



Strategic Approaches in Implementing Accelerating Progress in Pediatric and PMTCT (AP3): Nigeria DELTA2 AP3 Project Brief

Overview of EGPAF

EGPAF Overview

With over 30 years of experience, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) has played a significant role in strengthening health systems and national capacity to support the HIV response and is a recognized leader in the global fight to prevent pediatric HIV infection, eliminate pediatric AIDS, and create a generation free of HIV through a combination of research, advocacy, and program implementation and technical assistance (TA) support. EGPAF has established high-impact TA approaches for a wide range of areas, such as health system strengthening, strategic information and evaluation, Quality Improvement (QI), community engagement, operational research, organizational development, project management, and HIV service delivery.

DELTA2 Overview

The overall goal of the Delivering Technical Assistance Project (Project DELTA2, 2019-2024) is to provide comprehensive and cost-effective technical assistance (TA), capacity building, and program implementation expertise to optimize the impact of programs supported by PEPFAR and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) to ultimately help achieve an AIDS-free generation. In the first four program years (PY1-4), EGPAF has implemented or is implementing 13 multi-faceted assignments, including support for the PEPFAR Faith and Community Initiative (FCI), COVID-19 infection prevention and control (IPC) activities, gender and youth HIV prevention strategy development, No Means No Worldwide (NMNW) IMpower/IMsafer programming, ECHO telementoring platform activities in Haiti, Violence Against Children Survey (VACS) Jamaica implementation, COVID-19 Response TA, Pediatric and PMTCT TA in Nigeria, and Rome Pediatric Initiative/Vatican Initiative TA.



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Nigeria DELTA2 AP3 Project Overview

This project aimed at increasing and accelerating the progress of Pediatric HIV and PMTCT services by leveraging available resources and progress made in Nigeria through sustainable strategies that strengthen both facility-level and community-level interventions. The project focused on five states, namely Abia, Benue, Delta, Lagos, and Rivers, as well as national-level technical assistance support. EGPAF worked closely with the National AIDS and STDs Control Program (NASCP), State Ministries of Health, and CDC Lead Implementing Partners (IPs) to coordinate stakeholders' engagement and unify vision.



Technical Assistance Menu

On this project, EGPAF utilized cross-cutting approaches in implementing the following objectives and optimizing the progress in Pediatric HIV and PMTCT:

 <p>Scale up social network and index testing strategy for adolescents and youths</p>	 <p>Facilitate the establishment and utilization of joint PMTCT and Pediatric HIV ICS at national and sub-national level</p>
 <p>Strengthen the implementation of community PMTCT and Pediatric HIV case-finding in five selected states</p>	 <p>Accelerate integrated, evidence-informed, comprehensive Pediatric HIV service delivery through the use of Pediatric ART Case Managers</p>

Data Visualization and Utilization through the Incident Command Centers

To improve access to real-time data and empower the MOH to provide actionable recommendations and next steps that inform HIV programming, EGPAF set up Incident Command Centers (ICC) within State MOH offices at the five supported states and at the Federal MOH (NASCP) level. In partnership with Public Health Information, Surveillance, Solutions and Systems (PHIS3), dashboards tracking PMTCT and Pediatric HIV indicators were developed/adapted and deployed on smart screens installed in the ICCs. The capacity of stakeholders was built on dashboard navigation, triangulation of data, and initiating quality improvement projects to improve program performance.

The ICCs promote continuous visualization and analysis of pediatric and PMTCT HIV data in the state, evaluation of the HIV program including achievements, gaps, documentation of best practices, and evidence-based interventions. Stakeholders can effectively utilize the data in making decisions to inform the program leading to efficient use of real-time data ensuring quality data collection, validation, and reporting.

Illustrative Project Activities

Objective 1: Scale up social network and index testing strategy for adolescents and youth

- Adapted an adolescent and youth responsive Social Network Strategy (SNS) model that allowed for adolescents and young persons (AYPs) to be reached with HTS in their communities.
- Developed a training curriculum targeted at building capacity of HCWs and Youth Peers on the adapted SNS model.
- Trained youth peers and healthcare workers to support the implementation of SNS in selected local government areas and integrate SNS into the index case testing including linkage to care and services.
- Promoted meaningful engagement of adolescents and youths in the implementation of the SNS model through strategic partnerships with a youth-led civil society organization; the African Network of Adolescents and Young Persons Development (ANAYD).
- Youth-led demand creation and outreach in the communities to improve access to HIV testing among adolescents and young persons.



