



**PEPFAR**  
20 YEARS OF IMPACT

# The Baby Shower Initiative: From Science to Program

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# The Baby Shower Initiative: Overview

*A community leadership approach to preventing mother-to-child transmission of HIV:*

- Early identification of pregnant women (**seek**)*
- Early identification of risks among pregnant women (**test**)*
- Management of risks, to reduce morbidity, mortality, and transmission to infants and partners (**treat**)*
- Identification and care of infected/affected infants*



# The Congregational Approach to PMTCT



**Church sensitization,  
enrollment and training**



**Baby Showers: pregnant women  
and their partners**

## **Baby shower activities:**

- Prayer
- Health education
- Celebration and dancing
- Safe mama pack
- Health screenings, including HIV
- Referral to ANC care



## **Community follow-up:**

Church Health Assistants support linkage to PMTCT and maternal child health services

# Prevention Components – Health Education



**By testing, I have a good chance of having a healthy child and a healthy life**

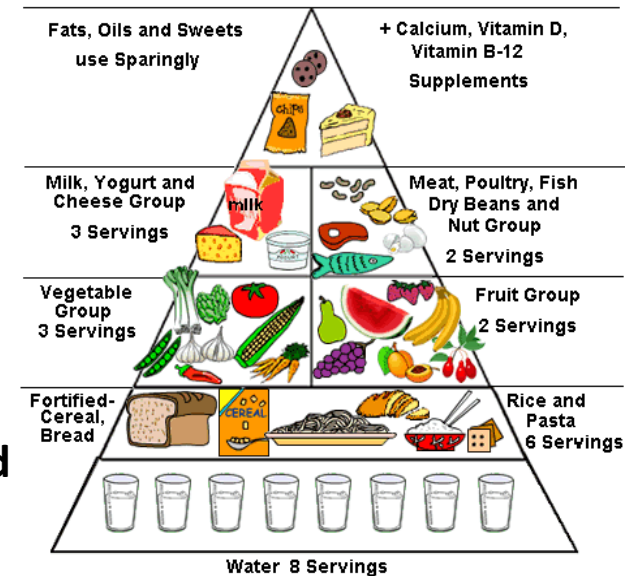
