

# BIPAI

at Texas Children's Hospital

20<sup>th</sup> Anniversary



## 2019-2020

ANNUAL REPORT



# BIPAI

Baylor College of Medicine International  
Pediatrics AIDS Initiative at Texas  
Children's Hospital

## Forging Ahead: Maintaining Excellence through Teamwork and Innovation

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**Dr. Lumumba Mwita** - Executive Director, Baylor College of Medicine Children's Foundation - Tanzania  
**Dr. Adeodata Kekitiinwa-Rukyalekere** - Executive Director, Baylor College of Medicine Children's Foundation - Uganda

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## Letter from BIPAI Chief Executive Officer

2019 was a year of transition for Baylor College of Medicine International Pediatric AIDS Initiative (BIPAI) at Texas Children's Hospital, with new leadership being appointed, successes marked and challenges faced.

BIPAI sadly lost one of its founding members with the passing of Dr. Peter Nicholas Kazembe. Dr. Kazembe was the founding executive director of Baylor-Malawi and is often considered the "grandfather of pediatrics" in Malawi. Peter made monumental contributions to the health of children and families over his decades-long career and was responsible for the growth of all clinical service lines that Texas Children's now offers in Malawi. His collaborations and mentorship impacted the careers of thousands of doctors and health professionals who now provide stellar pediatric and maternal care throughout Africa and beyond.

I am deeply saddened by his loss but know his legacy will live on in the work of many. To help make this happen, Texas Children's created a Dr. Peter Kazembe Memorial Fund to extend his legacy of providing care for the most vulnerable children in Malawi. Funds raised will benefit Texas Children's efforts toward neonatal care and training in Malawi at Kamuzu Central Hospital and the Jan Duncan Center of Excellence for Women at Area 25 District Hospital.

Promotions within the organization in 2019 included Phoebe Nyasulu, who was appointed executive director of Baylor-Malawi. Nyasulu has worked in various capacities at BIPAI's Center of Excellence (COE) in Malawi, including a lengthy stint with the Tingathe program, a community outreach program that focuses on using community health workers to improve prevention of mother-to-child transmission, early infant diagnosis, and pediatric HIV care and treatment services in remote areas.

The team at BIPAI's headquarters in Houston added Ratania Green, financial operations; Catriona Gates, marketing, communications and professional development; Lynnea Roth, Global Health Corps coordinator; and Dr. Heather Haq, BIPAI chief medical officer. All of these appointments have made our organization stronger and even better equipped to continue to grow and support the families we serve in new and exciting ways.

One of those ways is BIPAI's response to the COVID-19 pandemic, which impacted our patients and families and forced us to do things differently to ensure our employees' health, safety and well-being. From the start, we forged partnerships between Texas Children's, government officials and local leaders to devise productive pathways forward in the face of this global pandemic. Some of our efforts included providing technical assistance and resources to help our global partners prepare for and respond to COVID-19 while maintaining access to essential services like antiretroviral therapy for people living with HIV and chemotherapy for cancer patients.

The BIPAI Network held weekly calls to discuss strategies to protect the healthcare workforce, contain the spread of COVID-19, and continue to serve patients. We also hosted weekly video conferences focused on pertinent clinical information on COVID-19 and have established a COVID-19 resource library for global sites. Texas Children's and Baylor College of Medicine have also participated at national levels to shape policies aimed at curbing the impact of COVID-19 with local and regional leaders and protecting the work that's already been done to strengthen their nations' healthcare systems. Thus far, we have had to expand care in certain areas and reduce it in others with the hope of returning to a new normal in the near future.

Prior to the pandemic, BIPAI celebrated its 20th anniversary in September 2019 with the fund-raising event "Through the Lens." Presented by Chevron and hosted by Texas Children's, the event featured the work of Smiley Pool, a Pulitzer Prize-winning photojournalist who has captured BIPAI's life-changing work for the past two decades. Over the years, BIPAI has become one of the largest global maternal and child health programs in the world, providing care and treatment to more than 350,000 patients. BIPAI has established public-private partnerships in 10 countries across sub-Saharan Africa as well as Latin America and Romania. These partnerships now extend beyond the scope of pediatric and family HIV/AIDS and tackle other conditions in the developing world such as cancer, tuberculosis, malaria, sickle cell disease and malnutrition.

Pediatric surgery began and women's health services expanded in Malawi, childhood cancer and hematology services are growing in Botswana, Uganda, Malawi and Tanzania, integrated maternal-and-child health programs are up and running in Latin America and our services in Romania have transitioned to also focus on the human papilloma virus (HPV).

Helping to sustain these programs is our unique approach and challenge to building capacity of BIPAI-affiliated local non-government organizations (NGO) led by local leadership, management and staff that can solve local problems. Over the past 20 years, BIPAI has provided technical assistance to our independent NGO implementing partners in an effort to help bolster their proficiency at managing and leading large and complex projects. Their ability to be leaders in this space has allowed our partners to be competitive for funding from entities including the United States Agency for International Development (USAID).

In my new role as CEO, I am extremely proud of the accomplishments BIPAI achieved in its first 20 years and the progress the organization has made to continue to carry out its mission of providing high-quality pediatric and family-centered healthcare, health professional training and clinical research, focused on conditions impacting the health and well-being of children and families worldwide.

BIPAI is committed to its vision and mission and the people it serves despite the ongoing challenges presented by the COVID-19 pandemic and/or any other issues the future might bring. We have a strong foundation and a team of dedicated experts willing to care for those in need and to support and train others to do the same.

I am grateful to all of you who have helped make this year a success and look forward to another year of successful growth, expansion and relationship building.

