



# 2023 HIV Vaccine Advocacy Academy

**9-12 December 2023**

Livingstone, Zambia

Supported by:

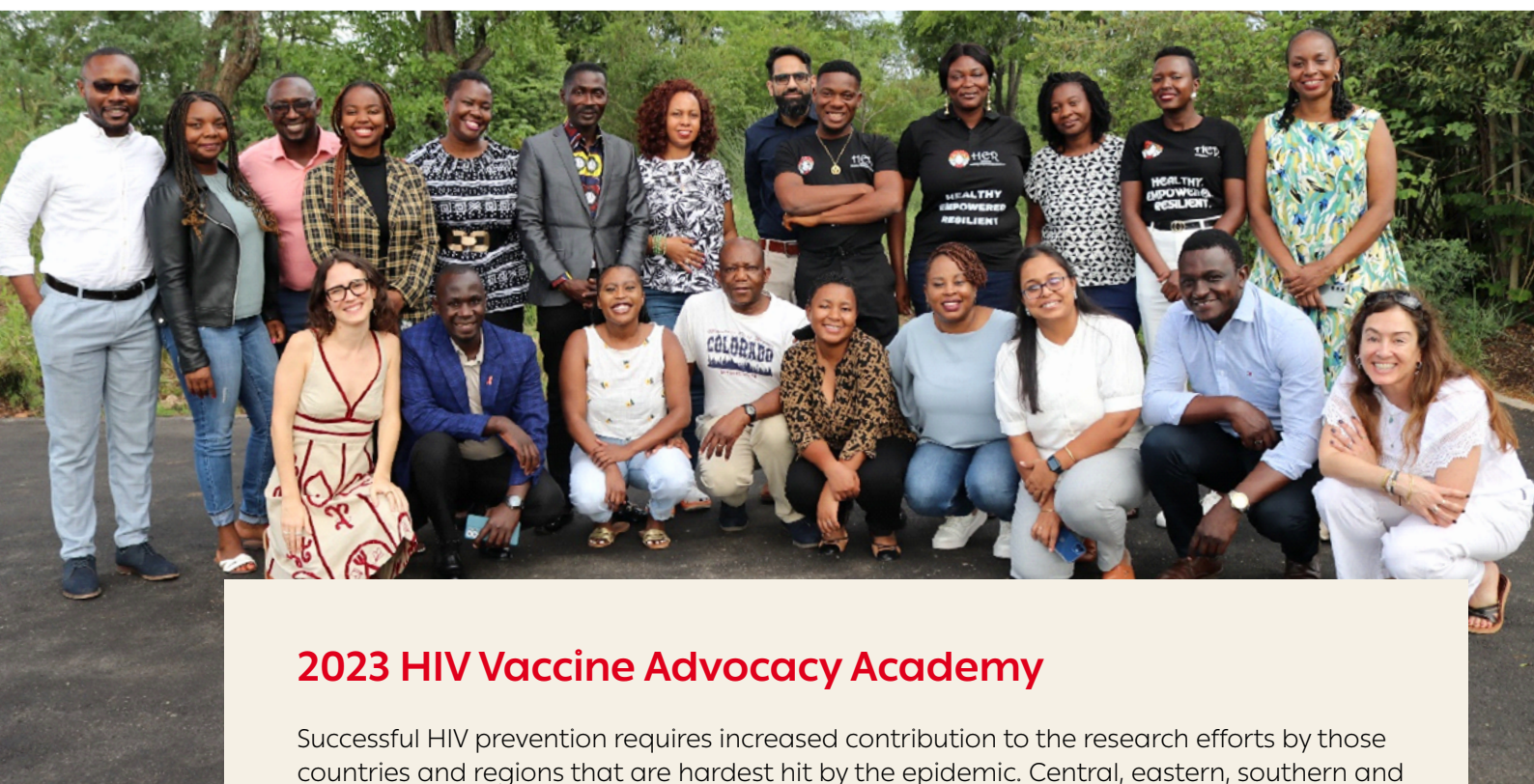
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# Introduction

## IAS Global HIV Vaccine Enterprise

The Global HIV Vaccine Enterprise of IAS – the International AIDS Society – aims to share knowledge, foster collaboration, enable solutions and expand support critical to the development of, and future access to, an HIV vaccine. It works to engage stakeholders and funders to accelerate HIV vaccine development and prepare the field for the future discovery of a safe, effective and globally accessible HIV vaccine. It does so by:

- Strengthening the HIV vaccine pipeline by encouraging diverse approaches in HIV vaccine research and advancing the HIV vaccine portfolio
- Expanding and diversifying engagement and resources by fostering interest in HIV vaccine R&D and broadening research talent within the HIV vaccine field
- Mobilizing knowledge to accelerate product development by driving opportunities to address unanswered scientific questions
- Leveraging synergies with other infectious disease research



## 2023 HIV Vaccine Advocacy Academy

Successful HIV prevention requires increased contribution to the research efforts by those countries and regions that are hardest hit by the epidemic. Central, eastern, southern and western Africa remains most severely affected, with 25 million adults and children living with HIV and AIDS. The need for an Africa-centric vaccine and prevention product design is further substantiated in central, eastern, western and southern Africa, where researchers find the most genetically diverse HIV subtypes in the world. A safe and effective HIV vaccine would make a significant contribution to controlling the epidemic, particularly in young women, one of the most vulnerable groups, who face the greatest disease burden.

In recent years, we have seen the launch of HIV vaccine clinical trials in different African countries. The contribution of multiple sectors in Africa to the development of a safe and effective HIV vaccine cannot be understated.



Engaging with communities is critical to the success of HIV vaccine clinical trials and our understanding of what constitutes community engagement has evolved considerably over the years. Community engagement in biomedical research has been shown to be foundational to ethically and scientifically rigorous clinical trials involving human participants in low- and middle-income country settings. It involves a bi-directional partnership between community and research stakeholders to inform, consult, involve, collaborate and empower each other across the different stages of good-quality research.

To ensure community understanding of the research and lay the groundwork for successful trial conduct and an eventual product roll out, it is essential to develop long-term, focused, well-coordinated, Africa-initiated and Africa-led HIV vaccine R&D advocacy.

