

PEOPLE AFFECTED

26,041 people screened for HIV in Larkana district, Sindh province

751 people (2.9%) tested positive (604 children, 135 adults, 12 age unknown) between 25 April to 2 June

324 people (43.1%) currently being treated with Anti-Retroviral Treatment

URGENT NEEDS

- Anti-Retro Viral medicines
- Rapid HIV Diagnostic Kits (RDTs)
- Medicines for treatment of co-infections
- Strengthening infection prevention and control at health facilities
- Human resources & training for health workers
- Psychosocial support for families and communities

FUNDING REQUIREMENTS

US\$ 1.055 million required immediately control the HIV outbreak, urgently treat patients who have tested positive, and prevent further transmission

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Title of programme: Human Immunodeficiency Virus (HIV) outbreak response in Larkana District, Sindh province

Objectives: To urgently treat up to 5,000 patients, screen up to 150,000 people, raise awareness amongst 1.5 million community members and control the current HIV outbreak

Timeframe: Immediate

Partners: UNAIDS, UNICEF, Centre for Disease Control, Medicines Sans Frontiers, Aga Khan University, Dow University

Funding requirements: US\$ 1.055 million

Situation

Authorities announced the current outbreak of Human Immunodeficiency Virus (HIV) in Larkana, Sindh Province in Pakistan on 25 April 2019. On 1 June 2019, 251 people were screened for HIV, of which 9 people were found to be HIV positive. In total, 26,041 people have been screened for HIV since the beginning of the outbreak and 751 people have tested positive for HIV.

Of the 751 positive cases, only 324 (43%) are receiving Anti-Retroviral Treatment (ART) due to insufficient stocks in-country. Current stocks are enough to meet the needs of 240 children until 15 July 2019, of which 231 are already receiving treatment. **This means that only 9 more children can be enrolled for treatment using available stocks, leaving many other children who have tested positive without treatment.**

WHO guidelines on HIV treatment recommend a test-and-treat strategy. In this current outbreak, people with HIV stage III and IV are the targets for treatment. However, in some screening camps, WHO-recommended standards for testing are not being implemented due to unavailability of the recommended test kits.

Possible drivers of the outbreak seem to indicate unsafe practices of blood transfusion and re-use of injection needles and syringes, although this is being further investigated.

WHO response

A WHO team of international public health experts has been deployed to conduct a comprehensive investigation of the current HIV outbreak/upsurge in Larkana. The team includes, among others, pediatric HIV treatment experts, supply chain management experts, laboratory experts, and an epidemiologist. The team, which is expected to submit its findings by mid-June 2019, has so far met with the provincial and district officials, visited health facilities, blood bank and members of the community. The team is also supporting HIV data cleaning and analysis.

WHO has declared this outbreak a Grade 2 emergency as per its Emergency Response Framework. An Incident Management Team (IMT) has been established at the WHO country office in Islamabad, Pakistan and regional office in Cairo, Egypt. The IMT coordinates WHO support to the Government of Pakistan.

WHO has delivered 5 inter-agency health kits, containing medicines and supplies sufficient for 5,000 beneficiaries for three months, to Larkana district to support the management of opportunistic infections.

WHO planned activities

A total budget of **US\$ 1.055 million** is immediately required to respond to the current outbreak. See detailed budget breakdown below.

Activity/output	Requirements US\$
TREAT	
<i>Strengthening case management</i> <ul style="list-style-type: none"> - Procurement and distribution of Anti-Retroviral Treatment (ART) for 600 children for 6 months - Establishing a new treatment centre at Retodero <ul style="list-style-type: none"> o Human resource support for six months 2 clinicians, 2 counsellors, 2 receptionist, 2 nurse, 2 lab technicians, 2 case managers, 1 data manager, 2 cleaners and 2 support staff o Procurement of 1 desktop computer, internet services - Training of 60 doctors, 100 medical technicians and 1,000 nurses on HIV case management using recommended/adapted WHO treatment guidelines - Printing and dissemination of treatment guidelines etc. - Procurement and distribution of medicines for treatment of opportunistic infections (OIs) - Transportation of blood samples for viral load testing - Cost for attachment of 6 clinicians/pediatricians for on-the-job training at the Aga Khan hospital 	340,000



<ul style="list-style-type: none"> - Training of 1,000 lady health workers in Larkana on health promotion, stigma reduction, support adherence and tracking of defaulter patients. - Tracking mechanism for lost-to-follow up for those priority clients who default to treatment - Monitoring of utilization of the treatment guidelines 	
<p>Strengthening laboratory services</p> <ul style="list-style-type: none"> - Evaluate testing /diagnostic modalities in line with WHO algorithm in Larkana - Evaluation of HIV diagnostic in Blood banks and Blood safety programs - Procurement of the HIV diagnostic kits RDT/Confirmatory kits - Trainings on WHO recommended diagnostic algorithm at screening and confirmation facilities - Training for laboratory and blood bank personnel on Biosafety and Lab Quality Management System - Participation of community based testing program in external quality assurance scheme (EQAS) - Establish EQAS for national and provincial Reference Labs - Monitoring of activities of the laboratory with specific emphasis on infection prevention and control 	280,000
<p>Providing psychosocial support</p> <ul style="list-style-type: none"> - Building capacity of the 60 healthcare working in healthcare facilities where patients are seeking care - Collaborating with the Islamic International University (IIU) and non-governmental implementing partners working in the area for the provision of psychosocial support to families of HIV-AIDS cases - Developing, printing and distributing Information, Education and Communication (IEC) materials 	50,000
CONTROL	
<p>Strengthening infection prevention and control</p> <ul style="list-style-type: none"> - Rapid assessment of IPC activities in the health facilities and blood banks - Training health staff on infection prevention and control - Procurement and distribution of infection prevention and control supplies (alcohol based hand rubs, sharps, waste collector, incinerator, Personal Protective Equipment (PPE) & supplies for disinfection/ sterilization) - Construction of an incinerator 	120,000
<p>Strengthening surveillance</p> <ul style="list-style-type: none"> - Establish an HIV sentinel site surveillance system by introducing HIV screening in the ante natal clinic based at the hospital - Develop and print tools for reporting - Establish laboratory networks for sample collection and testing at provincial and national level - Provide means of reporting and data analysis (IT equipment/data plans) - Training of health workers on line list and data tools - Monthly remuneration of focal persons in each of the sentinel sites 	120,000

- Monitoring of the reporting of cases by the health facility	
PREVENT	
<i>Sensitizing and mobilizing communities on HIV and improved uptake of health services</i>	
- Training of trainers for of lady health workers, polio teams, SMs, HCF on the use of the risk communication materials	
- Provision of Information, Education and Communication (IEC) materials, including leaflets, tweets etc.	80,000
- Support activities of lady health workers and polio teams	
- Involving schools in health promotion, protection and education interventions	
<i>Strengthening risk communication</i>	
- Development and dissemination of a risk communication strategy	
- Development and dissemination of key health messages for use (Information, Education and Communication (IEC) materials, leaflets, tweets etc.)	
- Orientations of clinicians and media on HIV risk communication strategy	
- Training of lady health workers, polio teams, Social Mobilisers (SM), Health Care Facilities (HCF) on the use of the risk communication materials	65,000
- Conduct community awareness sessions with key community leaders (e.g. religious leaders)	
- Conduct TV and radio talk shows	
Total required	1,055,000