



SUCCESS STORY

Scaling up PMTCT Services in Resource-Challenged Areas



Project AXxes PMTCT Coordinator Dr Marie Claude Mbuyi (right) and CRS HIV Program Manager, Dr Nicole Shabani (left) discuss modalities of triple Rx PMTCT with technical advisors at a training conference in Jos, Nigeria (Sept 08)

During project years one and two, Project AXxes has initiated PMTCT programs in almost 120 sites across DR Congo. At each health center women seen in antenatal clinics are screened for HIV and, if positive, offered potentially life-saving mono-therapy treatment (NVP) for their babies.

This has been a herculean task in a country where women are able to contribute less than 0.50 USD for prenatal care. According to governmental Ministry of Health standards routine prenatal modalities should include provision of iron and folate, de-worming, malaria prophylaxis (TPI), supply of LLTNs, as well as mono-therapy ARV for PMTCT. Now that standard is being raised to include triple-Rx PMTCT!

Thanks to support from USAID, project AXxes zones have and will be able to maintain all MOH standards and recommendations for antenatal care while also keeping access fees low and utilization rates high (antenatal care access rates in supported zones this year averaged over 94%)

In what will be phased-in activities, project AXxes is transitioning PMTCT sites from single to triple regimen ARV therapy. AXxes partner, Catholic Relief Services recently brought in a consultant to look at the feasibility of transitioning CRS service sites. In September 2008, with technical assistance from CRS, Project AXxes consortium members traveled to Nigeria for practical training in PMTCT comprehensive approach and triple Rx.

As this report is being written, as many as 45 sites in South Kivu province are being transitioned to triple Rx. AXxes partner ECC has followed the lead and has hired technical coordinators in larger urban health zones, e.g., Lodja, Kananga, and Dibindi, who will undergo intensive PMTCT triple Rx training and in turn transition an additional 20 sites in the Kasai Province in early 2009.

Commodities are being ordered, persons trained, protocols printed and eventually more lives saved by the latest of international protocols... even in resource poor areas of the Democratic Republic of Congo... thanks to support from the American People and USAID!