Photo: Eric Bond/EGPAF, 2018

Elizabeth Glaser Pediatric AIDS Foundation
Fighting for an AIDS-free generation

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**

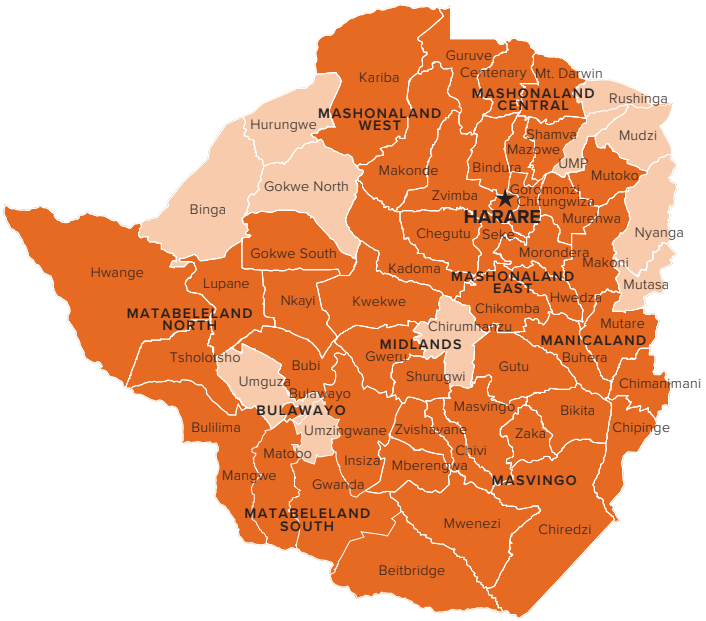
Since 2001, EGPAF-Zimbabwe has:

- Recruited and trained 37 district focal persons to support PMTCT service delivery and quality improvement activities
- Provided **more than 357,500 HIV-positive women** and **over 307,300 HIV-exposed infants** with antiretroviral prophylaxis
- Reached **more than 2.9 million** pregnant women in antenatal care
- Provided HIV counseling and testing to more than 2.5 million pregnant women
- Reduced early infant diagnosis turnaround time **from 16 to 10 weeks** by 2014

COUNTRY PROFILE*

Estimated population	16,500,000
People living with HIV	1,360,000
Adult (15-49 years of age) living with HIV	1,270,000
Women aged 15 and older living with HIV	759,000
Children (0-14 years of age) living with HIV	84,300
Deaths due to AIDS	20,000
Adult ART coverage	87%
Child ART coverage	71%
PMTCT coverage	91%

EGPAF-ZIMBABWE PROGRAM GEOGRAPHIC COVERAGE



EGPAF-supported regions

* Sources: Joint United Nations Programme on HIV/AIDS, 2019

** Data as of September 2020

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 placed 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.

Leveraging on the introduction of birth using the POC EID platforms, EGPAF with funding from the US Centers for Disease Control and Prevention (CDC) grant to Catholic Relief Services (CRS) is supporting introduction of neonatal Raltegravir granules for use in HIV-infected neonates through the FASTER project. The project commenced in August 2019 and is being implemented in 14 secondary, tertiary and quaternary level facilities across the country. In addition the project will document and disseminate data on the feasibility of use of Raltegravir granules for treatment of full-term HIV-infected neonates weighing at least 2 kg.

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.

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. From 2018 through 2021, EGPAF will implement this project in 31 health facilities across four districts, building health care worker capacity in diagnosing pediatric TB using bacteriological and clinical-radiological approaches, introducing improved pediatric TB case detection, providing TA for the adaptation and finalization of the latent TB infection treatment guidelines (including new and shorter regimens). A pre- and post- assessment will be conducted to evaluate the effectiveness of the CaP TB project.

Reducing Advanced HIV Disease (AHD) Risks

In Zimbabwe, it is estimated that 33% of people commencing ART had AHD at the time of ART initiation, and among ART experienced people, there are likely similarly high numbers. AHD incurs vulnerability to TB and cryptococcal meningitis among those living with HIV, two leading causes of death among HIV-positive populations. The CDC Foundation is providing funding to allow EGPAF to implement CrAg screening and TB LAM testing, pre-emptive fluconazole treatment, cryptococcal meningitis treatment, per Zimbabwe HIV program recommendations at selected hospitals and clinics in Zimbabwe. The first phase will yield data and identify challenges, solutions, and best practices that will inform future routine implementation of these interventions as part of the Zimbabwe package of care for PLHIV with AHD.

Additionally, EGPAF is participating in the Clinton Health Access Initiative (CHAI)'s VISITECT® Advanced Disease Early Market Access Vehicle. The aim of this initiative is to facilitate evidence generation, build user experience and develop effective systems and processes required to support routine use of the Omega VISITECT® CD4 Advanced Disease Test by non-laboratory staff.

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. 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.

EGPAF has consistently provided technical and financial support for QI/QM-based Sub-national Cascade Analysis meetings for HIV/TB pediatric Care and Treatment. The meetings are held on a quarterly basis to review program performance within the supported districts and facilities generation for evidence -based programming

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 support elimination of HIV.

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; and facility time-use observations of the POC EID process in Zimbabwe and 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.
- Demographic, Clinical, and Laboratory Characteristics and Outcomes of Patients Who Ever Received Etravirine and/or Darunavir – Multi-country data abstraction

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

The activities described here were made possible by the generous support of the American people through the United States Agency for International Development and the U.S. Centers for Disease Control and Prevention under the U.S. President's Emergency Plan for AIDS Relief and with funding from the Children's Investment Fund Foundation, Johnson & Johnson, and Unitaid. The content included here is the responsibility of EGPAF and does not necessarily represent the official views of these donors.

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