**Get Screened Today!**

**Integrated Prenatal Screening Information**



**Medical visits are important**

**Eating healthy promotes good quality of life**



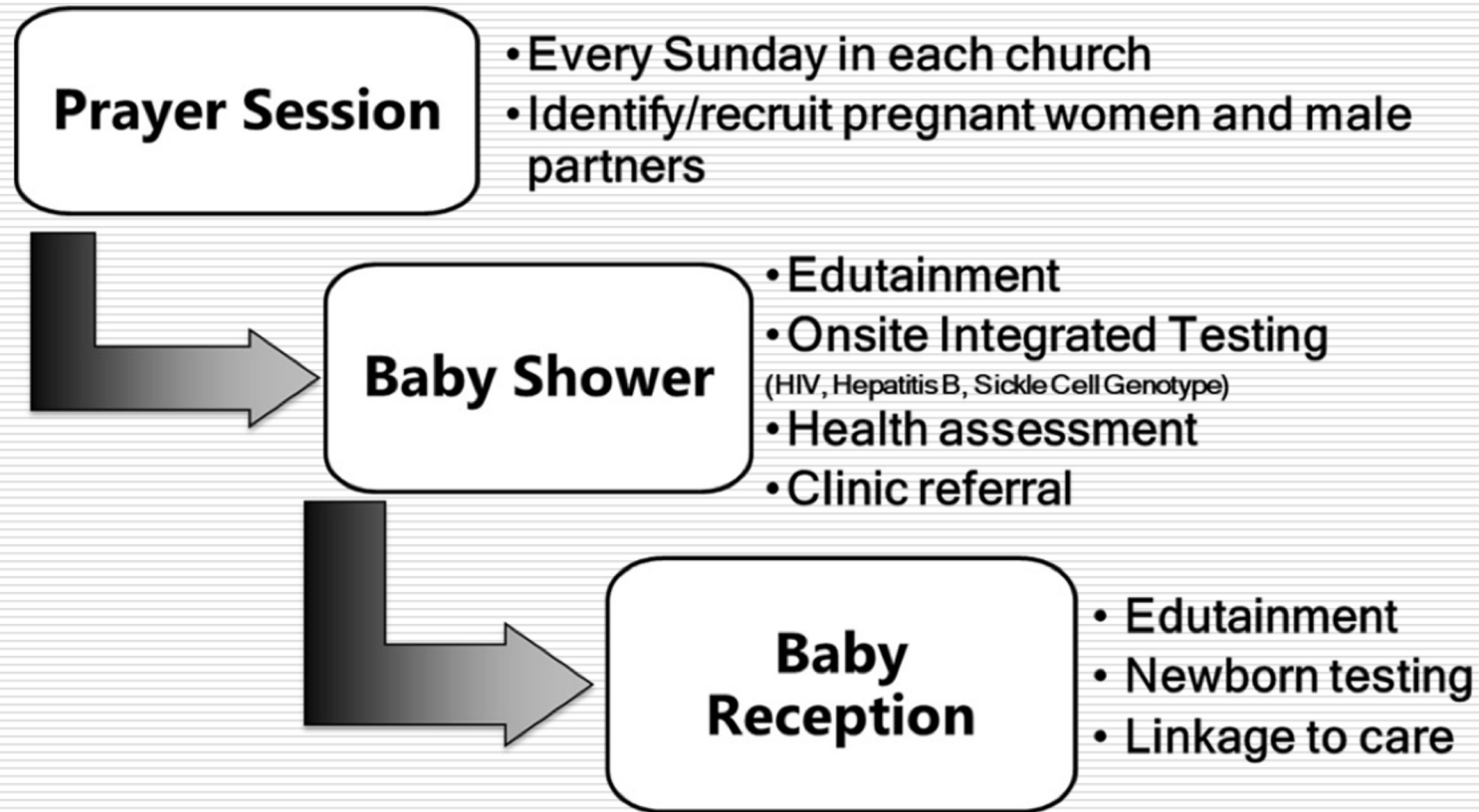
# Baby Showers trial in Enugu State, Nigeria



<https://www.youtube.com/watch?v=G-YTMyShgUQ>

# The Baby Shower Framework

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# The Baby Shower Trial

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## □ Results

### Confirmed HIV Testing among Pregnant Women

	<b>Total Subjects</b>	<b>Tested</b>	<b>Rate</b>	<b>P-value</b>
Control	1355	740	54.6%	<0.0001
Intervention	1647	1514	92.0%	

### Adjusted Odds Ratio for no HIV Test

	<b>aOR</b>	<b>95% CI</b>	<b>P-value</b>
Control vs. Intervention	11.2	8.8 - 14.3	<0.0001

# The Baby Shower Trial

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## Male Participation Rate

	<b>Females</b>	<b>Males</b>	<b>Participation rate</b>
Participants	2809	2498	88.9%

## Confirmed HIV Testing among Male Partners

	<b>Total Subjects</b>	<b>Tested</b>	<b>Rate</b>	<b>P-value</b>
Control	1201	453	37.7%	<0.01
Intervention	1297	1089	84.0%	

## Adjusted Odds Ratio for No HIV Test

	<b>aOR</b>	<b>95% CI</b>	<b>P-value</b>
Control vs. Intervention	11.7	9.4 - 14.1	<0.0001

