

BACKGROUND

In 2014, estimated 200,400 adults and 35,260 children were living with HIV in Central/Eastern Kenya. Adult HIV prevalence was at 3.5% while children HIV prevalence was 0.6%.

There were 126,076 households caring for estimated 500,000 Orphans and Vulnerable Children (OVC) in Central/ Eastern region. Amref Health Africa in Kenya through USAID PEPFAR funded APHIAplus KAMILI project, supports 140,000 (28%) OVC.

The project initiated community partnerships in HIV Testing Services (HTS) to increase the number of OVC tested for HIV and linked to care which is a contribution to towards UNAIDS 90-90-90 target by identifying HIV+ OVC and providing ART to achieve viral suppression.

Linkages and referrals to OVC HTS were strengthened. Community groups of PLHIV, caregivers, child-to-child mentorship and Quality Improvement Teams (QITs) were mobilized and empowered to promote HTS uptake and retention on HIV care and treatment for HIV+ OVC.

OBJECTIVE

To assess changes in proportion of OVC tested and HIV+ cases through targeted HTS.

METHODS

- A retrospective study was conducted between February 2014 and June 2015
- Data in the OVC HIV Care registers at 34 Local Implementing Partners' databases was collected, analysed and compared
- Data on OVC tested with known status, not tested and HIV+ was collected
- Data was analysed using SPSS for descriptive information.

RESULTS

- The total number of OVC reached with HTS increased from 73% (102,200) to 81% (113,400).
- OVC who tested HIV+ increased by 21.5 % from 5791 to 7036.
- The proportion of HIV+ OVC therefore increased from 4.1% to 5.0% of the total 140,000.
- The regional proportion of HIV+ OVC was at 0.6%, while the proportion among the tested OVC was 5.0% at the end of study period.

This suggests a targeted HTS initiative that yielded an increase in the proportion of HIV+ OVC above the average rate.

