

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

Presenter

Dr. Monsurat Adeleke
CEO, Lagos State AIDS Control Agency



Outline

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



LAGOS CITY HIV RESPONSE

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

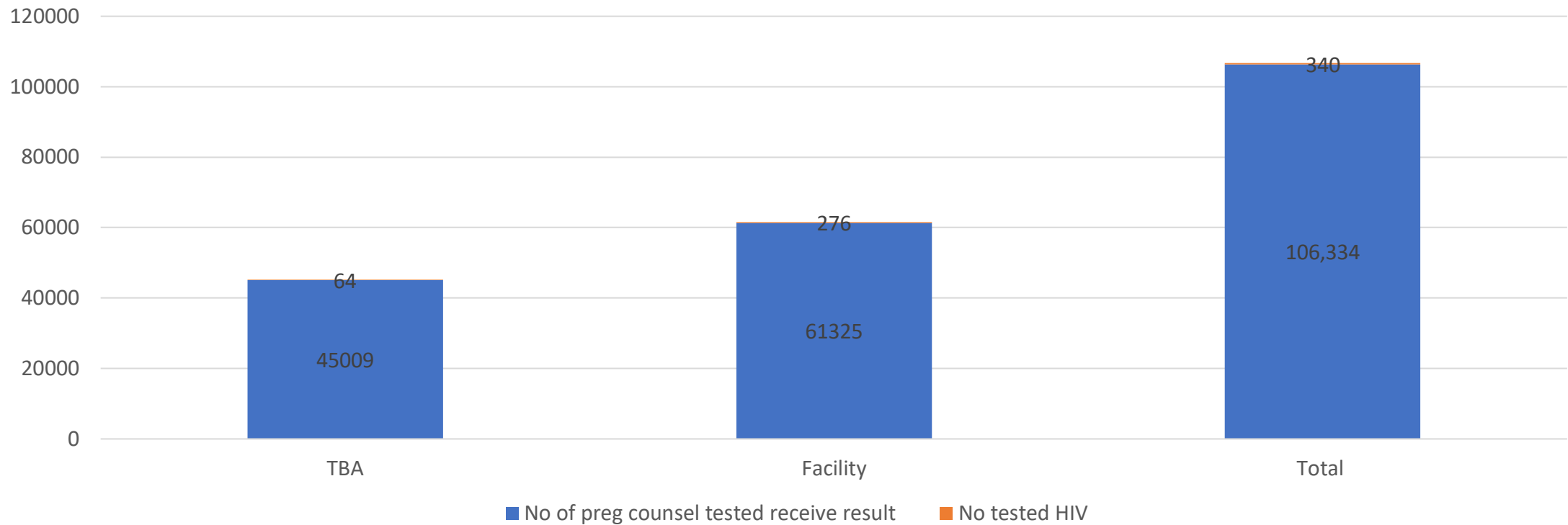
- Nigeria has an estimated 8.5 million pregnancies per year
- 67% of women access Antenatal Care.
- Only 39% of women deliver in the facility.
- Only 43% of women have access to PMTCT services leaving a huge service gap of 57% for women who require PMTCT services.
- 135,000 are estimated to be HIV positive

Pilot Structure

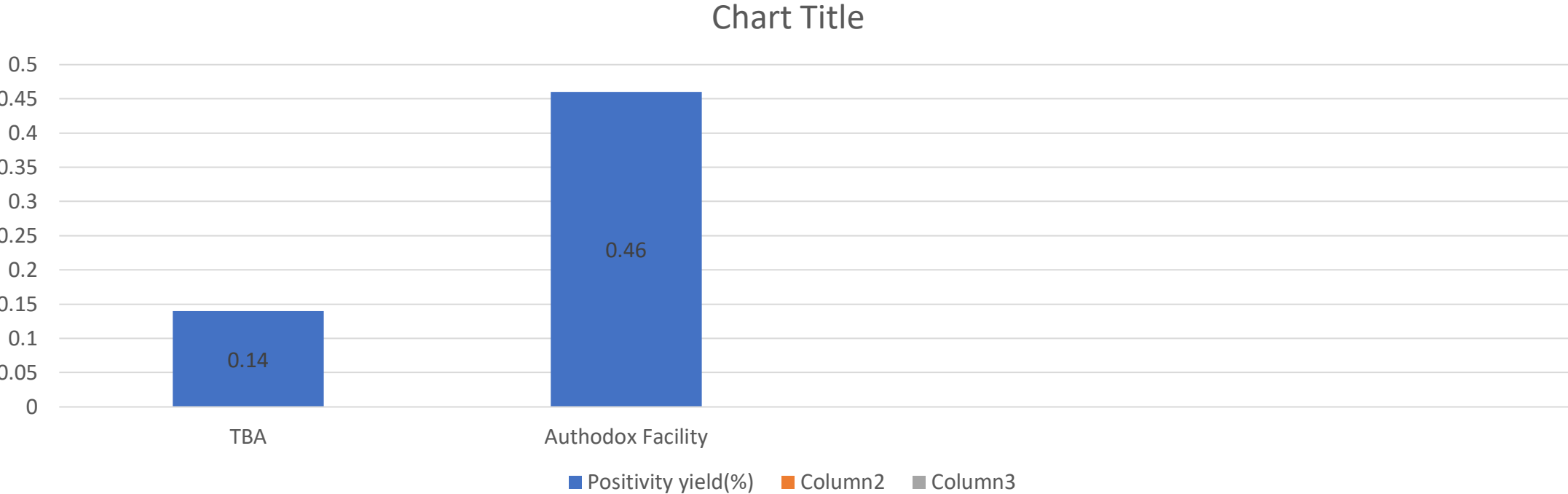
- This project was piloted in 10 Local Government out of 20 in the city.
- 51 mentor mothers were engaged the one under review (2021)
- 31 high volume ANC community structures (TBA's FBO's and OVC programs) were engaged in the pilot project.

