



Photo: Eric Bond/EGPAF, 2019

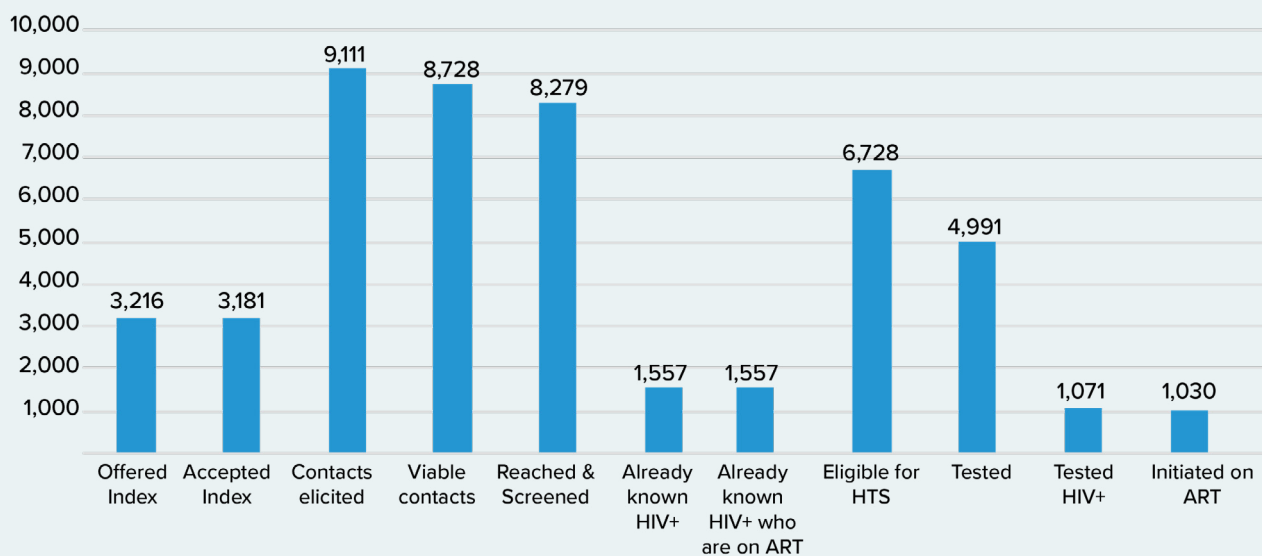


## Eswatini HIV Prevention and Clinical Services (EHPCS)

In September 2020, Eswatini became the first country in Africa to achieve the United Nations HIV targets with 96% of people living with HIV aware of their status, 94% on antiretroviral therapy (ART), and 91% virally suppressed. The imminence of these milestones placed sustained epidemic control firmly in the nation's reach, and strategies had to evolve accordingly. The Eswatini HIV Prevention and Clinical Services (EHPCS) project served to foster epidemic control by addressing the remaining barriers to prevention and treatment continuity. This required the use of technically sound, coordinated approaches that were linked high-level objectives and complimented national strategic plans.

### Intensified HIV case finding to target missed cases:

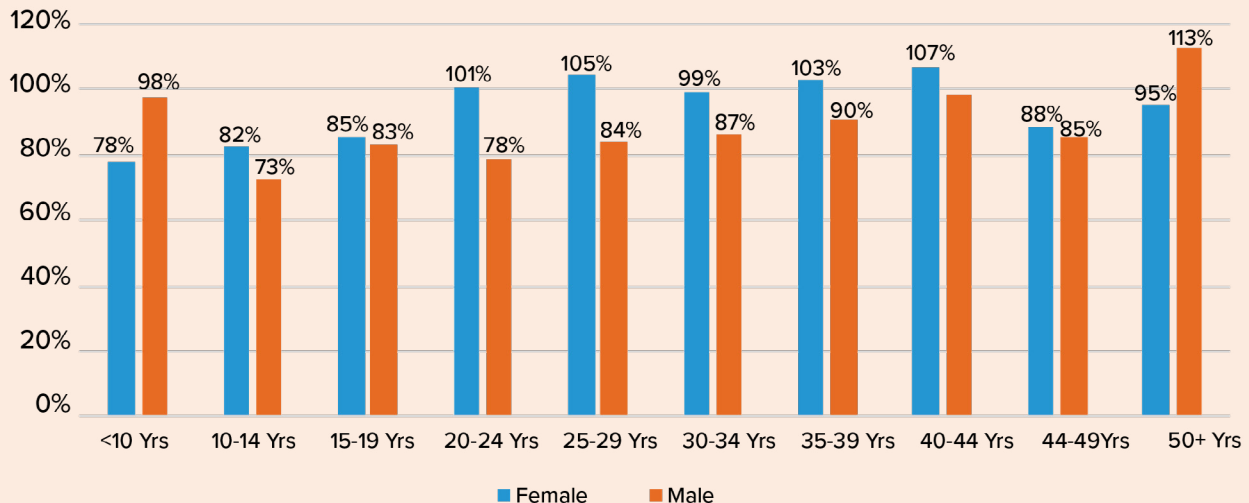
#### Index Testing Cascade: FY21 Q1-Q4



- Index case testing and partner notification services
- Refined provider-initiated testing and counseling in selected facility entry points
- HIV self-testing and peer-driven testing
- Recency testing / case-based surveillance
- Follow-up and HIV diagnosis (early infant detection) for exposed infants

