



Press Release

African launch of the Global Alliance to end AIDS in Children by 2030 offers hope

This week ministers from 12 African countries¹ are meeting in Dar es Salaam to endorse Country Action Plans and make commitments for ending AIDS in children for each of the partner countries. This follows the announcement of the new Global Alliance to end AIDS in Children by 2030 at the International AIDS Conference in Montreal on 1 August 2022. The Global Alliance was proposed by UNAIDS, networks of people living with HIV, UNICEF and WHO together with PEPFAR and the Global Fund and seeks to achieve broad participation of stakeholders, national governments, implementing agencies, regional and community-based organizations, faith-based and community partners including women, children and adolescents living with HIV.

RIATT-ESA and all its members welcome the Global Alliance because it is widely recognised that the global HIV response is failing to meet the needs of children². In 2021, only 41% of children (aged 0-14 years) living with HIV globally received antiretroviral therapy, compared to 70% of adults living with HIV, well short of the global target of 95% treatment coverage. Children continue to experience a disproportionate share of AIDS-related deaths, 98,000 in 2021, when children accounted for only 4% of people living with HIV but 15% of AIDS-related deaths. In addition, only 41% of children living with HIV had a suppressed viral load, which is not within reach of the target of 75% in 2023. Dr Tedros Adhanom Ghebreyesus, WHO Director-General, said at the launch of the Global Alliance last August, “The fact that only half of children with HIV receive antiretrovirals is a scandal, and a stain on our collective conscience”.

The Global Alliance aims to do things differently from previous initiatives by:

- Building momentum over a longer period – 9 years from 2022 to 2030 in three phases, each of which will be characterized by the involvement and leadership of different regional and national partners;
- Promoting more inclusive leadership and country ownership with the active participation of national programmes as well as affected communities – especially children, adolescents, pregnant women and mothers living with HIV, to jointly lead, develop and execute implementation plans;
- Giving greater prominence to tackling structural barriers and human rights abuses faced by adolescents, young women and key populations, such as stigma and discrimination, criminalisation and gender-based violence;

¹ The 12 countries in the first phase of the Global Alliance are Twelve countries have joined the alliance in the first phase: Angola, Cameroon, Côte d'Ivoire, The Democratic Republic of the Congo (DRC), Kenya, Mozambique, Nigeria, South Africa, Tanzania, Uganda, Zambia, and Zimbabwe.

² UNAIDS, Global AIDS Update 2022

- Increasing advocacy and ensuring that senior high-level engagement from partners including countries, UN agencies, global networks of PLHIV, implementers, PEPFAR and Global Fund continue to drive support for the Alliance.

Whilst there is much hope for the Global Alliance, there are two potential challenges that have negatively impacted previous initiatives, which must be avoided. First, national and global political momentum must be sustained in order that the country action plans continue to be prioritised and adequately funded. Second, the very worthy intention is that leaders will be held accountable for their commitments and targets to the Country Action Plans through accountability mechanisms, such as community monitoring, but these will require sustained advocacy and enforcement, which has rarely been achieved in previous initiatives. However, the mood music is currently very upbeat and that is cause for celebration and RIATT-ESA and all its members look forward to supporting the Global Alliance as it moves into implementation.