INTEGRATING REPRODUCTIVE HEALTH AND HIV/AIDS SERVICES IN KENYA

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OUTLINE

- Why integration?
- Kenya’s experience on integration
- How has PEPFAR contributed to integration?
Why Integrate HIV and RH Services

Clients Seeking HIV-related Services

AND

Clients Seeking RH Services

Share common needs and concerns:

- are often both sexually active and fertile
- are at risk of HIV infection or might be infected
- need access to contraceptives
- need to know how HIV affects contraceptive options
Annual no. unintended & unwanted births in PEPFAR focus countries

Total = 412,000

- # unwanted HIV+ births
- # unintended HIV+ births
Benefits of FP in PMTCT Programs

Benefits of PMTCT services alone and with family planning services in PEPFAR Focus countries in 2007

- Child HIV infections averted
- Child deaths averted
- Unintended pregnancies averted to HIV+ women

Source: Stover et al. 2004:
Preventing Unintended Pregnancies Will Help Achieve HIV Goals

- UNGASS goals cannot be met without preventing unintended pregnancy

- Even moderate decreases in unintended pregnancies to HIV+ women will reduce same number of HIV+ births as current PMTCT programs

Source: Sweat et al, AIDS 2004; 18(12): 1661-71
KENYA EXPERIENCES IN INTEGRATING RH/HIV
RH/HIV INTEGRATED SERVICES

- VCT
- PMTCT
- Comprehensive Post Rape Care
- Comprehensive Youth friendly Services
- ART
- CT
- HBC

Youth friendly Services

Comprehensive
Steps in Integrating FP into VCT in Kenya

- Assessment (June 2002)
- Strategy development
- Curriculum development
- Advocacy / sensitization
- Scale up FP in VCT (ongoing)
- M&E
- TOT & Provider training/ supervision
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Enabling Factors for Integration

- Supportive policy environment
- Existence of the relevant technical committees
- Existence of service provision guidelines that have both RH and HIV components
- PEPFAR support
Challenges

- Lack of ownership by Provincial and District Managers
- Human resource shortage
- Shortage of commodities, e.g. contraceptives
- No FP indicators to report on under the VCT program area
- Inadequate co-ordination between RH and HIV programmes
- Inadequate funding for scale-up
Lessons Learned

- Advocacy at various levels necessary
  - Build consensus among stakeholders
  - Time-consuming exercise

- Supportive service delivery guidelines and MOH leadership are major advantages

- Limited co-ordination between RH and HIV programmes – a deterrent

- Ensuring commodity security
HOW PEPFAR HAS CONTRIBUTED TO INTEGRATION
How PEPFAR Has Contributed to Integration

- Supported the intervention activities for FP/VCT integration
- Supported OR to understand service delivery issues of FP/VCT integration
- Piloting of key integration strategies
- Scaling up integration within the APHIA11 program
Challenges in the Use of PEPFAR Funds for Integration

- Lack of clear guidelines on how PEPFAR funds can support RH programs
- PEPFAR funds could not be used to procure RH commodities and supplies
- Inadequate knowledge of policy makers, program managers and service providers in the HIV program on RH issues
Opportunities for PEPFAR to Support Integration Work

- Heavy investments have been made in infrastructure that can be showed by HIV/RH services
- PEPFAR programs reaching out to hard to reach audiences for RH programs
- Improved understanding and perceptions of RH among HIV service providers
- Emerging favourable PEPFAR guidelines that support integration of RH/HIV services
What Should PEPFAR Do?

- Encourage and support funding recipients to make prevention of unintended pregnancies in HIV+ women central to their HIV prevention efforts.
- Support scale up of effective FP/HIV models with HIV $.
- Include family planning indicators as measures of programmatic success.
  - “What gets measured gets done”
Take Home Messages

- Contraception should be a core part of HIV prevention, care, and treatment programs

- Preventing unintended pregnancy among women with HIV:
  - Is cost-effective
  - Contributes to HIV prevention goals

- It’s feasible to integrate RH/FP into HIV programs

- PEPFAR should make greater investments in RH/HIV integration to enhance the public health impact of its HIV programs