

HEALTH RESULTS 2020

HIV AND AIDS

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for every child

Nonhlanhla Dubazane, 29, lives in Mphumaleagna, South Africa. When Nonhlanhla discovered that she was both pregnant and HIV positive, she was frightened, but thanks to antiretroviral treatment and related support, she gave birth to her son, Answer, who is healthy and HIV-free.

CONTEXT

Over the last three decades, the global community has united in purpose and promise to prevent and eliminate new HIV infections in children and adolescents and to reduce the number of AIDS-related deaths around the world. Providing pregnant mothers with antiretroviral treatment (ART) to stay alive and well and to stop the transmission of HIV to their children during pregnancy, delivery, or breastfeeding is one of the flagship programmes that UNICEF supports. Supporting optimal treatment services for children and adolescents living with HIV and being a leading voice for adolescents in key conversations about their treatment and prevention needs, UNICEF delivers a multisectoral and holistic approach to end AIDS for children and adolescents. This approach addresses structural factors such as poverty and lack of educational opportunities, as well as gender-based violence and other social and gender norms that put adolescents, especially girls and young women, at risk of acquiring HIV.

UNICEF provides support in a number of ways. It creates strong political commitment, makes catalytic financial investments, builds provider-capacity, empowers communities, scales up innovative tools and approaches and delivers lifesaving antiretroviral medicines. Antiretrovirals have saved lives and restored health for thousands of children, adolescents and mothers living with HIV, even so there is still a long way to go if the world is to end AIDS by 2030.

Each day in 2019, approximately 880 children and adolescents became infected with HIV. Without treatment, 50 per cent of children born with HIV will die before their second birthday, and 80 per cent will die before the age of 5.

HIV TREATMENT FOR CHILDREN AND ADOLESCENTS: CLOSING THE GAP

Globally, the number of AIDS-related deaths among children aged 0–19 has fallen by more than half (53 per cent) since 2000 due to access to ART. Fifty-three per cent of children globally had access to ART and children living with HIV are now more likely to survive into adolescence or adulthood. But despite this progress, children under 5 years old still account for the majority of deaths (60 per cent in 2019) among children aged 0–19 living with HIV.

Compared to adults and pregnant women, coverage of ART among children and adolescents is unacceptably low. Too many are still getting infected — an estimated 320,000 every year, adding to the already 2.8 million children and adolescents living with HIV. The impact of limited access to treatment is most acutely felt in sub-Saharan Africa, where nearly 9 in 10 of the world's children and adolescents with HIV live, but the children of marginalized women outside Africa often suffer the same consequences.



Kansiime Ruth, 25 years old, ensures that Joanita, 4 years old, takes her paediatric HIV medicine at the same time every day. "I feel so happy seeing Joanita looking so healthy. She used to fall sick often but now she hardly falls sick," says Kansiiime.

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GOING THE 'LAST MILE'

A major achievement has been the near doubling of ART coverage among pregnant women with HIV in less than a decade — from 44 per cent in 2010 to 85 per cent in 2019. Thanks to strong political will, catalytic financial investments, and sustained programming in maternal child health clinics across a range of settings, an estimated 2 million new HIV infections in children have been averted since 2000.

The work of UNICEF and its partners has had a life changing impact on mothers and their children. There has been a dramatic increase in HIV-free survival among babies born to mothers living with HIV. Yet, the hard work of eliminating mother-to-child transmission (EMTCT) of HIV is not yet done.

The annual increase in ART coverage for pregnant women living with HIV has stalled over the last three years, leaving a significant gap to reach the global target of 95 per cent by 2025. Furthermore, global successes obscure stark regional and subnational failures, such as in West and Central Africa, where ART coverage among pregnant women living with HIV has stagnated at 57 per cent.



Maureen Richards, 14 years old, is part of the Children's Radio Foundation Project in Atlantis, Cape Town South Africa. Maureen supports young people with HIV and AIDS prevention and treatment information.

EMPOWERING AND PREVENTING HIV IN ADOLESCENTS

In 2019, an estimated 1.7 million adolescents aged 10–19 years were living with HIV, with approximately 170,000 new infections contracted during adolescence. There is a growing number of children entering adolescence who acquired HIV through mother-to-child or vertical transmission, but who remain undiagnosed. In some parts of the world, such as in sub-Saharan Africa, AIDS is one of the leading causes of death in this age group. Among HIV-affected populations, adolescents are the only group for which AIDS-related mortality figure is not decreasing.

