

Adolescents & AIDS

Dr. Chewe Luo

Chief HIV/AIDS, UNICEF

Associate Director, Programmes Division

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Professor Father Micheal Kelly Annual Lecture on HIV/AIDS

Dublin, Ireland

The outlook for hundreds of thousands adolescents is bleak.

In 2016, the world committed once again to bold targets for women, children and adolescents at risk of and/or living with HIV.

How the world comes together in the next 36 months to finally address the needs of the forgotten populations of children and adolescents will be a major driver of the success in putting an end to AIDS.

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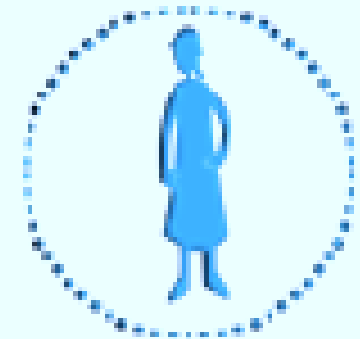
Key points

- Adolescents are being left behind.
- AIDS is a leading killer of adolescents in Africa.
- Adolescents are the only age group in which AIDS-related deaths have not decreased.
- Prevention efforts need to be intensified and targeted to reach those most at risk; adolescent girls in sub-Saharan Africa and adolescent key affected populations.
- Stigma and discrimination, along with policy and legal barriers such as age-of-consent or punitive laws, prevent services from reaching adolescents.

In 2016

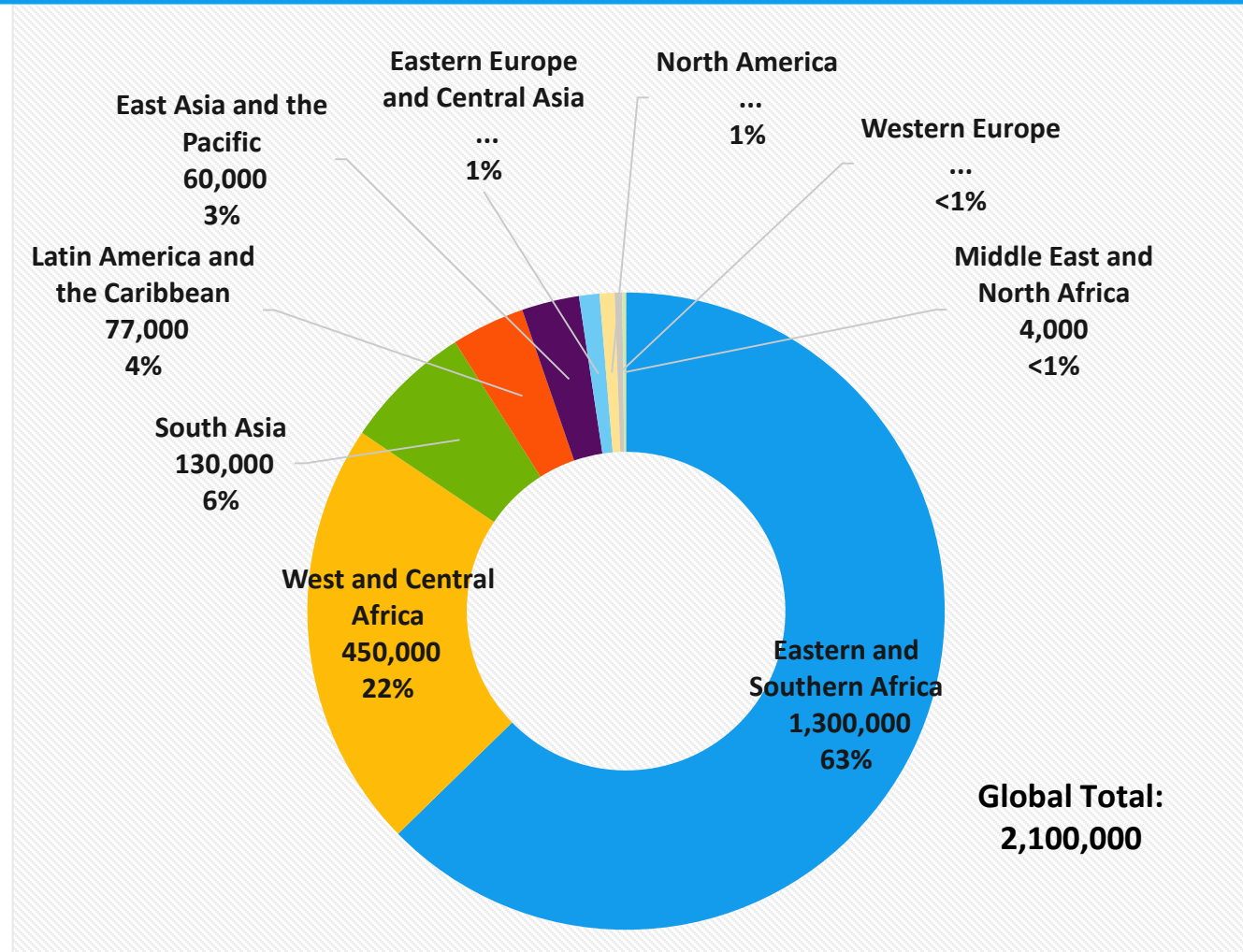


260,000 NEW HIV
ADOLESCENT INFECTIONS



2.1M ADOLESCENTS
LIVING WITH HIV

Sub-Saharan Africa is carrying the burden of the HIV epidemic among adolescents(10-19) living with HIV

