

# The Case for an HIV Cure & How to Get There: Launching the HIV Cure Africa Acceleration Partnership (HCAAP)

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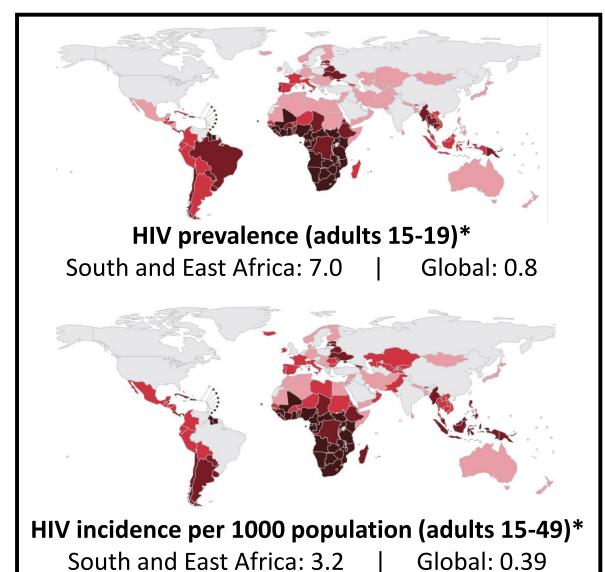




Amidst a changing funding landscape, growing population, shifting health priorities, and unforeseen natural and man-made calamites, how can we sustain gains and accelerate progress toward ending the HIV epidemic?

# Why Africa?





# Estimated ~42 million individuals will live with HIV by 2030:

 Sub-Saharan Africa accounts for 15% of the global population, but 68% of people living with HIV and 57% of new infections

# Long-term stability of existing HIV/AIDS programs uncertain:

- Youth bulge
- Global funding leveling
- Domestic funding increasing, but insufficient

# Action to address HIV cure gaps in Africa could have significant impact on:

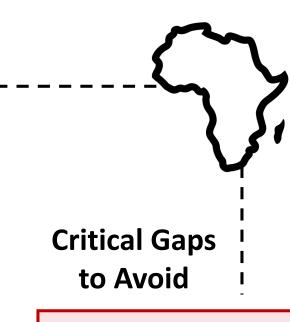
- HIV efforts in other resource-limited settings
- Other diseases (COVID-19)

## The Problem



## **Existing System**

- No single industry, country, agency, or academic institution can develop an HIV cure that will generate significant impact
- Despite progress at the global level (normative and potential regulatory frameworks), bidirectional processes to formally link community-level input to R&D actors (vertical linkages) and other similar communities (horizontal linkages) are weak or non-existent
- Public and private research efforts are often not shared until very late in the development process



