



unicef 
for every child

For every child, end AIDS

An investment opportunity
for the private sector

The opportunity

Remarkable progress has been made over the past three decades to slow the spread of HIV and reduce the number of AIDS-related deaths around the globe. This progress is thanks to many significant achievements: new life-saving drugs to treat those living with HIV, awareness raising on how to prevent HIV infection, and successful approaches to reducing the transmission of HIV from mothers to their newborn babies. Populations badly affected by HIV are increasingly able to manage and slow its spread – people's lives are being saved and their health restored, leading to more economically stable and robust communities.

A world where AIDS is no longer a public health threat is certainly within reach: ending AIDS by 2030 is a clear aim of the Sustainable Development Goals (SDGs). And SDG 17 on global partnership for sustainable development provides an opportunity for the private sector to contribute to this endeavour. Involvement of the private sector is critical – indeed, the progress made so far to tackle HIV cannot be sustained without it. Intensified efforts require the expertise, innovation and financial resources of a range of partners so entire societies and economies can benefit from healthy, empowered and more productive individuals, families and communities.

PROGRESS TOWARDS ENDING AIDS

- UNICEF leads on rolling out prevention of mother-to-child transmission services in the countries most affected by HIV: this is resulting in dramatically reduced numbers of babies being born with HIV and of infants dying from AIDS-related causes.
- Almost **82 per cent** of pregnant women with HIV are now receiving effective treatment (up from 44 per cent in 2010).
- Globally, **1.6 million** new infections have been averted among children since 2010.
- Almost **1 million** children under 15 are receiving treatment today, 89 per cent of whom live in sub-Saharan Africa.
- There has been a rapid decline (63 per cent) of new HIV infections among children under 15 years old since 2000.

<<https://data.unicef.org/resources/children-hiv-and-aids-global-and-regional-snapshots>>

Source: Global AIDS Monitoring 2019 and UNAIDS 2019 estimates



Doumbia Dgnebou, 35, is seven months pregnant with her fourth child. She came to Odienné health centre in Côte d'Ivoire for a prenatal check-up. She is living with HIV. *"When I was pregnant with my third child, I had an HIV test. The result was positive. I cried and was afraid. She – the nurse – told me to take the medication I was prescribed, and I did ... Luckily, my son was seronegative. I am not afraid anymore. Our previous son was born healthy because I took the right medication."* © UNICEF/UN061603/Dejongh

The challenges

A substantial decline in global resources has made it difficult to finish the job of ending AIDS. But now is not the time to give up. To contribute to an AIDS-free future, UNICEF and the global community need to intensify their commitment and efforts, working together to find new ways to reach the unreached. That means more commitment, more investment and more innovation. Solutions are needed to reach those who are not yet receiving care and to keep providing for those who are on treatment. UNICEF will not forget its promise to leave no child behind. It is committed to working with partners in the private sector to force the HIV epidemic into irreversible and rapid retreat.

While the time to end AIDS is now, several issues need to be addressed collectively to make it a reality.

Reaching the hardest to reach and help them determine their HIV status

Millions of children and adolescents are prevented from surviving and thriving as they remain unreached by global efforts to end the HIV epidemic. In areas where the rates of HIV infection are highest, the hardest to reach are usually socially and economically disadvantaged groups without access to health care and education.

The focus needs to remain on reaching women, children and adolescents in the most remote regions or areas with weak health systems, where knowledge about the importance of testing is poor and antiretroviral drugs may not be easily available.

Ensuring adolescents who test negative stay negative

Estimated new HIV infections among adolescents aged 10 to 19 years old declined by 24% between 2010 and 2018. Staying negative requires people to test for HIV. However, many do not test due to fears of social discrimination and stigma, and because they lack access to regular, simple testing.



An adolescent girl takes a selfie at the Union Development and Culture Community Centre in Djibouti, where she is part of a youth empowerment programme supported by UNICEF. © UNICEF/UN0199053/Noorani

Providing access to lifelong treatment and support

Only 54 per cent of children under 15 years old living with HIV receive antiretroviral drugs, which control the virus. All children, adolescents and women living with HIV must have access to lifelong treatment and social and peer/community support to retain them in care and help them adhere to treatment.

Supporting new mothers, especially young women, before, during and after pregnancy so they do not pass on the virus to their babies

While 82 per cent of pregnant women with HIV are receiving treatment to prevent their babies from becoming infected, the other 18 per cent must also be reached. The hardest-to-reach women are often those not accessing antenatal health care and are not tested for HIV before or during pregnancy. Of the 1.3 million babies born to mothers living with HIV in 2018, only half were tested within their first two months of life.

