

2025

# BIOMEDICAL HIV PREVENTION FORUM

2ND DECEMBER 2025 ACCRA - GHANA



# REPORT

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## List of Abbreviations

<b>AGYW</b>	Adolescent Girls and Young Women
<b>BHPF</b>	Biomedical HIV Prevention Forum
<b>CCM</b>	Country Coordinating Mechanism
<b>HIV</b>	Human Immunodeficiency Virus
<b>ICASA</b>	International Conference on AIDS and STIs in Africa
<b>KPs</b>	Key Populations
<b>NACP</b>	National AIDS Control Programme
<b>PrEP</b>	Pre-Exposure Prophylaxis
<b>UN PD</b>	United Nations Population Division
<b>USAID</b>	United States Agency for International Development

## 1.0 Background and Introduction

The world is not on track to end the AIDS pandemic. While scientific innovations such as PrEP, vaginal rings, and long-acting injectables have expanded prevention options, new HIV infections remain high, especially among adolescent girls and young women (AGYW) in Sub-Saharan Africa. In 2023, an estimated 210,000 AGYW (15–24 years) acquired HIV globally, about 4,000 each week, with 3,100 of those weekly infections occurring in Sub-Saharan Africa. This is more than four times the global target of fewer than 50,000 annual infections among AGYW by 2025 (UNAIDS, Global AIDS Update 2024).

Key populations, men who have sex with men, sex workers, people who inject drugs, and transgender people, represent less than 5% of the global population yet continue to account for the majority of new HIV infections worldwide.

In 2024, women and girls made up 45% of new infections, and progress remains undermined by persistent structural drivers: underfunded health systems, weak domestic investment, stigma, criminalization, and gender inequality (UNAIDS, Fact Sheet 2024).

### 1.1 Objectives

The objectives of the 2025 BHPF are to:

- i. Update stakeholders on the HIV prevention pipeline and emerging options.
- ii. Translating the choice agenda to emerging needs in a new era of HIV prevention, ensuring diverse prevention options for all populations while ensuring communities are at the center of prevention.
- iii. Strengthen the role and resilience of civil society and community advocates and identify what is still needed and what is next for prevention advocates.
- iv. Consolidate an African-led advocacy and research advocacy campaign for biomedical HIV prevention towards 2030.



## 2.0 Opening Remarks

Mrs. Cecilia Senoo opened the meeting and welcomed all participants to the 7th Biomedical HIV Prevention Forum in Ghana.



## 3.0 Keynote Speech- Dr Emmanuel Teviu

Dr. Emmanuel Teviu is the acting Programme Manager for the Ghana National AIDS Control Programme (NACP). He delivered the keynote address during the conference. In his speech, he shared a story of a 45-year-old woman who called him and shared her story with him. He had appeared on a radio programme just a day before the conference to talk about HIV, and the woman called him afterwards to share her story.

According to the woman, she contracted HIV, and she started treatment without the knowledge of her husband. She used to take her medication intermittently. She has stopped taking her medication and resorted to other multivitamins. He had just linked the woman to care, and he hopes she gets all the help that she needs. He encouraged all persons living with the disease to take their treatment seriously and request help if they require it, as this woman has done.

He expressed Ghana's privilege to host this platform at such a critical moment for the global HIV response. He added that the International Conference on AIDS and STIs in Africa (ICASA) has always been a beacon for Africa-led innovation, solidarity, and accountability. This year's BHPF theme, "Advancing biomedical HIV prevention as a national priority through choice," reflects exactly what the continent needs now: courage, political leadership, and people-centred solutions.

He reminded all about the dreadful fact that the world is not on track to end AIDS by 2030. In 2023, 210,000 adolescent girls and young women acquired HIV, with 3,100 new infections occurring every week in Sub-Saharan Africa alone. To him, this is a call to conscience. Key populations, who represent less than five percent (5%) of the global population, continue to account for the majority of new infections due to stigma, criminalisation, and exclusion from essential services. Women and girls accounted for forty-five percent (45%) of new infections in 2024, driven by gender inequality, poverty, limited education, and gender-based violence. The issue is not the lack of science, because biomedical innovations exist. The issue is equity, access, financing, and political will.

