The SAFE Initiative: Preventing mother-to-child HIV transmission in Haiti

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Background

HIV was first reported in Haiti in 1982. The prevalence in the general adult population was estimated to have been as high as 5% in the mid 1990s, but has declined to approximately 2% over the past 5 years. It is estimated that almost 3% of pregnant women and approximately 12,000 children under age 14 are HIV-infected.

The Haitian Ministry of Health (MoH) has prioritized the virtual elimination of mother-to-child HIV transmission and has invested heavily to promote HIV screening among pregnant women and to ensure availability of treatment and support services. There are currently 145 prevention of mother-to-child transmission (PMTCT) health care facilities throughout Haiti. During 2014, more than 75% of the estimated 300,000 pregnant women were tested for HIV.

As part of this scale-up in services, in 2012 the National Alliance of State and Territorial AIDS Directors (NASTAD) began working with the MoH and the U.S. CDC to develop, pilot and implement a system of enhanced perinatal HIV surveillance. This effort aims to improve public health disease surveillance of HIV infections among mothers and infants, and to promote linkage and adherence to HIV care, treatment and prophylaxis. The system, named “SAFE” (Surveillance Active de la Feme Enceinte Seroportées), builds upon Haiti’s existing case-based surveillance system and case management resources and was implemented nationally in 2014. SAFE is currently in use at 143 of 145 PMTCT facilities.

Methods

SAFE was designed to standardize collection of detailed, patient-level data about HIV-infected pregnant women and their infants, and to facilitate linkage to care for this vulnerable population. The Haitian MoH requires that 10 “sentinel events” be reported related to HIV infection among pregnant women for epidemic tracking and to assure patient care and follow-up (see Figure 2). These include initial diagnosis in pregnant women, entry into PMTCT-related care, receipt of treatment and prophylaxis, and testing and treatment of HIV-exposed infants.

SAFE provides a simple, easy-to-use process to record and report the above sentinel events among pregnant women, and alerts health care workers to critical follow-up needs. Once a pregnant woman is diagnosed with HIV, the following steps occur:

1. The patient is referred to the PMTCT clinic.
2. The patient receives information about the care, treatment and birth outcomes of pregnant women diagnosed with HIV. As the system matures, the detailed case surveillance data offered through SAFE will facilitate planning and evaluation of prevention, treatment, and patient outreach and support activities.
3. The patient is encouraged to return for follow-up visits.
4. During the first year of SAFE implementation, activities focused on 1) training of all PMTCT staff, 2) trouble shooting the electronic interface and 3) monitoring and evaluating the system to ensure that key data elements were reported from all sites. This has resulted in implementation of SAFE at 143 of 145 sites (99%), with data reported from all active sites.

Results

During the first year of SAFE implementation, activities focused on 1) training of all PMTCT staff, 2) trouble shooting the electronic interface and 3) monitoring and evaluating the system to ensure that key data elements were reported from all sites. This has resulted in implementation of SAFE at 143 of 145 sites (99%), with data reported from all active sites.

Of total enrollees, 92% were referred to PMTCT services were 63% were enrolled, and 62% were enrolled on HIV antiretroviral therapy. Approximately three-quarters of pregnant women reported through SAFE returned for follow-up prenatal visits, with 32% having two or more visits recorded.

Conclusions and Next Steps

Preliminary SAFE data suggest that the system is functioning throughout Haiti to report data about the care, treatment and birth outcomes of pregnant women diagnosed with HIV. As the system matures, the detailed case surveillance data offered through SAFE will be invaluable for planning and evaluation of prevention, treatment, and patient outreach and support activities. The Haiti Ministry of Health is committed to eliminating mother-to-child HIV transmission.

During the coming year, training and support will continue for PMTCT clinic staff to ensure ongoing SAFE implementation. Preliminary findings, clinic staff will be encouraged increase outreach to patients who do not return for follow-up visits. In addition, SAFE data will be validated for completeness, representativeness and accuracy.

Literature cited
3. Haiti’s National Monitoring, Evaluation and Surveillance Interface (MESI) data: www.mesi.ht

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