Sincerely,  
**Michael Mizwa**  
Chief Executive Officer



# BIPAI HISTORY AND SCOPE



“If Baylor-Uganda has seen further, it is by standing on the shoulders of an extraordinary giant, the BIPAI Network. Because of BIPAI, we have scaled and expanded access to comprehensive HIV care and treatment for all ages in 10 Districts of the country. We can proudly say the BIPAI Network has outlived our expectations, and we are forever grateful. Together, we’ve conquered and become ‘big’ in Uganda and Africa. We are known as the hub of information regarding HIV care, treatment and research”

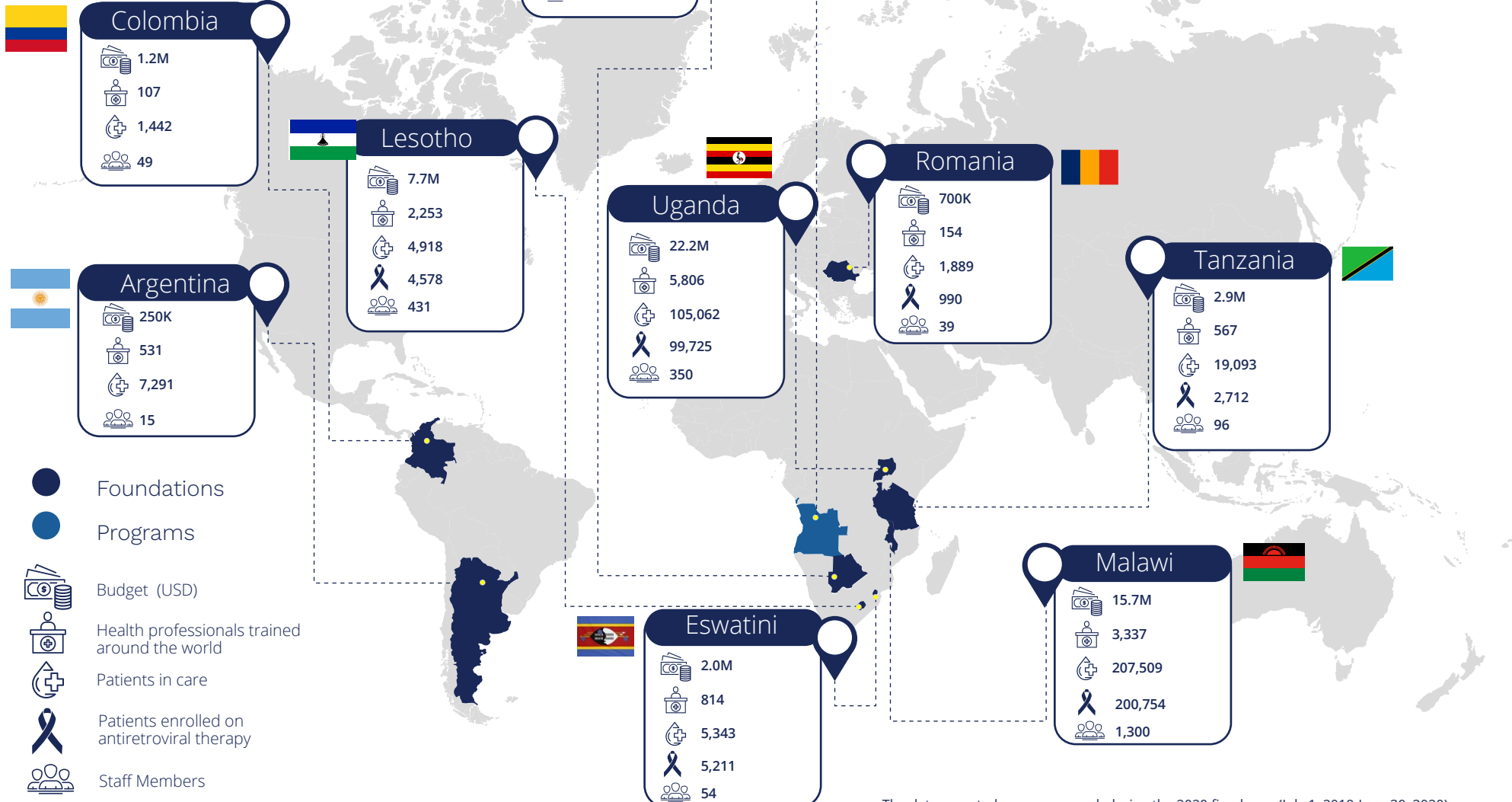
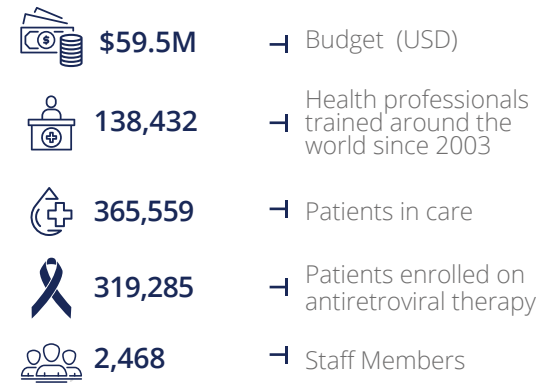
**Dr. Adeodata R. Kekitiinwa,**  
Executive Director, Baylor-Uganda

Baylor College of Medicine International Pediatric AIDS Initiative at Texas Children's Hospital is the largest care and treatment Network based at an academic institution supporting programs for HIV-infected and -affected children in the world. The BIPAI Network consists of nine independent NGO implementing partners operating 14 Centers and satellite Centers of Excellence that provide comprehensive outpatient care for more than 350,000 children and families worldwide. Over the past 20 years, BIPAI has also evolved its mission beyond HIV to include comprehensive health programs designed to work within the local health systems and improve maternal and child health outcomes. BIPAI provides technical assistance to its Network to ensure the highest level of quality care and treatment, education and training for health professionals, and operational research to improve patient care.