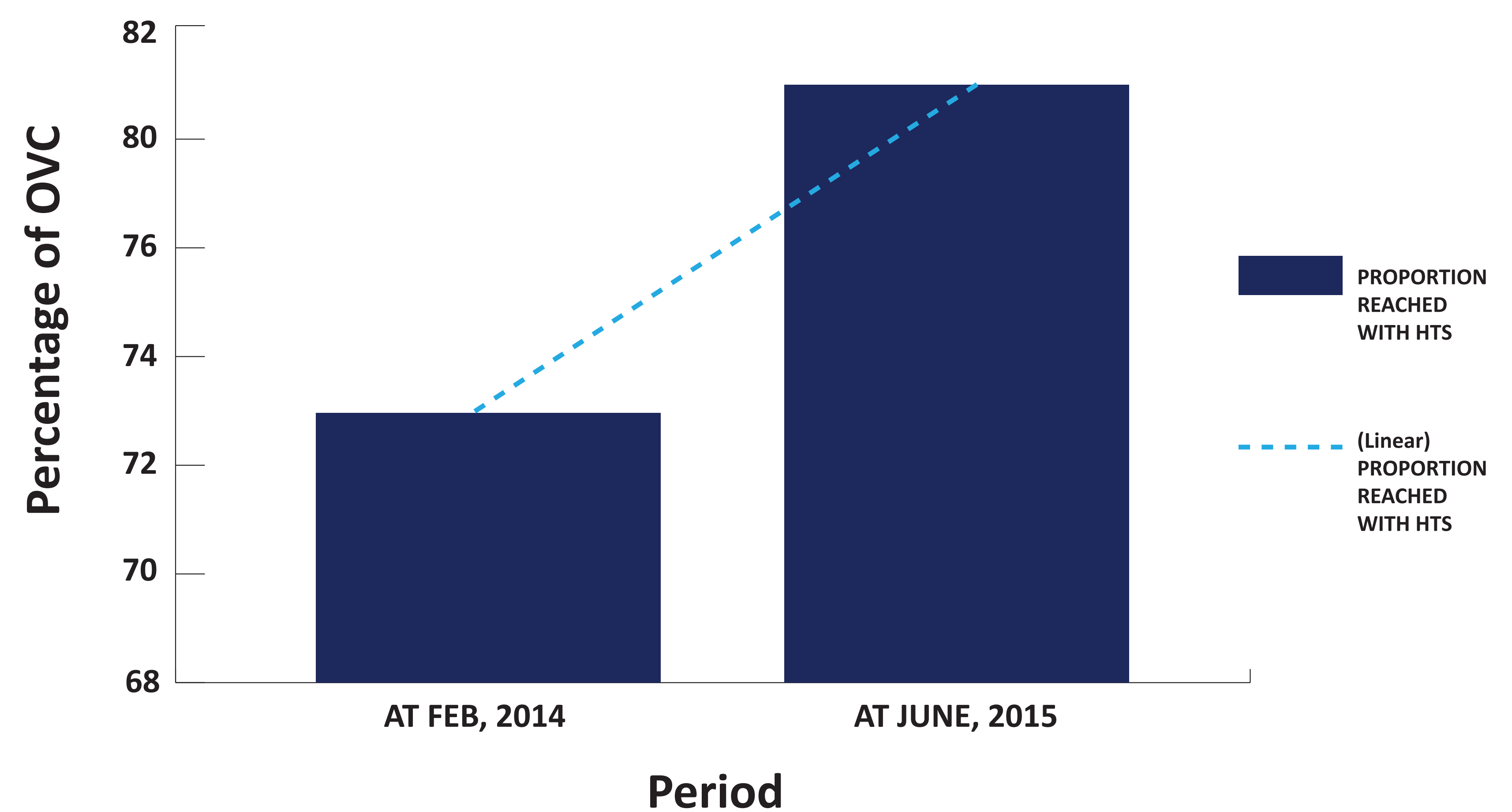


Fig 1: Proportion (by percent) of OVC reached with HIV Testing Services February 2014 to June 2015

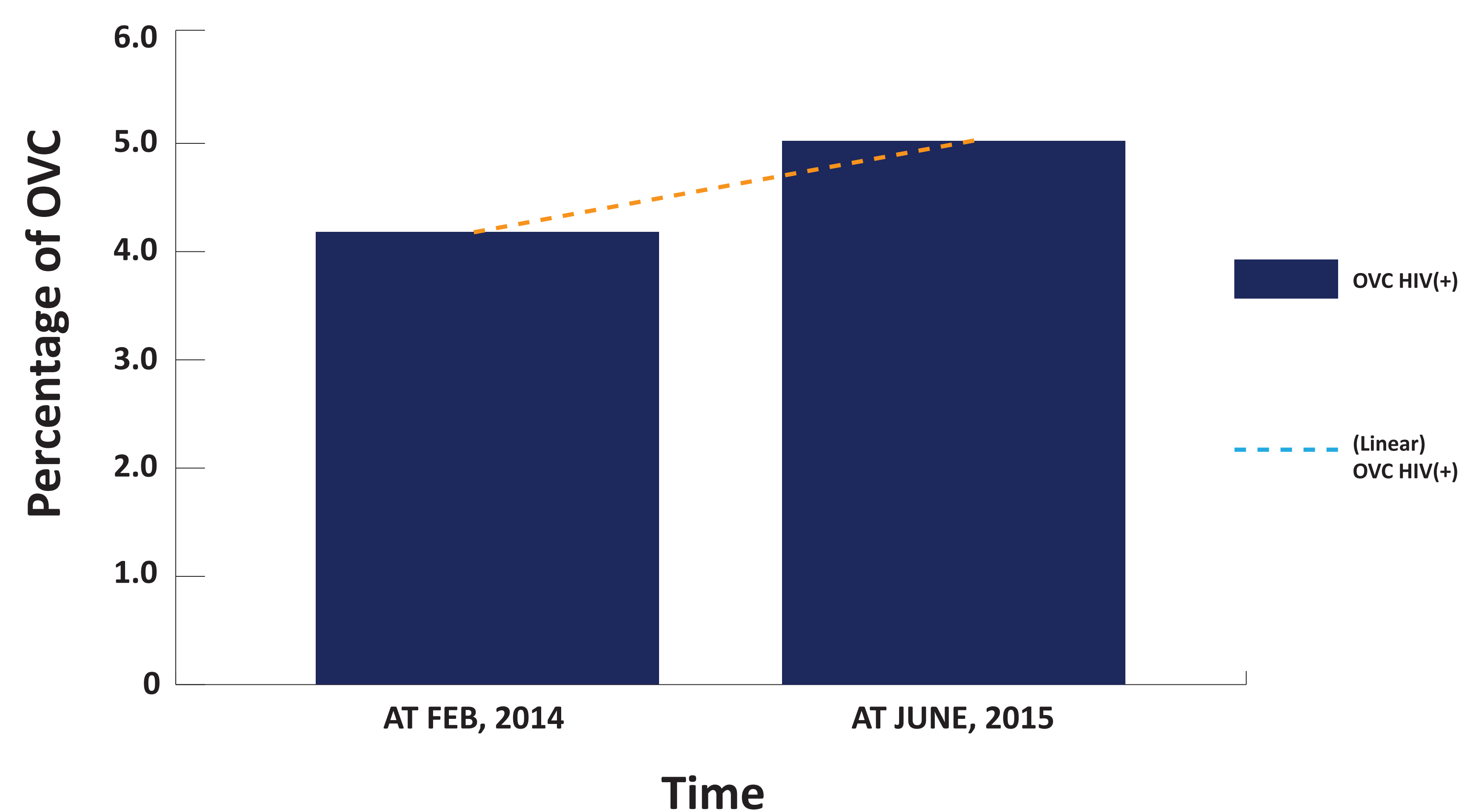


Fig 2: Proportion of HIV+ OVC

CONCLUSION

- Targeted HTS for OVC within community partnerships and structures increased the number of OVC with known status.
- The high increase in proportion of HIV+ OVC suggests targeted HTS initiative.
- Partners need to adopt, prioritize and promote this approach to strengthen the response to HIV care and treatment.

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