

Targeted and enhanced pediatric HIV Case identification in Mbeya Region, SHL, Tanzania

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BACKGROUND / INTRODUCTION

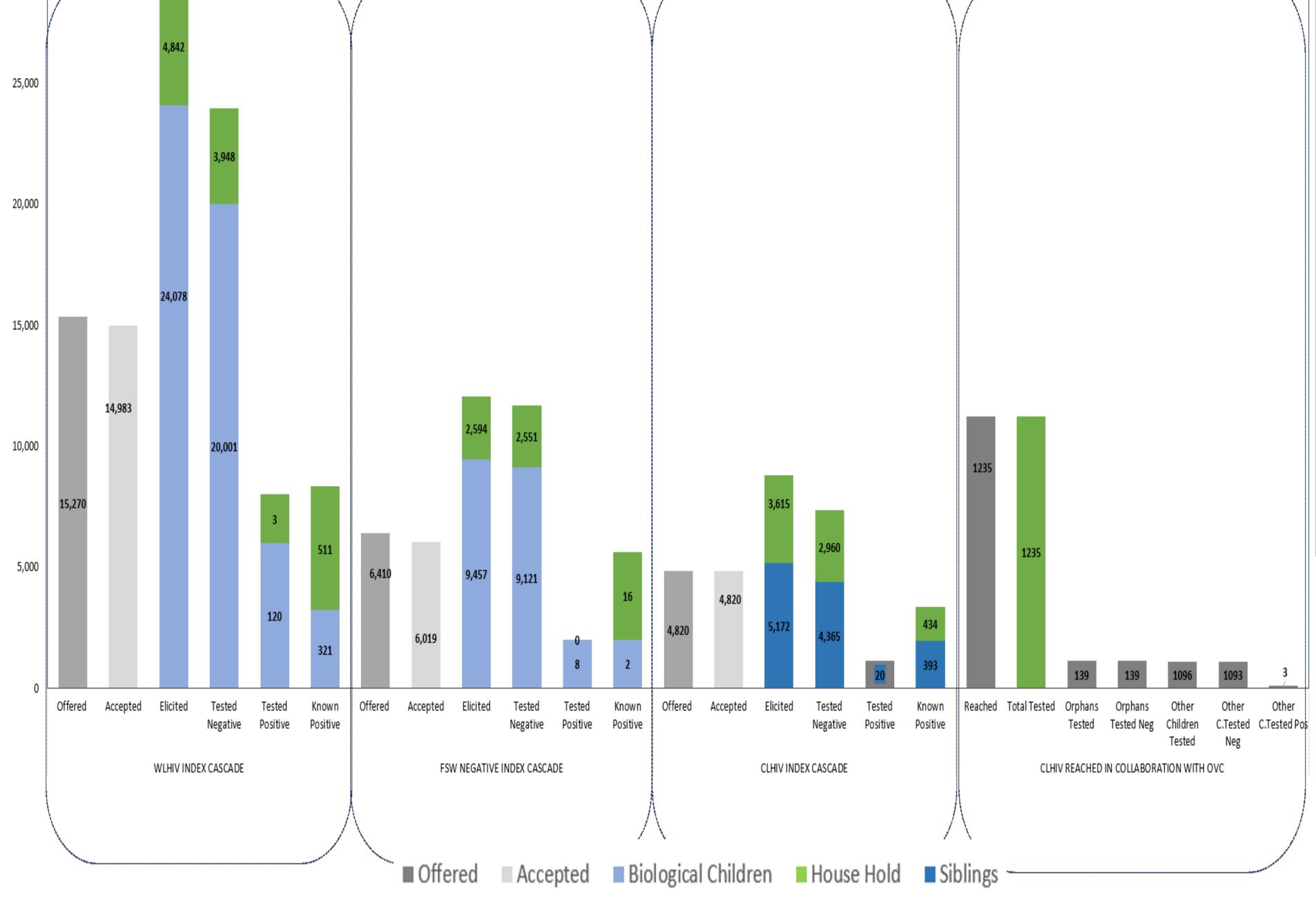
- Pediatric HIV remains a significant public health concern, with a persistent gap in case identification.
- Despite advancements in PMTCT, a substantial number of children living with HIV remain undiagnosed.
- To address this, Mbeya region implemented a targeted and enhanced pediatric testing strategy from October 2023 to September 2024.
- This approach included testing children in households of women living with HIV (WLHIV), testing children of women at high risk, social network testing for adolescents, and collaborative testing efforts with OVC and community civil society partners.

RESULTS

Table 1 shows that between October 2023 and September 2024, a total of 44,169 individuals under the age of 19 were tested through various modalities in the Mbeya Region, resulting in 252 positive cases.

