BAYLOR • • • FOUNDATION



2023





Global Health Network







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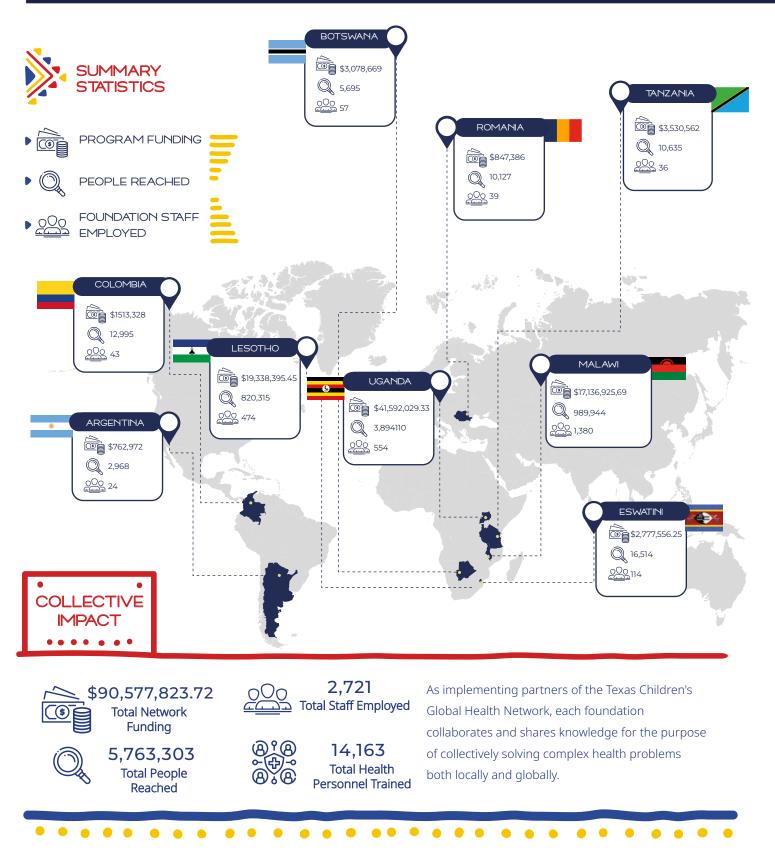


RETWORK IN ACTION



Global Health Network

Baylor College of Medicine





Hospital

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OUNDATION BACKGROUND

Baylor College of Medicine Children's Foundation Eswatini (also known as Baylor Foundation Eswatini) is a self-governing, nonprofit organization dedicated to child health and development. Established in 2005, it collaborates closely with Baylor College of Medicine and Texas Children's Hospital, located in Houston, Texas, U.S.A. In partnership with Eswatini's Ministry of Health, the foundation launched the Children's Clinical Centre of Excellence (COE) in Mbabane, situated in the Hhohho region, in 2006. This center, operating under a public-private partnership model, aims to enhance the healthcare sector's response to HIV. It does so by providing comprehensive, family-focused healthcare services, education, and clinical research, with a particular emphasis on pediatric and adolescent care. Two Satellite Centres of Excellence (SCOEs) have been built and operationalized in two out of four of the country's districts. In 2009, the first SCOE was inaugurated in Manzini region and linked to the Raleigh Fitkin Memorial Hospital. The second SCOE was opened in 2010 in Shiselweni region and linked to Hlatikhulu Government Hospital.

The Ministry of Health takes a Health Systems Strengthening approach to achieve an HIV-free generation, through partnerships and strong ties with civil society, including its public-private partnership with Baylor Foundation Eswatini. The foundation implements a child and adolescent health program, focusing on interventions that address the major causes of morbidity and mortality in children as well as those which are proven to be highly effective in improving the health and development of adolescents living with HIV. Baylor Foundation Eswatini is the national leader in pediatric HIV/AIDS and TB care and treatment in the country, caring for almost half of all children on antiretroviral therapy (ART) in Eswatini. Since inception, the Foundation's scope has increased to cover other co-morbidities, such as screening and treatment of cancers, and other non-communicable diseases. Additionally, Baylor Foundation Eswatini offers health workforce trainings and clinical research.







A nation with healthy and fulfilled children, adolescents, and their families.



To provide high-quality family-centered pediatric and adolescent health care, education, and clinical research in Eswatini.



