

Evaluating a Multidisciplinary Integrated Management Team Intervention to Improve Maternal and Child Outcomes and HIV Service Uptake and Retention in Lesotho

The success of prevention of mother-to-child transmission (PMTCT) programs depends on HIV-positive women's ability and willingness to initiate and/or continue lifelong antiretroviral therapy (ART), and HIV-negative women's uptake of preventive behaviors. Pregnant and postpartum HIV-positive women face a particularly complex set of barriers to PMTCT uptake at the policy, health facility, community, and individual levels. They are vulnerable to poor retention in care and adherence to treatment, especially in the first three months after ART initiation and the postpartum period. In addition, counseling and support for primary prevention among HIV-negative pregnant women is almost non-existent in most PMTCT programs.

Project SOAR is implementing and evaluating IMPROVE—a multidisciplinary integrated



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Multidisciplinary team members with their IMPROVE job aids.

Research Partners: Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Lesotho Ministry of Health, Avenir Health, mothers2mothers Lesotho, Lesotho Network of AIDS Service Organizations, National University of Lesotho

Location: Maseru District, Lesotho

Study Duration: 2014–2019

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management team intervention to increase maternal and child health (MCH) and HIV service uptake and retention.

The intervention builds on existing MCH/ PMTCT staffing and infrastructure to enhance coordination between the facility and the community, optimize service quality and efficiency, and maximize program effectiveness.

This implementation science study is particularly important because it will provide critical data to national and global policymakers about the model's feasibility, acceptability, and effectiveness in high HIV-burdened countries in the setting of “treat all.”

OUR RESEARCH

The study is a cluster randomized design with 12 facilities randomized to receive the IMPROVE intervention or the national standard of care. SOAR has enrolled a cohort of HIV-positive and HIV-negative pregnant women and is prospectively following them every three months through pregnancy and until their child reaches 24 months of age. The primary objective is to evaluate the effect of the intervention on retention in HIV care, viral suppression, and adherence to ART in HIV-positive women, and HIV retesting in HIV-negative women. In addition, qualitative interviews are being conducted with study women, healthcare workers, and village health workers (VHWs) to evaluate the feasibility and acceptability of integrating this intervention into routine national systems of care. Finally, a sub-study is determining the cost effectiveness of the IMPROVE intervention in achieving positive health outcomes among pregnant/postpartum women and their infants.

RESEARCH UTILIZATION

SOAR is actively engaging a variety of stakeholders in this study from protocol development through dissemination of results and planning for their utilization. Three representatives from the Lesotho Ministry of Health (MOH) are co-investigators on this study, providing an ongoing link between the study team and individuals in the MOH who are responsible for MCH, PMTCT, laboratory, and community (including VHW) program implementation.

In addition to the MOH, key stakeholders include: district health management teams, MCH

The IMPROVE Model

In the IMPROVE intervention, multidisciplinary integrated management teams consisting of MCH staff, counselors, and village health workers: (1) coordinate patient-focused and outcome-oriented PMTCT and MCH services; (2) receive enhanced counseling and skills-building training and job aids to improve the quality and consistency of counseling provided by all IMPROVE members; and (3) provide early community-based counseling and support for HIV-positive women to minimize loss to follow-up.

healthcare workers, VHWs, people living with HIV (especially women), community members, program funders (Global Fund, PEPFAR), UN agencies, and program implementing partners. As the main PMTCT program implementing partner in Lesotho and the SOAR lead on this study, EGPAF works closely with all of these groups, thereby facilitating gathering input from and disseminating results to these stakeholders.

Findings from the study will be shared with a variety of audiences in Lesotho. On a national level, the study investigators, in collaboration with the MOH, will discuss results and their implications through venues such as the PMTCT & Pediatric HIV Care and Treatment Technical Working Group and the Lesotho Research Forum. At the district level, research findings will be shared through existing primary health care meetings where district health managers meet on a quarterly basis.