EGPAF IN CAMEROON

In 2000, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) supported the first five prevention of mother-to-child transmission of HIV (PMTCT) health facilities in Cameroon in partnership with the Cameroon Baptist Convention Health Services (CBCHS). In 2015, through U.S. Centers for Control and Prevention (CDC) funding, under our Delivering Technical Assistance (DELTA) Project, EGPAF opened its first in-country office in Cameroon. Today, EGPAF supports 190 health facilities in the country to provide high-quality, comprehensive HIV and AIDS services to women, children, and families.

Currently, EGPAF-Cameroon provides technical assistance and support to the government of Cameroon, CBCHS, and other national partners to effectively manage HIV prevention, care, and treatment programs. We work closely with Cameroon’s Ministry of Public Health to scale-up access to pediatric HIV services in-country and we collaborate with CBCHS to implement operations research studies and monitoring and evaluation activities to inform strong, high-quality HIV and AIDS programs.

KEY PROGRAM ACCOMPLISHMENTS**

Since 2000, EGPAF-Cameroon has:

- Provided PMTCT services to over 1,260,000 pregnant women throughout the country
- Started over 70,000 women on antiretroviral treatment (ART) to prevent HIV transmission to their babies
- Through EGPAF-supported programs, averted HIV infections in over 13,000 babies
- Trained thousands of health workers on the management of HIV in children throughout the country

COUNTRY PROFILE*

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>23,440,000</td>
</tr>
<tr>
<td>Number of people living with HIV</td>
<td>560,000</td>
</tr>
<tr>
<td>Adult (15-49 years of age) HIV prevalence</td>
<td>3.8%</td>
</tr>
<tr>
<td>Women aged 15 and older living with HIV</td>
<td>330,000</td>
</tr>
<tr>
<td>Children (0-14 years of age) living with HIV</td>
<td>46,000</td>
</tr>
<tr>
<td>Deaths due to AIDS</td>
<td>29,000</td>
</tr>
</tbody>
</table>

EGPAF-CAMEROON PROGRAM GEOGRAPHIC COVERAGE

* Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS), Cameroon HIV and AIDS estimates (2016), World Bank, Cameroon, population estimates (2016)

** Data as of May 2018
CATALYZING EXPANDED ACCESS TO EARLY TESTING, CARE AND TREATMENT AMONG HIV-EXPOSED INFANTS (2015-2019): Without treatment, up to 30% of HIV-infected children will die by their first birthday. With funding and support from Unitaid, EGPAF is implementing an approach to expand access to early infant HIV diagnosis (EID) and treatment for HIV-infected infants through implementation of point-of-care (POC) diagnostic technology. EGPAF-Cameroon is placing POC EID platforms in high-volume facilities, with lower-volume sites sending samples to platforms through a short-haul, hub-and-spoke model, thereby creating greater access to HIV testing among exposed infants, decreasing time between testing and results receipt among caregivers, decreasing the number of days from HIV diagnosis to ART initiation for HIV-infected infants, and increasing the number of children on life-saving treatment in Cameroon.

CATALYZING PEDIATRIC TUBERCULOSIS INNOVATIONS (CaP TB) PROJECT (2017-2021): Building on this work, Unitaid is funding the CaP TB project, which aims to improve TB screening in children, and accelerate access to TB diagnosis and new child-friendly treatments for both active and latent TB - a disease which affects one million children. This project, launched in 2017, will bring new child-friendly TB drug formulations and improved diagnostic technology to 10 countries, including Cameroon.


Through Project DELTA, a five-year, global, CDC-funded award, EGPAF provides comprehensive technical assistance to countries to enhance their PMTCT and pediatric adult and treatment programs. Over the last three years, this technical assistance has been focused on pediatric HIV care and treatment.

In 2018, DELTA began to develop strategies to address GBV and implement post-violence clinical services into the health care system. This program will focus on a training health care providers and staff of partner organizations to better identify and link victims of GBV to a comprehensive package of care, and develop/distribute GBV prevention and educational resources in six districts of the Yaoundé and Douala.

HIV-free LITTORAL AND CENTRE REGIONS OF CAMEROON: EXPAND COVERAGE AND IMPROVE THE QUALITY OF FACILITY- AND COMMUNITY-BASED SUPPORT FOR ROLLOUT OF OPTION B+ SERVICES (2015-2019): Our support to CBCHS focuses on reduction of HIV-related maternal and child mortality through the integration of PMTCT services within established reproductive health services and scale-up of HIV care and treatment services in Littoral and Centre regions. EGPAF also oversees health facility-level implementation of PMTCT activities and provides technical assistance to maternal and child health, PMTCT, and counseling and testing service delivery.

DISTRICT CAPACITY STRENGTHENING FOR PMTCT SERVICES IN THE WEST REGION OF CAMEROON (2015-2018): EGPAF provides direct financial support for PMTCT services and technical assistance to CBCHS to enhance PMTCT services in the West Region. Services supported under this project include psychosocial support groups for both children and adults, and women’s health programs, which provide cervical cancer screening and treatment, breast cancer screening, and syndromic management of reproductive tract infections. We also support a youth health education network to ensure prevention of HIV among children and adolescents.

ADVOCACY

EGPAF-Cameroon participates in several technical working groups at the national level including those related to PMTCT and pediatric HIV. EGPAF continually advocates for national policies that promote the wellbeing of those living with HIV. Through Project DELTA, EGPAF has contributed to national buy-in around scale-up of globally-recommended PMTCT and pediatric HIV care and treatment guidelines. EGPAF has also supported the revision of the 2013 Task Shifting Policy document, which is currently being developed and prepared for dissemination.

RESEARCH

Through our support to CBCHS, under CDC funding in the Northwest and Southwest regions, EGPAF supported a two-year evaluation of Option B+ guidelines in 22 health facilities. CBCHS and EGPAF assessed uptake, adherence, and retention challenges of Option B+ in these health facilities to inform the Ministry of Public Health's Option B+ roll out strategy. A qualitative study has been launched by EGPAF and CBCHS to examine experiences and opinions of women enrolled at CBCHS Option B+ pilot facilities.