- **Excellence** We offer distinct and superior quality care for children in the country.
- Child Centeredness Centre of Excellence for all health issues relating to children.
- **Integrity** We are committed to transparency in our work and work with honesty.
- Accountability All actions we take are based on responsibility and answerability.
- **Teamwork –** We work jointly and in collaboration to achieve excellence.
- **Partnership** High impact care is provided in collaboration with key stakeholders.
- **Ethical** Fair, just and right moral values and principles are adhered to. This includes strong recognition of the rights of the child.
- **Commitment –** We are dedicated to serve children in a holistic, truthful, and timely manner.









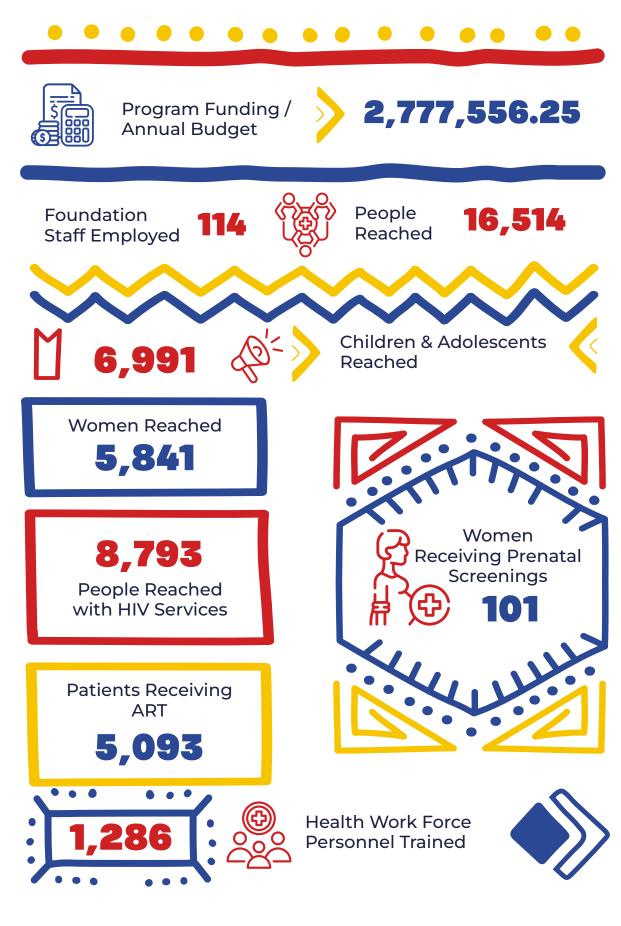
It is a great honor to join Baylor Foundation Eswatini and I extend my appreciation to the Board of Directors, staff, donors, and stakeholders for receiving me with warm hands.

Despite the changing and highly competitive donor landscape, Baylor Foundation Eswatini continues to serve children, adolescents, and families in need of health care services within our sites and in communities. We work closely with our Ministry of Health to implement HIV, TB, cancer programs and conducted studies in an effort to find solutions to improve health care for children, adolescents and their families.

The Foundation contributes immensely to reaching the UNAIDS 95-95-95 goal with strong leadership from Ministry of Health as the main funder. Our results are perfectly in line with our mission, and we shall continue to provide high quality family centered care to families in need.

In 2023, we had fourteen (14) projects running with a total of over 110 employees on the ground working tirelessly to give our beneficiaries health assistance. Our employee commitment and support enable the Foundation to pursue its vision. We are also grateful to our Board of Directors, donors, funders and partners for their dedication and support in pursuing the Foundation goals. We've integrated HPV vaccination services for girls and are in the process of assisting the Ministry of Health to establish a pediatric oncology unit in Eswatini. We cannot wait to see the organization grow with inclusion of innovation and the introduction of new services.

This report provides highlights of some of the activities and accomplishments achieved by Baylor Foundation Eswatini this period. We look forward to continuing to work with our partners and beneficiaries in the coming years.





