

September 23, 2013

The Right Honourable Stephen Harper
Prime Minister of Canada
Office of the Prime Minister
80 Wellington Street
Ottawa, ON K1A 0A2

Dear Prime Minister Harper,

Re: UN General Assembly Special Event on MDG Progress and the Post-2015 Agenda

We have arrived at a critical juncture **in the fight against HIV and AIDS**. Since the inception of the Millennium Development Goals (MDGs), we have made significant strides towards **an AIDS-free generation**. Today, thanks to the scale-up of antiretroviral therapy, over 10 million people have been started on life-saving medicines. However, according to the UNAIDS Global Report released today, this figure represents just over one third of those living with HIV who are eligible for treatment. **Another 18 million people remain in need of life-saving HIV medicines.**

Since 2009, there has been a 38% drop in infections in sub-Saharan Africa where almost 90% of the world's HIV transmissions to children occur. However, more than **200,000 children were newly infected with HIV in sub-Saharan Africa in 2012 alone**, and HIV continues to be the single biggest threat to maternal and child health in many countries with high HIV prevalence.

As the world focuses its attention on the UN General Assembly and its special session on the MDGs, we call on the Canadian delegation to the UN to **keep HIV at the forefront of the post-2015 development agenda**.

MDG Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS

With the dramatic scale-up of HIV programs and roll out of antiretroviral therapy, significant progress has been made in decreasing the rate of new infections in most regions of the world. **However, the number of people living with HIV continues to grow: 2.3 million people, including 260,000 children, are newly infected each year globally.**

MDG Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

Provision of universal treatment access remains an essential target for global health and development, and a concerted global effort is needed to close the treatment gap. Ninety per cent of those who are eligible but unable to access treatment live in just 30 countries, which are amongst the world's poorest.

Currently more than one third of pregnant women globally do not have access to services to prevent mother-to-child transmission of HIV. Furthermore, **only half of all breastfeeding women living with HIV in sub-Saharan Africa are receiving antiretroviral medicines to prevent transmission**. It is now estimated that half of all new episodes of HIV transmission to children occur during the breastfeeding period. With the overwhelming evidence that breastfeeding is critical to child survival, there is an urgent need for mothers to have access to treatment to ensure that their babies remain HIV-free.

Health is a prerequisite for women, children and families to reach their full social, political and economic potential. Access to quality, timely and culturally appropriate prevention, treatment and care for mothers and their children helps to build a strong foundation for development. Therefore, a **renewed global commitment to eliminating HIV as a public health threat is essential to achieving a broader, longer-term strategy for sustainable development.**

In the past, Canada has demonstrated strong leadership through its support of the **Global Fund to Fight AIDS, Tuberculosis and Malaria**, and has contributed more than CAD 1.5 billion since its inception in 2002. Proudly, this constitutes the largest donation made by Canada to an international financing institution for health. With the launch of the **Muskoka Initiative for Maternal, Newborn and Child Health (MNCH)** in 2010, Canada has established itself as a global champion for advancing maternal and child health in low-income countries. Averting new HIV infections among children and ensuring their mothers have early access to quality HIV treatment for their own health across their lifespan must remain a top priority and core element of the Canada's MNCH strategy. To achieve this **requires bold leadership, continued support and strong investment from Canada.**

We, as a group of Canadian civil society organizations and members of the Global Treatment Access Group (GTAG), urge the Government of Canada to re-affirm its leadership in ensuring that global commitments to universal access to HIV treatment and the reversal of the spread of HIV remain a key priority. **These efforts must also be accompanied by accessible and affordable capacity to detect, diagnose and treat co-infections.** Allowing these commitments to fall from the post-2015 agenda will put millions of women and children at risk, quickly retract the tremendous progress made to eradicate HIV infection, and will give way to the unnecessary deaths of millions more. This is the moment to harness new research evidence and knowledge to fight the epidemic in a coordinated, strategic manner and achieve the greatest impact.

We have the possibility to eliminate HIV as a major threat to public health globally and to deliver on Canada's promise to make a tangible and sustainable difference in the lives of the world's most vulnerable people. We look to the Canadian delegation to the UN to champion this opportunity during and beyond the UN special session on the MDGs. For your convenience, we enclose the recent global report (in French and English) launched on September 12, 2013 titled, **Costs of Inaction**. We look forward to engaging with the members of the Canadian delegation in a meaningful dialogue following the UN General Assembly and the special events that surround this important moment in our global history.

Yours sincerely,

Canadian HIV/AIDS Legal Network
Dignitas International
Grandmothers Advocacy Network (GRAN)
Interagency Coalition on AIDS and Development (ICAD)
International Council of AIDS Service Organizations (ICASO)
International Civil Society Support (ICSS)
RESULTS Canada