



Preventing HIV in Pregnant and Breastfeeding Women

Námita Eliseu

VTP Focal Person Mozambique

HIVE Launch Meeting

December 6, 2024 | Johannesburg, South Africa



HIV
Impact Network for
Vertical Transmission
Elimination



Mozambique PrEP Background

- Mozambique has one of the highest HIV prevalence in sub-Saharan Africa (12.5%), being higher in women (15%) than in men (9.5%).
- Efforts are required to ensure that PBFW at high risk of HIV are provided with appropriate prevention services and counselling to ensure they remain negative.
- As a part of HIV prevention, Mozambique initiated implementation of oral PrEP in September of 2021, using a phased expansion approach targeting high incidence districts.
- In 2022, oral PrEP availability was expanded and de-medicalized simplifying eligibility to improve access.
- This led to a significant increase in uptake, though retention challenges remain.
- CAB-LA and Dapivirine vaginal ring to be piloted 2024/2025.

Mozambique PrEP Background

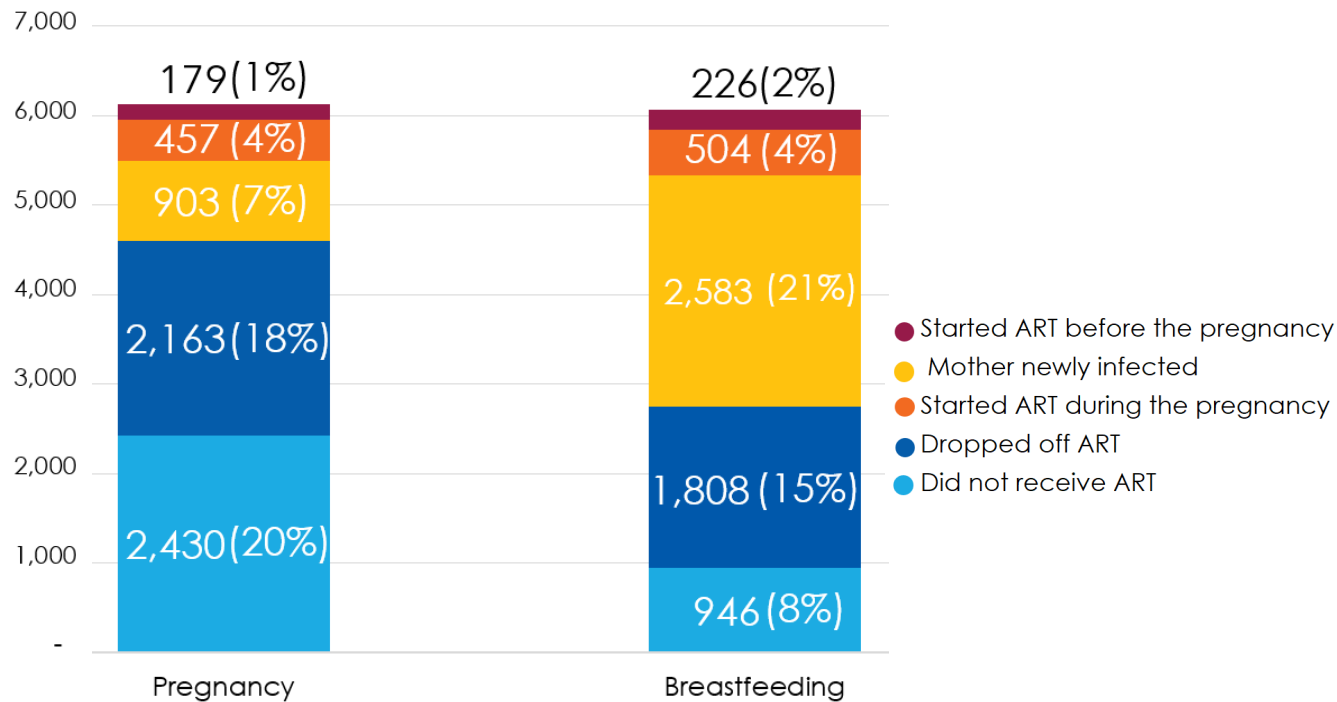


Vertical HIV Transmission in Mozambique

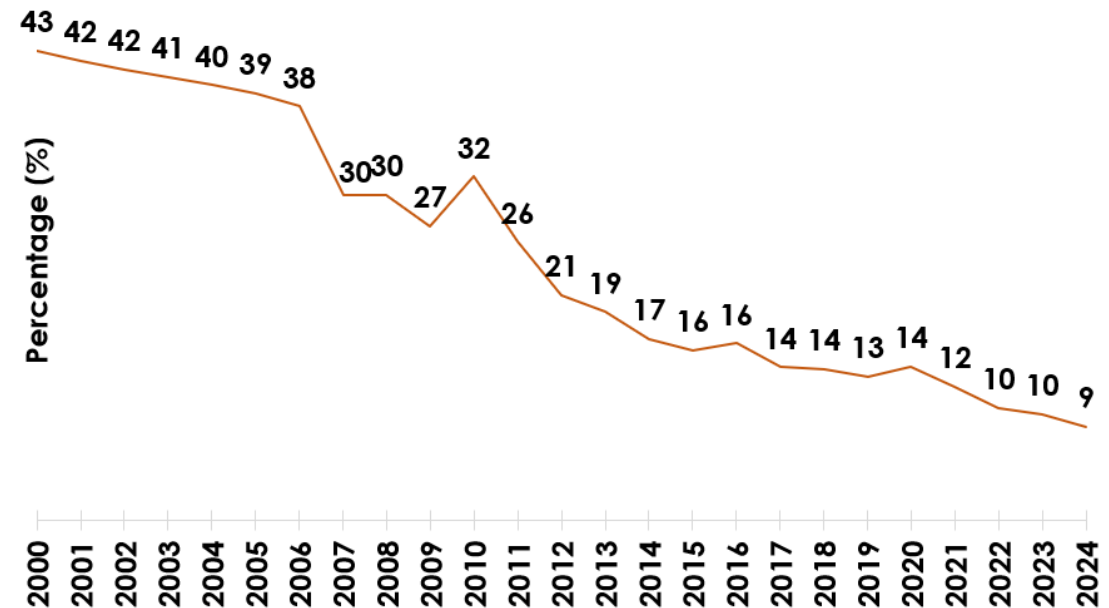
Every 1 in 3 pediatric HIV infection is due to incident infections during pregnancy and breastfeeding