Global Health

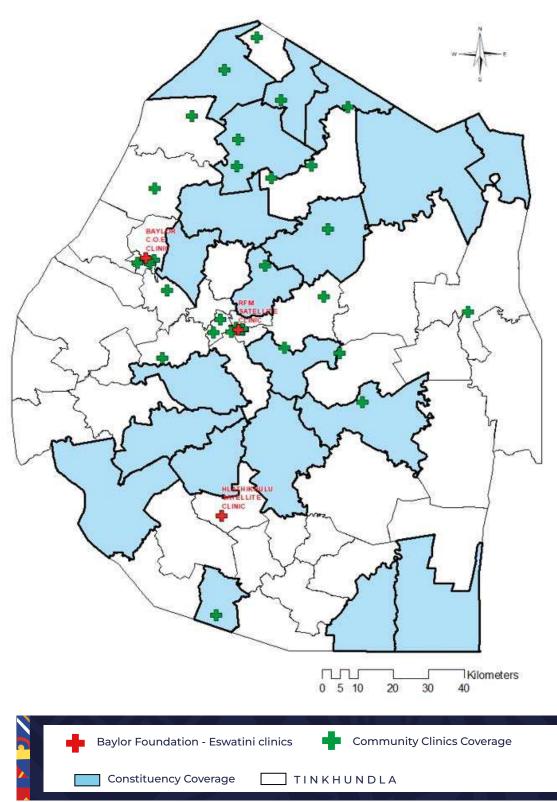
Network

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ESWATINI



Support for Adolescents Living With HIV

Baylor Foundation Eswatini collaborates with key partners and stakeholders to strengthen HIV prevention, treatment, and care for children and adolescents in Eswatini. Several interventions have been initiated to ensure children and adolescents receive the clinical and psychosocial support they need to reach viral load suppression and have positive health outcomes.

Over the years, projects focusing on adolescents have expanded from facilities to community-wide initiatives. We began implementing a treatment literacy and support project called "Halting the spread of HIV and reversing its impact in Eswatini" in July 2021. This project aims to provide anti-retroviral therapy (ART) literacy for people living with HIV, including adolescents and adults, in communities around the country thus improving adherence to ART and supporting the 95-95-95 global initiative. We have adopted two service delivery models, each targeting a specific age group. For adolescents living with HIV, we deliver HIV literacy services through a cadre known as Community Adolescent Treatment Supporters (CATS). With this model, the CATS help establish, decentralize, and maintain Teen Clubs in community clinics. For adults living with HIV, we deliver these services through Community Expert Clients (CECs) who establish community-based support groups in selected communities.

A total of 613 adolescents living with HIV (ALHIV) were reached by CATS with treatment literacy and psychosocial support (PSS) through Teen Club and home visits. During our Teen Club sessions, we provide health education, and ongoing adherence support to ensure adolescents continue adherence to their medication and live healthy lives through fun themed lessons. The project expanded its coverage to 24 Teen Clubs from 18 in 2022 - each Teen Club is directly linked to one of 21 government health facilities around the country. Home visits are also conducted to make up for missed group education sessions, provide close adherence support or on client's request.







As a result of these above-mentioned efforts, health outcomes for ALHIV have been impressive: 90% had their adherence to ART medicines maintained at optimal level, and an impressive 96% had attained viral load suppression. Furthermore, retention rates have also been very impressive for this target group as only less than 1% were lost to follow-up from care.

In addition to our community initiatives, we offer specialized health care services to adolescents at our COEs and SCOEs. Our approach to adolescent care is multi-faceted, including the use of an innovative interactive communication app called U-report. This platform allows adolescents to get accurate health-related information, especially about HIV prevention, care, treatment, and disclosure, directly from healthcare professionals.

Moreover, we implement "in-reach" services, where our team visits children and adolescents at their homes if they have stopped their treatment. These visits, conducted by social workers who made 193 home visits in 2023, aim to assess each situation and discuss ways to recommence their treatment.

Understanding the financial barriers some patients face, we provide transportation allowances to assist with the costs of clinic visits. Through these combined efforts, we've successfully kept the annual rate of children and adolescents lost to follow-up under 1%.