To strengthen the capacity of African advocates and peer educators in HIV vaccine R&D advocacy, the IAS launched the **HIV Vaccine Advocacy Academy**, focusing on HIV vaccine research literacy of advocates. The academy complements two ongoing activities of the IAS **Enterprise African Research Network (EARN)** of the Global HIV Vaccine Enterprise: the **Vaccine Enterprise Mentorship Programme** and **HIV Vaccine Science Academy**. These two EARN activities provide capacity building to early- to mid-career scientists and empower them to establish themselves as independent researchers and team leaders in their host institutions in Africa. Through the HIV Vaccine Advocacy Academy, the IAS aims to further support African efforts to accelerate HIV vaccine R&D.



## Goals

The purpose of the HIV Vaccine Advocacy Academy is to support African advocates and peer educators ("fellows") career development in HIV vaccine R&D advocacy.

The academy serves as a space where participants can interact with leading researchers and advocates in the HIV vaccine R&D field. Participants build their literacy in HIV vaccine research and improve their advocacy and engagement skills to advance the field. Specific objectives of the academy include:

- Expand the network of African advocates working in the HIV vaccine research and related research space.
- Increase participants' capacity and HIV vaccine research literacy to understand and disseminate information on current HIV vaccine research strategies and the barriers to successful prevention within their communities.
- Galvanize support for HIV vaccine R&D from their communities, policy makers, the media and other relevant stakeholders.

# Programme

## Sunday, 10 December 2023: Foundational HIV Vaccine Science

This day covered foundational science topics that are crucial for understanding HIV, vaccine development and recent advancements. It also provided a platform for participants to interact, ask questions and gain a deeper understanding of the subject matter.

Time (CAT)	Topic	Speakers
8:00 AM - 8:05 AM	<b>Welcome and overview of the programme</b>	<b>Asli Heitzer</b> , International AIDS Society (IAS)
8:05 AM - 8:30 AM	<b>Introduction to the importance of HIV vaccine advocacy</b>	<b>Glenda Gray</b> , South African Medical Research Council (SAMRC)
8:30 AM - 10:00 AM	<b>Understanding the immune response to viral infection and its challenges</b>	<b>Linda-Gail Bekker</b> , Desmond Tutu Health Foundation
10:00 AM - 10:30 AM	<b>Tea break</b>	
10:30 AM - 12:00 PM	<b>How do vaccines work against viruses?</b>  <b>Q&amp;A</b>	<b>Glenda Gray</b> , SAMRC
12:00 PM - 1:00 PM	<b>Lunch break</b>	
1:00 PM - 2:00 PM	<b>HIV vaccines: Past, present and future</b>	<b>Linda-Gail Bekker</b> , Desmond Tutu Health Foundation
2:00 PM - 4:00 PM	<b>Joint session: All about bNAbs from bench to bedside</b>  Panel discussion Including: <ul style="list-style-type: none"> <li>Tracking the science - review the pipeline</li> <li>Manufacturing and delivery for clinical research</li> <li>Clinical trial design</li> <li>Selecting bNAbs combinations</li> </ul>	<b>Marina Caskey</b> , Rockefeller University  <b>Linda-Gail Bekker</b> , Desmond Tutu Health Foundation  <b>Mark Cotton</b> , Stellenbosch University  <b>Glenda Gray</b> , SAMRC
3:00 PM	<b>Afternoon break</b>	Grab as you need
4:00 PM - 6:00 PM	<b>Networking and Zambesi River cruise</b>	All
7:00 PM - 8:00 PM	<b>Dinner</b>	



# Programme

## Monday, 11 December 2023: Applying advocacy

This day focused on equipping participants with advocacy skills and knowledge specific to HIV vaccine development, especially in the African context. The workshop and group discussions encouraged active participation and skill-building, while the emphasis on partnerships underscored the importance of collaborative efforts in advocacy work. This programme should help empower advocates to make a meaningful impact in advancing HIV vaccine development in their communities and regions.

Time (CAT)	Topic	Speakers
8:00 AM - 8:05 AM	<b>A brief overview of the previous day's topics and objectives for day two</b>	<b>Asli Heitzer</b> , International AIDS Society (IAS)
8:05 AM - 8:30 AM	<b>Advocacy 101: What is the role of advocacy in advancing HIV vaccine R&amp;D?</b>	<b>Ethel Makila</b> , International AIDS Vaccine Initiative (IAVI)
8:30 AM - 10:00 AM	<b>Part 1: Innovative strategies to demystify HIV vaccine and antibody science</b>	<b>Joyeeta Mukherjee</b> , IAVI <b>Saif ul Hadi</b> , IAVI
10:00 AM - 10:30 AM	<b>Tea break</b>	
10:30 AM - 12:00 PM	<b>Part 2: Innovative strategies to demystify HIV vaccine and antibody science</b>	<b>Joyeeta Mukherjee</b> , IAVI <b>Saif ul Hadi</b> , IAVI
12:30 PM - 1:30 PM	<b>Lunch break</b>	
1:30 PM - 1:45 PM	<b>Post-lunch energizer</b>	<b>Julieta Firmat</b> , IAS <b>Asli Heitzer</b> , IAS
1:45 PM - 3:00 PM	<b>Joint session: Building an African Basic Research Centre of Excellence</b>	<b>Masauso Moses Phiri</b> , University of Zambia
3:00 PM - 3:30 PM	<b>Tea break</b>	
3:30 PM - 4:00 PM	<b>Vaccine platforms focusing on mRNA technology</b>	<b>Sheila Belinda</b> , Medical Research Council/ Uganda Virus Research Institute and London School of Hygiene & Tropical Medicine
4:00 PM - 5:30 PM	<b>We want to hear from you: Elevator pitch and role play</b>	All faculty and fellows
5:30 PM - 6:00 PM	<b>Recap and Q&amp;A</b>	All
7:00 PM - 8:30 PM	<b>Dinner</b>	

# Faculty

The workshop faculty comprises internationally renowned scientists who delivered presentations on key topics in the programme and actively networked with fellows throughout the Academy.



