



Photo: Heather Mason/EGPAF, 2014



**Elizabeth Glaser  
Pediatric AIDS  
Foundation**

## THE ZIMBABWE PROGRAM

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

### THE ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION IN ZIMBABWE

Zimbabwe is one of the countries hardest hit by the AIDS epidemic in sub-Saharan Africa. In Zimbabwe, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) brings clinical HIV expertise, a focus on strengthening data quality and health systems, and a wealth of expertise on community-level interventions to address this epidemic in-country.

Since 2001, EGPAF has been the lead implementing partner in Zimbabwe, supporting the national prevention of mother-to-child transmission of HIV (PMTCT) and pediatric HIV care and treatment programs. In 2011, Zimbabwe's Ministry of Health and Child Care (MOHCC) made elimination of new pediatric HIV infections a national goal and renewed commitment to decrease the rate of new HIV infections among children to 5%. EGPAF-Zimbabwe contributed to the steep decline in the mother-to-child transmission rate in Zimbabwe, down to 5.7% in 2016. The program has expanded its partnership with the MOHCC by supporting a package of district-level activities on HIV prevention, care and treatment services including activities that promote high uptake of and retention in HIV antiretroviral treatment (ART) for all. Program expansion has included strengthening of district-level HIV prevention, care, and treatment services towards achievement of the UNAIDS 90-90-90 targets, as well as strengthening PMTCT and pediatric services towards achieving full-scale elimination of pediatric HIV in Zimbabwe.

### KEY PROGRAM ACCOMPLISHMENTS\*\*

Since 2001, EGPAF-Zimbabwe has:



Reached over 3.4 million pregnant women in antenatal care



Ensured over 80,000 babies were born HIV-free

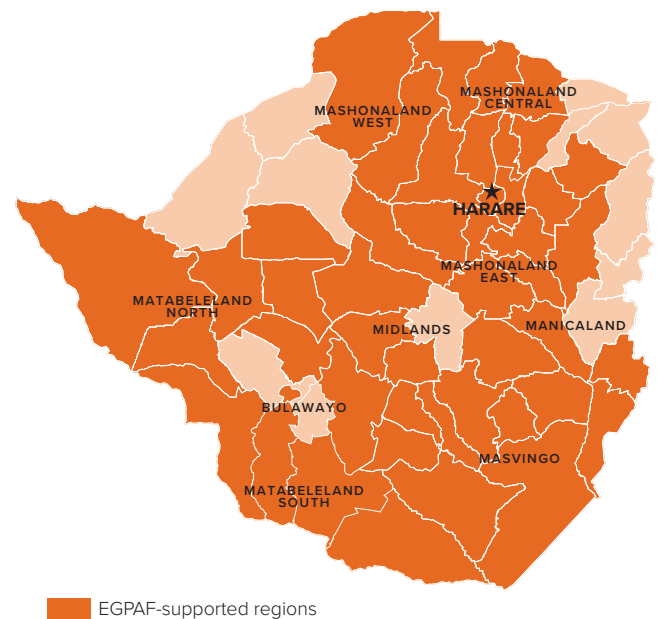


Ensured a virologic HIV test to nearly 181,481 HIV-exposed infants before two months of life

### COUNTRY PROFILE\*

Estimated population	16,500,000
People living with HIV	1,300,000
Adult (15-49 years of age) living with HIV	1,200,000
Women aged 15 and older living with HIV	740,000
Children (0-14 years of age) living with HIV	77,000
Deaths due to AIDS	22,000
Adult ART coverage	84%
Children aged 0 to 14 receiving ART	68,119
PMTCT coverage	95%

### EGPAF-ZIMBABWE PROGRAM GEOGRAPHIC COVERAGE



\* Sources: Joint United Nations Programme on HIV/AIDS, 2017

\*\* Data as of May 2019

## PROGRAM IMPLEMENTATION

### Scaling-up Innovative Approaches to Save the Lives of Children

Without treatment, up to 50% of HIV-infected children will die by their second birthday. With Unitaid and other stakeholders in 2015, EGPAF began implementing an approach to expand access to early infant diagnosis (EID) and treatment for HIV-infected infants through procurement, placement, and training on use of point-of-care (POC) HIV diagnostic technology. Working hand-in-hand with Zimbabwe's MOHCC, EGPAF is placing POC EID platforms in high-volume facilities, with lower-volume sites sending samples to platforms through a short-haul, hub-and-spoke model. This project significantly increased the proportion of test results returned to caregivers, and placed a higher proportion of HIV-infected infants on life-saving treatment sooner, as compared to conventional EID testing.

Building on this work, Unitaid supports the ongoing Catalyzing Pediatric Tuberculosis Innovation (CaP TB) project, which aims to improve TB screening in children by accelerating access to TB diagnosis and new child-friendly treatments for both active and latent TB - a disease which affects one million children worldwide. This project, launched in 2018, will bring new child-friendly TB drug formulations and improved diagnostic technology to ten countries, including Zimbabwe.