Support for Pregnant and Lactating Teenage Mothers

Background

In 2019, we established Teen Mom Club, a support group for HIV-positive pregnant and lactating teenage mothers. Establishment of this support group was necessitated by poor health outcomes for the children of teen mothers because of the many psychosocial challenges the teen mother undergoes during the pregnancy and lactating periods. Because of the past successes with other projects targeting at improving adolescent health outcomes (namely Teen Club), Baylor Foundation Eswatini was uniquely situated to be a community leader in the development of Teen Mothers Clubs around the country. Teen Health Assistants were recruited through this project to facilitate support group sessions for the teen mothers. During these sessions they provide a range of psychosocial lessons and help form relationships with the teen mothers. In addition to the sessions, the Teen Health Assistants make follow-up calls to mothers who are late for their clinic appointments, and also conduct home visits for those who have defaulted treatment. The ultimate goal is to support pregnant and lactating teen mothers to ensure viral suppression, prevention of mother to child transmission of HIV and financial independence through capacity building on income generating skills and provision of seed capital.

Achievements

Development and Growth of Support Groups: Our support groups are operational in 35 facilities, and we had 259 active participants in 2023. Our viral load management focus led to 94.3% suppression, with only 13 unsuppressed. Our focus on viral suppression with this group allowed us to learn that lack of viral suppression is likely attributed to disclosure issues with partners. To address this complex issue, we have implemented one-on-one sessions and ongoing psychosocial support for these young mothers.

Mental Health Initiatives: To address mental health issues amongst our teen mothers, we conducted depression screening for 181 participants. From these screenings, 9 showed signs of severe depression. We are channeling resources to tailored mental health support for these teens, including counseling and peer-group support, to alleviate these distressing symptoms and enhance their wellbeing.

Promotion of Contraceptive Use: Initially, 104 (63.4%) eligible teens were on contraceptives. Through our ongoing education and advocacy efforts, we have seen this number increase to 181 (78.4%). While we have seen significant progress in contraceptive uptake, there are still 22% of our participants who are not on contraceptives due to a variety of circumstances. Some are utilizing condoms or abstaining, others are







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in the postpartum period where they are not yet eligible for certain contraceptives, and some are in the process of transitioning to alternative methods like the IUD due to adverse reactions to the implant. We continuously monitor this aspect to ensure that our participants have adequate access to contraceptives.

Entrepreneurial Empowerment: In our entrepreneurship program, 176 teens have successfully completed business assessments and received seed capital to commence their business ventures. To reinforce the learning process, we facilitated a "Sharing & Learning" event for 93 teen mothers from various sites to share their experiences. This peer-led interaction has enriched their understanding of business management, family planning, and HIV status disclosure, resulting in an improvement in both their business acumen and personal growth.

Financial Literacy and Accountability: A standout success has been our savings and lending groups initiative across different facilities. What makes these groups unique and empowering is that they are governed by a constitution crafted and agreed upon by the teens themselves. This constitution sets the ground rules for their financial transactions and the accountability is teaching our teens the value of commitment, responsibility, and the fundamentals of finance. Given that the formal banking system does not grant loans to these young mothers, the importance of these groups cannot be overstated. Our ultimate goal is to ensure these teens can operate these savings groups independently, fostering financial independence and stability.

Nurturing Career Development: Understanding the teens' aspiration for business growth, we have been proactive in assisting them in identifying relevant grants. We provide guidance and support during the application process, encouraging them to leverage these opportunities to advance and sustain their entrepreneurial dreams.





Testimonial - Support for Pregnant and Lactating Teenage Mothers Project

Throughout the duration of our project, we have had the privilege of being part of and witnessing numerous transformative stories. One that stands out is the journey of a young mother from the outskirts of Mbabane, the capital city of Eswatini. This case study underscores the profound impact our interventions can have when aligned with dedication and passion.

Background: Our team identified a 19-year-old mother living with her grandmother. Orphaned due to the HIV epidemic and living with HIV herself, her circumstances presented numerous challenges. Yet, beneath these challenges lay immense potential.

Our Intervention: Having enrolled her in our Pregnant and Lactating Teen Mothers Program, we undertook a business assessment tailored to her interests and skills. She showed an inclination towards poultry, leading her to embark on a venture selling broilers. We provided support by restocking her broilers thrice, and she expanded her business to sell eggs as well.

Soon after, she approached our team with a long-held dream: she desired to leverage her business profits to pursue education in fashion design. Together, we formulated a strategy that not only maintained the sustainability of her existing business but also facilitated her enrollment in a fashion design institution.

Outcomes: This May, she celebrated a significant milestone – her graduation as a qualified fashion designer. Simultaneously, her business continues to flourish, now encompassing broilers, eggs, and even the addition of achaar (spiced pickled fruit and vegetables).