**Sheila Balinda**

Medical Research Council/Uganda Virus Research Institute and London School of Hygiene & Tropical Medicine Uganda Research Unit, Uganda



**Linda-Gail Bekker**

Desmond Tutu HIV Centre Institute of Infectious Disease and Molecular Medicine, South Africa



**Glenda Gray**

South African Medical Research Council, South Africa



**Ethel Makila**

International AIDS Vaccine Initiative, Kenya



**Joyeeta Mukherjee**

International AIDS Vaccine Initiative, India



**Saif ul Hadi**

International AIDS Vaccine Initiative, India



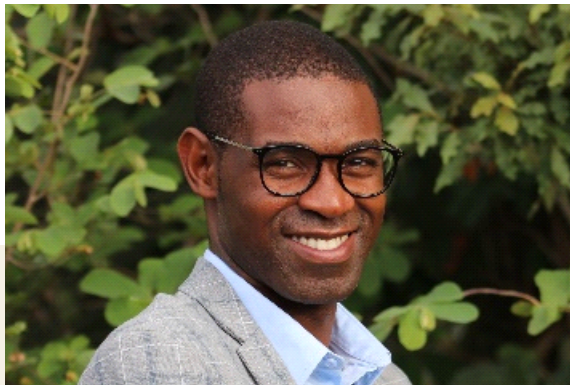
# Guest faculty



**Marina Caskey**  
Rockefeller University, USA



**Mark Cotton**  
Stellenbosch University, South Africa



**Masauso Moses Phiri**  
University of Zambia, Zambia



"I aim to work hard to pave the way for collective and lasting collaborations with NGOs, advocacy and other groups by pushing for a unified front in the pursuit of an effective HIV vaccine."

**Alex Ababio**

Editor at Ghanaian Watch

**Country of work: Ghana**

## What is your motivation to work in the HIV vaccine (advocacy) field?

I am convinced that I would be able to dedicate myself to attainment of the objectives of the academy by leveraging the knowledge and tools I acquire at the 2023 HIV Vaccine Advocacy Academy to make a substantial impact on Ghana's response to HIV.

To start with, I will be making use of the newly acquired insights and skills to strength my role as a health journalist. I believe that my style of reporting will be more defined, informative, accurate and focused on the current state of HIV vaccine research and advocacy.

This will embolden me to continue to critically inform my audience through article writing, radio discussions and community outreach programmes.

Furthermore, I will continue to engage with policy makers, advocating for sustained support and funding for HIV vaccine research. In this regard, I will deploy my influence and expertise to influence decision making at the governmental level, stressing the importance of prioritizing vaccine development.

Finally, I aim to work hard to pave the way for collective and lasting collaborations with NGOs, advocacy and other groups by pushing for a unified front in the pursuit of an effective HIV vaccine.

I believe that knowledge shared with others is likely to stay with me for long. Indeed, it is my conviction that by sharing my knowledge and experiences, I would be well poised to inspire and educate others, establishing a network of informed advocates who are dedicated to promoting and advancing HIV vaccine advocacy in Ghana.

## What is your current role and area of work?

My current role as Editor at Ghanaian Watch has given me the opportunity to be deeply involved in the field of health journalism, especially focusing on HIV awareness. And it has given me the edge to wholeheartedly dedicate myself to raising awareness about HIV and AIDS through my journalistic undertakings. Over time, I have written numerous news articles and feature pieces addressing this critical health issue, clarifying its scope of magnitude and implications.

Moreover, my advocacy goes beyond the written word as I have energetically participated in discussions about HIV on various radio platforms in Kumasi. Consequently, these radio stations have given me a useful platform to reach a wider audience and participate in important dialogues regarding HIV prevention, treatment and support.

I am also proactively involved as a member of Allied Journalists for HIV, participating in outreach initiatives aimed at educating and promoting HIV awareness in Kumasi. Besides that, I have personally visited places, including Suame Magazine, and impoverished areas, where marginalized populations, such as sex workers, reside. These visits have afforded me direct engagement with these communities, enabling me to impart vital information about HIV and AIDS in Ghana.





"We therefore need an effective vaccine and/or cure for HIV if we hope to come true on the promise of an AIDS-free generation".

### **Fon Abongwa Acho**

Service delivery manager, Elizabeth Glaser Pediatric AIDS Foundation

**Country of work: Cameroon**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

I have dedicated almost the entirety of my five-year professional career to achieving epidemic control of HIV. This journey has taken me from my nation's Centre Region, which has the highest number of people living with HIV, and across the South Region, which has the highest HIV prevalence. I have played a key role in rolling out interventions like the introduction of dolutegravir-based ART, HIV self-testing, differentiated service delivery, pre-exposure prophylaxis (PrEP) and the scale up of advanced disease case management. Despite the tremendous progress that universal access to antiretroviral therapy (ART) and innovations in service delivery have ushered in, lifelong ART still leaves multiple challenges unsolved. Issues with PrEP acceptance, scale up and limited adherence also limit its impact as an effective prevention strategy at the population level. After countless discussions with people affected by HIV, a burning concern they continually raise persists: "When are we going to find a cure or vaccine?"

This unsolved puzzle urged me to seek to build my skills in other HIV control interventions. This led me to participate in the IAS Research-for-Cure Academy in February 2022, which was a most exciting experience. I learnt in leaps and bounds about various HIV cure strategies and networked with similarly motivated young people.

This motivated me to attend a lecture on World Immunization Day 2022 by Professor Tomas Hanke on the chequered pathway to HIV vaccine development. He elaborated on the vaccine/cure strategy his team is working on, which attempts to focus killer T-cells on the functionally conserved regions of HIV-1 proteins. A phrase he used stuck with me: "We are not likely to treat ourselves out of the epidemic." We therefore need an effective vaccine and/or cure for HIV if we hope to come true on the promise of an AIDS-free generation.

We built on lessons learnt from these experiences and worked in collaboration with other engaged peers (IAS Research for Cure, advocacy alumni) and HIV research leaders in Cameroon, and led by a Cameroonian cure advocate, we founded the Cameroon HIV Cure Research Academy. The academy aims to stimulate HIV cure research in Cameroon through promoting collaboration, sharing resources and garnering political will and stakeholder engagement. Animated by the same aspirations of contributing to the vaccine and cure field, I applied for and obtained admission to the MSc clinical trials programme offered by the London School of Hygiene & Tropical Medicine by distance learning. This programme began in November 2023 and through it, I intend to build my skills in advancing HIV vaccine/cure trials and exploring innovative trial designs. By building my knowledge and skill base in this domain, I hope to be able to carry the baton of HIV eradication activities that have been pioneered by tireless researchers before me and my generation.