## BIPAI Network Statistics



- Foundations
- Programs
- Budget (USD)
- Health professionals trained around the world
- Patients in care
- Patients enrolled on antiretroviral therapy
- Staff Members

The data reported covers our work during the 2020 fiscal year (July 1, 2019-June 30, 2020).

# ABOUT THE BIPAI NETWORK

The BIPAI Network has played a critical role in catalyzing pediatric and family HIV care and treatment since its formation in 1999. The Network continues to be the largest provider of pediatric HIV care in the world, and its scope has expanded in partnership with Texas Children's Hospital to include tuberculosis, malnutrition, sickle cell disease, oncology, cardiology, emergency medicine, surgery and maternal health.

Leveraging diverse private and public funds, the BIPAI Network has a long record of developing local clinical, technical and management capacity through mentorship and workforce training at all levels, from peer supporters to physicians, nurses and pharmacists, to administrative staff and executive leaders. Training and education efforts cover all facets of program implementation to enhance local leadership and program sustainability.

Headquartered in Houston at Texas Children's Hospital and in partnership with Baylor College of Medicine, BIPAI provides access to the extensive resources of these world-class institutions and expert technical assistance, staff presence and support for physical infrastructure to our Network of affiliated independent NGO implementing partners in Argentina, Botswana, Colombia, Eswatini, Lesotho, Malawi, Romania, Tanzania and Uganda. In addition to the 15 Centers and satellite Centers of Excellence (COE) for outpatient maternal and child health services across three continents, the Network also has the Global TB COE in Eswatini and the Jan Duncan Women's Health COE at Area 25 Health Center in Malawi.

Each NGO in the BIPAI Network is an independent, local implementing partner organization. There is strong affiliation and cooperation between the NGOs throughout the Network. They share best practices and findings from clinical and operational research that inform development of joint tools and programming across the Network, and NGO leaders are internationally recognized experts who regularly provide national and international technical and policy consultations. From producing tools for rapid expansion of pediatric HIV and TB services and demonstrating successful treatment outcomes to advocating for improved malnutrition treatments and guidelines for indigenous communities, the NGOs have influenced policy and best practices on national and regional levels in sub-Saharan Africa, Latin America, and Romania.

Physicians in the Texas Children's Global Health Corps provide clinical care, technical assistance, and mentorship at sites across the Network. These experts support the Network to create curricula tailored to the structure and priorities of the local health systems in each country. The Network has cumulatively trained more than 135,000 healthcare professionals across five continents. Texas Children's Hospital and Baylor College of Medicine further support the education of local pediatric and obstetric residents and fellows through unique partnerships with in-country academic partners.



# HOW ARE WE UNIQUE?

## We are a Network

Our teams are professional problem-solvers who seek the Network's collective wisdom for solutions and collaborate to develop best practices.

## We are change agents

Through the public-private partnerships we embrace with existing institutions, leaders and the communities we serve, we catalyze sustainable, transformational change that addresses local health priorities.

## We are many global health leaders

United by our commitment to improve the health of all persons, our Network of thought leaders tackle the world's greatest health challenges with practical skills.

## We know more than healthcare



Network knowledge and technical expertise extend beyond health services delivery and include organizational management, regulatory oversight, accounting, facilities maintenance, public policy, fundraising and more.

Because of our different cultural roots, religious beliefs and experiences in different settings, we value and cultivate an abiding respect for each other, one that fosters creativity and flexibility in our joint search for smarter, more robust solutions.



## We are diverse

## We are resilient



We capitalize on two decades of success navigating economic, political, financial and public health headwinds to achieve unequaled clinical outcomes, compile lessons learned and sustain quality improvement.

Our public-private partnerships and relationships with beneficiaries, partners and each other are based on mutual respect, humility and trust. We receive as much knowledge as we impart and are quick to share it Network-wide.



## We move expertise in many directions

## We educate tomorrow's health equity leaders



Ethical learning experiences focused on solving pressing health issues in resource-limited settings prepare our U.S. and overseas learners for a lifelong commitment to equity in access to healthcare and health education.

We build capacity within in-country teams to study local problems to improve health processes, outcomes and policies to benefit the communities and populations served.



## Our research supports the change we seek

## Core Activities:



### Multidisciplinary Health Systems Strengthening

Build local capacity through education, training in healthcare delivery, health facilities and personnel management, budgeting and accounting, communications, team building, and leadership development

### Clinical Care Support

Provide skilled professionals to support government health initiatives and access to quality care

### Public Health Advocacy

Develop site-specific strategies to maximize public health impacts, including participation in health policy, vaccine advocacy and protocol development

### Research

Epidemiologic, basic, translational, operational, and clinical

# NETWORK COVID-19 RESPONSE



The COVID-19 pandemic has presented unprecedented global challenges, threatening the health and well-being of children, families and communities, particularly in resource-limited settings across the globe. Yet the pandemic has revealed incredible strength and resilience within the BIPAI Network, highlighting our interconnectedness, adaptability, innovation, teamwork, leadership, and steadfast commitment to caring for vulnerable populations.

Drawing on a 20-year history of improving health systems and responding to the HIV crisis, the BIPAI Network developed a multi-layer COVID-19 support system for NGO leadership and staff across 10 countries – Romania, Botswana, Lesotho, Eswatini, Malawi, Uganda, Tanzania, Angola, Colombia, and Argentina – designed to help navigate decision-making and management through communication, knowledge transfer, and problem-solving to prioritize workplace safety and continuity of essential services.

In collaboration with NGO leadership, BIPAI HQ established an evolving support system according to emerging needs. HQ initiated a daily operational meeting to disseminate information, discuss situational updates and impact on clinical services, share practices, and coordinate activities. We created a specific COVID-19 communication channel on WhatsApp to enhance real-time sharing of information across the Network. Clinical leaders broadened an existing clinical forum to include a multidisciplinary group of global health professionals and converted it into a weekly gathering to explore scientific and clinical COVID-19 data. Team members shared relevant resources, including clinical protocols, government policies, peer-reviewed literature, and templates, in a curated online library.