Reflection: This young entrepreneur's journey is a testament to the transformative power of targeted support. From the outskirts of Mbabane to a thriving business and a qualification in fashion design, her trajectory encapsulates the spirit of our project. We couldn't be prouder of her achievements and the future she is sculpting.

(Note: All names and identifying details have been omitted to respect privacy.)



Texas Children's

Network

Baby Club – Support for Mothers Living with HIV and Their Babies

In 2017, we established an initiative known as 'Baby Club', a support group for HIV-positive mothers with their HIV positive babies under the age of five years. Baby Club provides psychosocial support to caregivers, and also fostering a climate of developmental play that will allow these children to thrive. Mother-baby pairs come together monthly for support, education and fun at our centres.

Since its inception in June 2017, the attendance of mother-baby pairs has been steadily increasing from 10 at the initial meetings to 96 in 2022 and 150 pairs in 2023. We have since rolled-out this initiative to our satellite clinics in Manzini and Hlatikhulu. We are grateful to our partners for providing funding to support transport costs for these mothers' clinic visits and provision of snacks during group sessions.





We offer a variety of pediatric centric clinical services within our centres, mainly focusing on care and treatment of HIV, TB and concurrent diseases which ultimately helps the country to achieve its broad mandate of attaining viral suppression amongst the pediatric population. Our services are family-centered, meaning we also take care of the caregiver(s) of the affected child/adolescent to ensure positive health outcomes for the whole family. Below is a narrative of these clinical services we provide in our COE/SCOEs.



This service contributes to the attainment of the first 95 from the 95-95-95 UNAIDS Global targets. Our main aim is to increase the uptake of HTS services for detecting children and adults at an early stage who are HIV infected and link them to treatment. Our target population are HIV-exposed infants; however, we take a family-centered approach and expand this service to the entire family of the exposed child.

There were 645 HIV tests performed in 2023, and 43 people were diagnosed HIV positive - 12 infants less than 1 year, 9 children from 2 to 9 years, 7 adolescents from 10 to 19 years, and 15 adults over 20 years. All those testing HIV positive were initiated on ART.

To reach the entire family of the exposed infant or all contacts of anyone testing HIV positive in our facilities, we have employed the 'Targeted Testing' strategy. This includes Index Testing and HIV Self-Testing (HIVST), which enables us to ensure HIV testing for everyone who is eligible, even those who are difficult to reach. We tested 22 people through the index testing strategy.









We continue to provide comprehensive Antenatal Care Service (ANC) and Prevention of Mother-to-Child (PMTCT) services. These services positively contribute towards the country's HIV response by ensuring that no child is born with HIV. Our nurses and doctors ensure that as soon as a pregnant woman presents herself at our COE clinic, she is admitted for ANC immediately. HIV testing services are mandatory and serve as an entry point for these services. For HIV-positive women who are not on ART, they are immediately initiated and closely monitored. We have a mentor mother who provides psychosocial support to HIV-positive pregnant and lactating women and their partners to help them cope with their HIV status, including adherence to medication. Her main focus is those mothers with detectable viral loads. She also conducts home visits for such support. These mothers receive transport reimbursements for their clinic visits, to ensure that they do not miss their clinic appointments due to financial constraints.





All these efforts have yielded excellent outcomes and also observable challenges. As a highlight, no child has been born HIV positive from mothers who received ANC services from our COE clinic. In 2023, 64 women came to the Baylor Foundation Eswatini COE for their first prenatal care (ANC) visit, and among these, five were teenagers aged 12 to 19. However, just 21 women, or 32.8% of all women who presented for their ANC visit, received these services during their first trimester of pregnancy. This indicates a difficulty in ensuring that expectant mothers seek care early on in their pregnancies. Early presentation for ANC allows for early management of viral load and ensure it is undetectable throughout pregnancy and delivery to prevent mother-to-child HIV transmission.

Only 5 women had a detectable viral load at ANC enrollment and these were further enrolled for Step Up Adherence Counseling (SUAC). Our COE performs genotype testing for those with persistently high viral loads, and they are put on empiric 3rd line ART regimen.