Adolescent girls and young women are disproportionately affected by HIV. Worldwide, they account for 76 per cent of all infections amongst those aged 10–19, and in sub-Saharan Africa there are nearly four times as many adolescent girls acquiring HIV as boys. In fact, an adolescent girl is infected with HIV every five minutes in sub-Saharan Africa. Girls and young women face unique challenges that increase their likelihood of HIV infection, including exploitative relationships with older male partners, barriers to accessing health services independently due to age-of-consent laws, sexual and gender-based violence, harmful gender norms and practices, and school dropout, among others.

Globally, four in five women living with HIV (85 per cent) are receiving effective antiretroviral medicines, which not only keep them alive, but also stop them from transmitting HIV to their children.

Since 2010, there has been a 41 per cent decline in the number of new perinatal HIV infections in children.

Globally, new HIV infections among adolescents have decreased only by one-third (from 250,000 in 2010 to 170,000 in 2019).

THE COVID-19 PANDEMIC PRESENTS FURTHER CHALLENGES. AT THE SAME TIME, THERE IS AN URGENT NEED TO MAINTAIN RESOURCES FOR HIV PREVENTION AND TREATMENT TO SAFEGUARD THE SUBSTANTIVE GLOBAL GAINS ALREADY ACHIEVED



Innovation: For every child, end AIDS

We entered 2020 with the concurrent pandemics of COVID-19 and AIDS, with 2.8 million children and adolescents living with HIV. This video presents UNICEF Executive Director, Henrietta Fore, urging valued partners to join UNICEF in “building back better”.

In 2020, physical distancing orders and lockdowns had a significant impact on many fronts. They interrupted face-to-face treatment and prevention services, and hindered efforts to reach pregnant mothers, children and adolescents in need of interventions. They led to increased challenges for antenatal services and to addressing mental health needs as well as domestic and intimate partner violence. They also exacerbated the stigma and vulnerabilities that are already part of many marginalized people’s lives. Further, disruptions in the supply chain for critical HIV treatment and prevention commodities, including testing kits and antiretroviral medicines, added to the risk of people experiencing life-threatening consequences from COVID-related impacts.

The COVID-19 pandemic has generated considerable attention towards public health infrastructures and the importance of strengthening health systems. This has created opportunities for the global community to integrate HIV services into primary health care in ways that place people at the centre of all health programmes.



Drawing a blueprint for children living with HIV in a world with COVID-19

UNICEF invited children, young people and young mothers living with HIV around the world to share their COVID-19 stories, and what UNICEF means to them.

UNICEF WORK AND RESULTS IN 2020

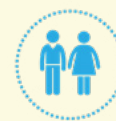
Despite stalled progress at the global level, some countries made impressive, even extraordinary, achievements in response to HIV during 2020. These examples show what is possible when political commitment, partnership, resources and community leadership come together to implement HIV prevention and treatment interventions at scale and offer children and adolescents at risk of or living with HIV a chance to survive and thrive.



650 thousand HIV infections averted during 2018-2020



53% of children with HIV on treatment in 2020



16% drop in the number of new infections among adolescents aged 10-19 years during 2018-2020



48 countries supported to scale up HIV prevention and treatment for children during 2020



2 million antiretroviral packs procured for 44 countries worldwide



5 million diagnostic tests delivered included 500,000 HIV/syphilis combination tests and 200,000 point-of-care infant tests

SERVICE DELIVERY FRAMEWORK: TEST-TREAT-LINK-RETAIN IN CARE

UNICEF's hallmark approach to 'close the treatment gap' includes finding children and adolescents in need of treatment through HIV testing, linking them to services, providing lifelong ART early in the disease, and improving retention in care and adherence. To improve access to care, the response is tailored to the context where people live. Service delivery is designed together with communities. These efforts then go on to inform new and improved health policies, as well as strengthen both health and community systems. In 2020, UNICEF forged a strategic Paediatric Breakthrough Partnership to end AIDS in children by 2025 in three countries – Mozambique, Uganda and Nigeria. The partners are Aidsfonds, Elizabeth Glazer Paediatric Foundation (EGPAF), Paediatric-Adolescent Treatment for Africa (PATA), and ViiV healthcare. The partnership uses UNICEF's Service Delivery Framework to identify programme deficiencies and implement evidence-based best practices to address them.