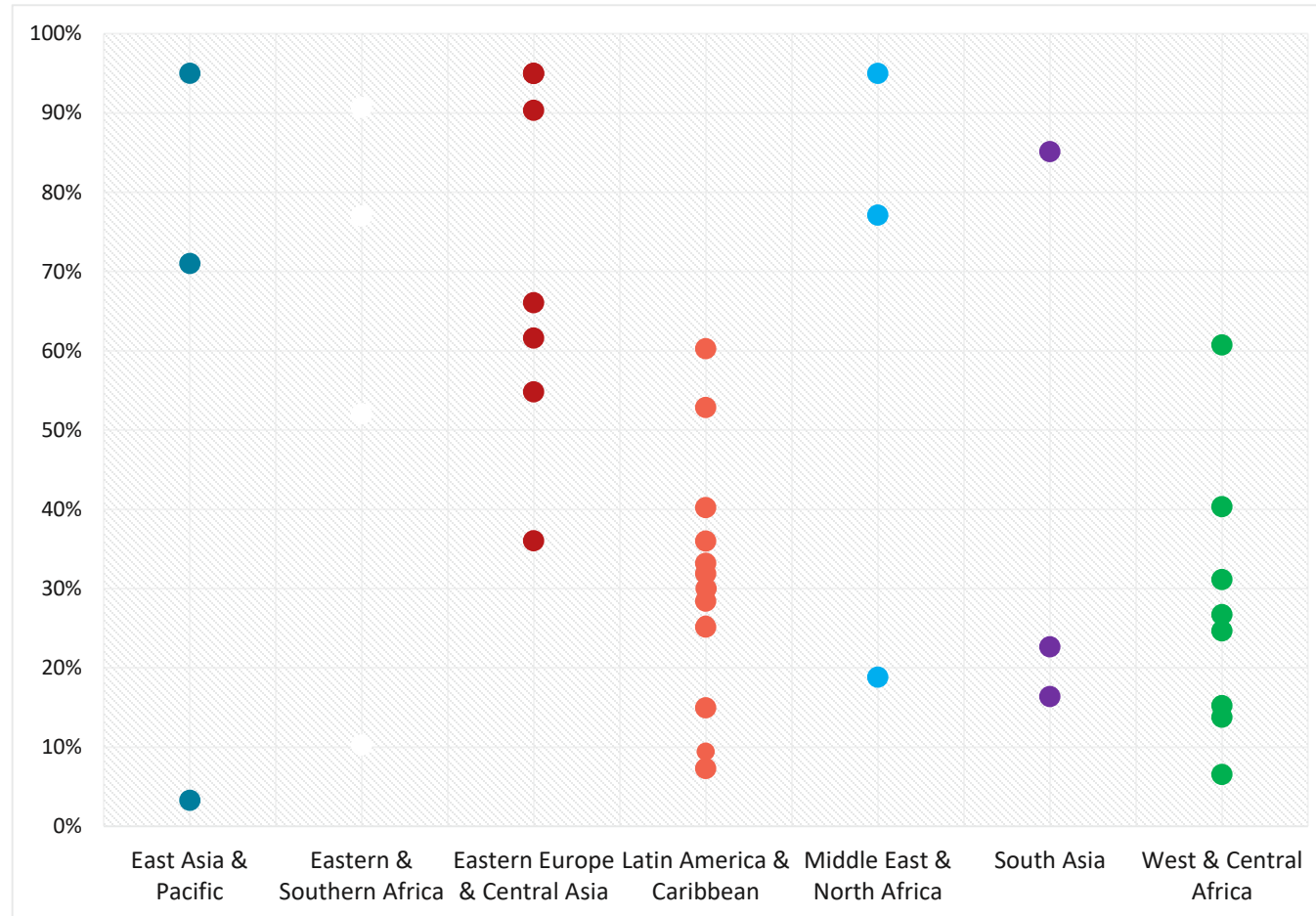


Source: UNAIDS 2017 estimates

Note: Data not available for Eastern Europe and Central Asia, North America, and Western Europe.

Most adolescents are not accessing lifesaving antiretroviral therapy

Percentage of adolescents (aged 10—19) living with HIV who are receiving ART, 41 countries reporting by UNICEF regions, 2016

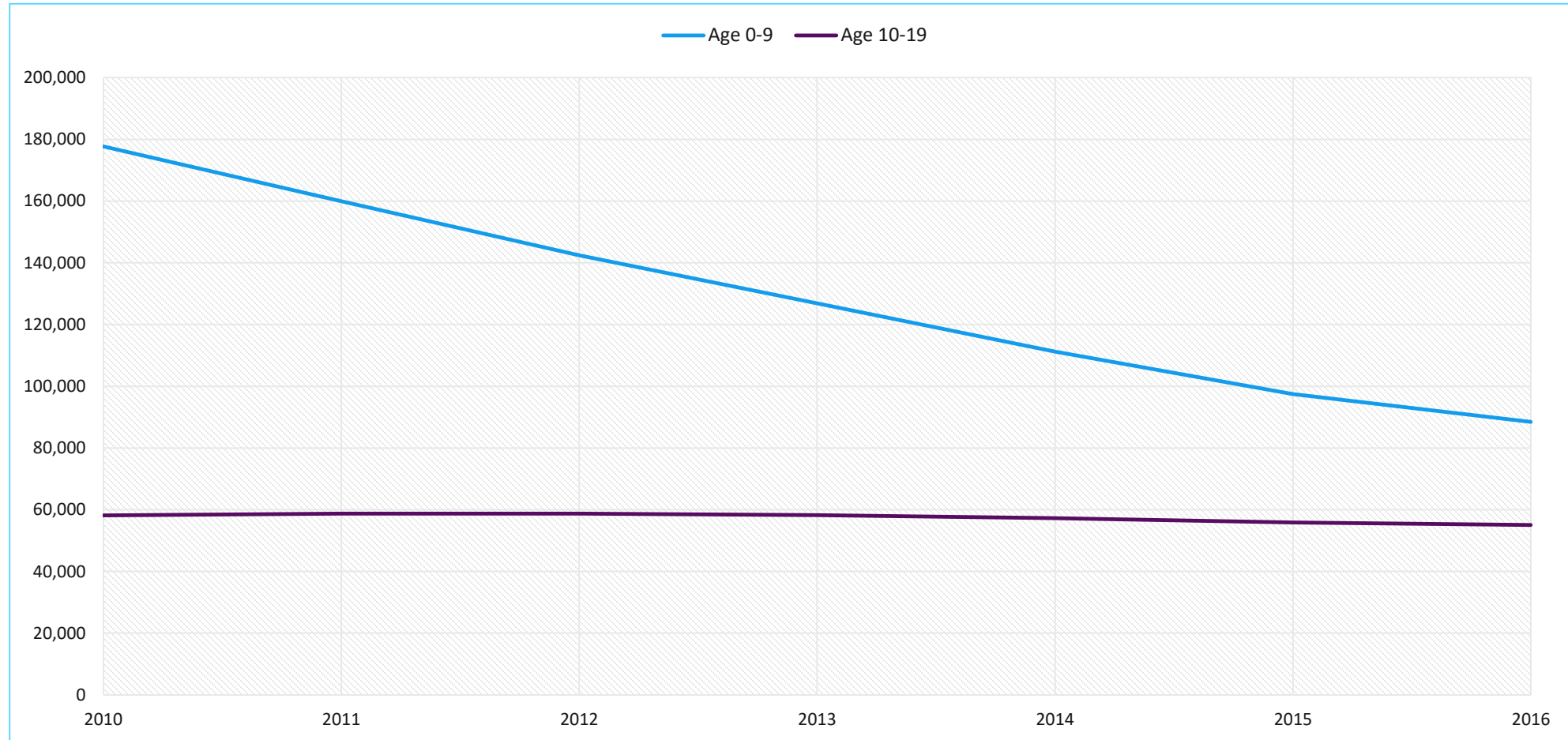


Source: UNAIDS/UNICEF/WHO Global AIDS Response Progress Reporting and UNAIDS 2017 estimates

Note: Global reporting of ART numbers by 5-year age group began in 2014 and not all countries are yet able to report ART numbers disaggregated to this level of age specificity. As a result, the values above represent 67 countries that were able to report adolescent ART data for 2015 (either full-year or first 6 months). These 67 countries account for 16% of all adolescents (aged 10—19) living with HIV globally.

