OF TECHNICAL DELIBERATIONS

3. Consideration of milestones of AU policy frameworks and aspects that define and shape HIV/AIDS, TB and malaria future directions in the context of Post-2015 and Abuja 2030 targets

The African Union Commission provided a detailed description of the AU policy frameworks that were crafted to respond to HIV/AIDS, TB and malaria epidemics. The presentation also outlined the key milestones in the translation of key AU policy frameworks into tangible results for the continent. The experts meeting made the following recommendations:

Recommendations:

- AIDS, TB and malaria are still the major threats to broader health and development priorities of Africa. Without Africa prioritising AIDS in the Post-2015 Agenda, the continued international financing of the response will be threatened. Therefore, AIDS, TB and malaria should remain at the core of the Post-2015 development agenda with a commitment to ending AIDS, TB and Malaria.
- The African Union should monitor and evaluate the implementation of the 15% Abuja target.

- Member States were requested to expedite the process of appointing the focal points to support the AWA Regional Champions and AWA initiatives focal persons per Member State.

4. Consideration of recommendations for accelerating antiretroviral treatment as a catalytic action for ending AIDS

The Experts Meeting noted the following:

- AIDS remains a major public health threat today killing 1.2 million people on the continent in 2012. Yet, based on the progress that has been made, ending the AIDS epidemic is possible in the Post-2015 era. Ending AIDS is a global priority and a particular imperative for Africa.
- Scaling up HIV treatment is catalyst to ending the AIDS epidemic – it saves lives, prevents illness, reduces HIV transmission, prevents mother-to-child transmission, saves money and promotes development.
- Africa has made tremendous progress in scaling up HIV treatment with 7.6 million people on treatment by the end of 2012. However, under the 2013 WHO guidelines, 21.2 million people are now eligible for antiretroviral therapy in Africa, and everyone living with HIV will need treatment in the future.
- Although we have proven that expansion of access to ART can be done on a significant scale, there are many barriers to rapidly scaling up HIV treatment that range from clinical and operational to systemic, financial and the legal and policy environment.
- Africa needs new treatment targets that renew and strengthen regional commitment; that are visionary, achievable and which are grounded in scientific evidence; and leverage treatment scale-up to lay the foundation for ending the AIDS epidemic.

Recommendations:

The experts meeting made the following recommendations:

- AWA experts pledged commitment to advocate that the countries should adopt a set of new Treatment Targets 90/90/90: 90% of People Living with HIV know their status; of those who know their status, 90% are on ART; of those on ART, 90% achieve viral suppression by 2030.
- AWA experts urged UNAIDS, within the Treatment 2015 Framework, to assist countries to address barriers to achieve the treatment targets.

5. Presentation on accountability, country ownership and development approaches to domestic financing for health and value for money

The Global Fund to Fight AIDS, TB and Malaria (GFATM) placed special emphasis on the importance of domestic financing to enable national responses to become sustainable. The presentation by the GFATM noted that the strategic focus should be on ensuring value for money through implementing high impact interventions with the highest returns. The Global Fund also showed their New Funding Model (NFM) which places greater emphasis on smart spending which means that the Global Fund will only allocate money where it is most needed. In order to promote accountability the Fund

will also apply a rigorous review to ensure that the programmes it supports focus on the right areas and on the right populations. This will help optimise the return on investment not only of donor resources but also of domestic finances invested in AIDS, tuberculosis and malaria programmes.

Recommendations:

The experts meeting made the following recommendations:

- Call upon the international community to fully replenish the Global Fund as there is a resource gap of 3 billion for the 2015-2016 period.
- Call upon African Governments to invest in the health sector by meeting the Abuja target and / or by making substantial incremental increases in domestic resources for health by moving towards Universal Health Coverage (UHC).
- Call upon the AU, with the support of GFATM, UNAIDS and various development partners, to work with National AIDS Commissions to develop investment cases for domestic funding of the AIDS response.
- Request the Global Fund to look into how it can support national capacity development that supports the local production of drugs and consumables, and promoting stringent quality assurance.

6. Consideration of the report and recommendations on strengthening accountability of private sector through integration of HIV, health and gender into environmental impact assessment for capital projects

The presentation made by UNDP focused on large scale capital projects and infrastructure development across Africa. It advocated for integrating the assessment of health, HIV and AIDS, TB, malaria and gender impacts in Environmental Impact Assessments (EIAs) that are carried out prior to sanctioning of large infrastructure and capital projects. The presentation highlighted that EIAs and environment management plans contribute by expanding access of the affected populations to HIV, TB, Malaria and gender-related mitigation interventions. The presentation also underscored that the EIA process provides opportunities to mobilise and utilise additional resources from private sector for health financing.

Recommendations:

The experts meeting made the following recommendations:

- The AWA experts recommended that countries take advantage of the current unprecedented expansion of infrastructural development taking place in Africa, and ensure that EIAs contribute to expanding access to HIV, TB, malaria, health and gender interventions and mobilise additional resources to contribute to domestic health financing.

7. Making Africa a competitor in the global pharmaceutical industry: Federation of African Pharmaceutical Manufacturers Associations (FAPMA) experience in the implementation of the Pharmaceutical Manufacturing Plan for Africa (PMPA) Business Plan

FAPMA noted that in order to make Africa a competitor in the global manufacturing industry there is need to fully implement the Pharmaceutical Manufacturing Plan for Africa (PMPA) Business Plan that was endorsed by the Heads of State and Government in 2012. FAPMA representative undercored that the challenges for local production in the continent include the unavailability of technology and trained human capacity, inadequate access to markets (both national and international), lack of pharmaceutical product market data, and lack of affordable financing in this sector. The presentation noted the need for accelerating regulatory medicines harmonisation. Taking into cognisance the linkages between African Medicines Authority (AMA) and the African Medicines Regulatory Harmonisation (AMRH) Programme, the experts discussed and recommended the need to build on existing initiatives and experiences in harmonising regulatory mechanisms across the continent.

