



Photo: Nigel Barker, 2009



**Elizabeth Glaser
Pediatric AIDS
Foundation**

Prevention of Mother-to-Child Transmission of HIV

The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) is a global leader in the fight to eliminate pediatric AIDS. For over two decades EGPAF has been globally recognized as one of the largest supporters of prevention of mother-to-child transmission of HIV (PMTCT) services worldwide.

EGPAF supports HIV prevention, care and treatment activities at the global, national, district, and site levels. EGPAF works hand-in-hand with governments, ministries of health, and local organizations to provide comprehensive programmatic, technical, and operational support to improve local capacity and ensure sustainability of programs.

EGPAF, through support from the U.S. Government, private and multilateral donors, supports ministries of health to offer a comprehensive package of services to women, children, and their

families based on the four components of PMTCT: prevention of new HIV infections in women of childbearing age, prevention of unintended pregnancies in HIV-positive women, prevention of HIV transmission from HIV-positive women to their children, and provision of HIV treatment, care and support services.

For the first time in the thirty year history of the global AIDS epidemic, the elimination of mother-to-child transmission of HIV is considered a realistic public health goal.

EGPAF'S IMPACT

Supported local government and partners to strengthen and roll-out PMTCT services in 23 countries over 20 years with current support in 19 high-burden countries to:

Provided over **24 MILLION** women with services to prevent transmission of HIV to their babies



Tested nearly **23 MILLION** women for HIV

Provided more than **ONE MILLION** children with ARV prophylaxis to prevent vertical transmission of HIV



Provided more than **1.6 MILLION** pregnant women with ARV prophylaxis to prevent vertical transmission of HIV

AREA OF EXPERTISE

Global Advocacy and Sharing of Best Practices

EGPAF works at the global level to ensure that children are at the forefront of the HIV/AIDS response. EGPAF is one of the key global implementation partners participating in global working groups and organizations such as the Interagency Task Team on the prevention and treatment of HIV infection in pregnant women, mothers and children (IATT) and the Global Steering Group (GSG) for implementation of the Global Plan.

EGPAF leverages its country programs to promote sharing of best practices and lessons learned across and beyond EGPAF country programs to increase the quality and effectiveness of PMTCT programming. EGPAF promotes communities of practice by bringing technical staff together across country programs to share lessons learned and practical implementation of high-impact interventions.

EGPAF hosts the Global Steering Group (GSG) Secretariat and has assumed a leadership role in the GSG to support implementation and resource mobilization for the Global Plan for Elimination of New HIV Infections Among Children by 2015 and Keeping Their Mothers Alive.

Technical Assistance at the National Level

EGPAF provides technical assistance to ministries of health at the national level. Support includes participation in national technical working groups, capacity building of staff, and support for adapting, revising and disseminating national policies and guidelines for PMTCT and HIV care and treatment.

Preventing New HIV Infections among Women of Childbearing Age

HIV Counseling and Testing (HCT)

Across EGPAF-supported programs, EGPAF helps ministries of health (MOHs) ensure that provider-initiated testing and counseling (PITC) is a routine component of health service delivery in antenatal care (ANC), pediatric settings, maternity wards, tuberculosis/sexually transmitted infection (TB/STI) clinics, inpatient wards, and primary care clinics.

Combination Prevention

EGPAF utilizes a comprehensive approach to prevention which includes biomedical, behavioral, and structural interventions. In Uganda, EGPAF leads efforts to increase voluntary male circumcision, combined with behavior change messaging, while other programs offer couples counseling and testing and education in ANC after a woman tests negative.

Male Involvement

EGPAF programs have proven experience reaching men in the community through ongoing men's groups, couples testing, male dialogues at community mobilization campaigns, and targeted invitations. In Rwanda, the PMTCT program gives pregnant women attending ANC invitations for their partners to join them at the clinic. This, along with other innovative strategies, has led to over 2.4 million male partners being tested for HIV across EGPAF-supported government sites.

Prevention with Positives (PwP)

EGPAF supports ministries of health to integrate HIV prevention messages into clinical settings for all encounters with HIV-

positive patients. Messages include counseling on safer sex, support for partner and family member testing and disclosure of HIV status, family planning, HIV transmission risk assessment, assessment and treatment of sexually transmitted infections, and adherence counseling and support.

Prevent Unintended Pregnancy among Women Living with HIV

Family Planning Services

EGPAF supports family planning services for HIV-positive women through counseling programs, condom distribution, and linkages to other family planning methods. Offering counseling and testing services to women seeking family planning services provides the opportunity to identify HIV-positive women and link them to appropriate care. In Rwanda, EGPAF worked with the MOH to develop a model for integrating family planning and HIV services, including an initiative to follow-up with HIV-discordant couples with family planning campaigns.

Prevent Vertical Transmission of HIV

Access to high-quality prevention regimens

EGPAF actively supports ministries to ensure that the most efficacious ARV regimens, including lifelong ART for eligible pregnant women, are rolled out to health facilities in accordance with current national guidelines.

Since 2013, EGPAF has been intensively involved in supporting ministries of health in supported countries with transition to the 2013 World Health Organization PMTCT guidelines, recommending lifelong ART among all HIV-positive pregnant and breastfeeding women (known as Option B+)

Integration of services and strengthened linkages and referrals

EGPAF supports local governments to integrate PMTCT services into broader maternal, newborn, and child health services. This integrated approach allows women to access both HIV services, as well as, broader maternal, newborn, and child health (MNCH) services as part of routine care increasing the efficiency of services, as well as, sustainability of HIV programming.

Improve retention in services

EGPAF utilizes different methods for active follow-up to ensure that women follow referrals from PMTCT to care and treatment, return for antiretroviral drug refills, and bring their infants back

for HIV-testing. Provision of community and psychosocial support provides mechanisms for women to create strong support systems that will enforce health-seeking behavior and patient-driven care.

EGPAF utilizes innovative technologies, such as cell-phone SMS messaging to send reminders about appointments

Provide Appropriate Treatment, Care, and Support

EGPAF supports ministries of health and local partners to provide a complete continuum of care for all HIV-positive women and infants. Once a woman is identified as HIV-positive, she is linked to care and treatment services. EGPAF aims to increase access to these services by supporting scale-up and roll-out of ART and HIV care services at lower level facilities, through strategies such as down-referrals and by supporting task-shifting so that nurses are able to provide antiretroviral therapy.

EGPAF's family focused approach recognizes a woman's individual needs for herself and her family. EGPAF provides support to link women to broader services including family planning, STI or TB services, additional psychosocial support, and appropriate pediatric services.

Care and follow-up of HIV-exposed infants

EGPAF works with ministries of health to scale-up early infant diagnosis (EID) and initiate treatment by training health facility staff to collect dried blood spot (DBS) specimens for polymerase chain reaction (PCR) diagnostic tests, ensuring laboratory staff have adequate resource capacity for infant testing, and utilizing innovative techniques, such as SMS printers, to improve transport of samples and facilitate return of results. EGPAF supports health care providers to treat children through clinical mentorship and supportive supervision, and works to ensure that all HIV infected infants under the age of two are started on ART immediately. EGPAF also works to increase provision of Cotrimoxazole prophylaxis for HIV-exposed and infected infants.

Infant feeding support

EGPAF has led the way to ensure that ministries of health and health facility staff have the necessary knowledge, skills, and job aids to scale-up appropriate infant feeding support and activities. In Rwanda, EGPAF supported local government to develop an integrated infant and young child nutrition (IYCN) package of services.



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*Until no
child has
AIDS.*