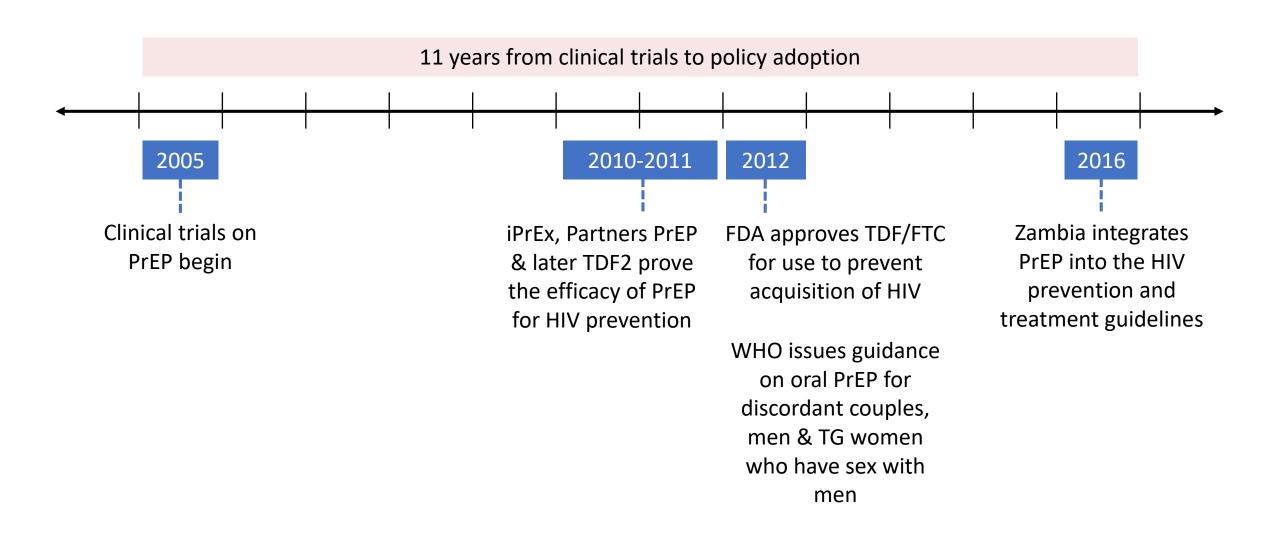
## **Compounding Factors**

Disproportionate disease burden, limited available resources, and unique demographic challenges

- Delays in product introduction, acceptance, and uptake of a product by communities and individuals
- Missed opportunities to design a culturallyappropriate HIV cure and to ensure awareness
- Future innovation not informed by community input

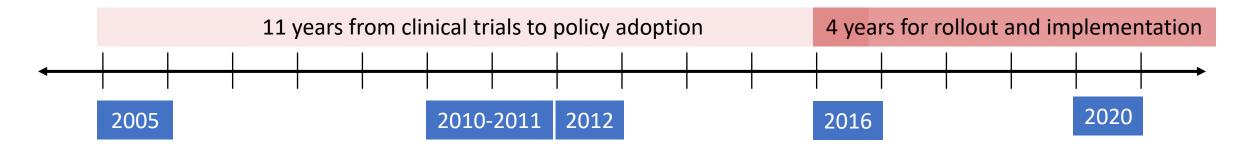
## Building on Lesson Learnt from PrEP

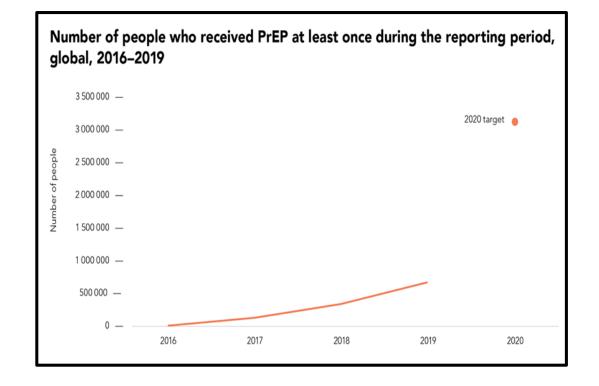




## Building on Lesson Learnt from PrEP







- Limited data on PrEP uptake vs target
- Available data limited to research and demonstration projects, and specific population groups (i.e., key populations)
- Low awareness of (29.7%) and willingness (64.4%) to take PrEP among MSM\*
- HIV products can only be as effective as their reach and adoption

## **HCAAP** Story to Date





## 2013: Building on past efforts

Sunnylands Summit, leading to \$100M from NIH



## 2016/2018: Recognition of need to focus

IAS/International AIDS Conference Cure Event



## Q1/Q2 2019: Sunnylands II

Sunnylands Summit, "The Path Toward Ending HIV" - Feb 2019: Convened 30 leaders in HIV cure space to establish a path forward for discovery of an HIV cure and to define TPP characteristics Formation of HCAAP/TPP Working Groups - May 2019



## Q3/Q4 2019: Building momentum

Grand Challenges Meeting, Ethiopia - October 2019

ICASA Side Event "Laving the Foundation for an HIV Cure in Afr

ICASA Side Event, "Laying the Foundation for an HIV Cure in Africa", Rwanda - December 2019: Sensitize stakeholders and strengthen engagement in Africa for HIV cure, creation of TPPs, and HCAAP



### 2020: HCAAP launch

Delphi TPP exercise - April 2020: Broad consultation and consensus on TPP attributes Publication of HCAAP and TPP concepts in *The Lancet HIV* – December 2020 Launch of HCAAP – Q1 2021