THE CURRENT SITUATION

- **2.8 million** children and adolescents under 20 years old are living with HIV (9 in 10 live in sub-Saharan Africa).
- In 2018, **160,000** children were newly infected with HIV during birth or breastfeeding.
- About half (54 per cent) of children under 15 years old living with HIV are accessing **antiretroviral drugs**, which control the virus.
- There were **33,000** AIDS-related deaths among adolescents and 190,000 new HIV infections in adolescents in 2018.
- An estimated **1.6 million** adolescents were living with HIV worldwide in 2018, of whom 9 in 10 lived in sub-Saharan Africa.
- There were **84,000** AIDS-related deaths of children under 10 in 2017.
- **Every 4 minutes** in 2018, an adolescent girl in sub-Saharan Africa was infected with HIV, three times the number of boys.

<https://data.unicef.org/resources/children-hiv-and-aids-global-and-regional-snapshots>

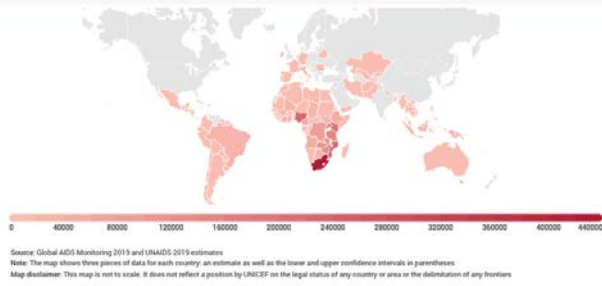
Source: UNAIDS 2019 estimates

Estimated number of children aged 0–19 living with HIV, 2018

Country/Region	Value	Lower	Upper
Eastern and Southern Africa	1,810,000	1,280,000	2,440,000
West and Central Africa	640,000	440,000	900,000
South Asia	100,000	77,000	160,000
East Asia and Pacific	97,000	71,000	130,000
Latin America and Caribbean	76,000	58,000	100,000
Middle East and North Africa	6,100	4,400	10,000
Eastern Europe and Central Asia	–	–	–
Western Europe	–	–	–
North America	–	–	–
Global	2,770,000	1,960,000	3,780,000

Data source: UNAIDS 2019 estimates
No data

2.8 million children and adolescents were living with HIV in 2018
Nearly nine in ten live in sub-Saharan Africa



UNICEF’s track record

UNICEF has more than 70 years of experience. It works in over 190 countries, where it addresses the health, nutrition, education and protection needs of more of the world’s children than any other organization. With a proven track record in partnering effectively with the private sector, UNICEF achieves sustainable results for children and adolescents.

UNICEF works in the most challenging and least accessible places, reaching children – including adolescents – in both emergency and development contexts. To address the HIV/AIDS epidemic, UNICEF invests in communities and partnerships and in the most effective solutions and interventions to end AIDS, and it works to make improvements to current health systems. UNICEF has a voice in the most important global and national conversations affecting children and is a key contributor to many global alliances that tackle the most pressing issues.

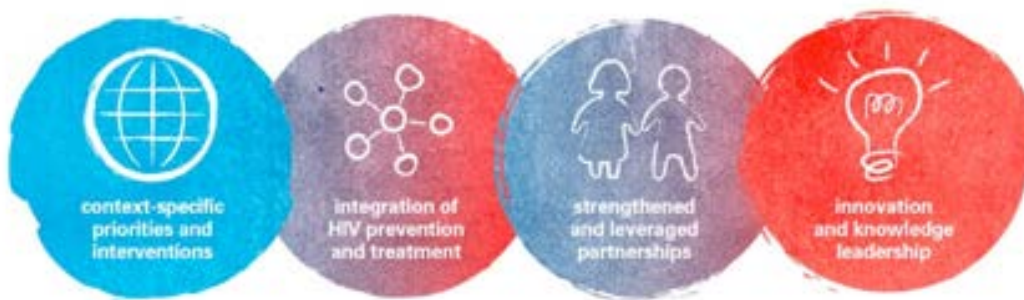
UNICEF’s sustainable response

UNICEF’s mandate is to save children’s lives, defend their rights and help them fulfil their potential from early childhood through adolescence. Partnerships are key in fulfilling UNICEF’s mandate, with governments, civil society and the private sector, and with children and adolescents themselves.

Business as usual is not enough to make the final push towards ending AIDS. UNICEF and its partners, therefore, implement innovative interventions that will reach children everywhere and leave no child behind. This means focusing on long-term solutions to prevent future transmission of HIV while treating those living with the virus today. UNICEF’s approach varies in different communities and reflects the situation of each context. The proportion of people with HIV, the capacity of the health system and the level of support available from private and public bodies all influence the type of response.

