Hanoi Call to Action for Children and HIV/AIDS
In East Asia and Pacific Region

24 March, 2006

Introduction

We, government delegates from countries throughout East Asia and the Pacific, civil society representatives, under-18 delegates and international partners met in Hanoi, 22-24 March 2006, with the aim of galvanizing greater commitment to, and action for, children under 18 years of age who are vulnerable to, infected and affected by HIV/AIDS.

We recognize and are concerned with the complex, far-reaching and growing impact of HIV/AIDS on children in East Asia and the Pacific. These effects include: childhood HIV infection and loss of life; the loss of parents and other caregivers; pervasive stigma and discrimination associated with HIV/AIDS; missed opportunities for education; health care and other essential support and services; the deepening poverty of households affected by HIV/AIDS; and the disease burden on the region’s economies and its future generations.

As HIV/AIDS spreads in East Asia and the Pacific, there is a growing recognition of the need to include children in the HIV/AIDS response. We commend countries in this region that have undertaken assessments to look at the circumstances of children in relation to HIV/AIDS; that are expanding access to pediatric antiretroviral treatment and care; that are pursuing prevention strategies for children and young people at risk; and, that are promoting care and support for orphans and vulnerable children.

We recognize that information on the circumstances and numbers of children vulnerable to, infected and affected by HIV/AIDS is extremely limited and therefore hampering effective planning and an adequate, evidence-based response. We acknowledge with concern that in this region, response to children who are vulnerable to, infected and affected by HIV/AIDS thus far have been inadequate. Many children at risk are unaware of how to protect themselves from HIV/AIDS and do not have access to needed information, services and commodities. Most children living with HIV/AIDS do not know their HIV status and do not have access to needed, care, support and treatment services. Much needed support is only available to a small minority of children orphaned and otherwise affected by HIV/AIDS, and affected households are becoming impoverished with limited assistance to improve their livelihoods.

We accept the importance and mandate of global commitments made to date for children and HIV/AIDS. We reaffirm our commitment to the Millennium Development Goals and recognize that their full achievement will not be possible without addressing the HIV/AIDS epidemic and its impact on children. We reaffirm our commitment to goals set for children at the Special Sessions of the United Nations General Assembly on HIV/AIDS in 2001 and on Children in 2002.

We firmly support the Initiative called for at the 2005 G8 Gleneagles Summit and the United Nations World Summit, and resolved by the United Nations General Assembly in December 2005 to rapidly accelerate the reach of essential HIV/AIDS services. We recognize the crucial significance of this initiative for children and their families.
We reaffirm our obligation to take action to promote and protect the rights of each child – i.e., every human being below the age of 18 years. We are determined to respect the dignity and to secure the well being of all children, including those vulnerable to, infected and affected by HIV/AIDS. We acknowledge that the Convention on the Rights of the Child, the most widely ratified human rights treaty in history, as well as the Optional Protocols thereto and other international instruments relevant to children contain comprehensive international legal standards for the protection and well-being of children.

We affirm the “Three Ones” principle - one action framework, one coordinating authority and one monitoring and evaluation system - to achieve the most effective and efficient HIV/AIDS response. We contend that all efforts in support of children vulnerable to, infected and affected by HIV/AIDS must respect and promote this framework.

Over three days, we gathered in Hanoi to undertake a critical review of the status of children under 18 years of age who are vulnerable to, infected and affected by HIV/AIDS in East Asia and the Pacific and to plan for scaling up prevention, treatment, care and support throughout the region. As part of this plan we call on all governments, civil society members and international partners to take up the following action agenda.

We urgently call for:

1. Country level analysis of the situation of children and HIV/AIDS supported by improved methods and guidelines - with quantitative estimates of children vulnerable to, infected and affected by HIV/AIDS and qualitative assessment of their circumstances - to guide efforts to plan, strengthen and scale up the response.

2. Assessment of existing legislation, policies and guidelines for the protection, support and care of children vulnerable to, infected and affected by HIV/AIDS and to update and/or develop additional policies and guidelines as required.

3. Based on these assessments and with accelerated efforts targeted specifically for children, the development of country-specific targets and locally defined action plans for scaling up the responses for: primary HIV prevention; the prevention of maternal to child transmission; HIV testing and counseling; pediatric and adult antiretroviral treatment; family-oriented clinical care; psychosocial support and child and family protection services.

4. Increased resource mobilization and improved resource allocation and utilization to close the gap between what is currently available and what is needed for an adequate response to children vulnerable to, infected and affected by HIV/AIDS.

5. Establishment of national-level multi-sectoral mechanisms that focus on child welfare and development, help to coordinate the scaled up response and promote an inclusive approach at all levels that involves the public sector, civil society, religious leaders, and children and young people.

6. The reduction of HIV/AIDS-related stigma and discrimination, financial barriers and other obstacles to enable access for all children to essential services, including an uninterrupted basic education, health care and other social welfare services.

7. Expanded efforts to protect children and provide them with the most family-like care environment and ensure that institutional care is used for children without caregivers only as a temporary measure or option of last resort.

9. Strengthened and enhanced coordination in regional and international cooperation on networking, information sharing and research to scale up the response

In issuing this Call to Action we urge governments, international partners and civil society to ensure the active and meaningful participation of children as we scale up our collective response.

**Conclusion:**

We, as individuals and members of government and partner organizations pledge to urgently use and invest in this Call to Action as an integral part of scaling up towards universal access. In preparation of the United Nations General Assembly in June 2006, we pledge to give this Call to Action the widest possible publicity, to urge its acceptance and to support its implementation in order to achieve country specific targets and improve the lives of children vulnerable to, infected and affected by HIV/AIDS.

We recommend that this Call to Action be brought to the attention of Heads of State/Governments. As a first step, we recommend that this Call to Action be presented at the forthcoming Association of South East Asian Nations (ASEAN) meeting in Manila, Philippines. We therefore request the Government of Viet Nam in consultation with the Government of the Philippines and other ASEAN member states to facilitate this action.

We thank the Socialist Republic of Viet Nam, the Commission for Population, Family and Children, UNICEF, UNAIDS, WHO, the United States President’s Emergency Plan for AIDS Relief including support through USAID, Family Health International and Save the Children for organizing this regional consultation. We contend however that the true success of this Consultation can only be measured after we leave Hanoi in the results achieved for children in East Asia and the Pacific.