



## WORLD AIDS DAY 2017 STATEMENT

### UNIVERSAL HEALTH COVERAGE AND BETTER, SAFER WELL-TOLERATED HIV TREATMENT NOW!

On the occasion of World AIDS Day 2017, NEPHAK gladly joins the Ministry of Health with renewed commitment to partnership to deliver on the 90.90.90 HIV treatment targets and ending AIDS as a public health threat in line with the 2030 Sustainable Development Agenda.

As we prepared for this World AIDS Day event, our hope for improved health and well-being was renewed by a statement from the President, HE Uhuru Muigai Kenyatta at his inauguration for a second term in which he said: *"Over the next 5 years, my Administration will target 100% universal health care coverage for all households"*. This commitment pulled straight from the Jubilee Party manifesto (<http://uhuruto2017.co.ke/jp-manifesto-compressed-web-version-12782.pdf>) require urgent and specific actions to be realized. We in NEPHAK want to see tangible, measurable actions, including increased domestic financing towards this commitment to universal health coverage.

The World AIDS Day 2017 theme of 'My Health; My Right' best captures the aspirations of universal health coverage. For NEPHAK and the entire PLHIV Community, the improvement of health and well-being of communities can only be guaranteed through HIV – sensitive universal health coverage. We at NEPHAK firmly shares on the position that Health is a human right but recognize that we have a long way to go until everyone—no matter who they are, where they live, or how much money they have—can get the quality health care they need and deserve. The call for universal health coverage is also inspired by the Kenya 2010 constitution (*Article 43*).

With HIV treatment increasingly becoming accessible to the PLHIV community in Kenya, our attention must now turn to HIV related co-infections and comorbidities. Tuberculosis remains the leading cause of sickness and death among PLHIV in Kenya. At the same time, cases of non-communicable diseases among PLHIV are increasing at alarming rates. Only through HIV – sensitive universal health coverage can the AIDS related deaths be brought to a halt.

The desire to have all people diagnosed with HIV immediately enrolled and retained on life-long treatment require that Kenya gives to its population the best available ARVs. It is for this reason that we joined with the Ministry of Health and partners in welcoming the roll-out of Dolutegravir (DTG) based HIV treatment regimen. There is enough evidence that DTG is superior to all other first line treatments currently in use in Kenya. If anything, the Kenya Ministry of Health in 2016 included DTG into its ART treatment guidelines. And as per the letter NEPHAK sent to the Ministry of Health (<http://nephak.or.ke/wp-content/uploads/2017/09/DTG-Letter-to-KCM-Chairpdf.pdf>), there is need to fast-track the roll-out to all PLHIV in Kenya.

We note that HIV – related stigma and discrimination is still high in Kenya. We are particularly concerned about stigma and discrimination facing children and adolescents born and living with HIV

at homes, in learning institutions, in healthcare settings and at community levels. This stigma must stop if we want to win the war on AIDS. We at NEPHAK extend our invitation to the government and other partners to join hands with us and other community networks to educate communities on how to redress and eventually eliminate stigma facing children and adolescents living with, at risk of and affected by HIV. It is the position of NEPHAK that HIV – related stigma will end only through meaningful engagement with PLHIV networks.

### **NEPHAK World AIDS Day call!**

In line with the World AIDS Day 2017 theme: My Health; My Right and; the clarion call; Right to Health, NEPHAK calls upon the Kenya government (*at both national and county levels*) to take tangible and specific actions to deliver on the promise of universal health coverage starting with an increased domestic allocation to health budget. Increased investment in health will not only generate huge health benefits and vastly greater economic returns but also help leverage the support from external partners for the health sector. Specifically to the HIV sub-sector; NEPHAK calls for the implementation of HIV – sensitive universal health care schemes so as to address HIV related co-infections and comorbidities and improve the health and well-being of PLHIV and communities. Further, the network wants the below to ensure the delivery of the 90.90.90 HIV treatment targets by the set date of 2020:

- Fast-tracking the roll-out of Dolutegravir based treatment to PLHIV community in Kenya.
- Renew commitment needed to support the active and meaningful involvement of PLHIV as a key principle of the fast track plan to deliver on the 90.90.90 targets. The engagement of PLHIV networks should be key pillar of the community system strengthening to bolster the role of communities in the response to HIV. Investing in PLHIV networks is the sure way to reduce stigma, improve treatment literacy, strengthen community-facility linkage and facilitate retention to care.
- Foster an enabling legal and policy environment at the national and county level to ensure access to services and justice by PLHIV. This calls for addressing sexual and gender based violence, forced and/or coerced sterilization of WLHIV, harmful cultural practices, early marriages and HIV criminalization. Here, we also commit to work with partners to ensure that the HIV and AIDS Tribunal, which aims to improve access to legal and social justice and protection from stigma and discrimination deliver on its mandate as stipulated in the HIV/AIDS Prevention and Control Act.

### **For more information:**

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