



Urban Agenda Platform

The global platform for sharing progress, action and knowledge on the implementation of the New Urban Agenda to achieve sustainable urban development.

Using Data and Building Social Cohesion in Fast-Track Cities

Region	North America
Themes	Capacity-Building Public Health Social Inclusion
Geographic scope	Global
Sustainable Development Goals	Goal 3 - Ensure healthy lives and promote well-being for all at all ages Goal 11 - Make cities and human settlements inclusive, safe, resilient and sustainable
New Urban Agenda Commitments	Sustainable Urban Development for Social Inclusion and Ending Poverty Sustainable and Inclusive Urban Prosperity and Opportunities for All

Summary

The Fast-Track Cities initiative is a global network of nearly 400 cities committed to ending HIV and tuberculosis and eliminating viral hepatitis by 2030. It was formed in 2014 by the core partners of the International Association of Providers of AIDS Care (IAPAC), UN-Habitat, UNAIDS, and the City of Paris.

This case study includes examples from two Fast-Track Cities: Kyiv, Ukraine, which has exemplified how to increase social inclusion and advance the health equity of vulnerable populations, and Nairobi City County, Kenya, which has shown how to use localized data to advance an urban public health agenda.

Background and Objective

The Fast-Track Cities initiative is a global network of nearly 400 cities committed to ending HIV and tuberculosis and eliminating viral hepatitis by 2030. It was formed in 2014 by the core partners of the International Association of Providers of AIDS Care (IAPAC), UN-Habitat, UNAIDS, and the City of Paris.

In enumerating what the drafters of the New Urban Agenda (NUA) envision for cities, first on the list is that cities will “fulfill their social function,” including achieving “equal access for all to public goods and quality services in areas such as... health” (p. 5). In envisioning how to implement the NUA and monitor that implementation, as the UN-Habitat Stakeholder Advisory Group Enterprise (SAGE) seeks to explore, we can reflect on the principles outlined in the 2016 WHO publication, “Health as the Pulse of the New Urban Agenda.” Two directives from this document are particularly relevant to the work of SAGE and to the case study presented herein: using health indicators to document progress on urban development (p. 6) and using urban development strategies to address the health risks of vulnerable populations (p. 8). These principles are also closely reflected in the Paris Declaration on Fast-Track Cities, which is signed by the mayor of each city in the initiative, including to “embrace the transparent use of data to hold ourselves accountable” on the UNAIDS HIV indicators and to “use our HIV response for positive social transformation” that prioritizes key populations (p. 3). This case study includes examples from two Fast-Track Cities: Kyiv, Ukraine, which has exemplified how to increase social inclusion and advance the health equity of vulnerable populations, and Nairobi City County, Kenya, which has shown how to use localized data to advance an urban public health agenda.

Outline of activities over the last four years

Kyiv became the first city in its region to join the Fast-Track Cities initiative in 2016, and soon thereafter, it launched a strategic plan to meet the goals set out in the Paris Declaration that ran from 2017-2021. During this time, the Mayor of Kyiv, Vitaly Klitschko, took a leading role in bringing attention to what was a stigmatizing issue that mainly impacted key populations with significant social vulnerabilities: people who inject drugs, sexual minority men, and sex workers. In addition to developing the strategic plan, Mayor Klitschko led the mobilization of a budget of \$8.5 million for treatment and prevention, which included harm reduction measures for people who use drugs. These measures, such as needle exchanges, are often thwarted by national governments based on political considerations, despite being proven successful from a public health perspective. Stigmatization was also addressed by shifting HIV services from being centralized in a single HIV medical center – which limited resources and reinforced stigmatization – and instead integrated services into health facilities throughout the city, with healthcare workers being trained to provide quality care without stigma or



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discrimination.

Nairobi, which is among the founding Fast-Track Cities that signed on in 2014, began an initiative in 2017 to collect data from facilities that offer HIV and TB services, including mapping those facilities and analyzing the data for gaps in services. The data showed that people living with HIV were disproportionately living in a set of subcounties that were home to a large number of informal settlements, which allowed them to focus efforts on accessing availability of service in those subcounties. They combined this localized data with a qualitative assessment that focused on adolescents, young people, and key populations, and from these responses developed recommendations, guidance, and training.

Achievements

1. As a result of the work done in Kyiv, the city saw significant improvements across the HIV care and prevention continua. These include a 31% increase in rapid testing coverage, a ten-fold increase in cities providing antiretroviral therapy (ART), a three-fold increase in the number of people on ARV, a nearly four-fold increase in sites providing opioid substitution therapy, and a rapid expansion of pre-exposure prophylaxis (PrEP) for sexual minority men and other higher risk groups.
2. Tragically, as a result of the armed conflict in Ukraine today, many of these gains are at risk of being eliminated, but even in the midst of this crisis, urban leadership is proving critical in Kyiv. The public health system provided people living with HIV received an extra month's supply of ART at the outset of the conflict, and health facilities also provided a supply of opioid substitution therapy. Mayor Klitschko was in contact with local organizations to make sure this process went smoothly and that they had the resources they needed to serve their communities, highlighting again the multisectoral, urban partnership that is at the heart of the Fast-Track Cities initiative.
3. Nairobi saw significant improvements from 2016 to 2020 in the UNAIDS targets: that 95% of people know their HIV status, 95% of those individuals are on treatment, and 95% of those individuals are virally suppressed. These numbers went from 77%-96%-55%, respectively, in 2016, to 100%-99%-91% in 2020. The city's commitment to meeting these global targets and their data-driven, localized response have resulted in them being a leader in the region and the world in making progress towards ending HIV.
4. Beyond the local outcomes for both of these cities, they have also contributed to a global impact by sharing these practices with other cities in the Fast-Track Cities network, through global, regional, and national conferences. Leadership from both cities have been frequent speakers at Fast-Track Cities events and have helped the network develop a community of learning that could be replicated to address other topics that comprise the NUA.

Partners

- Four founding global partners for the Fast-Track Cities initiative: IAPAC, UN-Habitat, UNAIDS, and the City of Paris
- Fast-Track Kyiv partners: Mayor's office, city public health department, AIDS Center at Hospital No. 5, Kyiv Smart City, and the Kyiv Network of People living with HIV
- Partners for the Fast-Track Cities Solidary Fund for Ukraine: Fast-Track Cities Institute, 100% Life, Alliance for Public Health, All-Ukrainian Association of People with Drug Addiction, and Elena Pinchuk Foundation
- Fast-Track Nairobi City County: Governor's office, city county public health department, the Kenya Medical Research Office, and local community-based partners