

Accelerating Uptake of HIV Care and Treatment in Côte d'Ivoire: A Pre-service Training Approach

Allet Paul Auguste Assi¹, Catherine Greene¹, Milly Kayongo¹, Hawa Camara¹, Samuel Ohouo².

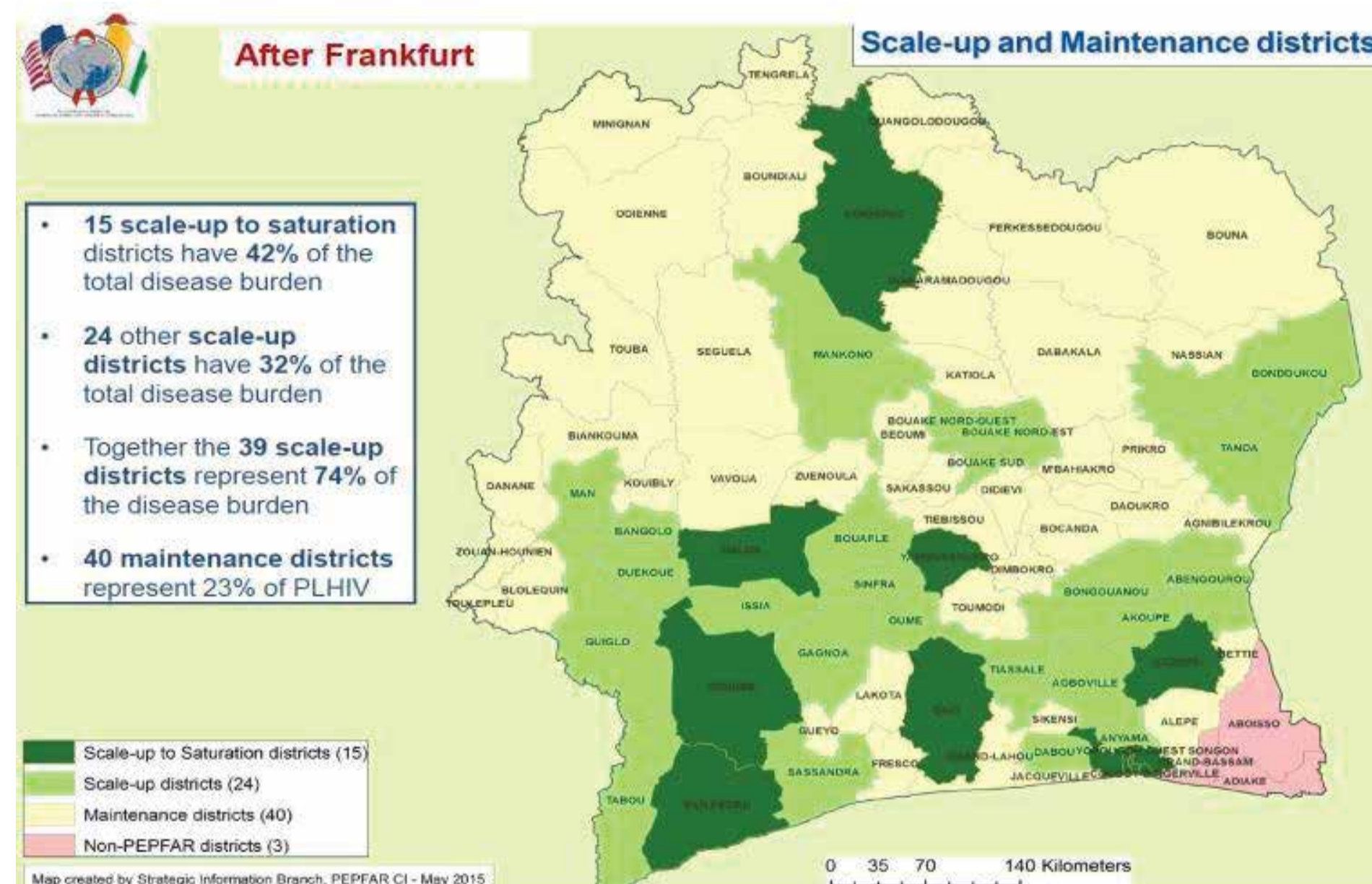
¹Abt Associates; ²USAID Cote d'Ivoire.

Background

- Cote d'Ivoire has a 2.7% HIV prevalence rate.
- At least 50% of HIV+ adults and children do not have access to care and treatment.
- Physicians have the monopoly in provision of HIV care and treatment, but practicing nurses, midwives, and nurse aids make up a larger share of the health workforce (43%).
- Currently allied health professionals play a critical but limited role in HIV care and treatment.
- Risk of loss to follow-up due to insufficient competencies and personnel. (Loss to follow up currently estimated at 45%.)
- 2012-13 pilot of nurse initiated ART showed:
 - Increased access to essential package of services
 - Improved patient retention
 - Care and treatment by a multidisciplinary and complementary medical team
 - Integration of HIV care and treatment in maternal and child health services



