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REPORT OF THE ROUND TABLE ON PREVENTION OF HIV AND AIDS IN THE AFRICAN REGION

INTRODUCTION

1. The Round Table on "Prevention of HIV and AIDS in the African Region" was held on 23 August 2005 under the chairmanship of Dr. Alex Kamugisha, the Honourable Minister of Health of Uganda. In his introductory remarks, the Chairperson recalled the consultation on HIV prevention convened by the Regional Director in Brazzaville, Congo, in June 2005 and the recommendations of the Programme Subcommittee to accelerate HIV prevention efforts in the African region.

2. For her part, the facilitator of the Round Table Dr Olive Shisana, President and Chief Executive Officer of the Human Sciences Research Council of South Africa., gave an overview of the HIV and AIDS situation in Africa. She highlighted the factors accounting for the increasing trends in new infections, the key challenges in addressing the epidemic, and the recommendations of the Brazzaville consultation on HIV prevention.

DISCUSSION POINTS

- 3. The Round Table discussed the following points:
 - (a) What specific actions can ministers of health take to re-invigorate HIV prevention in order to bring a sense of urgency?
 - (b) What concrete actions can ministers of health take to ensure that HIV prevention interventions targeting the youth and other vulnerable groups are expanded?

- (c) What practical steps should the ministers of health take to promote greater involvement of the communities, CBOs, NGOS, FBOS, and PLWHA in HIV prevention efforts?
- (d) What are the practical steps to be taken for 2006, the Year of Acceleration of HIV Prevention in Africa?

CONTRIBUTIONS

4. Forty-five countries and ten partner organizations took part in the Round Table. A total of twenty contributions were made. They all recognized that HIV and AIDS was a major development challenge that deserved special attention and unanimously endorsed the Regional Director's proposal to declare 2006 the Year of Acceleration of HIV Prevention in the African Region.

RECOMMENDATIONS

- 5. The Round Table made the following recommendations:
 - (a) To ensure effective advocacy and action oriented leadership by ministries of health;
 - (b) To re-emphasize and re-invigorate HIV prevention efforts with a sense of urgency, and ensure the setting of appropriate targets;
 - (c) To accelerate the implementation of multisectoral responses while ensuring effective coordination and harmonization of HIV prevention efforts;
 - (d) To increase access to quality health sector-based prevention interventions by strengthening health systems;
 - (e) To scale up prevention programmes which target the youth, women, girls and other vulnerable groups, including sex workers;
 - (f) To implement health promotion programmes that help individuals to move from awareness and improved knowledge to positive change of sexual behaviour;
 - (g) To mount social mobilization programmes that ensure ownership by communities and use of local resources;
 - (h) To address the issues of stigma and discrimination, and negative cultural values and practices;
 - (i) To link treatment scale up with HIV prevention;
 - (j) To promote local effort for a better understanding of the dynamics of HIV transmission in order to mount appropriate responses;
 - (k) To intensify partnership between the government, the private sector and civil society organizations including associations of People Living with HIV and AIDS;
 - (1) To develop appropriate policies and legislation to create a supportive environment for scaling up HIV prevention interventions;

- (m) To mobilize and allocate adequate resources to facilitate the scaling up of HIV prevention interventions;
- (n) To strengthen monitoring and evaluation of HIV prevention efforts;
- (o) To advocate for acceleration of efforts aimed at the development of preventive technologies such as microbicides and HIV vaccines;
- (p) To continue to collaborate with research institutions and partners in order to assess the effectiveness of male circumcision in preventing HIV infection.