

AFRICAN STRATEGIES FOR HEALTH



Photo by Cora Peterson

INTEGRATED PEDIATRIC HIV AND CHILD HEALTH SERVICES IN SUB-SAHARAN AFRICA: DISCUSSION BRIEF

Eliminating HIV infections among children is a key strategy for ending preventable child deaths and achieving an AIDS-Free Generation. While the continued expansion of prevention of mother-to-child transmission (PMTCT) services has successfully reduced the annual number of new infections among children globally by 56% since 2010, coverage of PMTCT is not universal and early diagnosis, treatment, and care for infants and children is needed.¹

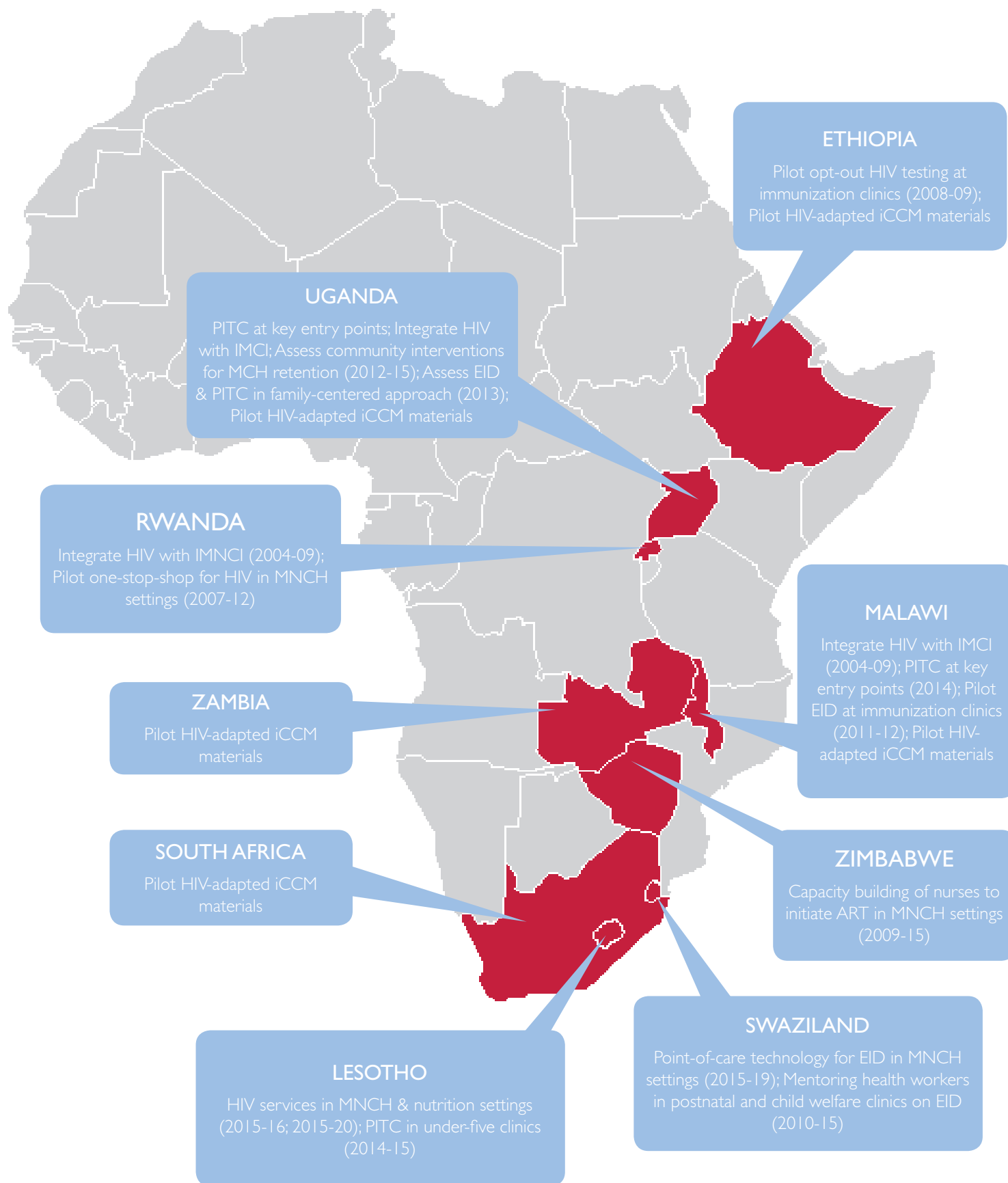
There is a growing recognition of the need for greater alignment between HIV testing and treatment and existing maternal, newborn, and child health (MNCH) services to achieve the dual goals of ending pediatric AIDS and improving child survival.^{2,3} In many countries, the integration of pediatric HIV and child health platforms and interventions is already happening, and while the existing evidence-base is limited, several studies and reviews suggest that HIV and MNCH service integration is feasible and can improve various health and behavioral outcomes.^{4,5}

KEY TERMS

EID	Early Infant Diagnosis
ICCM	Integrated Community Case Management
IMCI	Integrated Management of Childhood Illnesses
MNCH	Maternal, Newborn, and Child Health
PITC	Provider-initiated HIV testing and counseling
PMTCT	Prevention of Mother-to-Child Transmission

In order to enhance understanding of current efforts to deliver integrated pediatric HIV and child health services, the U.S. Agency for International Development's (USAID) Africa Bureau and their project African Strategies for Health (ASH) conducted research to produce a mapping of existing initiatives in Sub-Saharan Africa. Data collection included desk review of grey literature, global health implementing partner websites, and donor websites. The resulting mapping presents examples that were publicly available online with varying levels of detail as of June 2016. This brief is intended to catalyze discussion; further analysis of the impact and results of these efforts is needed to ensure that interventions and programming are designed with potential for greatest impact.

