



Photo: Olivier Asselin



**Elizabeth Glaser
Pediatric AIDS
Foundation**

Community Engagement

The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) is a recognized global leader in the fight to eliminate pediatric AIDS. Through support from the U.S. Government, private, and multilateral donors, EGPAF employs a comprehensive and sustainable approach to expand quality HIV prevention, care and treatment services; strengthen health systems; and improve maternal, newborn, and child health (MNCH) services. Since 2000, EGPAF has supported innovative models of community involvement to meet the needs of women, children, families, and communities affected by HIV. EGPAF utilizes a multifaceted approach at the community level to improve health-seeking behaviors; increase uptake of HIV and MNCH services; retain women, children, and families in services; and enhance the psychosocial well-being of people living with HIV.

AREA OF EXPERTISE

Supporting Social Mobilization Activities and Promoting Health-seeking Behavior

EGPAF employs community mobilization interventions to influence social norms, cultural practices, and local traditions. Targeted activities promote health-seeking behaviors, improve awareness about available health and social services, provide education about HIV and other health issues, encourage uptake of antenatal and postnatal services, and address HIV stigma and discrimination to increase demand for HIV testing and/or treatment. For example, in Lesotho, Swaziland, and Uganda, EGPAF supports community health days, which offer educational activities and dialogues as well as mobile clinics where medical services are provided. Services offered include: HIV counseling and testing for adults and children, linkages to enrollment in HIV care and treatment programs, antenatal care, TB screening, growth monitoring, immunizations, and a range of other medical services.

Building the Capacity of Community Health Workers

EGPAF promotes and strengthens the community extension of health services to address geographic, financial, and other barriers to health service uptake. EGPAF provides financial support, develops curriculum for and conducts comprehensive trainings for community health cadres, and provides ongoing support and mentorship. In Tanzania, people living with HIV have been trained as lay counselors to work in communities and at health facilities to provide HIV education, counseling and testing, one-on-one counseling for partner disclosure, and support for treatment adherence and retention in HIV care and treatment services. In other countries, EGPAF supports community health workers to track HIV and TB clients who have been lost to follow-up, provide support for adherence and retention, and play an important role in linking communities and facilities.

MALE INVOLVEMENT

To increase male involvement EGPAF supports interventions such as health seminars, community dialogues, and male support groups. A recent male involvement effort piloted by EGPAF in Tanzania demonstrated an increase from 10% to 43% in the proportion of male partners being tested for HIV during the reporting period.

Expanding Psychosocial Support

To ensure comprehensive HIV service provision for people living with HIV and their families, EGPAF strives to address both medical and psychosocial needs. EGPAF supports local governments and partners to integrate psychosocial support interventions, such as support groups, within clinical and community-based services. In Zambia, EGPAF developed and supports an innovative peer-driven intervention, the Tisamala Teen Mentors Program, to address the unique needs of adolescents living with HIV as they transition from adolescence to adulthood. Utilizing facilitated discussion and mutual support, the teens increase their knowledge of HIV and health issues and support each other to remain adherent to treatment and live safely and positively. Sexual and reproductive health services are also provided to this underserved population. In Zimbabwe, EGPAF works with community-based organizations and associations of people living with HIV, and has developed and implemented play centers and child development facilities to provide psychosocial support for HIV-positive and -exposed children and other orphaned and vulnerable children.

PEER MOTHERS

Many EGPAF-supported PMTCT programs utilize lay counselors to help support HIV-positive pregnant women. This innovative intervention has been shown to increase the retention of HIV-positive women in PMTCT, improve follow-up of mother-infant pairs, and increase male partner participation in PMTCT services.

Strengthening Community Health Structures

To improve the quality and accessibility of health services, EGPAF strengthens community-facility linkages by building the capacity of community leaders and members to identify and address health concerns. EGPAF also facilitates the development of community health committees to strengthen the client feedback loop and improve collaboration between health facilities and community service providers. To ensure a successful household-to-community continuum of care, EGPAF strengthens two-way referral systems and provides organizational and systems strengthening for local organizations and community service providers through training, mentorship, and supportive supervision. EGPAF also builds technical capacity and promotes the scale-up of evidence-based HIV/AIDS programming. For example, in Kenya, EGPAF is currently strengthening the management, technical, and leadership capacity of 32 local organizations to accelerate service delivery coverage at the community level and to improve the quality of HIV prevention, care, and treatment services.

ZIMBABWE'S NATIONAL VILLAGE HEALTH WORKER PROGRAM

In Zimbabwe, EGPAF advocated for community extension of health workers and provided technical support to help revitalize the national Village Health Worker Program.

Conducting Implementation Science Research

In addition to supporting community-based interventions, EGPAF assesses program and intervention effectiveness through operations research and impact evaluations, so that successful models can be replicated to assist in HIV prevention and treatment efforts worldwide. For example, under Project ACCLAIM in Uganda, Zimbabwe, and Swaziland, EGPAF is currently assessing the behavioral and operational outcomes of three community-based interventions – engagement of community leaders, community health days, and community peer groups – to determine their effectiveness in increasing community demand for, uptake of, and retention in MNCH and PMTCT services.