



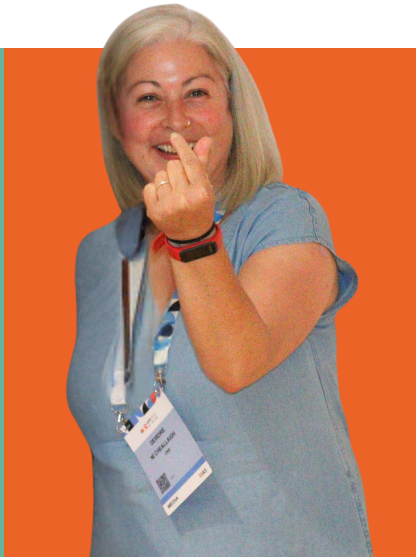
# LIVING

## 2024

Communities leading; advancing health, dignity and equity

**REPORT**

# UNFINISHED BUSINESS



# ABOUT LIVING

The Global Network of People Living with HIV (GNP+), The International Community of Women Living with HIV (ICW), The Global Network of Young People Living with HIV (Y+ Global), The HIV Justice Network (HJN), Prevention Access Campaign (PAC), AIDS Action Europe (AAE), Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM Health), The European AIDS Treatment Group (EATG), and Afrocab Treatment Access Partnership (Afrocab) came together to host the Living 2024 conference on 20–21 July 2024 as an official pre-conference to the International AIDS Society's AIDS 2024 conference in Munich, Germany.

Living 2024 partners shared a common interest in achieving the conference outcomes for the benefit of communities of people living with HIV. GNP+ led the conference and partnership coordination; however, all partners contributed their expertise and resources to support the organization of the conference.

## GOALS

Living 2024 was an opportunity for people living with HIV and affected communities to come together to:

- Reflect, reimagine, and redefine the future of the HIV movement, transferring knowledge to a new generation of young activists; and,
- Build power and consensus to claim their place within the broader global health and development platforms in shaping the HIV sustainability plans beyond 2030.

## OBJECTIVES

- Create a space for people living with HIV from around the world to connect, share experiences, learn, and set priorities which will inform and influence policy, research, and financial decisions from local to global levels, including the next Global AIDS Strategy.
- Convene an intergenerational dialogue to reflect, re- imagine and redefine the future of the HIV movement and the critical role of community leadership in sustaining the HIV response to 2030 and beyond.
- Develop a People Living with HIV Community Statement that frames the Global Advocacy Agenda for and by people living with HIV, with actionable interventions.



# Appreciation

Huge gratitude to all our donors and supporters of Living 2024. Our incredible gathering would not have been possible without your support and sponsorship.

We would like to express our sincere gratitude to Cedric Nininahazwe, Julian Hows, and Fungai Murau for their invaluable assistance in making the event a success. We also acknowledge the essential effort dedicated by Firhana Barnes, Lesego Tlhwale, Helena Nangombe, and Arda Karapinar, who helped make the event a success, and thank our note takers, Mark Lewis, Davina Conor, and Kağan Çavuşoğlu.

Thank you.



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# Introduction

*“Living with HIV is not a problem, dying of AIDS IS!”*

The LIVING2024 Pre-conference held over two days, July 20-21, 2024, in Munich, Germany, represented a significant event for people living with HIV, organised by people living with HIV at the 25th International AIDS Conference 2024. The meeting aimed at fostering a collaborative environment for people living with HIV and affected communities to come together to reflect on past achievements and challenges, re-imagine innovative solutions, redefine the future of the HIV movement, and facilitate the transfer of knowledge to a new generation of young activists.

Over 200+ people living with HIV from 52 countries across the world representing women, men, LGBTQ, sex workers, people who use drugs and young people living with HIV were in attendance and participated in over fourteen plenary panels and fifteen breakout room sessions.

The meeting was an opportunity to reconnect eight years since the last LIVING conference, in order to strengthen our community voices, partnerships, and networks to drive People Living with HIV Led future of the AIDS movement and sustainability of the AIDS response, access to quality-assured treatment and HIV services, fight against stigma, discrimination, and criminalization of People Living with HIV, and launched an Intergenerational dialogue to facilitate learning transfer of knowledge to the new generation of young activists.

Two important events took place during LIVING2024. The community’s support for the Undetectable equals untransmittable (U=U) was loud and clear, reverberating throughout the pre-conference and the conference at large. On 21st July, we celebrated HIV Stigma day in honor of Prudence Mabele.

This conference was unique because our allies including healthcare providers, policy makers, researchers, and donors from different parts of the world shared their experiences, insights, and the latest advancements in treatment and care and before the end of LIVING 2024, community , with voice, made call for actions drawing attend on UNFINISHED BUSINESS in the HIV response .

This pivotal gathering was organized by the Global Network of People Living with HIV (GNP+), in collaboration with The International Community of Women Living with HIV (ICW), The Global Network of Young People Living with HIV (Y+ Global), The HIV Justice Network (HJN), Prevention Access Campaign (PAC), AIDS Action Europe (AAE), Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM Health), The European AIDS Treatment Group (EATG), and Afrocab Treatment Access Partnership (Afrocab).



# Opening ceremony: Keynote speech from WHO

As we approach 2030, we find ourselves at a pivotal moment in the fight against HIV. We have made remarkable strides, but significant challenges remain. I want to share key points from the "[Treatment and Sustainability – LIVING 2024](#)" report that highlight the path of getting to 2030 and beyond.