UNICEF focuses on three areas to eliminate HIV and AIDS:

- 1 Ending mother-to-child transmission of HIV**
- 2 Testing and treating children and adolescents and retaining them in care**
- 3 Preventing the spread of HIV among adolescents**





Maria and her two children, Joyous (6 years old) and Eliza (2½ years), at home in Gunde village, Thyolo, Malawi. *“When I got the results that my babies were born HIV-negative, I immediately called all my relatives sharing with them the truth that although I was living with HIV, my children were born without the virus. This was cause for much celebration.”*
© UNICEF/UN063429/Schermbucker

**1 Elimination of mother-to-child transmission:
Ensuring babies are born and stay HIV free**

Expanding HIV testing and counselling among pregnant women is critical for identifying those in need of follow-up care and increasing coverage of subsequent interventions that can prevent mother-to-child transmission, as well as providing care and treatment to mothers. This has resulted in a sharp reduction in the number of babies born with the virus and in infant deaths from AIDS-related causes. However, progress is uneven and notable gaps still exist, particularly in sub-Saharan Africa. UNICEF has been at the forefront of rolling out services to prevent mother-to-child transmission in the countries most affected by HIV, as reaching the ‘last mile’ of eliminating new HIV infections in children is a priority.

Today, four out of five pregnant women living with HIV receive effective treatment, and the number of new infections in children under 5 has dropped to 160,000 per year (41% fewer than in 2018). Nevertheless, a gap remains that must be closed;

the last fifth of mothers must be reached to make sure their babies get an HIV-free start to life.

Working in partnership, UNICEF and the private sector can eliminate mother-to-child transmission. One way is by increasing peer support from health centres and communities to test and treat women and retain them in care in hard-to-reach areas. Another is by supporting women at risk of acquiring HIV from becoming infected during pregnancy and breastfeeding and passing on the virus to their children.

UNICEF TARGET FOR 2021

1.19 million pregnant women living with HIV receive antiretroviral medicine through UNICEF-supported programmes

2

**Timely testing, treatment and retention for children and adolescents:
Giving children living with HIV quality treatment and care**

UNICEF is speeding up the delivery of services to test, treat and care for children living with HIV, and expanding the use of point-of-care technologies for early testing and prompt initiation of treatment. Expanded access to antiretroviral therapy is one of the main reasons why the number of AIDS-related deaths among children halved between 2009 and 2018. However, only half of the 1.8 million children currently living with HIV receive antiretroviral therapy, and those who do only begin treatment when around 3 1/2 years old – well beyond the optimal age for starting medication. In fact, without timely treatment, a third of children with HIV die before their second birthdays. Too many children and adolescents are still unaware of their status and are not on treatment.

UNICEF knows that early testing of children affected by HIV is critical. Screening at health services is one effective way to identify children living with HIV. It also helps to provide comprehensive and efficient care, counselling and support for infant and young child feeding, and support for mothers to adhere to their HIV treatment. Smart technologies such as point-of-care infant diagnosis and HIV self-testing can

potentially help identify children and adolescents living with HIV.

UNICEF prioritizes interventions linking communities and facilities to promote adherence to treatment and retention in care so that patients, including adolescents, remain on the life-saving drugs.

UNICEF TARGETS FOR 2021

81 per cent of those under 14 years living with HIV receive antiretroviral therapy

64 per cent of infants born to pregnant women living with HIV tested for HIV within their first two months of their lives

32 countries implementing policies and/or strategies to integrate HIV testing and counselling, and antiretroviral therapy into child-centred service points



Longezo, 3, is living with HIV in the village of NKhuloawe, Malawi. He takes medication every day. His life was saved when Bizwick, a health worker, visited his home. © UNICEF/UNI201847/Scherbrucker



Adolescent boys and girls participate in a life skills event in Djibouti. UNICEF is supporting the programme to empower adolescents and young people to think critically, boost their self-esteem and make healthy choices. © UNICEF/UN0199061/Noorani

3 Turning the tide: Preventing HIV infection and AIDS-related deaths in adolescents

UNICEF supports adolescent girls, young women and their partners to stay HIV-free by strengthening their access to information, education and peer support. This includes increasing access to self-testing and using pre-exposure prophylaxis medication to significantly reduce the risk of being infected.

Adolescence is a critical time in the life of a child. It is a time of tremendous vulnerability, but also a great opportunity for UNICEF and its partners to make targeted and timely investments that can pay enormous dividends. Adolescents and young people make up a growing proportion of people living with AIDS worldwide and, if current trends continue, hundreds of thousands more will contract HIV in the coming years.