AIDS-related deaths among adolescents are not decreasing

Estimated number of AIDS-related deaths, by 10-year age groups, 2010-2016



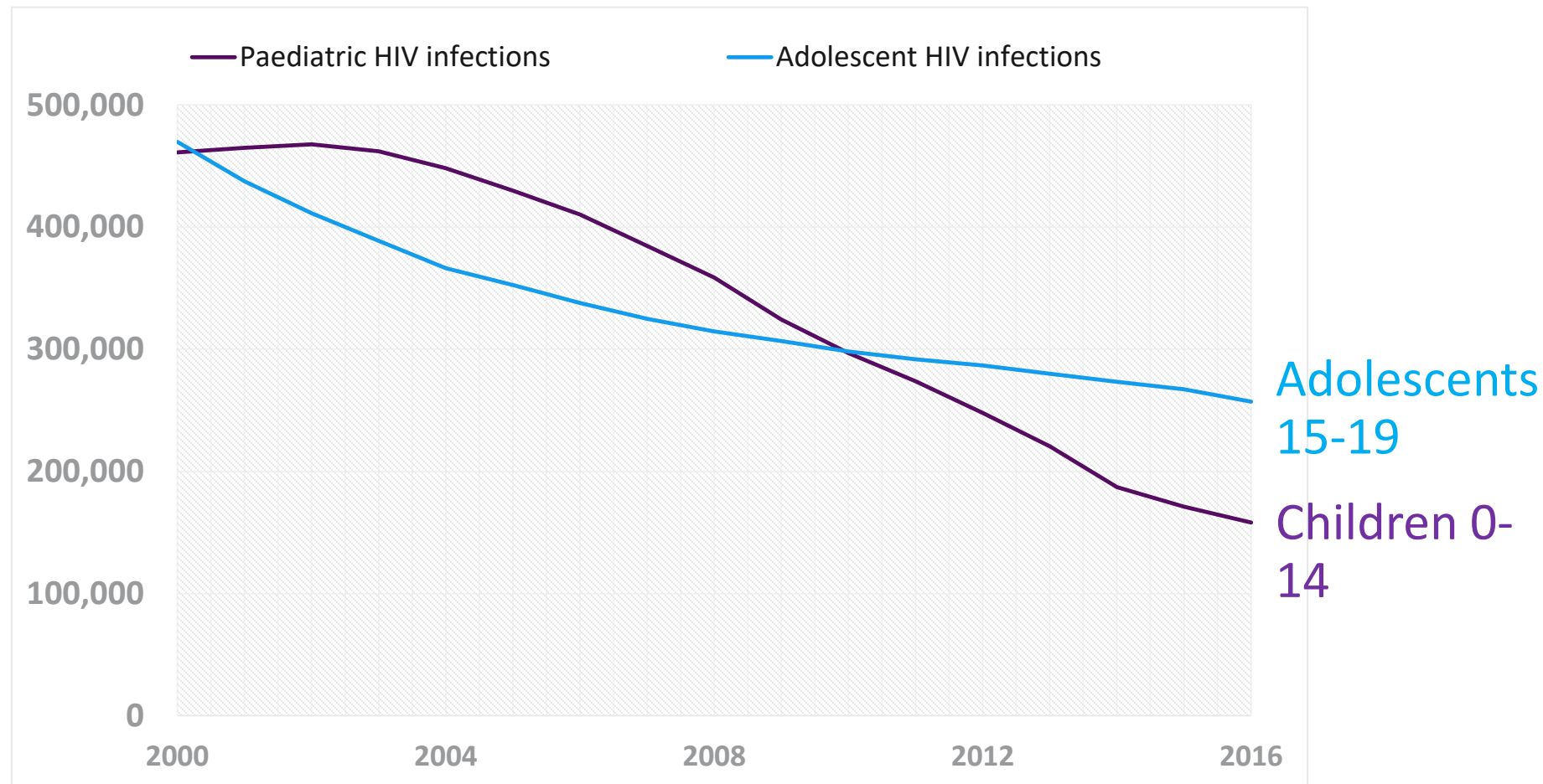
In 2016,

55,000
AIDS
DEATHS
AMONG ADOLESCENTS (10—19)



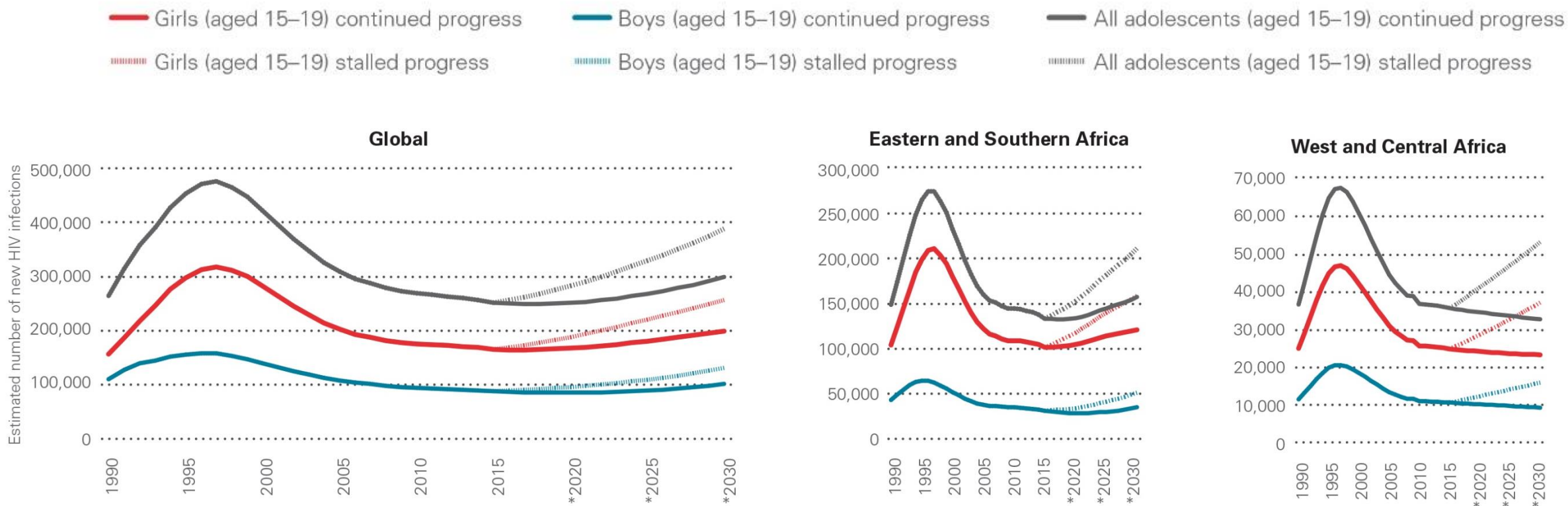
SUB-SAHARAN AFRICA
ACCOUNTS FOR 9 IN 10
OF ADOLESCENT
AIDS-RELATED DEATHS

New HIV infections among adolescents 15-19 not decreasing as quickly as among children 0-14



New adolescent HIV infections are projected to rise

Global trends 1990–2015, with 2016–2030 projections accounting for demographic shift