The pre-existence of a global Network enabled rapid mobilization of this support system. However, the dynamic and uncertain nature of the pandemic required flexibility to address individual NGO needs. Frequent cross-Network operational meetings enabled multilateral exchange of information to guide management decisions. NGO leaders in then-unaffected countries learned from colleagues whose countries already had cases. Recurring meeting opportunities also provided psychological benefits for participants to express their concerns, connect within a supportive community, and unite their efforts in solidarity.

Through innovation and teamwork, despite unprecedented challenges, the Network has been able to continue to provide essential health services. This includes uninterrupted delivery of anti-retroviral therapy to the tens of thousands of children and adolescents living with HIV that access life-sustaining drugs through BIPAI Network NGOs. The Network was able to quickly share and adopt differentiated service delivery models to ensure continued access and to trace patients who had missed appointments.

Central to BIPAI's legacy of capacity building is a dedicated and talented leadership team, including pediatricians and executive directors who are leaders within their countries. Many of these BIPAI leaders, in addition to working tirelessly to continue their mission of serving children, have been called upon to serve on national COVID-19 task forces. This is a reflection of their leadership and their work at the national and international levels will make sure children are not forgotten in this pandemic.

The multilateral cooperation between NGOs and BIPAI HQ has enabled the Network to activate a multilayer support system responsive to NGO needs; through proactive collaborative planning, we have developed strategies to continue serving vulnerable populations and protect the workforce during a time of continuous change.

## Examples of innovations in service delivery

- During a period of restricted movement in Uganda that made accessing the clinic challenging for many patients, boda-boda (motorcycle) drivers delivered anti-retroviral therapy to community access points or patients' homes.
- Many sites quickly transitioned to multi-month dispensing of anti-retroviral therapy and anti-tuberculosis treatment to reduce the number of visits and decrease clinic congestion.
- Many sites developed mechanisms for contactless drug pick up, including secure lockers to access drugs while minimizing exposures.



## ANGOLA



### Newborn Screening

This year, the Angola Sickle Cell Initiative (ASCI) screened more than 95,000 babies born in 22 health centers in Luanda and Cabinda provinces for Sickle Cell Disease.

### Improving Sustainability of Decentralized Sickle Cell Disease Clinical Care

With the support of Texas Children's Hospital, Chevron and Lwini Foundation, a new Sickle Cell Disease (SCD) management center located at Hospital Municipal de Cacuaco was inaugurated in June 2020. This facility has the capacity to diagnose SCD using a capillary electrophoresis device donated by Lwini Foundation and will provide clinical care to more than 500 children. This new SCD center will be staffed by Angolan physicians, nurses, and laboratory technicians trained by ASCI. The inauguration event, which was held on World Sickle Cell Day, was attended by representatives of the Ministry of Health, Hospital Municipal de Cacuaco, Chevron, Lwini Foundation and ASCI, in addition to patients and families.



## ARGENTINA



### Renewal of the Maternal-Child Program

The Baylor-Argentina Mother-Child Health Care program renewal agreement was signed in Añelo. The program will continue to be strengthened through contributions made by sponsors such as Chevron, YPF, YPF Foundation and Tecpetrol, in line with the strategies drafted by the Health Department of the Province of Neuquén, the Municipality and Añelo Hospital. Neuquén's Health Department recognized the Foundation's commitment to the community. They awarded certificates to nurses, health agents and doctors working at the hospital in Añelo who participated in the training sessions conducted by Baylor-Argentina staff.



### Vision Screening Expansion to Rincón de los Sauces

The vision screening program started in primary schools of Añelo was successful and is being expanded with Tecpetrol. Work started at School 363 in Rincón de los Sauces, Rincón Hospital and the Health Department in October 2019.



### **CAfGEN Launch Officiated by Health Minister**

The Collaborative African Genomics Network (CAfGEN) study launched its second phase in September 2019. An event to update the stakeholders on the progress of the study was held at Cresta Lodge, Gaborone. The occasion was officially opened by the Minister of Health and Wellness, Dr. Alfred Rabashemi Madigele, who stated, “We believe that with these investments, Botswana will again lead in the era of precision medicine. My ministry is proud to support further advances by His Excellency the President of Botswana, Dr. Mokgweetsi Eric Keabetswe Masisi toward his vision of a knowledge economy.”

The primary objective of CAfGEN is to create a collaborative, multidisciplinary, multi-institutional, inter- and intra-country network of African scientists, clinicians, and researchers using genomics approaches to study gene/environment interactions for HIV/AIDS, its co-morbidities, and other diseases among diverse pediatric African populations by 2022.

### **Bioinformatics Equipment Handover Ceremony**

Bioinformatics equipment was presented to the University of Botswana in February 2020 for integration into the university’s infrastructure. The Vice-Chancellor expressed his gratitude that the project would position the University of Botswana at the forefront of cutting-edge data science research to transform Botswana into a knowledge-based economy.



### **New Infrastructure and Endowment Agreement for the Nutritional Recovery Center**

In December 2019, Baylor-Colombia signed a cooperation agreement with the Mayor of Manaure for the delivery of new infrastructure for the operation of the Nutritional Recovery Center. This agreement will expand the operations of Baylor Colombia in Manaure, La Guajira, with the aim to continue joining forces in the fight against acute malnutrition faced by the population of La Guajira, providing comprehensive care for early childhood, and supporting indigenous Wayúu communities with the improvement of their health conditions and quality of life.

