Sister Abiyot Bedane lives in the Arsi Zone of Oromiya Region in Ethiopia. As a maternal and child health nurse at the Alem Tenna Health Center, she works a busy schedule caring for local mothers and children. Until recently, though, her health center has not been able to help mothers who are HIV-positive to avoid passing on the virus to their children.

Women who are HIV-positive can transmit the virus during pregnancy or delivery or through breastfeeding. Without interventions, about a third of infants born to infected mothers contract the virus. Around the globe, an estimated two million children are HIV-positive. Yet simple treatments can greatly improve a newborn’s chance of avoiding infection.

Through prevention of mother-to-child transmission (PMTCT) programs, mothers receive antenatal counseling and testing for HIV, and—if positive—follow-up and antiretroviral therapy; babies receive antiretroviral prophylaxis within 72 hours of birth.

In Ethiopia, the Ministry of Health estimates annual HIV-positive births to number 30,000. The Capacity Project began expanding PMTCT services in Ethiopia in October 2007. This work is a continuation of USAID’s bilateral PMTCT project, in which IntraHealth International and partners supported 248 public health centers and increased PMTCT coverage from 0% in September 2003 to 39% of the 635 public health centers in September 2007.

At the Zeway Health Center, for example, 1,235 pregnant women attended their first antenatal visit last year; 1,152 were tested for HIV and 52 were found to be positive. Thirty mothers and 16 babies received antiretroviral therapy. The Capacity Project is building on this successful base of a holistic PMTCT program that involves all levels of the community as well as health center and Ministry of Health staff.

In Ethiopia, 94% of women deliver their babies at home. Among the mothers that go to a health center at least once for antenatal care, a large portion never return after learning their HIV status. This is why the Capacity Project is fostering community action for behavioral change and supporting advocacy. At the same time, health centers remain vital hubs of service delivery. The Project is expanding PMTCT services to an additional 200 sites by September 2008, bringing coverage to over 60% of health centers in the targeted regions.

From February 18 through April 9, the Capacity Project conducted in-depth, on-the-job training sessions for health providers in the four regions of Amhara, Tigray, Oromiya and SNNPR. Through these sessions, 212 providers were trained in comprehensive antenatal care and PMTCT—as a result, 91 health centers are now able to offer PMTCT services for the first time. The Project will train approximately 300 providers at an additional 109 health centers for PMTCT service initiation by September 2008.
Sister Abiyot received training at the Geda Health Center in Nazareth, about 100 kilometers east of Addis Ababa and not far from Alem Tenna, where she works. “The depth of the ten-day on-the-job training made us capable of launching PMTCT services in our health center,” she explains. “The training gave us the capacity to counsel, test for HIV, determine the infection stage, provide treatment, follow up for the mother and the child—and a lot more.”

The training sessions also incorporated pediatrics HIV so that infected babies can receive services at the health-center level rather than needing to travel to hospitals. In February and March the Project trained 90 providers in Integrated Management of Neonatal and Childhood Illness from 45 health centers in Amhara, Tigray, SNNPR and Oromiya regions.

The Capacity Project is also expanding the successful Mother’s Support Group program for HIV-positive mothers; scaling up involvement in PMTCT by health extension workers; conducting training for pediatric HIV/AIDS linkages and referral; and providing support for PMTCT in private facilities.

The knowledge and skills Sister Abiyot learned are already making a big impact—not just on the services she is able to provide, but on her own outlook as well. “Now I see pregnant women differently,” she says. “When I find an HIV-positive pregnant woman, I will be sad just like any other person, but my frustration for not providing a solution is gone now. I am capable of counseling for HIV testing and keeping the mother in medical follow-up toward institutional delivery, which most women in our area are not willing to do,” she points out. “This way I can make a difference in one’s family life.”

The Capacity Project, funded by the United States Agency for International Development (USAID) and implemented by IntraHealth International and partners, helps developing countries strengthen human resources for health to better respond to the challenges of implementing and sustaining quality health programs.

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