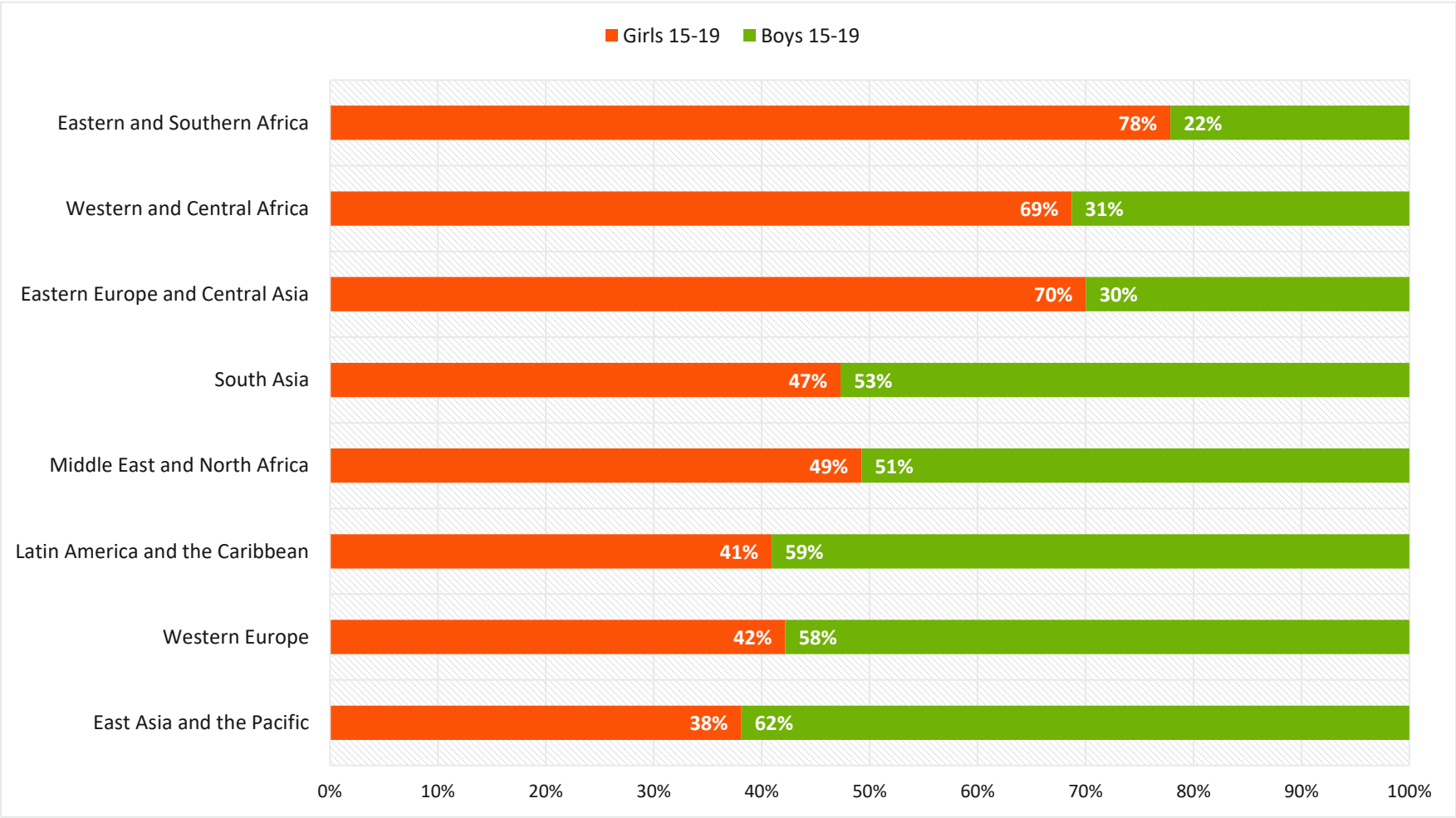


*Note: Projections for 2016–2030 are based on the 2009–2015 average annual rate of change in incidence rates (new HIV infections out of the non-HIV-infected population). Two scenarios are presented: (1) 'Continued progress' shows the continuation of the average annual rate of change in incidence rates; (2) 'Stalled progress' shows only the latest incidence rate (2015) continued through 2030. In countries where the incidence rate was increasing between 2009–2015, the average annual rate of change is employed in both scenarios. Only ages 15–19 were analysed because current models do not account for behavioural transmission prior to age 15.

Source: UNICEF analysis of UNAIDS 2016 estimates, July 2016.

Gender plays an important role in determining risk among adolescents

Estimated distribution of new HIV infections among adolescents aged 15-19, by sex, UNICEF region, 2016

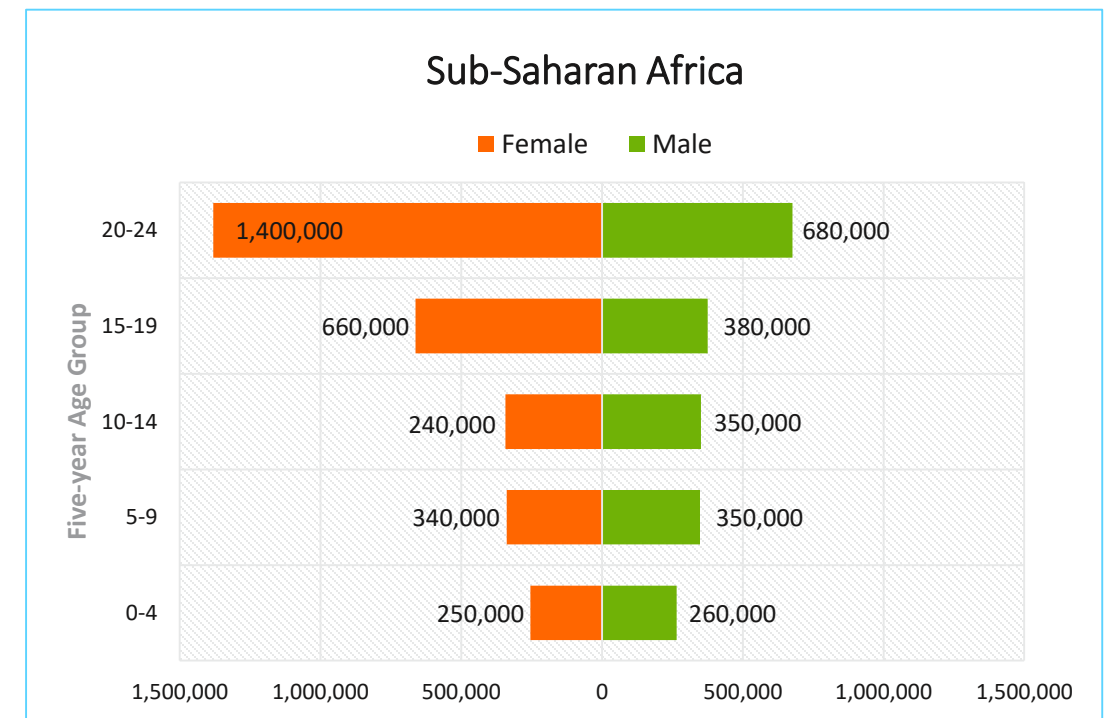
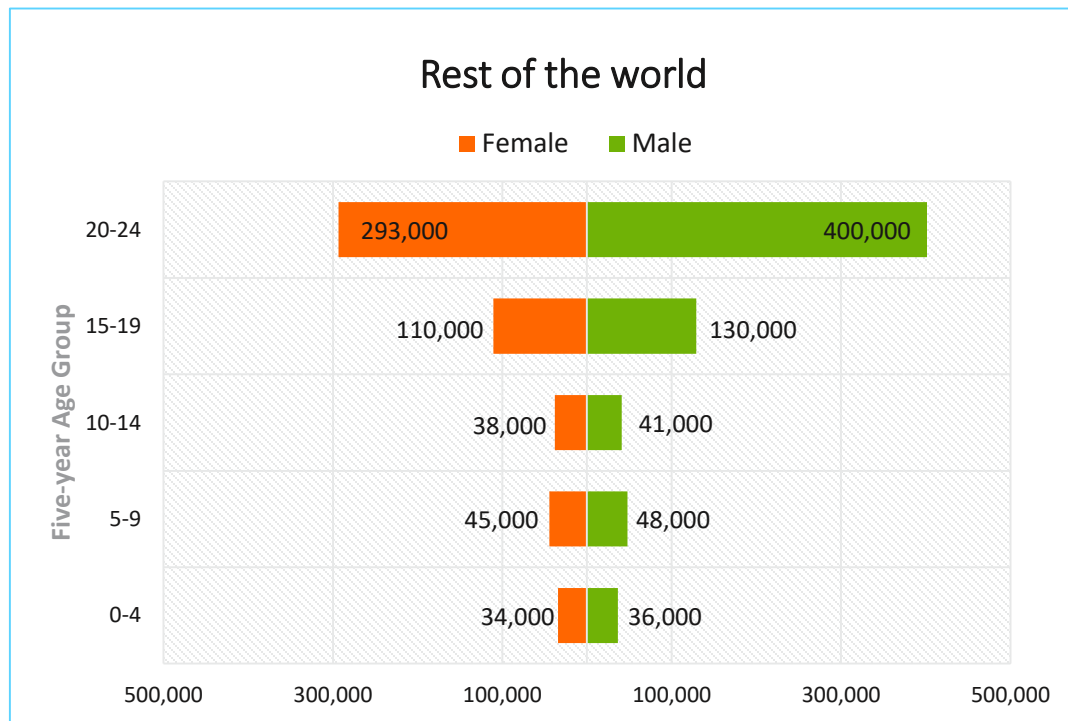


