

Government of the Republic of Zambia



Ministry of Health

Lifelong Antiretroviral Drugs (ARV's) for all HIV
positive Pregnant Women in Zambia

Policy Guidelines for Health Facilities in Zambia

January 2013

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1 Introduction

- 1.1.1 In May 2012 Zambia re-affirmed its commitments at the first annual face-to-face gathering of Ministers of Health and representatives from the 22 focus countries since the launch of the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping Their Mothers Alive in 2011.
- 1.1.2 In line with this Zambia is taking a policy direction of providing free antiretroviral drugs for life in public health institutions to all pregnant women who test positive for HIV regardless of their CD4 count.
- 1.1.3 The goal is to reduce the number of HIV exposed infants who acquire the HIV infection from their mothers either during pregnancy or the breastfeeding period to less than 5% through mother to child transmission (MTCT) of HIV. This is the country's response to the global strategy of elimination of MTCT of HIV.
- 1.1.4 Government has taken this policy decision in order to make the implementation of eMTCT much simpler and more effective. All positive pregnant women will receive treatment immediately and for life regardless of CD4 count and infants will be provided with ARVs from birth through to six weeks regardless of feeding method.
- 1.1.5 This policy will build on the successes of the current eMTCT program by making the process of accessing treatment easier to implement. Antiretroviral drugs (ARV's) procurement and supply management will be streamlined while linkages between eMTCT and Antiretroviral Therapy (ART) programmes at community level will be strengthened.
- 1.1.6 In addition to the operational benefits, this new policy provides additional health benefits of lower HIV transmission to infants, improved maternal health and lower transmission to HIV-negative male sexual partners.

2 Guiding Principals

- 2.1.1 Free ART will be provided in all health facilities immediately and for life to all pregnant women who test positive for HIV regardless of their CD4 count. Therefore, all pregnant Zambian women will have free access to ARV drugs.
- 2.1.2 All infants born from HIV positive mothers will be provided with ARVs from birth to six weeks, regardless of feeding method.
- 2.1.3 Free services in this context will include all aspects of ART services i.e. on site tests before initiation of treatment (Hemoglobin, Protein and Bilirubin, TB Screening), and tests required for patient screening and monitoring (CD4 count, Chemistry, Syphilis, Viral Load and Early Infant Diagnosis).
- 2.1.4 The policy change entails that all health facilities offering eMTCT services in the country will be enhanced to be able to initiate positive pregnant women on treatment for life soon after completion of required baseline laboratory tests.
- 2.1.5 Pregnant female refugees and their infants just like all other Zambian citizens shall have free access to these ART services when they test positive.
- 2.1.6 Foreign nationals, excluding refugees shall pay the full cost of ART.

3 The Implementing Facilities

These guidelines will be implemented in the following facilities offering eMTCT services:

- 3.1.1 All government health facilities
- 3.1.2 GRZ/Non health sector facilities such as those of the Ministry of Defence, Home Affairs, Education and other line Ministries
- 3.1.3 Non- Governmental Organisation facilities accessing GRZ funding and/or development assistance
- 3.1.4 Churches Health Associations (CHAZ) health facilities
- 3.1.5 All private facilities
- 3.1.6 Other health facilities that are providing ART to Zambians but are supported by Cooperating partners and other International Organizations

4 The roles of the various health care delivery levels

4.1 National Coordination

The Ministry of Health at the Central Level will:

- 4.1.1 **Oversee and harmonize ART implementation within the ambits of the National Health Strategic Plan.**
- 4.1.2 **Develop guidelines and set standards for the ARV programme**
- 4.1.3 **Recommend minimum requirements for health facilities and providers of ART and eMTCT services**
- 4.1.4 **Develop estimates/forecasts for country needs for ARVs and other HIV related drugs (including drugs for the management of opportunistic infections).**
- 4.1.5 **Monitor and evaluate the overall ARV programme**
- 4.1.6 **Provide technical support and supervision to the provincial medical office, district medical office and health facilities.**
- 4.1.7 **Coordinate and manage the ARV drug supply chain**
- 4.1.8 **Assess training needs and develop training materials and programmes**

4.2 Provincial Medical Office (PMO)

The Provincial Medical Office will:

- 4.2.1 Provide technical support and supervision to the district medical offices and implementing health facilities**
- 4.2.2 Be responsible for organizing periodic evaluation of the ART programme at their respective ART sites and report to the Ministry of Health on all issues related to the implementation process and impact of the programme**
- 4.2.3 Monitor and evaluate ART programmes in the province as per guideline**

4.3 District level Coordination

District level coordination will fall under the Ministry of Community Development Mother and Child Health. The Districts will be responsible for:

- 4.3.1 Ensuring that the new ART guidelines are operational in their districts**
- 4.3.2 Coordination, monitoring and evaluation of all ART related activities in the districts**
- 4.3.3 Ensuring that National treatment guidelines for ART are adhered to by all implementing sites**
- 4.3.4 Making recommendations for the improvement of infrastructure at health facilities in order to be able to deliver ART to all positive pregnant women**
- 4.3.5 Making recommendations for health providers to be trained on ART management**
- 4.3.6 Making estimates for district needs for ART and other HIV related drugs.**
- 4.3.7 Ensuring adequate staffing for administering ART**

5 Monitoring and Evaluation

Monitoring and evaluation is critical to the long-term success of the ART program in Zambia. The ART programme will be monitored and evaluated in the following areas:

5.1.1 The overall implementation of ART

5.1.2 The clinical evaluation of women and infants on ART

5.1.3 Ensuring adherence and program retention for beneficiaries of these services

5.1.4 The development of primary and transmitted HIV drug resistance monitoring

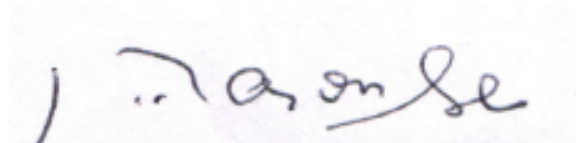
5.1.5 The ARV drug supply chain

5.1.6 The financial aspects of providing the ART services

5.1.7 The surveillance of birth defects

6 Operationalisation of the Policy

The policy will come into force with immediate effect.



Dr. Joseph Kasonde, MP.

Honorable Minister of Health

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