Through the HIV Vaccine Advocacy Academy, I wish to gain competency in the latest developments in vaccine research and advocacy. I will benefit from training on how to engage key stakeholders and improve my communication skills. I also count on forging new friendships with peers and leaders in the field of vaccine research which could facilitate future collaboration. Finally, I hope to gain transferable skills that I can bring back to my organization (the Elizabeth Glaser Pediatric AIDS Foundation, EGPAF) and community (the Cameroon HIV Cure Research Academy) that could complement and foster their goals of accelerating HIV control and future eradication.

## **What is your current role and area of work?**

I serve at the EGPAF as a service delivery manager. I directly support four high HIV-prevalence health districts in the South Region of Cameroon. I also serve as the regional Technical Advisor for Advanced HIV Disease. Finally, I am strongly involved in the research department and have led research projects on HIV self-test roll out, management of high viral load clients, scale up of TB preventive treatment and low-level viraemia.

"We need an HIV vaccine because not all community members can benefit from existing interventions, such as PrEP, due to the stigma and stereotypes that exist in our society."



### **Okoli Godfrey Chidera**

Advocate and secretary, Association of Positive Youths Living with HIV in Nigeria

**Country of work: Nigeria**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

I am a young gay boy living with HIV in a country where LGBTIQ people are discriminated against and HIV prevalence is high. This community is mostly left out at all levels of HIV interventions amidst stigma. We need an HIV vaccine!

I have witnessed and seen how devastating the impact of HIV is to me and my peers. This has triggered my motivation to become an HIV vaccine advocate and join HIV vaccine advocacy research. This will give me a platform to learn more and understand what is happening in the vaccine research arena and raise more voices to demand and accelerate the need for an HIV vaccine in my country and Africa as a whole where the HIV prevalence and burden is heavily felt. I am highly interested in research. In fact, I am currently writing a research paper in my school department titled "Exploring the linkage between genetics and diseases", and I am trying to understand the genetic factors that influence susceptibility to HIV, which can help researchers identify potential targets for vaccine. Therefore, being selected for the HIV Vaccine Advocacy Academy equips me with more knowledge and skills to advocate and be part of HIV vaccine biomedical intervention, which holds immense potential for ending the epidemic. We need an HIV vaccine because not all community members can benefit from existing interventions, such as PrEP, due to stigma and stereotypes that exist in our society.

I believe that this academy will give me the required capacity to engage with relevant stakeholders, policy makers, cure experts and professional researchers in a friendly setting. It will also enhance my networking opportunity to interact with other scientists and researchers in the field, and deepen my understanding of the science of HIV, the latent reservoirs and different approaches to making the HIV vaccine. It will also bring together passionate advocates from different cultures and backgrounds and, together, we can amplify our voices.

## **What is your current role and area of work?**

Currently, I am a final year student at Chukwuemeka Odumegwu Ojukwu University in the Department of Biochemistry. I was diagnosed with HIV as a young gay boy and faced stigma and discrimination in my country, Nigeria, where being LGBTIQ is criminalized – I felt compelled to support other young people failing to access HIV and sexual and reproductive health (SRH) services because of the harsh law. Since then, I have devoted myself to making a difference in the lives of young people and reducing new HIV acquisitions among my LGBTIQ community through awareness creation.

My role as a state secretary for the Association of Positive Youths Living with HIV/AIDS in Nigeria includes awareness creation of HIV prevention services, such as safer sex practices, PrEP and post-exposure prophylaxis (PEP). These include new biomedical tools, such as the injectable, and promoting access and referrals to HIV services, such as testing, counselling and treatment adherence. My sole job and goal is to ensure that all young people are well informed, empowered and capable of voicing their health needs. I have been conducting community outreach among the LGBTIQ community to do follow up and provide peer support and HIV treatment literacy because the majority live in denial.

My other role entails advocacy at community, national and global level where I advocate for inclusive policies and programmes for the marginalized communities I serve. I also participate in the community scorecard at health-facility level to identify HIV service delivery and access gaps for improvement. At present, I serve as an advocate for the "Healthy, Empowered and Resilient (HER) Initiative", which accelerates demand for an inclusive HIV cure in Africa and the global community.



"I'm driven by a strong desire to have a significant effect in the response to HIV and AIDS."

### Osadebamwen Eghaghe

Program Manager, Equal Health and Rights Access Advocacy Initiative

**Country of work: Nigeria**



## What is your motivation to work in the HIV vaccine (advocacy) field?

I'm excited to learn more about the 2023 HIV Vaccine Advocacy Academy, and I'm driven by a strong desire to have a significant effect on the response to HIV and AIDS. Here are a few factors that motivate my excitement to take part in this event:

Being able to participate in a gathering that discusses and supports developments in HIV vaccine research is highly encouraging. I'm interested in learning about the most recent innovations, techniques and studies since I think they're important milestones in the search for a potent HIV vaccine.

Millions of people are affected by the worldwide health issue of HIV and AIDS. My motivation stems from the possibility of helping provide factual information, increase awareness and foster comprehension of HIV prevention methods. By supporting vaccines, we can work to reduce the prevalence and impact of this disease on communities around the world.

Participating in the HIV Vaccine Advocacy Academy provides an invaluable opportunity to improve my education and advocacy skills. I am excited to learn effective strategies for communicating and engaging with diverse audiences, from policy makers to the general public. This knowledge will enable me to effectively lead change and advance vaccine research.

I look forward to connecting with like-minded people, researchers, activists and experts in the field of HIV and AIDS. Collaboration and shared experiences can significantly strengthen advocacy efforts, which in turn can contribute to a stronger collective push for progress in HIV vaccine research.

Engaging with impacted communities is an important aspect of my motivation. I look forward to understanding their unique perspectives, challenges and needs related to HIV and AIDS prevention and treatment. This deeper understanding will help me tailor advocacy strategies to effectively address these specific concerns.

Participation in the academy is an opportunity for personal growth and development. I am excited about the opportunity to expand my knowledge, learn new skills and refine my understanding of HIV and AIDS advocacy. Not only has this benefitted me professionally, but it has also allowed me to be a more effective advocate in my community.

## What is your current role and area of work?

In my current role as a programme manager in the field of HIV, I oversee the strategic planning, implementation and evaluation of initiatives aimed at preventing and managing HIV and AIDS. My primary responsibilities include coordinating with multidisciplinary teams, setting programme goals, developing work plans and allocating resources efficiently to ensure the successful execution of projects.

