

Module 1

Course Introduction

Infant HIV Testing
Training Curriculum for
Healthcare Providers

Session 1.1

Welcome and Introductory Activity

Session Objectives

During this session, participants will:

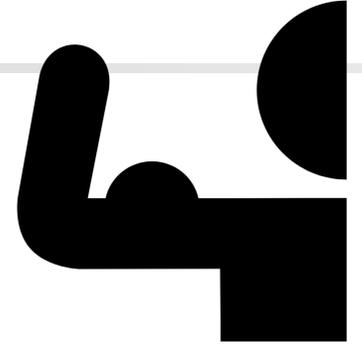
- Introduce themselves and be introduced to the trainer(s)
 - Discuss expectations for the training
-

Exercise 1

Getting to know each other: Large group discussion and individual reflection

Exercise 1, Individual Reflection

- **Strengths:** *What is 1 personal strength that helps you—or will help you—work effectively with parents and their HIV-exposed infants?*
- **Concerns:** *What concerns or worries do you have about providing care to parents and HIV-exposed infants?*
- **Expectations:** *What do you hope to learn during this training course?*



Session 1.2

Training Objectives, Agenda, and Ground Rules

Session Objectives

During this session, participants will:

- Gain an understanding of the training objectives
- Review the training agenda
- Establish training “ground rules”



Core Competencies

- See *Appendix 6A: Practicum Checklist* in Module 6 of your Participant Manuals

Agenda, 5-day Curriculum



- 3.5 days in classroom followed by a 1.5 day practicum
- Modules:
 - Module 1: Course Introduction
 - Module 2: Testing of HIV-exposed Infants
 - Module 3: Comprehensive Care for HIV-exposed Infants
 - Module 4: Pre-test Information and DBS Collection for Infant Virological Testing
 - Module 5: Post-test Counselling for Infant HIV Testing
 - Module 6: Course Summary, Practicum and Wrap Up

Exercise 2

Setting ground rules and introducing daily activities: Large group discussion

- Ground Rules
- Anonymous Question Bowl
- Morning Rounds
- How Did it Go?



Session 1.3

Training Pre-Test

Session Objective

During this session, participants will:

- Complete the training pre-test
-

Session 1.4: Paediatric HIV Overview: Global Progress and Goals

Session Objectives

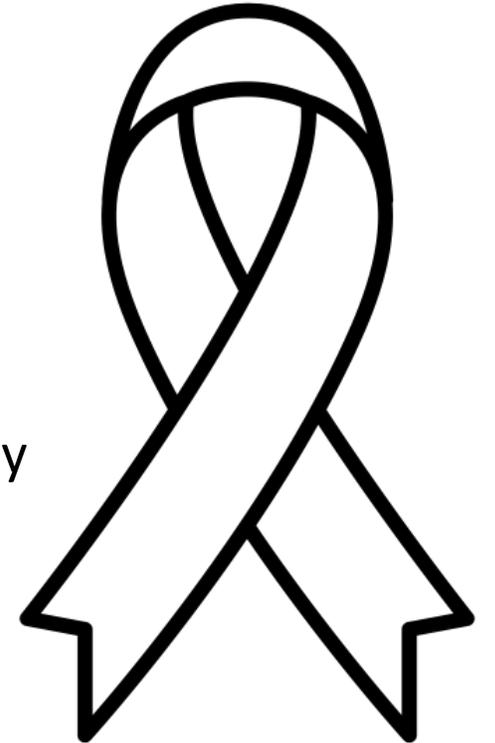
- Discuss the status of HIV infections in children
 - Discuss approaches and programmatic interventions to reduce mother-to-child HIV transmission
 - Discuss approaches and programmatic interventions to ensure that children who are HIV-infected are rapidly identified and initiated on antiretroviral therapy (ART)
-

Children and HIV: Where We Are Now

- New diagnoses in infants and children have fallen dramatically with the scale up of PMTCT services
 - However, infants and children are still becoming HIV-infected
- In 2018:
 - 160,000 children age 0–14 years (down from 423,000 in 2000) became infected with HIV
 - 1.7 million children were living with HIV
 - 100,000 children died of HIV-related causes

HIV Epidemic Today

- Since the beginning of the epidemic to the end of 2018:
 - 74.9 million people have been infected with HIV
 - 32 million people have died of HIV.
- As of the end of 2018:
 - 37.9 million adults were living with HIV
- In 2018 alone, about 770,000 people died of an AIDS-related illness*
- Sub-Saharan Africa remains most severely affected, with nearly 1 in every 25 adults (4.2%) living with HIV
- Nearly two-thirds of the people living with HIV worldwide, live in Sub-Saharan Africa**



*UNAIDS. Global HIV & AIDS statistics — 2019 fact sheet.

