

STATEMENT FOR WORLD HIV VACCINE AWARENESS DAY, MAY 18:

As we commemorate HIV Vaccine Awareness Day on May 18, 2024, W4GF recognises the crucial role of vaccines as key medical products in the context of global health initiatives. Vaccines play a significant role in preventing the spread of infectious diseases and reducing morbidity and mortality rates worldwide. Ensuring safety and equitable access to vaccines, especially in low- and middle-income countries, is essential for achieving sustainable development goals and ensuring health and gender equity.

Key Statistics Highlighting Vaccine Development Urgency:

- In 2022, 39 million people globally were living with HIV.
- 46% of all new HIV cases were among women and girls.
- In sub-Saharan Africa, adolescent girls and young women accounted for over 77% of new cases among young people aged 15-24
- Contrary to the commitment to end AIDS by 2023, funding for HIV programs in low- and middle-income countries saw a decline of 2.6% to \$20.8 billion, with a notable shortfall in addressing the societal factors fueling the epidemic among women and girls. Highlighting the importance of gender-sensitive approaches, the resolution of the UN Commission on the Status of Women emphasizes increased investment in HIV prevention and treatment. Yet, there remains a glaring absence of commitment to investment in the development of an HIV vaccine.

In this context, some progress has been made in vaccine development for HIV, TB, and Malaria. While no HIV vaccine has been developed yet, promising results have emerged from clinical trials, exemplified by the RV144 trial in Thailand, showing some efficacy in preventing HIV infection. However, the result was at the borderline of statistical significance, leaving residual uncertainty as to the robustness of the findings¹. Progress in understanding the immune response to HIV infection has contributed to refining vaccine development strategies and enhancing vaccine design.

What can we learn from TB and malaria vaccines?

The Bacille Calmette-Guérin (BCG) vaccine remains the only licensed vaccine for TB prevention, providing limited protection, particularly against pulmonary TB in adults. However, promising TB vaccine candidates, including subunit vaccines, live attenuated vaccines, and viral vector vaccines, are advancing through clinical development stages². In 2023, WHO established a TB vaccine accelerator Council to facilitate the development, testing, authorization, and use of new TB vaccines, drawing on lessons learned from the response to the COVID-19 pandemic³.

¹ Pipeline Report 2023 : HIV Vaccines and Passive Immunization: https://www.treatmentactiongroup.org/wp-content/uploads/2023/07/pipeline_HIV_VAX_2023_final.pdf

² Plenary 2 HIV, TB & Malaria Vaccine R&D Update, <https://www.youtube.com/watch?v=OfCtT-RBpQ>

³ Tuberculosis Vaccine Accelerator Council <https://www.who.int/initiatives/tuberculosis-vaccine-accelerator-council>

In the fight against malaria, significant progress has been made in the past two decades, resulting in reduced cases and deaths. However, the continued toll of malaria remains staggering, with over 600,000 people, mostly children under 5, succumbing to the disease each year. Challenges exacerbated by factors such as disruptions from COVID-19, humanitarian crises, and climate change necessitate the support of innovative tools in the fight against malaria. Recognising this need, Gavi, the Global Fund, and UNITAD have committed nearly US\$70 million to pilot the RTS,S malaria vaccine in Ghana, Kenya, and Malawi. Since the start of vaccinations in March 2023, over 4.3 million doses of the vaccine have been administered across these countries, reaching over 1.4 million children with at least one dose and significantly reducing hospitalizations from severe malaria by 30%⁴. As of 2023, both the RTS,S/AS01 and R21/Matrix-M vaccines are recommended by WHO to prevent malaria in children. Wider implementation of malaria vaccines in additional countries will start in 2024⁵.

