

# UNAIDS Advisory Group on HIV and Sex Work

The UNAIDS Advisory Group on HIV and Sex Work  
is co-chaired by the Global Network of Sex Work Projects (NSWP) and UNAIDS.

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Dear Bernhard

I am writing to you on behalf of the UNAIDS Advisory Group on HIV and Sex Work. The Advisory Group has been set up to support and advise the UNAIDS family on effective policy, programme, advocacy and capacity-building activities in relation to HIV and sex work.

The Advisory Group writes in regard to the recent article published in the Lancet (Volume 377, June 11, 2011) entitled '*Towards an improved investment approach for an effective response to HIV/AIDS*' which gives yourself as one of the main authors, on behalf of the Investment Framework Study Group.

We would like to raise the following points in relation to the article, which we hope you find pertinent to the debate. We have numbered our comments in order to make it easier for you to refer to them in your response.

1. The Advisory Group appreciates the efforts of this distinguished group of experts to treat in an evidence-based way many challenging questions related to strategy and resource needs for a sustainable and effective global response to HIV. We especially appreciate the explicit attention paid to the inclusion of key populations within the basic programme activities and the need for funded human rights advocacy and other structural factors termed "critical enablers" and recognise that these factors are somewhat context-specific and difficult to cost.
2. We are concerned about the assumption that resources for HIV programmes for sex workers would not be scaled up over the period covered by the model (see Table 2) while most other programme activities are presumed to need to be increased, at least in the first five-year period. We are also concerned that the modelling of "broad and shallow" and "narrow and deep" represented in Table 1 is defined to exclude sex workers from the "narrow and deep" scenario. It would appear that the baseline data used in the assumptions come from the UNGASS data, which UNAIDS acknowledge is flawed, as we know that less than 1 in 5 sex workers have access to services. The assumptions under the conclusions in this paper concern us and we would request that the working group go back and review those assumptions and amend the modelling and costs of the investment framework accordingly. Further, the low level of funding for condom promotion seems insufficient to meet the needs of key populations.
3. While we agree with programmes addressing the clients of sex workers we would be most concerned if funding was diverted from sex worker interventions to support activities focussing on clients.
4. Long experience and rigorous research from many parts of the world has shown that sex workers, especially when they are empowered to work collectively, are among the most effective agents of HIV prevention, care, treatment and support in the community. Nonetheless, the most successful efforts have required sustained funding, not only for direct services, but, as the authors note, for the hard work of changing repressive laws and policies; raising awareness of sex workers' rights and needs

among communities, community leaders and law enforcement authorities; and reducing demand for unsafe sex by clients. Funding is rarely available for work of this scope. It is difficult to imagine how such work can be brought to a scale that would contribute to an effective HIV response without a greater resource commitment than what the authors assume. It would be useful to see exactly how costs were assigned to these activities by the authors.

5. It is an unfortunate omission from the article that one of the major “financiers” mentioned by the authors, the US PEPFAR initiative, has an anti-prostitution policy that not only keeps it from supporting new rights-based programmes for sex workers but has actually resulted in the loss of existing funding in this area. We believe that the authors would do well to note this factor as one of the continuing structural barriers to scaling up programmes for and by sex workers and to acknowledge that the gaps created by this factor need to be addressed by significant new resources.
6. It would be useful to have more detail on what the “critical enabler” component includes and how this element does or does not overlap with programmes to build the capacity of “key populations” though “basic activities.” “Critical enabling,” as we understand the term, including the difficult long-term work of changing legal and policy environments, has been systematically neglected in the global HIV response. It is difficult to understand how resource needs in this area will decline so dramatically in the period covered by the model (Table 2) when changing structural factors is not the work of five years but of decades.
7. The investment framework model has the same reliance on “community mobilisation” to address structural barriers and improve participation and transparency that we have seen in UNAIDS’ descriptions of Treatment 2.0. We think it is important when addressing these ideas to “financiers” and policy-makers to be explicit about exactly what is meant by community mobilisation, what sorts of real-life examples are behind the conceptualisation of it, and how costs are allocated to it. We are aware that not all communities are progressive in their views toward HIV and “key populations”. Communities can be mobilised in varying ways, not all of which lead to universal access and other outcomes. We think the model would be strengthened by explicit and evidence-based treatment of this topic.
8. Because the co-authors of the article include a number of staff members of UNAIDS and its co-sponsor agencies, the article is perceived by many to have some official backing. We would appreciate clarification of the status of this article with respect to UN policy.

We hope you find these points useful and constructive and look forward to receiving your response.

Finally, we would like to make clear that in addition to advising the UNAIDS family, the Advisory Group and its members remain available as a resource to advise other colleagues and groups as necessary.

Yours sincerely,



Neil McCulloch  
Secretariat  
On behalf of the UNAIDS Advisory Group on HIV and Sex Work

cc Rifat Atun  
Michel Kazatchkine  
Members of the UNAIDS Advisory Group on HIV and Sex Work