## ESWATINI



### Education for Cancer Prevention, Treatment and Care Project (ECPT)

Acknowledging Baylor-Eswatini's success in treating HIV/AIDS, the Bristol Myers Squibb Foundation (BMSF) has funded a new project to raise cancer awareness and lay the groundwork for better cancer prevention and treatment in Eswatini. In May 2019, Baylor-Eswatini as a consortium leader received \$1.5 million USD from BMSF to sensitise key stakeholders on cancer, create community cancer awareness among individuals, screen patients for breast and cervical cancer and vaccinate eligible adolescents aged 9-14 years with the HPV vaccine.

Since the launch of the ECPT project in October 2019, the project has delivered its mandate of cancer awareness and screening in the targeted constituencies. Due to the strong community cancer screening and buy-in from community gatekeepers and the Ministry of Health, the project conducted outreach in targeted areas, community-based clinics, individual organizations and church gatherings. All the screening targets have been surpassed within a year of implementation. In addition, community members appreciate the integrated approach for cancer and other non-communicable diseases screenings and treatment. The consortium has screened a total of 12,745 patients for cancer.

## LESOTHO



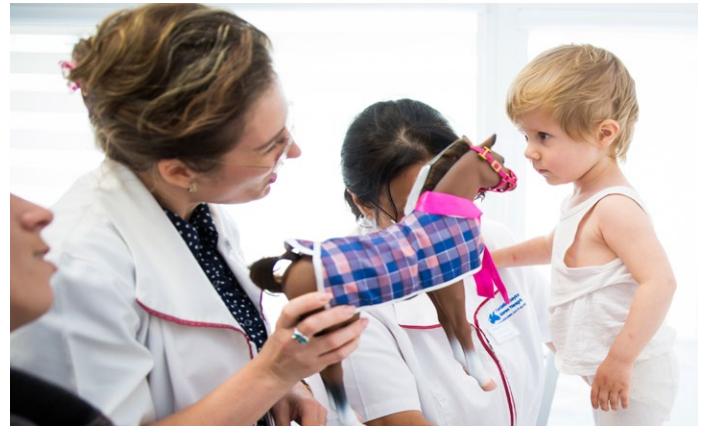
Baylor-Lesotho received grants from USAID to implement two projects: Expanding TB and HIV Clinical Services (ETHICS) and Karabo ea Bophelo (KB). ETHICS is a three-year project operational in the two districts of Butha Buthe and Mokhotlong, with the primary goal to attain HIV epidemic control and sustained reduction in HIV transmission, morbidity and mortality through saturation of HIV and TB prevention, care and treatment services. KB is a five-year project operational in the 10 districts of Lesotho. Its main aim is to expand access to and uptake of multisectoral interventions to prevent new HIV infections and reduce vulnerability, targeting orphans and vulnerable children, their caregivers, adolescent girls and young women, and those infected and affected by HIV/AIDS.



## MALAWI

### Camp Hope

From July to September 2019, Serious Fun Children’s Network, Access Health Africa and Baylor-Malawi, along with local clinical partner, Light House Trust, collaborated for the ninth year to plan and implement the Camp Hope-Malawi Children retreat program. These organizations created an empowering and positive experience for youth living with HIV in Malawi. This year, Camp Hope had four sessions with a total of 305 (155 female, 150 males) newly disclosed teens of 10-15 years old. As always, staff welcomed campers with huge smiles, glittering painted faces, singing and drums beats, cheering squads, big hugs and lots of high fives. Adolescents experienced an environment that had a strong emphasis on learning, empowerment, and treatment adherence, future planning guidance, improved nutrition and personal hygiene. Campers also had the opportunity to connect with peers facing similar challenges to learn responsibility and self-advocacy skills. Together, they engaged in reflection and self-discovery through activities such as talent shows, arts and crafts, and play and games.



## ROMANIA

### Progress in Preventing HIV Mother-to-Child Transmission

Baylor-Romania developed new evidence-based tools to educate and support mothers-to-be who are living with HIV to live positively and have healthy children. Mothers-to-be enrolled in the program were inspired to learn that mother-to-child transmission can be prevented resulting in an HIV-free generation. Baylor-Romania provides counseling to clients living with HIV on adherence, nutrition, family planning, and relationship skills.

The project team has developed two tools: a 19-question interview guide and an eight-question knowledge assessment about mother-to-child transmission. They held 203 educational meetings with 121 pregnant women living with HIV: 40 interviews and 163 knowledge level assessments. In the end, there was a 28% increase in the knowledge level among the women with regard to the steps they must take to prevent the transmission of HIV to their child.

The project resulted in a list of educational messages tailored to the needs of the beneficiaries. With these new tools, Baylor-Romania hopes to increase the number of HIV-free children in families with one or both parents living with HIV.





### State-of-the-art TB Prevention, Case Finding

Baylor-Tanzania continues to offer comprehensive and state-of-the-art TB prevention, case finding that includes a robust community program utilizing the unique expertise of individuals who were previously treated for TB, and treatment for children and adolescents in the Lake Zone and Southern Highland Zone. Baylor-Tanzania also has leading roles and voices on the national child TB treatment working groups and is actively involved in several TB research studies looking at the performance of novel TB diagnostic tests in children.

### Multidisciplinary Palliative Care

Baylor-Tanzania continues to offer multidisciplinary palliative care to children and adolescents with life-limiting complications of HIV/AIDS. This unique program provides patients with evidence-based medical care including symptom management, comprehensive patient-centered psychosocial care, opportunities to participate in a wish-making program, and multidisciplinary home visits. Baylor-Tanzania had the opportunity to present their palliative care program at the 6th International African Palliative Care Conference in Kigali, Rwanda.

### Innovative Index Case Identification Program

Baylor-Tanzania has developed an innovative index case identification program to identify children and adolescents living with HIV. Case identification is the critical first step to ensure children and adolescents living with HIV can achieve healthy lives.

