

**Children
and HIV:**

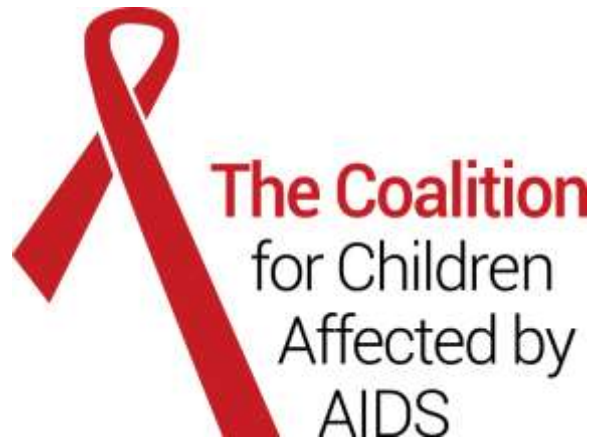


Melbourne, Australia
July 18th & 19th, 2014



**Start Early,
Start Now!**

Welcome to Melbourne



- The Coalition for Children Affected by AIDS (“The Coalition”) exists because we believe that children need to be made a higher priority in the international response to HIV and AIDS.



- The Teresa Group is Canada's oldest community-based charitable organization specifically serving children affected by HIV and AIDS and their families... and is one of about 20 members of The Coalition.

Our theme for this symposium:

*Children and HIV: Start Early, Start Now!
Integrated Interventions for Young Children Born
into HIV-Affected families*



Orienting yourself within the conference facility

- **Now:** You are in Savoy 1
- **Washrooms:** out the back doors to your left, past the registration desk
- **Breaks:** The Foyer, just outside this room.
- **Lunches:** Mayfair 1
- **Session rooms:** On this level.
- **Receptions:** Mayfair 1
- **Tonight's dance performance:** Here in Savoy 1
- **Journal launch:** Here in Savoy 1

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**Start Early,
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5 Advocacy Tools or Products

1. The Melbourne Statement on Young Children Born into HIV-Affected Families,
2. A brochure for implementers called “Now More than Ever”; and
3. A USB card—a small credit card-like device that is actually a USB drive in disguise.
4. Your copy of the AIDS special issue, to be launched later today
5. A flyer inserted into your program, that says, “Help Spread the Word”



START EARLY, START NOW!

THE MELBOURNE STATEMENT
ON YOUNG CHILDREN BORN INTO
HIV-AFFECTED FAMILIES

July 18, 2014

Invest in the early years

It's one of the best investments that can be made – and this is particularly true for HIV affected children and families.

Starting early with the right interventions at the right time lays the foundation for children to thrive, and saves money in the long run. In this way, the effects of HIV are mitigated early.

• Good evidence to start early.

Decades of robust evidence bolstered by groundbreaking neuroscience research prove the short and long-term benefits—health, social and economic—of focusing on the earliest years of a child's life, from birth to five years of age. For children affected by HIV, these earliest years present particular challenges as well as opportunities for protection and risk mitigation. We know that HIV-exposed and infected children experience higher rates of developmental delays. Physical and mental health challenges, HIV-specific economic burdens and stigma are some of the stresses that make parenting more difficult, and thus affects children.

• Youngest children are too often missed in HIV testing and treatment as well as in early learning programs.

Only 39% of HIV exposed children are tested for HIV within 2 months of birth – a lost opportunity to get children onto treatment early. We'll need to ensure that we don't overlook the children of the most stigmatized or most marginalized parents. We must no longer wait for children to arrive back on our doorstep years later, when they've undergone hardship and are sick or harmed.

Integrate HIV programs by building connections between health facilities and communities to provide more comprehensive support to enable young children to not only survive, but to thrive.

Children don't come to services one piece at a time, and so they should not be served piece by piece, but rather as a 'whole child'. Integration of services offers the hope of breaking down the traditional silos of health, HIV, education, early child development, protection and social welfare sectors. This means much more attention to identifying children and families in need and to providing them with an essential package of services.

