

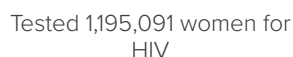
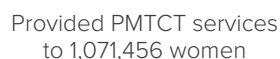
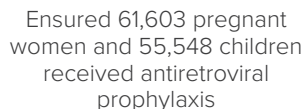
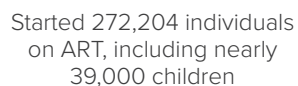
Working with Women, Children, and Families to End Pediatric AIDS

Approximately one million people are currently living with HIV in Malawi. The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) began collaborating with local partners in 2001 to initiate one of Malawi's first programs to provide prevention of mother-to-child HIV transmission (PMTCT) services.

Currently, EGPAF-Malawi supports provision of comprehensive adult, adolescent, and pediatric HIV prevention, care, and treatment services in 179 facilities, providing technical assistance support to Malawian Ministry of Health (MOH), community- and faith-based organization health teams. EGPAF also conducts operations research and advocacy for national and local policies, guidelines, and resources to end pediatric HIV and AIDS in Malawi.

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| Population | 18,622,100 |
| Number of people living with HIV | 1,000,000 |
| Adult (15-49 years of age) HIV prevalence rate | 10.6% |
| Women aged 15 years of age and older living with HIV | 550,000 |
| Children (0-14 years of age) living with HIV | 71,000 |
| Children infected with HIV due to mother-to child HIV transmission | 4,300 |
| Deaths due to AIDS in 2017 | 17,000 |
| Number of new HIV infections in 2017 | 39,000 |
| Pregnant women living with HIV with treatment access to prevent transmission of HIV to their children | 92% |

Since 2001, EGPAF-Malawi has:



EGPAF-supported districts

* Sources: Joint United Nations Programme on HIV and AIDS, HIV and AIDS estimates (2018) and World Bank, Malawi population projection (2019), Malawi Population Based HIV Impact Assessment (2015-2016).

** Data as of May 2019

PROGRAM IMPLEMENTATION

Achieving HIV Epidemic Control through Scaling-up Quality Testing, Care and Treatment in Malawi (2017-2022)

EGPAF, in close collaboration with Malawi's MOH, is implementing this five-year project under the U.S. Centers for Disease Control and Prevention (CDC) with funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The project is implemented in 179 facilities across nine districts. It aims to deliver HIV care and treatment and TB services in line with Malawi's National HIV/AIDS Strategic Plan for 2015-2020 and PEPFAR's 2017-2020 Strategy for Accelerating HIV/AIDS Epidemic Control.

Catalyzing Pediatric Tuberculosis Innovations (CaP TB) Project (2017-2021)

CaP TB is a four-year project, funded and supported by Unitaid, which aims to reduce pediatric TB morbidity and mortality in nine sub-Saharan African countries, including Malawi, as well as in India. The project will be implemented in 40 high-TB burden health facilities in seven districts. In collaboration with the National TB Program, EGPAF will identify innovations for diagnostics, treatment, and service delivery models to tackle pediatric TB case finding, prevention, care, and treatment services.

Technical Assistance to Community-Based Organizations (2017-2020)

Through funding from ViiV's Positive Action for Children Fund, EGPAF provides technical assistance and capacity building to CBOs identified by ViiV. As of March 2018, EGPAF was supporting five CBOs in four districts. Capacity building focuses on governance, organizational management including human resources, procurement, awards and finance, program management, monitoring and evaluation, advocacy and resource mobilization. With this capacity building, the CBOs will be able to sustainably improve HIV outcomes through their incremental improvement in organizational and technical capacity.

ADVOCACY

EGPAF-Malawi participates in numerous national technical working groups focused on PMTCT, HIV care and treatment, TB, human resources for health, sexual and reproductive health, program monitoring and evaluation, and quality assurance. EGPAF continually promotes solutions to reduce the pediatric treatment gaps.

