

REPORT TO: Health & Wellbeing Board
DATE: 20th March 2024
REPORTING OFFICER: Director of Public Health
PORTFOLIO: Health and Wellbeing
SUBJECT: Halton commitment to HIV Fast Track Cities
WARD(S) Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 To ask the Health and Wellbeing Board to support the opportunity to sign both the Paris and Seville declarations on Fast Track Cities and commit Halton to accelerate and scale-up the response to ending new HIV transmissions by 2030.

2.0 **RECOMMENDATION:** That the Board:

- i) Endorses the Fast Track Cities Initiative; and
- ii) Puts forward a key representative to be the nominated 'Key Opinion Lead' for Halton Place.

3.0 **SUPPORTING INFORMATION**

3.1 The Fast Track Cities initiative on HIV was launched globally in 2014. The Paris declaration (see Appendix 1) has been developed and led by the International Association of Providers of Aids Care (IAPAC).

3.2 The Seville declaration is designed to be a supplement to the Paris Declaration (which states that we will put people and specifically under-served communities in the centre of service design).

3.3 Halton's endorsement of the Fast Track Cities initiative will form part of a joint Liverpool City Region (LCR) approach. The city of Liverpool signed up in 2018 and have found that the initiative has helped to drive local plans to improve testing, support, identification and treatment related to HIV, and has bolstered prevention approaches. Liverpool has also found that the benefits associated with the initiative have included a new galvanised approach to a strategic plan, and the ability to attract funding for research and pilots to reach the target of zero new HIV transmissions by 2030.

3.4 The initiative involves aiming for three targets – around making sure people living with HIV (i) know their status, (ii) have access to treatment and (iii) that the treatment is working. This is an exciting opportunity for Halton, as part of LCR, to sign up to commit to achieving the 'triple 95' targets:

- 95%
- 95%
- 95%

With this, Halton can work as a collective, with the other LCR Places, to formulate a series of strategic actions to help LCR be one of the first regions to achieve elimination by 2030.

- 3.5 The experience of the city of Liverpool has been that the Fast Track Cities (FTC) initiative galvanised a new focused partnership approach in that has led to significant change. Prior to FTC, 91% of people knew their HIV status, 98% were successfully in treatment and care, and 96% had undetectable levels of HIV. An estimated 115-120 people were still undiagnosed. Five years later, those statistics had reached 95-99-98, with only 45-50 people estimated to be undiagnosed. This has been significant progress.
- 3.6 HIV prevalence rates have been increasing across LCR. In Halton, the diagnosed HIV prevalence rate for people aged 15-59 years increased by 8.2% between 2021 and 2022. Similar rates of increase have been seen across the other Places. Although the numbers of new HIV diagnoses in Halton are small, there was a substantial increase from two new diagnoses in 2021 to nine new diagnoses in 2022. Of these nine cases, over half were diagnosed at a late stage of infection.
- 3.7 Furthermore, testing rates across certain areas of the region have been declining, most notably amongst women, with the percentage of eligible attendees accepting an HIV test in specialist services declining since 2020. Women have also represented a larger cohort of the above listed late diagnoses.
- 3.8 On the whole, there are a higher number of males seen for care across the region, and more men testing than women. Therefore, targeted work and campaigns are required collectively across the region.
- 3.9 Access to crucial HIV prevention drug PrEP is not equitable across the region either. This picture is mirrored nationally, with the drug largely being accessed by gay and bisexual men and other men who have sex with men (GBMSM). Fast Track Cities would provide the opportunity to action plan and improve access for currently underserved communities, particularly Black and minority ethnic communities and also women. It would also help to improve the rates of identification of PrEP need, to ensure everyone eligible receives the offer of PrEP.