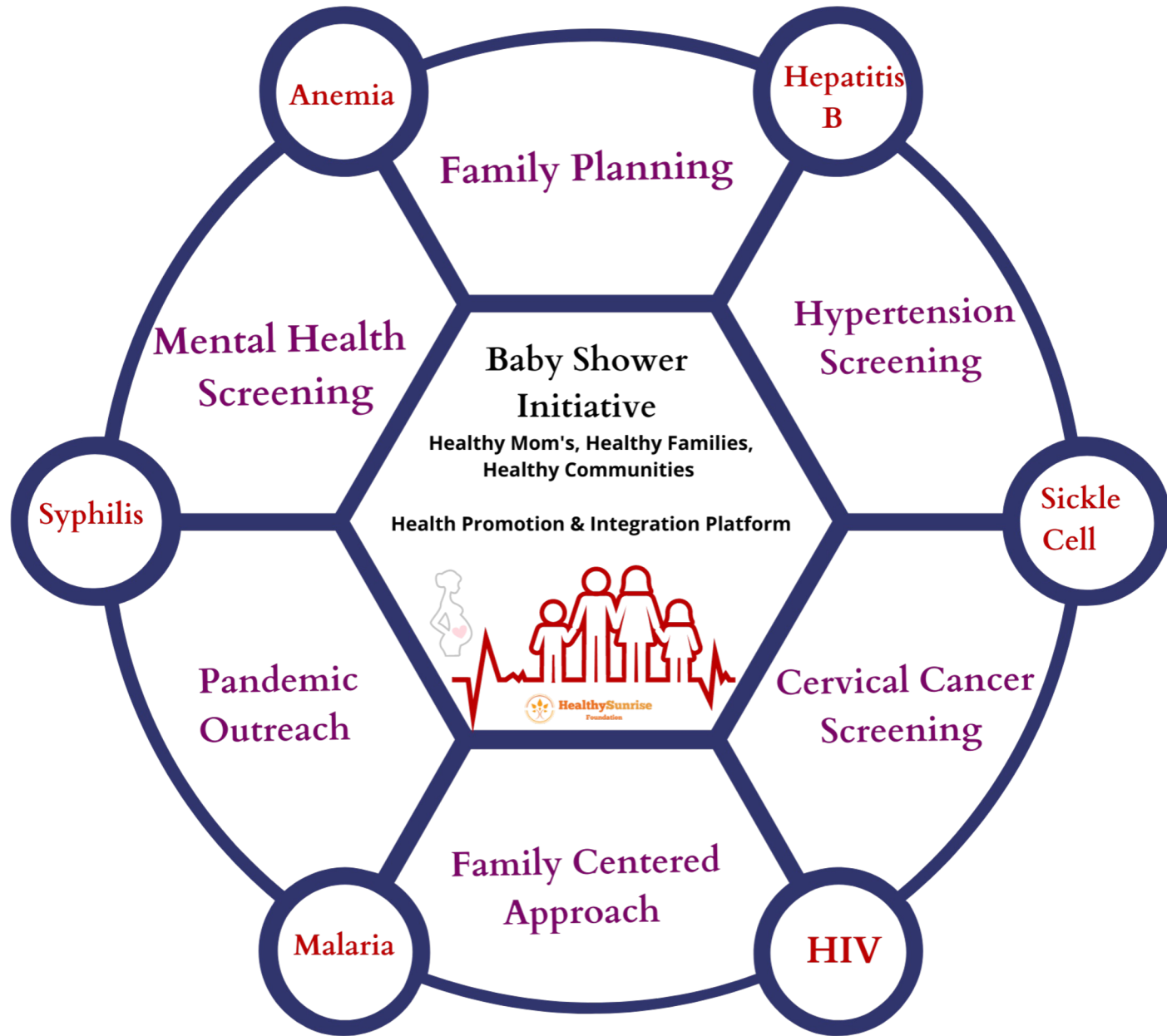


**BABY SHOWER INITIATIVE EVIDENCE BASED INTERVENTION**

- Effect of a congregation-based intervention on uptake of HIV testing and linkage to care in pregnant women in Nigeria (Baby Shower): a cluster randomised trial.
- Congregation-based intervention in resource limited settings: Implementation Challenges & Lesson Learned.
- Comparative effectiveness of congregation versus clinic-based approach to prevention of mother-to-child HIV transmission: study protocol for a randomized controlled trial.
- Improving uptake of prevention of mother-to-child HIV transmission services in Benue State, Nigeria through a faith-based congregational strategy.
- Community based screening for sickle haemoglobin among pregnant women in Benue State, Nigeria: I-Care-to-Know

