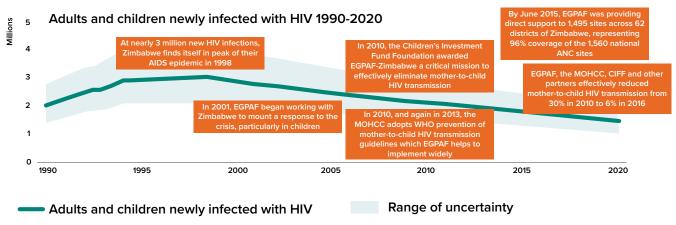


EGPAF in Zimbabwe



Source: UNAIDS 2021 epidemiological estimates

Before 2010, a Zimbabwean baby born to a mother living with HIV had a one in four chance of becoming infected. In 2014, the odds had fallen to one in fifteen. During this period Zimbabwe made huge progress in preventing mother-to-child transmission of HIV (PMTCT) with strong support from EGPAF. The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) became committed to this journey in 2001 and was the Zimbabwe's Ministry of Health and Child Care's (MOHCC) most supportive ally in its gains toward elimination of mother-to-child HIV transmission. To date EGPAF Zimbabwe has implemented multiple projects in support of the PMTCT program and to maintain the gains made to date.

Major Gains of the Past:

In early 2000s

EGPAF, with USAID and CDC funding, starts working alongside the MOHCC to ensure expansion of prevention of mother-to-child HIV Transmission



Over the last 20 years, EGPAF-Zimbabwe has provided **nearly 360,000 HIV-positive women access to lifesaving ART** to ensure their health and protect their children from transmission

In 2010

CIFF awarded EGPAF a five-year, US\$45 million grant to support Zimbabwe's Ministry of Health and Child Care (MOHCC) in dramatically accelerating the elimination of pediatric HIV and AIDS in Zimbabwe.



By expanding, optimizing and building skills around PMTCT over this fiveyear project, mother-to-child HIV transmission **reduced from 30% to below 6%.**

From 2013 to 2015

The ACCLAIM project in Zimbabwe and two other countries allows implementation of a package of community interventions,



Proving that community focused strategies may be the most effective in increasing community MCH/HIV knowledge and improving gender-equitable norms.

In 2015-16

PEPFAR and CIFF came together to launch the Accelerating Children's HIV/AIDS Treatment (ACT) Initiative.



Through the commitment of the MOHCC and with EGPAF-Zimbabwe's support of ACT, this initiative **tested nearly 860,000 children** and gave **80,836 children and adolescents access to ART**

In 2017

Zimbabwe became the second country ever to incorporate HIV testing into the violence against children (VACS) methodology to learn more about the intersection of HIV and violence, and the first country to use laboratory testing to learn more about disease status and viral load among those who are HIV-positive.



The country's prioritization of children's mental health paves the way for more **comprehensive national child healthcare**

From 2015 to 2019

EGPAF-Zimbabwe procures, places and build capacity around point-of-care technology which would increase access to early infant diagnosis.



This technology reduced early infant diagnostic turnaround time from 16 weeks in 2014, to zero weeks in 2018. In the last year of the project alone, 429 infants were identified as HIV-positive, and 393 were initiated on lifesaving ART.

Zimbabwe DREAMS initiative embarked on an ambitious goal of seeing a 40% or greater reduction in new HIV infections among females ages 15-24 in all targeted districts by end of 2018.

From 2017 to 2021

EGPAF implements the Catalyzing Pediatric TB Project in 10 countries including Zimbabwe, aiming to increase the number the proportion of children identified with TB, to increase access to better TB preventive and treatment therapies and to assess case finding methodology.

Currently:

Right now, EGPAF implements the New Horizons project, a Johnson & Johnson funded project which enables greater access to second- and third-line antiretroviral therapies for children and adolescents in Zimbabwe.

Through FIND and Unitaid-funding, EGPAF is accelerating end-to-end access to novel solutions in responding to the COVID-19 pandemic through enhanced testing, isolation, care, and treatment approaches adapted to meet the needs of Kenya, Cameroon, and Zimbabwe. This one-year project, known as the Catalyzing COVID Action Project, will generate demand for COVID-19 screening, treatment and vaccine access; advocate for a national COVID-19 standard protocol; accumulate evidence on SARS-CoV-2 clinical outcomes; and, in Zimbabwe, will create a center of excellence for patient management.



Photo: Steven Chikosi for EGPAF, 2020

While the Elizabeth Glaser Pediatric AIDS Foundation makes effort to use photos which accurately depict the actions, topics, or populations referenced, unless specifically indicated, the photographs in this document do not imply program participation, health status, attitude, behavior, or action on the part of persons who appear therein.