



MINISTRY OF HEALTH



The Kenya Plan to End AIDS in Children by 2027



2023-2027



Adaptations to sustain continuity of treatment and longitudinal tracking of PBFW and their infants in Kenya

Nelly Pato - VTP Manager, NASCOP



HIV
Impact Network for
Vertical Transmission
Elimination



HIV Vertical Transmission prevention Program Data

	VTP Indicators	Jan – Mar 2024	April – Jun 2024	July – Sep 2024	Oct – Dec 2024	Jan – Mar 2025
Testing and ART initiation	Antenatal 1 st Visit coverage	90.4%	82.8%	84.4%	75.4%	81.7%
	ANC 1 testing coverage	86.9%	84.6%	79.1%	58.8%	68.9%
	HIV Positive women identified	3,846	3,257	2,997	2,203	2,951
	Initiated on ART	3,664 (95.3%)	3,046(93.5%)	2,794(93.2%)	1,990(90.3%)	2,481(84%)
VL Monitoring	Viral suppression • Pregnant %	92.8%	92.8%	91.5%	93.3%	92.9%
	• Breastfeeding:%	95.5%	94.8%	94.6%	94.7%	95.1%
Infants	EID Uptake under 2 months %	85.6	80.7	82.1	88.8	48.9
	VTP Rate		7.3%			

Comparing Jan to Mar 2024 with Jan to March 2025, there is reduction in VTP performance indicators

Continuity of treatment and Mother Infant Pairs (MIP) tracking

Tracking of mother-infant-pair is made possible via electronic medical record (EMR) system



EMR distribution:

EMR is active in 2392 (34%) of facilities that provide VTP services

These sites account for 80% of country VTP data



Modular Uptake

93% (2221/2298) of sites have been utilizing MCH module which facilitated mother infant pairing



Functions

1. Support longitudinally monitoring mother and child throughout the VTP cascade until final HIV determination
2. Generate dedicated VTP Reports for both mother and child

Impacts of Funding changes on continuity of treatment for PBFW and longitudinal follow up of MIPs

