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). 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 services to inform strong, high-quality HIV and AIDS programs.

KEY PROGRAM ACCOMPLISHMENTS**

Currently, EGPAF-Cameroon is supporting:

- HIV treatment to **over 67,000** adults
- The testing of **over 264,000** individuals
- PMTCT services to **nearly 2,000** pregnant women throughout the country
- Antiretroviral therapy to **over 2,100** babies

** Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS), Cameroon HIV and AIDS estimates (2020), World Bank, Cameroon, population estimates (2019)  
** Data as of January 2021

THE CAMEROON PROGRAM

Working with Women, Children, and Families to End Pediatric AIDS

COUNTRY PROFILE*

<table>
<thead>
<tr>
<th>Category</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>25,876,380</td>
</tr>
<tr>
<td>Number of people living with HIV</td>
<td>510,000</td>
</tr>
<tr>
<td>Adult (15-49 years of age) HIV prevalence</td>
<td>3.1%</td>
</tr>
<tr>
<td>Women aged 15 and older living with HIV</td>
<td>320,000</td>
</tr>
<tr>
<td>Children (0-14 years of age) living with HIV</td>
<td>31,000</td>
</tr>
<tr>
<td>Deaths due to AIDS in 2019</td>
<td>14,000</td>
</tr>
</tbody>
</table>

EGPAF-CAMEROON PROGRAM GEOGRAPHIC COVERAGE

* Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS), Cameroon HIV and AIDS estimates (2020), World Bank, Cameroon, population estimates (2019)  
** Data as of January 2021
PROGRAM IMPLEMENTATION

**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.

**Achieving Epidemic Control to Reach 95-95-95 Targets in HIV Identification, Treatment and Viral Suppression**

**ATTEINDRE95 (2019-2024):** This U.S. Centers for Disease Control and Prevention-funded project will close existing gaps in achieving identification of HIV in 95% of the population; ensuring access to treatment among 95% of those who are identified as HIV-positive; and viral suppression among 95% of those on treatment by 2030. Atteindre95 accelerates progress towards epidemic control by strengthening health service delivery; supporting human resources for health; and enhancing data collection, use, and reporting at all levels of the health system. EGPAF will scale-up targeted, innovative strategies; differentiated service delivery (DSD) models; and differentiated support packages at 72 supported sites in the Littoral and South regions of Cameroon to improve the quality and coverage of services across the HIV clinical cascade. To achieve these goals, EGPAF will engage in targeted service delivery and technical assistance in high-burden areas, while improving regional-, district-, community- and site-level management to ensure epidemic control. Further, we will implement high-quality, evidence-informed case finding and clinical care services along the HIV clinical cascade. Project activities will focus on 17 high-burden districts with large urban populations in the Littoral Region and 9 districts in the South Region.

**Health System Strengthening to Prevent Mother-to-child Transmission**

**DISTRICT CAPACITY STRENGTHENING FOR PMTCT SERVICES IN THE WEST REGION OF CAMEROON (2015-2021):** EGPAF provides direct financial support and technical assistance, through private donor funding, to CBCHS to enhance PMTCT services in the West, North West, and South West Regions. Activities supported under this project include: implementation of psychosocial support groups for both children and adults; and women's health programs, which provide cervical cancer screening and treatment, breast cancer screening, and management of reproductive tract infections. We also support a youth health education network to ensure prevention of HIV among children and adolescents.

**Pediatric and Adolescent Treatment Advancements with Johnson & Johnson**

**NEW HORIZONS ADVANCING PEDIATRIC HIV CARE COLLABORATIVE (2014-PRESENT):** 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 New Horizons, which aims to improve ART service delivery for children; confront challenges faced by adolescents around disclosure, adherence, and psychosocial support; and increase access to third-line ART for children and adolescents failing second-line treatment.

**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**

- A cluster randomized trial study began in 2019 to assess the effect of integrating pediatric TB services in child health care services compared to standard of care in second level hospitals and their attached health centers, on the proportion of TB cases diagnosed among children <5 years old.

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