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Unitaid and pediatric HIV

New infections in children under 15 have dropped by more than half since 2000. An estimated 180,000 children were infected in 2017, but many continue to be undiagnosed. Even when they can access diagnostic services, available medicines are ill-adapted to their needs. Of the 1.8 million children living with HIV globally, only 52 percent are receiving antiretroviral therapy. To advance global HIV elimination goals, Unitaid is increasing access to better tools for early infant diagnosis and pediatric treatment of HIV, including new formulations. Providing children with adequate care faster means more lives can be saved.

Since its creation in 2006, Unitaid has invested nearly US\$ 600 million to set the stage for the mass introduction of innovative solutions targeting children. It has created a market for early infant diagnosis; enabled price cuts of 80 percent in key pediatric medicines; and deployed the first point-of-care CD4 diagnostic devices ever purchased in Africa, which were instrumental in stopping mother-to-child transmission.

Currently, HIV projects make up more than half of Unitaid's US\$1 billion grant portfolio. Close to US\$ 230 million of our funding is dedicated to pediatric HIV.

Active grants

Testing

In 2015, only half of HIV-exposed infants were tested, and only half of those tested received the result. HIV tests are usually performed in centralized laboratories, far from where children live. With turnaround times of up to 90 days, results often arrive too late to be of any help.

Unitaid is improving access to point-of-care technologies (POC) for early infant diagnosis (EID) of HIV to reduce turnaround times dramatically. Small, robust devices are being placed in rural clinics to quickly start more infants on life-saving treatment.

- *US\$ 149 million project with the Clinton Health Access Initiative (CHAI) and UNICEF (2013 -2020).*
The project is increasing access to POC technologies for early infant diagnosis in ten African countries. Timely results can enable early initiation of care.

- *US\$ 63 million project with the Elisabeth Glaser Pediatric AIDS Foundation (2015-2019).*
Thanks to POC technologies being introduced in nine African countries, babies get their results in less than one hour and can start HIV treatment the same day. With conventional laboratory-based testing, the average turnaround time was three months.

Treatment

- *US\$ 17.3 million project with Drugs for Neglected Diseases Initiative (2013-2018).*
The project is working to replace older pediatric HIV formulations with new treatments that are properly dosed, better tasting and easy to store.
- *US\$ 34 million project with CHAI (2016-2019).*
The project works to expand the use of better HIV drugs. This includes the development and improvement of pediatric treatments.

Cross-cutting projects

- *US\$ 148 million project with the World Health Organization, Department of Essential Medicines and Health Products (2006-2018).*
The WHO prequalification programme accelerates and increases access to critical quality-assured products that are affordable and adapted for markets in lower-income countries. This includes pediatric HIV formulations.
- *US\$ 60 million funding for the Medicines Patent Pool (2010-2020).*
It has allowed countries to save US\$ 553 million through the purchase of generic medicines. This includes 13 HIV antiretrovirals, four of them for children.
- *US\$ 16.6 million project with World Health Organization HIV and Hepatitis department (2017-2020).*
WHO policies help guide countries as they adopt the best products for diagnosis and treatment of diseases.