

COMMUNITY & FACILITY PMTCT LINKAGES ICAP- NG EXPERIENCE

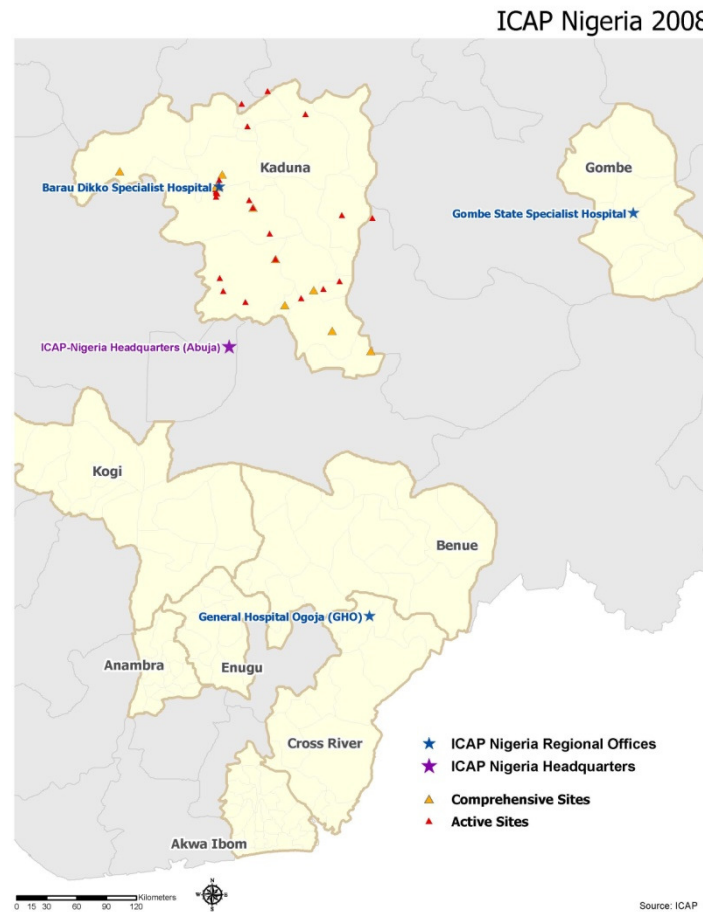


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ICAP Nigeria Map



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CHALLENGES

- High rate of home deliveries 2/3rd
- Non disclosure of status and poor partners involvement affecting infant feeding option.
- Unavailability of pre-packed Sd-NVP syrup for exposed babies deliver at home
- National policy on use of TBAs not well define & no national training curriculum
- Continuous demand for incentives by facility staffs.
- High rate of loss to follow up
- Remote hard to reach with difficult transport logistics



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WHAT WE ARE DOING 1

- Working in 6 states of the federation of Nigeria
- No of ICAP supported facilities providing minimum PMTCT package as at Jan'08 is 86
- Community Outreach and escort services for PMTCT intervention has commenced in Ogoja region,
- In February 08 out reach was carried out in three communities namely: Ayieko (Yala LGA), Alege/ubang (Obudu LGA) and Nfuma South Ukele (Yala LGA). A total of 47 pregnant women were tested and 1 positive was escorted to PMTCT site for intervention.



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WHAT WE ARE DOING 2

1. Mobilizing of TBAs in the community to help in identifying and linking mother and baby pair to the care and treatment facilities (Ogoja and Kaduna regions)
2. Commenced collaboration with Tulsi Chanrai foundation (CBO) in Kaduna state for community based HCT and PMTCT services.
3. Default tracking of Positive pregnant women through the use of peer educators and ICAP staffs mostly at the comprehensive sites.



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Next Steps

- Increase the number of CBOs we are partnering with
- Developing minimum package of care for HIV exposed baby deliver at home
- Finalizing the TBA training curriculum
- Intensify community out reach HCT and PMTCT services.



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THANK

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