

STRATEGIC FOCUS

The Centers for Disease Control and Prevention (CDC) is working closely with the Ministry of Health (MOH) of the Kingdom of Eswatini (eSwatini) and partners to build capacity to improve the coverage and quality of HIV and tuberculosis (TB) and treatment services throughout all four regions to achieve 95-95-95 by 2020, as well as to ensure sustainable health systems. HIV and tuberculosis (TB) continue to be a major cause of morbidity and mortality in eSwatini.

Improving coverage and quality of HIV/TB Treatment Services strategic approaches: Develop integrated regional service delivery mechanisms focusing on facility and community populations through MOH's Regional Health Management Teams (RHMTs):

- 1) Formulate key policies and procedures to guide towards epidemic control; implement quality management systems to attain laboratory and referral facility certifications; support supervision and mentorship; ensure quality assurance processes including Site Improvement through Monitoring System (SIMS); implement customer satisfaction surveys, and process and compliance audits.
- 2) Strengthen strategic information systems to ensure accurate data collection and reporting to monitor progress and guide strategic decision-making to achieve World Health Organization (WHO) 95-95-95 goals.

KEY ACTIVITIES AND ACCOMPLISHMENTS

Strategic Information: CDC supported the Government of eSwatini to successfully conduct the HIV Incidence Measurement Survey (SHIMS) 2, which is a part of the global population-based HIV impact assessment (PHIA) initiative. The survey was conducted from August 2016 to April 2017, and preliminary results were disseminated in July 2017. CDC supports the Ministry of Health's Health Research Training Program (HRTTP), which trains local mid-career professionals affiliated with the health care system on research methodology. CDC supports the MOH's Health Research Units (HRU) and Epidemiology and Disease Control Unit (EDCU), as well as the Central Statistics Office (CSO) to promote routine collection, use, and dissemination of data for effective programming and policy making.

Prevention, Treatment, Linkage and Retention: CDC and its implementing partners provide central and regional-level support to the eSwatini National AIDS Program and the National TB Control Program. Support of comprehensive HIV services is provided to regions to improve coverage and quality of prevention of mother-to-child transmission (PMTCT) of HIV and pediatric and adult antiretroviral treatment (ART). Clinical and community-based services, mentoring, laboratory support, provider and client-initiated HIV testing and counseling services, PMTCT, and blood safety are also provided. CDC assists the MOH in planning and implementing high quality, decentralized HIV testing and treatment services (including scaling-up HIV index and self-testing, Test and Start, and routine viral load monitoring). Community HIV testing services are enhanced under the ARROWS project (ART Referral, Retention, and Ongoing Wellness Support).

Regional Health Management: Regional referral facilities, RHMT and Directorate have been trained and are now implementing functional components. The goal is to create a seamless management process from the facility through the RHMTs to the Directorate level. The World Health Organization (WHO) Stepwise Laboratory Improvement Process Toward Accreditation (SLIPTA) is also ongoing through all major public laboratories in the country.

Continuous Quality Improvement: All high volume CDC-supported facilities are assessed through Site Improvement Monitoring System (SIMS) to improve quality of service delivery and increase impact. The data is linked with Regional HIV Semi-Annual Reviews (REHSARs) and National HIV Semi-Annual Reviews (NAHSARs). These management review meetings, organized by MOH and supported by CDC, provide site, regional, and national-level performance feedback to health providers and program implementers.

Pharmaceutical and Laboratory: Extensive pharmaceutical policies, sustainable drug procurements and stock management, and drug storage and distribution has been achieved. The country has significantly improved its laboratory capacity to perform viral load testing. The increase in capacity is enabling the country to move from targeted viral load testing to routine viral load testing.

Addressing TB: CDC supports comprehensive TB/HIV activities in eSwatini, including improving and integrating TB and HIV services for co-infected individuals, and providing isoniazid preventative therapy for all eligible HIV-positive individuals.

Key Country Leadership

Prime Minister:
Barnabas Sibusiso Dlamini

Minister of Health:
Sibongile Simelane

U.S. Ambassador:
Lisa J. Peterson

CDC/DGHT Director:
Caroline Ryan

Country Quick Facts

Per Capita GNI:
\$2,960 (2016)

Population:
1.093 million (2017)

Under 5 Mortality:
70 / 1,000 live births
(2016)

Life Expectancy:
57 years (2016)

Global HIV/AIDS Epidemic

Estimated HIV Prevalence
(Ages 15-49): 27.4% (2017)

Estimated AIDS Deaths
(Age ≥15): 3,000 (2017)

Estimated Orphans Due to
AIDS: 44,000 (2017)

Reported Number
Receiving Antiretroviral
Therapy (ART): 164,243
(2017)

Global Tuberculosis (TB) Epidemic

Estimated TB Incidence:
398 / 100,000 (2016)

TB patients with known
HIV-status who are HIV-
positive: 70% (2016)

TB Treatment Success
Rate: 80% (2015)

Country Staff: 10

Locally Employed Staff: 6
Direct Hires: 3
Fellows: 1

