UNFINISHED BUSINESS: INDEX TESTING TO FIND AND LINK HIV POSITIVE CHILDREN AND ADOLESCENTS INTO CARE.

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Introduction

- Mildmay Uganda (Mug) is a Faith based NGO that Models quality & Sustainable Prevention, Care and Treatment of HIV and other health priorities, using a family centered approach; together with Training, Education and Research.

- Mityana hospital with the help of Mildmay Uganda through the ELMA project is implementing “family centered approach” in HIV care where by the index case leads to finding out of the sero-status of the other family members.

- The major objective of ELMA focuses on finding and linking HIV children and adolescents to appropriate care and treatment.

- The major way of finding these children is by strategizing testing children and adolescent of the index clients.

- Mityana hospital currently has 5221 adults and 577 children and adolescents in HIV care (July-September 2017, report)
What we did

01 Following the 2015 UNAIDS report on the gap between adult and paediatric HIV, the need to find more children and adolescents and link them to care was realised to achieve 90 number one.

02 Thus a project-ELMA (unfinished business) was started in October 2015, aiming at first tracking 393 children (0-14 years) and 128 adolescents (15-19 years) in 2 and half year, in Mityana Hospital.

By September 2017, we have got 114 children (0-14 years) and 117 adolescents (15-19 years).
How we did it

**Mentorships**
Mentored available health care providers to offer quality HIV care to index client’s children

**Outreach Activities**
Conducted “Know Your Child Status” campaigns and home based engagements.

**HIV Policies**
Use of Family Tracking tool
Testing all admitted children & adolescents, Pregnant and breast feeding women every three months and linkage of all found HIV Positive.

**Staff Recruitment**
Recruited a counselor for children & adolescent for HIV care related activities

**Health Education**
Strengthened health education at chronic care unit to encourage Index clients test all their children

**Networking**
• Partnering with community networks.
• Testing Children through CDDP.
Challenges encountered

**STIGMA**
1. Non-disclosure among couples
2. Poor couple Testing
3. Less men involved in health care process

**STOCK-OUTS**
1. Inadequate Testing kits
2. Low number of health care providers

**POVERTY**
1. Inadequate capacity of Index clients to access frequent care
2. Long distances to health facilities
3. Poor feeding standards

**POOR ATTITUDE**
1. Reluctance of some Index clients to test children
26-year-old Ester Namazzi a single mother to Deize Namugerwa 2 and half years got to know her HIV status after she had tested her daughter.

“I brought Deize to Mityana hospital after developing wounds around her neck. She cried all the time due to too much pain,” Ester says. “At hospital I met the ELMA counselor who advised me to first carry out an HIV test for the child before they can treat anything. I accepted and the results were positive. I was also tested and the results came out positive too.” We were counseled very well and put on ART medication. Deize’s wounds were cured and now very happy and energetic,” she adds. The ELMA counselor has been so great to us that we feel happy and proud that now I can stand up and be a witness to other positive living mothers. Am proud to live as an example to other mothers out there.”
Best practices/ key lessons

- Adequate comprehensive counselling services.
- Community based testing.
- Weekly, monthly, quarterly and annual reporting.
- CMEs and continuous review of national guidelines.
- Peer to peer counselling and sharing.
- Continuous quality improvement activities.
- Strengthening the adolescent and paediatric clinics.
  Partnership with relevant stakeholders, (CBOs, CHWs, peer educators, private health care facilities).
How these lessons are applicable/scalable to frontline providers

**Health Care Providers**
1. Continuous Testing
2. Continuous mentorships for quality service provision

**Village Health Teams**
1. Mobilizing people to come for testing
2. Community sensitization
3. Ensuring proper and complete linkages

**Partners**
1. Adopt practices

**Policy Makers (MOH)**
1. Create new tools that encourage compulsory testing
Thank you!

ELMA MITYANA HOSPITAL