RESEARCH

EGPAF Malawi conducts operations research to better understand patient perceptions of HIV prevention, care, and treatment services, and to increase opportunities to improve early infant HIV diagnosis (EID), care and treatment, and PMTCT/ART services. Findings provide important information to improve service delivery. Some of the continuing studies include:

ADAPTATION AND EVALUATION OF THE PMTCT COMMUNITY SCORE CARD (CSC) APPROACH IN DEDZA AND NTCHEU DISTRICTS (2017-2019): This is being implemented in collaboration with the MOH and CARE. The adaptation of the CSC will be evaluated through a pre-post design to measure the change in maternal retention on ART,

maternal retention across the PMTCT service cascade, and uptake of EID services following CSC implementation.

THE MALAWI HIV DRUG RESISTANCE (HIVDR) SURVEY (2017-2019): Using a cross-sectional design, this study aims to assess nationally representative levels of HIVDR and viral load suppression in both adults and children receiving ART (ADR) and those initiating ART.

AN EVALUATION OF THE EXTENSION FOR COMMUNITY HEALTH CARE OUTCOMES (ECHO) PROJECT (2018-2019): The ECHO project aimed to increase the workforce capacity of the Malawi ART program through knowledge-sharing networks that use multi-point videoconferencing with technical experts. This study evaluates ECHO-participating workforce ability to provide high quality HIV care and treatment.

NOTIFICATION SERVICES IN HIGH HIV BURDEN DISTRICTS OF MALAWI: A PRAGMATIC, NON-RANDOMIZED, STEPPED-WEDGE STUDY (2018-2019): The study evaluates the effectiveness and feasibility of the voluntary assisted partner notification (VAPN) intervention in real-world programmatic settings in high-burden facilities in six priority districts in Malawi. The primary objective is to compare the effectiveness of standard of care (SOC) with SOC plus VAPN in reaching contacts of index clients with HIV testing services.

VIRAL LOAD AUDIT STUDY (2018-2019): EGPAF-Malawi conducted an audit of patient records to assess viral load testing and high viral load management, to identify patients who missed viral load testing and services. The study reviewed patient records to assess how many of those identified as missing testing or services are reached with patient tracking following the audit.

PELLAGRA STUDY (January 2019-July 2019): This is a case control study with prospective enrollment. The primary aims of the study are to: describe the epidemiology of verified pellagra cases, measure relative odds of having pellagra among isoniazid (INH)-exposed people compared to those without exposure, while controlling for known pellagra risk factors, and measure the time from INH initiation to the onset of pellagra.

REACHING MEN THROUGH A DIFFERENTIATED SERVICE DELIVERY MODEL IN BLANTYRE AND THYOLO (August 2019-December 2019): The primary objective of the study is to assess the effect of male-friendly clinics on the uptake of HIV testing services, specifically on the number of male patients accessing services and the proportion of male patients who are tested for HIV before and after the launch of the male-friendly clinic model.

VALIDATION OF SCREENING TOOL USED TO IDENTIFY CHILDREN LIVING WITH HIV IN HIGH VOLUME OUTPATIENT DEPARTMENTS (OPD) IN MALAWI (June 2019-December 2019): The purpose of this protocol is to develop and validate a clinical screening tool in malaria endemic settings to identify pediatric patients who are at higher risk of HIV infection and should be prioritized for HIV testing in various OPD settings with a declining HIV prevalence and limited resources.

EVALUATION OF THE CATALYZING PEDIATRIC TB INNOVATION PROJECT: A PRE- AND POST-IMPLEMENTATION ASSESSMENT (TIPPI) ACROSS 10 COUNTRIES (2017-2021): The purpose of the protocol is to measure the effectiveness of the CaP TB Project across 40 sites on key service delivery and clinical outcomes and compare these outcomes to those obtained at baseline. This study will determine the effect of the CaP TB Project on TB service indicators and clinical outcomes compared to baseline in a subset of project sites. The evidence generated from this program evaluation will support strategic recommendations to improve pediatric TB care.

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