



Leave no-one behind in the post-2015 health agenda

Ensuring Universal Health Coverage for marginalised and key populations

Introduction

The Millennium Development Goals (MDGs) expire this year and will be replaced by a post-2015 Development Framework, including new sustainable development goals (SDGs). The SDGs and its targets and indicators are currently being negotiated among UN Member States. MDG 6 which addresses HIV/AIDS, TB and Malaria as well as the two other health-related MDGs, 4 (reduce child mortality) and 5 (improve maternal health), will be replaced by one overarching health goal:

- **Goal 3: Ensure healthy lives and promote wellbeing for all at all ages.**

Target 3.3 under this health goal aims to end the AIDS epidemic by 2030 and target 3.8 commits to Universal Health Coverage (UHC).

What is missing under UHC?

UHC is an ambitious new target in the post-2015 Development Framework which aims to ensure

The post-2015 Universal Health Coverage target and indicators are falling short of addressing the specific challenges for key populations facing the greatest burden of HIV prevalence in accessing health and HIV services.

equitable coverage of health care for all including: financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

The International HIV/AIDS Alliance has been involved in the post-2015 negotiations for more than two years, advocating for a strong target on AIDS and ensuring that the health and HIV needs of key populations are met.

Key populations are among the most marginalised, stigmatised and underserved people in the world.¹ They face persistent discrimination, human rights violations, exclusion from services and other

Recommended policy responses

As delegates gather in Geneva for the 68th World Health Assembly, the International HIV/AIDS Alliance calls on WHO, the World Bank and all Member States to ensure that healthcare for key populations who are vulnerable and most at risk of HIV is secured for the next 15 years by:

- ensuring the Universal Health Coverage targets and indicators address the needs of key populations who are vulnerable and most at risk of HIV;
- including language calling for the elimination of punitive and discriminatory laws, policies and practices across all targets under the health goal;
- making sure marginalised groups are included in all monitoring and accountability mechanisms under the Sustainable Development Goals and specifically within the Universal Health Coverage target.

1. According to WHO the term 'key populations' include both vulnerable and most-at-risk populations. They are important to the dynamics of HIV transmission in a given setting and are essential partners in an effective response to the epidemic. People living with HIV are considered a key population in all epidemic contexts. <http://www.who.int/hiv/pub/guidelines/anv2013/intro/keyterms/en/>

obstacles to a healthy life and wellbeing. Evidence shows that key populations face the greater burden of HIV prevalence. Globally, men who have sex with men are 19 times more likely to contract HIV than the general population², while transgender women are up to 49 times more likely to acquire HIV than all adults of reproductive age.³ The end of AIDS will not be achieved if their needs continue to be unmet. Unlike the proposed indicators under target 3.3 which recognise the need to address key populations, the UHC target and indicators fall short of addressing the specific needs of these groups. Whilst the World Health Organisation (WHO) and

World Bank who are leading on the UHC agenda continue to emphasise the importance of equity, their definition does not go beyond income, expenditure or wealth, place of residence, and sex. Ministers of Health can do more to ensure that countries do not seek to advance progress towards UHC by focusing only on easier to reach populations, while excluding key populations. They can make sure that no-one is left behind. If healthcare is not accessible to all, including key populations and other marginalised groups, the global commitment to end AIDS and deliver UHC by 2030 will not be achieved.

The World Health Organisation published guidance on the HIV prevention, diagnosis, treatment and care of key populations that included the following **Policy Recommendations**⁴:

Laws, policies and practices should be reviewed and revised where necessary, and countries should work towards decriminalisation of behaviours such as drug use/injecting, sex work, same-sex activity and non-conforming gender identities and toward elimination of the unjust application of civil law and regulations against people who use/inject drugs, sex workers, men who have sex with men and transgender people.

Countries should work toward implementing and enforcing antidiscrimination and protective laws, derived from human rights standards, to eliminate stigma, discrimination and violence against people from key populations.

Health services should be made available, accessible and acceptable to key populations, based on the principles of medical ethics, avoidance of stigma, non-discrimination and the right to health.

Programmes should work toward implementing a package of interventions to enhance **community empowerment** among key populations.

Violence against people from key populations should be prevented and addressed in partnership with key populations led organisations. All violence against people from key populations should be monitored and reported, and redress mechanisms should be established to provide justice.

For information on what these guidelines mean for your country, you can access the **HIV and key populations module of the Community Guide**, developed by The Global Network of People Living with HIV (GNP+), the International HIV/AIDS Alliance and STOP AIDS NOW!

2. UNAIDS Gap Report 2014, p.203 http://www.unaids.org/sites/default/files/media_asset/UNAIDS_Gap_report_en.pdf

3. UNAIDS Gap Report 2014, p.217 http://www.unaids.org/sites/default/files/media_asset/UNAIDS_Gap_report_en.pdf

4. World Health Organisation: Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations July 2014, P.5 <http://www.who.int/hiv/pub/guidelines/keypopulations/en/>

About the International HIV/AIDS Alliance

We are an innovative alliance of nationally based, independent, civil society organisations united by our vision of a world without AIDS.

For more information on the Alliance's engagement with the post-2015 development agenda and UHC, please contact Marielle Hart at mhart@stopaidsalliance.org or Anton Ofield-Kerr at aofield-kerr@aidsalliance.org

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