4.0 **POLICY IMPLICATIONS**

- 4.1 An LCR sign up to the FTC approach would allow a regional commitment to re-creating a 'Positive Voices' survey to understand people's attitudes and opinions around HIV to help formulate a clear policy position as well as a baseline figure in our ambition to reduce HIV associated stigma.
- 4.2 The Cheshire and Merseyside Sexual Health and HIV Commissioners network will be the main strategic group to map needs, gaps and develop a relevant regional plan, reporting to Directors of Public Health on a quarterly basis.

5.0 **OTHER/FINANCIAL IMPLICATIONS**

- 5.1 This proposal comes as an additional partnership proposal to improve prevention and testing in relation to HIV.
- 5.2 A joint commitment by the LCR Places would have the scope to see Halton projects and programmes benefit from similar additional funding.
- 5.3 Most sexual health services, HIV prevention and PrEP are funded from the public health core budget.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children & Young People in Halton**

Commissioned services support the Council's priorities for Children and Young People.

6.2 **Employment, Learning & Skills in Halton**

The improving outcomes in this area will have an impact on improving the health of Halton residents who are of working age.

6.3 **A Safer Halton**

Ending new HIV transmissions will contribute to community safety

6.4 **A Healthy Halton**

Commissioned services supports the Council's priorities for a Healthy Halton.

6.5 **Halton's Urban Renewal**

None

7.0 **RISK ANALYSIS**

- 7.1 This report content does not present any obvious risk. Any risks linked to implementation will be identified as they arise and recorded.

8.0 **EQUALITY AND DIVERSITY ISSUES**

- 8.1 This is in line with all equality and diversity issues in Halton and supports a reduction in inequalities.

9.0 **CLIMATE CHANGE IMPLICATIONS**

- 9.1 There are no obvious impacts on climate change.

10 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None

Appendix 1: The seven objectives of the Paris Declaration are set out below.

1. End AIDS and new HIV transmissions as a public health threat in cities by 2030. We commit to rapidly reduce new HIV infections and AIDS-related deaths, including from tuberculosis (TB) and comorbid diseases, including viral hepatitis, putting us on the fast-track to ending AIDS as a public health threat by 2030. We commit to provide sustained access to testing, treatment, and prevention services. We will end stigma and discrimination.
2. Put people at the center of everything we do. We will focus, especially on people who are vulnerable and marginalized. We will respect human rights and leave no one behind. We will act locally and in partnership with our communities to galvanize global support for healthy and resilient societies and for sustainable development.
3. Address the causes of risk, vulnerability and transmission. We will use all means including municipal ordinances and other tools to address factors that make people vulnerable to HIV, and other diseases. We will work closely with communities, service providers, law enforcement and other partners, and with marginalised and vulnerable populations including displaced people, young women, sex workers, people who use drugs, migrants, men who have sex with men, and transgender people to build and foster tolerance.
4. Use our AIDS response for positive social transformation. Our leadership will leverage innovative social transformation to build societies that are equitable, inclusive, responsive, resilient, and sustainable. We will integrate health and social programs to improve the delivery of services including HIV, tuberculosis, and other diseases. We will use advances in science, technology, and communication to drive this agenda.
5. Build and accelerate an appropriate response to local needs. We will develop and promote services that are innovative, safe, accessible, equitable, and free of stigma and discrimination. We will encourage and foster community leadership and engagement to build demand and to deliver services responsive to local needs.
6. Mobilise resources for integrated public health and development. Investing in the AIDS response, together with a strong commitment to public health, is a sound investment in the future of our cities that fosters productivity, shared prosperity and well-being. We will adapt our city plans and resources for a fast-tracked response. We will develop innovative funding and mobilise additional resources and strategies to end AIDS epidemic as a public health threat by 2030.
7. Unite as leaders. We commit to develop an action plan and join with a network of cities to make the Paris Declaration a reality. Working in broad consultation with everyone concerned, we will regularly measure our results and adjust our responses to be faster, smarter, and more effective. We will support other cities and share our experiences, knowledge, and data about what works and what can be improved. We will report annually on our progress.