**Baby Shower Model shows Effectiveness Across Multiple Outcomes in Randomized Trials, And in The Field Replication, Benue State, Nigeria, Plos One, 2021**

- Mothers: Evidence from the Healthy Beginning Initiative.
- Attitudes and beliefs about mental illness among church-based lay health workers: experience from a prevention of mother-to-child HIV transmission trial in Nigeria.
- Population-based prevalence of malaria among pregnant women in Enugu State, Nigeria: The Healthy Beginning Initiative.
- Ebola Outbreak in Nigeria: Increasing Ebola Knowledge of Volunteer Health Advisors.
- Integrating mental health screening into routine community maternal and child health activity: experience from Prevention of Mother-to-child HIV transmission (PMTCT) trial in Nigeria.



# Baby Shower Program Scaled up to 80 Churches in Benue State



# Training Nigeria Implementing Partners



# Baby Shower results in Benue State, Nigeria

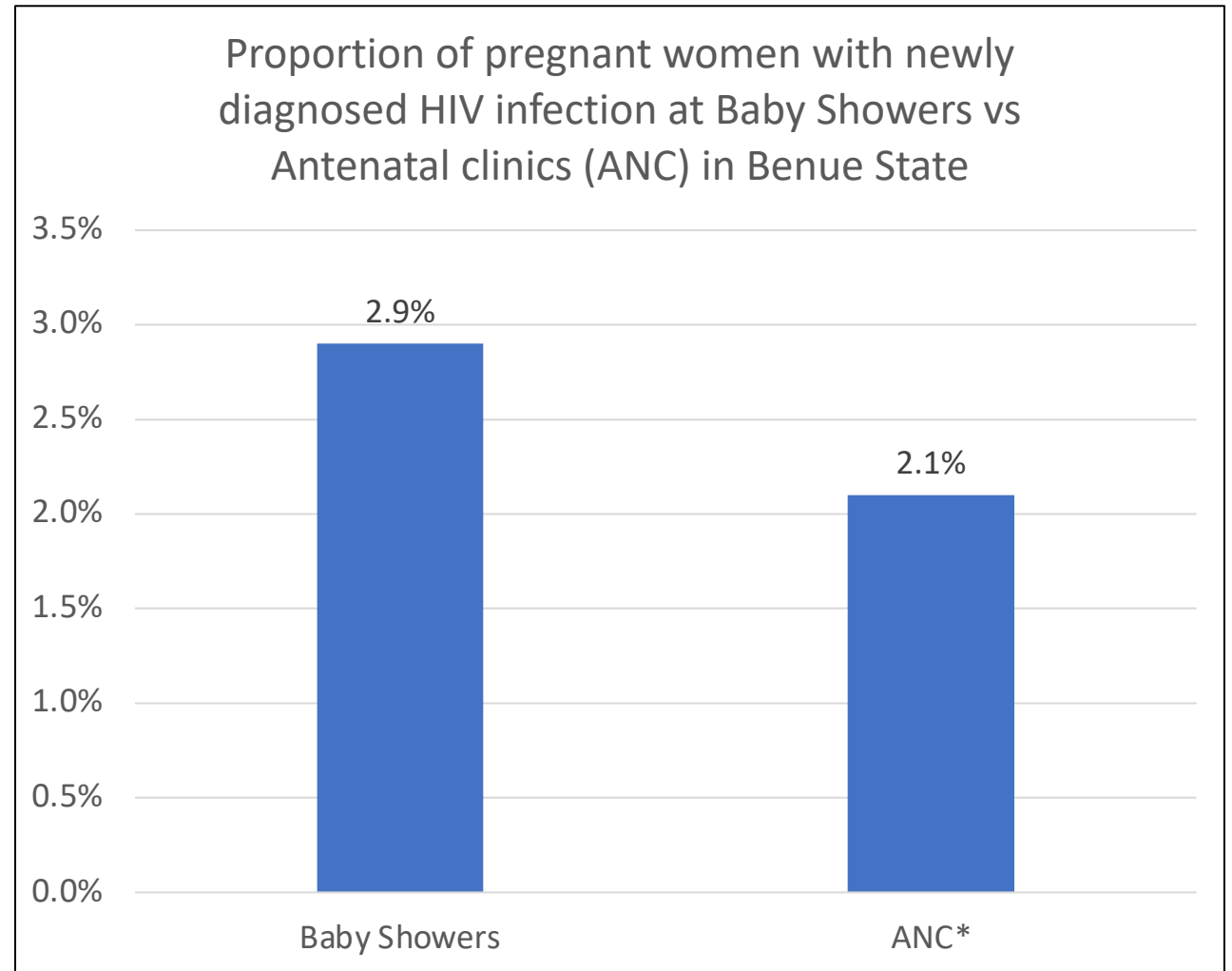
**Across nearly 700 Baby Shower events in 80 churches:**