Family planning (FP) services have been well integrated into the pediatric HIV/TB program, enabling adolescents and women of childbearing age to prevent unintended pregnancies. We offer family planning according to national guidelines, with commodities including combined methods (pills, patches, and combined injectables), progestogen-only methods (injectables, implants, and pills), and intrauterine contraceptive devices.

Our clinicians empower all sexually active women to choose any contraceptive method recommended as part of the WHO Medical Eligibility Criteria. Due to the high teenage pregnancy rate in Eswatini, contraceptives are not limited to only families but are also offered to adolescents visiting our facilities. This aims to reduce unsafe abortions.

In 2023, the uptake of FP commodities has been steadily maintained, with 913 patients actively on family planning compared to 906 patients in 2022. Though supplies of family planning commodities were interrupted in 2023, nation-wide supply chain interruptions stabilized in June 2023. Implants remained the method of choice over oral contraceptives within the populations we serve in the COE/SCOEs because of pill burden.

To address sexual reproductive health issues specific to the needs of adolescents under our care, we started a Teen Health Program at our centres. This initiative offers teenagers education on sexual and reproductive health, as well as life coaching and career advice, which helps overcome obstacles affecting their commitment to HIV and TB treatment regimens. The number of adolescents aged 12 to 19 using contraceptives has been steadily rising annually, from 21% in 2022 to a current rate of 36%.







We continued with the "test and start" model in the provision of ART services, which encourages everyone diagnosed with HIV to begin ART as soon as they learn their status. We have seen our ART coverage, calculated as the proportion of HIV-positive clients who had initiated ART, maintained at 100% with most of our patients starting treatment within seven days of diagnosis. At present, our centres are treating 5,097 patients with ART, of whom 2,411, or 47%, are children and adolescents under the age of 20. Over the years, the pediatric cohort is slowly transitioning into adulthood, and in recognition of this change, our programming has strategically adjusted to align with these changing dynamics.

We continued to follow-up on patients defaulting or missing their appointments to ensure that they are retained in care for positive health outcomes. Our receptionists and social workers worked tirelessly to ensure that defaulting patients are brought back to care through phone calls and home visits. We also have innovated technologically, partnering with a social entrepreneurship organization called Connect Health to implement an appointment reminder system. Through this system, automated SMS messages are sent to all our patients as a reminder for their clinic appointment the night before and the morning of their appointment date. As a result, we have maintained our annual retention rates at above 95%.





Viral load testing for each and every patient on ART is vital as it is a measure of treatment success or failure. Amongst patients under our care, 98% have an up-to-date viral load measurement documented, depicting excellent quality of care. Figure 1 below depicts trends in viral suppression rates by age-group of patients enrolled within our centres during the year 2023.

We have noted an overall steady increase in viral suppression rates for patients under our care from 93% to 95% by June 2023. An improvement in viral suppression is noted from all age-groups, except for the 0 to 4 years age bracket which begins to decrease around January 2023. Though all agegroups show improvement, some are still very challenging to reach the 95% target, specifically adolescents 10 to 24 years old, and children under 5 years old (87%). The latter age group has fewer members, which could affect its percentage disproportionately.

Strategies to address this gap are being implemented, such as the Teen Health program, Teen Club, and adolescent camps. We are committed and trending toward reaching the 95-95-95 targets for all age-groups by the end of 2023.

85%		1.1.2								~		
80%												
75%	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
	89%	89%	91%	94%	94%	94%	93%	91%	89%	85%	87%	87%
	96%	95%	95%	95%	95%	95%	96%	96%	96%	94%	95%	95%
(10-14) years	91%	91%	91%	93%	93%	93%	94%	94%	94%	93%	93%	93%
(15-19) years	89%	88%	89%	90%	90%	90%	91%	91%	92%	92%	92%	92%
 (20-24) years	92%	92%	92%	92%	92%	92%	92%	92%	92%	93%	94%	94%
	97%	97%	97%	98%	98%	98%	98%	98%	98%	98%	98%	98%
	93%	93%	93%	94%	94%	94%	94%	94%	94%	94%	95%	95%



100%

95%

90%















Pediatric HIV Drug Resistance Program

In January 2013, the first pediatric client with HIV drug resistance was identified in the country. As the year progressed and more children were identified, it prompted the country to establish a program specifically for management of children with HIV drug resistance. A pediatric third-line ART program was then officially launched in November 2014 to address this need, and Baylor Foundation Eswatini, with its expertise and leadership in pediatric care, was entrusted to lead this national program. Our COE clinic was made the national referral center for pediatric third-line management. This program facilitates genotype testing for patients who may have developed resistance to HIV drugs, and initiates a third-line treatment regimen for those confirmed to be resistant. From our centres, these patients have access to specialized services such as stepped-up adherence counselling, challenge clinic, and in-reach (home visits), which are all conducted by our social workers. In addition, all clients enrolled in this program are given transport reimbursement for all their clinic visits through partnerships with local non-governmental organizations, as well as UNICEF.

