EMERGENCY RESPONSE TO RESTORE HIV TREATMENT SERVICES IN AMHARA REGION, ETHIOPIA, 2022

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BACKGROUND

- Armed conflict in Amhara Region of Ethiopia caused massive population displacement, destruction of health facilities (HFs), and disruption of anti-retroviral treatment (ART).
- By June 2021, 146,092 people were on ART in the region.
- In December 2021, at the end of the conflict, this number fell to 120,967.
- Emergency response task force established, Emergency Response SOP and tools prepared and the Regional Health Bureau (RHB), and Ministry of Health (MOH) began to immediately re-establish ART services.

METHODS

- Sites were mapped out and rapid assessment was conducted to learn the status of basic services supplies, drugs and equipment.
- Priority activities: replenishment of supplies, ART restoration, reestablishment of laboratory and information systems.
- Reviewed Electronic medical records (EMR) data back up to determine ART status and patients with ART interruptions.
- Provider training, psychosocial support, and reengagement to service and mentoring.
- Service restoration, data recovery and bring back to care campaign.

RESULTS

- 105/ 189 ART HFs in conflict areas were damaged or looted.
- Of the 93 reassessed HFs, 49 (53%) were unable to provide ART and 71 (76%) were unable to provide laboratory services.
- ART status for 41,980 clients could not be verified.
- The ART status for 36,436 persons (87% of the backlog) with ART interruption was verified from EMR and they were restarted on ART.
- As of April 2022, all the189 HFs except six were able to re-start service and 95% of the regional ART cohort was on ART.
- By June 2022, the regional ART cohort grew to 147,817, surpassing the pre-conflict cohort size (Fig 1).
- VLC increased from 73% in FY22q2 to 79% in FY22Q4

Post conflict rapid ART recovery, takes a well-coordinated-emergency response to reinstitute key supplies, training and re-engage health workers, restarting service and campaign to bring persons, who interrupted ART, back to care.



Fig 1. Trend of PLHIV on Anti Retroviral Treatment, Amhara Region, Sep 2020 to Jun 2022

CONCLUSIONS

- The recovery of ART services was possible through the established MOH and RHB coordination and leadership platforms.
- Rapid reengagement of trained providers, bring back to care campaign, multi month dispensing of ART and the health information systems built through 18 years of collaboration with PEPFAR/CDC support played key role.
- The systems and EOC built through PEPFAR/CDC support were leveraged to rapidly reestablish service and verified the active ART status of 95% of persons at risk for interruption and to increase VLC.
- The Amhara RHB's emergency response approach, standard operating procedures, and tools provide a model for other areas impacted by armed conflict..

ADDITIONAL KEY INFORMATION

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The results and conclusions from this emergency response report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention (CDC) and affiliated institutions and there is no conflict of interest of the authors.

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