Pregnant women CTR Vs HIV +ve

Chart Title

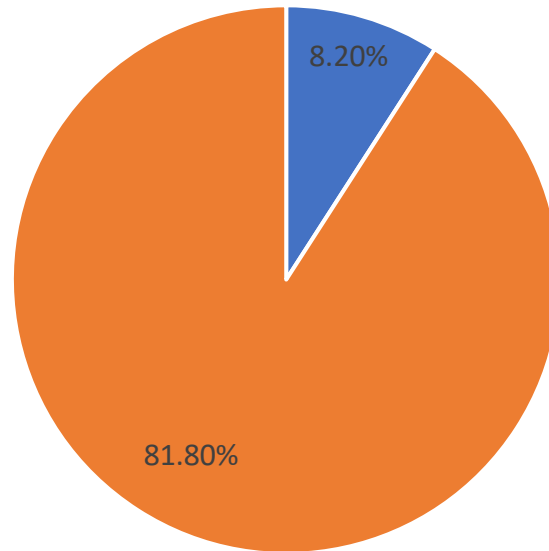


Positivity yield (%)



Community structure contribution of new HIV +ve Pregnant

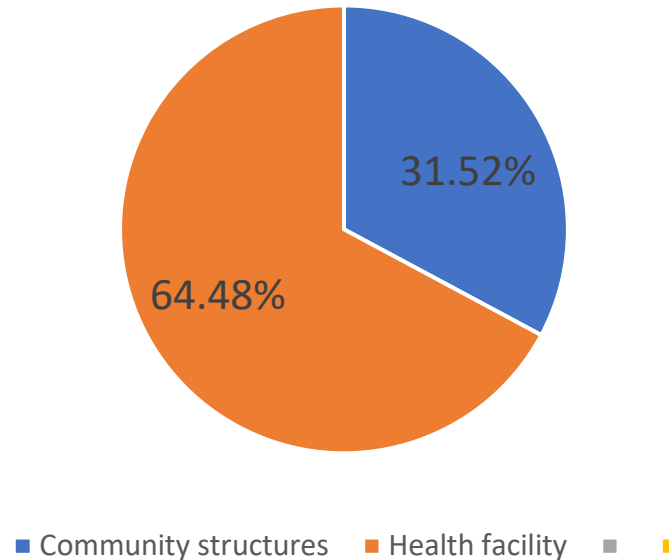
% contribution of new HIV +ve Pregnant women



