



Challenges to Pediatric HIV Care:

The Impact of COVID on Pediatric Treatment Provided by Faith-Based Facilities in Kenya



Objectives

- Describe a 2022 study calculating the percentage of HIV treatment services offered by faith-based health facilities in Kenya.
- Compare these findings to earlier waves of this study.
- Highlight findings during COVID (2019—2021).
- Describe these COVID findings for pediatric treatment visits in Kenya.



Defining faith-based health facilities

- Listed as faith-based facility on the Kenya Health Facility Master List maintained by the Ministry of Health
- Some faith-based providers labeled as non-governmental providers.
 - Examined all non-governmental providers by name or in light of local knowledge of providers' faith-based status
 - Facilities marked as “faith-based” if:
 - The facility or sponsoring organization lists religious beliefs as core to mission, or
 - The facility or sponsoring organization had direct, financial, administrative, or programmatic ties to religious bodies



HIV health services data

- Analysis of HIV clinical services using existing datasets on the DHIS2 data platform (hiskenya.org)



The percentage of HIV clinical services provided by the faith sector has remained remarkably consistent.

	2,013	2,017	2,019	2,021	%change 2019-2021 (COVID)
All Facilities	3,665,111	9,710,688	13,441,562	15,013,531	11.7%
FB facilities	810,082	2,011,790	2,824,319	3,128,954	10.8%
% by FB facilities	22.1%	20.7%	21.0%	20.8%	



Faith-based facilities
are essential
providers in high
incidence/
prevalence counties

County	2017			2019			2021		
	Total cases FB	Total cases	%FB	Total cases FB	Total cases	%FB	Total cases FB	Total cases	%FB
Mombasa	203,305	415,975	48.9%	242,103	533,915	45.3%	270,910	579,528	46.7%
Nairobi	571,966	1,348,568	42.4%	717,304	1,810,767	39.6%	798,004	2,017,452	39.6%
Kiambu	107,870	312,088	34.6%	145,803	465,607	31.3%	162,108	509,317	31.8%
Migori	118,322	574,755	20.6%	179,559	843,943	21.3%	196,437	933,898	21.0%
Kakamega	74,818	348,515	21.5%	94,737	494,894	19.1%	101,210	541,281	18.7%
Homa Bay	182,161	910,343	20.0%	240,539	1,302,652	18.5%	264,353	1,424,152	18.6%
Kisumu	125,370	900,202	13.9%	238,629	1,240,656	19.2%	254,139	1,372,165	18.5%
Siaya	76,009	744,920	10.2%	126,760	1,024,810	12.4%	142,960	1,171,240	12.2%
Nakuru	38,354	301,931	12.7%	52,452	455,305	11.5%	55,803	519,180	10.7%
Busia	29,463	318,199	9.3%	39,114	401,458	9.7%	39,808	423,541	9.4%
Murang'a	8,903	131,702	6.8%	14,790	178,980	8.3%	18,435	198,727	9.3%
Total	1,536,541	6,307,198	24.4%	2,091,790	8,752,987	23.9%	2,304,167	9,690,481	23.8%



Increase in
treatment visits for
adults and
adolescents during
COVID...

	2,019	2020	2,021
Adult visits all facilities	12,147,850	13,080,976	13,736,925
Adult visits FB facilities	2,554,854	2,751,432	2,861,531
<i>% by FB facilities</i>		21.0%	20.8%
<i>% change in adult visits during the COVID response</i>		2019-2020: +7.6 in all facilities; +7.7% in FB facilities	2020-2021: +5.0% in all facilities; 4.0% in FB facilities
		2019-2021: +13.1% in all facilities; +12.0% in FB facilities	

	2,019	2020	2,021
Adol. (10-19) All facilities	865,616	898,414	922,306
Adol. (10-19) FB facilities	191,230	201,687	203,949
<i>% Adol.(10-19) by FB facilities</i>	22.1%	22.4%	22.1%
<i>% change in adolescent visits (10-19) during the COVID response</i>		2019-2020: =+3.8% in all facilities; +5.4% in FB facilities	2020-2021: =+2.7% in all facilities; +1.1% in FB facilities



...but there was a marked decrease in pediatric treatment

Why?

	2,019	2020	2,021
Ped. visits all facilities	428,096	388,444	354,300
Ped. visits FB facilities	78,235	69,111	63,474
<i>% by FB facilities</i>	<i>18.3%</i>	<i>17.8%</i>	<i>17.4%</i>
<i>% change in 0-9 yo visits during the COVID response</i>	2019-2021: -17.2% in all facilities; -18.9% in FB facilities		



Was the decrease in pediatric visits primarily due to fewer numbers of pediatric cases as progress in the global response limits the number of new cases?

Not likely

- There has been a drop in pediatric cases but only by 12.9% while treatment visits dropped by 17.2%

Unknown but not supported by data

- Treatment visits for adolescent girls (15-19) and young women (20-24) actually increased 2019-2021.



Did the decrease in pediatric cases reflect difficulties in women living with HIV accessing HIV services during the pandemic for themselves or their children?

	2019	2021
All visits, female 15-19	238585	273581
FB facilities, female 15-19	53298	62367
% by FB facilities	22.3%	22.8%
% change in female 15-19 visits during the COVID response	2019-2021: +14.7% in all facilities; +17.0% in FB facilities	
All visits, female 20-24	481957	521517
FB facilities, female 20-24	77183	86906
% by FB facilities	16.0%	16.7%
% change in female 20-24 visits during the COVID response	2019-2021: +8.2% in all facilities; +12.6% in FB facilities	

- If women were not accessing care for their children, they were, nonetheless, accessing care for themselves.

Data supports this

- Treatment visits for children <1 y.o. fell sharply.



Is the overall decrease in pediatric visits disproportionately due to the failure to ensure that neonates recently born to mothers living with HIV are referred into clinical care?

	2,019	2,021
Infant (<1) all facilities	10,624	5,322
Infant (<1) FB facilities	2,743	1,185
% by FB facilities	25.8%	22.3%
% change in <1 yo visits during the COVID response	2019-2021: -49.9% in all facilities; -56.8% in faith-based facilities	

- However, remember that treatment visits for adolescent girls and young women actually rose during the same period.
- Could the decrease reflect a breakdown of screening for HIV infection in women unaware of their status?
 - PMTCT: 96% in 2019; 91% in 2021 (UNAIDS)
 - HIV testing in ANC: 94% in 2019; 85% in 2021 (UNAIDS)



Questions for further research

- Do we see a recovery in visit numbers in 2023? No. Nationally, pediatric visit rates (0-9) dropped by an additional 12% from 2021-2022. Infant visit rates dropped by an additional 14%.
- Do these decreases simply reflect an uptake of multi-month dispensing (MMD) of ARTs? If so, why only in pediatric cases, especially infant cases?
- PMTCT among women aware of their status fell from 95% in 2019 to 90% in 2021. Testing of HIV in ANC with women unaware of their status dropped more sharply from 94 in 2019 to 85% in 2021. What accounts for this drop? Are we losing women for treatment of their own infection and for PMTCT for their children?