

PROGRAM ABSTRACT ICASA 2013

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Project: Strengthening Communities through Integrated Programming (SCIP)

Country: Mozambique

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Program/Best Practice abstract

TITLE: Filling the gap: The Role of Community-based HIV tester-counselors (HTC-C) in Strengthening Prevention of Mother-to-Child Transmission (PMTCT) of HIV

ISSUES: PMTCT services began in Mozambique in 2002 at 8 health facilities (HF) in 3 provinces (Maputo, Beira, and Manica). As of 2009, 744 HF offered PMTCT servicesⁱ. Despite this progress, approximately 20% of children born to HIV-positive women were sero-positive after 1 yearⁱⁱ, signaling that additional efforts are needed to reduce incidence to a 5% targetⁱⁱⁱ. The greatest barriers to reducing MTCT include weak involvement of partners and poor adherence to ART services.

DESCRIPTION: Since 2010 the USAID-funded Strengthening Communities through Integrated Programming (SCIP) project has been implemented in 14 districts across Nampula province. The project aims to improve the quality of life at the household and community levels through various activities, including HTC-C.

To address key barriers to PMTCT, SCIP developed a comprehensive strategy to increase male involvement in maternal health and partner uptake of antiretroviral treatment (ART) services, encouraging male partners to support HIV-positive pregnant women in attending antenatal care (ANC) and adhering to ART prophylaxis regimens. HIV+ partners in treatment contribute to healthier HIV-positive pregnant women and newborns. When all family members are in treatment, the child is more likely to be brought to the HF for treatment and to at-risk consults, reducing the risk for new infections.

The project worked with HF to include partners in ANC and offer couples voluntary testing and counseling (VCT) services. Providers also offer referrals to the HTC-C to provide VCT services in their home. Seropositive partners are referred to HF to initiate ART and the HTC-C continues to provide positive prevention services in the home.

LESSONS LEARNED: Between January 2012 and March 2013, HTC-C counselors visited 767 HIV-positive pregnant women in their homes (an average of 150 per quarter). The percentage of partners who accepted VCT has steadily increased from 58% in January-March 2012 to 82% in January-March 2013. The average rate of seropositivity for partners is 67% (N=352, range between 61 and 77%), demonstrating the effectiveness of this strategy in identifying HIV-positive individuals.

NEXT STEPS: The project continues to strengthen the strategy of locating, engaging and following-up partners of HIV-positive pregnant women, and will further build on work to increase institutional

deliveries for HIV-positive pregnant women, and to improve attendance at prenatal and at-risk child consultations for better health outcomes.

ⁱ “Preventing mother-to-child transmission”, *UNICEF*, accessed 11 June 2013,
http://www.unicef.org/mozambique/hiv_aids_2968.html

ⁱⁱ Maternal and Child Health/PMTCT data, Ministério de Saúde, 2009, Mozambique.

ⁱⁱⁱ “Prevention of mother-to-child transmission Situation Analysis,” *WHO*, accessed 11 June 2013,
<http://www.afro.who.int/en/mozambique/country-programmes/mother-and-child-health/prevention-of-mother-to-child-transmission.html>