Aligning UNICEF’s HIV Vision to the SDGs and UNAIDS Strategy

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5 April 2016
An Unfinished Agenda: HIV/AIDS among Children & Adolescents

Trends & projections in the estimated number of new HIV infections among children (aged 0-9) and adolescents (aged 10-19), globally, 2000-2030

Paediatric HIV infections
Paediatric projection
Adolescent HIV infections
Adolescent projection

Global Plan launched

2000-2009
24% decline over 9 yrs [avg. 14,000 per yr]

2009-2014
45% decline over 5 yrs [avg. 36,000 per yr]

2015

2000-2009
32% decline over 9 yrs [avg. 14,000 per yr]

2009-2014
15% decline over 5 yrs [avg. 8,000 per yr]

Note: Projections from 2015-2030 have been derived by applying the annual rate of reduction (%) between 2009-2014.
Adolescent AIDS-deaths are Increasing

Estimated number of AIDS-related deaths, by age, globally, 2001-2014

Adolescent deaths have tripled since 2000**

** Increase in adolescent deaths is because the majority have progressed from mother-to-child infections

Moving forward

FAST-TRACK
ENDING THE AIDS EPIDEMIC BY 2030

SUSTAINABLE DEVELOPMENT GOALS
Road to 2030: Our Thinking

LOCATE & LINK
Find at-risk children, adolescents & pregnant women, test them for HIV, and link them to treatment, prevention, care and support services.

RETAIN
Retain pregnant women, mothers, children and adolescents living with HIV on treatment, and retain HIV-exposed infants in care.

PREVENT
Prevent HIV infection in at-risk adolescents, including girls.
LOCATE & LINK

Find at-risk children (0-9 years), adolescents (10-19 years) and pregnant women, counsel and test them for HIV, and link them to treatment, prevention, care and support services.

- Smart case-finding: All children
- Decentralize and simplify testing: Point of Care technologies for EID and rapid diagnostics
- Multi-sectoral platforms: Routine health services, child & adolescent immunization, nutrition care clinics, ECD centres, social protection schemes, schools, etc.
- Increase support for countries with lowest PMTCT coverage
- Youth-friendly health services

Of the 2.6M children under 15 living with HIV, 1 in 3 are on treatment.

All children living with HIV should be on treatment, or 50% will die before 2; and 80% before 5.

Almost 40% of new infections among adolescents occurred outside sub-Saharan Africa.

11% of adolescents (15-19) are tested for HIV in sub-Saharan Africa.
Retain pregnant women & girls, breastfeeding mothers, children and adolescents living with HIV on treatment, and retain HIV-exposed infants in care.

AIDS is the #1 cause of death among adolescents (10-19) in Africa and #2 cause of death globally.

Majority of these deaths are among adolescents who vertically acquired HIV as babies. They either did not know their HIV status or have slipped out of care, due to poor follow-up & service delivery.

Care & support, including social protection, is needed.

- Health systems strengthening and integration into broader SRH & MNCH programs
- Community facility linkages
- Improving adherence through innovations including technologies
- HIV-sensitive social protection interventions
In sub-Saharan Africa, 7 in 10 new infections in 15-19 year olds are among girls.

The clock is ticking for adolescent girls.

PREVENT
Prevent HIV infection in at-risk adolescents—especially girls, young men who have sex with men, those who are transgender, inject drugs and are sexually exploited.

70% of boys and girls 15-19 years old in sub-Saharan Africa do not have comprehensive HIV knowledge.

In sub-Saharan Africa, 70% of girls (15-19) with multiple sex partners did not use a condom the last time they had sex.

• Data, evidence and knowledge
• Leveraging biomedical and tech-based innovations: PrEP for older adolescents, circumcision, mHealth, social media and multi-media campaigns
• Interventions on structural barriers: cash transfer, gender violence reduction
• Synergy between PMTCT programmes and HIV prevention for adolescents
Thank you

SUSTAINABLE DEVELOPMENT GOALS

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ENDING THE AIDS EPIDEMIC BY 2030

REVIEW
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EVERY WOMAN
EVERY CHILD

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