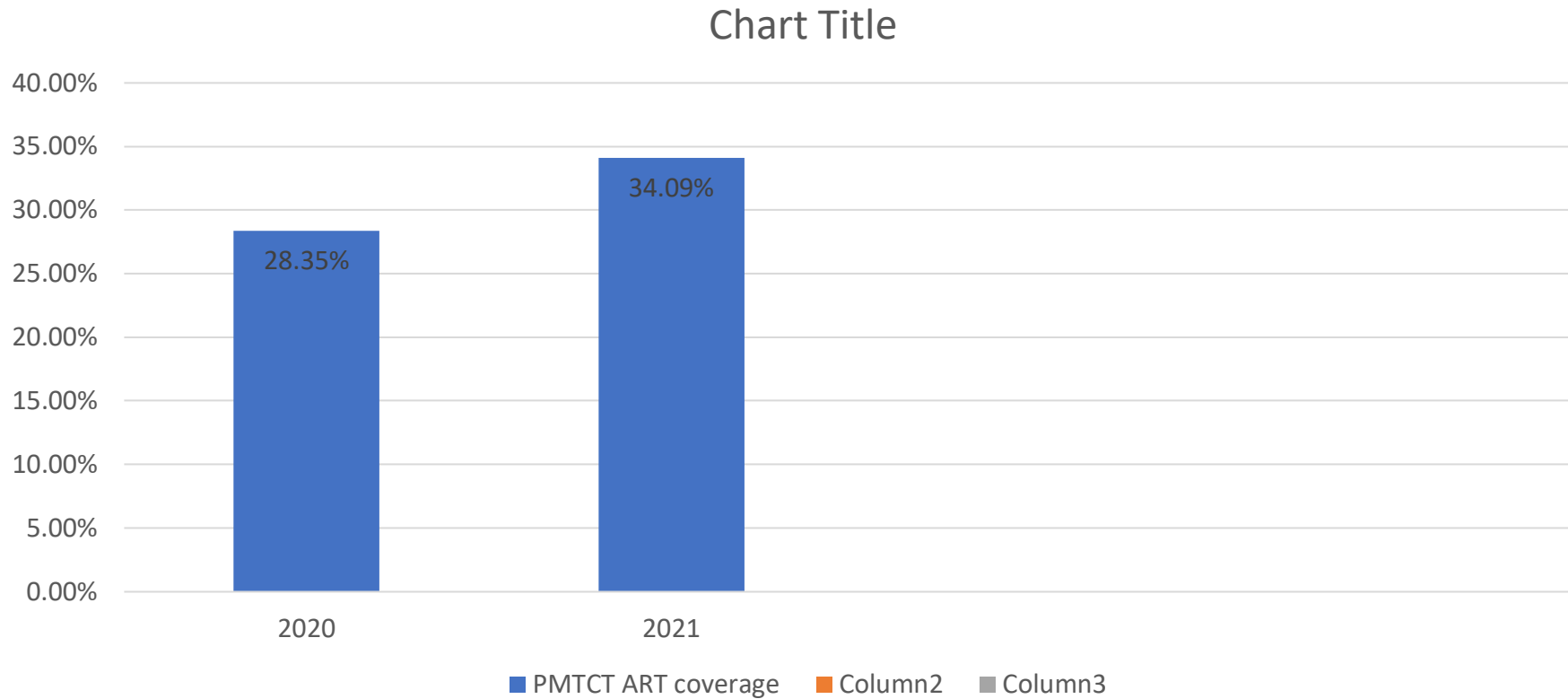
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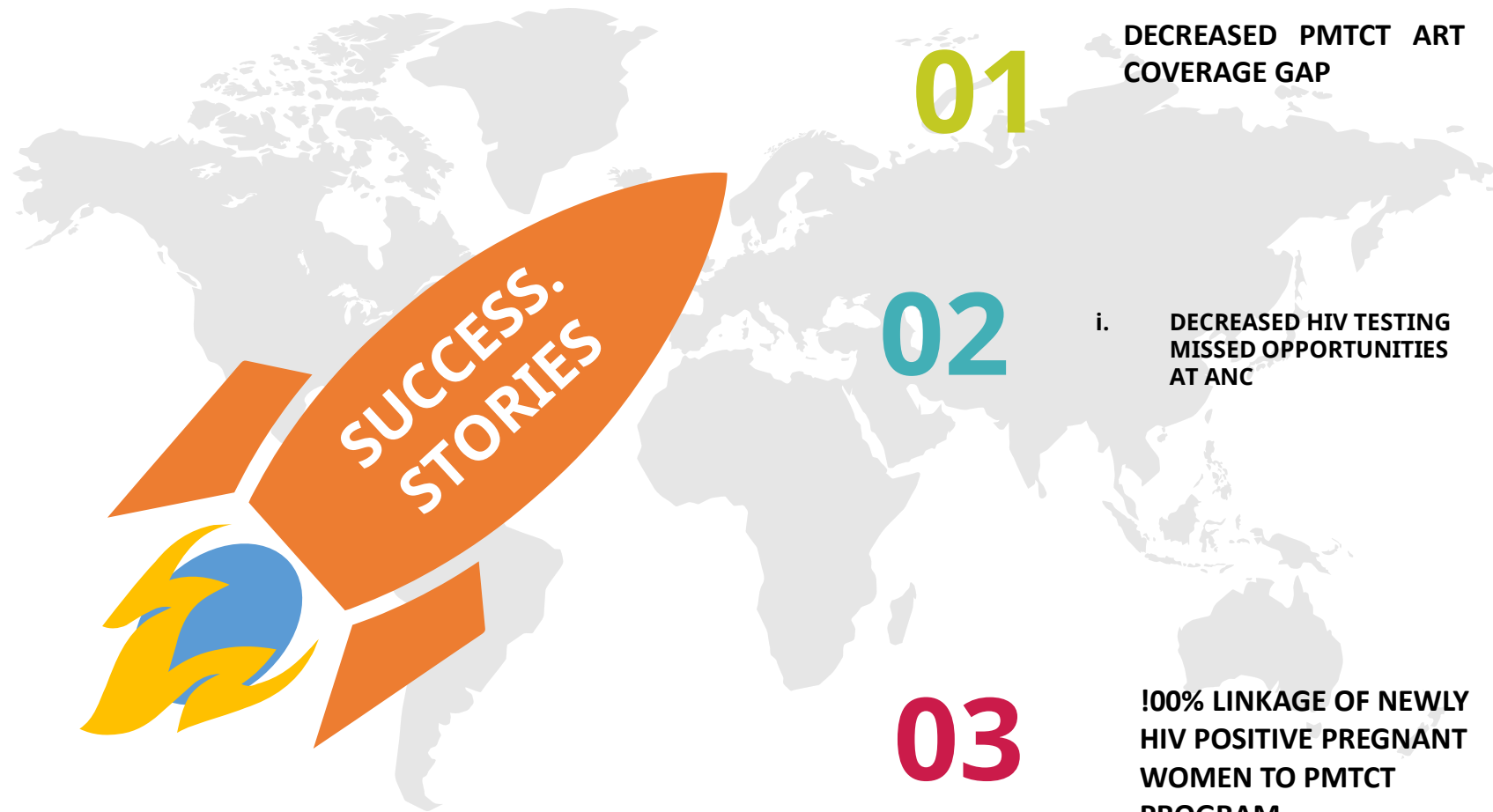
Community structures contribution to ARV prophylaxis for HIV Exposed Infants

