

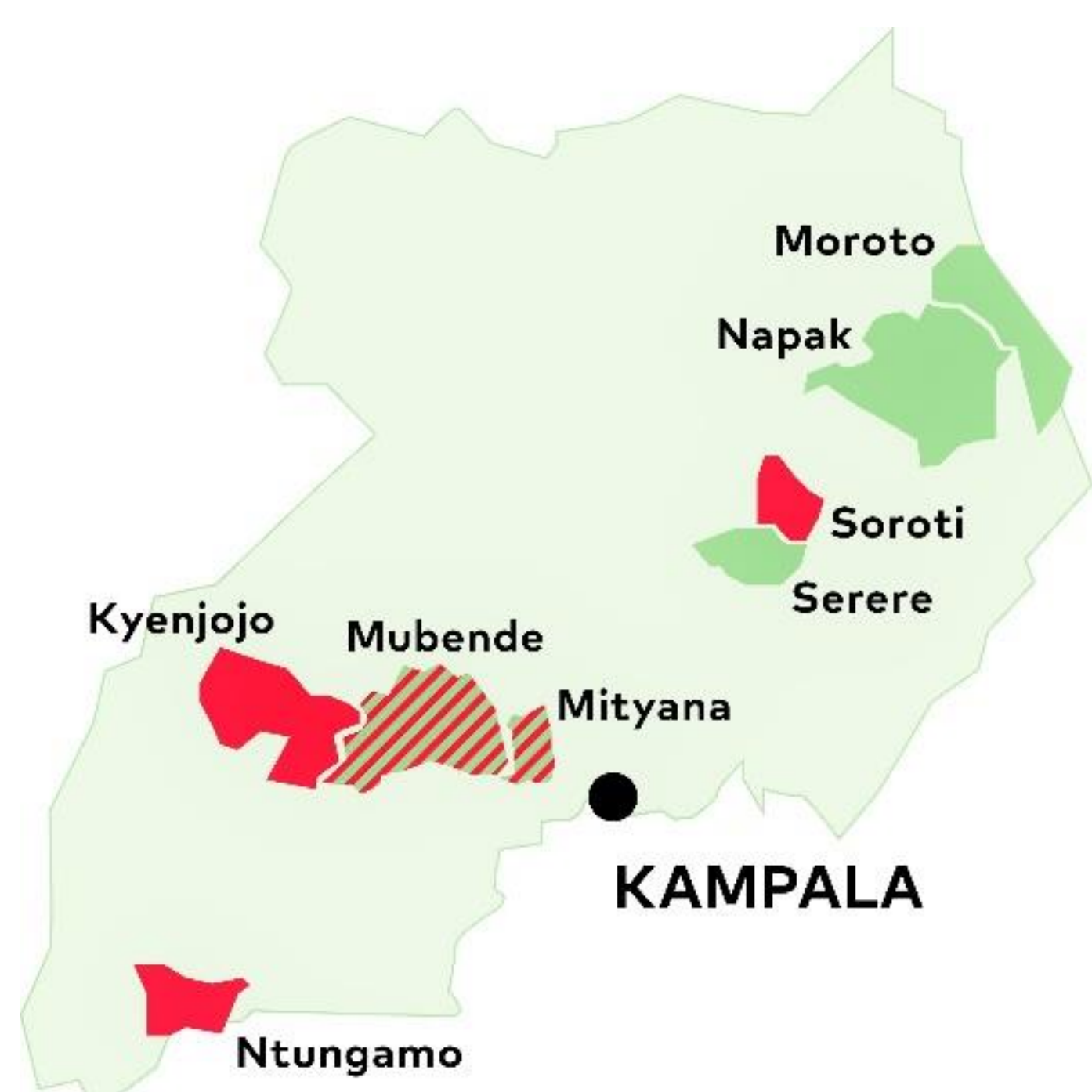
# Strong community systems for paediatric HIV prevention and care: Experiences and lessons from the 'Towards an AIDS Free Generation in Uganda' (TAFU) programme implemented in eight rural districts

## Background:

While Uganda has made progress in the fight against HIV, treatment coverage for children 0–14 years living with HIV is low at 62% and many children living with or exposed to HIV continue to be lost to follow-up.

Aidsfonds and partners in Uganda implemented an 8 year 'Towards an AIDS free generation in Uganda' (TAFU) programme aimed at reducing new HIV infections among infants and increasing the numbers of children living with HIV (CLHIV) on treatment.

## Map of Uganda showing TAFU areas



TAFU 2 & 3 (2017-22)

2015/17 TAFU 1

## TAFU Model



## Description:

The TAFU programme was implemented in eight rural Ugandan Districts between 2015 and 2022. The program used a partnership model involving Aidsfonds and four Ugandan non-government organizations in collaboration with the District Health Service departments.

The programme identified and supported Community Resource Persons (CoRPs) including community health workers, persons living with HIV, teachers and community leaders, to serve as bridges between communities and health care facilities.

The CORPs were strengthened to address structural barriers at community level by: creating awareness on paediatric HIV and support at community level, addressing stigma within community, starting and strengthening peer support groups and building their capacity to trace, support, refer and follow-up children living with HIV. They conducted household visits to educate family members on elimination of mother to child transmission of HIV and care for CLHIV and demanded for better services. CORPs referred women and children for testing, traced and supported those who had dropped out to restart treatment.

## Key Results under TAFU

- 1,097 CORPs trained
- 8,373 children (0-14 years) referred and tested for HIV
- 2,567 tested positive (30.6%) and enrolled in care
- 3,285 pregnant women enrolled in antenatal care including HIV testing and access to treatment

## Lessons learnt:

Building linkages between communities and health facilities through CoRPs is possible and greatly improves identification, linkage and retention of children and women living with HIV in care.

Through health education talks and home visits, CoRPs improved HIV and treatment literacy, identified challenges women and CLHIV face and brought them to the attention of health care workers for action which enhanced retention in care.

**The VHT structure was the greatest contribution of TAFU. Had it not been for an informed and readily available VHTs, my son would have died. When the VHTs started visiting me and advised me on adherence, and time to take medicine, my child came back to life. (Caregiver, Mubende District).**

## CoRP with mothers at a Health Centre



**'...we did not know that these children are out there... but through community mobilisation and education on care and services for children living with HIV, we have started seeing the numbers increase..'**

## Conclusions/next steps:

**"All our HIV exposed babies are HIV negative. This is because the VHTs and health workers support mothers to attend ANC, adhere to ARVs and give birth at the health facility." (Healthcare worker, Soroti District).**

Strengthening community systems is feasible and critical in attaining an AIDS free generation.

The TAFU program enhanced the capacity of CoRPs and linked them to health facilities for support and collaboration.

TAFU program interventions complemented paediatric HIV services by the Ministry of Health and partners in Uganda and contributed to increased enrolment and retention in HIV care for women and children in target districts.

Investing in community structures should be prioritized and implemented on scale to make an Aids Free generation and elimination of mother to child transmission of HIV a reality in Uganda and beyond.

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