Index testing involves testing the contacts of a person who is living with HIV such as children, siblings, or sexual partners to identify people who may be positive but do not yet know their status. Baylor-Tanzania recognized the importance of utilizing index testing as a tool to identify vulnerable children and adolescents living with HIV and worked to scale up knowledge among healthcare workers about the importance of index testing. Baylor-Tanzania was able to utilize this tool to successfully identify many new children and adolescents and link them with lifesaving care. Baylor-Tanzania improved collaboration with adult HIV care facilities to ensure that every adult who tested positive was linked with a team who visited them in their home and tested their children.

At the Mwanza site, prior to implementing index testing, it was typical to have only 1-2% of those tested be diagnosed as HIV+. After implementing the program, however, 10-15% of those tested were found to be HIV + and many more patients were identified and linked to care. Similarly, at the Mbeya site, testing data from January through March 2020 demonstrated again that a high percentage of positive patients were identified and linked to care.





## UGANDA

### Rotary Vocational Award

Rotary Club of Kiwatule, Kampala, recognized Baylor-Uganda with a vocational award in February 2020. This award is one of the highest honors given by Rotary to institutions and individuals who offer service “above self.” The Rotary club of Kiwatule applauded Baylor-Uganda for championing prevention of mother-to-child transmission of HIV, reducing maternal mortality by 30 percent, improving deliveries in the health facilities by 40 percent, providing safe male circumcision services to more than 130,000 clients and providing comprehensive HIV care to over 83,000 clients, the majority being children and adolescents.

## ◆ BIPAI Celebrates its 20th Anniversary

On Thursday, Sept. 26, 2019, Chevron presented “Through the Lens,” a one-night immersive photo exhibit to celebrate 20 years of devoted service by BIPAI to some of the world’s most vulnerable children and women. The event showcased and honored this amazing work by featuring the stunning photography of Pulitzer Prize-winning photojournalist Smiley Pool.

Through this specially curated exhibit – most of the photos having never been seen before – guests traveled to the very places where BIPAI has served children and women for the last 20 years. Guests experienced Pool’s most awe-inspiring images that tell a story of challenge, hope, triumph and connection. Pool also spoke at the conclusion of the event about the exhibit.

The event, held at the Revaire in Houston, featured a World Market sponsored by AbbVie filled with goods made by the BIPAI Teen Clubs throughout the Network, which were available for purchase. The globally-inspired cuisine included passed hors d’oeuvres, along with six food stations where empanadas were served to honor Argentina, Romanian garlic sausage was enjoyed, and guests were treated to three variations of ceviche as a tribute to the culture of Colombia.

At the conclusion of this enlightening event, guests heard remarks from Texas Children’s President and CEO Mark A. Wallace who spoke about the history of BIPAI, the organization’s outstanding accomplishments and the hospital’s continued commitment to this success. Clay Neff, President of Chevron Middle East, Africa and South America Exploration and Production Company, congratulated BIPAI for the profound impact it has had over the last 20 years and provided a bit of history about the partnership between Chevron and Texas Children’s. Neff also shared a video about BIPAI and the significant impact it has had on the people who he is privileged to work alongside.

Now, 20 years after the first children were treated for HIV/AIDS in Romania, more than 350,000 children receive HIV/AIDS treatment, more than any other network worldwide. The event raised funds to forward BIPAI’s mission as it moves into its next decade of work expanding care and treatment. Our vision is that the communities empowered by our partnership will have the tools to build healthier, happier and more prosperous futures.



# SNAPSHOTS OF SUCCESS

## ◆ **Baylor-Tanzania Receives Direct USAID Grant**

The Baylor College of Medicine Children's Foundation – Tanzania (Baylor-Tanzania) was founded in 2009 as a Tanzanian NGO with the goal of scaling up high-quality healthcare services for children and adolescents living with HIV/AIDS in the Southern Highlands and Lake Zones of Tanzania through direct service provision at the COEs, healthcare professional training and technical support. USAID has been a key partner since Baylor-Tanzania's inception – the initial grant BIPAI received in 2009, with Baylor-Tanzania as a sub-recipient, made creation of the Baylor-Tanzania program possible. Because of Baylor-Tanzania's excellent program performance and grant management, Baylor-Tanzania had grant funding renewed consistently and received a total of \$24 million from USAID between 2009 to 2018. In 2018, Baylor-Tanzania was directly awarded the *Afya Bora, Mtoto Imara* grant of \$12 million U.S. dollars in funding to be used over four years. Receiving the *Afya Bora, Mtoto Imara* grant represented a significant milestone toward achieving organizational sustainability, and Baylor-Tanzania was proud to be entrusted with a large direct USAID grant as a prime recipient.

Since 2009, Baylor-Tanzania has provided excellent clinical care elevating the standards of care for children and families:

**8,219** ..... Children and adolescents cared for at the COEs

**5,964** ..... Children and adolescents living with HIV treated with lifesaving ART

**21,370** ..... Children, adolescents and adults living with HIV impacted through healthcare worker training and outreach program

**35,956** ..... Individuals tested for HIV and linked with care and treatment services

**2,992** ..... Infants exposed to HIV have received comprehensive PMTCT, growth and nutrition monitoring, and vaccination. Two-thirds of these ultimately tested negative for HIV

Through the COE's comprehensive care model, children and adolescents also received treatment for malnutrition, TB, and sexual and reproductive health services. One prime example of this model is the Teen Club program, a network of peer support groups that empower adolescents living with HIV to build positive relationships, improve self-esteem, and acquire life skills through peer mentorship. To date 1,704 adolescents have enrolled in Teen Club. While Baylor-Tanzania patients are among the most complex treatment cases experienced in the regions, they have achieved viral suppression rates of 92%, well above the reported national Tanzanian pediatric viral suppression of 43% (UNAIDS Country Data 2018). The COEs have consistently maintained lost-to-follow up rates of 3% through their multidisciplinary patient engagement services.