First, in **tackling the persistent rates of HIV incidence and mortality**, reducing new infections and deaths remains a top priority. To this effect we have witnessed expanding antiretroviral therapy (ART) access, particularly in low- and middle-income countries. The transition to dolutegravir (DTG)-based regimens is central to this effort, offering effective, tolerable options that will enhance ART coverage and adherence.

**In paediatric treatment**, we have new DTG formulations for infants and children, a breakthrough that brings hope to our youngest patients. However, we must also stay vigilant against the threat of drug resistance, especially as we see emerging resistance to DTG. Continuous monitoring and responsive strategies are crucial to preserving the effectiveness of our treatments.

Perhaps one of the most empowering messages we can convey is this: **an undetectable viral load equates to zero risk of transmission**. This fact underscores the transformative potential of ART—not only to save lives but to break the chain of transmission.

The World Health Organization has issued updated **guidelines recommending integrated care**, which includes ART alongside sexual and reproductive health, and even chronic disease management for conditions like diabetes and hypertension. Such integration offers people with HIV a holistic, comprehensive approach to their health.

Our healthcare systems must also adapt to address the needs of the **ageing population** of people living with HIV, who face unique health challenges as they grow older. New innovations like long-acting treatments can play an important role here, reducing the burden of daily medication.

Finally, we must continue to base our strategies on solid data and science. Community involvement remains essential, as does a renewed commitment to vaccine and cure research, despite political and financial obstacles.

In summary, integrated, people-centred care, ongoing innovation, and community collaboration are our keys to ending AIDS as a public health threat. Together, we can—and must—realize a healthier future for all.

*Dr. Meg Dohererty*

**Director, Department of Global  
HIV, Hepatitis and STIs  
Programmes (HHS)  
World Health Organization  
Headquarters, Geneva,  
Switzerland**

# Access to treatment and the power of U=U

"I take one pill a day and that's a new world for me"

A vibrant celebration of the achievement of community led campaign on Undetectable = Untransmittable (U=U) was experienced at LIVING2024 and is accepted by people living with HIV and allies as an opportunity to finally secure health, rights, and dignity for all people living with HIV.

Living 2024 was another opportunity to celebrate WHO's Say Zero policy brief, as a framework for understanding the global implications of U=U and the importance of policy in driving change.

The meeting of global voices of people living with HIV, could not resound louder to the power of U=U and the opportunity to raise awareness about this message that we believe can motivate uptake, adherence to treatment, viral suppression and ultimately secure quality of life for all people living with HIV

The U=U initiative is transformative, improving the quality of life for those living with HIV, accelerating progress towards the 95-95-95 targets, combating stigma, and supporting the end of discriminatory laws. A win- win for all

## **The power of Undetectable = Untransmittable (U=U)**

Everyone needs to understand that people with an undetectable viral load cannot transmit HIV. This knowledge can reduce stigma, encourage testing and treatment, and empower those living with HIV. By spreading the U=U message widely, we can foster a more informed and supportive society.

"Knowing your HIV status is the first step to accessing treatment. With proper medication, we can suppress the virus, live a long life, and prevent transmission."

As Juan Michael Porter II said, with the science behind us, it is time we argue for knowledge rather than pity and demand our rights. "I'm not focused on being pretty. I'm focusing on being here" and "Don't ask for it. Demand it," he said.

Eamon stressed that the science behind U=U is robust and that the WHO's declaration on U=U could help shift perceptions in countries that are still skeptical. He called for standardized language around U=U to create a common voice and scale change in social attitudes.



“Lets make U=U a reality for everyone”.

The 2024 conference brought together the voices of the community of People Living with HIV to come out strongly to demand for scientific advancements to be integrated into public health strategies to combat HIV effectively.

Davina Connor, a vocal advocate for the rights of people living with HIV who took up advocacy in 2015 and became a proponent of U=U in 2016, highlighted statistics that showed, 57 percent of people living with HIV in America are not virally suppressed, indicating a significant gap in care and support.

Davina who has been living with HIV for 27 years made a passionate plea for better treatment and prevention measures which resonated deeply, especially her assertion that the US government can and must do better for people living with HIV.

### **Inclusion in policy**

Eamon Murphy from UNAIDS emphasized that U=U has always been the ultimate goal in its power to end self-stigma, which remains a significant barrier for PLHIV, affecting their quality of life and engagement with healthcare.





“We are doing more educating that fighting.”

## Launching the U=U University

Communities across the world are innovating with technology and communication concepts that could help spread the word about the U=U message however, many still do not know about it. Challenges of resistance to the message and to sharing it particularly by health providers were shared.

The stage was set by the U=U University, a collaboration of PAC and CDC which showed a video that advanced messaging around people living with HIV who are on treatment and have an undetectable viral load have zero risk of transmitting the virus to sexual partners.

Bruce Richman elaborated on the institution's mission to educate and empower participants with the latest evidence-based knowledge and practical skills. He said the U=U messaging was revolutionary as it provides hope, combats stigma, and encourages access to testing, prevention, and care.

## Shared experiences

The global conference brought together experiences across the globe on the move towards U=U.

In Kenya where women bear the responsibility of preventing transmission to their partners and children and yet are often excluded from decision-making due to gendered roles, achieving U=U would need a unique approach. Florence Riako Anam called for a positive and inclusive message focusing on the impact of the benefits of U=U for women living with HIV.