Despite the numerous challenges in the country, there is still a gradual decrease in the overall rate of vertical transmission

Number of new HIV infections among children by source of infection, 2023



Vertical transition rate trends including breastfeeding period



PrEP Eligibility Criteria for PBFW

Have a negative HIV rapid test result

Have no suspicion of acute HIV infection based on screening for signs and symptoms

Do not have contraindication to any of the medication used for PrEP

Informed consent to take PrEP

Contraindications

1. Hypersensitivity to any of the medicines used for PrEP.
2. Uncontrolled high blood pressure or diabetes.
3. Chronic kidney disease

PrEP Approach for PBFW



PBFW can only access PrEP at HF

Who can provide PrEP?

Every **clinical provider** trained in the service package can offer PrEP

PrEP delivery in country is available at **Health facility** and **Community** for the general population only

Different entry points at HF

- Youth Friendly service
- ANC
- Postnatal care
- C&T

Monitoring and Evaluation Tools

Ficha de Seguimento da Profilaxia Pré Exposição - PrEP

NID (Código da US/ Anual/ Individual): _____ / _____ / _____ Mod.SIS PrEP - 04 Livro 1: N° _____ Pág: _____ Linha: _____
 Livro 2: N° _____ / _____ / _____ Pág: _____ / _____ / _____ Linha: _____ / _____ / _____

