

Progress towards Universal Access

Peru

Universal access implies that all people should be able to have access to information and services that are:

Equitable – accessible – affordable – comprehensive – sustainable

In 2006, countries worldwide committed to setting ambitious national targets for scaling up towards Universal Access to HIV prevention, treatment, care and support by 2010. The targets focus on what could be achieved if the following obstacles can be addressed:

- **Predictable and sustainable financing**
- **Strengthening human resources and health systems**
- **Access to affordable commodities**
- **Stigma, discrimination, gender and human rights**

Review of National reports in 2008 demonstrated that Universal Access has catalyzed an accelerated and strengthened national HIV response with more results-based planning and a general overall increase in access to services. National political leadership and coordination were found to be critical to scale up. However more emphasis was needed on addressing the obstacles to scale up which would not support reaching universal access but also the achievement of the Millennium Development Goals. Specifically, there is a need to accelerate progress on HIV-prevention efforts, and to better utilise the resources available within civil society and people living with HIV.

Universal access has generated a continuing engagement with national partners to monitor and review progress towards universal access. This has resulted in a number of countries revising their national targets to ensure a sharper focus on areas in need of additional support.

Progress in Peru

The universal access process in Peru has offered a model for other countries in the region. By drawing on the UNGASS indicators during the 2005 reporting process, a sound methodology for the universal access process was devised. A number of key programmatic areas were identified, including prevention with vulnerable groups (men having sex with men, sex workers); treatment with ARV and of opportunistic infections; prevention of mother to child transmission; diagnosis of sexually transmitted infections; education; organizational development for community groups; human rights and monitoring and evaluation. The analysis also provided clear evidence for the national consultation that the required effort was many times greater than what was being done or had been expected for scale-up.

The national consultation process, target setting and inputs into the National Strategic Plan as the basis for Peru's Global Fund Round 6 proposal provides evidence of how the universal access process, national strategic planning and resource mobilization have become closely intertwined and have stimulated greater attention to the needs of vulnerable groups.

Although coverage for these groups was found to be very low, there are clear signs that by 2010 there will be significantly better coverage of services beyond the already relatively high treatment figures.

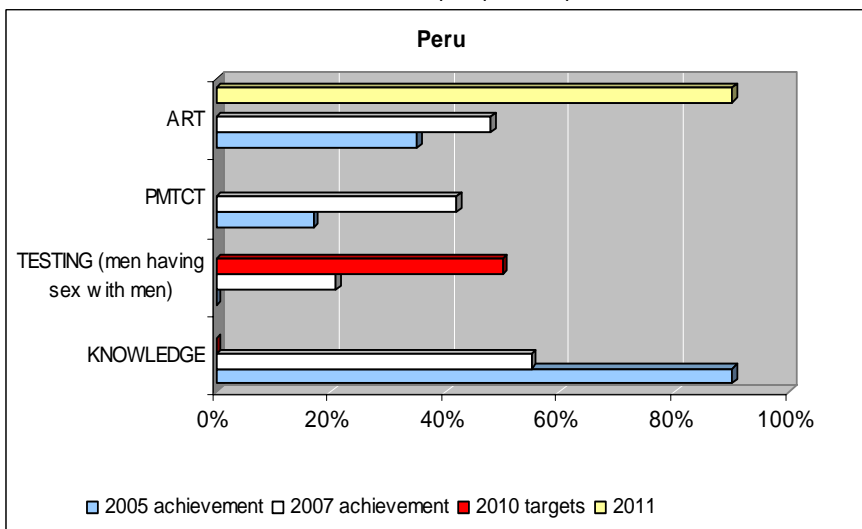


Figure 1. The graph presents a snapshot of progress towards universal access based on 2005 and 2007 reported UNGASS achievements and 2010 reported targets, as per data available.

Please note that ARV and PMTCT targets may be subject to change based on revised numbers in

need of ART.

"(We) commit ourselves to pursuing all necessary efforts to scale up nationally driven, sustainable and comprehensive responses... towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010."

2006 Political Declaration, (UN General Assembly, 15 June 2006)