

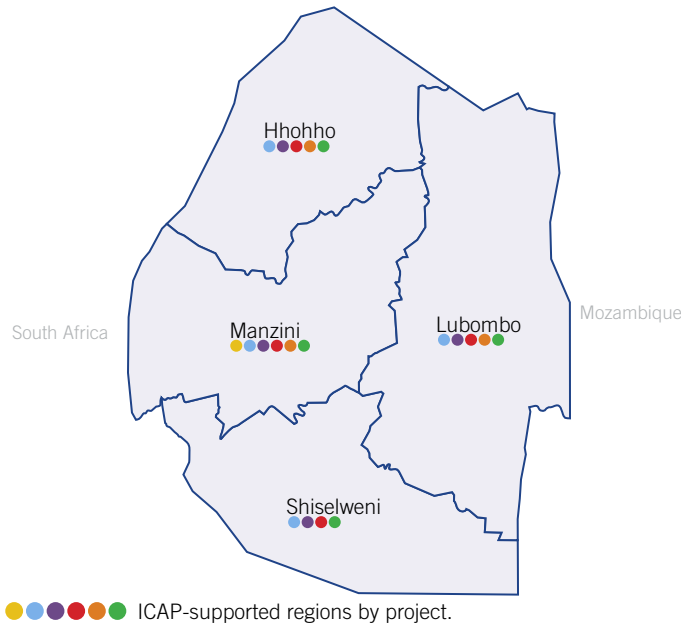


# ICAP

GLOBAL. HEALTH. ACTION.

Columbia University  
Mailman School of Public Health

# Swaziland



## Program Start

2005

## Key Technical Areas

HIV Prevention, Care, and Treatment  
Laboratory Systems Strengthening  
Health Management Information Systems  
Monitoring and Evaluation  
Population-based Surveys  
Key Populations

## Current Funders

Centers for Disease Control and Prevention (CDC)  
National Institute of Health (NIH)  
United States Agency for International Development (USAID)

## Current Projects

### ● **Strengthening Local Capacity to Deliver Sustainable, Quality-Assured, Universal Coverage of Clinical HIV/TB Services**

ICAP is providing technical assistance to: enhance capacity and service delivery at the national level for tuberculosis (TB), MDR-TB and HIV/TB activities; strengthen stewardship and capacity of the Regional Health Management Team in Manzini Region for quality management of HIV/TB service delivery; and improve coverage and quality of adult and pediatric HIV testing, prevention, care, and treatment in health facilities and community settings. The approach emphasizes systems development, training and mentoring for health care workers, and integrating systematic, continuous quality improvement. *(funded by PEPFAR through the CDC)*

### ● **Strengthening National Epidemiologic and Research Capacity to Improve Health Outcomes in the Kingdom of Swaziland under PEPFAR**

ICAP is partnering with the Ministry of Health (MOH) to build Swaziland's capacity in epidemiology and research and strengthen the monitoring and use of data. The aim of this work is to enable the effective use of health information and disease surveillance to inform policy and programming for a coordinated national health agenda. Activities include support for epidemiology, surveillance, research ethics, and the Health Research Training Program.

ICAP is also providing technical assistance and support to conduct the second Swaziland HIV Incidence Measurement Survey (SHIMS2) to assess HIV prevalence, incidence, and access to prevention, care, and treatment services. The survey consists of household-based interviews and HIV counseling and testing for adults and children. The first SHIMS was conducted in 2010-2011. Survey findings will be used to assess the impact of Swaziland's HIV response at the national level and to help guide and target future investment and programs. *(funded by PEPFAR through the CDC)*

### ● **Strengthening HIV/TB Laboratory Quality Management Systems and Services in the Kingdom of Swaziland under PEPFAR**

ICAP is enhancing laboratory capacity as a critical element of a strong health system. Through this five-year award, ICAP is supporting education and training in lab capacity to achieve lab accreditation, improve access to testing, strengthen equipment and supply chain management, and improve laboratory information systems with the goal of enhancing quality of care and program impact. *(funded by PEPFAR through the CDC)*

# Swaziland

- **Technical Assistance Services to Countries Supported by PEPFAR**

ICAP is leading three technical assistance (TA) projects in Swaziland: developing HIV drug resistance surveillance systems; establishing a surveillance system for pediatric HIV case reporting; and supporting the Swaziland Nursing Council to update their pre-service HIV/TB curricula and the development of a continuing professional development database. *(funded by PEPFAR through the CDC)*

- **Situkulwane Lesiphephile – Safe Generations**

Safe Generations is an implementation science study evaluating the Option B+ strategy for the prevention of mother-to-child transmission (PMTCT) of HIV, in which all pregnant women initiate lifelong triple antiretroviral therapy independent of CD4+ count. A stepped-wedge design is being used at ten health facilities with one facility transitioning from Option A to Option B+ every month over 12 months. This study will test whether Option B+ results in differences in rates of infant HIV infection and mother and child retention in care. *(funded by PEPFAR through USAID)*

- **Link4Health: A Combination Strategy for Linkage and Retention**

Link4Health is an implementation science study that uses a facility randomized trial design to evaluate the effectiveness of a combination intervention strategy, as compared to standard of care, on the combined outcome of rapid linkage to HIV care within one month and retention in care at 12 months among adults. *(funded by the NIH)*



## Recently Completed Projects

### **Rapid Scale-Up of HIV Care and Treatment Services under PEPFAR (2009 - 2015)**

ICAP worked with the MOH and partners in Hhohho, Lubombo, and Manzini regions to decentralize adult and pediatric HIV services and expand treatment through nurse-initiated antiretroviral treatment (ART). ICAP provided TA to strengthen networks of service providers, enhance linkages to care and referral systems, and introduce the Expert Client Program. Additionally, ICAP partnered with the MOH and CDC on the Swaziland HIV Incidence Measurement Survey ([shims.icap.columbia.edu](http://shims.icap.columbia.edu)) and established the Health Research Training Program. *(funded by PEPFAR through the CDC)*

### **Technical Assistance for HIV Prevention, Care and Treatment & Other Infectious Diseases that Impact HIV Patients (2009 - 2015)**

ICAP worked to strengthen the capacity of the MOH and SNAP to use HIV program data to inform public health decision-making and ART programs, design and implement evaluations of priority programs, and strengthen monitoring and evaluation capacity. The first evaluation of Swaziland's hub-and-spoke decentralization model was conducted under this award. *(funded by PEPFAR through the CDC)*

### **Global Nurse Capacity Building Program (GNCBP)**

ICAP worked to enhance the capacity of nursing educational institutions to increase the number of qualified nurses. The project introduced innovative learning strategies, academic-service partnerships, and policies and guidelines for an expanded clinical role for nurses. Partners included the University of Swaziland, Southern African Nazarene University, Good Shepherd College of Nursing, and the Clinical Nursing Council. *(funded by PEPFAR through HRSA)*

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