Since 2009, Baylor-Tanzania has transformed the healthcare landscape in the Lake and Southern Highland Zones:

- 11,973** ..... Healthcare workers trained in the diagnosis and management of pediatric HIV, tuberculosis and severe acute malnutrition
- 1,230** ..... Healthcare workers trained through Baylor Tanzania's intensive clinical attachment program
- 226** ..... Healthcare facilities served by Baylor-Tanzania's outreach program
- 33** ..... Healthcare facilities mentored to establish their own Satellite Teen Club programs
- 172** ..... Staff employed since the program started, many of whose careers were launched at Baylor Tanzania and have catalyzed improvements in pediatric HIV care across Tanzania

Grace\* is an 11-year-old girl who came to the Mbeya COE with a life-threatening invasive fungal infection. To treat her infection, she required daily infusions of an anti-fungal medication. One of the COE nurses was assigned to care for her each day and devoted countless hours to ensure that she survived. Thanks to the complex, multidisciplinary care Grace received, she is now thriving and can achieve her dreams!

\*Photo and story used with consent of patient and caregiver.



# SNAPSHOTS OF SUCCESS

## ◆ Baylor-Colombia Hosts Dialogue on Malnutrition Between Western and Traditional Medicine



Baylor College of Medicine Children's Foundation Colombia (Baylor-Colombia) in partnership with Armando Pabón López Hospital, the United States Agency for International Development (USAID), the Public Health Institute of the Pontificia Universidad Javeriana and the Wayúu indigenous communities carried out an exchange of knowledge between Western medicine and traditional indigenous Wayúu Medicine. This was developed by the piaches, or community doctors, and focused on the implementation of comprehensive management of malnutrition in the municipality of Manaure, La Guajira.

The objective of the dialogue sought to close existing gaps for the implementation of care for moderate, severe and acute malnutrition in children under 5 years of age and improving maternal and perinatal health. Many pregnant women and children are vulnerable since they live in scattered territories with high rates of unsatisfied basic needs, maternal and infant morbidity and mortality.

The mutual learning and two-way dialogue achieved between the piaches, indigenous leaders, traditional authorities and health professionals allowed the participants to transmit their traditional knowledge, reinforce their knowledge, and share their experience and daily practices to face and manage malnutrition in the community. Participants explained the meaning of the word malnutrition to the Wayúu population, their suggestions for improving the healthcare model, and the traditional practices that exist to manage emergencies resulting from malnutrition.

Community participation included eight piaches, 10 traditional authorities, 15 caregivers, and 18 health professionals, including general practitioners, nutritionists, pediatricians, nursing assistants and social workers. Through the discussion, they achieved a consensus between Western and traditional medicine on the best care route for patients with malnutrition, which led to the strengthening of protective health practices in the communities.

Over the course of four meetings, they successfully developed recommendations that will be presented to the Ministry of Health to adjust the national guidelines for the management of malnutrition.

Isabel Epinayu, piache and artisan from the Las Américas community:

*“With this activity I learned a lot because it made me understand that Western medicine has a fundamental value, and although it is different from ours, it works as a complement. Being piaches, we can treat malnutrition with Jawapia and our ancestral knowledge, but sometimes, if we observe that people have symptoms such as vomiting, fever and constant diarrhea that we cannot stop and in the absence of an improvement in health conditions, we know that we must go to a health center so that a doctor can care for the person and contribute to their healing. Many of us, when we found a sick person within the community, we immediately took them to the healer, who does her best to cure the ailments but who, in some cases, cannot do it and people get worse or die because we do not know who else to go to.”*

Dr. Spencer Rivadeneira, Baylor-Colombia physician:

*“We learned about the causes of why the community resists going to health centers and hospitals, identifying that it is due to previous experiences that consisted of mistreatment and poor results in the provision of health services, which generated a fear of Western medicine, and therefore, the preference of the communities to be guided by their traditional knowledge since these provide them with the way to interpret the disease and how to treat it.*

*When we know their culture, their worldview and their beliefs and they know ours, an intercultural exchange of knowledge takes place. The methodology that was used allowed us to know the importance of some plants and their healing power, because the piaches brought all their therapeutic arsenal and showed and explained it to us. The exchange was effective; we learned a lot from them. Regarding the modalities of care, the activity managed to establish guidelines on when a person should be treated at home and when they should be hospitalized or admitted to a nutritional recovery center. The activity was comprehensive because they learned to identify the signs of malnutrition and alarm signs that can occur in order to immediately consult health professionals in case they occur.”*

Ana Maria Galvis, Baylor-Colombia Executive Director:

*“The dialogue of knowledge is a qualitative method that seeks to understand, synthesize, theorize and contextualize knowledge; allows to understand the problems and needs that the population has through reflection and discussion of the actors, based on the words of the population itself. We are convinced that knowledge dialogues are an appropriate method that, through reflection and discussion, promotes the generation of trust and commitment as key tools to manage the situation “*



# SNAPSHOTS OF SUCCESS



## ◆ Recreational Therapy Camps Improve Adolescent Adherence at BIPAI Centers of Excellence

Despite amazing strides in rates of viral suppression in people living with HIV globally, adolescents continue to lag behind. Meeting international population targets of the 95-95-95 strategy in this group remains a challenge in many cultural contexts. For over a decade, the Baylor College of Medicine International Pediatric AIDS Initiative Children's Centers of Excellence in Botswana, Lesotho, Eswatini, Malawi, Tanzania and Uganda have been holding recreational therapy camps (RTC) for this at-risk population. Together with national and international donors and volunteers, our staff create a 1-2 week experience of fun, growth and learning in an incredibly supportive environment. In the past, studies on RTC impact have focused on the psychosocial benefits to campers. The BIPAI Network has published the first report of the potential clinical benefits of RTC for HIV-positive adolescents.

