IAS-ILF Thematic Roundtable on Key Populations

Tuesday, 24 February 2015, 18:00–22:30 PST
2201 Westlake Avenue #200 (PATH), Seattle, WA, USA

CONCEPT NOTE

The International AIDS Society (IAS) has prioritized healthcare equity for key populations (KPs) as one of its major initiatives (others focus on HIV co-infections, paediatric HIV, and HIV cure). The IAS-Industry Liaison Forum (IAS-ILF) was developed to constructively engage industry and other stakeholders on issues in line with IAS Priorities. As part of its role as a major convener, it allows the IAS to promote dialogue between industry and other stakeholders involved in the global response against HIV and related co-morbidities.

So far, the connections between the IAS’s KPs Priority and industry have been limited. In fact, industry has often been left out of discussions around KPs (including men who have sex with men, people who inject drugs, sex workers and transgender people). However, industry plays vital roles in addressing the needs of people living with or at risk of HIV through the development of life-saving medication and essential diagnostics, and has expertise in working with governments and international agencies to ensure that their products are accessible. Upon review of emerging questions regarding how to ensure that the world can reach the “90-90-90” goals set by UNAIDS by 2020, it is clear that further engagement of industry partners around the challenges posed by the situations that KPs encounter would be beneficial to the global response to HIV.

To complement the work of the IAS’s KPs Priority, the IAS-ILF with hold a thematic roundtable on KPs. The IAS-ILF Thematic Roundtable Series aims to convene experts from a diversity of organizations to discuss topics relevant to HIV where a multi-stakeholder approach, including industry, can lead to novel solutions. This IAS-ILF Thematic Roundtable on KPs will address issues around the delivery of prevention, diagnostics and treatment for KPs in the context of discrimination. Although there are many challenges in this context, including many faced by industry, no such broad forum seems to be in place. This event will therefore provide a space for a multi-stakeholder dialogue, serving as the basis to inform about the situation (i.e. raise mutual awareness), quantify the size of the problems and discuss interventions and organizations that can support existing efforts for wider access to HIV services, including through the creation of an enabling environment to end stigma and discrimination, for these difficult-to-reach populations.

Overview presentations will set the stage and frame the various issues, introducing demographics, epidemiology and epidemic drivers for KPs, presenting the situation regarding HIV prevention, diagnostics and treatment in the context of discrimination, and highlighting best current practices to reach these populations from a diversity of points of view. An open, roundtable discussion will follow, allowing all participants to contribute to the exchange of ideas on innovative approaches to meet the “90-90-90” UNAIDS goals for KPs.

The desired outcomes of this meeting are for industry and other stakeholders to better understand the challenges faced by various types of organizations, as well as to start identifying opportunities for collaboration beyond what is already taking place. A white paper reviewing the discussion and
highlighting these challenges and opportunities will be published and used as an advocacy tool. If this type of meeting proves efficient in promoting dialogue and information flow, a follow-up roundtable will be scheduled to take place in 2016 to quantify progress and discuss remaining challenges.

Thank you for your participation.

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About the IAS’s Key Populations Priority
While there have been successes in making treatment effective and accessible in several areas, some of the most affected populations continue to have a disproportionate burden of HIV, along with low access to services. KPs are defined by a high burden of HIV disease and a low access to services. The main populations that the IAS focuses on are men who have sex with men, people who inject drugs, sex workers and transgender people. The IAS programme focuses on creating significant positive change in the situations that KPs face in the context of HIV. It works for the reduction of stigma and discrimination against KPs, for the promotion of policies and legal reforms ensuring universal access to HIV services for KPs and for ensuring KPs have a place at the highest and most visible international forums. More information is available on the KPs website (www.iasociety.org/kaps).

About the IAS-Industry Liaison Forum
The IAS-ILF is a mechanism to inform and support collaboration and partnership between industry, the IAS and other stakeholders. It performs this broad task by providing opportunities for industry to understand the IAS’s values, interests and priorities, and vice versa, seeking common ground to enhance the impact of the global response to HIV and related co-morbidities. The IAS-ILF aims to promote constructive interactions among all stakeholders, including industry, and convene experts from industry and non-industry organizations to discuss topics relevant to IAS Member Priorities. The IAS-ILF is designed to take advantage of the IAS’s key strengths: its well-respected convening power; its acknowledged independence towards industry and other key partners and stakeholders; and its diverse working groups composed of some of the world’s top thought leaders and scientific experts in a wide array of fields. More information is available on the IAS-ILF website (www.iasociety.org/ilf).

The IAS-ILF is grateful for the unrestricted support received from its Gold Partners (Gilead Sciences, MSD and ViV Healthcare), its Silver Partners (AbbVie, Alere and Janssen) and its Bronze Partners (Abbott, Female Health Company, Omega Diagnostics, Roche Molecular Systems and Sysmex Corporation). This IAS-ILF Thematic Roundtable is a discussion convened by the IAS-ILF and sponsored by IAS-ILF Gold and Silver Partners.