# Hold on GIPA please!

*“Thank you all, this continues to be some of the most powerful work to be done.”*

## **People living with HIV engagement in all decision making processes cannot be stressed enough**

During Living 2024 people living with HIV made a resounding call to bring community voices to the center of decision-making and seeking scientific breakthroughs.

Living 2024 reasserted the centralization of community in realizing U=U through understanding the benefits of HIV treatment, and its role in reducing HIV-related stigma and discrimination, as well as the potential to increase health equity by championing universal access to care and treatment.

The conference highlighted communities left behind in conflict in places like Russia and Ukraine and reminded policymakers of the need to reach communities not traditionally seen as high-risk, such as heterosexual women and men who have sex with men but do not identify as gay or bisexual.

Keeping the community living with HIV healthy is central to ending the epidemic, and policymakers need to be aware of that and the fact that U=U provides a sustainable path.

The conference also brought out the need for People Living with HIV to seek an active role in scientific breakthroughs that have a significant impact on their lives. In the ongoing battle against HIV, one of the most pressing issues is the inclusion of people living with HIV in broader clinical research.

Despite substantial progress in HIV treatment, the exclusion of people living with HIV from non-HIV-specific clinical trials skews research data and perpetuates health disparities. This oversight hinders the development of effective medical treatments and interventions tailored to this unique population. Addressing this issue is not just a matter of scientific necessity; it is a fundamental ethical obligation and a critical step towards achieving equity in healthcare.

## **The Necessity of Inclusion in Clinical Trials**

The conference underscored the critical need to integrate people living with HIV into non-HIV clinical trials.

Brian West and Alain Volny-Anne from the European AIDS Treatment Group (EATG) highlighted that PLHIV has distinctive health profiles due to their condition and its treatment. Excluding them from clinical trials means we lack data on how new treatments affect this population.

This can result in less effective or even harmful treatments, as seen in Switzerland, where the rising incidence of cancer among PLHIV signals an urgent need for research that addresses comorbidities specific to this group.

The exclusion of people living with HIV from clinical research also has ethical implications. Memory Sachikonye from EATG emphasized that such exclusion is discriminatory and undermines the rights and dignity of individuals with HIV.

Furthermore, community engagement is vital for addressing the needs of people living with HIV. Luís Mendão's presentation on community engagement models showcased how the successful integration of people living with HIV into clinical trials fosters collaboration between academia, clinicians, and pharmaceutical organizations. By empowering community networks and advocating for their inclusion, we can bridge gaps between researchers and the people living with HIV leading to more effective and inclusive health solutions.

Inclusive research practices are not only fair but also lead to more accurate and effective medical interventions. By incorporating people living with HIV into research, we ensure that treatments and health interventions are effective for everyone, thereby promoting equity in healthcare outcomes.



# Ending Stigma, Discrimination, & Criminalisation

*“HIV needs to be treated exactly the same as any other disease, and between us, hopefully, we can eradicate the stigma!”*

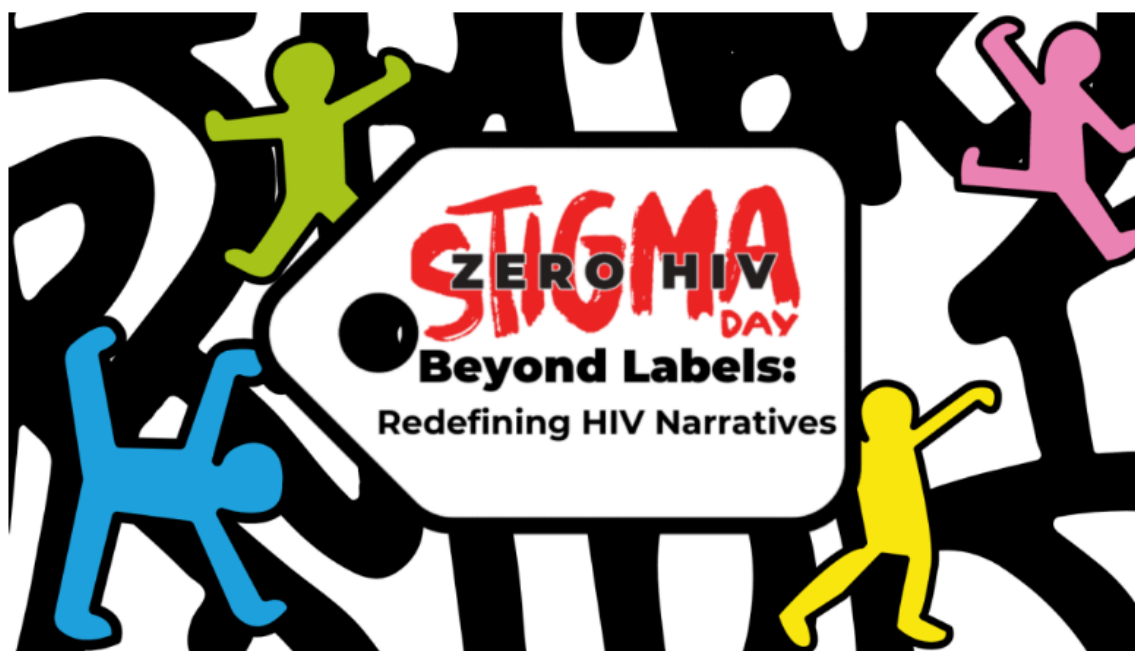
Since March 02, 1983 when hundreds of people came together in New York and San Francisco under the theme of “Fighting for our lives” and an AIDS candlelight march organized as a personal expression to honour the dead and support the living, we have fought to end HIV stigma.