ILLUSTRATIVE INTEGRATED PEDIATRIC HIV AND CHILD HEALTH PROGRAMMING IN AFRICA



EXAMPLES OF PEDIATRIC HIV ACTIVITIES IMPLEMENTED IN CHILD HEALTH PLATFORMS

COUNTRY	ACTIVITY	IMPLEMENTER	DONOR	DATE
ETHIOPIA				
	Pilot opt-out HIV testing at immunization clinics	Worldwide Orphans Foundation (WWO), AIDS Healthcare Foundation	WWO, Clinton Foundation	2008-2009
	Pilot HIV-adapted iCCM materials	Not Available	UNICEF	2016
LESOTHO				
	HIV services provided in MNCH and nutrition settings	Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Ministry of Health (MoH), Baylor, Lesotho Network of AIDS Service Organizations	USAID/PEPFAR; CDC/PEPFAR	2015-2016; 2015-2020
	PITC in under-five clinics	EGPAF, Baylor	UNICEF	2014-2015
MALAWI				
	Pediatric HIV prevention, care, and support integrated into IMCI materials	Management Sciences for Health (MSH), Academy for Educational Development (AED), John Snow Inc. (JSI), PATH, Save the Children, Manoff Group	USAID	2004-2009
	PITC at key entry points, including nutrition and pediatric wards, and under-five clinics	EGPAF, MoH	CDC/PEPFAR	2014
	Pilot integration of EID testing into immunization clinics	University of North Carolina, Baylor College of Medicine Children's Foundation	NIH	2011-2012
	Pilot HIV-adapted iCCM materials	Not Available	UNICEF	2016
RWANDA				
	Pediatric HIV integrated with ongoing Integrated Management of Neonatal and Childhood Illnesses (IMNCI) efforts	MSH, AED, JSI, PATH, Save the Children, Manoff Group	USAID	2004-2009
	Pilot "one-stop-shop" model for integrated HIV services in MNCH setting	EGPAF	USAID/PEPFAR	2007-2012
	Pilot postnatal care in iCCM materials	Not Available	UNICEF	2016



Photo by James Pursey/EGPAFG

COUNTRY	ACTIVITY	IMPLEMENTER	DONOR	DATE
SOUTH AFRICA				
	Pilot HIV-adapted iCCM materials	Save the Children, EGPAF, MSH, CIFF	UNICEF, WHO, USAID, CHAI, CDC	Not Available
SWAZILAND				
	Mentoring HCWs at postnatal and child welfare clinics on EID and early ART	EGPAF	UNITAID	2010-2015
	Point-of-care technology for early infant diagnosis in MNCH settings	EGPAF	UNITAID	2015-2019
UGANDA				
	PITC at key entry points, including nutrition, TB, PNC, and inpatient pediatric wards	MoH, EGPAF, ASSIST Project	PEPFAR, CHAI	Not Available
	Pediatric HIV included in IMCI algorithm and training materials	MoH	MoH, WHO/ Uganda	Not Available
	Assess community-based interventions on demand for, access to, and retention in MNCH services	EGPAF	Gates Foundation; Department of Foreign Affairs, Trade and Development Canada	2012-2015
	Assess institutionalization of EID and PITC in family-centered approach	Mildmay Uganda	WHO MNCAH Department	2013
	Pilot HIV-adapted iCCM materials	Not Available	UNICEF	2016
ZAMBIA				
	Pilot HIV-adapted iCCM materials	Not Available	UNICEF	2016
ZIMBABWE				
	Capacity building of nurses to initiate children on ART in MNCH settings	EGPAF	CIFF, DFID	2009-2015
MULTI-COUNTRY: CAMEROON, COTE D'IVOIRE, KENYA, LESOTHO, MOZAMBIQUE, RWANDA, SWAZILAND, ZAMBIA, ZIMBABWE				
	Optimizing EID and point-of-care diagnosis in child-centered services	EGPAF, UNITAID	UNITAID	2015-19

ENDNOTES

1. Joint United Nations Programme on HIV/AIDS (UNAIDS) (2016) Prevention Gap Report 2016.
2. The Double Dividend, ICASA, December 7 2013.
3. The President's Emergency Plan for AIDS Relief (PEPFAR) (2011) PEPFAR Guidance on Integrating Prevention of Mother to Child Transmission of HIV, Maternal, Neonatal, and Child Health and Pediatric HIV Services.
4. Lindegren ML, Kennedy CE, Bain-Brickley D, et al. (2012) Integration of HIV/AIDS services with maternal, neonatal and child health, nutrition, and family planning services. Cochrane Database of Systematic Reviews 2012, Issue 9. Art. No.: CD010119. DOI: 10.1002/14651858.CD010119.
5. WHO (2008) Technical Consultation on the Integration of HIV Interventions into Maternal, Newborn and Child Health Services.

ABOUT ASH

African Strategies for Health (ASH) is a five-year project funded by the U.S. Agency for International Development's (USAID) Bureau for Africa and implemented by Management Sciences for Health. ASH works to improve the health status of populations across Africa through identifying and advocating for best practices, enhancing technical capacity, and engaging African regional institutions to address health issues in a sustainable manner. ASH provides information on trends and developments on the continent to USAID and other development partners to enhance decision-making regarding investments in health.

Additional information can be obtained from:
 African Strategies for Health 4301 N Fairfax Drive, Arlington, VA 22203 • +1.703.524.6575 • AS4H-Info@as4h.org
www.africanstrategies4health.org

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