Adolescents are increasingly tuning out messages of HIV awareness and prevention, believing they are not at risk. And adolescents living with HIV are struggling with treatment challenges as well as psychosocial issues, including dealing with stigma and discrimination because of their HIV status. They need to be given the tools to prevent them from contracting the virus, to access testing and treatment, and to receive support in living with HIV. One tool is knowledge about sexual and reproductive health to prevent new infections among at-risk groups, such as sexually exploited adolescents, adolescent and

young men who have sex with men, and adolescents who use drugs.

A focus is also needed on reducing the disproportionate rate of infection among girls and young women and on empowering them with strategies to avoid being infected with the virus. Increased vulnerability linked to gender-based violence and exploitation needs to be tackled: adolescent girls in sub-Saharan Africa are three times as likely to be infected with HIV as boys in the same cohort.

UNICEF TARGETS FOR 2021

81 per cent of adolescents living with HIV receive antiretroviral therapy

13.8 million adolescent girls and 9.8 million adolescent boys tested for HIV and received result of the last test

25 countries with initiatives to strengthen availability of gender-responsive evidence to prevent HIV

How the private sector can invest

UNICEF believes that the private sector isn't a postscript; it must be part of solutions to the world's gravest global challenges. A broad range of partners – philanthropists, foundations, businesses and individuals – can help create change at the global, regional and country level, and speed up the rate of finding solutions to make a world where all have equal opportunities to survive and thrive.

The private sector has a critical role in helping to improve the lives of children around the world, leveraging its expertise and assets to better serve the needs of hard-to-reach children. It brings innovation, efficiency and know-how. UNICEF and partners will not end the AIDS epidemic in adolescents without including them in the response.

More specifically, private sector partners can work with UNICEF in the following areas to achieve results for ending AIDS.

Financing

The progress the global community has made is under threat as investments in HIV have declined. UNICEF therefore urgently needs financial contributions from the private sector to implement its programmes. Flexible funding is critical, as it allows UNICEF to target communities with the appropriate interventions and make a difference where it is needed most.

Innovation and technology

UNICEF has a strong track record of investing in innovation and technology that can speed up results. UNICEF is continually looking at new solutions and ways of working and sharing knowledge to achieve even more for children, using the power of evidence to effect change. Together, partners and UNICEF can:

- Increase efforts for rapid testing for HIV without complex laboratory tests. This helps to reveal cases of HIV among children missed earlier, start them on treatment immediately if necessary and link them to ongoing health care.
- Increase access to self-testing for adolescents in existing points of contact, including family planning centres and community youth groups, and ensure young people have access to life-saving HIV knowledge, skills and prevention services.
- Expand HIV prevention models for at-risk HIV-negative adolescents with increased use of pre-exposure prophylaxis that reduce the risk of being infected.
- Engage young people in designing and planning community programmes and technology-based innovations to provide safe spaces for youth from key populations to voice and share their concerns.

- Use innovative digital technologies to transform how to reach, inform and treat children and adolescents at risk of HIV. Continue enhancing the use of digital technologies and e-learning platforms to share knowledge on caring for children and adolescents with HIV. This includes, for example, using digital platforms such as U-Report and RapidPro to track interventions and promote adolescent participation to improve services.
- Develop and roll out tools to address barriers to ending AIDS, including innovations to develop child-friendly drugs, generate evidence on pre-exposure prophylaxis and create new ways to improve access to, and ease of, testing and treating children and adolescents.

Expertise

Partners from a range of fields, sectors and industries are needed to contribute new approaches and fresh perspectives, fill knowledge gaps and mobilize stakeholders and influences to deliver solutions to reduce new HIV infections and AIDS-related deaths. Partners' expertise can help UNICEF:

- Design programmes to meet the needs of women who are reluctant to be tested for HIV, breaking down barriers to access and overcoming stigma. This can include HIV prevention and information services, or peer support from other mothers living with HIV who are already in treatment programmes.
- Strengthen the continuum of care and integrate quality HIV and AIDS education, testing, care and treatment across the paediatric health system. This can be done, in part, by expanding HIV testing entry points such as including the service within antenatal programmes and vaccination schedules.
- Work with community networks and leaders and use platforms such as child health weeks to expand testing and improve access to antiretroviral therapy.
- Develop partnerships at the local level to bring communities together and make them more robust while community-based interventions help close the treatment gap in children and adolescents. For example, creating peer support through community mentors can support groups of mothers living with HIV and strengthen the links between the primary health care facilities and the community, leading to better care for mothers and children living with HIV.

