

From: Bernhard Schwartlander [SchwartlanderB@unaids.org]

To: Neil McCulloch

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RE: Investment Approach - HIV/AIDS

Dear Neil,

Thank you so much for your note and the attached letter. Apologies for the delay in getting back to you. I was out of the office a bit but back now and catching up.

I had the great pleasure of discussing some of the issues you raised with Ruth personally when we met a few weeks ago in Amsterdam. But here of a more "formal" reply, as appropriate.

As a more general comment, we already discussed in Amsterdam that it is critical to understand the investment framework as a framework, and not as a narrow blueprint for action. We will make sure that this is well understood as we roll this out. Your comments and inputs are helpful.

On the more technical aspects, we actually assume a 60% increase in the number of sex workers reached between the 2010-baseline and 2020. We also calculate that the resource needs will increase by one-third, from \$158M in 2011 to \$220M in 2020 (but this rounds off to \$0.2B in both cases). The reason that the resources required grow more slowly than the number of sex workers reached is because there are some economies of scale and the mix of countries changes somewhat towards countries with lower costs (mainly in sub-Saharan Africa) because they are currently further away from universal access and much of the scale up has to happen there.

Also, it is important to note that significant costs for services for sex workers, such as testing and treatment, are covered under other cost categories in the framework. Equally, at least part of behavioral change programmes costed separately should focus on clients of sex workers. So this should avoid a deviation of the resources for sex worker programmes.

We certainly do realize that global reporting (which includes UNGASS and other data sources such as DHS) has limitations. We used the most complete and most authoritative data that we could find, but will appreciate your input should better information be available. The network and reference group could be very helpful, indeed, in identifying data gaps and new information which we will certainly include in our work.

We absolutely do agree on the importance of addressing legal barriers. Such work is explicitly included in the categories summarized under the critical enablers. There are many countries with unfortunate legal situations towards sex workers. UNAIDS has published more detailed score cards on this and the Lancet publication was not felt to be the place to have a detailed discussion on these, including for simple space reasons.

The resources for community mobilization and strengthening are actually not decreasing. The apparent decrease of the overall critical enabler category is caused by one sub-category with a shift away from inefficient and expensive models of testing and counseling (outside the health sector) to more community approaches. Such approaches are not only cheaper, but also more efficient in reaching the target populations. While the overall cost for testing will decrease significantly, more PLHIV will know their status. We will describe this more clearly during the roll out of the investment framework.

Resource need estimations could be done in different ways and categories, but the group felt that for the purpose of the framework and a global dialogue this would work best. I should also like to make reference to the technical appendix which you can download from the Lancet web site which explains the different categories in more detail. I would be happy to assist if you have any difficulties in accessing this document.

In concluding, I would like to highlight again the nature of the publication as a framework for the global response to AIDS. We very much appreciate your explicit support, and also the very constructive inputs towards strengthening of this work. There are many open questions, in particular as we start to apply the framework to country planning and programming. The paper is explicit in that these global averages have to be applied within the national context. As you rightly point out, there are also still questions on how best to shift to community approaches, one of the main elements in the framework. We do look forward to your inputs and ideas, but also to providing us with better and specific information in areas where the framework assumptions may be weaker, both in terms of tracking coverage, but also cost and resource requirements for effective programmes.

I appreciate your explicit offer to help us inform the debate not only within the UNAIDS family, but also beyond. We will certainly convey that message where ever appropriate and I do look forward to your excellent advice and support. Please do share with me any further insights as they may become available.

Please do let me know if you would like to discuss any aspects of the framework in more detail. I would be happy to organize a conf call, should you be interested.

With thanks and my very best wishes!

Bernhard