Leading for the Future: Placing Women, Children and Adolescents at the Heart of the HIV Response

29 July 2026 · Rio de Janeiro, Brazil

As the world enters the final stretch towards ending AIDS as a public health threat by 2030, leaders gathered at the 26th International AIDS Conference reiterated that reaching that goal will depend not only on scientific innovation, but on political leadership that places women, children and adolescents at the centre of response efforts.

That was the focus of Leading for the Future: Re-centering Women, Children and Adolescents as a Pathway to Sustained HIV Epidemic Control, a high-level ministerial symposium convened by the Global Leaders Network for Women's, Children's and Adolescents' Health (GLN), together with the Government of South Africa, UNAIDS, PMNCH, the Gates Foundation and Humana People to People. Bringing together ministers, global health leaders, civil society, philanthropy and development partners, the symposium explored how countries can sustain progress against HIV by strengthening political commitment, integrating services, investing in communities and accelerating country-led solutions.

Opening the symposium, South Africa's Deputy Minister of Health, Hon. Dr Mathume Joseph "Joe" Phaahla, argued that the future of the HIV response depends on keeping women, children and adolescents at its centre.

"We cannot end this pandemic unless women, children and adolescents are placed at the centre of our policies, our investments and our implementation plans." **— Hon. Dr Mathume Joseph "Joe" Phaahla, Deputy Minister of Health, South Africa**

Despite significant global progress, women and girls continue to shoulder a disproportionate share of new HIV infections, in sub-Saharan Africa more than 3,000 adolescent girls and young women acquire HIV every week, and children still face unacceptable gaps in prevention, testing and treatment. Combined with declining international financing and growing pressure on health systems, these challenges call for renewed political leadership, relentless advocacy and stronger implementation.

That message was echoed by UNAIDS. Representing Executive Director Winnie Byanyima, Deputy Executive Director Angeli Achrekar reminded the room that progress, though extraordinary, remains unequal and fragile, and that the gaps holding it back are not failures

of science but instead failures of “access, investment, policy and power.”

Achrekar made a particular case for adolescent girls and young women, whose risk of HIV is shaped by whether they stay in school, can access comprehensive sexual education, are protected by law from child marriage and violence, and have the economic opportunity and agency to make decisions about their own bodies and futures. While science has advanced, she noted, with the development of long-acting HIV prevention innovations, their impact will ultimately depend on whether women, children and adolescents can access them.

“Innovation without access only deepens inequality. The test of leadership is how we can absolutely ensure options exist for adolescent girls and young women, and also ensure that those options reach those who are at greatest risk.” **— Angeli Achrekar, Deputy Executive Director, UNAIDS**

Country leadership is reshaping the future of HIV financing

While many countries described the pressures created by declining external financing, ministers also highlighted how domestic leadership is strengthening resilience.

Zimbabwe outlined how its long-standing AIDS Levy continues to provide sustainable domestic financing for HIV programmes while supporting implementation of the country's HIV strategy and its commitments to ending AIDS among children.

Spain highlighted the importance of embedding HIV financing within universal health coverage while advocating for debt-for-health mechanisms and equitable access to innovations developed through international research partnerships.

Malawi, Mozambique and Zambia all underscored the importance of governments working in partnership with communities to achieve sustained epidemic control. Malawi attributed its achievement of the 95-95-95 targets to trust in community-led programmes. Mozambique highlighted efforts to formally integrate and remunerate community health workers as part of strengthening the national health system, while Zambia described how it has incorporated community volunteers into government structures and expanded domestic financing for maternal, adolescent and child health following significant reductions in donor funding.

The discussion revealed a common theme: sustainable HIV responses depend on stronger national systems that are financed domestically, integrated within primary health care and delivered alongside communities.

A milestone for local production, and access

The symposium also became the stage for a significant announcement on regional

manufacturing. Dr Thembisile Xulu, Chief Executive Officer of the South African National AIDS Council (SANAC), announced that South Africa had formally submitted its recommended list of local manufacturers to Gilead Sciences to begin the evaluation process for producing generic lenacapavir for the SADC region. The submission marked an important milestone in efforts to strengthen regional manufacturing capacity and improve access to one of the most promising HIV prevention tools developed to date.

Yet she stressed that innovation alone is not enough.

"If we align scientific innovation with regional manufacturing, pooled procurement, sustainable financing and community-centred delivery, then we will transform scientific breakthroughs into lasting public health impact." — **Dr. Thembisile Xulu, Chief Executive Officer, SANAC**

Emily Gibbons of Gilead Sciences welcomed South Africa's submission, noting that community engagement had shaped lenacapavir's development from the outset, including ensuring the inclusion of pregnant women, breastfeeding women and adolescent girls in clinical trials. She reaffirmed the company's support for expanding affordable access across Asia, Latin America and sub-Saharan African countries.

A shared direction

If one theme united the symposium, it was that the future of the HIV response will be built by governments and communities together, and that women, children and adolescents belong at its centre rather than its margins. The science exists, the political declaration is signed, and the examples of what works are multiplying across countries. What remains is the renewed commitment to ensure that innovation reaches everyone, everywhere.