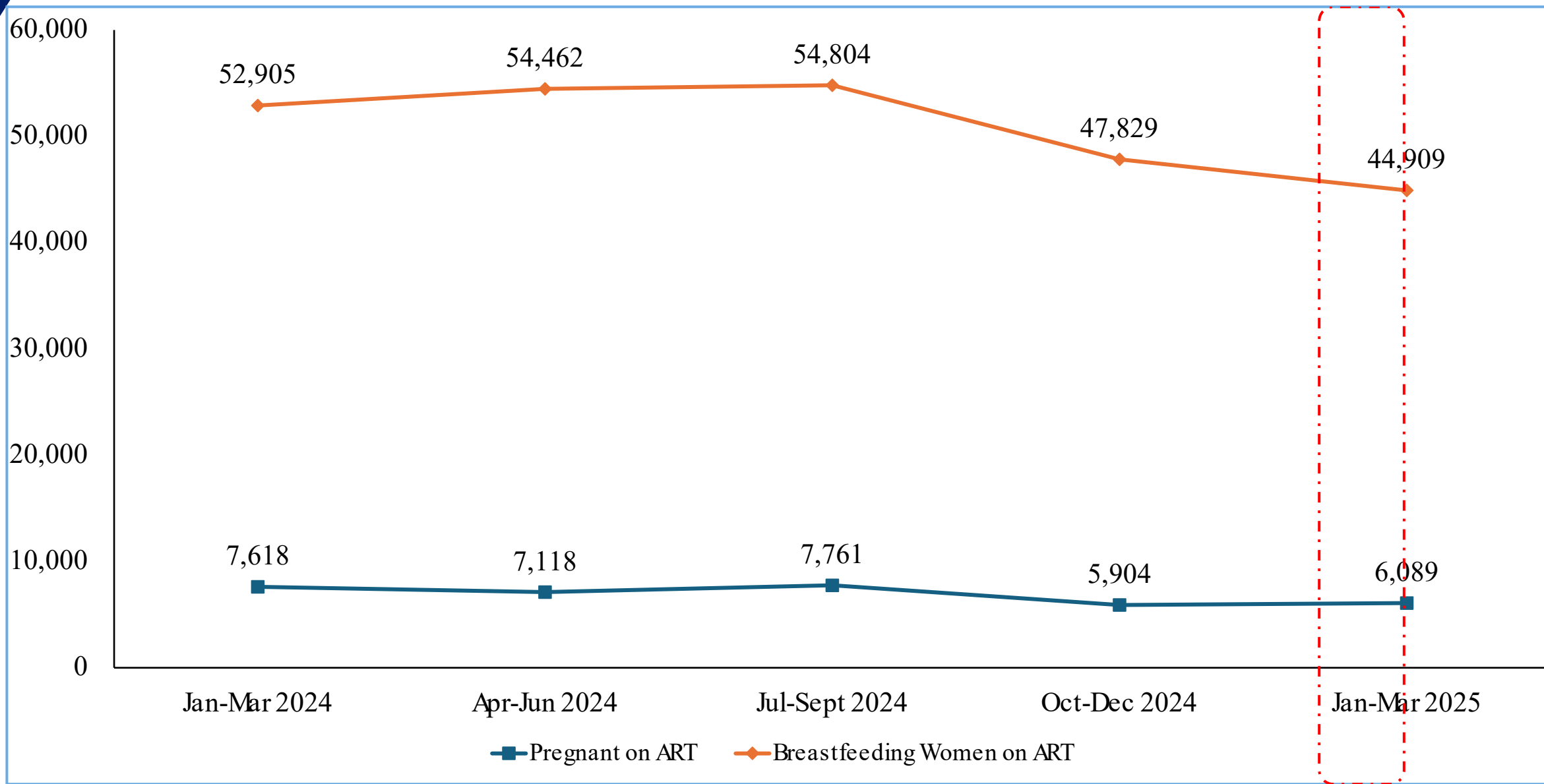
Human Resources for Health

- Withdrawal of key service providers for VTP- nurses, clinicians, and HIV counsellor testers
- Termination and reduction in the mentor mothers
- Reduction in number of data clerks

Disruption of Access to the Kenya EMR

- National data monitoring and reporting electronic systems experienced a down time in the months of February and March 2025 impacting follow up of PBFW and their infants
- These impacted comprehensive service provision and reporting for infants with HIV exposure and their mothers

HIV Positive Pregnant and Breastfeeding women on ART (Jan 2024 – March 2025)