ARV prophylaxis with 72 hours of life to HEI



PMTCT coverage 2020 Vs 2021





01

**DECREASED PMTCT ART
COVERAGE GAP**

02

i. **DECREASED HIV TESTING
MISSED OPPORTUNITIES
AT ANC**

03

**!00% 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 AUTHODOX HEALTH FACILITIES

06

INCREASED IMMUNIZATION COVERAGE FOR HIV EXPOSED BABIESTHROUGH THE MOTOR MOTHERS PROGRAM



07

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

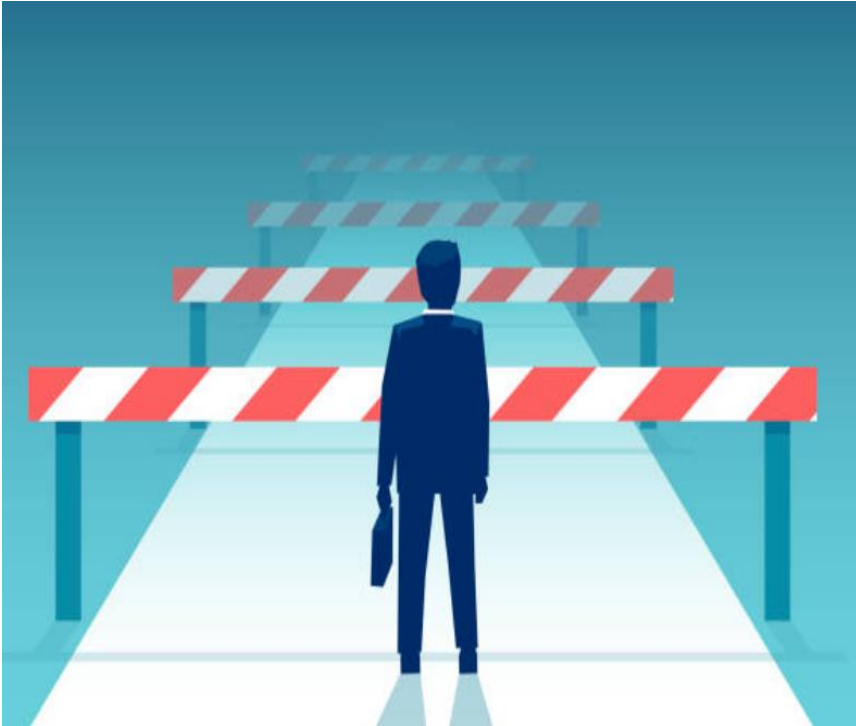
08

Empowerment and Skill acquisition for PLHIV

09

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 form 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.