THE ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION IN UGANDA

Since 2000, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) has been supporting prevention of mother-to-child transmission of HIV (PMTCT) and HIV/AIDS care and treatment services in Uganda.

EGPAF-Uganda is a leading provider of technical assistance to Uganda’s Ministry of Health, and provides clinical service delivery support at the facility, district, regional, and national levels. We work closely with Uganda’s Ministry of Health and other partners to increase access to comprehensive, high-quality HIV prevention, care and treatment, and TB services for women, children, and families living with and affected by HIV and AIDS. EGPAF-Uganda currently supports services at 808 health facilities in 18 districts in the Southwest Region.

KEY PROGRAM ACCOMPLISHMENTS**

Currently, EGPAF-Uganda is supporting

- Over 808 health facilities in the country
- Nearly 150,000 women and almost 7,000 children with access to lifesaving antiretroviral therapy
- PMTCT services to over 10,000 pregnant women
- Access to early infant diagnostics to over 10,000 HIV-exposed babies

* Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS); HIV and AIDS Estimates (2020); World Bank population estimates (2018); and Uganda Bureau of Statistics, Population Based HIV Impact Assessment 2016–2017

** Data as of January 2020
RHITES-SW is a cooperative agreement led by EGPAF that supports the Uganda Ministry of Health to provide a comprehensive service package of HIV counseling and testing (HCT), prevention of mother-to-child transmission (PMTCT), HIV/AIDS care services and treatment, HIV/ TB collaborative services, Maternal and Neonatal Child Health (MNCH) services, family planning, nutrition, early childhood development and malaria.

This project aims to increase utilization of health services through the following key result areas: a) Increased availability of and accessibility to health services; b) Improved quality of health services; c) Increased availability of resources for public sector health services; d) Improved organization and management of service delivery; and e) Increased adoption of healthy behaviors and positive child development practices by communities in focus areas and target population groups.

As the RHITES-SW project enters its sixth year of operation, EGPAF will focus on efforts towards transition to local partner organizations. The EGPAF team will use a phased approach to transition programmatic support from the RHITES-SW project to Mbarara Regional Referral Hospital as part of G2G (Government to Government), LSDA and to two local non-profits, TASO and JCRC. The transition will mainly focus on the HIV program while technical support to the districts and implementing sites will continue for the entire family health program.

Catalyzing Pediatric TB Innovations (CaP TB) Project (2017-2021)

EGPAF is scaling-up access to and coverage of TB diagnosis and new child-friendly treatments for both active and latent TB under the Unitaid-funded CaP TB Project. This project aims to enhance TB identification, care, and treatment in children but also will assess successful practices for enhanced identification and integrated platforms.

Catalyzing Pediatric ARV Treatment Formulation Optimization (2019-2021)

This DNDi-supported project will streamline and accelerate use of new, child-friendly ART formulations. EGPAF will focus on the development of new tools for improved control of pediatric HIV and support increased uptake of solid lopinavir/ritonavir, while preparing for introduction of dispersible dolutegravir formulations in Kenya, Tanzania and Uganda.

Closing the Adult-Pediatric HIV Treatment Gap in Uganda (2018-2021)

With funding from the ELMA Foundation, EGPAF-Uganda is working to improve pediatric and adolescent HIV identification, linkage, and retention into care and treatment in eight districts of Southwest Uganda. The program supports health facilities to implement key strategic interventions, which include: strengthening provision of HIV testing services among children and adolescents at all service points; increase access to early infant HIV diagnosis; create stronger linkage to care and treatment; and strengthen retention efforts through client tracing. EGPAF-Uganda works with the District Health Offices to provide support supervision to facilities which ensures ownership and sustainability of the interventions.

New Horizons Advancing Pediatric HIV Care Collaborative (2016-present)

With funding from Johnson & Johnson and in partnership with the Uganda MOH, EGPAF provides technical assistance on pediatric second- and third-line ART access. This project, which will run in Uganda from 2018 to 2020, 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/etravirine donation program, which increases availability of third-line pediatric and adult ART for children and adolescents failing second-line treatment.

The Delivering Technical Assistance (DELTA2) Project (2019-2024)

DELTA2 is a five-year, U.S. Centers for Disease Control and Prevention (CDC)-funded cooperative agreement implemented by EGPAF. Building on EGPAF's successful Project DELTA (2013-2019), DELTA2 provides cost-effective technical assistance (TA), capacity building and program implementation services to optimize the impact of programs supported by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GF) to ultimately help achieve an AIDS-free generation. In the initial project year of DELTA2, EGPAF supported a variety of activities under PEPFAR’s Faith and Community Initiative as well as COVID-19 infection prevention and control activities. To date, DELTA2 has supported work in Cameroon, Botswana, Haiti, Kenya, Lesotho, Malawi, Nigeria, Tanzania, Uganda, Zambia and Zimbabwe.

ADVOCACY

EGPAF works hand-in-hand with Uganda's Ministry of Health to formulate evidence-based policies supporting all persons affected by HIV. EGPAF actively participates in national technical working groups and advisory committees including: the Pediatric HIV Working Group; the TB/HIV Subcommittee; the MNCH Technical Working Group; the Adolescent Health Technical Working Group; the National TB Technical Working Group; the National Advisory Committee on PMTCT; the TB Advocacy, Communication and Social Mobilization Committee; and the PMTCT Monitoring and Evaluation Subcommittee.

EGPAF played a central role in the revision and adaptation of the Consolidated HIV Prevention, Care and Treatment Guidelines in 2016, recommending treatment initiation among all HIV-positive persons. This included advocating for the adoption of globally recommended PMTCT and HIV care and treatment guidelines at all levels of the country’s health system to improve access to lifelong treatment.

RESEARCH

EGPAF-Uganda is dedicated to advancing basic and operations research to strengthen the effectiveness of the global HIV and AIDS response.

Approved Protocols

• Active case finding of pediatric HIV in Uganda
• Effectiveness of a model for national scale-up of the Pratt Pouch to expand infant ARV prophylaxis in Uganda, and a formative study of PMTCT services to implement the Pratt Pouch
• Assessing the feasibility and acceptability of daily oral PrEP among a cohort of women and men from key populations who were screened and eligible for PrEP, as well as among the providers
• Description of demographic, clinical, and laboratory characteristics and outcomes of children and adolescents who ever received donated treatment that contained darunavir (DRV) and etravirine (ETR)
• Developing and validating a pediatric and adolescent HIV testing eligibility screening tool for health care providers in multiple health settings in Uganda
• Evaluating the effectiveness of CaP TB on service delivery and clinical outcomes
• Evaluation of the effectiveness of selected community-based interventions to improve maternal and child health (MCH) and PMTCT outcomes in Uganda
• Effect of family support groups on retention in HIV care among HIV-positive women initiated on ART through PMTCT programs (Option B+) in selected EGPAF-supported health facilities in Uganda

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