I work closely with healthcare professionals, government agencies, NGOs and community organizations to design and implement comprehensive HIV prevention and treatment programmes. This involves developing educational campaigns, promoting testing and early diagnosis, advocating for access to antiretroviral therapy, and addressing stigma and discrimination associated with HIV.

Additionally, I monitor programme performance, track key performance indicators, and assess the impact of interventions to make data-driven decisions and continuously improve programme effectiveness. I also engage in stakeholder consultations, forge partnerships and seek funding opportunities to sustain and expand programme initiatives.

"I believe that advocating for HIV vaccine research is not only a scientific endeavour, but also a humanitarian mission with the power to save countless lives and alleviate the suffering caused by this epidemic."



### Rogers Kimbugwe

Executive Director, Smart Children Africa

**Country of work: Uganda**

## What is your motivation to work in the HIV vaccine (advocacy) field?

I have a strong motivation to attend the 2023 HIV Vaccine Advocacy Academy. My commitment to this cause is deeply rooted in both personal and professional experiences that have driven me to actively engage in advocacy efforts for HIV vaccine research.

**Personal connection:** My motivation to attend the academy is deeply personal. I have witnessed the devastating impact of HIV and AIDS on individuals and communities, including friends and loved ones. Their stories and struggles have ignited a strong desire within me to contribute to the response to HIV and AIDS and work towards a future where no one has to suffer with this disease.

**Passion for public health:** I am passionate about public health and the profound potential of an HIV vaccine to transform the landscape of HIV prevention and treatment. I believe that advocating for HIV vaccine research is not only a scientific endeavour, but also a humanitarian mission with the power to save countless lives and alleviate the suffering caused by this epidemic.

**Advocacy experience:** Over the years, I have actively engaged in advocacy efforts related to HIV and AIDS awareness and research. I have collaborated with local organizations, participated in fundraising campaigns, and volunteered at HIV testing and counselling centres. My previous advocacy experience has fuelled my motivation to further enhance my skills and knowledge in advocating for HIV vaccine research.

**Network and collaboration:** Attending the HIV Vaccine Advocacy Academy provides me with a unique opportunity to connect with experts, researchers and fellow advocates in the field. I believe that collaboration and knowledge sharing are essential in driving progress, and I am eager to build meaningful relationships with individuals who share my passion for this cause.

**Empowerment:** I see the academy as an empowering experience. By gaining a deeper understanding of effective advocacy strategies, public health policies and the latest advancements in HIV vaccine research, I hope to become a more effective advocate and make a more significant impact in my community and beyond.

## What is your current role and area of work?

My role is to oversee all organization project implementation in all fields of research, HIV prevention mechanism, education, water environment and shelter, and economic development.





"I would like to contribute my knowledge and experience to conceptualizing new and innovative ways in which interventions can be employed to bring primary healthcare services to young people."

**Palesa Grace Likoti**

HIV and AIDS peer educator and HIV and AIDS mentor

**Country of work: Lesotho**

## What is your motivation to work in the HIV vaccine (advocacy) field?

I am completing a PhD in public health medicine at the University of KwaZulu-Natal, South Africa, with a focus on HIV in adolescents in Lesotho. As a female researcher, I believe that more interventions targeted at adolescents, particularly females in central, eastern, southern and western Africa, must be developed. It is a fact that the COVID-19 pandemic has set back some efforts targeted at young people living with HIV in this region, especially those in rural areas.

My passion for the HIV Vaccine Advocacy Academy resonates from my interest in HIV interventions aimed at young people to initiate antiretroviral drugs. I strongly believe that these two go hand in hand. We need to understand what interventions to implement for HIV vaccines to be accepted. I would like to contribute my knowledge and experience to conceptualizing new and innovative ways in which interventions can be employed to bring primary healthcare services to young people.

## What is your current role and area of work?

To be a peer educator is to:

- Have knowledge about drug terminologies and classification and the social, psychological and physiological impact of substance use
- Have information about the key health issues pertaining to alcohol, drug and substance use
- Know the association between mental illness and drug abuse
- Be aware of key behavioural interventions that can minimize harm and reduce vulnerability to HIV and STI acquisition
- Reinforce existing knowledge, positive attitudes, values, healthy skills and behaviour
- Educate people as a means to prevent or reduce myths, misinformation, negative attitudes and behaviour that increases vulnerability
- Provide comprehensive, relevant and updated information, knowledge and skills to others to improve informed decision making on a range of issues facing young people, especially during their formative years



"An HIV vaccine is likely to have the largest epidemiological impact when targeted at groups most vulnerable to acquisition, I want to be a part of this great discussion that will probably shape roll out of the so much needed vaccine."

**Kenneth Magoko**

Program Officer, LVCT Health

**Country of work: Kenya**

## What is your motivation to work in the HIV vaccine (advocacy) field?

Having worked in the HIV field for over 12 years and also as a person living with HIV, I find this an eye opener and a great opportunity to learn about the HIV vaccine. This comes with the great strides that have been achieved in reducing HIV new acquisitions.

A successful HIV vaccine is likely to have characteristics that make estimating demand especially challenging. From a public health perspective, an HIV vaccine is likely to have the largest epidemiological impact when targeted at groups most vulnerable to acquisition. I want to be a part of this great discussion that will probably shape roll out of the so much needed vaccine.

I feel it is, therefore, critical that a renewed effort be made to develop and implement models for HIV vaccine demand that capture the key drivers of expected demand, are based on the latest and best scientific knowledge, and are flexible and can be updated periodically as the vaccine field advances.

## What is your current role and area of work?

I am currently serving as a field/prevention officer and as the SITE team lead with LVCT Health supporting young adolescents and key population programming in Kiambu County, where I have a cohort of over 4,500 people. I am a NASCOP-certified trainer in key population programming, targeting female sex workers, men who have sex with men, and healthcare providers. I effectively coordinate prevention, Continuous Quality Improvement (CQI) and gender-based violence programme activities.

I effectively coordinate young key population programming. This includes the HIV prevention programme and gender-based violence programme and response, as well as linkages, that are implemented in Nairobi County and its environs with a key focus on targeting young people to improve their knowledge, attitude and practices related to HIV and AIDS.



"To control and ultimately end HIV as a threat to public health, we need a powerful array of HIV prevention tools that are widely accessible to all who would benefit from them."

