

High-Level Dialogue to Assess Progress on and Intensify Commitment To Scaling Up Diagnosis and Treatment of Paediatric HIV and TB in Children Living with HIV

Convened by H.E. Peter Kodwo Appiah Cardinal Turkson,
Prefect of the Dicastery for the Promotion of Integral Human Development

5 - 6 November 2020
Virtual Dialogue

On 5 -6 November 2020, His Eminence Peter Cardinal Turkson, Prefect of the Dicastery for the Promotion of Integral Human Development, will convene a *High-Level Dialogue to Assess Progress on and Intensify Commitment to Scaling Up Diagnosis and Treatment of Paediatric HIV and TB in Children Living with HIV*. The Dialogue, which builds on similar consultations hosted by the Holy See in April and May 2016, November 2017, and December 2018, will be co-organized by the co-chairs of the AIDS Free Working Group of the Start Free, Stay Free and AIDS Free framework (World Health Organization – WHO - and the Elizabeth Glaser Pediatric AIDS Foundation - EGPAF), the President's Emergency Plan for AIDS Relief (PEPFAR), the Joint United Nations Programme on HIV/AIDS (UNAIDS), in collaboration with Stop TB Partnership and Faith-Based-Organizations (FBOs). Leaders of major diagnostic and pharmaceutical companies, multilateral organizations, governments, regulatory agencies, faith-based and other organizations directly engaged in services to children living with HIV and TB, and other key stakeholders will participate in the consultation, which will be held virtually on 5 – 6 November 2020.

Background of the High-Level Dialogue

While significant progress has been made on expanding access to adult HIV testing and treatment services, children remain among the most underserved populations in the HIV and AIDS response. In 2019, around 150,000 children aged 0 to 14 years were newly infected with HIV, and 115,000 children died from AIDS-related causes. The global community can help save the lives of these children by working together to increase access to early diagnosis and effective treatment for all HIV-infected children. Among the remaining challenges needing urgent attention in low- and middle-income countries (LMICs) are the low levels of Early Infant Diagnosis (EID) testing, case-finding of HIV-positive children missed by EID, and treatment for children living with HIV. In addition, continued use of suboptimal regimens and formulations to treat children living with HIV leads to high rates of virological failure in children and HIV drug resistance. Moreover, development and introduction of antiretrovirals (ARVs) for infants and children still lag unacceptably behind that of adults¹.

Children living with HIV are particularly susceptible to co-infection with tuberculosis, a major cause of AIDS-related deaths in this population. The link between HIV and TB in children and adolescents is well

¹ LANCET HIV 2018, Catalysing the development and introduction of paediatric drug formulations for children living with HIV: a new global collaborative framework for action, *Martina Penazzato, Melynda Watkins, Sébastien Morin, Linda Lewis, Fernando Pascual, Marissa Vicari, Janice Lee, Sally Hargreaves, Meg Doherty, George K Siberry*.

known, but prevention and treatment are still insufficient. As a result, every year 32,000 children living with HIV die from TB. The only existing vaccine is only partially effective. Preventive therapy for TB only reached around 27% of eligible children under 5 years old in 2018. Contact investigation is not routinely implemented at scale, and technology to support clinical diagnosis of TB in children is inferior to that available for adults, meaning far too many children are undetected and untreated. And while new paediatric formulations to treat drug-sensitive active TB are available, case finding and access to the new medicines need to be greatly scaled up. Conscious of the specific difficulties related to this group, the United Nations General Assembly HLM on TB created child-specific targets (see below) and called on countries to “address TB prevention, diagnosis, treatment and care in the context of child health and survival as an important cause of preventable childhood illness and death, including among children with HIV.”

In order to address the persistent challenges facing children living with HIV and to reduce morbidity and mortality among this highly vulnerable groups, His Eminence Peter Kodwo Appiah Cardinal Turkson has convened, with WHO, EGPAF, PEPFAR, UNAIDS, FBOs and other global partners, a series of High Level Dialogues to accelerate research, development, registration, introduction and uptake of paediatric HIV diagnostics and optimal ARVs. The two most recent of these High-Level Dialogues were held on 17 November 2017 - dedicated to greater focus, acceleration, and collaboration on paediatric ARVs – and on 6-7 December 2018 – addressing both optimal ARVs and diagnostics.

Both meetings resulted in the adoption of a broad set of commitments across the field of paediatric HIV testing and treatment.² Accountability is ensured through the online tracker www.paediatrichivactionplan.org and quarterly reporting webinars on progress towards the Paediatric HIV Action Plan commitments.³ Such oversight has shown that the Vatican process and the resulting Rome Paediatric HIV Action Plan have led to unprecedented collaboration among pharmaceutical and diagnostics companies, regulators, donors and others key stakeholders, and have prompted several positive developments in R&D, funding, pricing, and in-country access.

Purpose of the November 2020 High-Level Dialogue

Given the success of previous High-Level Dialogues, a fifth *High-Level Dialogue to Assess Progress on and Intensify Commitment To Scaling Up Diagnosis and Treatment of Paediatric HIV and TB in Children Living with HIV* will be held on 5 and 6 November 2020. The High-Level Dialogue will provide an opportunity to take note of progress on the commitments on paediatric ARVs and diagnostics made by the participants in the November 2017 and December 2018 Dialogues, as well as to assess actions needed to address remaining challenges. This event will also bring into discussion the particular issues related to preventing, diagnosing, and treating tuberculosis in children.

² Paediatric HIV Rome Action Plan, Pontifical Academy of Science (Vatican City State), 17 November 2017 and 7-8 December 2018: <https://www.paediatrichivactionplan.org/>.

³ The most recently available updates on each commitment are available at: <https://www.paediatrichivactionplan.org/>.

Specific objectives of the High-Level Dialogue

- To assess progress in reaching the treatment targets in the context of the *Start Free, Stay Free, AIDS Free Framework*: Provide 1.4 million children (0-14 years) and 1 million adolescents (15-19 years) with HIV treatment by 2020;
- To assess progress on the commitments documented in the November 2017 and December Paediatric HIV Rome Action Plan;
- To highlight remaining gaps and solutions on paediatric HIV treatment and diagnostics;
- To highlight current gaps in TB prevention, diagnosis, treatment and care for children, with particular emphasis to children living with HIV;
- To identify solutions to reduce TB deaths, including among children living with HIV;
- To identify solutions and commit to actions that enable improved access to innovative, high quality, TB preventive therapy and affordable TB drugs and diagnostics for children, including those exposed to or living with HIV;
- To intensify the collaboration of Faith-Based Organizations and Religious Leaders with other key stakeholders, including private industry, donors, multilateral organizations, governments, non-governmental organizations, people living with and affected by HIV, and all people of good will, to work effectively and accountably toward the elimination of HIV and TB among children.

Outcome

Participants in the High-Level Dialogue will agree to a Plan of Action to develop, introduce, and scale-up optimized diagnostics, preventive therapy, and treatment for TB among children, including those living with HIV, as well as further steps to improve access to paediatric HIV diagnostics and optimal ARVs. A particular focus will be given to steps to be taken at the national level. The action points will complement those commitments made at previous High-Level Dialogues that remain relevant in 2020 and beyond.