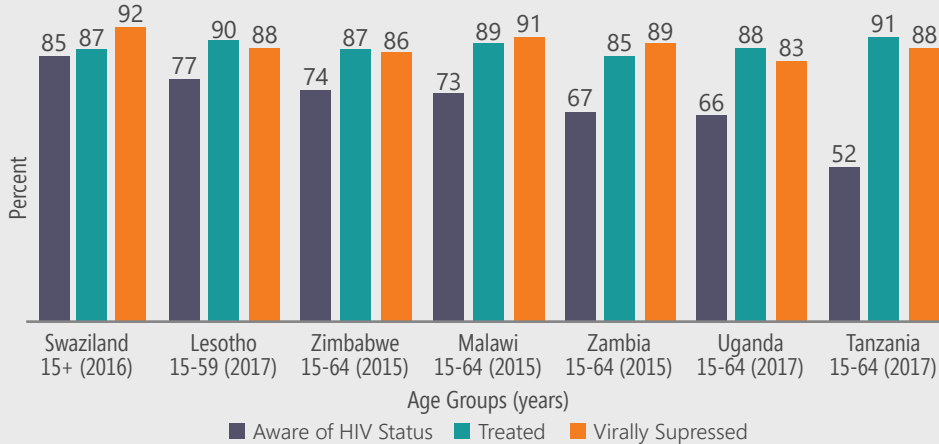




PEPFAR Strategy for Accelerating HIV/AIDS Epidemic Control (2017-2020)

DEC. 2017

Figure 1 — Progress to 90-90-90 in Adults



PEPFAR-SUPPORTED ORPHANS AND VULNERABLE CHILDREN WITH THEIR AUNT (CENTER) AND COUSINS IN MOZAMBIQUE. (PHOTO: ©SARAH DAY SMITH/PEPFAR)

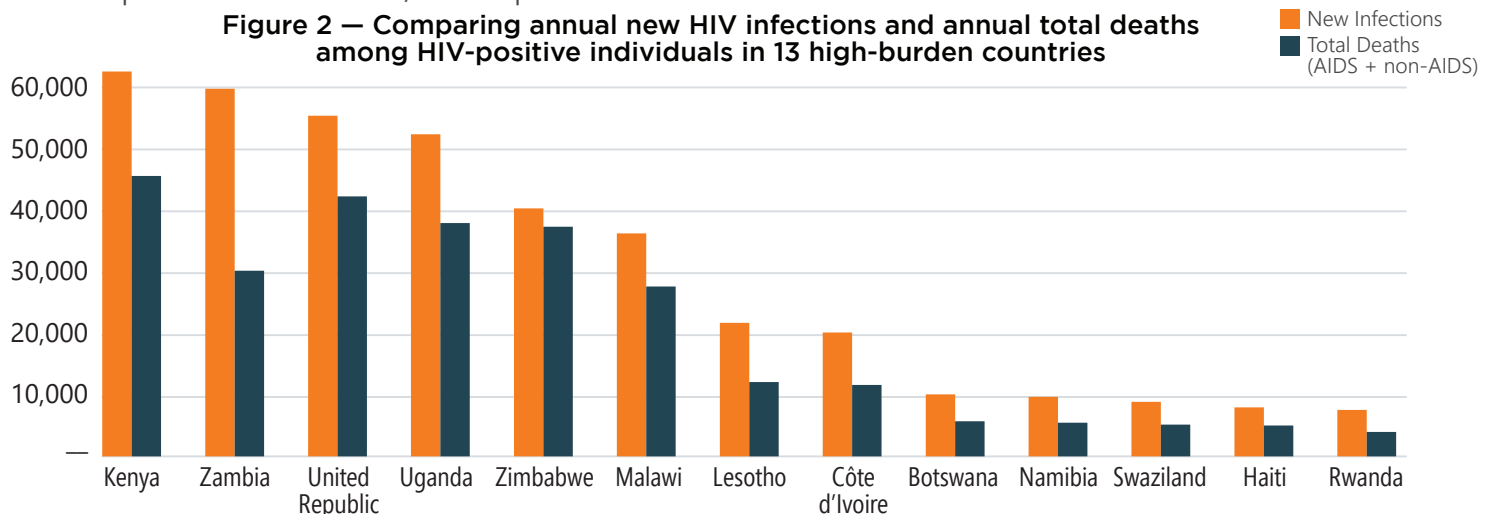
We are at a historic moment in the global HIV/AIDS response. For the first time in modern history, we have the opportunity to change the very course of the HIV pandemic, by actually controlling it without a vaccine or a cure. Controlling the pandemic will lay the groundwork for eliminating or eradicating HIV, which we hope will be possible through the future scientific breakthroughs of an effective HIV vaccine and cure, thanks to the leadership of the National Institutes of Health.

The latest U.S. President's Emergency Plan for AIDS Relief (PEPFAR) data show that five African countries are approaching control of their HIV/AIDS epidemics (Figure 1). Building on this progress, at the 2017 UN General Assembly, U.S. Secretary of State Rex Tillerson launched the PEPFAR Strategy for Accelerating HIV/AIDS Epidemic Control (2017-2020). The Strategy reaffirms the U.S. government's leadership and commitment, through PEPFAR, to support HIV/AIDS efforts in more than 50 countries, ensuring access to services by all populations, including the most vulnerable and at-risk groups.

The Strategy also sets a bold course for accelerated PEPFAR implementation in a subset of 13 high-burden countries (Figure 2), which have the greatest potential to achieve HIV/AIDS epidemic control by 2020. PEPFAR will support these 13 countries to reach 95 percent of people living with HIV who know their status, 95 percent of people who know their status accessing treatment, and 95 percent of people on treatment having suppressed viral loads across all ages, genders, and at-risk groups in the next three years. Epidemic control will only be attained when these targets are met for adults and children.

The U.S. government will continue to work with host governments; the Global Fund to Fight AIDS, Tuberculosis and Malaria; UNAIDS; and other partners. Through this collective effort, we expect not only to control the epidemic, but also to reduce the future costs required to sustain the HIV/AIDS response.

Figure 2 — Comparing annual new HIV infections and annual total deaths among HIV-positive individuals in 13 high-burden countries



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