

Opinion

The Catalytic Framework: Africa's Weapon to End Acquired Immune Deficiency Syndrome by 2030

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In 2000, Africa was frightened to the core by acquired immune deficiency syndrome (AIDS).¹ This crisis stood the chance of dividing us, but it did not. As the African Union (AU) reflects on where we have come from, we are encouraged by the exceptional leadership role played by the pan-African organisation. The African-led statutory body has over the years united African leaders to leverage on the power of constructive policies and accountability as efficacious tools to fight AIDS in the continent. The AU is particularly well-pleased by the catalytic framework to end AIDS, tuberculosis (TB) and eliminate malaria in Africa by 2030² endorsed by Heads of States and Government of AU Member States in 2016.

The catalytic framework³ is the greatest gift to Africa after the 2001 Abuja Declaration on human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS), TB and other related infectious diseases in which AIDS was declared a state of emergency in the continent. The distinctiveness of the framework emanates from the fact that it was formulated off the progress and experiences which culminated from implementation of Abuja commitments since 2000 and the AU road map for shared responsibility and global solidarity for AIDS, TB and malaria response⁴ in Africa by AU member states. It therefore seeks to ensure that the commendable progress attained since 2001 — when the fight against AIDS was placed as the highest priority issue in respective national development plans — is intensified.

A review of the “*Abuja Call for Accelerated Action Towards Universal Access To HIV/AIDS, TB and Malaria Services*” and “*The AU Roadmap On Shared Responsibility And Global Solidarity For HIV/AIDS, TB And Malaria*” in 2015, highlights significant examples of progress attained in strengthening: financing models; leadership and governance; and access to medicine. A commendable example

cited is South Africa who contributed US \$2 billion between 2006 and 2011 per year of domestic funding towards AIDS response — the second largest national investment in the world. A second example included is the development of the Pharmaceutical Manufacturing Plan for Africa Business Plan (PMPA) to increase pharmaceutical capacity. Consequently, Kenya, South Africa, Uganda, and Zimbabwe now produce World Health Organization (WHO) pre-qualified anti-retroviral drugs (ARVs). A final example included is the integration of ministries and HIV/AIDS-related programs into the Ministry of Health to enhance integrated multisectoral approaches in Rwanda, Burundi and Côte d'Ivoire. However, the review also unraveled that despite the progress, there was need for improved strategic approaches to fighting HIV/AIDS.⁵

The overarching strategic approach of the catalytic framework is an amalgamation of the targets in the AU agenda 2063⁶ and agenda 2030. Therefore, it not only ensures continuity of continental efforts but fuses with global aspirations. This is strengthened by the exceptional strategic investment as of the framework. The areas are: leadership, country ownership, governance and accountability; universal and equitable access to prevention, diagnosis, treatment, care and support; access to affordable and quality assured medicines, commodities and technologies; health financing; community participation and involvement; research and development & innovation; promotion of human rights and gender equality; multi-sectoral collaboration and coordination; and strategic information. These, if reinforced with dedication and integrity, are an assured path to realization of the end of AIDS by 2030.

This article comes at a time when the African Union Commission (AUC) is gearing up for mid-term review of the cata-

lytic framework. The review will be undertaken through primary data collection using a questionnaire. The objective of the exercise is to collect information on the progress of implementation of the Framework by AU member states. It will also provide insight on the successes and challenges being faced during implementation of the activities in framework. The end goal is to ensure that the framework is a reliable policy instrument which is effective in guiding countries towards positive outcomes in response to AIDS, tuberculosis and malaria.

AIDS-specific goals of the catalytic framework are to reduce number of AIDS-related deaths and new HIV infections compared with 2015 whilst wiping out discrimination. The stipulated strategies to achieve the goals are to: increase coverage of antiretroviral treatment to achieve 90-90-90; Eliminate new HIV infection in children and keep mothers alive; increase access to combination prevention services including HIV and SRH services to young people, men and women, and key populations; Address HIV and human rights, gender inequality, and offer HIV sensitive social protection.

The health financing strategic component is especially prominent given that in February 2019, African Heads of States and Government endorsed the Africa Leadership Meeting (ALM) — investing in health declaration⁷ to spur a reorientation of Africa's health systems and health spending. The declaration is not only meant to push for utilization of domestic resources to increase investments in health but also uplift African-led health system strengthening mechanisms. Governments are in full support of the ALM declaration agenda to fight disease burden in Africa. This was attested during the Pan African Parliament Summit held in Brazzaville, Republic of Congo (11-12 July 2019) where the Parliamentarians in attendance signed a communiqué pledging to support the declaration through various ways, importantly, by passing policies aiming at increasing domestic health financing and enhancing accountability during implementation of the declaration.

The catalytic framework and the ALM declaration are implemented by the commission through AIDS Watch Africa (AWA)⁸ Secretariat. Formed in 2001, AWA is an advocacy, mobilization and accountability platform of Heads of State and Government to mobilise action and resources for stronger leadership on the efforts to respond to the challenges posed by HIV/AIDS, TB and malaria. Each year, AWA convenes health experts from AU member states working in the field of AIDS, tuberculosis (TB) and malaria for statutory consultative meetings to discuss issues impeding progress in implementation of policy frameworks and the fight against the three diseases. The experts prepare a report with key recommendations for the consideration of the AWA Heads of State and Government Action Committee (GAC). This ensures that the relevant agendas are tabled before respective policy makers for their action.

2020 is a special year for millions of advocates and people living with HIV fighting hard for rights and resources. On one hand, time is up for political instruments with a trajectory set to

achieve certain intermediary targets by 2020. We will check ourselves against the targets we set within the past decade as a continent, starting with those on the Catalytic Framework and ALM declaration. On the other hand, we only have ten years left to the grand finale of 2030. We have to devise means of fighting harder and smarter against the injustice of stigma and discrimination, HIV related deaths and new HIV infections.

Heart-breaking stories about the challenges of ending AIDS as a public health threat still reign in many parts of Africa. Nevertheless, we must remain in sight of how far we have come and how further we can go. Everyone accessing treatment is a success story of how they are going to have the same life expectancy as someone who does not have HIV, the same opportunity to contribute to their communities and the same opportunity to watch their children grow up in an AIDS free-generation. We did this together and together we can end AIDS.

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