He continued that the 2025 funding freezes affecting USAID and other global partners have deepened the strain on African health systems, threatening program continuity, treatment adherence, and the civil society networks that keep communities engaged.

Ghana believes strongly that every individual deserves the power of choice to select the HIV prevention tool that fits his or her life, circumstances, and dignity. Prevention is not one-size-fits-all. He illustrated that a young woman at a tertiary institution, a female sex worker in a city, a mobile worker, and a married woman negotiating within her relationship all need different tools and different forms of support. Choice is empowerment. Choice is equity. Choice is public health.



## Setting the Scene

Young people from Ghana enlivened the atmosphere by treating participants to vibrant performances of dance and music, transforming the room into a space filled with camaraderie, cultural expression, and warmth. Their display of talent and authenticity created a brief but memorable moment of shared joy, during which participants actively engaged, applauded, and celebrated the sense of unity the performance inspired. For many in attendance, it was a refreshing interlude that reinforced the spirit of connection and mutual appreciation within the gathering.



The Biennial HIV Prevention Forum (BHPF) is an official pre-conference event of the International Conference on AIDS and STIs in Africa (ICASA). In 2025, the BHPF marks its 7th edition. Previous forums have been hosted in various African countries, including Zimbabwe 2023, South Africa in 2021, Rwanda in 2019, Cote D'Ivoire in 2017, Zimbabwe in 2015, and Nigeria in 2013. The BHPF highlights HIV prevention research by providing a unique platform for participants to learn about progress and best practices in biomedical HIV prevention research and development. This crucial conversation was missing from ICASA until 2013, when the first forum was initiated by prevention advocates in Africa.

Through its steering committee, the Biennial HIV The Biennial HIV Prevention Forum (BHPF) will collaborate with country partners to advance the CHOICE agenda at the national level. This effort aims to enhance the accessibility and diversity of HIV prevention options, ensuring that individuals have a range of effective choices tailored to their specific needs.



## BHPF Secretariat opening remarks

Joyce Nganga, Senior Policy Advisor at WACI Health made a few opening remarks sharing highlights of the BHPF conference successes over the years, she pointed that the 2025 was the 7th forum, following successful 6 forums since BHPF inception at ICASA in 2013, 2015, 2017, 2019, and 2023. She thanked all BHPF partners who each forum fundraise towards ensuring the forum is successfully held. She explained the governance structures of the forum. Zimbabwe had been the chair and was to hand over to Ghana as the new chair.

There was great excitement as west africa has been left behind when it comes to HIV prevention innovations and their uptake, this is an opportunity for Ghana to bring a new leadership in the region. Joyce thanked all the participants and the founders for the event, and she invited Dr Nyaradzo, the BHPF chair to make her opening remarks.



### Message from outgoing Chair- Dr. Nyaradzo Mgodi, University of Zimbabwe Clinical Research Trials Centre.

Dr. Mgodi delivered her remarks virtually, during which she provided important contextual insights into how the BHPF was incorporated into the ICASA pre-conference activities. She highlighted the existence of a critical gap in HIV prevention efforts and emphasized that the BHPF has played a significant role in effectively addressing and bridging this gap. In her remarks, she further explained the leadership transition within the Forum, noting that the host country of ICASA assumes the Chair of the BHPF. In line with this tradition, Madam Cecilia Senoo was formally introduced as the new Chair of the BHPF, taking over from Dr. Nyaradzo Mgodi of Zimbabwe.