## Enhanced linkages to treatment:

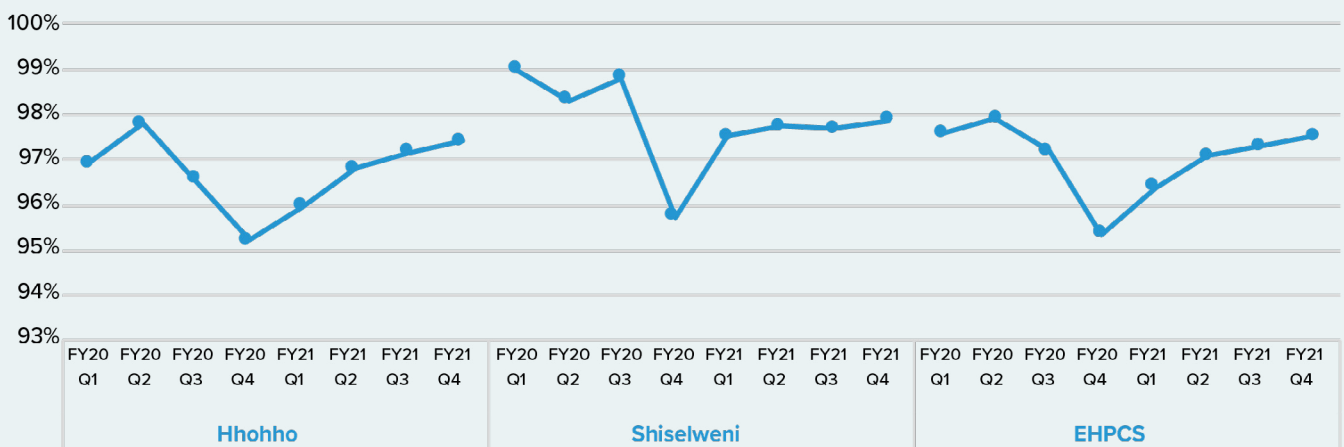
### Proxy ART Linkage by Age and Sex



- Several mentorship, training, and support activities were undertaken to refine the linkage case management abilities, activities, and approaches of the 65 supported facilities in the Hhohho and Shiselweni regions
- Expert clients received technical guidance and practical support to engage in active follow-up initiatives that facilitated immediate ART initiation
- Collaborative relationships with local partner organizations were used to track community linkages, and availed data that helped illuminate the reasons for non-linkage in the supported areas

## Ensuring retention in care and viral suppression:

### Viral Load Suppression\_FY20 Q1 - FY21 Q4



- EHPCS helped expert clients foster treatment continuity through targeted counselling, education, improved patient tracking, support groups for key populations, enhanced ART client follow-up, scaled-up of differentiated care models, and accelerated enrollment
- Systems mentorship and support helped initiate and transition eligible patients to optimized regimens and formulations
- Targeted mentorship served to scale up viral load testing and ensure the successful communication, documentation, and use of patient results

## Improved coverage of biomedical prevention services:

### PrEP Cascade for pregnant and breastfeeding women

Indicator	Hhohho	Shiselweni	Total
<b>Seen at ANC/PNC</b>	<b>8,171</b>	<b>2,471</b>	<b>10,642</b>
<b>Tested</b>	<b>3,435</b>	<b>988</b>	<b>10,642</b>
% tested @ ANC/PNC	42%	40%	100%
<b>Tested Negative at ANC/PNC</b>	<b>3,371</b>	<b>973</b>	<b>4,344</b>
% tested negative	98%	98%	41%
<b>Number already on PrEP</b>	<b>539</b>	<b>221</b>	<b>760</b>
% already on PrEP	16%	23%	17%
<b>Eligible for PrEP offer</b>	<b>2,832</b>	<b>752</b>	<b>3,584</b>
<b>Total Offered PrEP</b>	<b>904</b>	<b>552</b>	<b>1,456</b>
% offered PrEP	<b>32%</b>	<b>73%</b>	<b>41%</b>
<b>Number Offered and Accepted PrEP</b>	<b>533</b>	<b>311</b>	<b>844</b>
% acceptance rate	59%	56%	58%
<b>Number Offered and Refused PrEP</b>	<b>371</b>	<b>241</b>	<b>612</b>
% refusal rate	41%	44%	42%
<b>Number Referred for PrEP</b>	<b>522</b>	<b>149</b>	<b>671</b>
% number referred for PrEP	98%	48%	80%
<b>Linked to PrEP (PrEP New)</b>	<b>559</b>	<b>132</b>	<b>691</b>
% Linked for PrEP (among referred)	107%	89%	103%

