



Scaling Up the Response for Children

Regional Partnership Forum on Children and HIV & AIDS
Bangkok, Thailand 31 March - 2 April 2008

STATEMENT OF COMMITMENT

of the

East Asia and Pacific Regional Partnership Forum on Children and HIV and AIDS

2 April 2008, Bangkok, Thailand

Introduction

We, 133 delegates from 17 countries, participating in this Forum reaffirm the commitment made in Hanoi, Viet Nam on 24 March 2006 to minimise the impact of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) on children and young people as well as to prevent the continuing spread of HIV and AIDS by protecting children and young people from a host of vulnerability and risk factors that drive the spread of HIV in the East Asia and Pacific region.

Progress

We recognise that there has been much progress since the **Hanoi Call to Action**, namely:

- Country level analyses of the situation of children and HIV and AIDS have become more available based on improved qualitative/quantitative methods and guidelines to guide efforts to plan, strengthen and scale up responses to children and young people. A number of countries have conducted assessments of children living with and affected by HIV and AIDS.
- Many countries have refined legislation and developed policies and guidelines to reduce mother-to-child transmission and increase paediatric HIV treatment, and protect and care for children and families living with and affected by HIV and AIDS. A number of countries have set up national integrated prevention of mother-to-child HIV transmission (PMTCT) programmes, some of which also involve male partners, and have developed national PMTCT training curricula and national scale-up plans.
- All countries have initiated a range of prevention, treatment and care actions for and with children and young people, and some are already scaling these up. Some have developed national strategies and/or set up national task forces to strengthen social protection of orphans and vulnerable children and young people, including those living with and affected by HIV and AIDS.
- Many countries are increasingly pursuing a family and child-centred approach to HIV and AIDS, and improving monitoring and reporting systems for HIV-infected mothers and children during and after delivery.
- Regional and international cooperation on policy, networking, information sharing and research to scale up responses has been enhanced through active partnership. A notable example was the affirmation of the Hanoi Call to Action by the Association of Southeast Asian Nations (ASEAN) at its 12th ASEAN



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Summit Special Session on HIV and AIDS held in Cebu City, the Philippines in January 2007.

- Faith-based organisations throughout the region have redoubled their effective and coherent action. At their Interfaith Consultation Meeting, held in Bangkok, Thailand from 15 to 17 January 2008, they have committed to work to build supportive environments, mobilise and support community-based responses, strengthen the capacities of families, and ensure access to essential services.

Challenges

We recognise, however, that there are still challenges:

The growth trajectory of HIV and AIDS in East Asia and Pacific merits attention, especially the consequences on children and young people. With the infection profile becoming younger and the epidemic increasingly feminised, the number of children and young people living with, born HIV positive, and orphaned or made vulnerable by HIV and AIDS is certain to rise. Existing figures do not capture the entire picture given limitations of current estimation and projection techniques, as well as under-reporting caused by stigma and discrimination.

The response to children and young people who are vulnerable to, living with and affected by HIV and AIDS is still inadequate in the region. Many children and young people at risk are unaware of how to protect themselves from HIV and AIDS and do not have access to appropriate information, essential services and required materials. In addition, many children and young people living with HIV do not know their HIV status and do not have access to sufficient care, support and treatment services.

From current observations, the prospects for many children and young people living with and affected by HIV and AIDS in this region are still a cause of grave concern. They experience losses in their early age: loss of parents, loss of security and warmth, and the overall well-being of their family. Many are left to fend for themselves, hurt from a young age by stigma and discrimination associated with HIV and AIDS and denied basic education, health, nutrition and other rights. Above all, there is a strong possibility that many would be at risk growing up repeating the perilous journey of their parents and adopting risk behaviours out of pressing needs for survival. Many of them are deprived of care-givers' guidance and hope for a better future, because they are denied equal opportunities for healthy growth and development.

Voluntary and confidential counseling and testing (VCCT) services are not yet widely available in most countries, and such services are not always tailored to the needs of children and young people. Many women and their partners remain unaware of their HIV status and have inadequate knowledge of VCCT, while antiretroviral treatment (ART) is not yet widely accessible by mothers, children and young people in need. Inadequate access to ART discourages people from seeking HIV testing and counseling. Stigma and discrimination associated with AIDS further discourage care seeking behaviour.