With the support of the Children's Investment Fund Foundation, EGPAF has been working closely with MOHCC and local partners since 2016 to improve adolescent HIV prevention, care and treatment services across 60 facilities in Zimbabwe. EGPAF has provided facility-level support and supervision, as well as provincial and national level technical assistance in adolescent HIV. Under this project, EGPAF tested over 75,000 adolescents for HIV and identified over 1,800 HIV-positive adolescents; 95% were initiated on ART and 89% were retained on ART at 12 months. During 2019, EGPAF will focus on disseminating project deliverables and results.

In response to limited availability of second- and third-line pediatric and adolescent treatment options, Johnson & Johnson, EGPAF, and the Partnership for Supply Chain Management launched the New Horizons project. The heart of the Collaborative is a darunavir/etravirine donation program, which increases access to third-line pediatric and adult ART for children and adolescents failing second-line treatment.

### Health Systems Strengthening and Capacity Building

With clinical expertise in HIV management, EGPAF-Zimbabwe provides high quality technical assistance to improve health worker skills and confidence in the delivery of services including; pediatric and adult HIV testing; care and treatment; PMTCT; support to women during pregnancy, childbirth, and through breastfeeding; and management of opportunistic infections and chronic diseases among both adults and children.

In 2019, alongside Johnson & Johnson, the Children's Investment Fund Foundation and government stakeholders, EGPAF-Zimbabwe continued support to the MOHCC in implementing the Start Free, Stay Free, AIDS Free framework in pursuit of elimination of mother-to-child HIV transmission and syphilis. EGPAF-Zimbabwe's activities will include coordination and communication related to tool and guideline validation processes, provision of technical assistance, and support for implementation of the WHO validation tools to provinces and districts.

EGPAF-Zimbabwe also provides technical support to national sub-partners in the areas of financial management, donor compliance, and programmatic capacity building, and reinforce program management at the national level through secondment of key staff to the MOHCC.

### Strengthening Data Collection and Use for Evidence-Based Programming

EGPAF systematically applies and promotes the use of data in planning, implementation, and management of Zimbabwe's health programs, which improve quality of HIV prevention, care and treatment services in maternal, newborn, and child health settings, as well as community linkages. EGPAF has supported the launch of a national electronic database, wherein data from antenatal care and PMTCT site visits among women and children could be quickly uploaded and analyzed by health workers, site managers, and the MOHCC. The database has led to a more accurate understanding of adherence to PMTCT and HIV care and treatment among program implementers and improved efforts to follow clients in the PMTCT continuum of care.

A lack of comprehensive data on violence against children is one of the challenges to plan, implement, monitor, and evaluate appropriate policies and programming around child protection and contributes to the inability of agencies to make informed programmatic decisions in Zimbabwe. Beginning in 2016, EGPAF is the lead technical partner alongside the Zimbabwean MOHCC and DREAMS stakeholders for U.S Centers for Disease Control and Prevention's (CDC) national Violence Against Children Survey, studying the epidemiological patterns of risk factors for HIV and violence. EGPAF successfully led data collection, completed trainings for community workers in DREAMS districts, and developed a national action plan and tailored workshops for DREAMS partners to promote the use of survey results in Zimbabwe. With CDC support, EGPAF's will directly translate policy into action by developing youth-centric social protection programs and policies in country.

## ADVOCACY

EGPAF-Zimbabwe gathers parliamentarians representing local communities throughout the country to meet and discuss key health issues affecting their constituents. Informed by these dialogues, EGPAF is able to advocate for policy changes that favor better national health services, aligned with community needs. The parliamentarian dialogues have raised community and national awareness on key health issues, like the importance of early infant HIV diagnosis, establishing and providing technical assistance to National Validation Committees to support elimination of HIV validation in Zimbabwe, results from the recently completed Violence Against Children Survey and the implementation of the national PMTCT program.

## RESEARCH

Research and strategic information and evaluation continue to be a priority for EGPAF-Zimbabwe and play a critical role in providing evidence to inform our programming. EGPAF-Zimbabwe is currently implementing multiple Medical Research Council of Zimbabwe-approved operations research studies, focused on various areas of our technical work. EGPAF-Zimbabwe also prioritizes strengthening data use and EGPAF's Program Optimization Approach to promote evidence-based program implementation. Recently completed or ongoing studies include:

- Evaluation of the implementation and effects of the Unitaid/EGPAF POC EID project in Zimbabwe
- Facility time-use observations of the POC EID process in Zimbabwe
- Feasibility of POC HIV birth testing in Zimbabwe
- Evaluation of the catalyzing pediatric TB innovation project, a pre- and post- implementation assessment (TIPPI) across ten countries.
- Young adult survey of Zimbabwe
- Feasibility of adolescent-focused HIV prevention, care and treatment differentiated service delivery (DSD) in Zimbabwe.

To learn more about EGPAF's work in Zimbabwe and to access program resources and publications developed by the team, please visit

<http://www.pedaids.org/countries/zimbabwe>

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