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Objective 2: Facilitate the establishment and utilization of joint PMTCT and Pediatric HIV ICS at national and sub-national level

- Established incident command structures in the state including set up of the incident command centers, inauguration of the incident commander and members of the ICC team, commencement of weekly AP3 meetings led by the incident commander, joint mentoring and supervisory visits, trainings and capacity building activities based on gaps identified through the incident command structures.
- Set up of incident command centers with furniture and relevant audiovisual equipment that allows for continuous data display and visualization of real time data. Smart screens, video conferencing equipment and power back up were installed at these centers.
- In partnership with state MOH and Lead IPs, identified and inaugurated members of the joint PMTCT and Pediatric HIV ICC teams and commenced weekly state AP3 meetings. The weekly State AP3 meetings provide an opportunity for a granular review of the HIV program data.
- Training of healthcare workers in Abia, Benue, and Rivers States on Age-appropriate disclosure, and strengthening their capacity in supporting a disclosure process and sustainably improve health outcomes for children and adolescents living with HIV.
- Conducted joint mentoring and supportive supervisory visits to sites with identified gaps and built capacity on data-driven skills and strategies based on lessons learned.

Objective 3: Strengthen the implementation of community PMTCT and Pediatric HIV case-finding in five selected states

- Working with NASCP, identified their gap and priority around retention for infants, children, pregnant and breastfeeding women
- Supported NASCP to constitute a core working group responsible for giving direction on development of operational guidelines on retention in Pediatrics and PMTCT.
- Hosted a workshop of the core working group to and established a roadmap to guide the development of implementation of guideline for retention for pregnant, breastfeeding women and children living with HIV.
- Training of Traditional Birth Attendants (TBAs) in Delta and Rivers States to ensure improved access to quality services including HIV testing among pregnant women.
- Supported states with delivery kits (mama packs) to support acceleration of community case finding amongst pregnant women and children through Mother Love Parties at supported states Facilitated Pediatric and Adolescent Technical Working Group meetings in Abia, Benue, and Delta States aimed at reviewing program data and instituting service delivery strategies.

Objective 4: Accelerate integrated, evidence-informed, comprehensive Pediatric HIV service delivery through the use of Pediatric ART Case Managers

- Engaged, trained and deployed forty-six pediatric case managers at supported states to accelerate an integrated and comprehensive service delivery model.
- Joint provision of comprehensive technical support at facility and community level through mentoring and coaching.

Health System Strengthening and Sustainability

Strong and resilient health systems are necessary to achieve equitable access to quality service delivery. This project contributed to health systems strengthening in Nigeria by implementing activities and strategies designed towards sustainability and ownership by the host government.

Engagement of the MOH in project conceptualization and implementation of all activities and establishment of the ICCs at the State Ministry of Health (SMOH) and National AIDS, Viral Hepatitis, and STIs Control Programme (NASCP) offices fosters a resilient health system through ownership.

Human resources for health (HRH) at the supported facilities and communities was strengthened through the engagement of pediatric case managers who contributed to improved service delivery.

Training on age-appropriate disclosure services and training of TBAs is a systemic approach to strengthening the workforce and building their skills and knowledge for improved health outcomes for people living with HIV.

Key Factors Responsible for Success

- Strategic partnerships and collaborations with key players and stakeholders.
- Clearly defined roles and responsibilities between all stakeholders (States MOH, Lead IPs, and EGPAF) ensured integration and alignment of work plans mitigating duplication of efforts and implementation of activities with sustainable impact.
- Project introductory meetings with stakeholders and Lead IPs addressing specific roles led to close collaborations including planning and implementation of activities and facilitated a positive environment for partnership.
- ICC needs assessments were carried out with stakeholders to identify the needed resources and helped determine the available resources to be leveraged. This enabled strong ownership and equipped the SMOH to effectively monitor the HIV response.
- Effective and continuous stakeholder engagement and partnership with Lead IPs: Catholic Caritas Foundation of Nigeria (CCFN) in Abia State, APIN Public Health Initiatives in Benue State, Excellence Community Education Welfare Scheme (ECEWS) in Delta State, Center for Integrated Health Program (CIHP), in Lagos State, and Institute of Human Virology, Nigeria (IHVN) in Rivers State led to a strong working relationship towards a shared goal of increasing coverages for PMTCT and Pediatric HIV.
- The State weekly AP3 ICC meetings involving all stakeholders and partners provided an avenue for a comprehensive data review, and activities updates and allowed quick decision making with immediate actionable steps to address any challenges in implementation.

- Joint mentoring and supportive supervisory visits to facilities informed by the gaps reviewed during the weekly AP3 ICC meetings led to a mentoring approach during the visits that provided capacity building tailored to the healthcare workers.
- Health system strengthening through workforce development addressing capacity gaps was informed by the identified challenges by both stakeholders and partners to sustainably improve health outcomes and improve the quality of service delivery.

“The age-appropriate disclosure training widened our knowledge and we have implemented skills acquired in our health facility with very good outcomes,” says Dr. Uche Madudonu, Federal Medical Centre, Umuahia’s Pediatric ART focal person.

“DELTA2 AP3 project had the adolescents and young persons at the center of the design and implementation of the Social Network Strategy which improved access to HIV testing in these sub-populations, says Aaron Sunday, African Network of Adolescents and Young Persons Development.

Contact Information

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