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USAID ASSIST has successfully coordinated the First Tanzania National Forum on Improving Pediatric and Youth AIDS Services



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In an attempt to raise the tempo and quality of efforts directed towards accelerating access to Antiretroviral Therapy (ART) to children, ASSIST Tanzania, along with the Ministry of Health and Social Welfare (MOHSW), PEPFAR, and implementing partners (IPs), organized the First National Forum on Improving Pediatric and Youth AIDS Services, a two-day conference that brought together about 260 participants from all walks of life to share experience and promising interventions in ensuring that children and youth receive quality ART care. The event was graced by high levels officials from MOHSW, USAID (Tanzania and Washington)r, guests from Uganda, USG HIV/AIDS IPs, MOHSW staff from all levels, community leaders, patients and representatives of children and youth.



[2]

The Director for Preventive Services at the MOHSW, Dr. Neema Rusibamayla, giving opening remarks at the First National Forum on Improving Pediatric and Youth AIDS Services in Dar es Salaam, Tanzania. Photo: Delphina Ntangeki, URC.

'Change' was the buzz word in this meeting and indeed there was 'change' even in the design and facilitation of the conference. Patients, HIV/AIDS clients, child minders and youth gave presentations on improving access to ART through personal testimonies on how they maximize access, retention and adherence to ART using social media, drama and music groups to communicate promising interventions and messages to various audiences. There were more than 30 papers and posters, with three from Uganda, and an address delivered by USAID Tanzania.

Despite efforts made by the Government of Tanzania and PEPFAR in ensuring wellbeing of children at risk of or infected with HIV, the levels of access to ART to children remain low compared to adults. By December 2014, it was estimated that about 91,162 children (0-14yrs) would need ART but only 41,882 were reported to be on ART, coverage of 46%. In contrast, among the estimated 818,072 adults (15yrs+) in Tanzania in need of ART, about 598,202 were on it, coverage of 74%.

Responding to the challenge, the MOHSW is using different strategies to improve pediatric HIV services in the country, with quality improvement being one of the strategies. During the conference, the MOHSW and PEPFAR mapped out promising approaches and raised advocacy on the role of improvement in achieving the global goal of [90, 90, 90](#) [3]: 90% of children with HIV are diagnosed, 90% of them are put on ART; and 90% are well and retained on ART. It is envisaged that such efforts will also double the number of children on ART by 2016.

ASSIST Tanzania, in collaboration with other national IPs, coordinated the forum. ASSIST Deputy Director Dr. Victor Boguslavsky and representatives from ASSIST Uganda as well as SUSTAIN Uganda participated. The forum was also graced by Ms. Janean Davis from the HIV/AIDS Team at USAID Tanzania, who made opening remarks, and Ms. Lola Walker, an observer from USAID Washington.

The main theme of the forum was “Applying Quality Improvement Approaches to Address Gaps in Pediatric HIV and AIDS Service along the Continuum of Care.” The forum had other three sub themes as follows: 1) Increasing Access to HIV Services for Pediatric Clients, 2) Care and Treatment Services, and 3) Optimizing Retention of Pediatric Clients Enrolled to HIV Care and Treatment Services.

The opening remarks by the Director for Preventive Services at the MOHSW, Dr. Neema Rusibamayla, highlighted the main goal of the forum which was to discuss how to improve services, care and treatment of children with HIV and AIDS to reach the 90, 90, 90 target through early diagnosis of HIV infection, early initiation of care and treatment services, and optimizing strategies to retain them in care and treatment. “... In order to achieve this, we must also improve services among exposed children through Option B+ ... and discuss what could be done to improve pediatric services as a whole,” she said.

ASSIST Tanzania Chief of Party, Dr. Davis Rumisha, presented a key note address on the main theme. In the address, “Applying Improvement Science to Bridge the ART Access Gap in Children,” he presented improvement approaches as a way to redress challenges in pediatric HIV/AIDS care and the importance of ‘change’ in order to improve was emphasized. “If you continue to do the same things we are doing, we should expect to get the same results we are witnessing today. We must change,” Dr. Rumisha said. He further highlighted how application of quality improvement techniques can bring changes, showing examples of results from different regions implementing pediatric HIV services supported by ASSIST.