Source: UNAIDS/UNICEF/WHO Global AIDS Response Progress Reporting and UNAIDS 2017 estimates

Note: Data not available for North America

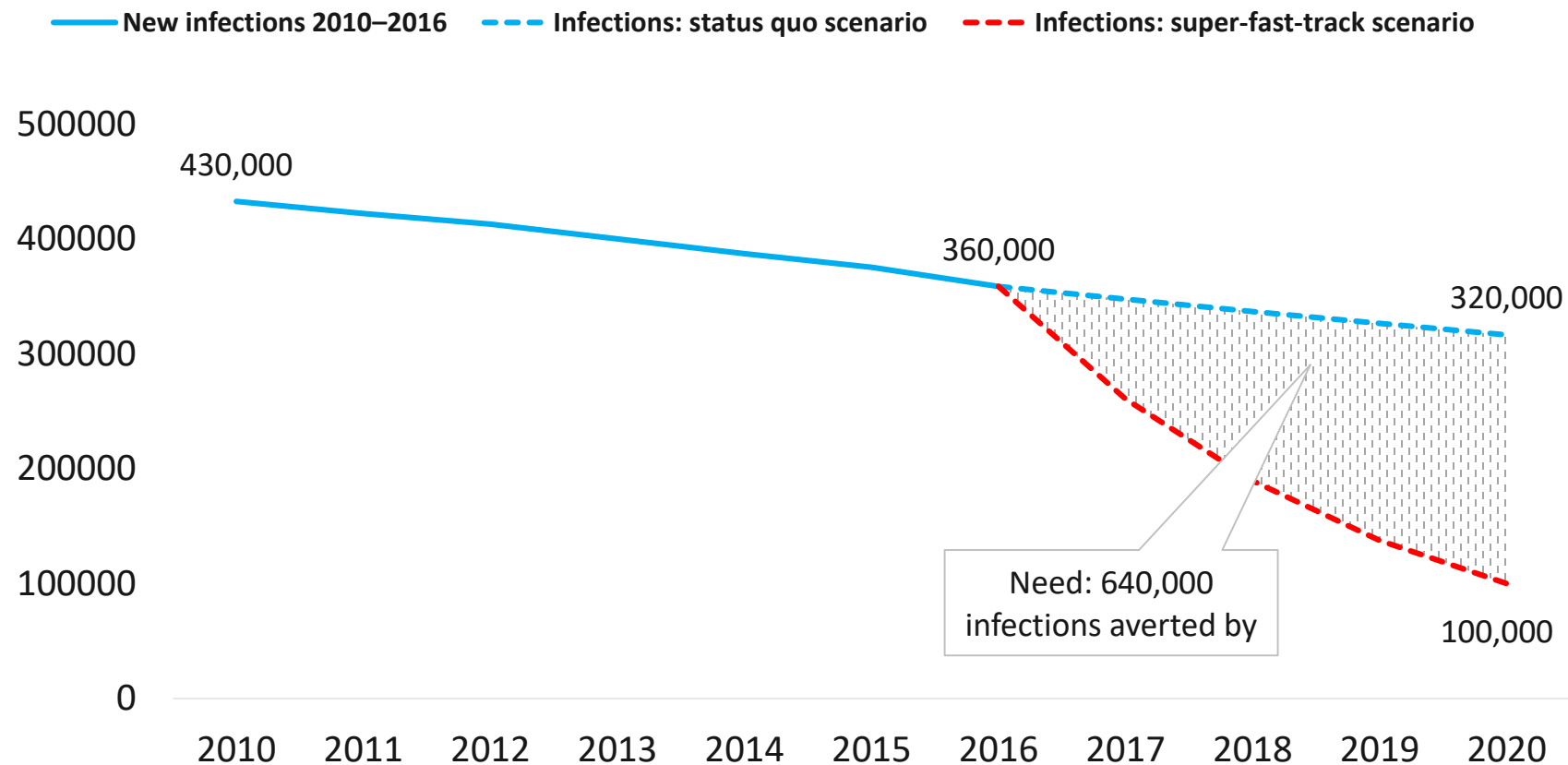
Risk related to gender changes throughout the life course of the child

Estimated number of children, adolescents and youth living with HIV, global, 2016



Dramatic shift is needed to meet targets set for adolescent girls and young women

Trends and projections in the number of new HIV infections among adolescent girls and young women (aged 15—19) toward the super-fast-track 2020 target

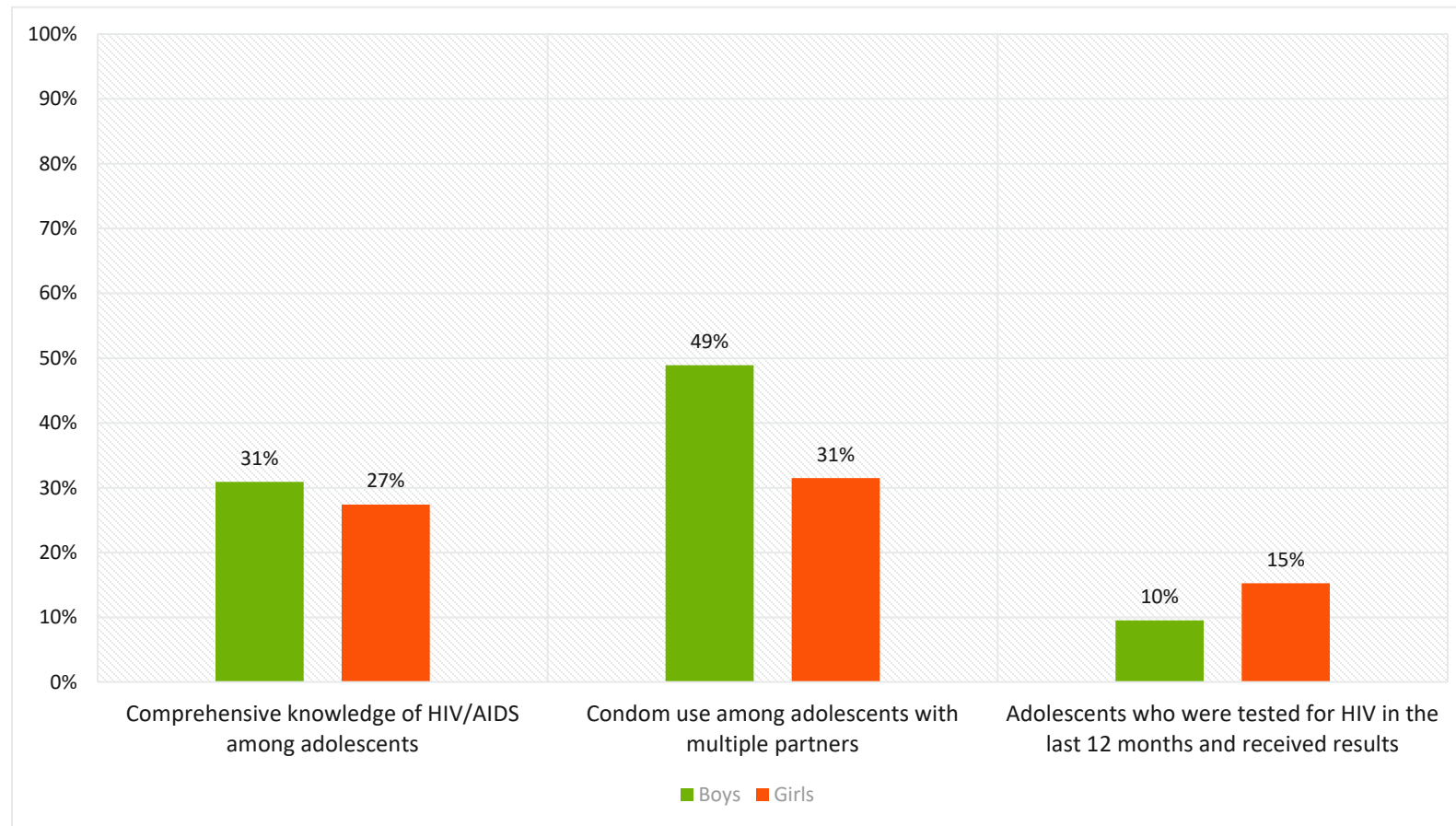


Source: UNICEF analysis of UNAIDS 2017 estimates

Note: This chart assumes the super-fast-track target of achieving only 100,000 new infections among adolescent girls and young women globally by 2020. Projections have been calculated by calculating the average annual rate of reduction from 2010–2016 and applying that rate through 2020. Projection trends towards each target assume an average annual rate of increase from 2016 to 2020.

