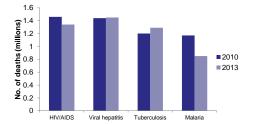




## Number of deaths/year from selected conditions, Global Burden of Disease Study 2010 and 2013



For women aged 15 to 44 years, the morbidity and mortality associated with STIs (excluding HIV) is second only to maternal causes

3 GBD 2013 Mortality and Causes of Death Study: Lancet 201



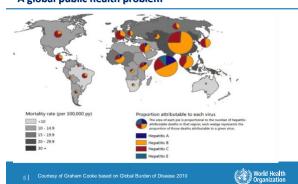
#### About 6,000 new HIV infections a day in 2013....

- About 68% are in Sub Saharan Africa
- About 700 are in children under 15 years of age
- About 5,200 are in adults aged 15 years and older, of whom:
  - about 33% are among young people (15-24)

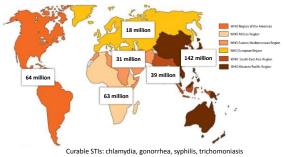
41



# Hepatitis mortality rates and virus distribution: A global public health problem



# Preliminary WHO estimates: 357 million new cases of curable STIs in 2012

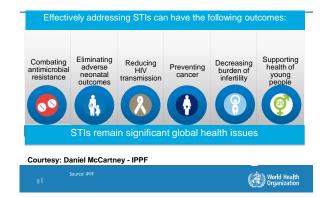


Source: WHO unpublished data

## > 1 million new STI cases every day

#### **STI Morbidity STI Mortality** STIs severely compromise people's > 300 000 fetal and neonatal deaths each quality of life and of sexual life year due to syphilis 1-2 million new cases of infertility annually if the 100 million of new 215 000 infants at chlamydia and gonorrhea infections increased risk of early death due to syphilis in women are left untreated HSV-2 infection: 3-fold increased risk of acquiring HIV 275 000 cervical cancer deaths each year due to HPV HSV-2 and HIV co-infection: more likely to transmit HIV World Health Organization

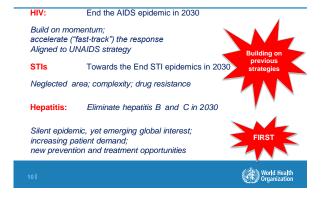
## > 1 million new STI cases every day



# Global Health Sector Strategies: Why and why now?



## Three separate, yet interlinked, strategies



## Commonalities across the strategies

- Modes of transmission (sexual, injections, Mother-Child) integrated prevention response
- Investing in Key population and in adolescents is critical
- Service continuum holistic approach required
- Access considerations (affordable drugs, monitoring drug resistance, scale up)
- Contributing to Universal Health Coverage (UHC)
- Need for advocacy to address health inequity
- Stigma and discrimination

World Health Organization

# All 3 Strategies are responding to WHA resolutions...

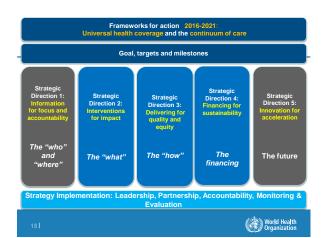
- HIV: The 2011-2015 Global Health Sector Strategy on HIV/AIDS progress and next steps discussed at WHA67 - several Member States requested the WHO Secretariat to develop a post-2015 HIV strategy.
- Viral Hepatitis: Resolutions on hepatitis have been adopted by the WHA
   - WHA63.18 and WHA67.6 which calls for an intensified and expanded
   global hepatitis response and for the feasibility of elimination of
   hepatitis B and C to be explored
- STIs: WHA approved the Global Strategy for the Prevention and Control of STIs: 2006-2015 with resolution WHA59.19 – progress reported back to WHA68

121 World Health Organization

## **Addressing SDG Sub-Goals**



The strategies pose five · What is the situation we face? critical · What interventions need to be questions to delivered? change the · How can we optimally deliver? trajectory What are the added costs? and achieve · How can we cover the costs? impact World Health Organization



# Global HIV treatment targets: aligning with global multisectoral strategy - 2030



# Targets towards the End of STI epidemics 2030

90% reduction of *T. pallidum* incidence
90% reduction in *N. gonorrhoeae* incidence
≤50 cases of congenital syphilis per 100 000 live births in 100% of countries
80% HPV vaccine coverage

World Health Organization
Organization

## Proposed hepatitis impact targets by 2030

Incidence	95% reduction HBV 80% reduction HCV (<1 million deaths)
Mortality	65% reduction (<500,000 deaths)

18 l World Health Organization

# Developing Global Health Sector Strategies for HIV, Viral Hepatitis and STIs: 2015 progress to date

