



# THE ZIMBABWE PROGRAM

Envisioning a world where children, youth, and families live free from HIV/AIDS

## ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION IN ZIMBABWE

There are currently 1.3 million people living with HIV in Zimbabwe, and the country is nearing the UNAIDS 95-95-95 targets, which call for 95% of people living with HIV to know their status, 95% of people who know they are living with HIV to receive lifesaving antiretroviral therapy (ART), and 95% of people receiving ART to be virally suppressed. However, targets are behind for children with only 65% of children on treatment, and only 86% of those virally suppressed. (UNAIDS, 2022).

Since 2001, EGPAF Zimbabwe has been a supportive ally of the Ministry of Health and Child Care (MOHCC) in its progress toward eliminating mother-to-child HIV transmission (MTCT) and ensuring HIV-positive children access to treatment. In 2010, this work accelerated with support from the Children’s Investment Fund Foundation (CIFF), which enabled the MOHCC and EGPAF to expand and optimize systems to eliminate MTCT. Over this five-year project, MTCT rates reduced from 30% to below 6%. Today in Zimbabwe 85% of pregnant women living with HIV receive antiretroviral therapy to prevent vertical transmission to their babies during pregnancy, delivery, and the postpartum period, averting 11,000 new HIV infections (UNAIDS, 2022).

EGPAF Zimbabwe has also supported the MOHCC in procuring and placing point-of care technology to increase access to early infant diagnosis. This technology reduced early infant diagnostic turnaround time from 16 weeks in 2014 to zero weeks in 2018.

EGPAF Zimbabwe was a key partner with the MOHCC on the Accelerating Children’s HIV/AIDS Treatment (ACT) Initiative, which was supported by CIFF and PEPFAR. This initiative tested nearly 860,000 children for HIV and gave 80,836 children access to treatment. EGPAF has further helped optimize treatment for babies born with HIV by introducing raltegravir (RAL) granules and other new pediatric formulations. Additionally, EGPAF has supported advanced HIV disease services and pediatric TB identification, treatment, and preventive therapies. EGPAF has produced evidence to inform improved programming through several research studies.

In partnership with CDC, EGPAF led the Violence Against Children (VACS) Survey in 2017, through which Zimbabwe became the second country ever to incorporate HIV testing into the VACS methodology to learn more about the intersection of HIV and violence.

From 2017 to 2021 EGPAF implemented the Catalyzing Paediatric TB Project in 10 countries including Zimbabwe, to increase the children screened, diagnosed, identified, and initiated on TB treatment and to leverage innovation in diagnostics and treatments.

## KEY PROGRAM ACCOMPLISHMENTS\*

Zimbabwe has nearly achieved the 95-95-95 UNAIDS target because of various strategies introduced along the continuum of care.

The Ministry of Health and Child Care’s Integrated HIV Testing Services Model deploys differentiated testing approaches for diverse populations to identify people living with HIV.

-  Testing approaches include provider-initiated testing and counselling, client-initiated testing and counselling, facility and community-based index testing, HIV self-testing, and targeted mobile outreach testing.
-  Testing utilization entry points include outpatient departments and clinics for TB, antenatal care, sexually transmitted infections, and maternal newborn and child health.
-  ART initiation is decentralized to lower-level facilities and is nurse-led to allow for equity and access, even in remote areas.

As a result of these strategies, viral load testing coverage has increased from 6% in 2015 to 79% in 2022.