Adolescents still lack knowledge, are not using condoms and are not accessing HIV testing

Selected indicator coverage among adolescent boys and girls (aged 15—19), Sub-Saharan Africa, 2010-2016



Source: UNICEF analysis of DHS, MICS, and other national household surveys, 2010-2016

Note: Regional summaries are only available for regions in which at least 50% of the population is represented in surveys from 2011 to 2016;



In summary, global targets will not be met for adolescents

The 2017 UNICEF analysis of UNAIDS data suggest that without accelerated action, the **All IN** and super-fast-track targets for reducing new HIV infections in adolescents and young women, and for increasing HIV treatment in adolescents with HIV will not be met.



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#EndAdolescentAIDS



EVERY WOMAN
EVERY CHILD



FAST-TRACK

ENDING THE AIDS EPIDEMIC BY **2030**

Super Fast Track to End AIDS

for children, adolescents, young women and expectant mothers

Agenda for Action

- To accelerate HIV results with and for **adolescents (10-19 years)** particularly excluded groups

Fast Track” and “90/90/90” Alignment

- To end the AIDS epidemic as a public health threat by **2030**

Platform for Partnership and Engagement

- To strengthen cross-sectoral **partnerships** and foster **involvement of adolescents** in all aspects of programming and advocacy for adolescents

Attention to Data

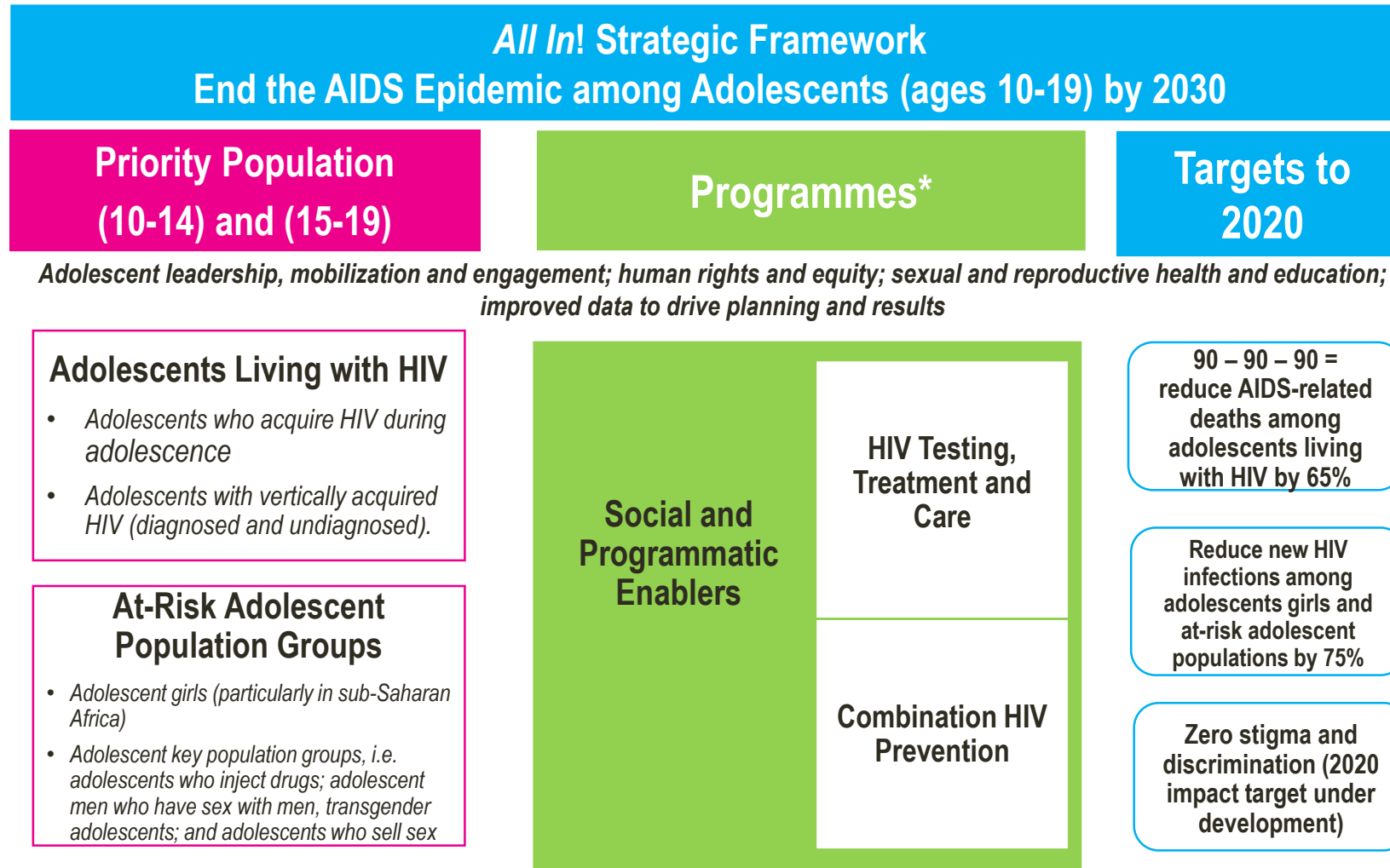
- To support countries to improve **data collection, analysis and utilization** for programme planning, M&E

Focus on Adolescents

- To amplify and complement **adolescent-focused initiatives, investments & resource mobilization** efforts , e.g. PEPFAR ACT and DREAMS, and national and GFATM funded initiatives for adolescents