Modality			Community Mobile		Facility SNS	ANC 1			Regional Summary
Total	21058	13028	8195	1566	147	78	64	33	44169
Tested									
Tested	164	77	5	5	1	0	0	0	252
Positive									

Graph 01 illustrates the outcomes of the four approaches prioritized in targeted and enhanced pediatric identification from October 2023 to September 2024 in Mbeya Region



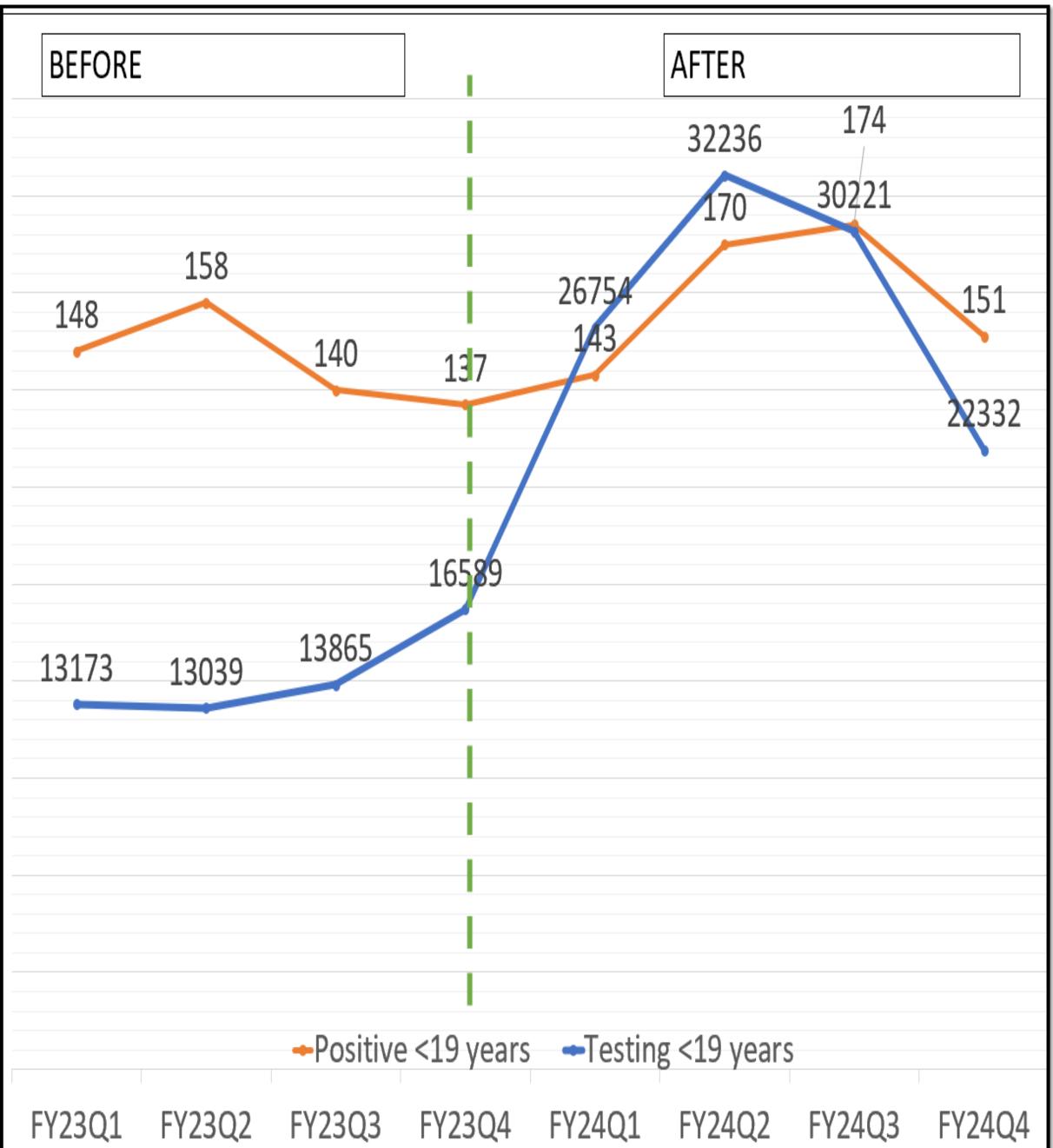
METHODS

A multi-pronged approach was employed to identify children living with HIV. Below are the prioritized strategies:

- 1. Index testing with addition of household members:
 - Women living with HIV
 - Children living with HIV
- 2. Testing of children of women at high risk
- 3. Social network testing:
 - Testing for networks of adolescents at high risk
- 4. Other testing services:
 - Under-five children testing in inpatient departments (IPD), tuberculosis (TB), and reproductive and child health (RCH)
 - Optimized provider-initiated testing and counseling (PITC)

Real-time testing data was collected from unified community systems and updated monthly in the IMPACT system.

> Graph 02 shows the testing and positive trends before and after implementation of targeted and enhanced pediatric identification in Mbeya Region





Nurse counselor providing counseling services to a mother regarding

testing for her children.

CONCLUSIONS

Identifying pediatric HIV cases is crucial for closing the treatment gap and reach sustainability. Mbeya region, index testing has proven effective in identifying cases and should be expanded to reach more children with unknown HIV status. Collaborating with OVC and community is key to increasing household coverage and addressing reaching gap. By scaling up these strategies, we can reduce pediatric treatment gap.





