

# ViiV Breakthrough Partnership



Photo: Ricardo Franco for EGPAF, 2022

## The context

Since 2010, new annual HIV infections among children declined by 52%, from 320,000 in 2010 to 160,000 in 2021. In 2021, 38.4 million people were living with HIV, with 1.7 million of them being children aged 0 to 14 years. 76% of adults aged 15 years and older living with HIV had access to treatment compared to 52% of children aged 0 to 14 years.

Twelve countries accounted for 80% of this treatment gap, with about 700,000 children needing treatment. These include Nigeria, Mozambique, Uganda, Malawi, Kenya, and Zimbabwe, where The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) has active programs.

## The project

The Pediatric Breakthrough Partnership is supported by ViiV Healthcare's Positive Action initiative to close the gaps and help propel countries closer to ending pediatric AIDS. The Partnership is implemented in three countries: Uganda, Mozambique, and Nigeria. It brings together EGPAF, AidsFonds, United Nations International Children's Emergency Fund (UNICEF), and Pediatric-Adolescent Treatment Africa (PATA) as partners.

Through this partnership, sustainable and replicable interventions to address the identified gaps have been developed and implemented in priority locations in the three countries. This has been informed by the Pediatric HIV Service Delivery Framework<sup>1</sup>, a planning tool that was developed to advance the collective thinking on pediatric HIV service delivery.

This partnership started in August 2020 and will run through to 2024 following a one-year extension in 2022. The project builds up year on year:

- **Year 1:** Focusing on Uganda and Mozambique, with an exploration of opportunities in Nigeria
- **Year 2:** Continued implementation in Uganda, Mozambique, and Nigeria, with intensified efforts on evidence dissemination and advocacy
- **Year 3:** Shifting focus to providing technical assistance to the Ministries of Health and other partners to scale lessons from the project
- **Year 4:** Health systems strengthening, dissemination and support for adoption of proven models with accountability mechanisms

## The approach

Each partner is a globally respected organization that brings expertise to the project and the model presents an opportunity to put forth evidence-driven interventions for significant collective impact. The project is managed jointly and partners are responsible for various objectives nationally and globally. There is a focus on bringing increased visibility to pediatric and adolescent HIV service delivery.

The approach includes five elements leveraging the collective strengths of the partners:

- Identifying and confirming critical gaps in pediatric and adolescent HIV services specific to each regional context
- Piloting and adapting new innovations, implementing a package of data-informed, evidence-based interventions to respond to critical gaps in HIV services for pregnant and breastfeeding women, infants, children, and adolescents

<sup>1</sup> <https://www.childrenandaids.org/Paediatric-Service-Delivery-Framework>



- Providing technical assistance to in-country partners to accelerate the uptake of proven approaches
- Assessing the impact of interventions and exchanging knowledge on performance and lessons learned
- Building momentum and advocating influential stakeholders to secure the adoption, scale-up, and financing of innovations.

## EGPAF's role in the project

- Technical Assistance Facilitator for the whole project
- Coordination of partner activities in Mozambique, which includes, among other things, the coordination of monthly/quarterly consultations to review progress and address challenges in project implementation
- Piloting innovative strategies to address gaps in pediatric and adolescent HIV service delivery
- Intensive evaluations to support the ultimate dissemination of evidence, including program evaluation, cost analysis, and robust, routine program monitoring
- Increasing visibility to pediatric and adolescent HIV service delivery through documentation and dissemination of program results, packaging relevant tools, guidance materials, and training documents to scale up proven approaches
- Using our expertise and influence to advocate for changes in laws, policies, attitudes, and actions to foster the most enabling environment for long-term programmatic success and epidemic control

## Project innovations

As of July 2022, the Breakthrough Partnership has resulted in innovation strategies for optimizing pediatric and adolescent service delivery. This includes adapting lessons, technology, and resources developed through other EGPAF projects to locate, link, treat, and retain children and adolescents in care. The table below features innovations in different countries.