The success of mRNA-based COVID-19 vaccines has sparked interest in mRNA technology for other diseases. Since 2020, there has been significant progress in mRNA vaccine development, with advancements in formulation, delivery, and manufacturing processes. Despite challenges such as cost and delivery optimization, mRNA technology holds promise for addressing diseases like malaria, TB, and HIV/AIDS⁶. However, equitable access to vaccines remains a pressing issue, particularly for marginalized communities and women, who face unique barriers to healthcare. Additionally, intellectual property rights pose significant challenges to vaccine accessibility and affordability, as evidenced during the COVID-19 pandemic⁷.

Vaccine development for HIV, TB, and malaria presents an opportunity to address health disparities and promote global health equity. Access to these vaccines should not be determined by socioeconomic status, gender or geographic location. It is essential to ensure affordability, safety, and accessibility for all women in all of their diversity. W4GF insists on the urgent need to prioritise on vaccine preparedness, in order to prepare and respond to the inequitable distribution, a prolonged injustice of unequal availability and unmet demand that contributed to vaccine hesitancy and cost millions of lives; as experienced during the COVID-19 pandemic.

One critical aspect often overlooked is the gender-responsive and transformative approach needed to address the unique needs of women and girls in accessing vaccines. Women are disproportionately affected by HIV, TB, and malaria, yet they often face barriers to accessing healthcare services, including vaccines. Gender-transformative actions are crucial to ensuring that women have equal access to life-saving vaccines and can actively participate in decision-making processes regarding their health.

To address these challenges and promote health equity, we must take strategic action:

⁴ Gavi, the Vaccine Alliance and The Global Fund to Fight AIDS, Tuberculosis and Malaria, page 6 https://www.theglobalfund.org/media/13174/partnership_gavi-global-fund_report_en.pdf

⁵ Who recommends R21/Matrix-M vaccine for malaria prevention in updated advice on immunization: <https://www.who.int/news/item/02-10-2023-who-recommends-r21-matrix-m-vaccine-for-malaria-prevention-in-updated-advice-on-immunization#:~:text=The%20R21%20vaccine%20is%20the,have%20high%20public%20health%20impact>

⁶ mRNA vaccines: a new opportunity for malaria, tuberculosis and HIV, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10166207/#:~:text=Indeed%2C%20the%20only%20available%20vaccine,has%20been%20licensed%20to%20date>.

⁷ What the COVID-19 pandemic revealed about intellectual property, <https://www.nature.com/articles/s41587-022-01485-x>

1. Strengthen collaboration between governments, international organisations, academia, the private sector, civil society and women-led organisations to prioritise vaccine development for HIV. Implement the key principles of Patient and Public Involvement and Engagement (PPIE) in research, to ensure women are meaningfully participating in all stages of the processes.
2. Invest in research and development to accelerate the discovery and production of vaccines that are safe, effective, and accessible to women and girls in all of their diversity.
3. Reaffirm our dedication to the HIV UN political declaration to ensuring equitable access to prevention and treatment services for all. Commit to ensuring global accessibility, availability and affordability of safe, effective and quality-assured medicines, including generics, vaccines, diagnostics and other health technologies to prevent, diagnose and treat HIV, its coinfections and comorbidities, by urgently removing all barriers, including those related to regulations, policies and practices that hamper access to health technologies and innovations.
4. Implement gender-transformative responsive policies and programs that prioritise the needs of women and girls in vaccine delivery and healthcare services.
5. Advocate for removing barriers to vaccine access, including intellectual property rights, to ensure equitable distribution and affordability.

Despite HIV vaccine development facing considerable challenges due to factors such as the genetic diversity of the virus, limited investment returns, and the complexity of conducting efficacy trials. Leveraging lessons and infrastructure from COVID-19 vaccine research and delivery could accelerate progress in HIV vaccine development, addressing challenges such as limited commitment from governments and international donors to vaccine development.

As W4GF advocates, let us reaffirm our commitment to ending these epidemics and advancing global health equity by prioritising vaccine access for all, especially the most vulnerable and marginalised women and girls in all of their diversity, in our societies.