



**Elizabeth Glaser  
Pediatric AIDS  
Foundation**

## THE MALAWI PROGRAM

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

### EGPAF IN MALAWI

Approximately one million people are currently living with HIV in Malawi. Of those, 110,000 are children under the age of 15. There are nearly 58,000 HIV-positive women giving birth annually in Malawi. Without any intervention, an estimated 17,400 infants will be born with HIV each year.

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 to 147 Malawian Ministry of Health (MOH) and faith-based facilities including district-level health teams and community-based organizations (CBOs).

### COUNTRY PROFILE\*

Population	18,091,000
Number of people living with HIV	1,000,000
Adult (15-49 years of age) HIV prevalence rate	9.2%
Women aged 15 years of age and older living with HIV	550,000
Children (0-14 years of age) living with HIV	110,000
Coverage of people receiving antiretroviral therapy (ART)	66%
Deaths due to AIDS in 2016	24,000
Number of new HIV infections in 2016	36,000

### KEY PROGRAM ACCOMPLISHMENTS\*\*

Since 2001, EGPAF-Malawi has:



Started over 60,700 pregnant women on ART



Prevented the transmission of HIV to over 11,500 babies

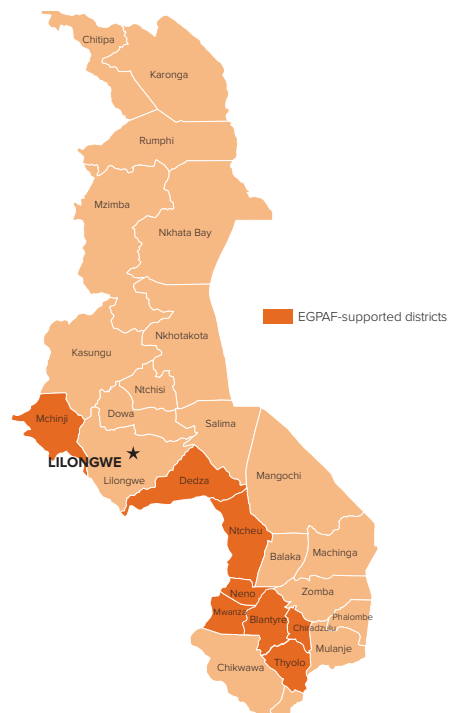


Provided PMTCT services to more than 1,220,000 women



Supported almost 80 health facilities

### EGPAF-MALAWI PROGRAM GEOGRAPHIC COVERAGE



\* Sources: Joint United Nations Programme on HIV and AIDS, HIV and AIDS estimates (2016) and World Bank, Malawi population projection (2016).

\*\* Data as of May 2018

## 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 147 facilities across eight 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. In collaboration with the National TB Program, EGPAF will identify innovations for diagnostics, treatment and service delivery models to identify and treat more children living with latent or active TB.

### 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.

### Delivering Technical Assistance (DELTA) Project (2013-2019)

To build local capacity and sustain gains of national and international HIV/AIDS programs, EGPAF launched the DELTA project in 2013 with PEPFAR/CDC funding. The purpose of DELTA is to provide targeted and cost-effective technical assistance and program implementation expertise in PMTCT and pediatric and adult HIV care and treatment service programs in high-HIV prevalence settings. The following DELTA initiatives are currently underway:

**EXTENSION FOR COMMUNITY HEALTHCARE AND OUTCOMES (ECHO):** Under this project, EGPAF is collaborating with Lighthouse to pilot the ECHO mentorship model in Malawi to develop and demonstrate an effective telehealth clinical mentorship model for HIV care and treatment in a resource-constrained setting.

**ADAPTATION AND EVALUATION OF THE PMTCT COMMUNITY SCORE CARD (CSC) APPROACH IN DEDZA AND NTCHEU DISTRICTS:** The main goal of the CSC intervention is to positively influence the quality, efficiency, and accountability with which health services are provided to ultimately strengthen maternal retention on ART, change in maternal retention across the PMTCT service cascade, and uptake of EID services within these two districts.

**CONDUCTING HIV DRUG RESISTANCE SURVEILLANCE IN MALAWI:** EGPAF and the MOH in Malawi are collaborating to conduct an HIV drug resistance (DR) surveillance study, to assess nationally representative prevalence of HIV DR and viral load suppression in both adults and children receiving ART (known as acquired drug resistance, or ADR) and those initiating ART (pre-treatment drug resistance, or PDR) using cross-sectional study designs. This surveillance approach is based on a CDC-developed generic protocol and WHO guidance to be conducted at regular intervals.

## 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 and increase opportunities to improve EID, care and treatment, and PMTCT/ART services. Findings further provide important information to improve service delivery. Completed studies include:

**BARRIERS, FACILITATORS, AND RECOMMENDATIONS FOR THE EARLY INFANT DIAGNOSIS AND TREATMENT CASCADE:** This ViiV-funded, qualitative study aimed to document facilitators and barriers within the EID and treatment cascade. Study staff administered semi-structured interviews with caregivers of infants eligible for EID (n=47) and health workers in five clinics in Malawi in April 2013. Study staff observed participation in various steps of the EID and treatment cascade. Published in 2015.

**ACCEPTABILITY OF LIFELONG TREATMENT (OPTION B+) AMONG HIV-POSITIVE PREGNANT AND LACTATING WOMEN:** This UCLA Dance Marathon-funded study aimed to better understand the acceptability of Option B+ among pregnant and lactating women in Malawi, where Option B+ has been implemented since 2011. The study staff conducted in-depth interviews and focus group discussion among women and HIV service health workers in antenatal settings or ART clinics from four clinics in Malawi between September and December 2013.

**RETENTION ACROSS THE PMTCT CASCADE IN SELECTED COUNTRIES (HIVCORE):** This study involved a retrospective records review of HIV-positive pregnant women and HIV-exposed infants who attended health services at select sites between October 2011 and March 2012. This study set out to find levels of retention among women and children enrolled in PMTCT services.

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