## 4.0 Interventions by Prevention Champions

Two prevention champions, Lilian Mworeko and Jessica Boateng, delivered a compelling and thought-provoking message highlighting the critical role of young people in activism. Through their contributions, they emphasized the importance of youth leadership, agency, and sustained engagement in driving social change, underscoring the need to empower young people as both current and future custodians of advocacy efforts. Their message reinforced the view that meaningful and lasting progress depends on the active involvement and commitment of the younger generation.

### 4.1 Message delivered by Lilian Mworeko

In her address, Lilian underscored the importance of strategic prioritization and highlighted the central role of young people in advancing the fight against HIV. She stressed the need to intentionally nurture a new generation of advocates who can sustain and carry forward these efforts beyond the current leadership. She further called on stakeholders to ensure that the commitments, experiences, and struggles of today's leaders are effectively transferred and embraced by the youth as shared responsibilities.

### 4.2 Jessica Boateng

In Jessica's speech, she noted that today's forum comes at a critical moment, and reminded participants that the world is not on track to end AIDS and nowhere is this more evident than in Sub-Saharan Africa, where adolescent girls and young women continue to bear a disproportionate burden of new infections. Every week, 3,100 AGYW acquire HIV in the region, and key populations continue to face stigma, criminalization, and shrinking access to lifesaving services. These are not just statistics; they represent her sisters, brothers, peers, and communities.

She emphasized that science alone is not enough. There is a need for oral PrEP, injectables, vaginal rings, and a promising prevention pipeline, but choice, access, equity, domestic financing, and community leadership will determine whether these tools truly change lives. The 2025 funding freeze has shown us how fragile our progress can be when systems are weak and civil society is under-resourced. Action cannot wait.



This forum was therefore more than a meeting; it was a call to urgency, unity, and accountability. As young people, they are not just beneficiaries; they are partners, innovators, and a driving force behind the momentum to 2030. They are here to ensure that choice is real for everyone, especially those too often left behind.

As today's conversations kick-started on prevention science, emerging options, access plans, accountability, and an African-led advocacy movement, she entreated all to commit to one thing: that no one should be denied the power to choose how to protect their health and their future.

She ended her speech with a call that this dialogue should spark the action, alliances, and political will needed to secure an HIV-free future for Africa.

## 5.0 The Science of HIV Updates on the biomedical HIV Prevention Pipeline: The People's Research Agenda- Grace Kumwenda

Grace provided a detailed and comprehensive update on the biomedical HIV prevention pipeline, drawing on key outcomes and discussions from the 2023 ICASA held in Zimbabwe. Her presentation outlined the current landscape of HIV prevention, highlighted emerging innovations in the prevention pipeline, and identified strategic advocacy priorities to advance these interventions.

She further addressed the significant challenges posed by the USAID shutdown, noting its impact on prevention efforts. Despite these constraints, she emphasized that deliberate and resilient measures have been undertaken to ensure the continuity of HIV prevention initiatives. She concluded by underscoring the imperative to sustain prevention as a central priority and to proactively shape and own the prevention agenda, even in the context of declining engagement from PEPFAR. The presentation is attached as **Annexe 1**.



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## 5.1 Comments and Recommendations from Participants

There were comments and recommendations from the participants after the presentation.

### 5.2 Comments

- Participants noted progress in the approval of new HIV prevention products, citing Lenacapavir's approval in Zambia as a positive development within the region.
- Concerns were raised regarding the uptake and utilization of existing HIV prevention products, with observations that substantial resources are being invested while actual usage remains limited in some contexts.
- It was observed that Ghana was not among the countries currently advancing the use of certain biomedical prevention products, highlighting a missed opportunity for stronger national advocacy. Persistent challenges around the uptake of existing interventions, including PrEP, were also emphasized.
- Participants highlighted a broader concern that while much of the research, development, and implementation of HIV prevention products is focused on Africa, issues of affordability and accessibility continue to limit their impact.
- Discussions underscored the importance of learning from countries where implementation has been successful and sustaining momentum in advocacy efforts.
- The exclusion of some countries, including South Africa, from access to certain prevention products was flagged as a concern, with calls for greater regional inclusion and alignment.
- The role of communities and civil society organizations (CSOs) was emphasized as critical in driving demand, shaping messaging, and ensuring accountability.
- Participants stressed that offering choice in HIV prevention is essential and supported by evidence, noting that challenges often arise from inconsistent or unclear messaging that positions one product as superior to others.
- Concerns were also raised around prioritization in the context of limited resources, emphasizing the need for broader stakeholder engagement, particularly with governments, to build a shared understanding of advocacy for choice.
- Questions were raised regarding the safety profiles and potential side effects of emerging prevention products, underscoring the need for clear and transparent communication.

