



Success Story

Paying it Forward: Kenyan Nurses Train Peers to Deliver Life-Saving HIV Treatment

“This training has enabled us to bring comprehensive, quality HIV care services closer to the community. Our patients don’t have to travel long distances or wait for days to access HIV services.”

-Lynet Kosgey, nurse at Asayi Dispensary, Nyanza region



In Kenya, a nurse provides antiretrovirals to a patient at a health facility.

Before Ms. Lynet Kosgey, one of two nurses at Asayi Dispensary, a remote, ICAP-supported health facility in Nyanza region of Kenya, was able to prescribe antiretroviral therapy (ART), many HIV patients failed to start treatment. Until recently, only physicians and clinical officers could prescribe ART and due to the severe shortage of healthcare workers, many patients were often forced to travel long distances to more central ART-designated sites, or wait for a physician to visit their local clinic, which could take weeks. As a result, many patients living with HIV were not connected to treatment, and therefore were lost to care.

To address these challenges and improve patient retention in HIV care, ICAP’s Global Nurse Capacity Building Program, supported by PEPFAR through HRSA, is partnering with Kenya’s Ministry of Health (MOH) and the National AIDS and STI Control Program to build the capacity of nurses to support high-quality, comprehensive HIV care at facilities by training them to initiate ART in Kenya’s Eastern and Nyanza regions.

Prior to implementing the training, ICAP conducted a comprehensive assessment to evaluate 286 essential nursing tasks for HIV care and treatment. The assessment was grouped into 12 key task areas identified by the World Health Organization (WHO) as important to shifting HIV care and treatment from doctors and clinicians to nurses. “Our assessment showed nurses were performing a wide range of HIV tasks, but many did not feel fully competent to perform some of those tasks,” said Janel Smith, nurse training and education officer at ICAP.

Utilizing these results, ICAP and the MOH developed an HIV mentoring curriculum to equip nurse mentors with enhanced HIV clinical skills to provide supportive supervision and assistance to other nurses, ensuring comprehensive HIV care and treatment.

ICAP is also training nurses as part of task-shifting efforts. Once trained, nurses returned to ICAP-supported health facilities to further mentor nurses in HIV care and treatment using a combination of innovative online training, hands-on practice in HIV care settings, and group discussion.

“Since being trained, I have trained and mentored five nurses who have initiated 30 patients on ART,” said Ann Leich, a nurse from Katalo Manyatta Health Centre, an ICAP-supported facility in Nyanza region.

Nurse-initiated and managed ART is not only bridging a gap in human resources for health, but also helping decentralize services to peripheral health facilities and ensuring broader patient access to timely ART initiation. “We do not have to wait for a clinical officer to start prescribing ART for HIV-infected women at our clinic,” said Regina Musau, a nurse at River Health Centre in Eastern region. “We start them on ART immediately.”

Since June 2014, ICAP has facilitated HIV mentorship training for 87 nurses and clinical officers who then trained 155 nurses in HIV care and treatment. This staff is now initiating ART at 57 ICAP-supported health facilities in Kenya.

“This training has enabled us to bring comprehensive, quality HIV care services closer to the community,” said Kosgey. “Our patients don’t have to travel long distances to access HIV services.”

In Kenya where more than 1.5 million people are living with HIV, nurses need to be trained to manage the fullest range of acute and chronic medical conditions to meet Kenya’s HIV treatment and prevention goals and support lasting gains towards an AIDS-free generation.

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