

# Call to Action: Towards an HIV-free and AIDS-free generation

Prevention of Mother to Child Transmission (PMTCT) High Level Global Partners Forum, Abuja, Nigeria, December 3, 2005

***We, representatives of Governments, multilateral agencies, development partners, research institutions, civil society and people living with HIV, assembled as a matter of urgency at the PMTCT High Level Global Partners Forum in Abuja, Nigeria, December 1-3, 2005 to take stock and accelerate action to address the prevention of mother-to-child transmission of HIV:***

Noting that the Declaration of Commitment on HIV/AIDS, issued at the United Nations General Assembly Special Session on HIV/AIDS in 2001, commits its 189 Member State signatories to reduce the proportion of HIV-infected children born to mothers with HIV infection by 20% by the year 2005; and by 50% by the year 2010;

Noting that comprehensive programmes to address mother-to-child transmission include strategies to prevent HIV transmission to women; to provide reproductive health care to women living with HIV; to prevent HIV transmission during pregnancy, labour and delivery; to minimise HIV transmission through safer infant feeding practices; and provide care, support and treatment services to women, infants and their families;

Acknowledging the call of the G8 nations at their Gleneagles Summit in July 2005 for the development and implementation of “a package for HIV prevention, treatment and care, with the aim of as close as possible to universal access to treatment for all those who need it by 2010” and reaffirming the commitment made by UN Member States at the UN General Assembly World Summit in September 2005 to scale-up comprehensive national AIDS responses between now and 2010, the midpoint between 2005 and the Millennium Development Goals target year of 2015;

Recognizing that every day there are nearly 1,800 new HIV infections in children under 15 years of age, more than 90% occurring in the developing world and most associated with mother-to-child transmission, and every day 1,400 children under 15 years of age die of HIV-related illness;

Noting that in high-income countries mother-to-child transmission of HIV is now rare and infections in infants and young children are being eliminated and, in contrast, that less than 10% of pregnant women in developing countries are being offered interventions to prevent transmission of HIV to their infants – and agreeing that this is a major inequity and social injustice;

Acknowledging evidence that confirms that effective large scale programmes to prevent mother-to-child transmission of HIV can be implemented in settings with limited resources;

Recognizing that 15% of new infections each year are caused by mother-to-child transmission and that elimination of HIV infection in infants and young children would serve to accelerate global HIV prevention efforts; and

Noting that aggressive efforts to reduce mother-to-child-transmission of HIV and eliminate HIV infection in infants and young children would also help to hold families together, benefit communities and reduce the stigmatization of people living with HIV;

1. **SOLEMNLY COMMIT** to work together to achieve the goal of an HIV-free and AIDS-free generation across the globe through:

National governments demonstrating commitment and leadership and aspiring to achieve the goal of elimination of HIV infection in infants and children through:

- a) improving standards of care and adopting measurable time- bound targets for the elimination of HIV infection in infants and young children and strengthening national monitoring and evaluation systems for tracking progress and monitoring quality performance; and developing strategies to improve service quality and uptake;
- b) allocating national financial resources and mobilising external resources to strengthen health systems for the delivery of PMTCT services, including ensuring reliable supplies of essential commodities; undertaking human resource planning and developing retention strategies, including shifting of tasks and involvement of non-medical staff;
- c) integrating PMTCT interventions into maternal and child health services and strengthening linkages to other health and nutrition programmes, including other sexual and reproductive health programmes and HIV care, support and treatment programmes;
- d) decentralizing programmes, developing community mobilisation and other strategies that go beyond clinical settings to reach out to women who are not accessing antenatal care or who are not delivering in clinical settings;
- e) engaging local communities and people living with HIV as key players in programme expansion and reduction of stigma and discrimination;
- f) undertaking operational and other research to continuously improve programmes to prevent mother-to-child transmission of HIV;

Multilateral agencies, development partners and other global partners supporting national PMTCT strategies by investing appropriate and adequate financial and technical resources and facilitating the development of nationally-led human resource capacity building plans;

Strategies that are anchored in the **Three Ones Principles**: one agreed AIDS action framework that provides the basis for coordinating the work of all partners, including civil society partners and the private sector; one national coordinating authority with a broad-based multisectoral mandate; and one agreed country-level monitoring and evaluation system;

2. **CALL UPON** other governments, development partners, civil society and private sector to join this Call to Action, and move swiftly towards supporting the measures needed to eliminate HIV in infants and young children and clear the way for a worldwide HIV-free and AIDS-free generation.