- Mentorship and trainings / refresher trainings for healthcare workers, facility managers, and other key groups (such as correctional officers) strengthened pre-exposure prophylaxis (PrEP) service provision. Facilities also benefitted from drug procurement support, as well as tool distribution and orientation.
- Technical assistance on PrEP scale-up was provided at the national level, along with updated national monitoring tools, materials, and guidelines including the drafting of the PrEP communication strategy
- Supporting voluntary medical male circumcision (VMMC) scale-up through active client recruiting and mentorship / virtual training for healthcare workers and VMMC community mobilizers

## Expanded sexual and reproductive health services, particularly:

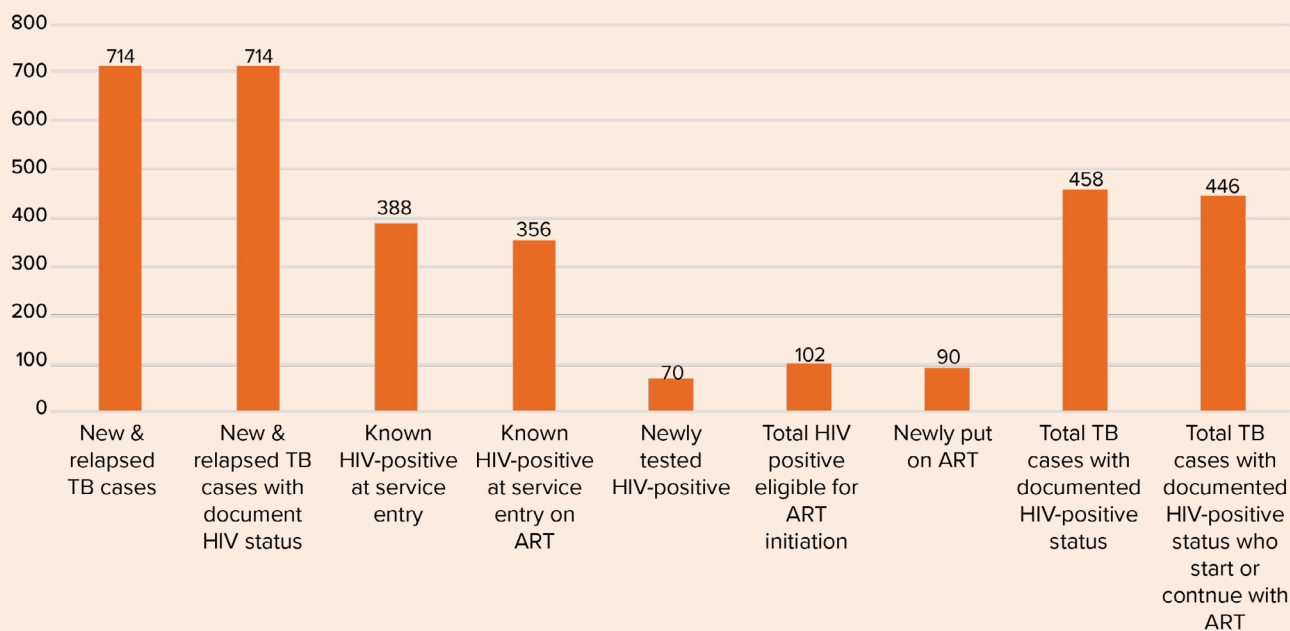
- Cervical cancer screening and treatment of pre-cancerous lesions
- Post-gender-based violence care
- Family planning / ART integration
- Condom promotion and distribution



Photo: Eric Bond/EGPAF, 2019

## Improved TB / HIV Prevention and Treatment Service integration by prioritizing:

### TB/HIV HIV testing and ART Cascade (FY21 Q1-Q4)



- TB / COVID-19 infection prevention and control
- TB case finding and diagnosis
- TB case management
- TB / HIV collaborative activities

## Intensified support and capacity building for the Ministry of Health in several high-priority areas, including:

- COVID-19 mitigation
- Ongoing quality improvement
- Monitoring, evaluation, and learning
- Partnership and collaboration
- Communication and advocacy



Photo: Muzi Yende, 2020

*This report is made possible by the support of the American people through the U.S. President's Emergency Plan for AIDS Relief, through the United States Agency for International Development (USAID). The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of USAID or the implementing agency, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)*