## 2022 COUNTRY PROFILE\*\*

Population	15.99 million
Adults 15 years and over living with HIV accessing ART	1,182,126
Women 15 years and over living with HIV	75,711
Women 15 years and over living with HIV accessing ART	96%
Children 0–14 years living with HIV	74,587
Children 0–14 years living with HIV accessing ART	72%
Children orphaned due to Advanced HIV Disease	459,854
People living with HIV who develop TB	50%
TB-related death among people living with HIV per 1,000 people	33

\* EGPAF data as of September 2022

\*\* Source: <https://www.unaids.org/en/regionscountries/countries/zimbabwe>

## IMPACTFUL PROJECTS

### Epidemic Preparedness and Response

The Unaid Catalyzing COVID-19 Action (CCA) project has accelerated responding to the COVID-19 pandemic through innovative testing, isolation, care, and treatment. Significant investments have been made in diagnostics, therapeutics, health information systems, evidence generation, and community and multi-stakeholder mobilization while strengthening the capacity of health care workers. In addition to supporting the inaugural national Epidemic Preparedness and Response Technical Working Group, EGPAF is strengthening systems and applying lessons learned to the 2023 cholera outbreak and for potential future pandemics.

### Ending Advanced HIV Disease

The CDC-funded Advanced HIV Disease (AHD) project generated data and identified challenges, solutions, and best practices in Zimbabwe. The project increased diagnostic capacity through scaling up Omega VISITECT AHD CD4 testing, training health care workers in urinary LAM testing for TB, pre-emptively treating antigenemia, and using 5-flucytosine (5-FC) for cryptococcal meningitis treatment. The UNITAID-funded CapTB project generated evidence on the impact of innovative models of care, uptake of new diagnostic and treatment tools, and costs of interventions on the pediatric TB cascade of care.

### Promising Research

There is limited data on treatment failure among children and adolescents and their outcomes on second- and third-line ART. Through the Johnson & Johnson New Horizons Pediatric Care Collaborative, EGPAF is conducting a study on children and adolescents initiated on second- and third-line antiretrovirals to describe their demographics, virological, and immunological clinical outcomes. This study will inform policy and ART programming that continue to reduce HIV occurrence and related deaths in Zimbabwe.

## EGPAF'S PROGRAM COVERAGE IN ZIMBABWE

EGPAF Zimbabwe provides direct service delivery in the Harare region and technical assistance at the national level with the aim of, by extension, strengthening services in provinces and districts country-wide.

## EFFECTIVE ADVOCACY

EGPAF provided technical assistance to the National COVID-19 Laboratory Testing Strategy, helping to integrate testing in other service delivery areas and to develop the COVID-19 Self-Testing guidelines. EGPAF also provided financial and technical support during the review and development of the national multi-sectoral HIV response strategy. EGPAF worked with the Ministry of Health and Child Care on the Global Fund's COVID-19 Response Mechanism 2021 application and successfully advocated for the inclusion of childhood TB innovations in the NSP 2021–2025 and 2021–2023 Global Fund grant.

## INCREASED DEMAND FOR PEDIATRIC TB TREATMENT THROUGH IMPROVED DETECTION

The UNITAID-funded Catalyzing Pediatric TB project has built the capacity of over 300 health care workers on pediatric TB identification, treatment, and preventive therapy. It introduced innovative models of care for childhood TB, which included integrating TB services into non-TB entry points, intensifying community case finding through contact tracing of adult and pediatric index TB patients, optimizing clinical-radiological diagnosis, and increasing uptake of molecular diagnostics and shorter regimens for latent TB infection treatment.

## GENERATING EVIDENCE TO END PEDIATRIC AIDS

Early and long-term treatment of infants and young children living with HIV succeeds when health systems have immediate and sustainable access to child-friendly medicines that are safe, effective, affordable, and palatable. EGPAF supported the Ministry of Health and Child Care to:

- Optimize treatment for babies born with HIV by introducing raltegravir granules, which are easy to administer and palatable for babies to take.
- Streamline and accelerate the introduction of new pediatric formulations such as solid formulations of lopinavir/ritonavir (LPV/r) and the dolutegravir (DTG) 50mg tablet, as well as future DTG dispersible formulations.

Learn more about EGPAF's work in Zimbabwe: [www.pedaids.org/country/Zimbabwe](http://www.pedaids.org/country/Zimbabwe)



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