# **HCAAP** Theory of Change





A platform to promote dialogue among key stakeholders to accelerate the availability and delivery of an HIV cure

How HCAAP will achieve its vision

Vision



1. Inform TPP and cure development processes, access, and rollout through coordinated stakeholder insight and evaluation

2. Drive collaboration between cure stakeholders, while actively identifying new partners that can bring novel approaches to existing cure strategies

Accelerate progress towards a cure for HIV in Africa

## **HCAAP Stakeholders**



#### **Community/Non-Governmental Organizations**

- International AIDS Society (IAS)
- Community Advisory Boards
- Aidsfonds/NL4Cure
- AmfAR
- AIDS Vaccine Advocacy Coalition (AVAC)
- Sidaction
- Patient Advocacy Alliance
- International Treatment Preparedness Coalition
- Joint Adherent Brothers & Sisters Against AIDS
- CHAI

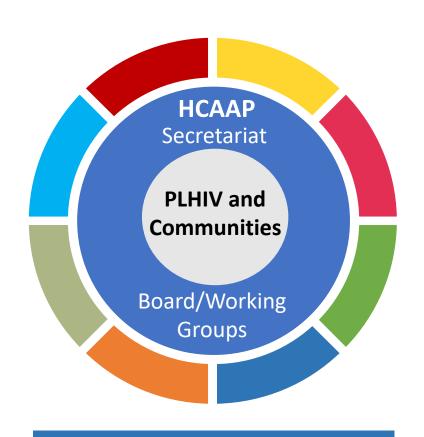
#### **Regulators**

#### **International Organizations**

- UNAIDS
- UNITAID

#### **Pharmaceutical Companies (Originators)**

- Merck
- ViiV/GSK
- Gilead
- J&J/Janssen
- Sanofi-Aventis



**Pharmaceutical Companies (Generics)** 

Viatris

#### African Union and other African Organization

- Infections Diseases Institute (IDI)
- CIDRZ
- Desmond Tutu HIV Foundation
- Pediatric Adolescent Treatment Africa
- Ministries of Health
- Rwanda Biomedical Center
- Africa Health Research Institute

#### **Philanthropy**

- Bill & Melinda Gates Foundation
- Giving Pledge Philanthropy
- Wellcome Trust
- Aidsfonds
- European Commission

#### Research

- National Institutes of Health (NIH)
- National Institute of Allergy and Infectious Diseases (NIAID) /Martin Delaney Collaboratories for HIV Cure Research
- •International AIDS Vaccine Initiative (IAVI)
- •Sub-Saharan African Network for TB/HIV Research Excellence (SANTHE)
- •French National Agency for AIDS Research (ANRS)

# HCAAP Roadmap to a Cure



Vision/ Vision Pathway

Accelerate progress towards a cure for HIV in Africa

Single shot cure

Cure modalities

Broadly neutralizing antibodies

Long-acting treatments

Goals

Accelerate development and influence design of cure products

Engage and educate stakeholders to promote rapid uptake of products, including ones that may initially be only partially effective

Objectives

1. Facilitate collaboration between a multi-disciplinary group of stakeholders working on an HIV cure to accelerate development and delivery of a product for resource-limited settings

2. Ensure that PLHIV and communities from resource-limited settings participate in the development of target product profiles (TPPs), rollout planning, and broader education and awareness activities

3. Establish forward-thinking and flexible platform connecting all stakeholders, managed by a sustainable secretariat

## Long Term Vision



- Ensure community's voice is heard by all relevant stakeholders
- Convene people living with HIV and broader HIV community in early development of a cure to accelerate education, acceptance, and adoption
- Prompt efforts to extend the reach of limited financial, advocacy, and workforce resources for HIV cure, draw on underutilized communities and stakeholders to lead the HIV response, and prioritize new workflows to sustain momentum
- Leverage this platform to support inclusive dialogue for innovations that address health disparities in LMIC's
  - Provide actionable best practices and organizational backbone needed to anticipate product development and deployment challenges for other diseases

## Acknowledgements











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