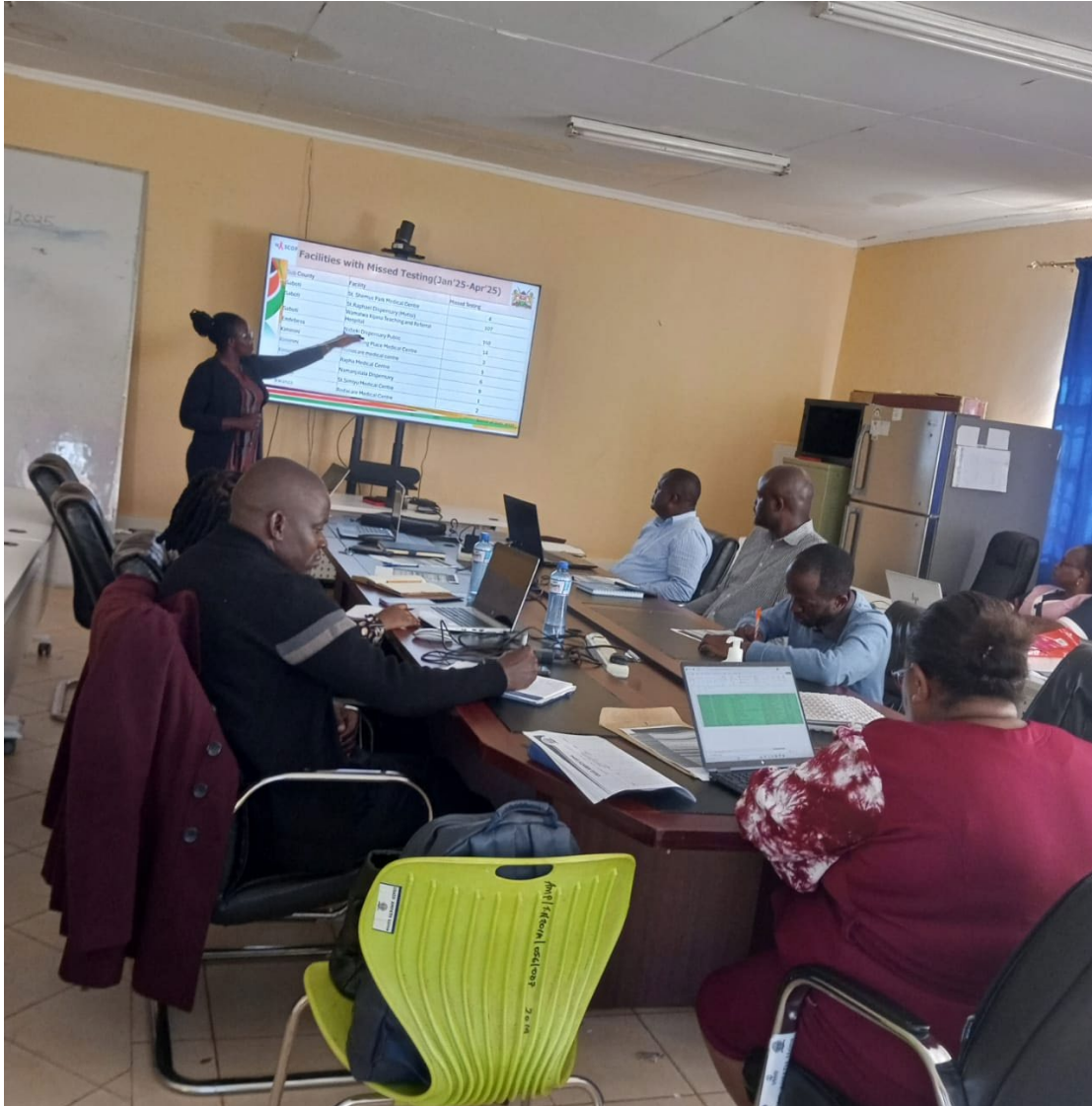
Adaptations to sustain continuity of treatment for PBFW and their infants amid funding shifts

- Integrating VTP services into primary health care (PHC).
- Capacity building and integrating community health promoters to follow up pregnant and breastfeeding women and their infants
- Facility-based trainings were conducted for ministry of health nurses and clinicians to build competence in using the EMR system and supporting client follow-up.
- Building new and strengthening partnerships with WLHIV networks and community organizations to sustain continuity of treatment for mothers and infants
- Utilizing the facility funds through the social health insurance to support VTP services

Country adaptations and innovations to sustain continuity of treatment for PBFW and their infants

- **Human resources for health**
 - Release of guidance on HRH management by the County leadership
 - Deployment of GOK staff to MNCH clinics to offer VTP services
 - Capacity building through mentorship and on job training targeting deployed staff offering VTP services
- Engagement of facility and county mechanisms for transportation of EID and VL samples in 14 counties out 47.

Long term sustainability plan for continuity of treatment for mother-infant pairs



- Optimize integration of VTP services in the mainstream MCH services run by the ministry of Health
- Ongoing effort to have VTP services incorporated as part of the primary health care (PHC) package which will guarantee sustainable services for VTP services
- Ongoing effort to integrate mentor mothers as CHPs
- Use of facility improvement funds(FIF) for to sustain VTP services example outreaches, purchase of commodities and supplies hiring of lay HCWs on short term contracts.
- 'Adopt a County strategy' for TA and coaching to county and facility teams
- Capacity building of HCWs on triple elimination by availing the curriculum on the MOH virtual academy.

Long term sustainability plan for M&E systems

- Transition all EMRs to national data archives
- Enhance VTP data monitoring SOPs and visualization dashboards to improve decision making and facilitate monitoring of key performance indicators at national and county levels.
- Inter-operability and exchange of information's across various HIS systems
- Kenya is currently in the process of rolling out the digital health superhighway through the newly established Digital Health Agency (DHA) scale up of facility wide EMRs

Asante Sana



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HIVE Strategic Planning Meeting | June 13, 2025 – Johannesburg, South Africa