Data and evidence generation

Data collection, evidence generation and learning are central to programmatic success and help UNICEF determine where to target its work. UNICEF looks to partners for support in building effective ways to collect, store and analyse data. Together, they can:

- Use data to find the hardest to reach and better target efforts to eliminate mother-to-child transmission of HIV.
- Understand where the unidentified children and adolescents are, especially those whose parents and family members are known to be living with HIV, so they can be tested, treated if necessary and kept on their treatment programmes.
- Improve prevention programmes' ability to target and identify hidden, invisible and hard-to-reach populations such as by mapping personal networks and through champions in groups of children and adolescents at highest risk of infection.

Advocacy, communication and influence

UNICEF looks at the reach of partners – whether through their products and services or their communication and advocacy platforms – to influence, reinforce and advance key messages and priorities with a joint voice. By helping UNICEF speak to children, adolescents and mothers to raise awareness about preventing HIV infection, partners can:

- Continue working with a wide range of stakeholders – people living with HIV, local NGOs, donors, governments at all levels, civil society, the private sector and academia – to advocate for increased investment in eliminating mother-to-child transmission and develop ongoing community interventions. UNICEF works to convince governments to include funding for HIV and AIDS strategies in national budgets, as well as working with donors such as the Global Fund to Fight AIDS, Tuberculosis and Malaria and the United States' President's Emergency Plan for AIDS Relief to secure flexible funding for programmes to end AIDS.
- Support UNICEF's role as a leader in learning, data sharing and programming to guide global conversations on HIV prevention, treatment, care and support for children and adolescents living with HIV.
- Continue supporting advocacy for more comprehensive data to help governments identify groups most at risk and to strengthen national, regional and local data systems to zero in on gaps in the response.
- Incorporate interventions in the overall antenatal programme and across the education and community systems, including in local health centres, so that HIV prevention and awareness are part of a range of maternal and newborn governmental health policies and campaigns.

Why partner with UNICEF?

Global impact

When supporting UNICEF, partners are empowering millions of vulnerable children and adolescents. UNICEF's global reach and close collaboration with governments, civil society, adolescents and the private sector means its impact has a multiplier effect, allow the organization to leverage investments for solutions at scale.

Influence

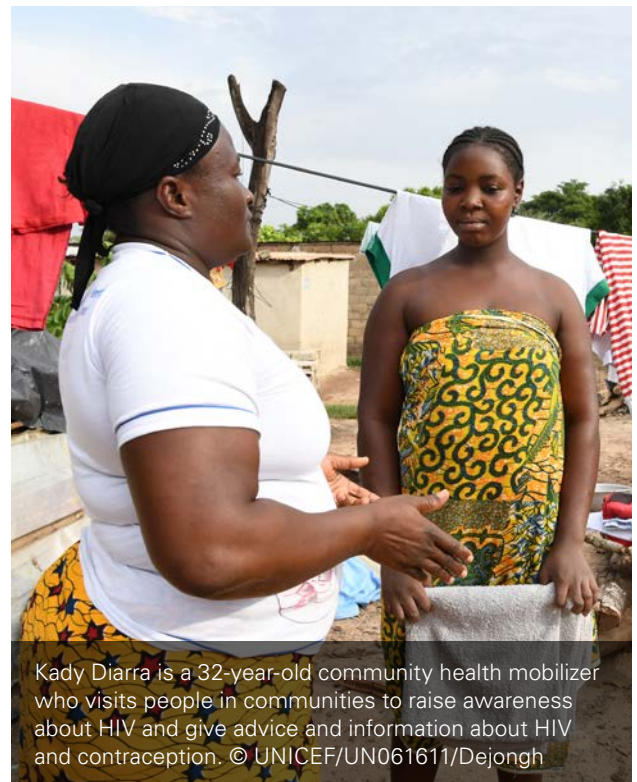
UNICEF engages with and convenes government and other partners on initiatives for education, protection, health, nutrition and civic engagement. UNICEF works as a team with partners from a range of backgrounds, bringing expertise to the table and giving partners a voice in providing input to solutions.

Visibility

Recognition opportunities – including on social media – allow supporters to publicize their partnership with UNICEF and showcase their commitment to children and adolescents.

Opportunities for co-creation

UNICEF is seeking global strategic partners to achieve impact at scale. By leveraging the power of the private sector's innovation and financial resources, UNICEF can respond to the immense challenges to economic mobility and equitable opportunity that children and adolescents face in developing countries.



Kady Diarra is a 32-year-old community health mobilizer who visits people in communities to raise awareness about HIV and give advice and information about HIV and contraception. © UNICEF/UN061611/Dejongh

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