

REACHING BEYOND THE CLINIC: Improving and Sustaining Viral Load Suppression for Children through Community Case Management in Uganda

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Background

The 68% viral load suppression (VLS) rate for children and adolescents (C/ALHIV) lags behind adults (92%) (MOH 2021).

Poor pediatric VLS is due to a complex set of clinical, structural and interpersonal dynamics that *extend beyond the clinic* – and require close coordination with clinic partners and interventions at the community level.



As the OVC lead of the USAID/Integrated Child and Youth Development Activity (ICYD), [the Bantwana Initiative of World Education](#) uses a structured community-based case management approach to follow up unsuppressed C/ALHIV at home. The ICYD Activity is primed by the Education Development Center, EDC.

Intensified community case management approaches that go *beyond the clinic and bio-medical interventions* -- to address socio-economic, child protection, stigma, and other interpersonal issues that impede viral load suppression -- are essential for **improving and sustaining HIV treatment outcomes for C/ALHIV**.

Methods

This cohort study involved C/ALHIV enrolled on the OVC program across 5 districts. Despite optimized treatment, 230 C/ALHIV were unsuppressed.

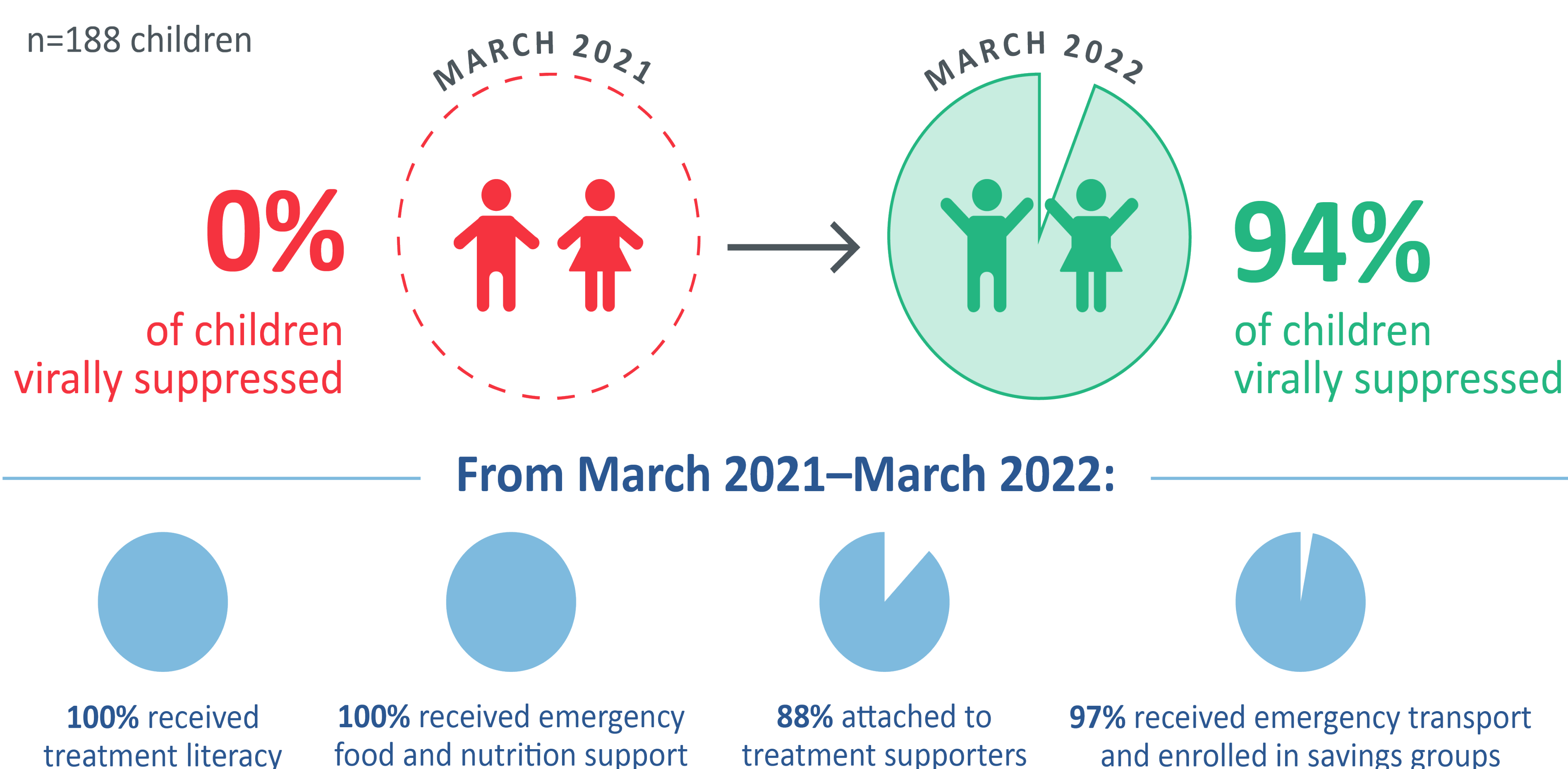
Root cause analyses conducted by clinic and community teams during home visits found severe food insecurity, poor understanding of treatment adherence, and inconsistent support from caregivers.

COMMUNITY –BASED MONITORING & SUPPORT 	CLINIC –BASED SUPPORT 
<ul style="list-style-type: none"> • Mobilized temporary food relief • Delivered basic nutrition counseling • Attached children to treatment supporters • Delivered coping support • Monitored adherence during home visits • Followed up VL test results 	<ul style="list-style-type: none"> • Reviewed treatment optimization • Delivered treatment literacy • Conducted viral load tests • Delivered viral load test results



An ICYD case manager explains proper treatment adherence to a child and his caregiver during a home visit

Results



Best Practices

- ✓ **Continuous upskilling of community cadres in HIV service delivery and treatment monitoring** through targeted supervision and simple job aids is essential for quality improvement
- ✓ **Regular data sharing** helps teams to differentiate and prioritize follow up of non-suppressing C/ALHIV
- ✓ **Joint case management home visits** by clinic and community teams leverage resources, and promote cross-skilling and mutual appreciation

This poster is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of the Bantwana Initiative of World Education, Inc., a USAID ICYD Activity subcontractor, and do not necessarily reflect the views of USAID or the United States Government