That moment ignited a movement, uniting people in the face of stigma, isolation, and discrimination. It transformed the dynamic between patients and healthcare providers, giving voice and purpose to those previously seen as victims, and established a foundation for advocacy for dignity and rights for people living with HIV.

We have lost many heroes and sheroes including Prudence Nobantu Mabele. People who have had an impact on our lives, personalities who have made our reality a little better and voices that changed policies, were heard and continue to reverberate through the pages of the history of the AIDS movement and the corridors of power.

Advocacy for inclusion in decision-making spaces and new technological advancement just goes to show the work that still needs to be done to address HIV Stigma, Discrimination, and Criminalization.

Despite the progress made over the years as of March 2023, 91 countries had specific HIV criminal laws, and 41 others used general laws for prosecution. These punitive laws and societal prejudices have a profound impact on the global HIV response.



Day two (July 21st) opening plenary of Living 2024, GNP+ had the privilege of celebrating the 2nd annual commemoration of Zero HIV Stigma Day with those in attendance. Zero HIV Stigma Day is a global movement uniting people and communities to raise awareness of HIV and take action to eliminate HIV stigma in all its forms. July 21st is a day of action featuring communities living with and affected by HIV, activists, clinicians, influencers, and civil society organizations. Launched in 2023 in honor of the late South African AIDS activist Prudence Nobantu Mabele (July 21, 1971 - July 10, 2017), #ZeroHIVStigmaDay is jointly supported by IAPAC, NAZ, GNP+, and the Global HIV Collaborative.

Prudence set a precedent to encourage other women living with HIV to discuss their status with loved ones, to live without shame, to seek treatment, and to lead happy and fulfilled lives. We chose Prudence's birthday to honor her work and tireless activism to end HIV stigma.

The 2024 campaign theme, **Beyond Labels: Redefining HIV Narratives**, seeks to reshape perceptions, inspire empathy, and drive collective action towards a world free from HIV-related stigma. By amplifying diverse voices and stories, this day strives to create a more compassionate and inclusive society for all.

# The Harmful Impact of Criminalization



Criminalization discourages individuals from getting tested and disclosing their HIV status, exacerbating the stigma and isolation they face. In the ongoing battle against HIV, tackling stigma, discrimination, and criminalization is crucial for ending new transmissions and improving the lives of those affected. To achieve meaningful progress, we must confront these issues head-on and advocate for comprehensive legal and social reforms.

Edwin Bernard from the HIV Justice Network who gave examples of HIV criminalization from Canada, Malawi, Russia, and the USA illustrated the severe and often irrational nature of these prosecutions. In many cases, laws designed to protect public health created additional barriers to prevention and treatment, undermining their goals.

Bernard said these laws, which criminalize HIV transmission, exposure, and non-disclosure, often fail to reflect advancements in medical science. Effective antiretroviral treatments have made it possible for people living with HIV (PLHIV) to achieve undetectable viral loads, thus eliminating the risk of transmission. **Yet, many legal frameworks continue to impose harsh penalties based on outdated understanding of the virus. over the years as of March 2023, 91 countries had specific HIV criminal laws, and 41 others used general laws for prosecution. these punitive laws and societal prejudices have profound impact on global HIV response.**

*“This workshop needs to be experienced globally. It will save lives”.*

## Perpetuate social injustices

Some of these laws end up instituting and perpetuating social injustices, a case in point in America where HIV criminalization laws disproportionately affect people of colour, with 91 percent of HIV-related arrests occurring within this demographic.

Robert Suttle from The Elizabeth Taylor AIDS Foundation shared his personal experience with HIV criminalization, highlighting the dehumanizing effect of these laws. His experience, including being listed on the sex offenders register, reveals the broader social injustices inherent in HIV criminalization. Such laws not only punish individuals but also perpetuate systemic inequalities, reflecting deep-seated biases and failing to account for the complex realities of living with HIV.

## Education and Advocacy

And yet they are difficult to change amidst prevailing stigma, regressive governments, and conservative societies. Andy Tapia from the SERO Project and Sofía Varguez from the HIV Justice Network provided insights into the situation in Latin America, where 26 countries have laws criminalizing HIV. Communities living in these societies face a formidable challenge in repealing these laws amidst prevailing social attitudes. Addressing HIV stigma, discrimination, and criminalization requires a multifaceted approach that includes legal reform, public education, and strong advocacy. There is a need for sustained long-term funding which is crucial in supporting advocacy efforts, instituting legal reform, public education, and mobilization of affected communities to counteract the pervasive stigma and misinformation surrounding HIV.

## Technology



It also requires harnessing technology to help evolve activism especially as we seek to empower younger generations. Shaun Mellors from the UK reflected on the historic activism that has shaped the HIV response, noting the transformation from fear and isolation to a powerful movement for change. Mellors highlighted the need for renewed commitment to community responses, acknowledging the troubling decline in funding and leadership in the fight against HIV. Funding especially towards technology will play a key role in transitioning to next-generation champions helping us build on past successes while addressing ongoing challenges.

Julian Hows from the HIV Justice Network introduced the [HIV Justice Academy's online resources](#), which provide action toolkits and educational materials for activists. These resources combine scientific knowledge with the power of lived experience, equipping advocates with the tools necessary to challenge discriminatory laws and policies. The academy's approach emphasizes the importance of both evidence-based advocacy and personal storytelling in driving legal and social change.