The global AIDS community missed the 2020 target to provide ART to 1.4 million children (aged 0–14 years) and 1 million adolescents (aged 15–19 years) in need of lifelong HIV treatment. Continued failure to make substantial progress will seriously jeopardize the overall goal of ending AIDS by 2030.

Compared to adults, children living with HIV have a more limited array of antiretroviral regimens.

Immediate steps are needed to ensure the rapid introduction of better drug formulations, and to transition children to these more optimal regimens.

UNDERTAKE PROACTIVE, MULTIFACETED CASE-FINDING TO IDENTIFY CHILDREN LIVING WITH HIV

Children living with HIV, including those who acquire HIV from their mothers during pregnancy and breastfeeding, can be 'missed' by infant diagnosis services. They are often children whose mothers can't themselves access care; children in the hardest-to-reach geographic areas and children of key populations or children of newly infected but undiagnosed mothers. In addition, access to testing for adolescents is particularly poor, even though adolescents – particularly girls and young women – are at high risk of acquiring HIV. UNICEF is working to urgently find where the unidentified and hard-to-reach children and adolescents are, especially those whose parents and family members are known to be living with HIV, so that they can be tested, treated if necessary, and kept on their treatment.

In 2019, only 60 per cent of the 1.3 million children born to mothers living with HIV were tested before two months of age.

IMPLEMENT AND SCALE UP DIVERSE, PROACTIVE TESTING APPROACHES

Technological advances and community-based approaches have made it faster and easier to test for HIV in health facilities or through community settings. Increasing people's access to early diagnosis by testing at multiple service delivery points has long been a focus of UNICEF's work, along with the rapid deployment of point of care (POC) infant testing technologies. These have reduced the time needed to return test results from weeks to just hours, enabling infants and young children with HIV to access timely treatment and care. In 2020, UNICEF, together with partners, introduced a toolkit for POC to enhance and strengthen civil society engagement in raising awareness and increasing demand for HIV diagnostics.

In West and Central Africa, coverage of early diagnosis and paediatric treatment was the lowest globally, at 33 and 32 per cent, respectively.

OPTIMIZE ANTIRETROVIRAL REGIMENS

It is important that new optimal drug formulations are rapidly introduced and that children make the transition to these regimens, so that children with HIV can better suppress the virus. UNICEF is engaging with the World Health Organization and other global partners to help countries transition to the new regimens to improve the quality of paediatric treatment programmes and child outcomes. Actions include adapting national guidelines, accurate forecasting and training, and mentoring of healthcare workers.



A family undergoes testing in the village of Benjaminkro, in the Southwest of Côte d'Ivoire.

SCALE UP INNOVATIVE ADOLESCENT-RESPONSIVE HIV PREVENTION STRATEGIES

Novel strategies and tools have shown promise in bridging the gap between increased prevention knowledge and the actual uptake of innovative testing and biomedical prevention services. But to make a significant impact, these need to be scaled up. UNICEF is working to scale up user-directed tools such as self-testing and pre-exposure prophylaxis (PrEP), as well as the U-Report social networking platform. This platform is helping to raise demand for HIV testing and counselling as well as providing free, confidential and personalized HIV and sexual and reproductive health information through anonymous counselling hubs with trained peer counsellors.

Only 27 per cent of adolescent girls and 16 per cent of adolescent boys aged 15–19 in Eastern and Southern Africa – the region most affected by HIV – were tested for HIV in the past 12 months and received the result of their last test. The testing rates in West and Central Africa and South Asia are even lower.

Only 35 per cent of adolescents in Eastern and Southern Africa and 23 per cent in West and Central Africa – the two regions most affected by HIV – report having comprehensive knowledge on HIV.

EMPOWER ADOLESCENTS AND YOUNG PEOPLE

By participating in how solutions to end AIDS are developed and implemented, adolescents can be effective agents of change in the HIV response. They can help increase prevention awareness, educate others about the risks, improve access to HIV information, and design and plan community programmes and technology-based interventions that provide safe spaces for adolescents. UNICEF's work is focused on engaging with youth-led organizations and networks and implementing community-centred service delivery models that empower and support young people. In 2020, UNICEF used a wide range of digital platforms and devices to reach thousands of young people with messages and services.