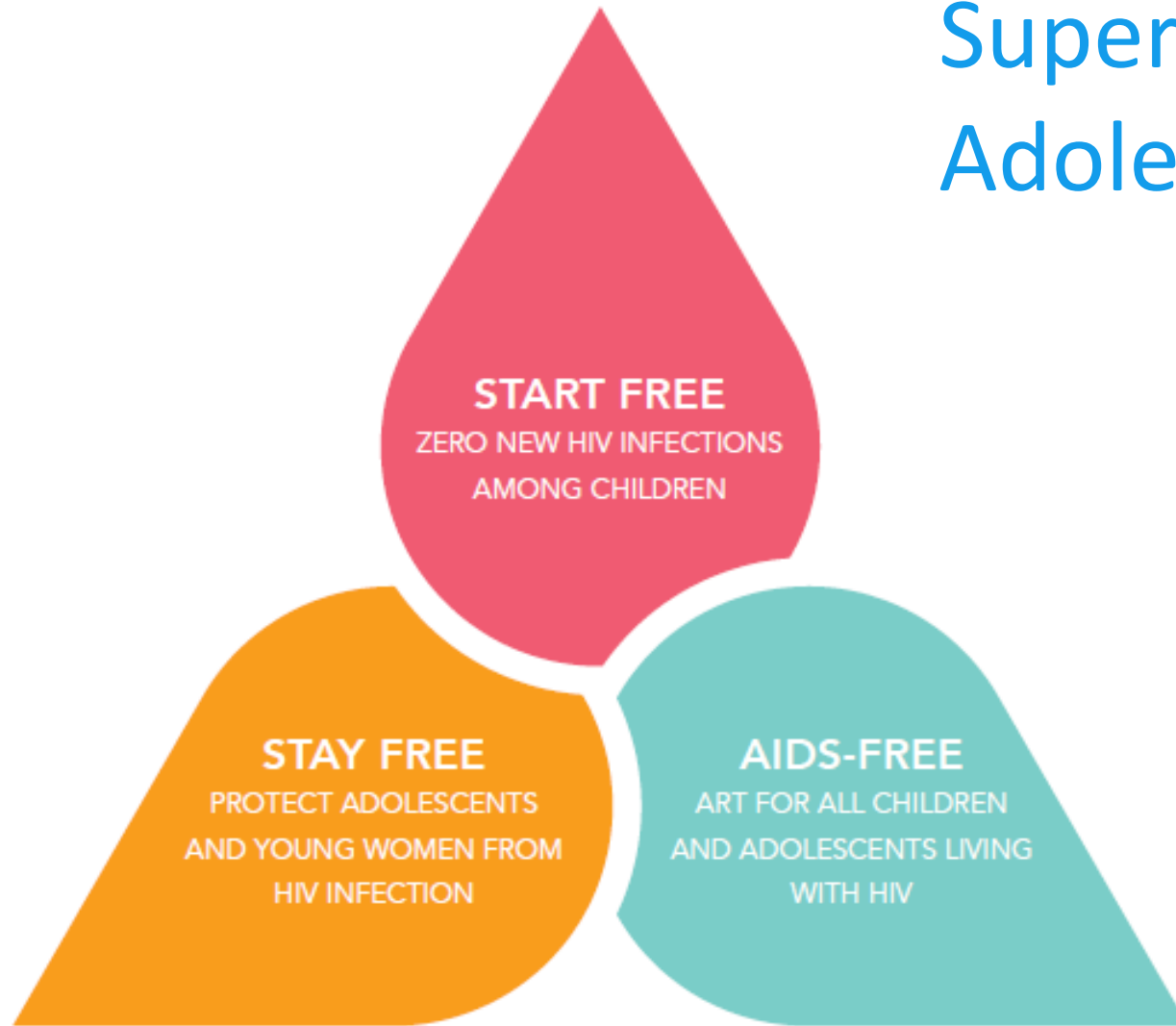
ALL IN: Strategic Framework

Vision: ZERO New Infections; ZERO Deaths; ZERO Discrimination



***PACKAGE:** appropriate mix of proven programmes for each defined adolescent population group based on epidemiological and social context

UN High Level Session on HIV Super-Fast-Track Targets for Adolescents



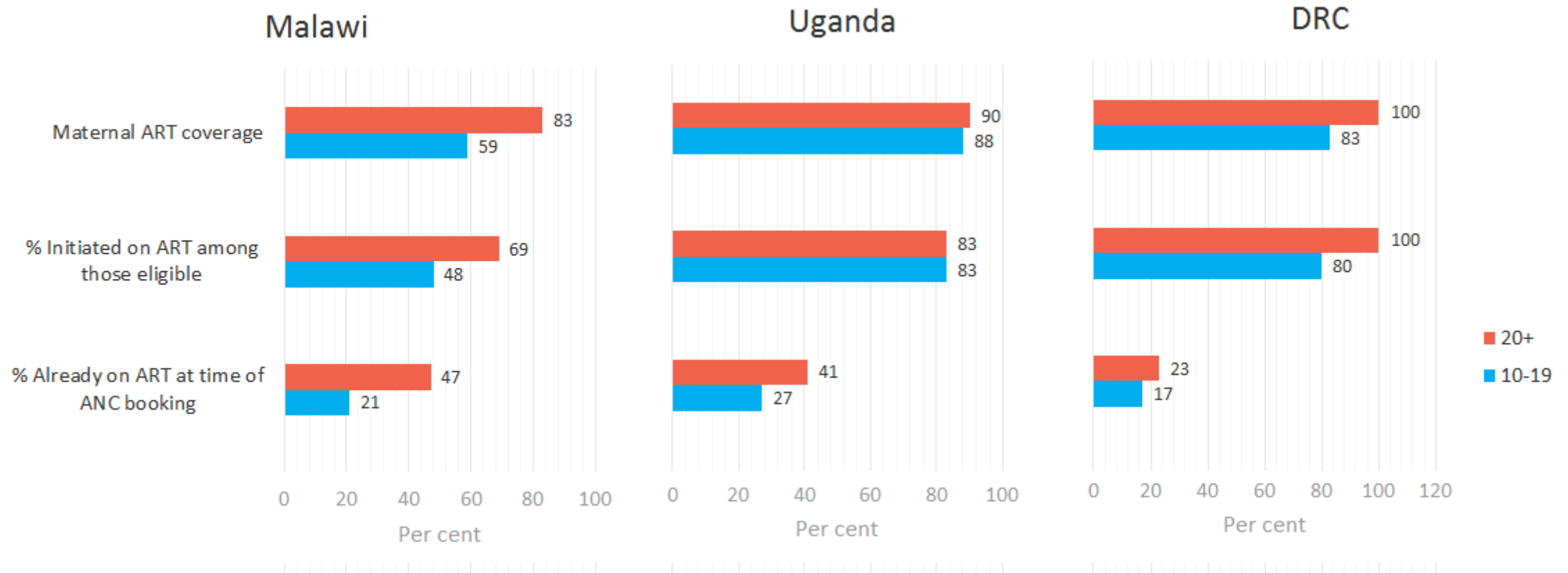
- UNICEF and PEPFAR (US Government) co-leading on Stay Free
- Reduce the no. of new HIV infections among adolescents and young women to <100,000/yr by 2020
 - Also a target to include in the Global Prevention Coalition
- Provide 1 million adolescents (aged 15–19 years) with HIV treatment by 2020



UNICEF's Respons

Emerging programme data indicate **the reach of adolescents girls** in PMTCT / ART is lagging and better investments targeting adolescents are needed