Map of Côte d'Ivoire and Scale-up Districts



Objectives

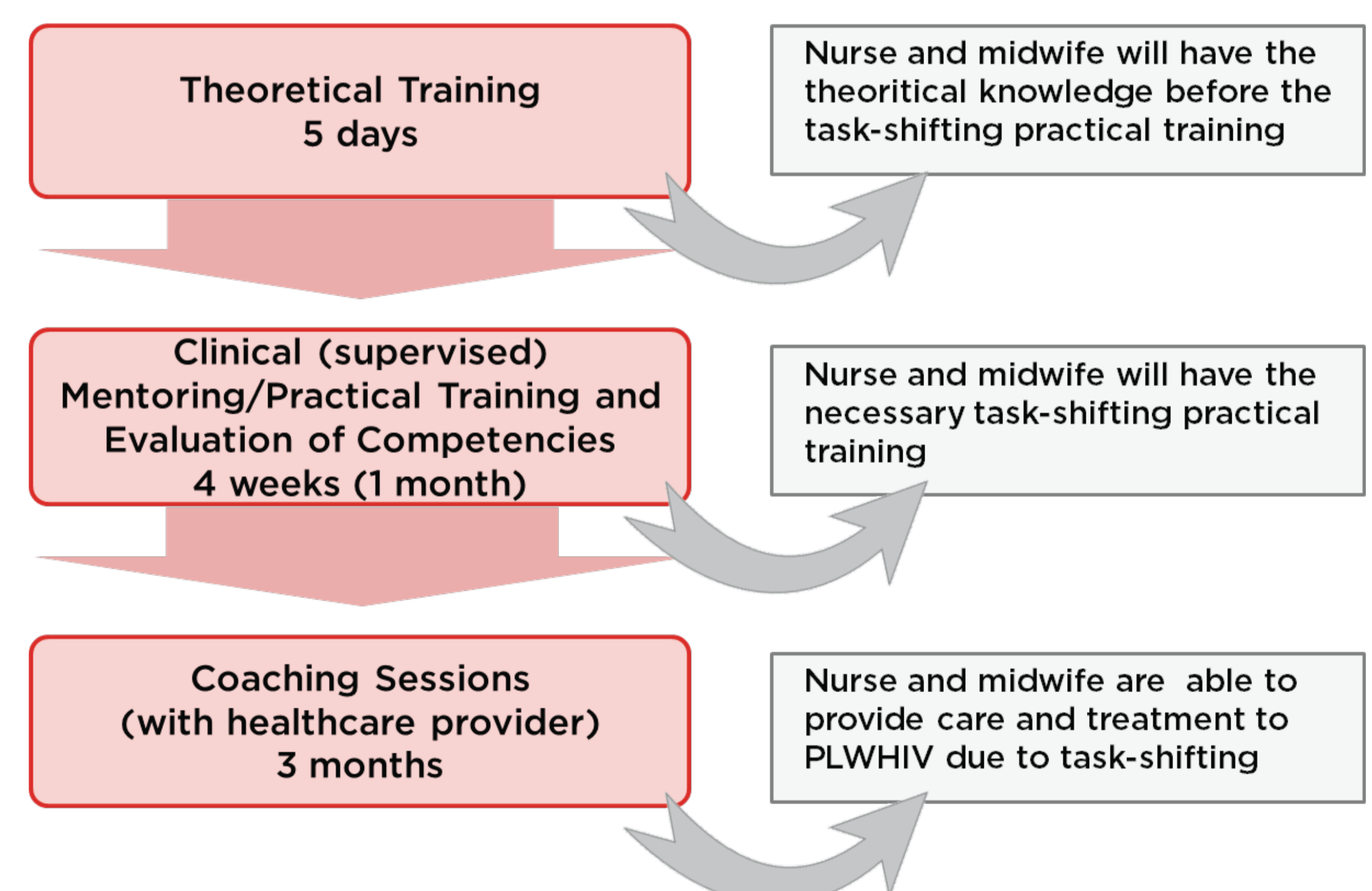
- Increase access to HIV care and treatment for HIV positive patients in high disease burden areas.
- Advocate for an expanded role for nurses and midwives in HIV care and treatment, including Option B+, through stakeholder engagement with government and professional associations.
- Create a critical mass of nurses and midwives with competencies in delivering quality HIV services and treatment.
- More specifically, build the capacity of more than 1800 recent nursing and midwifery graduates to deliver quality services in care and treatment of HIV through partnership with the national nursing school.



Methods

In order to achieve the set objectives, the following activities took place:

- 1. Advocacy:** meetings with professional associations, including the national medical association, nursing association and health worker unions. Advocacy brief was developed to request changes in the nursing scope of practice.
- 2. Curriculum integration:** integration of HIV care and treatment into the existing pre-service nursing curriculum (into core subjects, e.g. Pediatrics), including the initiation of ART and Option B+.
- 3. Trainings:**
 - a. Theoretical training for more than 1691 recent graduates
 - b. On-site clinical practicum for more than 300 recent graduates
 - c. Follow-up and evaluation of training participants.
 - d. Training for nursing preceptors at clinical training sites.
- 4. Coordination** between the national nursing school and HIV care and treatment partner clinics.



Results

- Advocacy efforts led Cote d'Ivoire to be among the first countries in West Africa to pursue nurse-initiated ART.
- Foundation set to provide continual pipeline of nurses and midwives with competencies in HIV care and treatment.
- Government took the opportunity to train and place more than 300 recent graduates in high-burden HIV areas.

Conclusion and Next Steps

- Pre-service education approach offers an accelerated and sustainable improvement in access to HIV care and treatment.
- Ensure coverage of HIV care and treatment services in high disease burden areas through targeted placement of newly trained nurses and midwives.
- Conduct impact evaluation to determine how many PLHIV served through this pre-service training approach.