

## OVERVIEW

- More than 1,000 children are born with HIV every day
- Without treatment, the risk of a mother transmitting HIV to her infant is estimated at 5-10% during pregnancy, 10-20% during labor/delivery, and 5-20% during breastfeeding
- Among resource-poor populations without preventive interventions, the cumulative risk of HIV transmission ranges from 20% to 45%, depending on breastfeeding duration. Once interventions are implemented, however, the risk drops to less than 5%
- 90% of prevention need comes from sub-Saharan Africa, home to 19 of the 20 countries with the greatest prevalence of HIV-positive pregnant women
- Nearly 60% of all HIV-infected persons in sub-Saharan Africa are women
- Immediate engagement in activities to prevent mother-to-child HIV transmission could mean a return on investment of 2.1 million lives born free of HIV by 2015

## MTCT: THE PROBLEM

In 2008, an estimated 430,000 children aged 0-14 were newly infected with HIV. Over 90% of them received the virus from their mothers. Mother-to-child transmission (MTCT) occurs when an HIV-positive mother passes the infection to her child during pregnancy, childbirth, or breastfeeding. The prevention of mother-to-child transmission is referred to as PMTCT and includes both preventing transmission to infants *and* protecting HIV-positive women.

Vertical transmission is **wholly preventable** when pregnant HIV-positive women are provided with the appropriate treatment. Specifically, treatment entails the provision of lifelong antiretroviral therapy (ART) for infected women and antiretroviral (ARV) prophylaxis to prevent transmission during pregnancy, delivery and breastfeeding. The United Nations has adopted Millennium Development Goals and General Assembly Special Session (UNGASS) targets to eliminate pediatric HIV infections, reduce mortality and improve maternal and child health. Specifically, UNGASS Target 54 aimed to cut the proportion of infants infected by HIV in half by 2010, ensuring that “80% of pregnant women accessing antenatal care have HIV information, counseling and other HIV prevention services available to them.” As of 2008, the most recent year for which data is available, an estimated 45% of pregnant HIV-positive women living in low resource settings received some ARV drugs to prevent MTCT. Clearly, there is more work to be done.

## HOW MTCT AFFECTS BUSINESS

Businesses across varied industries and sectors benefit from engaging in PMTCT interventions, due to their positive impact on a company’s workforce, bottom line and reputation.

### *Women’s Workforce and Economic Participation*

An investment to keep a child HIV-free is an investment in the mother as well—to keep her healthy and economically able to provide for her family. Companies that invest in women’s health and livelihood see returns in the form of a strengthened female workforce, more vibrant communities in the areas where they operate and an increased consumer base with financial access to their products. Worldwide, women control over US\$20 trillion in spending and increasingly occupy the role of primary financial decision maker within households. When HIV-positive women have access to ARV treatment, their health is maintained and they can continue working—whether as company employees, entrepreneurs or workers in the informal sector.

### *Long-term Profitability*

PMTCT is a sound investment in a company’s long-term sustainability and profitability, particularly in African countries. In general, businesses must spend more on medicine and health care (or health insurance), absenteeism, labor turnover, and reduced worker productivity when HIV-positive workers cannot or do not access treatment. As such, many companies now provide HIV/AIDS prevention and care services to their workforce. Extending services to include PMTCT is a logical next step.

### *Reputation Building*

Research shows that consumers prefer to buy from socially responsible companies, and may demonstrate greater loyalty over longer periods to such brands. Supporting PMTCT initiatives has the twofold benefit of upholding a corporate brand that is socially responsible and improving public health outcomes. PMTCT engagement is particularly pertinent for health sector companies, those with a

customer base in infant or children's products and services, or those with a predominantly female workforce.

## WHAT CAN BUSINESSES DO?

Businesses can take meaningful steps toward achieving the 2015 goal that no infant becomes HIV positive. Given that PMTCT extends beyond infant services, a business should also focus on providing continuous care to HIV-infected women before, during, and after pregnancy.

### DON'T FORGET THE "M"

Three of the four key objectives of PMTCT endorsed by the WHO address the needs of women.

1. Prevent HIV transmission to women
2. Prevent unintended pregnancies among women with HIV
3. Prevent HIV transmission from an HIV-positive woman to her infant
4. Provide appropriate treatment, care and support to mothers with HIV, their children and their families

When businesses address the needs of both the mother and child in HIV prevention programs, they create a strong foundation for impactful PMTCT interventions.

## BEST PRACTICE EXAMPLES

Companies have achieved success with PMTCT programs through advocacy for education and prevention, leveraging their core competencies, engaging their workforce and supporting the communities in which they operate.

### Program Spotlight: Johnson & Johnson

GBCHealth member Johnson & Johnson recently launched Every Mother, Every Child, a five-year initiative to improve maternal and child health in developing countries. One aspect of this initiative is the Safe Birth Program, which collaborates with the South Africa-based NGO

mothers2mothers to provide free peer counseling on PMTCT to HIV-positive



pregnant women. J&J also educates women through Mobile Health for Mothers, providing free text messages to pregnant women on prenatal care, clinic appointments and contact with a health mentor.