### 5.3 Recommendations

- Strengthen national and regional advocacy efforts, particularly in countries currently not included in pilot or rollout phases, to ensure equitable access to emerging HIV prevention products.
- Prioritize strategies to improve uptake and effective use of existing prevention tools alongside investments in new innovations.
- Leverage lessons learned from countries with successful implementation models to inform advocacy, policy engagement, and program design.
- Engage communities and CSOs more intentionally in prevention planning, demand creation, and messaging to ensure interventions are responsive to real needs.
- Promote clear, balanced, and evidence-based communication that reinforces the value of prevention choice, recognizing that no single product can meet all needs.
- Deepen engagement with governments and key stakeholders to align advocacy priorities with national realities, particularly in the context of limited resources.
- Integrate sustainability considerations early into HIV prevention advocacy and programming to ensure long-term impact beyond donor-dependent support.



## 6.0 The Choice Manifesto: Expanding Choice, Advancing Prevention

A panel discussion was held on the theme of choice, during which panellists examined the expansion of HIV prevention options and their potential to serve as a transformative approach, particularly for young people and future generations. The discussion highlighted how increased choice can enhance agency, uptake, and sustainability of prevention efforts. Panellists also explored the strategies and commitments being pursued by product developers to ensure that choice becomes a tangible reality within HIV prevention programming, with particular emphasis on adolescent girls and young women (AGYW), key populations (KPs), and affected communities.

The panel featured contributions from Yvette Raphael, Shaun Mellors, and Sinazo, who

brought diverse perspectives on advocacy, product development and community engagement.

Throughout the discussion, the panellists underscored the urgent need for intensified advocacy to mobilize increased and sustained funding, noting that adequate resourcing is critical to ensuring equitable access to a range of prevention options and to making choice available to all who need it.



## 7.0 Market Place

An interactive activity was conducted to simulate a marketplace environment, designed to reflect real-world dynamics of health product choice and engagement. Within this setting, group leaders assumed the role of "marketers," while other participants acted as prospective users or consumers. The primary objective of the exercise was for the marketers to clearly explain how each HIV prevention medication works, outline potential side effects, address implementation challenges, and respond to questions and clarifications raised by participants. After an initial engagement period, participants rotated to other stations to receive information on different products, mirroring how individuals compare options before making informed decisions.

Distinct from a conventional marketplace simulation, this activity deliberately incorporated a reflective and analytical component. As participants moved between the different stations, they critically examined existing gaps in access and utilization, exchanged experiences from their respective contexts, and identified practical opportunities to strengthen HIV prevention delivery. These discussions culminated in targeted recommendations informing policy development, advocacy strategies, and implementation approaches for the available biomedical prevention options.

The sessions were facilitated by respective leads for each product, with Lenacapavir presented by Oyama Eland, the PrEP Ring facilitated by Grace Kumwenda, and Oral PrEP led by Lina Mwangi.

## 7.1 Plenary Session- Marketplace Report

The outcomes of the marketplace activity were subsequently presented, during which selected participants were randomly invited to share reflections on their experiences and the HIV prevention options they preferred. These reflections provided practical insights into how individuals assess and respond to different prevention choices when adequately informed.

