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by government and partners until 2023 (constrained and unconstrained scenario, respectively). Results were evaluated under current and maximal levels of ART coverage in those diagnosed HIV-positive (78% vs 95% by 2025).

Results: Compared to 2016 findings, condom provision continues to be most cost effective, while medical male circumcision became less cost effective at higher coverage levels especially in adolescents (Figure).

Pre-exposure prophylaxis for male adolescents/young men and early infant male circumcision are only affordable under the current budget if ART coverage remains at 78%. HIV self-testing is less cost-effective than conventional HTS but might be required to close last testing gaps.

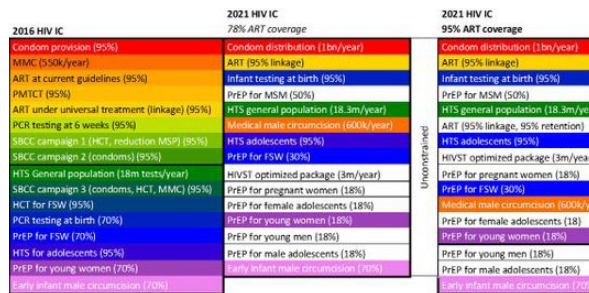


Figure. Comparison of ranked intervention-coverage options between 2016 and 2021 HIV investment cases.

Achieving 95% ART coverage could, under the current budget, avert three times as many HIV infections and twice as many AIDS deaths over 20 years, compared to the baseline trajectory of 78% ART coverage (Table).

Baseline (2021-40)			
Total cost of the HIV programme, billions (2021 USD)		41.1	
New infections, millions		3.1	
AIDS deaths, thousands		1,093	
Life years lost to AIDS, millions		38.8	
		78% ART coverage	95% ART coverage
Incremental cost to the HIV programme, billions (2021 USD)			
Constrained scenario	n/a		8.0 (+19%)
Unconstrained scenario	4.0 (+10%)		9.6 (+23%)
HIV infection averted, millions			
Constrained scenario	n/a		2.1 (-66%)
Unconstrained scenario	0.7 (-23%)		2.1 (-66%)
AIDS deaths averted, thousands			
Constrained scenario	n/a		186 (-17%)
Unconstrained scenario	89 (-8%)		187 (-18%)
Life years saved, millions			
Constrained scenario	n/a		7.1 (-18%)
Unconstrained scenario	3.8 (-1.0%)		7.1 (-18%)
Cost per life year saved (2021 USD)			
Constrained scenario	n/a		1,132
Unconstrained scenario	1,045		1,347

Table. Summary of incremental impacts and cost-effectiveness over 20 years (2021-2040)

Conclusions: While most interventions have become affordable under the current budget, only maximizing ART retention will significantly increase the South African HIV programme's impact.

EPE206

Sustainability of community-based social services for key populations in Russia: problems and prospects of national investment programs

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Background: According to the Governmental Analytical Center of the Russian Federation, a small share of spending on HIV prevention in total spending on HIV prevention activities is one of the key characteristics of contemporary HIV funding in Russia. According to the data of the last decade, the largest number of new HIV cases in Russia is among key populations. NGOs play a crucial role in HIV prevention among key populations. It is important to support the sustainable work of NGOs, which is driven by well-developed funding mechanisms at different government levels. One such mechanism is the government procurement system.

The aim of the study was to assess the structure of public spending on HIV prevention programs among key populations by community-based NGOs.

Methods: In 2019 and 2020 monitoring of government procurements for HIV prevention programs was conducted in the most affected HIV-infection regions of the Russian Federation

(N = 24). Key populations were the main focus of monitoring. To interpret quantitative data and obtain information about other sources of funding, interviews were conducted with the heads (N = 5) and focus groups were conducted with specialists (N = 16) of community-based NGOs in 5 regions of the Russian Federation.

Results: Information on 403 procurements in the amount of 641,143,397 rubles (approximately \$8,699,367) for HIV prevention programs was analyzed. NGOs from 14 regions of Russia received 79,975,459 rubles for the preventive programs implementation. Only 21.1% of these funds were spent on HIV prevention among key populations. These funds were used to implement 18 prevention projects among key populations. In the volume of prevention goods and services for key populations, more funds are invested in people who use drugs.

Also some NGOs are not always ready to use this funding mechanism because of the bureaucratic system of state organizations that announce requests for the procurement of goods and services.

Conclusions: It is necessary to develop national funding mechanisms that will contribute to the sustainability of NGOs providing preventive services to key populations. NGOs and the scientific community need to continue working with opinion leaders to develop the most effective methods of HIV prevention among key populations.