THE IMPACT OF TBA’S AND MENTOR MOTHER PROGRAM ON LAGOS CITY PMTCT COVERAGE

Presenter
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Outline

- Background
- City epidemiology
- Findings
- Success stories
- Challenges
- Conclusion
Introduction

• Currently, Nigeria has the highest burden of vertical transmission of HIV which is about 22% of HIV infections from Mother to Child

• The success of prevention of mother-to-child transmission of HIV (PMTCT) is dependent upon the high retention of mother-infant pairs within our programs.

• The effectiveness of the prevention of mother-to-child transmission of HIV (PMTCT) program in Lagos has brought a significant contribution to the national burden of MTCT in Nigeria.
Epidemiology

- Nigeria has an estimated 8.5 million pregnancies per year
- 67% of women access Antenatal Care.
- Only 39% of women deliver in the facility.
- Only 43% of women have access to PMTCT services leaving a huge service gap of 57% for women who require PMTCT services.
- 135,000 are estimated to be HIV positive
Pilot Structure

• This project was piloted in 10 Local Government out of 20 in the city.

• 51 mentor mothers were engaged the one under review (2021)

• 31 high volume ANC community structures (TBA’s FBO’s and OVC programs) were engaged in the pilot project.
Pregnant women CTR Vs HIV +ve

![Chart Title]

- No of preg counsel tested receive result
- No tested HIV

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<th>Facility</th>
<th>Total</th>
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Legend:
- Blue: No of preg counsel tested receive result
- Orange: No tested HIV
Positivity yield (%)
Community structure contribution of new HIV +ve Pregnant

% contribution of new HIV +ve Pregnant women

- 81.80%
- 8.20%
Community structures contribution to ARV prophylaxis for HIV Exposed Infants

ARV prophylaxis with 72 hours of life to HEI

- Community structures: 31.52%
- Health facility: 64.48%

Legend:
- Community structures
- Health facility
PMTCT coverage 2020 Vs 2021

Chart Title

- **2020**: 28.35%
- **2021**: 34.09%
SUCCESS STORIES

01 DECREASED PMTCT ART COVERAGE GAP

02 i. DECREASED HIV TESTING MISSED OPPORTUNITIES AT ANC

03 !100% LINKAGE OF NEWLY HIV POSITIVE PREGNANT WOMEN TO PMTCT PROGRAM
04 Improved child follow-up (ARV prophylaxizes and early infant diagnosed for HIV exposed babies)

05 Improved collaboration between the community PMTCT structures and the orthodox health facilities

06 Increased immunization coverage for HIV exposed babies through the Motor Mothers program
SUCCESS STORIES

2007
CAPACITY BUILDING FOR THE TBA’s ON HIV COUNSELLING AND TESTING, AND UNIVERSAL PROTECTION

2008
Empowerment and Skill acquisition for PLHIV

2009
MAPPING OF COMMUNITY STRUCTURES CONDUCTED FOR SCALE-UP OF PMTCT SERVICES
CHALLENGES

- Non disaggregation of the national M&E tools to capture community linked clients to the facility. This limit the determination of retention of clients linked from community structures.
Conclusion

• Despite the relative equitable spread of public healthcare system within the city, a large proportion of the pregnant women across ages and social strata still patronise the TBA’s.

Conclusion/Next Steps:

• The city will continue to collaborate with TBAs, maternity homes and other community structures for the identification of HIV positive pregnant women and will ensure the tracking of mother-baby pair until the final outcome.