One participant expressed a preference for the PrEP ring, while another selected Lenacapavir, citing the advantage of reduced dosing frequency, as the injection is required only once every six months. A third participant opted for Oral PrEP, reflecting a preference for a more familiar and self-managed method. Although the participants were selected at random, each articulated distinct and personal reasons for their choices. Notably, all three participants selected different HIV prevention products.

This outcome underscores the value of providing a range of prevention options, as individuals are more likely to choose interventions that align with their personal circumstances, lifestyles, and needs. The exercise reinforced the principle that meaningful choice enhances acceptability and potential impact, while reducing the likelihood of individuals being constrained to a single prevention method that may not be suitable or effective for them.

## 8.0 Access Plan for Long-Acting Prevention Methods- A focus on Lenacapavir-

The presentation centered on strategies for enhancing access to long-acting HIV prevention methods, with a particular emphasis on Lenacapavir. The session was led by Carmen Perez Casas and Tumie Komanyane, who provided an in-depth overview of the drug's profile, its benefits as a long-acting option, and the potential impact on adherence and patient outcomes. The presenters highlighted key considerations for the rollout of Lenacapavir, including patient accessibility, implementation strategies within different healthcare settings, and approaches to support individuals in adopting long-acting preventive solutions. Their discussion also underscored the importance of integrating Lenacapavir into existing HIV prevention frameworks to maximize public health benefits.

### 8.1 Carmen Perez Casas

Carmen Perez Casas delivered a comprehensive presentation on Lenacapavir, highlighting its potential as a transformative product in the field of HIV prevention and treatment. She emphasized the drug's enhanced ease of use, high efficacy, long-term cost savings, and its pivotal role in improving patient adherence and treatment outcomes. Beyond the clinical and economic advantages, Carmen challenged participants to critically consider equitable access to Lenacapavir, particularly in low- and middle-income countries. She underscored the urgent need for mechanisms that ensure the availability of affordable, quality-assured generic versions, thereby broadening access and enabling more inclusive HIV care and prevention strategies.

The presentation sparked thoughtful dialogue among participants, encouraging them to explore innovative approaches to overcome barriers to access and to integrate Lenacapavir effectively into existing healthcare frameworks. The full presentation is provided in **Annexe 2**.

## 8.2 Tumie Komanyane

Tumie focused on the community perspective and interest in Lenacapavir, emphasizing that the successful implementation of this long-acting HIV prevention and treatment option requires communities to be at the forefront of the scientific and decision-making process.

She highlighted the critical role of communities and civil society organizations in shaping access strategies, advocating for innovative approaches to treatment literacy that effectively reach and resonate with diverse populations. By actively involving communities, stakeholders can ensure that interventions are inclusive, responsive, and tailored to the real-world needs of those most affected by HIV.

Tumie stressed that meaningful engagement is essential to ensure that no individual is left behind in the continuum of care. This approach not only strengthens trust and uptake but also positions communities as co-leaders in the advancement of HIV prevention and treatment innovations.



## 8.3 Comments and Recommendations

There were comments and recommendations from participants after the presentation.

It was noted by participants that Country Coordinating Mechanisms (CCMs) play a critical role in enabling community leadership in health initiatives, and so there is a need to leverage them. Strengthening the engagement of CCMs can empower communities to take a more active role in guiding the implementation of Lenacapavir and other long-acting HIV prevention methods.

There were concerns about implementation and affordability. Participants expressed caution regarding the rollout of Lenacapavir, highlighting potential challenges around affordability and sustainability. There is a need to explore mechanisms for cost reduction and strategic subsidization, while ensuring that access remains equitable across low- and middle-income settings.

In terms of the sustainability considerations, it was emphasized that African countries should prioritize long-term sustainability, reducing reliance on external donor support. Strategic planning should focus on locally led financing models, procurement of affordable quality-assured generics, and building systems that ensure continued access and scalability of innovative HIV treatments.