• It pays to integrate programmes. New multi-sectoral approaches focussing on early childhood development can help us ensure that:

Programs preventing mother to child transmission are linking mother-child pairs with early years support, and reaching back to ensure healthy pregnancies and foetal development, and reducing loss to follow-up;

Pediatric antiretroviral treatment programs are connecting with a range of interventions that can enrich the support that children are receiving, including linking to crucial community-based early learning, care and support programs;

By supporting models for early childhood development, health and nutrition within communities affected by HIV and AIDS, we are able to better identify HIV exposed children and link them to testing and treatment.

Extend the benefits of early interventions to all young children, including the most marginalized.

All Children: Children born into families affected by HIV face particular challenges, but all children benefit from early interventions, especially those in high prevalence contexts. And, in all of our countries, the most marginalized populations will require a concerted focus on the youngest children to prevent harm and maximize potential.

Expand Access via Health System: The broader health system already sees mothers and young children and is thus well placed to deliver integrated interventions for young children and their caregivers within both facility and community settings. For instance, we are already seeing maternal and child health services forming similar linkages, expanding their reach to offer non-clinical services such as parenting support, and guidance on early learning and cognitive development of young children.

These priority actions will help all children get the best start in life.

1. Demand and support partnerships between local health systems and community-based care & early child development programs to reach the youngest children, especially under three years of age.
2. Integrate early childhood interventions into Global Fund applications, including specific targets for reaching the most marginalized populations.
3. Create policies and budgets for national plans that support early integrated intervention.
4. Position early childhood development at the heart of the post-2015 development agenda.

The Coalition for Children Affected by AIDS believes that children need to be made a higher priority in the international response to HIV & AIDS. We bring funders and technical experts together to advocate for the best policy, research, and programs for children because children are a vulnerable population that has too often been overlooked. Download an electronic version of this statement [here: ccaids.org/the-melbourne-statement/](http://www.ccaids.org/the-melbourne-statement/)



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**Start Early,
Start Now!**



Now more than ever!

A need to reach the youngest children affected by HIV and AIDS

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There is an urgent need to ensure that children affected by HIV and AIDS receive early integrated services to improve their long-term development.

- Only 39% of HIV exposed children are tested for HIV within two months of birth
- Too many children are lost in the gap between prevention of mother-to-child transmission (PMTCT) and orphans and vulnerable children programmes
- Children of the most stigmatised or most marginalised parents are too often overlooked

To achieve this, an integrated package of services must be delivered across the health, HIV, education, early child development, protection and social welfare sectors. It ensures that children continue to be cared for starting from birth. Such an approach will, in the long run, be more efficient and cheaper.



Priority actions for early, integrated interventions

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Children born into families
affected by HIV

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Lynne M. Mofenson

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18-19 JULY 2014
Melbourne, Australia

Integrated interventions
for young children born
into HIV-affected families

INSIDE: Materials on
early childhood and HIV.

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**Start Early,
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Help Spread the Word:

YOUNG CHILDREN BORN INTO HIV- AFFECTED FAMILIES NEED YOUR HELP

Now, more than ever, there is need to reach young children affected by HIV and AIDS. We know that the first five years are pivotal because of the brain development that occurs and because with early learning efforts to stimulate young children, combined with adequate nutrition and health, children do better in school and can become more productive adults. At the same time, we know that HIV poses a biological risk for child development, and that children exposed to and living with HIV experience higher mortality rates and higher rates of development delays. Despite this, many infants and young children at risk continue to go unnoticed.

We need you to help amplify the impact of this symposium and spread the word about the importance of early interventions for young children born into HIV-affected families.



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**Start Early,
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Conference Hashtag: #StartEarlyStartNow

Other hashtags:

#EarlyYearsandHIV #ECDandHIV #ECD
#AIDS2014 #globalvillage2014 #HIV

Hint: Find presenters' Twitter names in the program!



Before you leave Melbourne

- Tweet
- Post on Facebook
- Send onwards our advocacy products – the journal, the Melbourne Statement, the “Now More than Ever” brochure.
- Sign Dame Tessa Jowell’s petition
- Write a blog post