



Photo: Eric Bond/ EGPAF, 2016



**Elizabeth Glaser  
Pediatric AIDS  
Foundation**

## **MATERNAL, NEWBORN, AND CHILD HEALTH:**

**The Foundation to a  
Successful Response  
to Pediatric HIV**

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In resource-limited countries, more than 800 women die every day from complications related to pregnancy or childbirth. Childbirth is the second leading cause of death among women in these settings. Young infants are also at increased risk of mortality during and post-childbirth: more than half of the nearly 6 million deaths among children under the age of 5 in 2015 could have been prevented though access to routine care given at birth and within the first year of life.<sup>1</sup>

Countries with high HIV burden face an additional challenge protecting the health of mothers and children. Women are more likely than their male counterparts to become infected with HIV in these areas – in fact, HIV/AIDS is the leading cause of death among women in resource-limited settings. Women who are HIV-positive are six to eight times more likely to die giving birth than those who are negative. HIV-positive children are also at an increased risk of morbidity and mortality. Fifty percent of HIV-positive children will die by their second birthdays in the absence of early HIV identification, care and treatment.

Co-founded by an HIV-positive mother to secure the health of her family, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) works to provide access to integrated care to ensure comprehensive HIV services for women and their families throughout over 5,000 sites. EGPAF seeks to end pediatric HIV/AIDS through research, advocacy, and implementation prevention, care and treatment programs. We know that the risk of preventable death or disability decreases substantially when mothers and babies gain access to pre- and postnatal care; skilled birth attendants; reproductive health resources; and HIV prevention, care and treatment.<sup>2</sup> Recognizing that our mission cannot be attained without a strong foundation of health delivery, EGPAF works to prevent and treat HIV infection while strengthening comprehensive maternal, newborn and child health (MNCH) programs.

### **Expanding HIV Prevention Care and Treatment Services Through MNCH**

To reach and expand access to MNCH and HIV services, EGPAF promotes integrated approaches that provide women and children with comprehensive health care. EGPAF helps deliver HIV prevention, care and treatment services within settings that provide family planning, prenatal care, labor and delivery, and early childhood care, while strengthening existing MNCH services offered at these locations.

#### **FAMILY PLANNING AND REPRODUCTIVE HEALTH SERVICES**

EGPAF supports services that reduce risk of HIV transmission from mother to child. Our standard approach to PMTCT includes comprehensive counseling on family planning options to ensure HIV-positive women can avoid unwanted pregnancies, while also ensuring that HIV-positive women who wish to become pregnant have access to antiretroviral therapy (ART) to prevent HIV transmission to their infants. We work with supported reproductive health sites to offer HIV testing and counseling and linkage to care and treatment alongside voluntary family planning, sexually transmitted infection screening and treatment, vaccination against human papilloma virus, and screening and treatment for reproductive cancers.

#### **PRENATAL HEALTH SERVICES**

Women in resource-limited settings often seek health services only once they become pregnant. Prenatal care locations serve as important entry points to provide access to HIV prevention, care and treatment services. EGPAF supports initiatives that promote early enrollment of pregnant women in MNCH services and encourage at least four prenatal care visits throughout pregnancy, as recommended by the World Health Organization.

<sup>1</sup> World Health Organization. *Children: reducing mortality*. <http://www.who.int/mediacentre/factsheets/fs178/en/>. Accessed July 27, 2015.

<sup>2</sup> *Saving Lives at Birth. The problem*. <https://savinglivesatbirth.net/>. Accessed July 27, 2015.

EGPAF trains health workers at supported prenatal care facilities to offer comprehensive prenatal care along with HIV testing, counseling, care, and treatment services. Women found to be HIV-positive through prenatal screening are promptly offered lifelong ART for their own health and to prevent infections in their children and all current and future sexual partners. EGPAF also works to ensure that prenatal services are welcoming of male partners and offers male-friendly HIV counseling, testing, and treatment services.

#### FACILITY-BASED LABOR AND DELIVERY SERVICES

Counseling women on the benefits of giving birth in a health facility is a routine element of our supported prenatal care, as home births – not uncommon in resource-limited settings – are more likely to result in health complications and death. EGPAF ensures that labor and delivery services are provided by skilled birth attendants able to offer supportive and respectful maternity care and adequately respond to obstetric emergencies. In these settings, we also ensure women are tested for HIV, counseled and treated. Our supported labor and delivery services safeguard the health of mother and baby during birth, while also reducing the risk of HIV transmission.

#### POSTNATAL CARE

The postpartum period is a critical time for all mothers and newborns, as most serious health problems may arise within the first days and weeks of life. EGPAF works with supported health sites to offer postnatal care to all postpartum mothers and babies. We ensure that each new mother and infant visiting our postnatal care service locations is screened for HIV and that those testing positive, are given access to ART. EGPAF also ensures that each woman, regardless of HIV status, has access to information about how to care for her newborn and we counsel new mothers on how to provide optimal nutrition for their infants, both within and outside of the HIV context.

#### CHILD HEALTH SETTINGS

Routine child wellness facilities – such as those which offer vaccination, growth monitoring or nutrition services – are important venues for pediatric HIV testing, counseling, and access to HIV care and treatment. EGPAF supports a variety of early child health settings to ensure that each eligible mother-infant pair is given access to comprehensive health services including HIV testing, care and treatment. EGPAF also works in these settings to provide psychosocial support to children and adolescents through clubs and camps, where HIV-positive children and teens meet to discuss HIV, stigma, family, and issues with treatment adherence.



Risk of pregnancy-related death among HIV-positive women is **8 TIMES HIGHER** than among HIV-negative women.



**YOUNG WOMEN AGED 15-24** are more likely than their male peers to become infected with HIV in high burden areas.



In 2015, **ONLY 77% OF PREGNANT WOMEN** living with HIV had access to medicines to prevent transmission to their infants.

Without treatment, **50% OF HIV-POSITIVE CHILDREN WILL DIE** by age 2.



In 2015, **110,000 CHILDREN LOST THEIR LIVES** due to AIDS-related illnesses