

## **International AIDS Society emphasizes universal access to HIV prevention, treatment and care as a prerequisite for improving maternal and child health**

EurekAlert

September 28, 2010 (Geneva, Switzerland) At the UN Millennium Development Goals (MDG) summit in New York this week, world leaders gathered to review progress on the eight goals agreed in 2000 on alleviating world poverty and ill-health by 2015. As the summit came to a close, governments, businesses and aid organisations made commitments totaling \$40bn to reach the goals, with particular emphasis on improving maternal and child health. A global strategy for women's and children's health, focused on reducing maternal and child deaths, empowering women and achieving equality, was announced by the UN Secretary General Ban Ki-Moon at the end of the summit.

AIDS remains the leading cause of death for women of child-bearing age globally and as such has posed a serious impediment to progress in reducing maternal and child mortality, particularly in sub-Saharan African countries. The International AIDS Society (IAS) calls on governments and donors to accept that success in improving the health of pregnant women and children under five is interdependent with the battle against HIV.

While the world must intensify efforts and funding to address all causes of maternal and child mortality, indications of a flagging commitment to scaling up of HIV services are particularly concerning, given that HIV prevention and treatment services have demonstrated a tangible impact on maternal and child mortality and morbidity in many hyperendemic countries in Africa.

"Highly effective programmes for preventing mother-to-child transmission of HIV (PMTCT) exist already, requiring no specific breakthrough work or research that is not already there," said IAS President, Elly Katabira. "In 2008, around 45 percent of HIV-positive pregnant women received antiretroviral (ARV) treatment to prevent HIV transmission to their children, an increase from the 35 percent that were treated in 2007. Further scale-up for HIV-positive pregnant women could easily be achieved, if only financial commitments to Universal Access to HIV treatment are realized."

The MDG summit provided a platform for a number of key donors to announce their pledges to the Global Fund to Fight AIDS, TB and Malaria, which will be hosting a 3rd Voluntary Replenishment meeting in October. France pledged \$1.4 billion, Canada followed with a pledge of \$540 million, Norway committed US\$225 million and Japan pledged \$800 million. The Global Fund has developed three funding scenarios ranging from US\$13 US\$20 billion for the replenishment period 2011-2013. It is only the third scenario with a commitment of \$20 billion from

international donors that would allow the Global Fund to significantly scale up programming and bring the world closer to reaching the health related MDGs.

The Global Fund provides a fifth of all financing for AIDS globally and is a major contributor to PMTCT programmes, and as such has played a key role in progress that has been achieved to date. While the increased commitments from France, Japan, Canada and Norway are encouraging, the Global Fund is facing an extremely challenging economic environment, and there are growing concerns amongst global health advocates that without a full replenishment the steady progress made over recent years may be reversed. US President Barack Obama, who spoke on the final day of the MDG Summit, indicated that the US would strengthen its commitment to the Global Fund, however he did not reveal any specific funding pledges.

"World leaders have recognized that maternal and child health is a prerequisite for achieving all other millennium development goals," said Mats Ahnlund, Acting Executive Director, IAS. "The now global recognition that one Millennium Development Goal cannot be achieved without the others is a positive step. However, we must now make governments and donors accept that Universal Access to HIV Prevention, Treatment and Care, a commitment that was made by world leaders back in 2005 and which has not been met, is a fundamental building block for maternal and child health. Comprehensive funding for HIV programmes and a fully replenished Global Fund are vital to achieving tangible success in reducing maternal and child mortality."

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