Summary

The International AIDS Vaccine Initiative (IAVI) welcomes the opportunity to contribute to this inquiry. Our mission is to ensure the development of preventive AIDS vaccines that are available to all who need it. The UK government was the first government to support IAVI’s mission. Since 1998, IAVI has collaborated with DFID primarily through DFID’s Research Team.

In this submission, we highlight the following aspects of DFID’s work in HIV/AIDS:

- Ensuring a balanced DFID response to HIV/AIDS that is focused on short term and as well long-term strategies aimed at sustainably ending the epidemic
- Supporting and accelerating the development of effective, affordable and accessible biomedical tools, including AIDS vaccines
- Ensuring sustainable capacity development for Research and Development (R&D) in countries most affected by HIV/AIDS
- Addressing the needs and ensuring the engagement of people most impacted by HIV/AIDS, including women and young people

About IAVI

IAVI is a nonprofit international public-private partnership organization working to accelerate development of broadly effective AIDS vaccines accessible to all. IAVI works with partners in 25 countries to research, design and develop promising vaccine candidates. We strengthen the expertise and infrastructure to fight HIV/AIDS in sub-Saharan Africa. We advocate for policies, financing and environments that drive the fastest possible development of AIDS vaccines. IAVI’s work is made possible by generous support from government donors as well as philanthropic and private institutions and individuals.

Evidence

1. Coherence and effectiveness of DFID’s strategy or framework to work towards the SDG HIV/AIDS target

DFID has long been a major global leader in the response to HIV/AIDS. This has included early and long standing support for the development of AIDS vaccines that are effective, affordable and accessible to communities most impacted by the epidemic. DFID pioneered support for “Research for Development” - R&D that is embedded in Development approaches and goals. As one of our earliest government donors, DFID helped pave the way for other government donors to join in support for IAVI’s mission.
DFID’s current HIV/AIDS policy priorities, as outlined in the strategy “Towards zero infections”, supports the achievement of the current SDG target to ending HIV/AIDS, notably with a focus on reducing new HIV infections and addressing the treatment, prevention and care needs of women, girls and key populations as part of a comprehensive sexual and reproductive health and rights strategy (SRHR). There is an opportunity to further align this strategy with new and more recent global policy agreements including the SDGs and the Political Declaration of the UN High Level Meeting on HIV/AIDS.

The strategy “Towards zero infections” does not reference the need for new HIV prevention technologies; yet DFID’s support to IAVI is an essential component of this strategy. **An AIDS vaccine is needed if we are to move towards zero HIV infections.** Investments into the roll-out of existing treatment, prevention and care services has substantially cut new HIV infections and reduced AIDS-related deaths. Still, the number of people living with HIV is still increasing and the number of annual new HIV infections has stalled at 2 million for the past five years; women, young people, key populations and difficult to reach communities carry the most of the burden of new HIV infections.

While we must maximize the use of anti-retroviral drugs and current and emerging prevention methods these alone cannot control and ultimately end AIDS. Recent modeling data by IAVI, AVAC and Avenir Health indicates that an effective and well-adopted AIDS vaccine could ultimately help to avert tens of millions of new infections and save millions of lives in LMICs over time and thus bring the end of AIDS within reach.¹

The Sustainable Development Goals have acknowledged the need to “support research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries” (SDG3, target 3b); whereas the Political Declaration of the UN High Level Meeting on HIV/AIDS, held in June last year, recognized that R&D must be accelerated including for AIDS vaccines, and strongly urged for increased investment in such R&D (chapters 48 and 64).

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**DFID’s contribution to IAVI has helped to substantially advance the development of AIDS vaccines**

It facilitated new knowledge on local HIV/AIDS epidemics and vulnerable communities, addressing scientific barriers, ensuring the clinical evaluation of novel candidates, strengthening the capacity for R&D in countries most impacted by HIV/AIDS amongst local research institutions and governments alike, and allowing access to essential HIV prevention services amongst vulnerable communities.

Today, a new generation of promising vaccine candidates are in or progressing toward clinical evaluation, and several are anticipated to enter late-stage clinical testing within the next few years. Furthermore, with the support of DFID and other government donors, IAVI has helped to develop 8 African clinical research centers in 5 sub-Saharan African countries that are now

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playing a major role in research efforts for AIDS vaccines as well other HIV prevention technologies (such as Pre-Exposure Prophylaxis) and other vaccines (such as Ebola). Together with these partners, IAVI has supported 21 epidemiology studies and 26 clinical trials; research-related training for 2000 scientists, clinician, nurses and counselling; and ensured access to voluntary HIV counselling and testing for 650,000 volunteers in communities with a high risk of HIV infection including women, men who have sex with men, sex workers and fishing communities.

It is worth noting that our collaboration with DFID has also allowed IAVI to facilitate the engagement of UK-based institutions. The UK is one of the key countries in the world contributing to and supporting the development of AIDS vaccines. One of IAVI’s main laboratories is based in the UK through a collaboration with Imperial College London, and IAVI collaborates with 11 other UK partners, including universities, research institutes, biotechnology and pharmaceutical companies and civil society. Our work with these partners also pays dividends for addressing other infectious diseases prioritized by DFID and other departments, including TB, malaria, and emerging infectious diseases like Ebola.

2. The extent to which combating HIV/AIDS is or should be part of DFID’s strategic vision on women and girls and the DFID Youth strategy

A strategic vision on women and girls and a Youth Strategy should incorporate a targeted response to HIV/AIDS. Women and young people are disproportionately affected by HIV/AIDS. In Sub-Saharan Africa, AIDS is the leading cause of mortality amongst women of reproductive age. In South Africa, almost 1 in 4 women lives with HIV, and new infections among young women (15-24) were two-and-a-half times infections in young men in 2015.

The development of an AIDS vaccine would support an AIDS strategy in the context of a strategic vision for women and girls and youth. Keeping women, girls and young people free from HIV/AIDS reduces reducing the risk of stigma and discrimination and supports opportunities for access to education and jobs as well as healthcare services. Once available, women could obtain an AIDS vaccine confidentially, without needing partner consent. Girls and boys could be vaccinated before exposure to HIV. IAVI actively engages women, girls and young people. On the road to a vaccine, IAVI and partners develop guidelines and policies and work with peer groups to ensure the appropriate engagement of women, girls and young people in our mission and work. Whereas epidemiology work has facilitated the development of health policies to address some immediate needs of these communities as well as preparing for access to future AIDS vaccines.
3. **The level of UK publicly stated political commitment and the role of the UK Government’s presence at HIV/AIDS conferences**

Continued strong political commitment in addition to proactive and visible engagement on the global stage will be essential and sends a positive signal to other governments. Investments in the global response to HIV/AIDS are under pressure, including those for R&D, despite an increasing number of people living with HIV who require access to life saving treatment, and no sign of a decline in new HIV infections. Given the UK’s legacy in the global HIV/AIDS response to date, the government can stimulate essential innovation across a multitude of approaches in the global HIV/AIDS response and drive a long-term vision to achieve a sustainable end to the epidemic.

Investment in the development of an AIDS vaccine will need to be an essential component of such a vision - it is one of the greatest biomedical challenges of our time and requires a long-term investment. DFID’s support has already helped to achieve major advances in the research and built important capacity for biomedical research in countries most affected by HIV/AIDS. This momentum needs to be sustained and accelerated - once a vaccine becomes available, it can prevent millions of new HIV infections, saving lives as well as costs, and ultimately ensuring a sustainable end to HIV/AIDS.