

INNOVATION TO SAVE LIVES

Technological and Programmatic Innovations to Accelerate Access to Treatment and Care for Children and Adolescents Affected by HIV

Project Scope

This two year project (2013-2014)—supported by the MAC AIDS Fund—is designed to address unmet needs for HIV testing, treatment and care among children and adolescents in key BRICS countries (Brazil, the CEE/CIS region,* India and South Africa). By scaling up technological and programmatic innovations to optimize service delivery, the project aims to contribute both to attaining the goals of the "Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive," and keeping children and adolescents who are living with HIV alive and well.

Background

In 2010, 20% of the estimated 20 million children living with HIV were in BRICS countries. Yet access to paediatric HIV treatment among these fast-growing economies still remains low. Poor access to early infant diagnosis (EID) and HIV testing and counselling among adolescents are common barriers to accessing treatment. Retention in care is also challenging in many settings. This is particularly true among adolescents living with HIV, who often find themselves navigating the challenges of life-long treatment while still maturing emotionally, psychologically, physically, and sexually.

Photo: Through the MomConnect initiative in South Africa, women receive personalized SMS text alerts on upcoming clinic visits and care from pregnancy through 18 months post-delivery.





^{*} Central and Eastern Europe and the Commonwealth of Independent States region

Project Objectives

Because BRICS countries have varying HIV epidemic landscapes—ranging from mixed epidemics in the CEE/CIS region, Brazil, and India to a generalized epidemic in South Africa—each country has tailored its project and approach to reflect its specific context.

The project has two overall objectives:

- In India, CEE/CIS and South Africa, the project aims to expand early infant diagnosis, treatment access, and adherence support at the decentralized service delivery level.
- In Brazil and CEE/CIS, the project aims to expand equity-focused HIV testing, treatment access, and follow-up to improve retention in care among adolescents, especially those at higher risk of HIV exposure, such as young men who have sex with men (MSM).

Photos:

(Top): Dr. Mamta Manglani works in a Paediatric Centre for Excellence in Mumbai, India, where children affected by HIV receive treatment and care.

(Middle): Paediatrician Iryna Raus counsels a mother on HIV-related issues in an HIV prevention and treatment centre in Kyiv, Ukraine.

(Bottom left and right): In Brazil, a Mobile Health Unit offers voluntary STI and HIV testing and counselling on site.









COUNTRY & PROJECT AREA	ACTIVITIES
Brazil Municipality of Fortaleza	 Establish mobile health units to offer HIV, syphilis, and viral hepatitis counselling and testing for adolescents, with targeted outreach to young MSM Link those who test HIV-positive to follow up services Build the capacity of social workers and nurses on clinical approaches for working with adolescents Train adolescents and youth on social mobilization and networking Provide prevention materials for sexually transmitted infections and HIV Provide viral hepatitis, HPV, and syphilis vaccinations
Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS) region Primarily Kyrgyzstan, Tajikistan, Ukraine, Uzbekistan	 Introduce dried blood spot (DBS) technology for early infant diagnosis Train health care providers on HIV treatment and care and provide a virtual forum for exchanging information Create child-friendly spaces in HIV clinics Develop a manual and train social workers on conducting support groups for adolescents living with HIV Provide psycho-social support for adolescents living with HIV
India Primarily Andhra Pradesh, Karnataka, Maharashtra, Tamil Nadu	 Support the implementation of integrated maternal and neonatal health and HIV for early diagnosis, treatment and care of HIV among infants and children (<5 years) Strengthen the tracking of HIV-exposed infants and young children along the continuum of care Strengthen capacity for monitoring feeding, growth and development; nutritional counselling; and the management of malnutrition among HIV- exposed or HIV-positive infants and children (<5 years) Use telemedicine to strengthen paediatric HIV care in Maharashtra by linking adult ART centres in 26 remote rural districts with a Paediatric Centre of Excellence in the state capital (Mumbai) Conduct cohort analysis in two states (Maharastra and Tamil Nadu) to assess the impact of early diagnosis and treatment of HIV on HIV-related morbidities and mortality among infants and children
South Africa Two districts in KwaZulu- Natal	 Close the gaps in the continuum of care for pregnant women and infants using mobile technology (MomConnect) to support the prevention of mother-to-child transmission of HIV Follow a cohort of HIV-exposed infants at 6 weeks, 14 weeks, 6 months, 9 months, 12 months and 18 months to understand the risk of HIV transmission during the breastfeeding period



Young people at the launch of the Mobile Health Unit supported by the UNICEF/MAC AIDS Fund Initiative in Fortaleza, Brazil.

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