### Program Spotlight: Boehringer Ingelheim & Abbott Labs

Since 2003, GBCHealth members Boehringer Ingelheim and Abbott Laboratories have partnered to demonstrate their commitment to corporate responsibility in developing countries. They provide UNICEF (and similar organizations) with key products to achieve PMTCT goals through a donation program. The packages include Abbott's rapid HIV tests, which allow women to learn their status in 15 minutes, and Boehringer Ingelheim's Viramune® (the brand name for nevirapine), an ARV drug that reduces the transmission of HIV from mother-to-child in pregnant women who are not on antiretroviral therapy. Through this program leveraging the companies' core competencies, over two million mothers have been treated.

### Program Spotlight: Freeport-McMoRan Copper & Gold

In 2010, GBCHealth member Freeport-McMoRan expanded its workplace HIV prevention program in the Democratic Republic of the Congo to include PMTCT. Pregnant women entering the health clinic, which serves mine workers and their dependents, are educated on HIV and can be tested if they choose. Women automatically receive peripartum treatment if they are positive. Recognizing that evaluation is an important component of any program, Freeport has put a system in place to measure future MTCT incidence and track their program's success.

### Program Spotlight: Chevron

GBCHealth member Chevron has a Global HIV/AIDS Policy that informs, treats and prevents transmission among its employees and their dependents. At sites in Angola and Nigeria, they directly address PMTCT by partnering with pharmaceutical companies to provide ARVs as necessary to mothers and their children. Through the development of a workplace policy and program extended into the community, Chevron has achieved tremendous success in PMTCT. Between 2007 and 2009, there were no new cases of MTCT among Chevron employees and dependents.

## ACTIONS YOUR BUSINESS CAN TAKE TO PREVENT MOTHER-TO-CHILD HIV TRANSMISSION

### Advocacy

- *Make MTCT a key social priority for your company—advocate internally to inform and engage employees on the issue, demonstrating your company’s commitment to an important global cause.*
- *Emphasize HIV primary prevention and family planning services in company-sponsored community interventions or health education campaigns.*
- *Advocate among national and local governments to improve policies and programs for HIV prevention among pregnant women.*



### Core Competencies

- *Use your company’s unique skill sets and assets in marketing and media to promote HIV prevention and healthy behaviors in the workplace (e.g. television programming, PSAs, web tools and print materials).*
- *Invest in innovative HIV treatment and prevention solutions, services, technologies and products. Be creative! Most companies can find an angle to contribute.*

### Workforce

- *Encourage employees to get tested for HIV. Consider a testing campaign focused especially on your female workforce.*
- *Review company policies, SOPs, programs, and benefits to ensure inclusion of health education, counseling, and access to care for HIV-positive workers and their families.*
- *Incorporate PMTCT care within existing company maternal and child health services to ensure that HIV treatments are available and accessible to pregnant women.*

### Community

- *Make sure ARV drugs are accessible to your employees and communities through direct subsidies and/or employer-sponsored insurance.*
- *Partner with different organizations and institutions to provide women and their children with greater access to health services while strengthening community health infrastructure.*

*If your company has engaged/will address PMTCT, please let us know.*



### ***Healthy Women, Healthy Economies***

This issue brief is produced by *Healthy Women, Healthy Economies*: GBCHealth's platform for galvanizing and facilitating corporate action to improve the health, well-being, and opportunity of women and girls. Launched in 2011, HWHE is centered on 4 main pillars of impact: Health (especially maternal and reproductive health, HIV/AIDS and PMTCT), Education, Economic Empowerment and Rights and Inclusion. HWHE helps member companies explore different types of interventions across these areas that the business community is uniquely equipped to advance, ranging from employee engagement and workplace programs, to technical education and materials, to awareness-building and advocacy. To learn more about *Healthy Women, Healthy Economies*, please contact Laura Rosen at [lrosen@gbchealth.org](mailto:lrosen@gbchealth.org).

### **About GBCHealth**

GBCHealth is a global coalition of over 200 private sector companies and top NGOs leading the business fight for improved global health. GBCHealth supports members by developing comprehensive workplace policies; supporting community programs; leveraging core competencies; facilitating leadership and advocacy by business leaders; and brokering partnerships. GBCHealth also manages the private sector delegation to the Global Fund to Fight AIDS, Tuberculosis and Malaria, serving as an entry-point for corporate collaboration and engagement with the Fund and its recipients worldwide.

GBCHealth has offices in New York, Johannesburg, Beijing, Nairobi and Moscow. For more information on GBCHealth, please visit [www.gbchealth.org](http://www.gbchealth.org).

### **ADDITIONAL RESOURCES**

EngenderHealth

COPE® for Services to Prevent Mother-to-Child Transmission of HIV: A Toolbook to Accompany the COPE® Handbook (2005). Retrievable [here](#).  
FHI (formerly Family Health International)

Preventing Mother-to-Child Transmission (PMTCT) of HIV. Retrievable [here](#).

The United States President's Emergency Plan for AIDS Relief (PEPFAR)

Prevention of Mother-to-Child Transmission (Updated January 2009). Retrievable [here](#).

PSI (formerly Population Services International)

PSI has created numerous PMTCT materials for programs in Uganda and Vietnam. Click [here](#) for more information.