#### **Bernard Mbwele**

Executive Director and lecturer, Viji Tanzania  
Clinical researcher and epidemiologist,  
University of Dar es Salaam

**Country of work: Kenya**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

The World Health Organization says that HIV remains a major global public health issue, having claimed 40.4 million [32.9-51.3 million] lives so far, with ongoing transmission in all countries and some countries reporting trends in new acquisitions although they were previously on the decline.

There is currently no vaccine available that will prevent HIV. Funding organizations are investing in multiple approaches to prevent HIV, including a safe and effective preventive HIV vaccine. There is research aiming to deliver additional HIV prevention options that are safe, effective and desirable to diverse populations and scalable worldwide to help end the pandemic.

Today, more people living with HIV than ever before have access to life-saving treatment with HIV medicines (antiretroviral therapy or ART). When people living with HIV take HIV medicine as prescribed and get and keep an undetectable viral load, they can live long and healthy lives and will not transmit HIV through sex. In addition, people who are HIV negative and vulnerable to acquiring HIV can take PrEP. In 2022, 39 million people were living with HIV, up from 31.5 million in 2010, the result of continuing new acquisitions and people living longer with HIV. To control and ultimately end the HIV pandemic, we need a powerful array of HIV prevention tools that are widely accessible to all who would benefit from them.

Vaccines historically have been the most effective means to prevent and even eradicate infectious diseases. They safely and cost effectively prevent illness, disability and death. Like smallpox and polio vaccines, a preventive HIV vaccine could help save millions of lives. The long-term goal is to offer a safe and effective vaccine that protects people worldwide from acquiring HIV.

While COVID-19 was quickly controlled by vaccines, it is important to consider the need for an HIV vaccine that will protect the majority of people in low- and middle-income countries. It could still have a major impact on rates of transmission. I clearly see that some partially effective vaccine could decrease the number of people who acquire HIV, further reducing the number of people who can transmit HIV. By substantially reducing the number of new acquisitions, we can stop the epidemic.

## **What is your current role and area of work?**

I am the Executive Director of Viji Tanzania, responsible for programme development and have oversight of clinical and administrative procedures. I am also a clinical researcher at the University of Dar es Salaam – Mbeya College of Health and Allied Sciences (UDSM-MCHAS).



"I am driven by the fact that information is power, and lack of information hinders those who need a product from using it or even accessing it."



### **Anna Miti**

Coordinator, Humanitarian Information Facilitation Centre

**Country of work: Zimbabwe**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

I am motivated by the goal to enhance my work on HIV research communication. I have worked for some time now with adolescent girls and young women, advocating for oral PrEP and the dapivirine ring as choices in HIV prevention. Recently, I have also started advocacy on access to CAB-LA. In my work, I know choice is key, even though all these products have shortcomings. For example, oral PrEP is good for people who can adhere well, but not so much for those who are unable to do so. A vaccine is needed and will go a long way to ensuring an HIV-free generation.

I am driven by the fact that information is power, and lack of information hinders those who need a product from using it or even accessing it. Thus, I believe that since my work is focused on sharing information with media and communities at large, learning about HIV vaccine research is good for the community. In addition, I am aware of an African-led vaccine research initiative, which will be happening soon with sites in Zimbabwe. As an advocate, I need to be equipped with information so I can support my community better.

## **What is your current role and area of work?**

I coordinate and facilitate a health journalists' capacitation programme known as the Media Science Café. With funding from AVAC and the Rockefeller Foundation, we conduct regular trainings and workshops on biomedical HIV research so that journalists can better understand and therefore report on HIV research. I conduct HIV cure research reporting training for journalists and media at large.

I also work in advocacy for HIV science under different projects, such as the independent end user engagement consultancy that I do, which involves engaging communities to understand HIV science better. This work involved organizing community dialogues to discuss HIV research so that when products become available, the community already has information about the products. This goes a long way in preventing hesitancy towards a product due to lack of information.



"There is a need to create an environment that enables further research and translation of research study results into policy."

**Cleopatra Mpasu**

Programs Officer,  
Pangaea Zimbabwe AIDS Trust

**Country: Zimbabwe**

## What is your motivation to work in the HIV vaccine (advocacy) field?

My experience as an advocate for HIV prevention and sexual and reproductive health, along with my passion for ensuring that accessible HIV prevention options are available to young people, assures me that this is an opportunity I have been waiting for.

From evaluating initiatives to effectively implementing programmes and communicating with a variety of community groups, my background has prepared me to excel in HIV prevention biomedical research and advocacy. I have acquired expertise in planning and implementing programmes to drive participant involvement in health and HIV prevention initiatives.

As part of the HIV Vaccine Advocacy Academy, I bring a proactive approach, great work ethic and determination to perform the best work possible. I am especially adept at adopting and maintaining relevant standard operational procedures for HIV response interventions. I have a passion for involving and informing communities about sexual and reproductive health, particularly HIV prevention, and providing a high level of coordination with relevant stakeholders.

With my training in counselling psychology, coupled with experience in HIV prevention advocacy and my dedication to providing insightful guidance and support to optimize the public's overall health and wellness, I believe I can benefit from the academy.

## What is your current role and area of work?

I currently work as the Site Study Coordinator for the fHI360-funded project called CATALYST-MOSAIC Study, a PrEP-linked project studying the use of the LA-CAB, oral PrEP and the vaginal ring. At TASO, my roles include:

- Participating in study-related training.
- Participating in development and review of study materials or research materials in requirement with the requirements of the approved protocols
- Ensuring timely recruitment and accrual of study participants at the site
- Being responsible for identifying social harms and protocol deviations or violations and reporting them through appropriate channels
- Ensuring that study participants sign the consent forms and that the forms are appropriately stored in a safe and private place
- Coordinating study progress meetings with country team staff as needed
- Monitoring confidentiality of study participants and ensuring that other ethical principles are adhered to by research and other service delivery teams
- Ensuring that necessary study materials are always available

"The academy expands my knowledge of vaccines and the unique opportunity they present towards achieving HIV epidemic control"

**Lilian Benjamin Mwakyosi**

Executive Director, DARE

**Country of work:**

**United Republic of Tanzania**



## What is your motivation to work in the HIV vaccine (advocacy) field?

My passion for community health and disease control emerged during my junior years at medical school when I secured a volunteering opportunity as a freelance counsellor sharing information, counselling and referral services to anonymous callers at the National Health (HIV and AIDS) Helpline Center. Through this experience, I was able to identify community needs, challenges, vulnerabilities and existing inequities that increase HIV vulnerability of different groups, including young women. It also helped me appreciate the need to prioritize prevention as one of the most cost-effective measures against the HIV epidemic in the spirit of "prevention is better than cure". Understanding how powerful vaccines are in disease control, I couldn't help but gain interest in attending this year's HIV Vaccine Advocacy Academy.