A. Informação sobre a Instituição
 Província: _____ Distrito: _____
 Nome do Provedor que Preencheu o Formulário: _____
 Data da Visita Inicial do(a) Utente (dd/mm/aaaa) : ____ / ____ / 20 ____
 Proveniência do(a) Utente: Nesta US Comunidade Transferido de Outra US
 Sector de captação da Elegibilidade a PrEP: CPN SAAJ Doenças Crónicas
 ATS-C CCR Outro (especificar) _____

B. Dados Demográficos
 Nome e Apellido do(a) Utente: _____
 Endereço (perto de): _____
 Data de Nascimento (dd/mm/aaaa): ____ / ____ / ____ Idade: ____
 Data do teste de HIV com Resultado Negativo no Início da PrEP (dd/mm/aaaa) : ____ / ____ / ____
 Estado Civil do(a) Utente: Solteiro(a) Casado(a) Divorciado(a) Viúvo(a) Outros
 Nome do(a) Parceiro (a) HIV+: _____ NID do(a) Parceiro: _____
 Unidade Sanitária (Onde o(a) parceiro(a) HIV+ faz seguimento): _____
 Casos Especiais (10 - 14 anos): Sim Não
 Descrição do Caso Especial (Em caso afirmativo OBRIGATORIO preencher): _____

Resumo Mensal da PrEP

Linhas	Colunas																										
	Masculino					Feminino					Grupo Alvo																
A1	Total Masculino					Total Feminino					Estado da Mulher																
	10-14 Anos	15-19 Anos	20-24 Anos	25+ Anos	Total	10-14 Anos	15-19 Anos	20-24 Anos	25+ Anos	Total	Mulher Grávida	Mulher Lactante	Adolescentes e Jovens em Risco	Mulheres Grávidas 15/+ em Risco	Mulheres Lactantes 15/+ em Risco	Militar	Minero	Camionista de Longo Curso	Casais Serodiscordantes	Reclusos	Homens que Fazem Sexo com Homens	Transgéneros	Trabalhador(a) de Sexo	Pessoas que Injectam Drogas	Outro		
N° de Utentes elegíveis a PrEP durante o período de reporte																											
N° de Utentes que iniciaram a PrEP pela 1ª vez durante o período de reporte																											
N° de Novos inícios em PrEP que alguma vez estiveram em PrEP durante o período de reporte																											
N° de Utentes que receberam a PrEP durante o período de reporte																											

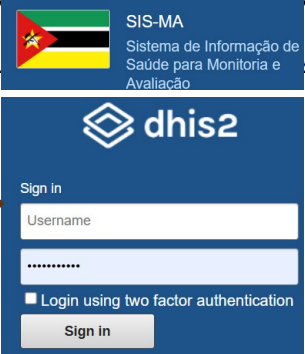
Grupo-Alvo: Mulheres 15/+ Anos em Risco Homens 25/+ Anos em Risco

(a) Utente Consente Receber Chamadas e/ou SMS? Sim Não Utente não Consente

Assinaturas: Utente: _____

Paper based system at HF

The monthly report goes through the National Information System for M&E (SIS-MA), where the monthly report is entered by hand and is not available any ecteronic mechanism



Follow-up schedule for PrEP users

Clinical and laboratory evaluation	Consulta- tion initial	Follow-up appointments (months)											
		1°	2°	3°	4°	5°	6°	7°	8°	9°	10°	11°	12°
PrEP counseling	x			x			x						x
Assessment of risk factors and referral to other combined prevention services	x			x			x						x
HIV counseling and testing	x			x			x			x			x
Evaluation of acute HIV infection	x			x			x						x
STI/Syphilis screening and treatment	x			x			x						x
Screening for kidney disease	x			x			x						x
Serum creatinine request**	X												X
Promotion and offer of condoms, lubricants, GBV screening	x			x			x						x
Strengthening adherence counseling	x			x			x						x
Dispensing medicines (number of tablets)	90/180*			90			90/180*			90***			90/180*