- 10,056 pregnant women and 6,187 male partners attended Baby Showers, many of whom had missed out on key pregnancy services:
  - 4,451 women (44%) were not enrolled in antenatal care
  - 1 in 4 women and men had never tested for HIV
  - Many women were newly diagnosed with HIV at Baby Shower events (2.9% new HIV positivity) and 93% of pregnant women with HIV were linked to antiretroviral therapy



# Baby Shower results in Benue State, Nigeria

**The Baby Shower intervention complemented facility-based approaches and reached women and their partners who would not have otherwise accessed facility-based care.**



\*PEPFAR-supported ANC clinics in same local area as Baby Shower events

## Effect of a congregation-based intervention on uptake of HIV testing and linkage to care in pregnant women in Nigeria (Baby Shower): a cluster randomised trial

Echezona E Ezeanolue, Michael C Obiefune, Chinenye O Ezeanolue, John E Ehiri, Alice Osuji, Amaka G Ogidi, Aaron T Hunt, Dina Patel, Wei Yang, Jennifer Pharr, Gbenga Ogedegbe

### Summary

**Background** Few effective community-based interventions exist to increase HIV testing and uptake of antiretroviral therapy (ART) in pregnant women in hard-to-reach resource-limited settings. We assessed whether delivery of an intervention through churches, the Healthy Beginning Initiative, would increase uptake of HIV testing in pregnant women compared with standard health facility referral.

## Increasing PMTCT uptake through integrated faith-based activities



Scientific discovery and forward-thinking health policies have fuelled efforts to expand prevention of mother-to-child HIV transmission (PMTCT) services across sub-Saharan Africa. Increases in linkage to HIV care and initiation of ART were noted at intervention sites. As in many places worldwide, religious institutions

### RESEARCH ARTICLE

## Targeted HIV testing for male partners of HIV-positive pregnant women in a high prevalence setting in Nigeria

Semiu Olatunde Gbadamosi<sup>1\*</sup>, Ijeoma Uchenna Itanyi<sup>2</sup>, William Nii Ayitey Menson<sup>3</sup>, John Olajide Olawepo<sup>4</sup>, Tamara Bruno<sup>3</sup>, Amaka Grace Ogidi<sup>5</sup>, Dina V. Patel<sup>6</sup>, John Okpanachi Oko<sup>7</sup>, Chima Ariel Onoka<sup>2</sup>, Echezona Edozie Ezeanolue<sup>6,8</sup>

