

HIV PREVENTION 2030

A Global Access Framework for Country-Led Responses

The 2030 Access Framework introduces a person-centred approach that is conceptualized around four dimensions: understanding the prevention realities and/or needs of people, their motivations and benefits; making prevention services accessible where people need them; providing a choice of effective prevention options and experiencing an enabling environment—the sustainability of which is strengthened multi-sectoral stewardship. These would advance HIV prevention efforts towards targets by 2030.



People
centred



Evidence
driven



Country and
community led



Sustainable
impact

About the 2030 Access Framework

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understanding the prevention realities and/or needs of people, their motivations and benefits

making prevention services accessible where people need them



providing a choice of effective prevention options

experiencing an enabling environment—the sustainability of which is strengthened multi-sectoral stewardship



These would advance HIV prevention efforts towards targets by 2030.

The five Ps for HIV prevention prioritization help countries maximize impact of prevention:



Packages

the right prevention packages—and an adequate method mix to offer choice



Platforms

the right mix of trusted Platforms



Places

with highest high incidence



People

in greatest need of prevention

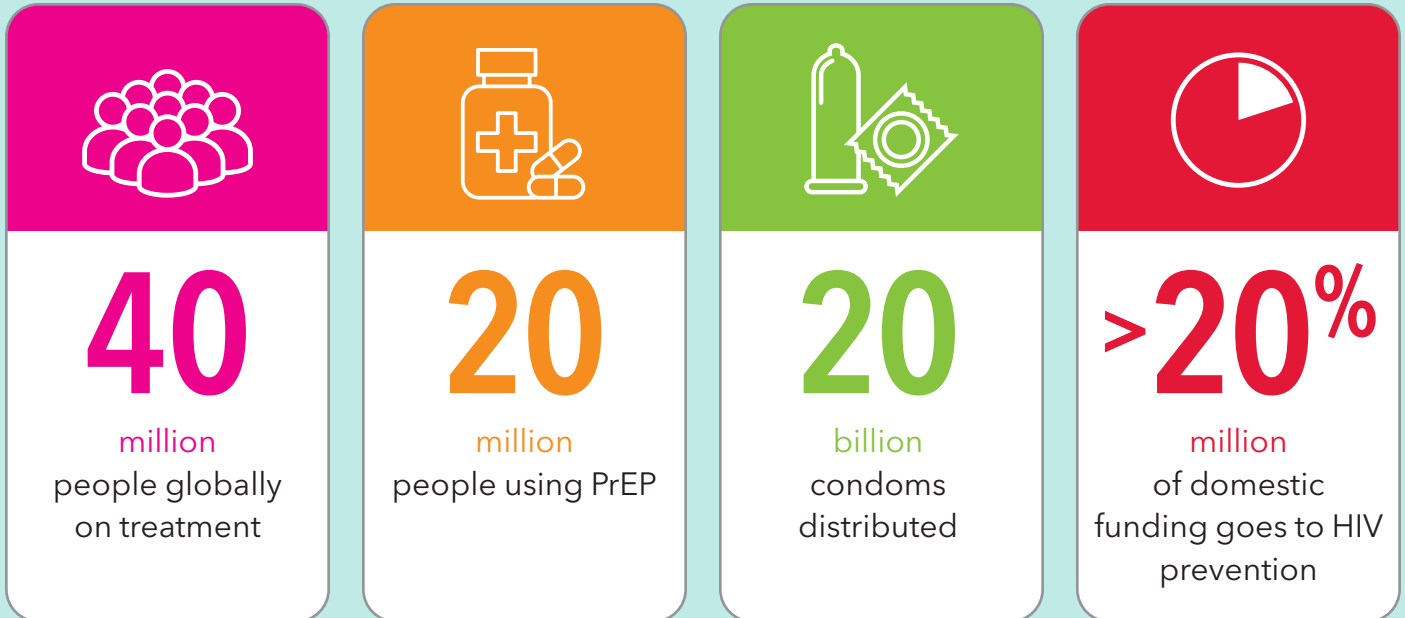


Prices

at the right prices—for prevention options and service delivery for sustainable implementation

The 40+20 prevention push

The framework introduces the 40+20 prevention push to support countries with domestication of the topline prevention targets stipulated in the 2026-2031 Global AIDS Strategy.



To Achieve



90%

of people in need use
prevention options



90%

viral suppression



90%

reduction of new HIV
infection since 2010.

A new era of HIV prevention: country-led and community-led

Countries can now take charge of their prevention responses and build sustainable country prevention systems. Global solidarity and financing for HIV prevention will remain essential, in particular for those with lowest income and most marginalized.



The framework introduces a **granular HIV prevention needs estimation approach** that will empower countries to estimate the number of people needing prevention and the need for key prevention options such as condoms, PrEP and harm reduction.



In 2026, UNAIDS will for the first time **support all countries doing HIV estimates** to quantify these prevention needs.