Recommendations:

The experts meeting made the following recommendations:

- Develop human capital in technology, regulation and business skills; and develop a roadmap to bring the industry to global standards of Good Manufacturing Practice (GMP) compliance;
- Provide technical assistance to regulators to help strengthen regulatory oversight;
- Facilitate access to affordable long-term financing to enable facilities upgrading, working with centres of excellence to develop new formulations that take advantage of the TRIPS flexibilities and foster partnerships and linkages to provide access to technology and know-how;
- Support regulatory and medicines registration harmonisation, including the African Medicines Regulatory Harmonisation programme;
- Support drug discovery and development within the industry;
- Develop and adopt strict medicines quality and anti counterfeiting laws that clearly distinguish between generic formulations of high quality and efficacy from sub-standard and poor quality counterfeit products.

8. Presentation on key recommendations for investing in rights-based AIDS, TB and malaria response beyond 2015

The presentation focused on human rights in the context of HIV, TB and malaria and spoke of understanding and integrating responses to stigma, discrimination and human rights violations in the context of the three diseases. It also highlighted the laws, regulations and policies that can increase access to medicines in the continent and urged the use of TRIPS flexibilities. The presentation also noted significant challenges in the continent which include the need to address laws, policies and strategies with respect to gender issues, vulnerable populations (women and girls, young people, children and adolescents) and key populations.

Recommendations:

The experts meeting made the following recommendations:

- Continued prioritisation of rights based responses to HIV, TB and malaria in the law, in access to justice and in law enforcement, including the prioritisation of the needs

of people living with HIV and key populations as well as for people suffering from TB and malaria in the post-2015 development agenda.

9. Adoption of the Experts report

After presenting and deliberating on the report Member State experts adopted the report.

10. Closing Ceremony

a) Remarks by Mr Baba Goumbala, Representative of Civil Society Organisations

Mr Goumbala thanked the Mauritanian government and people for their hospitality. He also thanked organisers for inviting CSOs at this meeting. He noted that increasing domestic resources for health in Africa is a requirement of national sovereignty and dignity. He urged Member States to fulfill the Abuja commitment to allocate 15 % of national budgets to health. This would ensure that Africa's health is not depend on the generosity of external partners. He highlighted that Africa should embark on local production of medicines especially for AIDS, TB and malaria by boosting its pharmaceutical industries. This is a good way to turn a crisis into an opportunity. Drugs produce in Africa should be cheaper and more sustainable by national budgets. Regarding the leadership and governance, he stated that CSOs support the commitment of Heads of States to create a favorable environment for respect for human rights for all. Africa must stop giving the image of the continent of human rights violations. Finally, he noted that on the post 2015 agenda, CSOs welcomes the African Common Position.

b) Remarks by Dr Paul Lartey, Representative of Private Sector

The presentation noted that the PMPA is a carefully thought out plan that can ensure that that Africa has a competitive industry that can provide Africa with the opportunity to deal with existing problems in accessing medicines. He noted that Africa has the capacity to put the pharmaceutical industry at par with the world. To realize this he noted the need for political will. He further noted that the private sector looks forward to the outcomes of the meeting being taken forward by various partners.

c) Remarks by Ms. Rosemary Museminali, Representative of UNAIDS on behalf of UN Agencies

UNAIDS noted the importance of putting the three diseases firmly on the post 2015 development agenda as they remain an unfinished business. She noted that the AU has translated the African Union Roadmap on Shared Responsibility and Global Solidarity into concrete action with well documented results. She noted that UNAIDS is willing to make sure that the work agreed at the continental level is translated into regional and national action plans. She requested Member States to brief their governments so that what has been discussed can be made into a concrete programme.

d) Remarks by Dr Marie-Goretti Harakeye of the African Union Commission

The African Union Commission noted the significant progress in the response to the three epidemics and urged African leaders to mobilise more domestic resources for health as

was pledged in the 2001 Abuja declaration framework for action on HIV/AIDS, Tuberculosis and Malaria. The Commission urged partners to ensure efficient use of existing resources. The African Union Commission further requested Member States to expedite the appointment of AWA Champions focal persons. Concluding the closing remarks, the African Union Commission thanked Member States experts for their participation and various partners for the technical and financial support which made the meeting possible.

e) Closing Remarks by Dr Moctar Ould Hand, Secretary General of Ministry of Health of the Islamic Republic of Mauritania and Representative of the AU Chairperson

In his closing remarks, the Secretary General of the Ministry of Health, Dr. Moctar Ould Hand stated the fact that the fruitful discussions and the serious work that was done, has resulted in the development of important documents that will be submitted to Heads of State and Government for endorsement. He thanked the partners and stakeholders for their efforts in the fight against the three diseases. He also thanked the experts from Member States and the African Union Commission for their efforts for the successful hosting of the meeting.

f) Vote of Thanks

Dr Diabaté on behalf of the participants thanked the Islamic Republic of Mauritania and its President His Excellency Mohamed Ould Abdel Aziz for his high-level commitment and vision of social justice for his country and for Africa. On Mauritania, a country of Islamic culture and tolerance, she welcomed the increased resources for the 3 diseases that should serve as a model for the African continent. Finally, she said that Mauritania is listed among the 11 countries that will eliminate the mother-child transmission of HIV and universal access to HIV testing by 2015.