The academy expands my knowledge of vaccines and the unique opportunity they present towards achieving HIV epidemic control. This serves as an opportunity to pick up lessons that can be introduced in my country to promote not only community literacy, but also relevant research that would advance efforts towards achieving both preventive and curative HIV vaccines in Tanzania and across the globe. COVID-19 exposed the existing health system challenges around diagnosis, surveillance, treatment, care and support not only for HIV, but also for other diseases. The disruptions were massive and it's evident that our country's health systems weren't equipped to handle health emergencies from prevention and control and finding the right cures for COVID-19 amid other chronic illnesses.

During this time, we not only witnessed how vaccines could work in controlling mass acquisitions, but also observed a surge in vaccine-related misinformation. This bothered me, which created the urge to want to learn further how vaccine research has advanced and therefore use this scientifically proven information to support my peers and communities to gain correct information on vaccines to support better outcomes for their health. Beyond HIV, I believe this opportunity will open opportunities towards strengthening research implementation in the organization I lead and the community networks I affiliate with.

## What is your current role and area of work?

I currently serve as the Executive Director for DARE, a young women-led NGO based in Dar es Salaam. It is focused on promoting community engagement and ownership in designing data-based solutions to address HIV and SRH issues affecting communities, especially adolescent girls and young women, young people and women. My primary role is to drive the organization's strategic planning and operations towards achieving our goal and mission. I lead research and programmes, supporting data-driven HIV advocacy programmes for increased access to HIV services for adolescent girls and young women-focused new prevention technologies, biomedical research advancements and integration of HIV and SRH services for adolescents and young people. I also play a key role in disseminating simplified updates on biomedical HIV research and translate this crucial information to decision makers, contributing to policy reform and human-centred approaches to benefit Tanzania's HIV response.





"My participation in the academy will equip me with additional skills, strategies and innovations to improve our stakeholders' engagement in clinical trials."

**Lorraine Mwanza**

Community Advisory Board member, Centre for Family Health Institution in Zambia

**Country of work: Zambia**

## What is your motivation to work in the HIV vaccine (advocacy) field?

I want to attend the academy because I can gain more knowledge on how other participants have been working with the community in their countries. I also want to learn about different approaches of other community workers when disseminating messages to communities, especially those coming from backgrounds with little education and knowledge. In our work in communities, I discovered that I have to be very careful when communicating messages to people who can't read and write. I know that when I come back from the academy, I will be knowledgeable enough to communicate effectively to different audiences and what methods to use to communicate to these audiences.

## What is your current role and area of work?

I am actively involved in community advocacy through the work I do with the media, the Ministry of Health, and community and research institutions. In the past 10 years, I have worked closely with the journalists whom we mentored. With the help of Ministry of Health experts, we explain the research findings to the journalists in layman's terms. This has helped them write and report on science with less difficulty. I am glad to say that the Ministry of Health, with the research institutions here in Zambia, are grateful that the network of science journalists has been mobilized through our journalist trainings and dialogues with editors and other technical skill builders.

I also sit on the Community Advisory Board (CAB) for the Centre for Family Health Research in Zambia, Lusaka research site. This provides me with an opportunity to influence stakeholders' engagement in clinical trials. Working with other CAB members, we have changed the way community engagement is conducted during clinical trials in the centre. We ensure that community stakeholder engagement is prioritized before, during and after clinical trials and that there is two-way communication between the research site and community stakeholders.

My participation in the academy will equip me with additional skills, strategies and innovations to improve our stakeholder engagement in clinical trials. I am aware that this event brings to the table a vast experience in stakeholder engagement in clinical trials, which will be a benefit to my work here in Zambia.

"I am a local lead for an African-led collaboration of creative engagement practitioners, community groups, experts and policy makers to promote dialogue on vaccines, vaccine research and vaccine development."



### **Rodrick Sambakunsi**

Public Engagement Manager, Malawi  
Liverpool Wellcome Trust

**Country of work: Malawi**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

I am a science communication and public engagement practitioner, working for the Malawi Liverpool Wellcome Trust, which conducts research to benefit health.

Working in a health research environment in this position requires skills and expertise to ensure that the research is happening ethically and that all human subjects are protected and engaged appropriately if they are to make informed decisions about their involvement in health research and adopt new discoveries.

Malawi is one of the countries that has been hugely impacted by HIV and AIDS. Therefore, getting enrolled in this programme gives me and my institution an invaluable opportunity to enhance our expertise in vaccine engagement, a core component of health service delivery.

As someone who has championed vaccine engagement in Malawi, I feel I have skills I would share with other participants in this programme.

## **What is your current role and area of work?**

I am a local lead for an African-led collaboration of creative engagement practitioners, community groups, experts and policy makers to promote dialogue on vaccines, vaccine research and vaccine development. The project is called "One for All, All for One", which uses graphic-based resources (comics, animation and radio plays) to mitigate vaccine hesitancy and enhance trust in vaccines and participation in vaccine research.



"I believe that if we could have a vaccine given to children born to mothers living with HIV, in addition to existing interventions, we could prevent more infants from acquiring HIV."

### **Bertha Sato**

HIV Prevention and Management Officer,  
National AIDS Commission

**Country of work: Malawi**

## **What is your motivation to work in the HIV vaccine (advocacy) field?**

My interest in HIV vaccine activities stems from my experience working with people living with HIV, especially children and young people and key populations, such as sex workers, trans people and men who have sex with men. My experience with young people living with HIV has exposed me to the struggles they face to access, take up and adhere to HIV treatment. These struggles usually lead to poor outcomes, and hence increasing morbidity and mortality due to AIDS in this population. It is heartbreaking to see young people struggle in that way.

My passion has always been that while we are managing these children, we should ensure that we reduce or eliminate acquisitions among children to save more children from these struggles. However, while current interventions, such as vertical transmission, have helped greatly to reduce such acquisitions, gaps exist. In Malawi, for example, over 60% of vertical transmission happens during the breastfeeding period. I believe that if we could have a vaccine given to children born to mothers living with HIV, in addition to existing interventions, we could prevent more infants from acquiring HIV.

