THE ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION IN ZIMBABWE

Zimbabwe is one of the countries hardest hit by the AIDS epidemic in sub-Saharan Africa. In Zimbabwe, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) brings clinical HIV expertise, a focus on strengthening data quality and health systems, and a wealth of expertise on community-level interventions to address this epidemic in-country.

Since 2001, EGPAF has been the lead implementing partner in Zimbabwe, supporting the national prevention of mother-to-child transmission of HIV (PMTCT) and pediatric HIV care and treatment programs. In 2011, Zimbabwe’s Ministry of Health and Child Care (MOHCC) made elimination of new pediatric HIV infections a national goal and renewed commitment to decrease the rate of new HIV infections among children to 5%. EGPAF-Zimbabwe, through policy development, program implementation, and operations research activities, has contributed to the steep decline in the mother-to-child transmission rate in Zimbabwe, down to 5.7% in 2016. The program has expanded its partnership with the MOHCC by supporting a package of district level activities on HIV prevention, care and treatment services including activities that promote high uptake of and retention in HIV antiretroviral treatment (ART) for all. Program expansion has included strengthening of district level HIV prevention, care and treatment services towards achievement of the UNAIDS 90-90-90 targets, as well as strengthening PMTCT and pediatric services towards achieving full-scale elimination of pediatric HIV in Zimbabwe.

KEY PROGRAM ACCOMPLISHMENTS**

Since 2001, EGPAF-Zimbabwe has:

- Reached over 3.4 million pregnant women in antenatal care
- Ensured over 80,000 babies were born HIV-free
- Ensured a virologic HIV test to over 2,500 HIV-exposed infants before two months of life

COUNTRY PROFILE*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>13,061,239</td>
</tr>
<tr>
<td>People living with HIV</td>
<td>1,300,000</td>
</tr>
<tr>
<td>Adult (15-49 years of age) living with HIV</td>
<td>1,200,000</td>
</tr>
<tr>
<td>Women aged 15 and older living with HIV</td>
<td>720,000</td>
</tr>
<tr>
<td>Children (0-14 years of age) living with HIV</td>
<td>77,000</td>
</tr>
<tr>
<td>Deaths due to AIDS</td>
<td>30,000</td>
</tr>
<tr>
<td>Adult ART coverage</td>
<td>75%</td>
</tr>
<tr>
<td>Children aged 0 to 14 receiving ART</td>
<td>66,200</td>
</tr>
<tr>
<td>PMTCT coverage</td>
<td>93%</td>
</tr>
</tbody>
</table>

EGPAF-ZIMBABWE PROGRAM GEOGRAPHIC COVERAGE

EGPAF-supported regions

* Sources: UNAIDS 2017
** Data as of May 2018
Scaling-up Innovative Approaches to Save the Lives of Children

Without treatment, up to 30% of HIV-infected children will die by their first birthday. With Unitaid and other stakeholders, EGPaf is implementing an approach to expand access to early infant diagnosis (EID) and treatment for HIV-infected infants through procurement, placement, and training on the use and monitoring of point-of-care (POC) HIV diagnostic technology. Working hand-in-hand with Zimbabwe’s MOHCC, EGPaf is placing POC EID platforms in high-volume facilities, with lower-volume sites sending samples to POC platforms through a short-haul, hub-and-spoke model. This project has significantly increased the proportion of test results returned to caregivers, and placed a higher proportion of HIV-infected infants on life-saving treatment sooner, as compared to conventional EID testing.

In response to limited availability of second- and third-line pediatric and adolescent treatment options, Johnson & Johnson, EGPaf, and the Partnership for Supply Chain Management launched the New Horizons project, which aims to improve sustainable ART service delivery for children, and confront challenges faced by adolescents around disclosure, adherence, and psychosocial support. The heart of the Collaborative is a darunavir/ritavirine donation program, which increases access to third-line pediatric and adult ART for children and adolescents failing second-line treatment.

Program Optimization

EGPaf systematically applies and promotes the use of data in planning, implementation, and management of Zimbabwe’s health programs, which improve quality of care and HIV care and treatment among program implementers and improved efforts to follow mothers and their babies in the PMTCT continuum of care. EGPaf also provides routine national data quality assessments and data monitoring and evaluation tools to the MOHCC.

ADVOCACY

EGPaf-Zimbabwe gathers parliamentarians from local communities throughout the country to meet and discuss key health issues affecting their local constituents. Informed by these dialogues, EGPaf is able to advocate for policy changes that favors better national health services, aligned with community needs. The parliamentarian dialogues have raised community and national awareness on key health issues, like the importance of EID, the implementation of the national PMTCT program, and the 2016 “Treatment for All” national guidelines in Zimbabwe.

RESEARCH

Research and strategic information and evaluation continue to be a priority for EGPaf-Zimbabwe and play a critical role in providing evidence to inform our programming. EGPaf-Zimbabwe is currently implementing multiple Medical Research Council of Zimbabwe-approved operations research studies, focused on various areas of our technical work. EGPaf-Zimbabwe also prioritizes strengthening data use, quality improvement, and management, and the EGPaf’s Program Optimization Approach to promote evidence-based program implementation. Recently completed or ongoing studies include:

- The acceptability of Option B+ among HIV-positive pregnant and breastfeeding women in selected sites;
- Documentation of lessons learned from data collected through an electronic database in the PMTCT program;
- Post opportunistic infection/ART management training and capacity building assessment in selected districts in Zimbabwe;
- An assessment of the turnaround time for EID and health worker capacity to manage patients after undergoing training on EID; and
- Use and acceptability of recently-adopted client tracking tools.

To learn more about EGPaf’s work in Zimbabwe and to access program resources and publications developed by the team, please visit http://www.pedaids.org/countries/zimbabwe

The activities described here were made possible by the generous support of the American people through the United States Agency for International Development and the U.S. Centers for Disease Control and Prevention under the U.S. President’s Emergency Plan for AIDS Relief and with funding from the Children’s Investment Fund Foundation, Johnson & Johnson, and Unitaid. The content included here is the responsibility of EGPaf and does not necessarily represent the official views of these donors.