

## **Early HIV Testing and Treatment Can Save Newborn Lives**

### ***Children and AIDS – a new Report Released on World AIDS***

**TORONTO / NEW YORK – December 1, 2008** – Early diagnosis and treatment can significantly improve the prospects for survival of newborn babies exposed to HIV, according to a report released today by four United Nations agencies.

“We urgently need to strengthen our global efforts to prevent HIV transmission to children and to quickly and effectively diagnose and assist those impacted by HIV and AIDS,” says Nigel Fisher, President and CEO, UNICEF Canada. “We need to make this the last generation of children to bear the brunt of this epidemic.”

The report, entitled *Children and AIDS: Third stocktaking report*, was jointly prepared by UNICEF, the World Health Organization (WHO), the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the United Nations Population Fund (UNFPA) and released on World Aids Day.

“Without appropriate treatment, half of children with HIV will die from an HIV-related cause by their second birthday,” said Ann M. Veneman, UNICEF Executive Director. “Survival rates are up to 75 per cent higher for HIV-positive newborns who are diagnosed and begin treatment within their first 12 weeks.”

However, in 2007, less than 10 per cent of infants born to HIV-positive mothers were tested for HIV before they were two months old. The report advocates for increased testing to enable appropriate treatments to begin as early as possible.

“Today, no infant should have to die of AIDS,” said WHO Director-General Dr. Margaret Chan. “We know how to prevent these tragic deaths, but now we need to focus on strengthening our healthcare systems to ensure that all mothers and children receive treatment as early as possible.”

Early infant testing in some of the countries hardest hit by HIV and AIDS, such as Kenya, Malawi, Mozambique, Rwanda, South Africa, Swaziland and Zambia, is being scaled up. In 2007, 30 low- and middle-income countries were using dried blood spot filter testing, up from 17 countries in 2005. In several countries in sub-Saharan Africa, including Botswana and South Africa, many infants are now tested for HIV at as young as six weeks of age, using dried blood spot testing, and many of those who test positive are provided antiretroviral therapy.

Far too few pregnant women know their HIV status. In 2007, only 18 per cent of pregnant women in low- and middle-income countries were given an HIV test, and of those who tested positive, only 12 per cent were further screened to determine the stage of HIV disease and the type of treatment they require.

“The prevention of mother-to-child transmission of HIV is not only effective, but also a human right,” said UNAIDS Executive Director Dr. Peter Piot. “We are seeing good progress in many

countries, especially in parts of Africa, but we need to significantly scale up HIV testing and treatment for pregnant women.”

The report also recommends increased access to tests assessing immune functions of HIV-positive mothers to determine their stage of HIV disease and provide a basis for decisions about appropriate treatment that addresses their own health needs and reduces the chance of the virus being passed to their offspring.

Addressing prevention is also a key part of the UN strategy on HIV and AIDS. Significant numbers of young people continue to be infected with HIV each year – 45 per cent of all new infections occur in the 15–24 year-old age group. Young people are a component of national HIV strategic plans in 22 countries in West and Central Africa. In Cameroon, the Democratic Republic of the Congo and Nigeria, there are programmes that focus on reducing risky behaviours, vulnerability and disparity among young people both in school and out of school.

“In a world with HIV and AIDS, young people need comprehensive information and education and access to sexual and reproductive health services to protect their right to health,” said Thoraya Ahmed Obaid, UNFPA’s Executive Director. “Preventing HIV infection in women is the first line of defence in preventing HIV in newborns. Involving young people in HIV-prevention efforts is the best way to ensure that programmes are well-targeted and effective.”

Pediatric AIDS treatment, prevention of mother-to-child transmission and prevention of new infections among adolescents and young people are three of the four core components of *Unite for Children, Unite against AIDS* discussed in the Stocktaking report. The last section advocates for expanded protection and care for the approximately 15 million children globally who have lost either one or both of their parents due to AIDS, sparking greater attention to the needs of all vulnerable children.

### **Canadian-assisted initiatives**

UNICEF Canada supports the prevention of mother-to-child transmission of HIV, the provision of pediatric treatment for children affected by HIV and AIDS, the prevention of infection among adolescents and young people, and protection and support for children affected by HIV and AIDS in the Caribbean, China, India, Namibia, Rwanda, Malawi and Ukraine. Canadians can support UNICEF’s programmes for children affected by HIV and AIDS by giving to UNICEF Canada’s *Unite for Children, Unite against AIDS* campaign ([www.uniteforchildren.ca](http://www.uniteforchildren.ca)) or by becoming a monthly donor to the *Time to Draw the Line* initiative.

In a powerful community initiative, Kiwanis Clubs of Eastern Canada and the Caribbean, comprising over 8,400 men and women in 270 Kiwanis clubs, have set a goal of raising \$1 million over the next three years to support UNICEF Canada’s *Unite for Children, Unite against Aids* campaign in Jamaica, Guyana, and Trinidad and Tobago.

## **Unite for Children, Unite against AIDS**

***Help make this generation of children the last to bear the brunt of this epidemic.***

**[www.uniteforchildren.ca](http://www.uniteforchildren.ca)**

**About UNAIDS:**

UNAIDS is an innovative joint venture of the United Nations, bringing together the efforts and resources of the UNAIDS Secretariat and ten UN system organizations in the AIDS response. The Secretariat headquarters is in Geneva, Switzerland – with staff on the ground in more than 80 countries. Coherent action on AIDS by the UN system is coordinated in countries through UN theme groups, and joint programmes on AIDS. UNAIDS' Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. [www.unaids.org](http://www.unaids.org)

**About UNICEF:**

UNICEF is on the ground in over 150 countries and territories to help children survive and thrive, from early childhood through adolescence. The world's largest provider of vaccines for developing countries, UNICEF supports child health and nutrition, good water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. UNICEF is funded entirely by the voluntary contributions of individuals, businesses, foundations and governments. [www.unicef.org](http://www.unicef.org)

**About WHO:**

As the directing and coordinating authority on international health, the World Health Organization (WHO) takes the lead within the UN system in the global health sector response to HIV/AIDS. The HIV/AIDS Department provides evidence-based, technical support to WHO Member States to help them scale up treatment, care and prevention services as well as drugs and diagnostics supply to ensure a comprehensive and sustainable response to HIV/AIDS. [www.who.int](http://www.who.int)

**About UNFPA:**

UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect. [www.unfpa.org](http://www.unfpa.org)

**For further information, please contact:****UNICEF Canada**

Kathleen Powderley, Media Relations Consultant

Tel: (416) 482-4444 ext. 8810 – Cell: (416) 803-5597 – (416) 699-5665

[KPowderley@unicef.ca](mailto:KPowderley@unicef.ca)

**UNICEF**

Kate Donovan, Tel: (212) 326-7452, e-mail: [kdonovan@unicef.org](mailto:kdonovan@unicef.org)

**UNFPA**

Rosemary Musumba, Tel: (212) 297-4929, e-mail: [musumba@unfpa.org](mailto:musumba@unfpa.org)

**WHO**

Pat Leidl, Tel: +41 22 791 5876, e-mail: [leidlp@who.int](mailto:leidlp@who.int)

**UNAIDS**

Edward Mishaud, Tel: +41 22 791 5587, e-mail: [mishaude@unaids.org](mailto:mishaude@unaids.org)