On the other hand, key populations are vulnerable to acquiring HIV due to, among other reasons, legal and structural barriers. Malawi has made efforts to scale up and optimize HIV prevention service delivery to these populations, but access and uptake of these services remain a challenge and HIV continues to be transmitted in these populations. I feel that the HIV vaccine would cover such gaps and curb further transmission. I also believe that the vaccine would work better for these populations in the face of the several barriers and issues they face as, usually, vaccines are effective for comparatively longer periods than most disease prevention methods.

My wish is, therefore, to join the advocacy, using my position as a coordinator of the national response to HIV and AIDS in Malawi to influence advocacy for an HIV vaccine in the country and beyond. However, for me to effectively join the advocacy, I need to be equipped with the right knowledge and skills: hence my desire to participate in the HIV Vaccine Advocacy Academy.

## **What is your current role and area of work?**

As an HIV Prevention and Management Officer, my role involves developing and reviewing policies for HIV and AIDS programmes in Malawi. This involves taking the lead for programme areas under my portfolio, which currently include: treatment as prevention; elimination of vertical transmission of HIV, syphilis and viral hepatitis; the condom and lubricant programme; child and adolescent HIV care; and programming for people living with HIV.

Additionally, I provide support to other HIV prevention and management programmes, such as programming for key populations and adolescent girls and young women. I supervise, mentor and provide technical guidance to implementing partners and stakeholders to ensure that programmes and projects are consistent with national policies and strategies for high impact. I also coordinate advocacy initiatives, such as advocacy for domestic resource mobilization for HIV programmes.

My role involves coordinating research activities, including organizing dissemination for HIV and AIDS research. I participate in writing proposals to the Global Fund, PEPFAR and other funding sources for the national HIV and AIDS programme. In addition, I present the national HIV and AIDS programme on both local and international platforms.



"I am strongly committed to advocating for the development of an HIV vaccine, which will reduce frequent interaction by key and vulnerable populations with the healthcare system for HIV-related services."

### **Emma John Tesha**

Community / Key and vulnerable populations HIV Services Advisor,  
Amref Health Africa Tanzania

**Country: United Republic of Tanzania**



## **What is your motivation to work in the HIV vaccine (advocacy) field?**

By participating in the HIV Vaccine Advocacy Academy, I see an opportunity to learn and gain knowledge so that I can serve my community, especially key and vulnerable populations who have been facing stigma when they access health services. In Tanzania still, inequalities are undermining the AIDS response and jeopardizing the health security of everyone. Discrimination against and stigmatization and criminalization of gay men and other men who have sex with men, sex workers, trans, people who inject drugs and people in prisons are costing lives and preventing the world from achieving the agreed-on AIDS targets. I am strongly committed to advocate for the development of an HIV vaccine, which will reduce frequent interaction by key and vulnerable populations with the healthcare system for HIV-related services.

## **What is your current role and area of work?**

I was chosen by the African Medical & Research Foundation (AMREF) to manage a PEPFAR-funded project in Tanga, Mara and Simiyu and on Zanzibar Island. It aims to provide comprehensive, community-based HIV prevention, linkage and retention services to key and vulnerable populations, including adolescent girls and young women aged 15-24, men who have sex with men, female sex workers and people who inject drugs. The project employs an innovative model that combines clinic-based and community-based peer educators and outreach specialists to bridge the gap between these populations and distant regional healthcare facilities.

Key responsibilities include:

- Planning, budgeting, implementing and monitoring of community programmes to achieve programmatic and administrative goals
- Designing personal-centred key and vulnerable population-friendly services, including social network testing, HIV self-testing and index testing services
- Planning and monitoring the provision of biomedical services, including HIV counselling, testing, ART initiation, PrEP and Linkages Case Management (LCM).
- Leading the use of trained peer educators to identify beneficiaries, provide education and counselling, and facilitate navigation to biomedical services
- Building the capacity of key population-led civil society organizations to ensure that services align with beneficiary needs
- Collaborating with regional government authorities and other partners
- Participating in national technical working group meetings
- Developing quarterly work plans, including progress reports, and supporting M&E activities

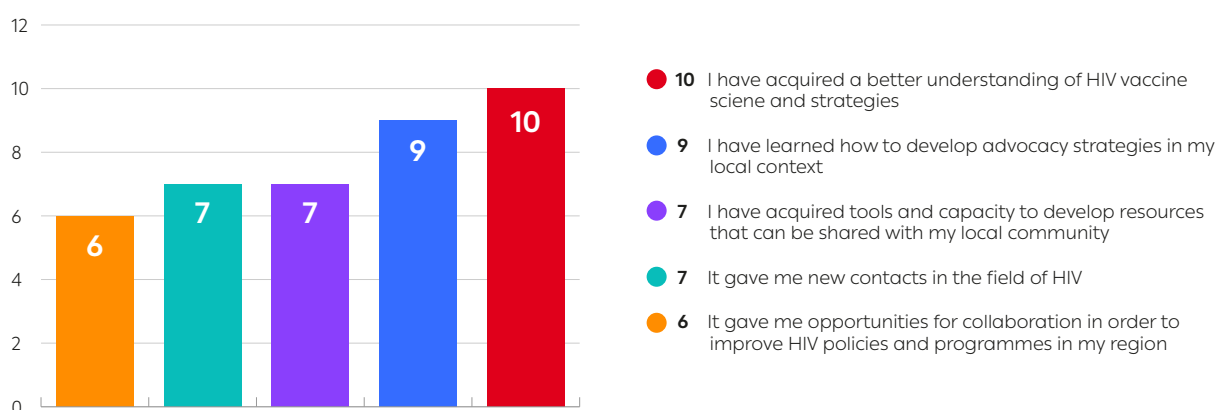
# Survey results

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“The HIV Vaccine Advocacy Academy provided an invaluable platform for knowledge exchange and collaboration. The diverse perspectives, engaging discussions and practical insights shared by speakers and participants enriched my understanding of HIV vaccine advocacy. I'm grateful for the opportunity and look forward to applying these learnings in my advocacy endeavours”.

**Survey respondent**

## What did you gain by attending this academy?



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“Now, I understand the importance of the vaccine. In my knowledge sharing with my research team and media network, I will have to educate my team on the importance of having more knowledge about it before disseminating the information to others.

**Survey respondent**

## After attending this academy, I now intend to