**WHO. Global Health Observatory Data: HIV/AIDS 2017.

Sustainable Development Goals

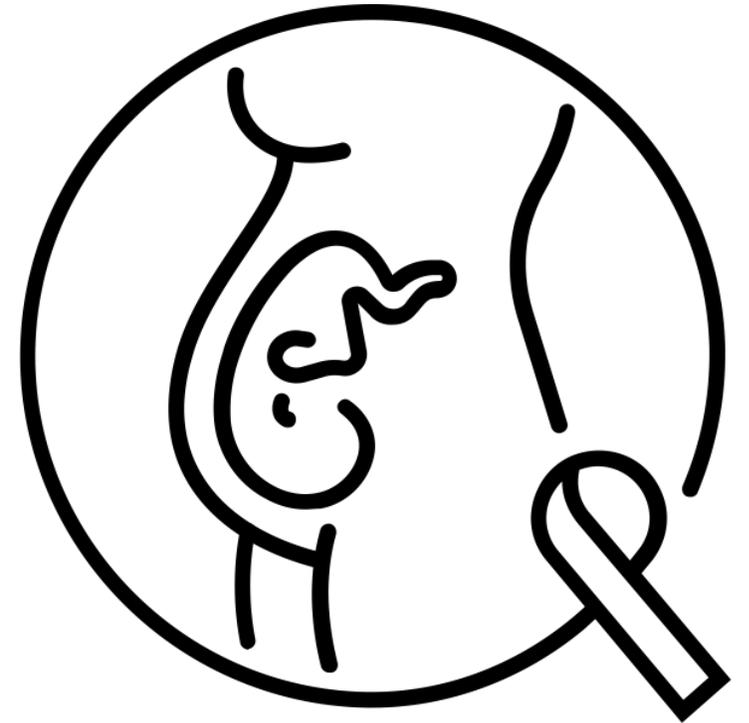
- The HIV/AIDS, TB, malaria and other related child- and adult-health goals were replaced by one overarching health goal:
 - Goal 3—Ensure healthy lives and promote wellbeing for all at all ages.

This new goal includes:

- By 2030, end the AIDS epidemic
- By 2030, ensure universal access to sexual and reproductive health-care services
- Support the research and development of vaccines and medicines
- Substantially increase health financing and the recruitment, development, training and retention of the health workforce

Global Progress in Reducing HIV Infection in Children

- MTCT is almost entirely preventable where services are accessible and utilized.
- *Since 2010 there has been a 41% decline in new HIV infections among children*
- PMTCT services have reduced MTCT rates:
 - From 30–45% in breastfeeding populations
 - To less than 2% in some countries.



Global Progress in Reducing HIV Infection in Children

- Infants who are HIV-infected are at high risk for disease progression in the first year of life.
 - Without treatment, 1/3rd of infants with HIV die before they one year of age
 - Over 50% die by 2 years
- It is critical to initiate HIV-infected infants on ART as early as possible
- The key to early access to treatment is early diagnosis, highlighting the importance of:
 - Testing HIV-exposed infants as early as possible
 - Testing HIV-exposed infants regularly — according to national algorithm — until final HIV status determination at end of breastfeeding

Areas for Improvement

- Infant HIV testing:
 - In 2018 only 54.9% of HIV-exposed infants were tested for HIV within the first 2 months of life*
 - Even fewer are retained in care and tested at 18 months of age or after the end of breastfeeding
- Paediatric HIV diagnosis and provision of ART:
 - Only 54% of the 1.7 million children living with HIV around the world received ART**

*UNICEF. UNICEF Data. Global and Regional Trends. July 2019.

**UNAIDS. Global HIV & AIDS statistics — 2019 fact sheet.



Exercise 3

Large group discussion about HIV in infants and children

- What do you think needs to be done to reduce the number of children infected with HIV?
 - What do you think needs to be done to lower the infant and child death rate from HIV?
-

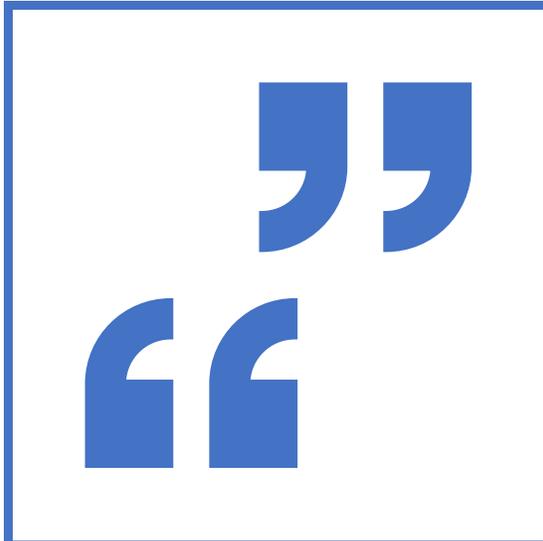
Module 1: Key Points

- This module provided an opportunity for participants to articulate their strengths, concerns about providing testing and care to HIV-exposed infants, and expectations of this training.
- Participants should now have a clear idea of what to expect from the training and hopefully are getting to know their fellow trainees.

Module 1: Key Points

- In order to meet development goals and improve the lives of children, it is critical that countries strengthen PMTCT programs, improve the coverage of infant HIV testing services, support comprehensive care for HIV-exposed infants, and ensure that infants diagnosed with HIV are provided with the HIV-related treatment that they need, including ART.

Credits



- “Strength” icon by Ben Davis from [the Noun Project](#)
- “Concern” icon by Adrien Coquet from [the Noun Project](#)
- “Agenda” icon by Mark Shorter from [the Noun Project](#)
- “Question” icon by Aneeque Ahmed from [the Noun Project](#)
- “Aids” icon by rivercon from [the Noun Project](#)
- “Pregnancy and AIDS” icon by Andrei Yushchenko from [the Noun Project](#)
- “Chart improvement” icon by Saeful Muslim from [the Noun Project](#)