

Exploring barriers and facilitators of Pediatric HIV Services Delivered via UNICEF’s Service Delivery Framework in Mozambique, Nigeria and Uganda

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❖ Background

❖ Globally, of the estimated **1.4 million children living with HIV** (CLHIV), 86% are resident in African countries.

❖ **The Pediatric Breakthrough Partnership (PBP)** (Local agencies and Non-Governmental Organizations) was formed.



❖ The PBP implemented **UNICEF’s Service Delivery Framework (SDF)** to improve pediatric HIV Service delivery.

❖ Study objectives:

- ❖ Identify barriers and facilitators for SDF implementation.
- ❖ Inform scalability of its strategies to similar settings.

Methods

❖ **Consolidated Framework for Implementation Research (CFIR):** Outer Setting (patient needs/resources, organizational operations) and Implementation Process domains.

- 19 **Focus Group Discussions**
- 41 **Key Informant Interviews**
- 56 **In-depth Interviews**

Study Population: PBP and national, sub-national stakeholders, health-facility and community providers, Service users

- **SDF strategies focus** Locating, Linking, Treating and Retaining CLHIV.
- **Evaluation period:** January 2021-December 2023

Study sites:

Nigeria (Taraba and Rivers states)



Uganda (Mubende and Isingiro Districts)
Mozambique (Masinga and Morrumbene Districts)

Results

One hundred ninety-one participants, **102(53%) female, 89(47%) male**, were interviewed.

SDF Barriers included:

- **Few community-level health** professionals
- **Long distance** to Health facilities
- **Lengthy waiting time**
- **Food insecurity**
- **Low income** of caregivers affecting transport affordability
- **Poor HIV awareness** and knowledge among caretakers.



Facilitators:

- **One-stop** stations that reduced facility waiting time
- **Community mobile brigades** for easier access to HIV testing and treatment
- **Community Savings** and Loans Associations
- PBP **technical assistance** to local government
- PBP incorporating annual **work plans** at health facilities for timely service delivery
- **Joint planning** and collaborative approaches to avoid duplication of services and wastage of resources.

Conclusions

❖ **Individual, community, and system-wide** Outer Setting and Implementation Process barriers to pediatric HIV service delivery exist.

❖ **SDF could facilitate:**

- **Learning collaborative approaches**
- **One-stop stations**
- **Community outreaches**
- **Income-boosting innovations**



We recommend these facilitators for scaling up pediatric HIV services in similar settings.

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