James Cole from the UK highlighted the persistent gaps in public knowledge and ongoing discrimination faced by people living with HIV. His introduction of the HIV Confident Charter Mark, aimed at reducing stigma within organizations, demonstrates the importance of community advocacy and education in creating more inclusive environments.

The conference also addressed the intersectionality of discrimination, with Duduzile Dlamini from South Africa calling for strengthened partnerships and movements to create safe, stigma-free environments.

She questioned why some regions fail to meet the 95-95-95 targets and stressed the need for policy reforms to decriminalize HIV. Dlamini's heartfelt tribute to Prudence and her call for policy changes underscore the emotional and practical implications of HIV-related discrimination.

Addressing HIV stigma, discrimination, and criminalization requires a multifaceted approach that includes legal reform, public education, and strong advocacy. By tackling these issues, we can create a more just and effective approach to managing HIV, respecting human rights, and promoting public health. The collective efforts of individuals, organizations, and governments are essential for building a future where HIV is no longer a source of fear and discrimination, but rather a condition managed with dignity and respect.

# Sustainably resourcing community leadership

*"Understanding and accepting my HIV status is about being aware, informed, and in control of decisions that affect me. It's my right to know about my health and manage things in the best way possible."*

Living underscored that ending new HIV transmissions requires comprehensive and sustained strategies, including education, prevention, and treatment that are long-term. This misalignment can detract from the effectiveness of interventions and stifle innovation.

Short-term funding cycles are inherently problematic. They often come with rigid conditions and limited scopes, forcing community groups to align their work with the priorities of funders rather than the actual needs of their communities.

Moreover, the reliance on emergency or project-based funding can lead to inefficiencies, as organizations spend substantial time and resources on grant applications and reporting rather than on direct service provision.

The HIV movement owes its success to strong vocal communities. In the global battle against AIDS, community groups play a crucial role in bridging gaps left by traditional healthcare systems. They combat stigma, discrimination, and criminalization while providing essential support for treatment literacy, demand creation and advocacy for people living with HIV.

However, these efforts are frequently undermined by the lack of long-term sustainable funding. To build sustainable long-term advocacy we need to support grassroots work to end new HIV transmissions, effectively address stigma and discrimination, and improve the quality of life for PLHIV.

The conference touched on the importance of sustainable funding for effective HIV response. Tariq El Alaoui from MENA Community, a network of people living with HIV in Morocco, pointed out the region's sense of abandonment and the insufficiency of emergency funding. Sustainable financial support is crucial for ensuring that HIV initiatives do not just start but continue to thrive and expand. Consistent funding models are essential for the long-term success of HIV programs, enabling them to address ongoing challenges and scale up effective interventions.

Community organizations bring invaluable grassroots insight and tailored support to HIV responses. They work to educate, advocate, and provide direct services, often reaching marginalized populations that mainstream health services fail to adequately serve.

Their work includes outreach programs, peer education, support groups, and advocacy efforts aimed at changing discriminatory policies and practices.

However, the impact of these organizations is frequently constrained by unstable and short-term funding. When financial support is unpredictable, it becomes challenging to plan and execute long-term strategies. This instability can lead to interruptions in vital services and diminished capacity to respond to emerging needs.



## The Impact on HIV treatment and Care

Without community driven sustainability plans, organizations that help demystify HIV misinformation to promote testing and treatment adherence, and provide critical support for people living with HIV, struggle to maintain their outreach and support services, impeding progress toward the goal of ending AIDS as a public health threat.

Additionally, addressing stigma and discrimination requires persistent efforts. Community groups engage in advocacy to influence policy changes and challenge harmful narratives about HIV. They work to build public awareness and foster a more supportive environment for those affected by HIV. Sustainable funding allows these efforts to continue without interruption, providing a stable platform for advancing human rights and health equity.

Community groups instrumental in advocating for legal reforms and changing societal attitudes to ensure that people living with HIV are treated with dignity and respect and that their rights are upheld also need long-term funding to support these advocacy efforts and ensure that they can adapt to evolving challenges and opportunities.

*“Engagement in care optimizes living well with HIV by timely initiation and maintenance of ART and facilitating access to other health and social care services”.*

Sustainable funding for community groups is not just a financial necessity; it is a moral imperative. To end new HIV transmissions, combat stigma and discrimination, and improve the lives of those living with HIV, we must commit to long-term, stable, and flexible financial support. This commitment will enable community groups to continue their vital work and contribute to a future where HIV no longer poses a public health threat.

For many people living with HIV, community organizations provide a lifeline. They offer support services ranging from counseling and mental health support to practical assistance like housing and nutrition. These services are crucial for improving the quality of life and ensuring adherence to treatment. Long-term funding is essential to sustain these support networks, allowing organizations to provide continuous care and adapt their services to meet changing needs.