ADDRESS ADOLESCENTS' OVERLAPPING VULNERABILITIES TO HIV

The risks and vulnerabilities experienced by adolescent girls and young women are specific to their communities, their circumstances, and a complex mix of behavioural and structural factors. Poverty, little access to schooling, gender dynamics, cultural values and stigma as well as discrimination can all have an impact on how and whether adolescent girls and young women access HIV prevention services. These factors are often compounded by how adolescents are perceived in societies, as well as how health systems are set up to respond to the needs of adolescents. UNICEF's multisectoral approach included integrating HIV within social protection efforts. For example, cash transfer programmes combined with behaviour change communication, access to healthcare and education, mentoring on skilful parenting and financial literacy; provision of safe spaces for context-specific sexual and



U-Report is a social platform created by UNICEF, available via SMS, Facebook and Twitter, where young people express their opinion and act as positive agent of change in their communities. There are 13 million U-Reporters in 76 countries.

reproductive health services and education; and support for a diverse range of community mobilization platforms.

In 2019, 466 adolescents aged 10–19 years became infected with HIV each day.

ADAPT PREVENTION SERVICES TO THE NEEDS AND PREFERENCES OF ADOLESCENTS

Different groups of adolescents – including in different countries and subnational regions — require different, tailored approaches to prevention. Recognizing that a 'one-size-fits-all' strategy will be unsuccessful; UNICEF is using data and digital technologies to introduce and scale up service-delivery interventions that are targeted and innovative. Through this effort, UNICEF is helping to understand specific adolescent populations' situations and learn how to reach them at the right time, in the right place, with the right combination of approaches to deliver interventions such as self-testing and long-acting injectable or oral PrEP.

LOOKING AHEAD

UNICEF and the global AIDS community have come a long way in the fight against HIV but have some distance still to go – especially in the wake of the COVID-19 pandemic. To end AIDS for children and adolescents by 2030, a meaningful meeting of minds must take place with donors, policymakers, programme implementers, health workers and communities, including children and adolescents to understand needs on the ground, brainstorm catalytic responses and stand in solidarity for shared responsibilities.

UNICEF will continue to provide targeted, family-centred service delivery models to reach children and adolescents who are not currently in HIV care, improve data and tracking systems to help those living with HIV survive and thrive with treatment, and ensure the rapid introduction of improved antiretroviral regimens.

With the global stalling of ART coverage in pregnant women, UNICEF's main priority will be to use data to identify why and where new child infections are taking place. In turn, UNICEF will prioritise investments and peer-led and peer-supported actions on critical gaps, including a focus on low-performing locations, to reduce new infections and keep women and children on treatment. As part of these efforts, UNICEF's know-how on solutions, together with its "EMTCT Last Mile" road map, is helping to build further capacity in countries on using data and evidence in a consultative process.

UNICEF will continue to improve HIV prevention services targeting adolescents and young people to assure their healthy transition to a productive

adulthood, free from discrimination and exclusion. Digital technologies will be more adopted as a new delivery platform to help provide PrEP medication and HIV self-testing services to more at-risk adolescents. Pregnant and breastfeeding adolescents who may require additional support, such as skills building and livelihood and childcare support, will remain a cornerstone of UNICEF's prevention work, helping to address the holistic needs of young women and girls. In addition, to ensure communities are at the centre of policymaking and programme implementation, UNICEF will support collaborative learning on promising practices. Investments in data mining and analysis will help to further identify the gaps to be addressed to improve programme performance.

Increased and sustained support is needed to ensure that the progress made in delivering HIV prevention and treatment services is not only safeguarded — particularly given the COVID-19 pandemic — but continues to progress to ensure the health and well-being of children, adolescents and their mothers globally.

UNICEF is working with its partners to urgently develop national and community-level solutions to be delivered through primary health care. The aim is to ensure that essential and quality prevention and treatment services are implemented through differentiated approaches, developed supported by data and evidence and safely delivered to children, adolescents, and pregnant women, while maintaining and continuing COVID prevention measures.



Resilient prevention and adolescents

To commemorate World AIDS Day 2020, we invited some of the youth reporters of the Children's Radio Foundation South Africa to tell us what resilient prevention means to them.



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Achta, a 19-year-old girl, shows condoms during a session to raise awareness about HIV in her community in Moussoro, in the centre of Chad. She has taken advice and information about HIV and contraception.

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[Link to the full report](#)