

YAOUNDE DECLARATION

After more than three decades of fighting HIV, the current 90 90 90 strategy represents possibly the last realistic opportunity that Africa has to end this pandemic. The waning global interest and the emergence of other crises such as the Ebola and Zika viruses means that the continent has to do more in order to ensure that HIV and AIDS are history by 2030.

As members of civil society working on the response to the HIV pandemic, we are concerned about the following issues, among others:

- We note with concern the treatment gap represents more than 50% of the people currently on treatment;
- We also note that the resources for the HIV response have dwindled over the years with the minimal domestic resources, the underfunding of the Global Fund and the flatlining of PEPFAR programs;
- We are also alarmed by the failure by African governments to adopt an urgent approach in order to meet the set 2020 deadline for the 90 90 90 targets despite the interim period of 4 years before the set deadline; and
- We are deeply concerned about the future of the HIV response and that of African people living with HIV should the continent fail to meet the targets.

In the circumstances, we demand the following:

TO AFRICAN GOVERNMENTS

1. We demand that HIV testing facilities and programs be rapidly scaled up to reach all communities and that an urgent approach be adopted for the testing of all people in need and enrolment into care of those found HIV-positive.
2. We demand that governments avail sufficient domestic resources for the HIV response, including abiding by the 2001 Abuja Declaration by setting aside a minimum of 15% of national budgets to health.
3. We demand that human resources for health be increased proportionally to the populations served, and that they be retained within domestic health systems.
4. We demand that updated national ART treatment guidelines opt for better tolerated and safer regimens to enhance adherence.
5. We demand that safe environments grounded in the respect for human rights stigma-free and non-discriminatory attitudes be maintained to ensure seamless access to treatment for vulnerable and marginalised communities.
6. We demand that sufficient testing, diagnostic and monitoring tools, with the highest possible levels of specificity and sensitivity, including viral load machines, be made available to cater for the populations in need of them.
7. We demand that governments collaborate to the fullest extent with civil society groups to enable them to fulfil their mandate within the 90 90 90 strategy, including community mobilisation.

8. We demand that governments introduce and/or scale up biometric systems to account for all persons tested for HIV and those enrolled onto ART and prophylaxis programs to, among other things, minimise loss to follow up and enhance longitudinal follow up.
9. We demand that governments rapidly implement and/or scale up programs and interventions with proven efficacy in order to address the current gaps in HIV programming, and
10. Finally, we demand that all African governments develop and adopt national plans, costed with set timelines, on how they will meet the 90 90 90 guidelines.

UNAIDS

1. We demand that UNAIDS ensure that all African governments have developed and adopted national plans on meeting the 90 90 90 guidelines.
2. We demand that UNAIDS provide the necessary technical assistance for the development and adoption of such plans.
3. We demand that UNAIDS adopt a more critical approach to the national response to the HIV pandemic with the objective of ensuring that the 90 90 90 targets are met at all costs.

DEVELOPMENT, BILATERAL AND MULTILATERAL PARTNERS

We demand that development, bilateral and multilateral partners:

- Fully fund the Global Fund in the upcoming replenishment process.
- Increase budgets for the response to the HIV response in order for the 90 90 90 targets to be reached
- Support civil society groups working on community mobilisation, treatment preparedness and other interventions necessary for the attainment of the 90 90 90 targets

CIVIL SOCIETY

As civil society, we commit ourselves to the following responsibilities:

1. We shall mobilise our communities for HIV testing, HIV treatment and prophylaxis, PMTCT and HIV prevention programs.
2. We shall provide treatment and psychosocial support in order to enhance maximum adherence to ARV regimens by people living with HIV
3. We shall strive to minimise loss to follow up by tracking all people living with HIV, including children, to ensure that they remain in treatment and care.
4. We shall continue raising awareness at community level on HIV and related issues, including new treatments and pre-exposure prophylaxis
5. We shall continue to provide support to government interventions at community level and to strive towards the meeting of the 90 90 90 targets.

We believe that the continent has the capacity to end HIV by 2030 should an urgent and sustained approach be adopted.

KENLY SIKWESE

TAPIWANASHE KUJINGA

STEPHEN McGILL

ALBERTINA NYATSI

LOICE MUKENYANG

GEORGE KAMPANGO

SALIM KIBET

OBATUNDE OLADAPO

PROSCOVIA NAMAKULA

PORTIA SEROTE

PHILOMENE CYULINYANA

LUCKYBOY MKHONDWANE

DANIEL MATHEBULA

THANDEKA HLONGWANE