<p><b>Mozambique</b></p> 	<ul style="list-style-type: none"> <li>• EGPAF established and equipped a Pediatric and Adolescents one-stop shop model and created pediatric waiting rooms to provide adolescent and youth friendly services. EGPAF explored linking the one-stop model to schools to resolve low retention in care.</li> <li>• The Pediatric and Adolescents one-stop shop model features mental health support as part of psychosocial support by caregivers.</li> <li>• EGPAF is using the New Horizons Disclosure toolkit<sup>2</sup> in training healthcare workers. The toolkit provides practical, abbreviated guidance on the process of disclosing an HIV-positive status with pediatric and adolescent populations, their caregivers, partners, and other relevant parties.</li> </ul>
<p><b>Uganda</b></p> 	<ul style="list-style-type: none"> <li>• EGPAF is using digital health applications for monitoring peer psychosocial support (e-PSS) at 20 health facilities in 8 districts in the south west region. An Open Data Kit tool was developed to capture data and generate reports. Peer-led WhatsApp groups create a platform to share experiences and discuss service delivery matters within the community of youth peer educators and technical officers.</li> <li>• EGPAF is also prioritizing client centered care using differentiated service delivery models including but not limited to multi-month dispensing, and community-based models.</li> <li>• EGPAF is also providing home-based care targeted at families with various social challenges. Key services provided include delivery of drugs, collection of samples viral load/EID, and adherence counseling to support adherence and continuity of treatment where clinic/appointment attendance has routinely been missed. The latter has also been used to target non-suppressed children and adolescents requiring additional intensive adherence counselling and psychosocial support.</li> </ul>

<sup>2</sup> <https://www.pedaids.org/resource/disclosure-of-hiv-status-toolkit-for-pediatric-and-adolescent-populations/>

## Nigeria



- EGPAF has adopted HIV self-testing as an innovative case-finding approach to increase family index testing at supported facilities
- EGPAF is utilizing the Program Optimization Approach/Quality Improvement to support<sup>3</sup> health system strengthening through root cause analysis and quality improvement interventions that mitigate systemic gaps affecting pediatric performance<sup>4</sup>.
- Pediatric Case Managers (PCMs) have been engaged, trained and deployed to health facilities to improve integrated, evidence-informed and comprehensive Pediatric HIV service delivery. The PCMs are equipped with pediatric specific skills through continuous capacity building activities like trainings, conferences, bi-weekly data review meetings, mentoring and supportive supervision.
- EGPAF has deployed an electronic data reporting tool using the Open Source mobile data collection platform called Open Data Kit (ODK) for improved data reporting and analysis.
- Adolescent and Youth-Friendly centers have been set up in two health facilities, General Hospital Zing and First Referral Hospital Mutum Biyu, which serve as dedicated safe spaces for adolescents and young persons to freely access services.
- Caregiver Forum and Adolescent Psychosocial Support Groups are held bi-monthly at these centers. Expert Caregivers and Adolescent Peer Mentors have been trained to provide additional psychosocial support to caregivers and adolescents respectively.

### Expected outcomes of the project

At the end of the three-year project, we anticipate that the following will have been achieved:

- Strategic partnerships that target impact contributing to ending pediatric AIDS
- A sustainable, replicable quality package of care/intervention, informed by the Pediatric HIV Service Delivery Framework towards ending pediatric AIDS
- Adopted in national guidelines of the quality evidence-informed, comprehensive package of interventions that have been piloted in the project
- Impactful advocacy implemented through the identification of key opportunities to ensure that the project contributes to ending pediatric AIDS



Photo: Ricardo Franco for EGPAF, 2022

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.

<sup>3</sup> <https://www.childrenandaids.org/Paediatric-Service-Delivery-Framework>

<sup>4</sup> <https://www.pedaids.org/2022/10/13/youth-first/>