## 9.0 Young People Leadership Panel: Call to Action towards Plans for 2030- to inform the field of the momentum towards 2030

A panel discussion was held featuring three dynamic young leaders. They were Cwayita Jemsana, Thabo Mokone, and Paul Potsane. Their discussion centered on advancing the 2030 agenda. The panel aimed to amplify youth leadership, drive bold actions, and sustain momentum toward achieving the targets of the agenda.

The panellists underscored the importance of meaningful youth participation in decision-making processes, emphasizing that young people, alongside community members and civil society, must take active leadership roles. They highlighted the need to co-create sustainable solutions that have a lasting impact rather than relying on temporary or ad hoc consultations.

A key theme of the discussion was the call for structured, inclusive youth engagement across all levels. The panel stressed that government and institutional programs must move beyond tokenism, ensuring that youth voices are not only heard but actively shape policy and programmatic outcomes. Specifically, they noted that any initiative targeting young people should place them at the forefront of design and implementation.

The panellists also highlighted the integration of youth representation in HIV-related activities, advocating for biomedical research and technical programs that reflect the realities of young people. Youth participation should extend to technical working groups, community advisory boards, and regional or continental youth advisory boards, ensuring comprehensive representation and influence across the health and development sectors.



They provided insightful data and analysis about the fact that Africa is the youngest continent, with nearly 60% of its population under twenty-five (25) years. According to the United Nations Population Division (UNPD) projections, by 2030, one in four young people globally will be living here in Africa. Yet, while young people represent our greatest asset, we also bear the heaviest burden of the HIV epidemic. In 2024, there were 150,000 new cases among 10-19-year-olds and 370,000 among 15-24-year-olds, which means that 1 in every 3 new cases globally involved young people. Even more concerning, 25% of all new cases in sub-Saharan Africa were among adolescent girls and young women. Every week, 4,000 adolescent girls and young women aged 15-24 acquired HIV in 2024, with 3,300 (83%) of these cases occurring in sub-Saharan Africa.

Since 2010, new HIV acquisitions among young men have declined by 62% but among adolescent girls and young women, the decline is only 51%. This stark disparity reminds us that progress is possible, but the progress we are seeing is far from equitable.

In their concluding remarks, they reiterated that they will explore not just the science of prevention, but also the urgent social, structural, and political changes needed so that every young person, especially adolescent girls and young women, can access HIV prevention tools with choice, dignity, and equity at the centre.

The youth panel was marked by exuberance, enthusiasm, and a strong commitment to advocacy, reflecting the passion and energy that young leaders bring to shaping the 2030 agenda. Their contributions demonstrated not only a deep understanding of the issues affecting youth but also a resolute determination to drive change, influence policy, and actively participate in decision-making processes. The panel's vibrant engagement underscored the critical role of youth as catalysts for innovation, accountability, and sustainable impact in both community and national development initiatives.

## **10.0 Strengthening Advocacy, Partnerships, and Community-Led Accountability amid Shrinking Resources: Who is financing the choice**

The panel, featuring Cecilia Senoo, Nombasa Sizwe, Lilian Mworeko, and Richard Murko, exemplified the essence of advocacy, making it the central theme of their discussion. Their dialogue highlighted how effective advocacy spans multiple dimensions, from fostering strategic partnerships to promoting community-led accountability and ensuring the financing of choice. The panel emphasized that advocacy resonates most when it reflects the voices of all community members, ensuring that no one is left behind. They also underscored the value of intergenerational support, suggesting that older community members can play a crucial role in strengthening advocacy efforts.

A strong call was made to leverage partnerships both with community leaders and with grassroots organizations as a key strategy for achieving advocacy goals. The panel recognized the shrinking resource landscape in Africa, noting that reliance on external aid alone is no longer sustainable.

While foreign assistance has historically provided support, it is imperative that African countries take ownership of funding gaps, bridge inequalities, and optimize the use of limited resources to protect vulnerable populations.