[4]

Ms. Janean Davis from the HIV/AIDS Team at the USAID (Tanzania) giving remarks at the opening of the forum. Photo: Delphina Ntangeki.

He added that quality improvement is system- and teamwork-based: in order to succeed there must be active and visible executive sponsorship; structured improvement management approach; dedicated resources and funding for improvement; frequent and open communication about improvement efforts and results. He also pointed out the need for frontline health care workers' engagement and participation; engagement and integration of improvement with core business management as well as engagement with support from middle level management.

The Program Officer for Pediatric HIV at the National AIDS Control program, Dr. Anath Rwebembara, during her key note speech on Sub theme 2, stressed the country's ambition to achieve [3 zero](#) [5],

90, 90, 90, acceleration of children on treatment (double the number by 2016), and quality improvement targets. "... The national average of children under 15 years of age receiving ART has remained at less than 26% of the national target... Whatever we do and what we are planning to do, we must ensure we contribute to the objective of the strategic plan. We have to make sure that by 2017, 90% of children are reached by ART care," she said.

Regional and Council Health Management Teams as well as health care providers with support from ASSIST made the following presentations:

Oral Presentations

- "Achieving service delivery standards for children at RCH through use of QI principles: lessons learned from Lugarawa Mission Hospital."
- "Improving integration PITC implementation for children less than 15 years: experiences from Tabora region."
- "Provider Initiated Testing and Counseling for children under 15 years at outpatient setting: experience from lower level facility."
- "The role of peer support groups (mother to mother pediatric and adolescent clubs, etc) on increasing retention to HIV care: Experience from Kilwa District."
- "Improving of PITC Uptake among Children below 15years, what can be done? - A Case from Shinyanga Regional and Referral Hospital."

Poster Presentations

- "Provider Initiated Testing and Counseling for Children under 15 years at Inpatient Ward: Experiences from Makambako Hospital from Njombe."
- "Improving Access to HIV early Infant Diagnosis (HEID) through team Work in the facility."
- "Increasing ART Uptake among under 15 years "What can be done: Bulongwa Mission Hospital Njombe."
- "Engagement of Improvement team in reducing attrition among HIV Infected Children under 15 years Enrolled into ART Services: What can We Learn from Lugarawa Mission Hospital?"
- "Improving HIV Testing for admitted Children through Use of Quality Improvement methodologies: Lessons from Ilembula Mission Hospital."
- "Applying a Simple Analytical Excel Tool for Monitoring and Evaluation of Facility, District and Regional Performance on Key Pediatric HIV and AIDS Services."
- "Improving provision of Timely DBS results to Caregivers of HIV Exposed Children, Experiences from Two health facilities in Njombe Region."

ASSIST Uganda made the following presentations:

Oral

- "Improving ART Access for HIV Positive Children under 15 Years at Mitooma Health Centre IV, South Western Uganda."

Poster

- "Improving Outcomes of Children with HIV: Experiences from Uganda"

[Uganda SUSTAIN project](#) [6] also made an oral presentation on "Increasing retention of HIV exposed clients enrolled in EMTCT program through mother-baby care point at regional referral hospitals in Uganda."



[7]

Officials from MOHSW, USAID and IPs pose for a picture after inauguration of the First National Forum on Improving Pediatric and Youth AIDS Services in Dar es Salaam, Tanzania. Photo: Delphina Ntangeki

We thought the most interesting part of the forum were the testimonies of people living with HIV who were invited to participate at the forum to share their experience. They spoke about what it feels like for them as people living with HIV and how the services provided at health facilities impact their lives. The testimonies made health care providers and other participants at the forum recognize how important their roles are in saving lives of children after one couple and a mother testified how they managed to work on the advice the health care workers provided that made them to give birth to HIV-negative children. The two children they brought to the forum were both confirmed HIV-negative in June 2015. Participants were also enthused by the testimonies of two youths (a boy and a girl) who were born HIV-positive but who are still alive as a result of good services they receive from health care providers.

This two-day forum was considered as a learning platform on how best to improve pediatric HIV services. We believe everyone who participated was able to share something and to learn something new. In particular, the voice of the patient as a partner in improving the quality of ART services was highlighted and appreciated. The second National Forum on Improving Pediatric and Youth AIDS Services is planned to take place in December 2015 as a follow-up to this forum.

Topic(s): [HIV and AIDS](#) [8]

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