# Bridging the Gaps in HIV Response

*“They don’t have a clue, when talking about children of sex workers.”*

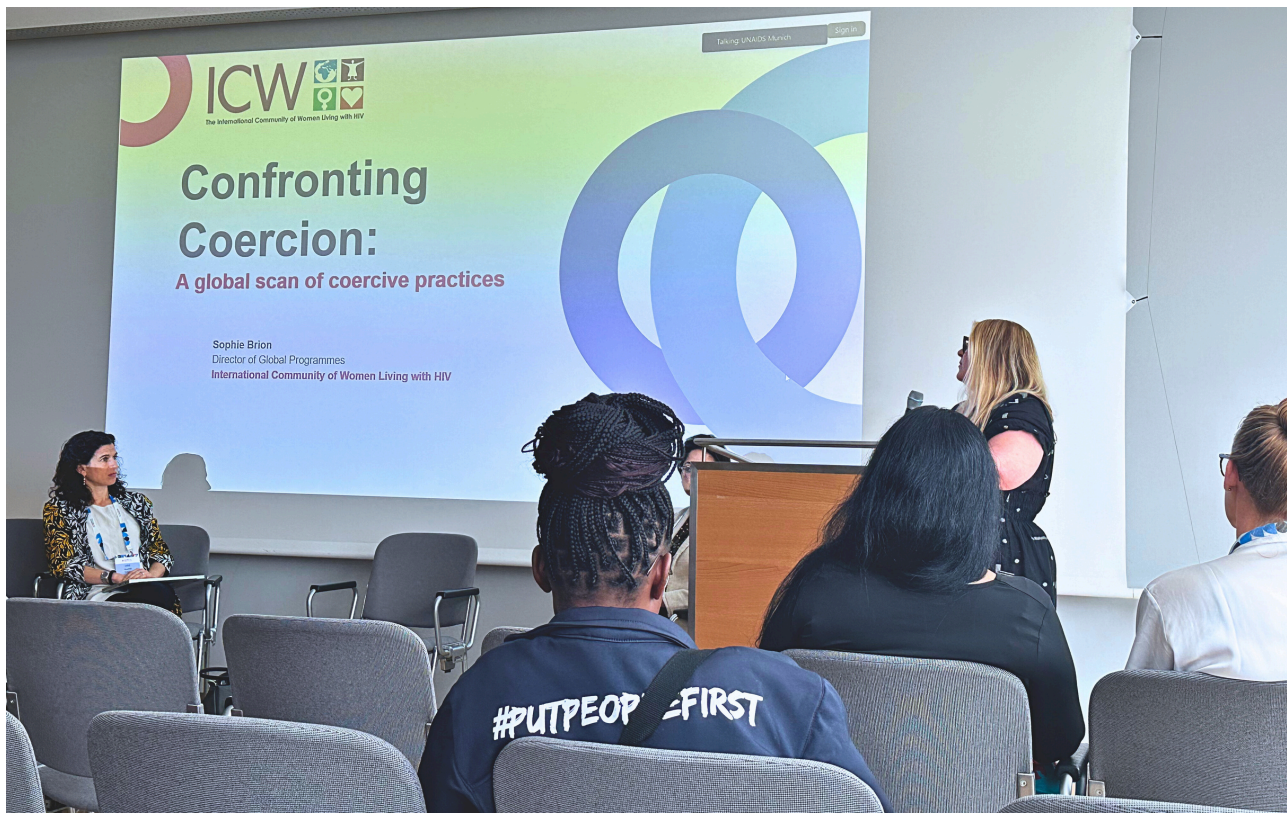
The conference highlighted the need for a comprehensive approach to addressing the unique challenges faced by women and other marginalized groups living with HIV. Taline Torikian’s remarks about the severe underrepresentation of women in HIV interventions and funding emphasize the necessity of directing more resources to women-focused projects. The disparity is glaring, with only 1 percent of funding in the region allocated to women’s organizations, underscoring the need for correction.

Egypt activists discussed the delays in treatment initiation due to pervasive stigma and barriers in accessing care. The year-long process from diagnosis to treatment exacerbates health outcomes and highlights the urgent need for streamlined, community-based dispensing mechanisms for antiretroviral therapies. By addressing these systemic issues, we can significantly improve health outcomes for people living with HIV and ensure more equitable access to care.

## **The Challenges Faced by Women Living with HIV**

Women living with HIV, particularly those who are sex workers or mothers using drugs, face additional layers of marginalization. Moderated by Daniel Townsend, a workshop discussion featuring Duduzile Dlamini, Taline Torikian, and Phelister Abdalla illuminated the harsh realities that women endure. The double stigma they face—being marginalized for their gender and HIV status—compounds their difficulties in accessing health services.

For instance, in Kenya, Phelister Abdalle highlighted how the criminalization of sex work creates significant barriers to accessing healthcare. Economic challenges further exacerbate this problem, making it nearly impossible for sex workers to seek prevention and treatment. Similarly, in South Africa, Duduzile Dlamini pointed out the mismatch between clinic operating hours and the work schedules of sex workers, making it difficult for them to access necessary services. These logistical and legal barriers underscore the need for more flexible and supportive healthcare solutions.





*“I’m not focused on being pretty. I’m focusing on being here”.*

## Intergenerational lessons for stronger community Advocacy

Living 2024 also highlighted the benefits of intergenerational dialogue in the HIV response. Panels featuring both seasoned activists and younger voices demonstrated the value of sharing experiences and perspectives across generations. This exchange fosters a deeper understanding of the history and evolution of the HIV movement, while also incorporating fresh perspectives and innovative strategies for the future.

For example, Shaun, Memory, Tumie, and Julian shared lessons from their long-term involvement in HIV treatment advocacy, providing valuable insights into past activism. In contrast, younger activists like Cyprian and Kagan emphasized the need for new approaches and technologies to drive the movement forward.

Bridging generational divides through structured dialogue and experience sharing can enhance collaboration and strengthen the HIV response.

