

STUDY ON IMPACT OF PREVENTION OF MOTHER-TO-CHILD TRANSMISSION (PMTCT) SERVICES IN LIBERIA

The National AIDS Control is seeking a highly motivated individual as a part-time Technical Advisor to assist with the implementation of this study

Background

After 14 years of civil conflict, Liberia is rebuilding its health system and has attracted support from NGOs and multilateral agencies to scale up and strengthen Prevention of Mother-to-Child Transmission (PMTCT) services. The Liberia Demographic and Household Survey (LDHS) of 2007 shows a general HIV prevalence rate of 1.5%. The National AIDS and STI Control Program (NACP) conducted an antenatal clinic seroprevalence survey in 2008 that shows a prevalence rate of 4.0% among pregnant women. In 2008, there were only 29 health facilities offering PMTCT; in May 2011, 162 health facilities offered PMTCT services in the country. Standardized tools to record and report HIV testing in ANC, uptake of PMTCT regimens, and use of early infant diagnosis were introduced in 2008 and employed in all PMTCT sites.

Rationale for the study

With the rapid scale-up and investment in PMTCT services, it is important for NACP to evaluate the impact of these services on patients and HIV transmission rates. A previous PMTCT study failed to provide a useful assessment of the effectiveness of PMTCT services in Liberia. This study will provide critical information on patient attrition from PMTCT programs, reasons behind this attrition, and estimates of mother-to-child transmission rates.

With assistance from the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and other partners, Liberia is rapidly increasing access to PMTCT services. This study will provide evidence of strengths and weaknesses in the ability of health facilities to provide PMTCT that will inform the design of national policies and programs to strengthen the quality of services.

Objectives of the Study

The primary aim of the study is to assess the performance of PMTCT services in Liberia, as well as understand factors affecting pregnant women's participation in PMTCT. Specifically, the study intends to accomplish the following three objectives:

1. Estimate the national rate of HIV transmission from pregnant women to their children
2. Calculate attrition rates at each stage of the cascade of PMTCT services
3. Identify factors influencing or causing patient attrition at each stage of the cascade of PMTCT services

Objective 1

Since this study is limited to pregnant women tested and confirmed HIV-positive, it will not obtain information on HIV-positive pregnant women who are not tested. Thus, the national rate of HIV transmission will be estimated through a model based on two types of inputs:

1. Findings from this study to estimate transmission from HIV-positive pregnant women that enroll in PMTCT in Liberia; and
2. Global assumptions to estimate transmission from HIV-positive pregnant women who do not enroll in PMTCT, including those who are not tested for HIV.

Objectives 2 and 3

This study seeks to gain information on the cascade of PMTCT services that the health facility can provide a pregnant woman, listed below:

- Test for HIV during antenatal clinic visit
- Enroll in PMTCT program
- Provide ARV prophylaxis or antiretroviral therapy (ART) and Cotrim prophylaxis during pregnancy
- Provide ARVs for prophylaxis at labor and delivery
- Provide ARV prophylaxis during breastfeeding
- Provide Cotrim prophylaxis for exposed infant
- Conduct Early Infant Diagnosis (EID) for exposed infant
- Conduct early infant initiation for confirmed HIV-positive infants

The study will collect information on HIV-positive pregnant women who enrolled in PMTCT, tracking their attrition and reasons for attrition during each stage of the PMTCT cascade, through both chart reviews and in-person interviews, along with HIV testing of the child born during the PMTCT enrollment. The study will also collect information on attrition between HIV testing and PMTCT enrollment through a review of HIV Counseling and Testing (HCT) and PMTCT registers.

Scope of work

In close partnership with the research team led by NACP, the TA is expected to perform the following:

- Lead the design of the questionnaire to be given to mothers enrolled in PMTCT, including writing the protocol for the research team that includes confidentiality requirements and obtaining interviewees' permission for interview and HIV testing of the child in question.
- Lead training as a co-facilitator on the questionnaire and study protocols, including how the research teams should organize the data collection, and identify and resolve data discrepancies. During both the register/chart review and the interview/testing stages, even when not in country, the TA will provide guidance via email or phone on how to resolve discrepancies or questions.
- Design and develop data analysis plan and lead initial steps for analysis of the data collected, both from the chart/register reviews and from the interviews with child testing. Review final analysis to eliminate errors, identify key findings, and compare to other countries' statistics.
- Produce draft report summarizing the study, its findings, and next steps. Closely edit final draft of the report for accuracy, clarity, and readability.

Deliverables

1. Questionnaire to interview PMTCT mothers on the following topics: patient's view of the quality of each PMTCT service, general knowledge about PMTCT, level of customer service from health facility staff, and reasons for usage or non-usage of PMTCT services. In addition, questions will seek information about HIV stigma in the community and level of partner support for using PMTCT services.
2. Protocol for research team to respect confidentiality requirements and obtain interviewees' permission for interview and HIV testing of the related child.
3. Standard operating procedures for the research team and supervisors on how to organize the data collection, and identify and resolve data discrepancies.

4. Analytical framework in Excel, SPSS, Stata or other software for synthesizing data collected from the chart/register reviews, including how to randomly select the mother-child pairs to interview and test.
5. Analytical framework in Excel, SPSS, Stata or other software for synthesizing qualitative and quantitative data from mother-child interviews and HIV testing.
6. Detailed review of final analysis: list any identified errors with recommended corrections, state important findings, and compare study's findings to other countries' statistics.
7. Draft final report with draft language around the data collection process, findings, limitations around the findings, and recommendations for next steps to improve PMTCT services in Liberia.
8. Finalized study report based on feedback from in-country partners and NACP

Timeframe

TA should be available part-time, working approximately 10 hours/week for a total of ~200 hours during **September 1, 2011– January 16, 2012**. During this period, the TA should make 2 trips to Liberia of approximately 2-3 weeks each to provide full-time, in-country support for critical points of data collection and analysis:

- Trip 1, estimated September 15 - October 2: Register/chart review and interviews/testing
- Trip 2, estimated November 17 – December 4: Data analysis

Supervision and Reporting

The consultant will report to the NACP leader of the research team, who will convene the Technical Committee at key decision stages for stakeholder input and consensus.

Job Requirements

The prospective TA should meet the following requirements:

- Post-graduate degree, preferably in public health, epidemiology, demography, social sciences or related field. Training in clinical medicine or primary research would be an added advantage.
- Minimum 5 years of work experience in evaluating public health interventions, preferably conducting facility-based evaluation of HIV-related interventions.
- Substantial knowledge of monitoring and evaluation practice and interview methodology through training and at least 2 years of work experience.
- Demonstrated ability to collect, verify, and analyze data, including presentation of findings in both oral and written form. Proficiency in SPSS, Stata or other analytical software.
- Strong written communication skills and oral fluency in English.
- Excellent interpersonal, facilitation and capacity building skills.
- Experience working in a developing country, and willingness to travel widely as the role entails extensive travel within Liberia.

Please send all applications to:

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