



ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION

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International Family AIDS Initiatives

Every child deserves a lifetime.

The Elizabeth Glaser Pediatric AIDS Foundation originated in 1988 with recognition of the urgent need to help children living with HIV infection. At that time, gaps in knowledge resulted in a lack of services and care for children. The Foundation sought to fill these gaps in the management and care of HIV-infected children and their families, with early funding targeted to research on pediatric HIV and prevention of mother-to-child transmission. The Foundation's commitment to these priorities has stayed constant as its scope has broadened to a global stage.

As a result of successful research efforts supported by the Foundation and others, in the late 1990s it became possible to substantially reduce mother-to-child transmission of HIV with antiretroviral drug treatment. However, while HIV infections have declined dramatically in the United States and other developed nations, the number of HIV infections in the developing world, including those in children, has exploded. More than one child is infected with HIV every minute of every day, with newborns representing the vast majority of the estimated 1,500 children infected each day. An estimated two-thirds of adults and children living with HIV globally reside in sub-Saharan Africa, although incidence of mother-to-child transmission of HIV is increasing in Eastern Europe and Central Asia.

To address this alarming situation, the Foundation's International Family AIDS Initiatives focus on the following elements:

- Increasing access to services for prevention of mother-to-child transmission (PMTCT);
- Increasing access to care and treatment for children and families, including antiretroviral therapy (ART);
- Linking PMTCT services to care and treatment in order to provide a continuum of care;
- Researching and identifying better technologies and interventions in PMTCT and care and treatment;
- Documenting replicable models in PMTCT and care and treatment; and
- Training research and program leaders to advance all of the above.

The Foundation works with governments in host countries, and through existing facilities to the extent possible, to expand access to critical HIV/AIDS prevention, care, and treatment services. The Foundation also provides overall guidance, technical leadership, and direct support to national agencies to enhance the care of women and children, partnering with community-based organizations to ensure that important decisions are made locally.

Prevention of Mother-to-Child Transmission Initiative

In 2000, the Foundation established the Call to Action Project to bring simplified regimens for PMTCT of HIV to families in developing countries. This program represents a cornerstone of the Foundation's International Family AIDS Initiatives.

In the six years since program inception, the Foundation has led the way internationally in the provision of PMTCT services. As of June 30, 2006, the Foundation is working in more than 1,100 sites in 18 countries. We are reaching more than 750,000 women a year with access to services to prevent transmission of HIV to their babies. More than 2 million women have been tested for HIV through our programs.

However, even with this progress, the need remains great: Only ten percent of women who need PMTCT services are able to access them.



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The Foundation is currently supporting PMTCT programs in Cameroon, China, Côte d'Ivoire, the Democratic Republic of Congo, Dominican Republic, India, Kenya, Lesotho, Malawi, Mozambique, Russia, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia, and Zimbabwe.

Care and Treatment Initiative

Despite progress in expanding access to antiretroviral drugs, currently ART reaches only about one in five of those who need it in low-and middle-income countries. In 2004, the Foundation launched Project HEART, the second key facet of the Foundation's International Family AIDS Initiatives, to help fill this gap in access to care and treatment. Through Project HEART, care and treatment services have been built onto successful PMTCT and affiliated programs in Côte d'Ivoire, Mozambique, South Africa, Tanzania, and Zambia. These programs – in addition to those more recently established in Kenya, Rwanda, Swaziland, and Uganda – provide critically needed services, including ART, to save lives, preserve families, and restore hope in communities devastated by HIV.

Death in HIV-infected children is estimated to occur in 35 percent of cases by the age of one year, in 50 percent by the age of two years, and in 60 percent by the age of three years. Identification of HIV-exposed and/or -infected children has thus become a critically important objective for our International Family AIDS Initiatives.

The Foundation has led the way in the provision of care and treatment services, placing a particular emphasis on the inclusion of children. As of December 31, 2006, more than 185,000 individuals, including 15,800 children, have been enrolled into our care and support programs. Of those ever enrolled, more than 97,600 have begun ART. More than 8,100 of those receiving ART are children under the age of 15. The Foundation is also aggressively pursuing a 15 percent treatment goal for children, aiming to ensure that 15 percent of its patients receiving care and treatment are children.

The Foundation's International Family AIDS Initiatives are supported with resources from the U.S. Agency for International Development (USAID) and the U.S. Centers for Disease Control and Prevention (CDC) through the President's Emergency Plan for AIDS Relief (PEPFAR), as well as essential private contributions from corporations, foundations, and individuals.

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