The insights gained from discussions underscored the importance of community engagement, equitable representation, and intergenerational collaboration in driving meaningful change. As we continue to advance in our movement building to end AIDS, it is imperative to prioritize these aspects to ensure that all individuals, regardless of their status or background, receive treatment and care they need. Through concerted efforts and a commitment to inclusivity, we can make significant strides towards a more equitable and effective global health landscape.



*"we can eradicate the stigma and give these young people an opportunity to stand up and say, 'I've lived it. I want to come forward and make a difference!'".*

# The sound of a global voice for Living Positively

LIVING 2024 conference provided a much needed safe and supportive environment for people living with HIV to share their stories, experiences, and coping strategies. This collective sharing can foster a sense of community and belonging, which is essential for mental health and well-being.

Living 2024 served as a pivotal platform for addressing the multifaceted needs of those living with HIV, in particular the needs of those aging with HIV. By bringing attention to areas with limited access to antiretroviral therapy, preventive measures, and healthcare infrastructure, the conference hoped to mobilize international support and funding. Moreover, it helped in formulating strategies to overcome barriers to access, ensuring that more people living with HIV receive the care they need regardless of where they live and helps foster global collaboration and knowledge-sharing, bringing together individuals living with HIV.

This exchange of information is critical in identifying best practices, innovative treatments, and effective support mechanisms that can be adapted and implemented in diverse settings. It allows for the cross-pollination of ideas that can lead to breakthroughs in how HIV is managed and perceived globally.

An international conference also provides a platform to highlight disparities in access to treatment across different economic, social, and political backgrounds and advocate for more equitable distribution of resources.

## Enhancing Advocacy and Policy Development

Living 2024 was a crucial component for advocacy for those living with HIV, to help amplify their voices, enabling them to participate actively in policy discussions that affect their lives.

This involvement is vital for shaping policies that are inclusive, equitable, and responsive to the real needs of the HIV community. The conference serves as a venue for training and empowering advocates, equipping them with the knowledge and skills necessary to influence change at local, national, and international levels.

The international conference also helped shed a spotlight on cutting-edge research and innovative approaches to HIV care. The platform continues to provide the best avenue where researchers can present their findings, receive feedback, and collaborate on future projects. This collective effort accelerates the pace of scientific discovery and ensures that research is aligned with the needs of those living with HIV.

Living 2024 was also a great opportunity to educate the world and disseminate crucial information about prevention methods, risk reduction, and the importance of regular testing, addressing misconceptions and educating about the science of HIV, fostering a better understanding of the virus.



# LIVING 2024

## CALL TO ACTION FOR STAKEHOLDERS

### *Upscale message on U=U*

**U=U (Undetectable = Untransmittable)** is the concept that people with an undetectable viral load cannot transmit HIV. We need to **upscale awareness and education** about this concept, ensuring that everyone understands that people with an undetectable viral load cannot transmit HIV. This knowledge can reduce stigma, encourage testing and treatment, and empower those living with HIV. By spreading the U=U message widely, we can foster a more informed and supportive society.

### **Sustainable Long-term Funding**

The fight against HIV and AIDS requires **Sustainable long-term funding**. This isn't just a temporary battle; it's a continuous effort that needs unwavering financial support. Governments, organizations, and private donors must commit to consistent funding to ensure that research, treatment, and prevention programs can operate effectively. Without this stability, progress can stall, and lives are at risk. We must advocate for policies that secure long-term investments in HIV and AIDS initiatives, ensuring that resources are available to support those affected and to drive forward the innovations needed to end the epidemic.

### **Reframe the Issues. Build New collaborations.**

To drive progress, we must **reframe the issues** surrounding HIV and AIDS and **build new collaborations**. This means looking at the epidemic through fresh lenses, considering the broader social, economic, and political contexts that influence it. By reframing the conversation, we can highlight new angles and solutions. Building coalitions involves bringing together diverse groups—healthcare providers, activists, policymakers, and community members—to work towards common goals. These partnerships can amplify our efforts and lead to innovative approaches to ending HIV and AIDS.

### **Invest in What Works**

To maximize the impact of funding, **donors need to invest in what works**. This means supporting evidence-based interventions that have been proven to be effective in preventing and treating HIV. It also involves funding innovative research and programs that address the evolving landscape of the epidemic. By focusing on strategies that deliver results, donors can ensure that their contributions make a meaningful difference. We must advocate for smart, **targeted investments that drive progress and save lives**.

### **Create global forums for collaboration**

An international conference for those living with HIV is indispensable for addressing their diverse and complex needs. It creates a global forum for collaboration, advocacy, education, and support, ultimately contributing to better health outcomes and quality of life for individuals living with HIV worldwide. By fostering a united and informed community, such a conference can drive meaningful progress in the ongoing fight against HIV.

## **CALL TO ACTION TO COMMUNITIES**

### **Don't Ask for It, Demand It!**

It's time to shift our approach from politely asking for support to **demanding** it. The urgency of the HIV and AIDS crisis requires a bold stance. We must assertively call on policymakers, funders, and stakeholders to prioritize this issue. By demanding action, we highlight the critical need for resources and attention. This isn't about being confrontational; it's about being clear and firm in our resolve. Our communities deserve nothing less than a full commitment to ending HIV and AIDS, and we must make our voices heard loud and clear.

### **Re-group and Re-engage**

To make significant strides in the fight against HIV and AIDS, we need to **re-group and re-engage**. This means coming together as a community, reassessing our strategies, and reigniting our collective passion for the cause. Collaboration is key—by working together, sharing resources, and supporting one another, we can create a stronger, more unified front. Re-engagement also involves reaching out to those who may have become disengaged or disillusioned, bringing them back into the fold with renewed energy and purpose. Together, we can achieve more.