As the national referral center for the third-line ART program, we receive genotype requests for pediatric clients through the national third-line ART technical working group. Through various funding channels, we send dried blood spot (DBS) genotypes either through the National Health Laboratory Service (NHLS) to Lancet Laboratories in country or directly to South Africa.

This program has expanded over the past decade since identifying the first child in need of third-line ART drugs. The program has been decentralized countrywide, and we support various facilities nationwide in pediatric third-line care. We continuously conduct national trainings to build capacity of healthcare workers nationwide in identifying and treating children with HIV drug resistance in Eswatini. We currently have 45 active patients under our care, and 16 decentralized pediatric clients are receiving care at other Government health facilities.





Working together with Texas Children's Hospital (TCH) and Baylor College of Medicine (BCM) Global Tuberculosis (TB) Program, Baylor Foundation Eswatini remains at the forefront of enhancing pediatric TB care. The foundation delivers top-notch combined TB/HIV treatment and adopts a family-focused strategy to support not only patients with TB but also their relatives who may be at risk. Our TB COE wing offers a onestop shop for all drug-susceptible, drug-resistant, and preventive care—decreasing the time to diagnosis and treatment for patients.

In collaboration with the TCH/BCM Global TB program, Texas Children's Global Health Network foundations in five countries are implementing the TB GAPS project, funded by the U.S. Centers for Disease Control and Prevention (CDC). The study, initially started at Baylor Foundation Eswatini, is expanding this year to include various Network locations throughout Africa. This study will provide critical actionable data to improve care for children and adolescents living with HIV.

Baylor Foundation Eswatini works hand in hand with the TCH/BCM Global TB program to implement multiple other research projects, with funding through the U.S. National Institutes of Health (NIH) and the European Developing Countries Clinical Trials Partnership, focused on improving the diagnosis of TB in children and people living with HIV using stool diagnostics. The team is working closely with the National TB Control Program (NTCP) to ensure that stool diagnostics are adopted and rolled out as part of standard practice.

We are also partnering with the TCH/BCM Global TB program to implement a multinational project designed to identify clinical prediction tools that support differentiated service delivery in children and adolescents living with HIV. Such tools will allow patients to receive more intensive care when needed, and also to focus on other things in life when they do not.

Further, we partner with the TCH/BCM Global TB program and our colleagues from the World Health Organization (WHO) supra-national reference laboratory in Borstel, Germany to establish TB sequencing capacity in Eswatini. This initiative was implemented to address a common, but difficult to detect, resistant TB strain in Eswatini.

Other collaborations include partnership with the TCH/BCM Global TB program, University of Texas School of Public Health, University of Eswatini and Ministry of Health to operate a training program for young emaSwati clinical researchers. The program has placed three PhD candidates at University of Texas School of Public Health and has initiated a comprehensive two-year training program for 15 young scholars in Eswatini.

Training remains a focus of Baylor Foundation Eswatini. We continue to serve as the lead partner for education on pediatric TB, conducting national trainings and mentorship for both nurses and doctors.







The productivity of employees and the success of the organization are significantly influenced by mental health. Baylor Foundation Eswatini has a wellness team which seeks to address mental health challenges for staff through holistic programs that focus on mental, emotional, financial and physical health of employees. Baylor Foundation Eswatini values the well-being of its clients hence its supportive approach for its staff. In 2023, our wellness program mirrored the organization's values of excellence, teamwork, commitment, partnership, integrity and accountability by rolling out Culture Day, Day of the African Child, Fruit Fridays, Rainbow Picnic, Spring Day, Vintage Day, team building exercises, and the Texas Children's Global Health Network Walk the World for Wellness Challenge.





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