

A Learning Session on
HIV-affected Adolescent Mothers and their Children in Sub-Saharan Africa

13 December 2019
WHO D-45026
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Concept Note

Introduction:

Whilst adolescents in general have received a lot of attention in the HIV response, the health and wellbeing of adolescent mothers and their children have been largely overlooked.¹ Stigma is at the heart of their exclusion. Many are shunned by their own societies and excluded from services, including being banned from school. The lack of priority given to adolescent mothers and their children by some of the largest global HIV stakeholders, including donors, in turn, perpetuates their exclusion.

In Sub-Saharan Africa this issue is of central importance both for the elimination of HIV and AIDS as well as the attainment of several Sustainable Development Goals (SDGs). Levels of both HIV and adolescent motherhood are very high. There are an estimated 11.4 million adolescent mothers in Sub-Saharan Africa,² predominantly living in adverse conditions, and one third of all new HIV infections in this region are amongst young women.³ Meanwhile around half of all children born in this region are to adolescent mothers.⁴

These adolescent mothers and their children have poorer prevention of mother-to-child HIV transmission (PMTCT) service outcomes and are less likely to receive or stay on treatment⁵. They are also at the epicentre of a multitude of broader vulnerabilities including those associated with gender inequality, poverty, violence, exclusion, poor education, which limit generations across a lifetime⁶. For both adolescent mother and their child, this is a violation of their child rights; puts at risk their health and wellbeing; and perpetuates a cycle of poverty and vulnerability, including HIV infection.

Whilst this has bearing on a wide range of HIV targets and SDGs, its impact on early childhood development (ECD) is especially acute. ECD has been identified as a corner stone underpinning several SDGs and is central to the *Global Strategy for Women's Children's and Adolescents' Health 2016-2030*. Children born to HIV-affected adolescent mothers are more at risk of developmental delays and are, therefore, a priority for implementing the Nurturing Care Framework.

WHO and The Coalition for Children Affected by AIDS (The Coalition) are committed to improving the health and development outcomes for these adolescents and their young children. We are inviting scientific and programmatic experts working with them to a Learning Session in order to consolidate the evidence on why HIV-affected adolescent

¹ Groves, A. et al (2018) 'Addressing the unique needs of adolescent mothers in the fight against HIV,' *JIAS* Jun; 21(6): e25155
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6024120/>

² UNPD (2015). World Fertility Patterns 2015 – Data Booklet (ST/ESA/SER.A/370). New York, United Nations Population Division

³ Dellar R.C. et al 'Adolescent girls and young women: key populations for HIV epidemic control. *J Int AIDS Soc.* 2015; 18(2 Suppl 1):19408.

⁴ Health Organization Adolescent pregnancy webpage http://www.who.int/maternal_child_adolescent/topics/maternal/adolescent_pregnancy/en/

⁵ Calahan, T. et al (2017) *JIAS* 2017; 20(1): 21858. 'Pregnant adolescents living with HIV: what we know, what we need to know, where we need to go' <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5577684/>

⁶ Groves, A. et al (2018) 'Addressing the unique needs of adolescent mothers in the fight against HIV,' *JIAS* Jun; 21(6): e25155
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6024120/>

mothers and their children are being left behind and what can be done about it. The outcome of this Learning Session will form the basis of a policy brief including key advocacy recommendations.

We will look at the outcomes among HIV-affected adolescent mothers and their children across a range of health, HIV, and broader development indicators; why they are not benefiting from interventions serving general populations; and what works to improve their outcomes. The focus will be on Sub-Saharan Africa, where the bulk of evidence exists. This Learning Session complements other recent meetings on related topics concerning adolescent mothers, in order to avoid duplication and build from evidence and innovations already identified. The Coalition has commissioned a background paper summarising the results of a global literature review, which participants can then build upon during the meeting.

The Coalition for Children affected by AIDS (The Coalition) is an independent group of 26 influential thought leaders from across UN, donor, NGO and academic communities (www.childrenandHIV.org). We work together to advocate for better funding, policies, research and practice for children and adolescents (aged 0-18 years) infected with HIV and AIDS; those at risk of infection; and affected by the social and economic impacts of others close to them having the disease.

Overall Objective:

To define an evidence-informed advocacy agenda for HIV-affected adolescent mothers and their children

Specific Objectives:

- To identify gaps and consolidate key scientific and programmatic evidence on the scale and nature of the needs of HIV-affected adolescent mothers and their children, and proven solutions to address them.
- To establish a set of advocacy recommendations informed by the evidence.
- To build a movement of experts that can advocate with one strong voice on HIV-affected adolescent mothers and their children.

Outputs:

A set of draft advocacy recommendations and a consensus Evidence Note to support them.

Participants:

We have invited scientific and programmatic researchers and implementers with expertise in adolescent mothers and their children in areas of high HIV burden in Sub Saharan Africa. This includes experts in adolescent HIV, adolescent sexual and reproductive health, early childhood development, adolescent mental health and other issues impacting on HIV-affected adolescent mothers and their children. The focus is on Sub-Saharan African low and middle-income countries with a high burden of HIV and AIDS.

Format:

This will be a dynamic, targeted and concise discussion. Section 1 provides an overview of the scale and nature of the challenges and the programming and policy landscape to address them. Section 2 analyses what works across multiple thematic areas. Each speaker will propose specific recommendations for what global donors, programmers, and policy makers could do differently, and set out the evidence behind them. And Section 3 consolidates a set of advocacy recommendations. Participants will be provided in advance with a background paper summarising the results of a global literature review, commissioned by the Coalition for Children affected by AIDS. This will serve as a starting point for discussion, and will be built upon to create a consensus Evidence Note.

Evidence:

We are interested in all kinds of cited evidence - academic research, programmatic evidence (e.g. impact evaluations) and personal testimonies from key stakeholders (e.g. from beneficiaries, practitioners, policy makers, funders etc.). Evidence can be sourced from HIV literature as well as from other sectors including violence, protection, poverty, equality and equity, gender, sexual and reproductive health rights, education, health, and hunger. All evidence must already exist in literature of some kind so that it can be cited later on, although not all must necessarily be published. We encourage all participants to bring along evidence and/or full details of where it can be accessed online.