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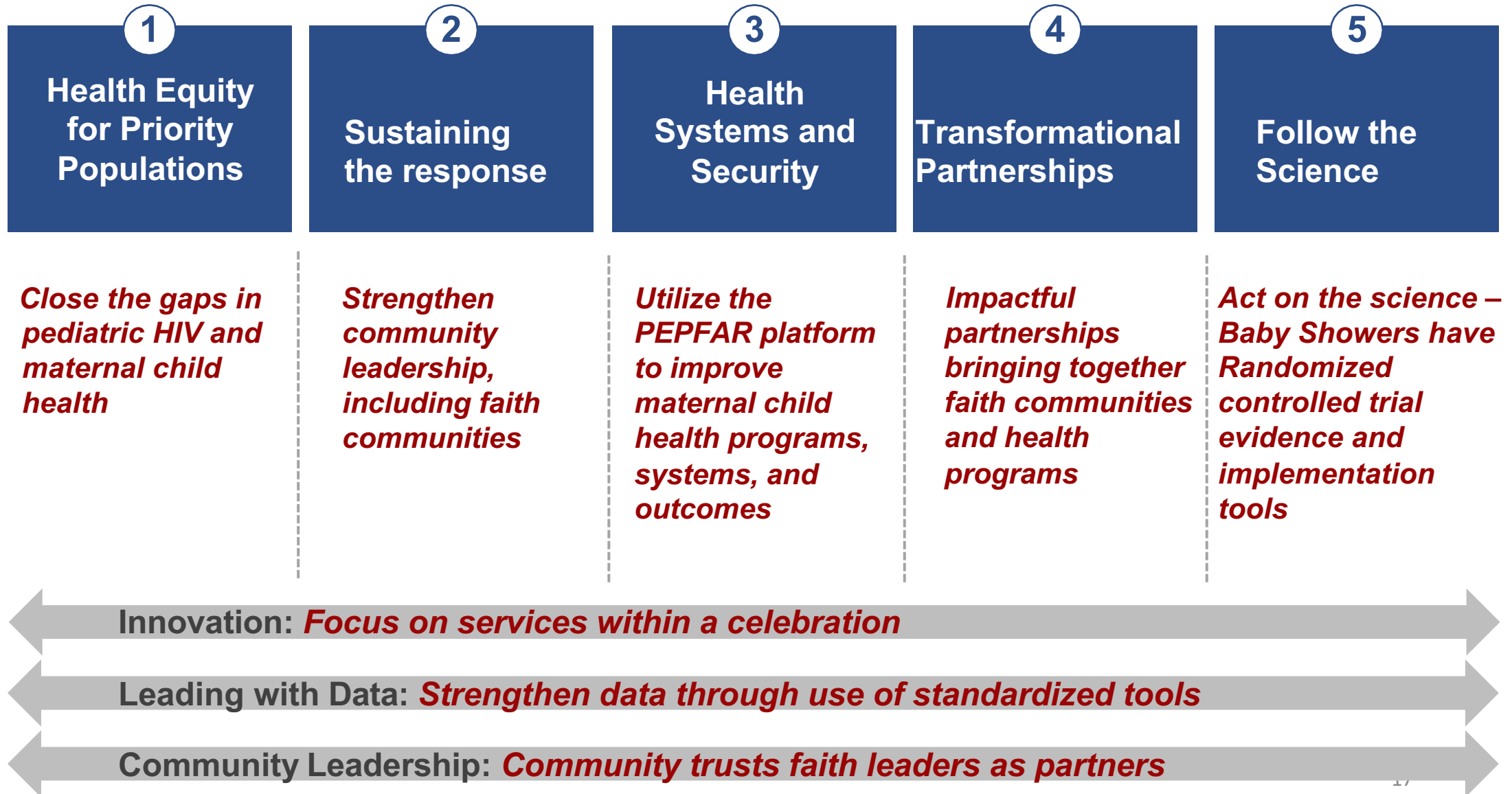
*How can the best of Science and Implementation Science strengthen programs in the field?*

# PEPFAR Capacity Building Tools for Baby Shower Replication

*Modules  
1- 6 drafts near  
completion*



# Baby Showers supports PEPFAR 5 x 3 Strategy





**THANK YOU!**



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