New long-acting prevention technologies—such as injectable Lenacapavir providing 6 months of protection offers unprecedented opportunities.



Adding these long-acting to **proven prevention options** such as condoms, oral PrEP, expanding HIV treatment and harm reduction, can make the target of a 90% reduction in HIV incidence a reality.





CALL TO ACTION

Country governments will:

Set national and subnational programme, finance and impact **targets** based on granular needs estimates and in accordance with the 2026 UN Political Declaration, the Global AIDS Strategy 2026–2031 and this access framework.

- 1 Develop truly country-led and well-prioritized, sustainable HIV prevention **plans** that evolve prevention responses from fragmented projects to integrated, nationally owned programmes.
- 2 Designate a national **multisectoral leadership entity** for HIV prevention and build its capacity to lead the prevention response.
- 3 **Lead and coordinate** integrated health sector and multisectoral HIV prevention, including actions in government sectors, private sector and communities.
- 4 Ensure adequate **domestic prevention financing**, including integration into social health insurance schemes and multisectoral budgets.
- 5 Develop a country systems approach to prevention **access platforms** with differentiated platforms for different populations (but not separate project approaches).
- 6 Develop and implement a support mechanism for **community systems**, including social contracting of civil society and community-led organizations reaching key and priority populations.
- 7 Lead a prevention push campaign and coordinate people-centred HIV **prevention communications**, including in virtual spaces and promoting prevention-related knowledge, norms and skills;
- 8 Facilitate a rapid regulatory process for introducing **long-acting prevention** products, availability and access, getting the most out of limited resources and catering to people's different preferences and shifting needs.
- 9 Sustain investments in condoms, needles, self-tests and other **self-care products**, applying a 'total market approach' with complementary roles of public, social marketing and private sectors.
- 10 Accelerate the necessary reforms to the legal and **policy environment** to ensure people most affected can access HIV prevention, and adopt law enforcement practices that facilitate, rather than obstruct, access to prevention.





CALL TO ACTION

Funding partners will:



In their own interest, **sustain investment** in HIV prevention in low and middle-income countries, recognizing that a pandemic cannot be ended unless transmission is reduced in all countries.



Support a **phased transition** to sustainability that will sustain access and use of prevention options and thereby achieve impact—instead of abrupt defunding.



Engage **additional funders**, including high and upper middle-income countries and foundations in funding prevention with a systematic focus on lower income countries with high HIV and the most vulnerable populations.



Align all their contributions to sustainable national prevention plans rather than donor-specific projects, support existing country health and community systems and adhere to sustainable country cost guidelines.



Continue supporting **access** to basic prevention options such as condoms, clean needles and oral PrEP;



Ensure **affordability and rapid access** to innovative long-acting prevention, aiming to reduce the time lag of introduction of new products in high and low-income countries to below 12 months.



Reinvest savings from declining HIV commodity prices into prevention programmes and provide support to countries, including through the Global Fund and technical partners.



CALL TO ACTION

Community-led and other civil society organizations will:



Identify gaps and **advocate** for equitable access to all context relevant HIV prevention options for all key and priority populations (including but not limited to women, men and young people in locations with high HIV, sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people and prisoners).



Lead in the development of **trusted access** programmes for key populations, young people, women and men including people living with HIV and work to remove barriers to access.



Strengthen **community systems**, including community-led monitoring and surveillance, to improve the quality of prevention services and of data, progress tracking and reporting.



Hold governments and other actors **accountable** for progress towards prevention targets through constructive advocacy, and further develop structures for feedback, communication and problem solving between community and government systems.



Advocate for **legal and policy reforms**, including the removal of punitive laws, the lowering of obstructive age of access requirements.



Develop and implement interventions to **reduce HIV-related stigma** and discrimination across health, community, justice, workplace, education and humanitarian settings.



CALL TO ACTION

Technical partners will:



Provide global leadership and stimulate **political momentum** for HIV prevention in line with the mandate from the 2026 UN Political Declaration.



Support granular data collection and analysis to develop **prevention needs estimates**, an optimal mix of prevention options and directions for most effectively using international HIV prevention financing.



Engage countries and draw on latest evidence and country experiences to develop **country capacity** in HIV prevention.



Provide **guidance, tools** and technical support to develop programmes; build demand; and use new delivery strategies to achieve sustained access to prevention options.



Work with governments, industry and communities to ensure affordability, licensing and rapid regulatory approval in countries, as well as the inclusion of **new prevention options** as part of UHC.



CALL TO ACTION

Private sector will:



Avail of **private sector access platforms** for HIV prevention including through pharmacies, retail networks, supply chain systems, marketing, collaboration with social enterprises and online market places.



Advance HIV prevention in **virtual spaces** through generative AI platforms and integration of prevention in dating apps and other social media platforms.



Develop and introduce new **innovative prevention products** and work with low and middle-income country governments and international technical and funding partners to ensure equitable access and affordability globally.