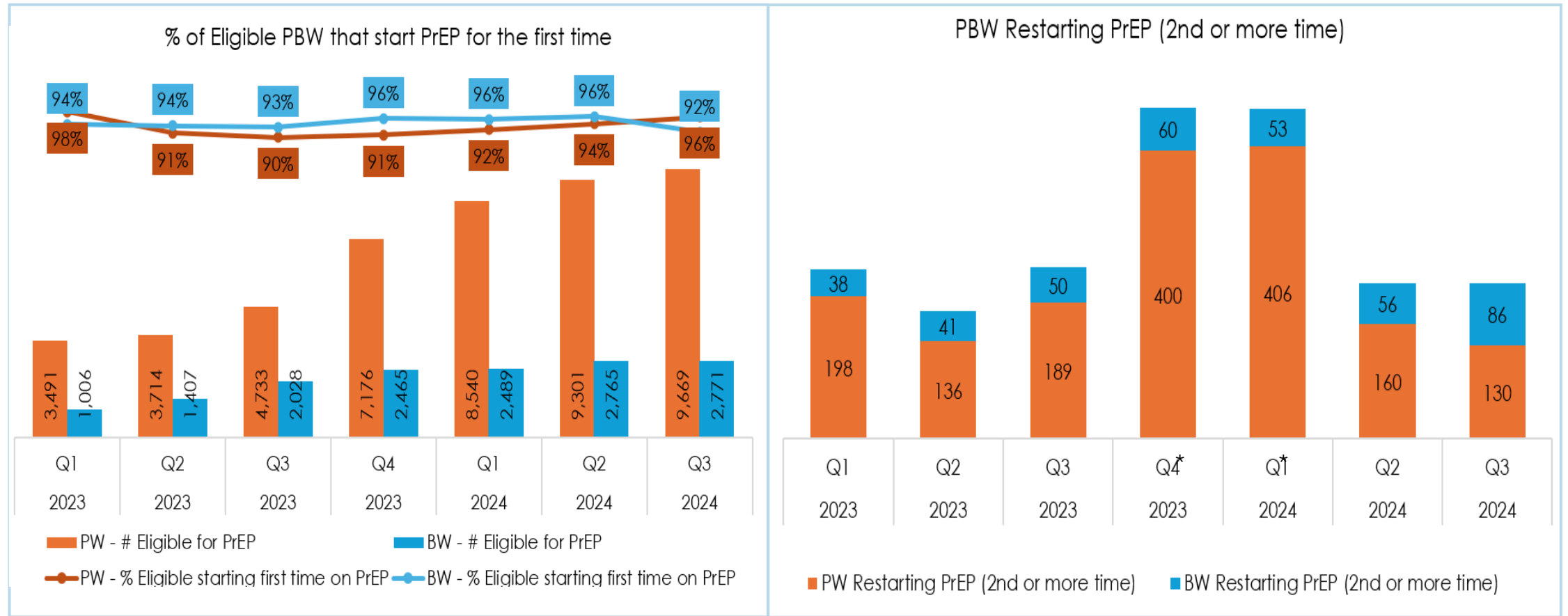
*180 tablets: Half-yearly dispensation for those eligible.

**Request serum creatinine when available for ≥30 years.

*** Consultation at the 9th month and dispensation of 90 tablets if the patient wishes to continue with follow-up and quarterly dispensation of PrEP.

PBFW PrEP Follow up Schedule

PrEP Initiation and Restart amongst PBFW



- Positive growth of PrEP initiation among PBFW
- Consistent PrEP reinitiation among PBFW over time

* Quality data issue

Challenges and Solutions

Inconsistent uptake of PrEP:

Ongoing education and advice: Providing clear guidance on the importance of continuity and addressing potential risks of disruption.

Stigma reduction: Support in reducing stigma

Implementation of the dispensation of medicines for three months

Poor quality of PrEP service delivery:

Training and refreshment of health workers who implement PrEP.

Integration of PrEP into maternal and child health services.

Self-stigma and misinformation:

Community engagement: Working with community leaders to address myths and stigma associated with PrEP and HIV

Poor data quality:

Data management training: Training for healthcare professionals in data collection and reporting, with a focus on ensuring accuracy and completeness. Inclusion of PrEP indicators in data quality assessment.

Thank You!



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