



*Campaign To End Pediatric HIV
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KETAM*

What is the CEPA Network?

- ❑ A campaign to mobilize the political will and financial resources needed to overcome bottlenecks to scaling up pediatric HIV diagnosis, treatment, and care programs.
- ❑ CEPA Network will accelerate action to reduce the incidence of pediatric HIV/AIDS.
- ❑ It is designed to measurably improve the delivery of treatment to children and mothers.

Campaign Goal

- ❑ To increase the coverage rates for prevention of PMTCT (vertical transmission) and pediatric treatment services from the current rates of 30% to 40% to the globally agreed-upon target of 80% and ensure high-quality services.

Strategic Objectives

- ❑ Family-Centered Care and Nutrition.
- ❑ Early Infant Diagnosis and Treatment.
- ❑ Access to Appropriate Medications.
- ❑ Full Funding to Eliminate Pediatric HIV/AIDS
- ❑ Stigma and Discrimination : - As a cross cutting theme.

CEPA Network will

- Leverage policy reforms at both global and country levels.
- Expand and activate in-country advocacy networks.
- Hold governments and decision-makers accountable for tangible progress toward their policy commitments.

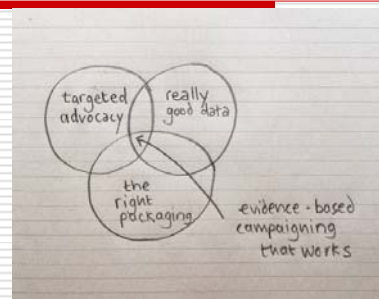
Our Focused Countries...

- Tipping Countries:
 - Uganda
 - Kenya
 - Tanzania
 - Zambia
 - Nigeria
 - Mozambique
- Transition Countries:
 - Ethiopia
 - Malawi
 - South Africa
 - Rwanda

The Initiating Partners:

- African Network for Care of Children Affected by HIV/AIDS (ANECCA).
- Pediatric AIDS treatment for Africa (PATA).
- Pan-African Treatment Access Movement (PATAM).

In Kenya: : What We have done so far:::



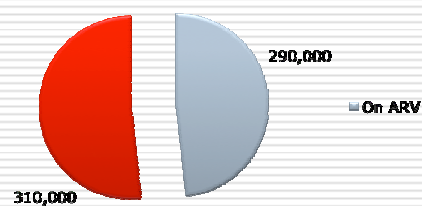
Current state of affairs

- 100,000-150,000 children infected with HIV (projection estimates)
- 1.5million births annually
- HIV prevalence among ANC - 6.9%
- 100,000 infants exposed to HIV annually
- Average MTC transmission rates (10-15% from EID data)
- 19,000 annual infections through MTCT –Cut Down by 80% in two years.....

Number of Patients on ARVs as of July 2009

	Patients
On ARV	290000
Requiring ARV	310000

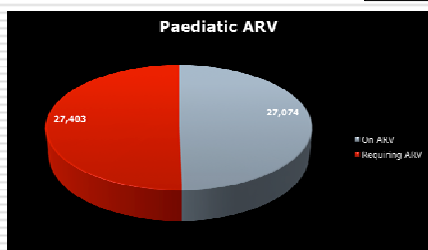
Patients



Source: NASCOP

Paediatrics on ARVs as of July 2009

	Paediatric ARV
On ARV	27,074
Requiring ARV	27,403



Source: NASCOP

Country Priority areas

- Stigma and discrimination
- Integrating of services
- Human resources
- Shortage of Testing sites
- Procurement and logistics
- Availability of FDC
- Government commitment/specific allocation
- Alternative funding

Risks.

- ☐ The global Financial Crises and its impact on local economy;
- ☐ On-going bureaucratic conflicts between (Two Ministries of health)
- ☐ Corruption and its implication on funding;
- ☐ Food security and changing climate dynamics

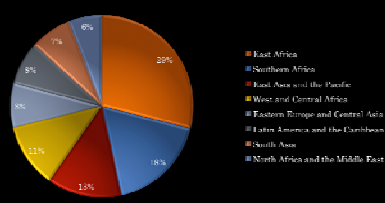
ACTION

- ☐ No child in Africa should be born HIV+
- ☐ Lets use the basic rich cultural norms that we have in place
- ☐ Let the African Governments walk the talk and put 15% of budget to health
- ☐ Of the 15% lets come up with a % going specifically to the mother and child interventions

GLOBAL FUND SUB-REGIONAL DISTRIBUTION:

Region	Amount in Billion Dollars (US)
East Africa	3.34
Southern Africa	2.03
East Asia and the Pacific	1.52
West and Central Africa	1.33
Eastern Europe and Central Asia	0.9
Latin America and the Caribbean	0.89
South Asia	0.81
North Africa and the Middle East	0.69

Percentage in Billion Dollars (US)



Source: Global Fund

Thank you

☐ Asante Sana