STRENGTHENING HIGH IMPACT INTERVENTIONS FOR AN AIDS-FREE GENERATION
ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION ACTIVITIES

ABOUT THE PROJECT
The Strengthening High Impact Interventions for an AIDS-Free Generation (AIDSFree) Project improves the quality and effectiveness of high-impact, evidence-based HIV interventions. These include expanded HIV testing and treatment, prevention of mother-to-child HIV transmission (PMTCT), voluntary medical male circumcision, and promotion of condom use. AIDSFree will enable six high-prevalence countries to achieve the Joint United Nations Programme on HIV/AIDS (UNAIDS) 90-90-90 targets.*

AIDSFree is a cooperative agreement funded through 2019 by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) through the United States Agency for International Development (USAID). AIDSFree is led by JSI Research & Training Institute, Inc., with partners Abt Associates Inc., Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), EnCompass LLC, IMA World Health, the International HIV/AIDS Alliance, Jhpiego, and PATH. AIDSFree supports and advances implementation of PEPFAR by providing capacity development and technical support to USAID missions, host-country governments, and HIV implementers at the local, regional, and national levels. Building on the momentum of USAID and PEPFAR’s investments in ending HIV, AIDSFree fosters effective and sustainable HIV prevention, care, and treatment.

To increase country ownership and program sustainability, AIDSFree works closely with governments, civil society organizations (CSOs), and private sector partners to address critical pillars of public health: human resources for health, technical service delivery, development of evidence-based tools, quality improvement, demand creation, data collection, analysis and utilization, and leadership and management.

The AIDSFree consortium works with a network of hundreds of CSOs to scale-up accessibility of high-quality HIV services. These partners work to ensure national CSOs receive comprehensive capacity-building, encompassing governance of programs, strategic planning, program management (including finance, accounting, and human resources), information technology, resource mobilization, and monitoring and evaluation. Baseline and follow-up assessments are built into this technical assistance, ensuring impact and improved service quality.

EGPAF’S ROLE AND GEOGRAPHIC COVERAGE

EGPAF is the lead consortium partner for all PMTCT activities within AIDSFree and provides comprehensive and cost-effective technical assistance in capacity-strengthening, PMTCT service delivery, and research. Our technical assistance programs aim to increase coverage, improve capacity of national and local partners in the provision of high-quality PMTCT services, and effectively manage national PMTCT programs.

*UNAIDS targets for the control of HIV: 90% of all people living with HIV to know their status; 90% of those diagnosed with HIV to be on sustained antiretroviral treatment (ART); and 90% of those on ART to achieve viral suppression.
AIDSFREE TECHNICAL ASSISTANCE PROVIDED BY EGPAF

Angola

PMTCT Toolkit

At the request of USAID Angola, AIDSFree systematized existing PMTCT tools, methodologies, and other products that were transferred to national and subnational institutions and stakeholders. AIDSFree technical assistance teams met with stakeholders to understand the landscape of PMTCT service delivery and policy implementation and reviewed existing PMTCT materials in each country setting.

The technical assistance team worked to update key documents and created a new PMTCT training toolkit. The team then conducted a training-of-trainers and supported the roll-out and dissemination of the revised toolkit to improve PMTCT training and service delivery in Angola.

eSwatini

Comprehensive HIV/AIDS and Tuberculosis (TB) Service Scale-up

AIDSFree is implementing a set of comprehensive interventions aimed at HIV epidemic control in eSwatini. The objective is to support the Ministry of Health to provide comprehensive HIV/TB services in the Hhohho and Shiselweni regions by providing patient outcome-driven mentorship and technical assistance. AIDSFree will also strengthen capacity of the Hhohho and Shiselweni Regional Health Management Teams to foster HIV/TB services delivery. Additionally, AIDSFree will provide national-level technical assistance to the maternal, neonatal, and child health (MNCH) platform to strengthen PMTCT, pediatric HIV care and treatment and MNCH programs in eSwatini.

Mother-baby Pair Retention Initiative

USAID in eSwatini requested technical assistance to improve retention of mother-baby pairs, with a focus on HIV-exposed infants. The objectives of this AIDSFree technical assistance activity are to identify and develop a community-based approach for improved guidance, mentorship, and referrals between facilities, thereby reducing loss to follow-up among mothers and their HIV-exposed infants in the HIV care and treatment continuum.

Kenya

HKID Program

The AIDSFree HKID Program aims to improve HIV and other health and social outcomes for pregnant adolescents, young mothers and their children. The program was designed based on lessons learned from successful home visiting models in sub-Saharan Africa and globally, whereby “community mentors” provide valuable household/ community-level services and support to improve health and social outcomes for their target populations.

Lesotho

CSO Capacity-building

AIDSFree is building the technical and leadership capacity of Lesotho CSOs to improve access to, and quality of, PMTCT and pediatric HIV service delivery; HIV testing services; health promotion; and adherence support and retention services for HIV-positive mothers, their infants, and their families.

AIDSFree is working with local CSOs LENASO, LENEWPHA, Care for Basotho, and Matrix to provide technical assistance focused on both technical and organizational capacities, both of which are critical for raising the profile of CSOs and expanding the role of civil society in working toward national targets to control the epidemic.

Cost-effectiveness Study

The AIDSFree consortium analyzed two PMTCT delivery models (public versus CSO / nongovernmental organization), with and without community-level support from CSOs, to draw from Lesotho’s experience in implementing and scaling up PMTCT services. The general objective was to develop an economic evaluation to assess the cost-effectiveness of various service delivery models.

Malawi

CSO Engagement in PMTCT Policy and Planning

AIDSFree developed a case study of the Malawi Network of People Living with HIV/AIDS (MANET+) to illustrate effective engagement of a CSO in PMTCT policy and planning. As a follow-up to the case study, AIDSFree then provided technical assistance to MANET+ and its member organizations to strengthen organizational and technical capacity in line with UNAIDS targets.

Namibia

CSO Capacity-building

AIDSFree provided capacity-building to Tonata, a local nongovernmental organization, to ensure practical application of management guidance and achievement of high-quality, community-based PMTCT and pediatric services. Capacity-building was focused on data collection, reporting, and use; quality assurance and improvement; and advocacy skills.

Zimbabwe

Private Sector Engagement in PMTCT

AIDSFree worked in Zimbabwe to better engage Zimbabwe’s private health sector in the national AIDS response, specifically around advancing the private-sector priorities for PMTCT outlined in the Ministry of Health and Child Care Private Sector Engagement Strategy. AIDSFree trained service providers in PMTCT and promoted private-sector nurse/ midwife task-sharing to scale-up PMTCT services within facilities.

Orphans and Vulnerable Children (OVC) Screening Tool

AIDSFree is developing a risk screening tool for community health workers and social workers to identify OVC for HIV testing. The AIDSFree consortium will pilot the tool in community programs serving OVC and will conduct a research study to assess the tool's performance.

Multi-country Projects

AIDSFree is conducting a study in Tanzania and Côte d’Ivoire to determine the willingness to pay for PMTCT services and HIV self-testing kits. The study will investigate motivators and barriers to paying out-of-pocket and will determine how much clients are willing to pay for services. The overall goal of this activity is to increase access to PMTCT and self-testing kits at private sector facilities among clients with the ability and willingness to pay for private care.

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