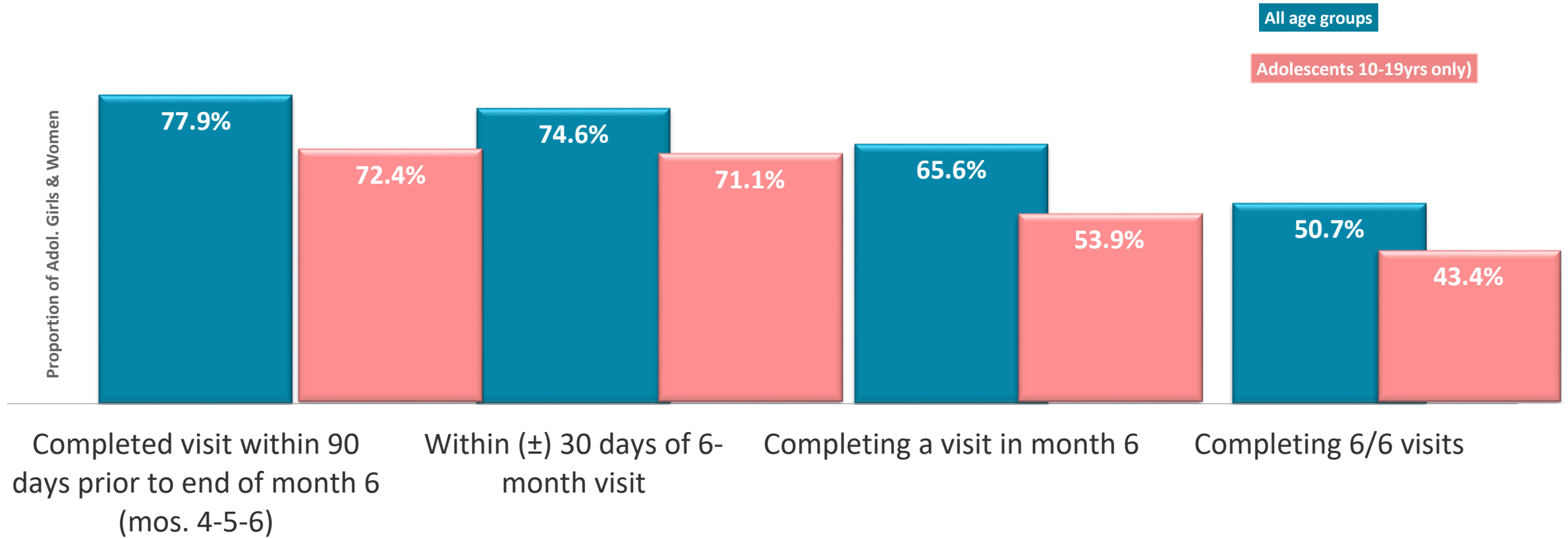
Approach



Comparison of key PMTCT/ART indicators among newly enrolled ANC clients by age group in Malawi, Uganda and DRC

Source: UNICEF and Governments of Malawi, Uganda and DRC. Optimizing HIV Treatment Access for Pregnant and Breastfeeding Women, 2014 with support from Sweden and Norway

Likewise, programme data shows that the **retention of adolescent girls** in PMTCT / ART is lower than for adults



Retention in the Context of Option B+ among age groups in Uganda

Invest in new ways to reach adolescents outside clinics

HIV counseling and testing & school interventions

Targeted HIV counselling and testing, linked with other services (e.g. referral systems and PICT) at school and community level

- **South Africa:** Youth in a high prevalence setting experienced a 41% reduction in the hazard of HIV acquisition following HTC, an effect sustained for 4.5 years.
- **Namibia:** School Based HIV Counselling and Testing and Pilot project (2014): Evaluation showed that HIV counselling and testing in schools is appropriate to the needs of adolescent learners. It also increases the uptake of HIV testing and counselling.



Invest in
reaching
adolescents
where they are
with the
services they
need



Brazil: Mobile Health Clinic for adolescents to expand testing to at risk adolescents

UNICEF Call to Invest in innovative programmes for adolescents at greatest risk of infection including Pre-exposure prophylaxis

- **UNICEF consultation with scientists and implementers helped to define directions for PREP implementation targeting adolescents**



Invest in adolescents themselves – as agents of change



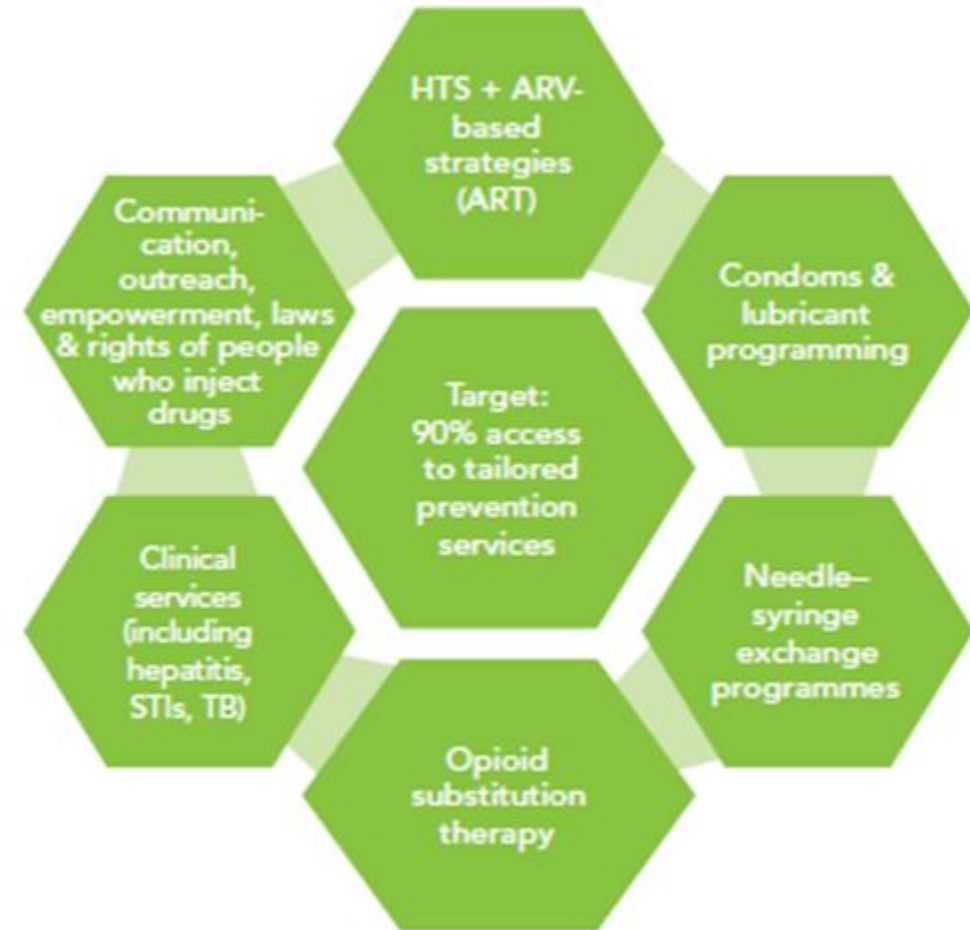
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U-Report: is a social messaging tool for engaging young people around the world to speak out on issues that affect them. Today it has over 2.4 million registered users, and is live in over 25 countries

A differentiated & targeted approach is required for adolescents

- Service package has to be cross-sectoral for adolescents
- Menu options across interventions and policy / structural actions to promote cross-sectoral synergies
- Differential approach for different epidemic settings based on Country Data and Local Context



Examples of a combination HIV prevention package for people who inject drugs

Source: UNAIDS, Fast-tracking combination prevention: Towards reducing new HIV infections to fewer than 500 000 by 2020. UNAIDS, 2015

Collaborate with partners

- UNICEF has been a longstanding partner of Ireland.
- Ireland serves on the UNICEF Executive Board.
- Ireland was among UNICEF's top twenty international donors in 2016.
- Since 1993, Ireland has contributed to UNICEF funding of over \$330m
- In 2016, Irish Aid contributed €23,275,818 directly to UNICEF, comprising core funds and other earmarked resources (regular and emergency).
- Alongside providing funding from HQ, Ireland provides funding to UNICEF through its Bi-lateral Programmes.
- In 2016, bi-lateral funding provided to UNICEF for Health programmes including HIV:
 - €2,000,000 for the Health Development Fund in Zimbabwe
 - €300,000 through the Joint UNAIDS Programme in Uganda
- Ireland also works in partnership with UNICEF in Ethiopia, Tanzania and Sierra Leone on Nutrition, in Uganda on Education, and in Zambia on Social Protection.
- Ireland supports UNICEF through a range of initiatives including the Humanitarian Action for Children appeal in Eritrea and the No Lost Generation

**In summary,
we can – and
must – change
the course of
the epidemic
for
adolescents.**



Thank you