

# 'The South to South Partnership for Comprehensive Pediatric HIV Care and Treatment Initiative' (S2S): Increasing Capacity In Southern Africa by Transforming Training into Performance and Service Delivery

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## BACKGROUND

- Due to the complexity of treating HIV-infected children and lack of appropriately-trained health workers, it is estimated that only 10% of children requiring antiretroviral therapy (ART) are on treatment
- To rapidly develop pediatric HIV care and ART capacity in Africa using a family focused model of care, the International Center for AIDS Care and Treatment Programs (ICAP) at Columbia University, with United States Agency for International Development (USAID) support, partnered with Tygerberg Children's Hospital, University of Stellenbosch, South Africa, to establish a unique South to South (S2S) Initiative
- An experienced African pediatric facility would build indigenous regional capacity and serve as a training center for multi-disciplinary teams from other African countries

## OBJECTIVES

- To train healthcare professionals in all aspects of pediatric HIV care and treatment using a comprehensive family focused model of care
- To develop the knowledge and practical skills necessary for implementing comprehensive pediatric HIV/AIDS services in country specific settings

## METHODOLOGY AND CONTENT

- The S2S program implements 16 two-week trainings per year for teams of 10 healthcare workers per training
- Each course is complemented by a pre- and post- training phase

**Pre-Training**

- Pre-training efforts elucidate information necessary to customize training to meet the skills-building needs of the country trainee team
- The S2S team and the visiting team exchange technical, programmatic and administrative information to:
  - outline the administrative process, financial obligations and timeline for the completion of all of the pre-training components
  - facilitate the process of selecting a multidisciplinary team involved in pediatric HIV/AIDS care services
  - provide S2S team with information on visiting team's HIV/AIDS programs and country guidelines via programmatic questionnaires
  - communicate S2S course format and content (goals and objectives, agenda)

**Two Week Training Activities**

- Participants receive comprehensive exposure to pediatric HIV/AIDS care and treatment services and issues through a variety of training platforms
- Clinical activities are supported with a targeted didactic program that emphasized case management and service implementation
- The course builds on participant's experience and:
  - enhances participant's paediatric HIV/AIDS practice and existing knowledge base
  - demonstrates optimal clinical approaches to care such as demonstrating the strengths of multidisciplinary team
  - strengthens pediatric HIV/AIDS program implementation activities
  - fosters an opportunity to share experiences, troubleshoot and learn clinical care approaches from and with experienced and seasoned pediatric care providers

**Clinical Activities**

- The healthcare teams rotate through the Tygerberg HIV Family Clinic where they are precepted one-on-one by clinical mentors across and within cadre
- Participants receive hands-on experience in:
  - the identification and management of clinical manifestations of HIV infected children
  - the initiation and management of ARV treatment in children
  - supportive patient/caregiver interaction, education, and counseling
  - comprehensive pediatric care
  - clinic management, patient flow, and management issues
- Observe multidisciplinary team meetings, and
- Participate in pediatric consultant-led ward rounds and clinical case discussions



**Didactic Program**

- Key aspects of HIV care and treatment of infants, children and adolescents are covered using:
  - formal lectures
  - roundtable discussions and workshops
  - case-based learning
  - question & answer sessions
  - participant designed case presentations
  - literature and suggested readings



•A diverse group of seasoned facilitators, trainers and faculty participate in each session to ensure that participants have access to the leaders in pediatric HIV/AIDS care and treatment services

**Summary of Course Content Covered**

- Overview of Pediatric HIV
- PMTCT
- Care of the Exposed Infant
- Early Infant Diagnosis
- Management of the HIV-Infected Child
- Pediatric ART
- ART Follow-Up: Toxicities and Second Line Regimens
- Pediatric Tuberculosis
- Opportunistic Infections
- Neuro-developmental assessment
- Growth and Nutrition
- Adherence
- Psychosocial Support & Counseling
- Pediatric Disclosure
- Caring for Adolescents
- Child sexual abuse
- Infection Control
- The Chronic Care Model
- The Multidisciplinary Team
- Program Implementation



**Post-Training**

- Post-training assessments serve to capture participant progress and to improve S2S program elements.
- Via post-training questionnaires at 3, 6 and 12 month intervals, S2S evaluates
  - how the training has changed the way comprehensive pediatric HIV care is delivered at site level
  - individual participants' attitude, knowledge and comfort level with specified skills and activities

## OUTCOMES AND CHALLENGES

- Since September 2006, S2S has trained participants from Ethiopia, Mozambique, Nigeria, South Africa, Zambia, Rwanda, Swaziland, Lesotho and Tanzania

Program Targets from September 2006 – May 2007	
Courses held	10
Teams trained	10
Total persons trained	96

**Some of the Participant's Feedback**

*'We have learned a lot from you, new ideas, seen cases practically. We have improved in knowledge to be able to put things in practice in our different sites.'*

*'Thank you for the good quality of facilitators/ lecturers used, most of whom are professors and senior staff with wide experience.'*

*'The course was very good and educative. It covered a number of things one easily take for granted. I found it difficult to rate anything less than very good.'*

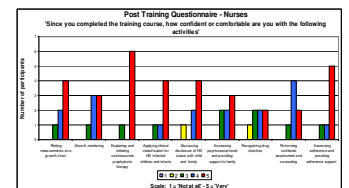
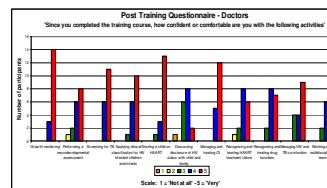
*'The training was very excellent and useful, especially to developing countries.'*

*'Tygerberg Children's Hospital appears to be staffed by very experienced clinicians and researchers who are contributing their knowledge to Africa and the whole world. Thank you for your state of the art teaching techniques.'*

*'It is a good course where knowledge is shared. We learnt more and got reminded of a lot of things. The course has shown that it is possible to do good things for our patients, even in a resource limited setting.'*

**Preliminary Post-Training Follow up Results**

- Since the start of the program, 3-month follow up questionnaires have been received from Ethiopia, Mozambique, South Africa and Nigeria
- Evidence post-training indicates participants have immediately applied skills acquired resulting in increased pediatric enrollment in care and treatment
- Following is a summary of 24 providers' confidence level with pediatric services 3 months post training:



**Additional Pediatric Support and Capacity Building Needs Identified**

- Specific areas identified by participants requiring additional focus and detail in the S2S training were disclosure, second line ART treatment and toxicities, program implementation and early infant diagnosis
- The need for targeted and/or separate nurse training
- Most S2S participants were or became involved in pediatric HIV/AIDS training and mentoring on return to their sites and have expressed the need for a refresher course as well as training in clinical mentorship

## KEY RECOMMENDATIONS

- S2S collaborative models are ideal mechanisms to facilitate capacity building by African countries
- The S2S partnership model demonstrates a way of sharing expertise and guidance on how to strengthen country team's approach to pediatric HIV/AIDS care and treatment through the use of the multidisciplinary teams and family focused care
- S2S demonstrates that simultaneous consideration to content and training approaches ensures key programmatic elements are highlighted in training and transferred to participants for practice



## ACKNOWLEDGEMENTS