Actions agreed upon

We are committed to work to reduce the impact of HIV and AIDS on children and young people and to halt the continued spread of HIV, recognising that the "Four Ps" of the



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Global Campaign *Unite for Children, Unite Against AIDS* form the basis of a comprehensive response for children and young people: **P**MCTCT, **P**aediatric treatment, **P**revention of infection among children and young people, and **P**rotection and support of children and young people living with and affected by HIV and AIDS. We are determined to integrate this approach and to scale up good examples of the family-centred continuum of care (CoC) at national and sub-national levels, bringing about the most effective outcomes for children and young people and ensuring linkages among the four Ps for holistic, comprehensive response.

We recognise the necessity to adapt the regional framework based on the unique regional and country situations, including differences within countries, and to take further actions based on surveillance as well as monitoring and evaluation systems to determine the best strategies and outcomes.

We believe that our continued actions and renewed efforts at the sub-national, national and regional levels can make a real difference in the lives and futures of children, young people and their families in East Asia and Pacific.

We have identified the following actions, building upon what has been achieved so far:

- Improve coverage of prevention programmes by ensuring sustainable mechanisms for capacity building to: provide children and young people with greater access to appropriate age-specific and gender-sensitive information on HIV and AIDS, relevant skills and access to youth-friendly reproductive health services; create supportive social environments; and direct prevention education specifically towards vulnerable children and young people who may engage in risk behaviours leading to HIV infection.
- Continue to scale-up PMTCT and paediatric treatment including ensuring: greater male partner and community involvement; linkage to reproductive, maternal, newborn and child health and nutrition services; appropriate targeting of services based on epidemiological characteristics of each country; access to quality and affordable ART; counseling and education on infant feeding; and continuing access to and utilization of different counseling and testing services.
- Protect and support children and young people living with and affected by HIV and AIDS by implementing effective and appropriate strategies as part of national welfare and social protection systems to: meet their economic and social needs; develop appropriate family-based and community-based models of care; develop minimum standards of care; and support extended families or alternative care arrangements; and more generally improve their access to overall health, social welfare and education services.
- Strengthen data systems, research, monitoring and evaluation, as well as the sharing of information on best practice experiences to improve the delivery and effectiveness of programmes, including ensuring the needs of children and young people living with and affected by HIV and AIDS are well-assessed based on empirical research in each country and across the region and that ongoing monitoring of the socio-economic and psychological impact on these children is in place to inform policy and programme responses.



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- Allocate technical, financial and human resources needed for adequate and sustainable policy, programmes and services, ensuring that these resource allocations are appropriate and cost-effective in reflecting the epidemiological patterns of the country, at both national and sub-national levels.
- Address barriers to reducing stigma and discrimination to foster greater support and understanding of children and their families living with and affected by HIV and AIDS, and assure their access to essential services.
- Strengthen strategic partnerships at the national and regional levels by ensuring involvement and coordination of activities among partners, particularly with governments, international organisations, donor agencies, civil society and faith-based organizations, and the private sector.
- Encourage and provide for the meaningful and ethical participation of children and young people living with and affected by HIV and AIDS in the various phases of responses affecting their welfare at all levels; continuously develop and build their capacities to articulate their views and concerns and propose actions appropriately, these inputs being considered part of the design, implementation and evaluation of policies, programmes and services on their behalf; facilitate and support the organisation of groups or networks of children and young people living with and affected by HIV and AIDS and their alliances with other children and young people in similar situations within countries, regions and in order to propose and undertake actions alongside adults.
- Promote effective mechanisms to address violations of rights of children, young people and their families living with and affected by HIV and AIDS.

Conclusion

Through this Partnership Forum, we have reaffirmed that an effective response to children and young people who are vulnerable to, living with and affected by HIV and AIDS in East Asia and Pacific requires strong political leadership, sustainable financing, multi-sectoral partnership, and meaningful participation of civil society organisations, children, young people and people living with HIV, and communities affected by HIV and AIDS at the regional, national and sub-national levels.

The country delegations of this Forum thank the organisers and supporters¹ for their contributions to this Regional Partnership Forum. We are firmly convinced that our strong regional partnership will bring effective outcomes for children, young people and their families in East Asia and Pacific.

¹ The organizers of the forum were the United Nations Children's Fund (UNICEF), Joint United Nations Programme on AIDS (UNAIDS) and United States President's Emergency Plan for AIDS Relief (PEPFAR). Supporters included the United States Agency for International Development (USAID), United Kingdom Department for International Development (DfID), Swedish International Development Agency (Sida), Australian Agency for International Development (AusAID), Family Health International, Save the Children Alliance, Clinton Foundation HIV AND AIDS Initiative, World Health Organization (WHO), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Population Fund (UNFPA), United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP), Association of South-East Asian Nations (ASEAN) and the World Bank.