## **Our Voice is Strong - Use It!**

*Our collective voice is a powerful tool in the fight against HIV and AIDS. We must **use it** to advocate for change, raise awareness, and push for the resources and policies needed to combat this epidemic. Whether through social media, public speaking, or grassroots organizing, every voice counts. By speaking out, we can influence public opinion, shape policy, and inspire others to join the cause. Let's harness the strength of our voices to make a real difference.*

## **We Can't Leave Anyone Behind**

*In the fight against HIV and AIDS, **we can't leave anyone behind**. This means ensuring that all communities, especially the most vulnerable and marginalized, have access to prevention, treatment, and support services. Equity must be at the heart of our efforts. We need to address the social determinants of health that contribute to disparities in HIV outcomes and work to eliminate barriers to care. By prioritizing inclusivity and equity, we can ensure that everyone has the opportunity to live a healthy, fulfilling life.*

## **Speak to the Audience**

*Effective communication is crucial in the fight against HIV and AIDS. We need to **speak directly to our audience**, using language and messages that resonate with them. This involves understanding the diverse needs and perspectives of different communities and tailoring our outreach accordingly. By engaging with people in a meaningful way, we can build trust, dispel myths, and encourage positive health behaviors. Clear, compassionate, and culturally sensitive communication can make a significant impact.*

# Living 2024 Program

## DAY 1:

20 July 2024

- 1. Living 2024 Pre-Conference Opening**
  - Time: 08.00 - 09.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 2. Accelerating Global Access to U=U: From a grassroots campaign to a global mandate, led by and for the HIV community**
  - Time: 09.30 - 11.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 3. Access to quality assured treatment and HIV services**
  - Time: 11.30 - 12.30 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 4. Demanding Bodily Autonomy: Increasing Accountability and Transforming Coercion, Mistreatment, and Abuse**
  - Time: 11.30 - 12.30 (CAT)
  - Location: Room 12A - 60 Pax
- 5. Everything you always wanted to know about Unitaid and the Communities Delegation but were afraid to ask**
  - Time: 11.30 - 12.30 (CAT)
  - Location: Room 12B - 60 Pax
- 6. Our Children are dying! community solidarity for a global actions!**
  - Time: 13.30 - 14.30 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 7. Community Workshop: Why people living with HIV must be included in non-HIV clinical trials**
  - Time: 13.30 - 14.30 (CAT)
  - Location: Room 12A - 60 Pax
- 8. Consultation with communities on advocacy, accountability, and resources for children**
  - Time: 15.00 - 16.30 (CAT)
  - Location: Room 12B - 60 Pax
- 9. This is our time as PLHIV: Using U=U as a win-win strategy to secure health, rights and dignity for People Living with HIV (Part 1)**
  - Time: 15.00 - 16.30 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 10. This is our time as PLHIV: Using U=U as a win-win strategy to secure health, rights and dignity for People Living with HIV (Part 2)**
  - Time: 17.00 - 18.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax

## DAY 2:

21 July 2024

- 1. Day 2: Opening plenary: Zero Stigma Day**
  - Time: 08.00 - 09.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 2. Crowdfunding learning workshop**
  - Time: 09.30 - 11.00 (CAT)
  - Location: Room 12A - 60 Pax
- 3. Wakakosha: You are Worth IT!**
  - Time: 09.30 - 11.00 (CAT)
  - Location: Room 12B - 60 Pax
- 4. We can't end AIDS without addressing stigma, discrimination and criminalisation of people living with HIV**
  - Time: 09.30 - 11.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 5. PLHIV Stigma Index 2.0: Empowering Evidence-Based Interventions through Capacity Building**
  - Time: 11.30 - 12.30 (CAT)
  - Location: Room 12A - 60 Pax
- 6. Unlocking Community Power: A Preliminary Session on Leadership and Societal Enablers in HIV Programming**
  - Time: 11.30 - 12.30 (CAT)
  - Location: Room 12B - 60 Pax
- 7. The Future of the HIV Response in MENA with Communities**
  - Time: 13.30 - 14.30 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 8. Here's what Unitaid is doing to save lives from HIV and key co-infections**
  - Time: 13.30 - 14.30 (CAT)
  - Location: Room 12A - 60 Pax
- 9. The Intergenerational Dialogue: what can the generations learn from each other?**
  - Time: 13.30 - 14.30 (CAT)
  - Location: Room 12B - 60 Pax
- 10. Sustaining Women-Led Responses: Maximizing Gains in the Global HIV Response**
  - Time: 15.00 - 16.30 (CAT)
  - Location: Room 12A - 60 Pax
- 11. MENA cross-regional exchange: developing strategies to ensure continuity of service delivery in crisis setting**
  - Time: 15.00 - 16.30 (CAT)
  - Location: Room 12B - 60 Pax
- 12. The sustainability of the HIV response and funding for communities to achieve the 10-10-10 targets**
  - Time: 15.00 - 16.30 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax
- 13. Living 2024 Pre-Conference Closing Plenary**
  - Time: 17.00 - 18.00 (CAT)
  - Location: Room 13b/Channel 7 - 200 Pax

Living 2024 recorded sessions, can be found on the IAS resource page, available by clicking here: [Living 2024](#)



# LIVING

## 2024

Communities leading; advancing health, dignity and equity

