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Researchers move to boost prevention of mother-to-child HIV spread in Nigeria, others

By Emeka Anuforo, Abuja | 21 September 2015 | 5:24 am



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THE World Health Organisation (WHO) has launched a project to scale up prevention of mother to child transmission of HIV in Nigeria, Malawi and Zimbabwe.

The five-year project aims to promote and support high quality, rigorous and locally-led implementation research. The project is expected to have a substantial impact on retention-in-care of HIV-infected pregnant and breastfeeding women with the associated improvement in the health and survival of the women and their children.

A World Health Organisation (WHO) survey estimates nearly all young children newly infected with HIV are infected through mother-to-child transmission (MTCT); about 90 per cent of the estimated 240,000 children who newly infected with HIV in 2013 were in the African region.

And worried by Nigeria’s rate of mother to child HIV infection, researchers, implementers and policy-makers are reviewing challenges and opportunities for improving services.

And to stem the tide of prevention of mother-to-child HIV transmission (PMTCT) in Nigeria, they gathered in Abuja at the weekend to share their research findings with policy-makers, including officials from

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state and federal agencies and other stakeholders.

They have, therefore, developed recommendations on how to place PMTCT on research priority within the context of the Nigeria HIV epidemic.

Meanwhile, speaking at the NISA Implementation Science Conference (NISA) organised by the Nigeria Implementation Science Alliance, Nigerian scientists working abroad also called on government to commit funds to researching into health issues instead of always relying on foreign partners.

Conference Lead and professor of Paediatrics and Public Health at the University of Nevada, Las Vegas, Echezona Ezeanolue, expressed concern that mother-child-transmission of HIV remains a significant public health problem in Sub-Saharan Africa, noting that new infant infections remain common despite the availability of adequate biomedical prevention strategies.

Also speaking, Permanent Secretary in the Federal Ministry of Health, Linus Awute, was optimistic that the conference and the accompanying research projects to be developed would contribute significantly to national policy.

Awute, who spoke extensively on the WHO project to scale-up PMTCT through Mr. Araoye Segilola, noted: “The Federal Ministry of Health in conjunction with the World Health Organisation (WHO) is currently co-ordinating the implementation of the INSPIRE project in Nigeria. INSPIRE stands for Integrating and Scaling up PMTCT through Implementation Research. This five-year project, which was developed by WHO, is funded by the Canadian government and is being implemented in Nigeria, Malawi and Zimbabwe.”

He noted further: “Over the years, a myriad of researches have taken place in Nigeria, many of which are not properly brought to the notice of the relevant government agencies at national or state levels. This

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must not be the case with the implementation research as the active participation of the federal ministry of health and the respective state ministry of health staff will facilitate the inclusion of the lessons learned over the course of the research into national policy and mobilize local funding for research.”



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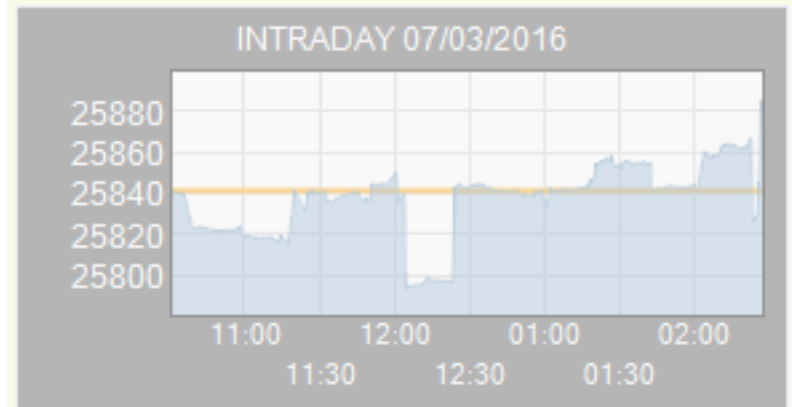
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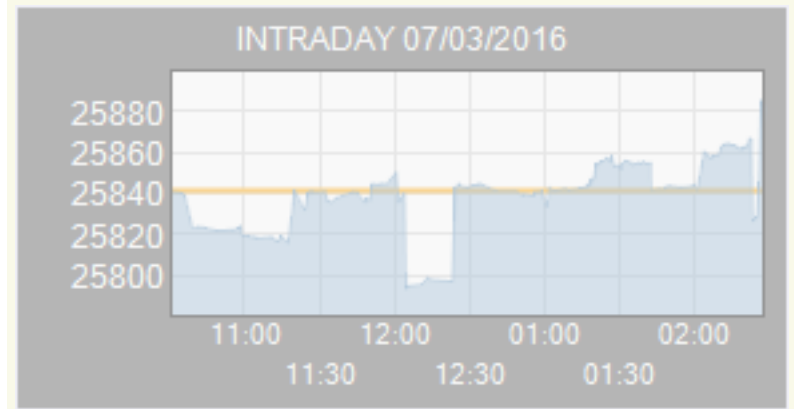
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