The panelists collectively stressed the need for responsible, locally led action that maximizes impact, particularly during this critical period of resource constraints. Their discussion reinforced the idea that all stakeholders, government, communities, civil society, and youth, have a role to play in ensuring that advocacy translates into tangible results and sustainable outcomes.



## 11.0 Call to Action- Consolidate an African-led Advocacy and Research Campaign for Biomedical HIV Prevention towards 2030

Joyce Ng'ang'a, Senior Policy Advisor at WACI Health, delivered a highlight of all the presentations on consolidating an African-led advocacy and research campaign for biomedical HIV prevention toward 2030. Her presentation underscored the urgent need for coordinated action across the continent, highlighting that current efforts are off track in several critical areas, including HIV prevention coverage, domestic resource mobilization, and research, innovation, and development.

Joyce emphasized that achieving the 2030 targets requires a strategic, locally driven approach, where African stakeholders lead advocacy, shape research priorities, and ensure that resources are mobilized effectively and sustainably. She also stressed the importance of integrating evidence-based innovations in biomedical HIV prevention and scaling up interventions that address the unique needs of key populations and vulnerable groups.

The presentation provided participants with a clear framework for action, encouraging collaboration among governments, civil society, and communities to accelerate progress and close existing gaps in the HIV response. The full presentation is provided in **Annexe 3**.

## 12.0 Handover of Chair Position from Zimbabwe to Ghana

After about eight hours of intensive, insightful, and thought-provoking discussions, punctuated with moments of entertainment to reenergize participants between sessions, the 7th Biomedical HIV Prevention Forum drew to a close. The closing ceremony marked the handover of the chairmanship from Dr. Nyaradzo Mgodzi of Zimbabwe to Madam Cecilia Senoo of Ghana.

Madam Senoo graciously accepted the chairmanship and, in her acceptance address, emphasized the critical importance of keeping communities at the center of HIV prevention efforts. She highlighted that, despite notable progress, the pace of advancement is slowing, and new infections remain disproportionately high among AGYW and KPs. She underscored the urgent need for expanded access to prevention options, including oral PrEP and long-acting injectable formulations, alongside sustained community engagement to foster a more inclusive and effective HIV response across the continent.

In her concluding remarks, Madam Cecilia called for a renewed and robust advocacy agenda to sustain momentum, particularly in the context of evolving funding realities. She stressed that collaborative action, innovation, and strategic investment are essential to ensure that vulnerable populations are not left behind and that the gains in HIV prevention and treatment are preserved and accelerated.



## Annexe

<b>Presentations</b>	<a href="https://drive.google.com/drive/folders/1UbU-4SEfjiwJXhJ9pY-WG6fR0vvhao">https://drive.google.com/drive/folders/1UbU-4SEfjiwJXhJ9pY-WG6fR0vvhao</a>
<b>Photos</b>	<a href="https://drive.google.com/drive/folders/1RISyyAL3vzpMa3RjjVSpRofaYShNzH-a?usp=sharing">https://drive.google.com/drive/folders/1RISyyAL3vzpMa3RjjVSpRofaYShNzH-a?usp=sharing</a>
<b>Agenda</b>	<a href="https://drive.google.com/file/d/1v6qenAbJqoSndrWQuKTa_HUNIHJzfOrO/view?usp=drive_link">https://drive.google.com/file/d/1v6qenAbJqoSndrWQuKTa_HUNIHJzfOrO/view?usp=drive_link</a>
<b>Concept Note</b>	<a href="https://drive.google.com/file/d/1z7RG80OS4DhgsGseq7p0E5wUwTeeQoHZ/view?usp=drive_link">https://drive.google.com/file/d/1z7RG80OS4DhgsGseq7p0E5wUwTeeQoHZ/view?usp=drive_link</a>
<b>Website Link</b>	<a href="https://afnhi.org/bhpf-2025">https://afnhi.org/bhpf-2025</a>



PHOTOS



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