The team investigated the effect of BIPAI camps on adherence to anti-retrovirals before and after camp attendance. Adherence was assessed with manual pill counts during routine clinic visits as is standard of care. A total of 409 adolescents were followed for 6 months prior to camp and one year after attendance at camp. During the first 6 months after attending camp, significantly more attendees had pill counts >95%, indicating good adherence compared to the 6 months prior to the RTC. Unfortunately, this improvement was not sustained in the second 6-month period during the one-year follow-up (Table 2).



**Table 2.** Comparisons of lowest adherence before and after RTC attendance by McNemar test statistic

Comparison	0–6 months after RTC		Odds Ratio	P value
Before RTC	Once < 95%	Always > 95%	0.69	0.023
	95 <sup>a</sup>	96 <sup>c</sup>		
	Always > 95%			
	Total = 409	67 <sup>d</sup> 151 <sup>b</sup>		
Comparison	6–12 months after RTC		Odds Ratio	P value
Before RTC	Once < 95%	Always > 95%	0.87	N.S.
	92 <sup>a</sup>	82 <sup>c</sup>		
	Always > 95%			
	Total = 409	71 <sup>d</sup> 150 <sup>b</sup>		

<sup>a</sup>Number of patients with adherence at least once less than 95% both pre- and post-RTC

<sup>b</sup>Number of patients with adherence always equal to or greater than 95% both pre- and post-RTC

<sup>c</sup>Number of patients with adherence at least once less than 95% pre-RTC and always equal to or greater than 95% post-RTC

<sup>d</sup>Number of patients with adherence always equal to or greater than 95% pre-RTC and at least once less than 95% post-RTC

The short-term clinical benefits of RCT for these HIV-positive adolescents is consistent with other literature on RTC for children with chronic diseases (Welch et al., 2007; Mallett et al., 2019). While the short-term clinical benefits of camp are apparent to all of us working with these children in the weeks and months following camp, longer-term psychosocial benefits are also subjectively observed. Though not a sustained clinical impact, these improvements in adherence should be celebrated and used to build on in our continued efforts to bridge the gap in viral suppression rates for children living with HIV around the world. Further studies are needed to identify and evaluate barriers and facilitators to sustained post-camp medication adherence and psychosocial resiliency.

## Study Publication:

Wanless, R., Mizwa, M., Schutze, G., Kekitiinwa, A., Ssuuna, C., Steffy, T., McKenney, A., Daire, C., Perry, S., Pettitt, E., Paul, M. and Barton, T., 2019. A comparison of adherence to antiretroviral therapy amongst adolescent patients of the Baylor International Pediatric AIDS Initiative Children’s Centers of Excellence before and after attendance at recreational therapy camp. *Vulnerable Children and Youth Studies*, 14(4), pp.364-374.

### Citations:

Mallett, L., Soto, A., Govande, J., Ogborn, C., & Sagar, M. (2019). Role of asthma camp in improving the overall health of children with asthma. *Baylor University Medical Center Proceedings*, 32(1), 54–57.

Welch, M., Carlson, A., Larson, D., & Fena, P. (2007). Clinical profile, health-related quality of life, and asthma control in children attending US asthma camps. *Annals of Allergy, Asthma and Immunology*, 99(6), 496–501.



## Camp is home! Camp is family! – A Success Story

Thokozile says, *“I was so excited to go to camp for my very first time. While I had been to Teen Club for a few months, camp was a whole new and amazing experience!”*

*“At camp, I was able to connect with new friends, play different games and enjoy the cooking demonstration. I took on adventures and tried new things while taking medication together with my friends. I don’t need my mom to help me do anything. I fit in and I’m just like everybody else. And that’s what means the most to me now. At camp, we are one big family; it is more than home! It is a loving environment. I’ve even decided that when I grow up, I want to be a pediatrician so that I can help other children too. When we arrived at camp, there was a banner that said “Nzotheka” (It’s possible). Camp is a place of possibilities. Camp is family to me. There’s no place else on earth where I felt so included. Thank you for the amazing gift of camp. I can’t wait to go back as a Leader in Training, HAHAHA,” she laughed.*

## ◇ Delivering Multi-Month Prescriptions of Antiretroviral Therapy to Youth

To optimize delivery of patient-oriented services, differentiated approaches to care are needed. By taking a client-centered focus, HIV services can be simplified and adapted to better serve the needs of people living with HIV. Multi-month prescription (MMP) is an approach where stable clients are able to increase the time between their clinic visits and ART refills, thereby reducing the amount of time spent at the facility. Since 2003, the BIPAI Network has been delivering MMP schedules of antiretroviral therapy (ART) to youth at centers of excellence (COEs) in six African countries: Botswana, Uganda, Malawi, Tanzania, Lesotho, and Eswatini. Our experiences have been recently documented in the first study examining the potential impact of MMP on clinical outcomes amongst children and adolescents living with HIV.

The study analyzed data from electronic medical records of patients aged 0–19 years who started on ART. Patients were eligible to transition from monthly prescribing to MMP when clinically stable, meaning they had to have improving CD4+ cell count, viral load (VL) suppression, or minimal HIV-associated morbidity and good ART adherence. Patients were classified as transitioned to MMP after three consecutive visits at intervals of more than 56 days. From 2003 to 2015, 22,658 patients aged 0–19 years received ART and 66 percent transitioned to MMP. Of these, 2.6 percent were lost to follow up and 2 percent died. The median duration of MMP was nearly four years. The frequency of favorable outcomes was high throughout the first five years of MMP, by year ranging from 87 to 94 percent acceptable immunologic response, 75 to 80 percent adherent, and 79 to 85 percent VL suppression.

Our analyses from six African countries demonstrated that youth on ART who transitioned to MMP overall maintained favorable outcomes in terms of death, retention, adherence, immunosuppression, and viral suppression. These results helped to facilitate more widespread use of visit spacing for youth globally because it provided reassurance that children and adolescents who are clinically stable and ART adherent can do well with reduced visit frequencies and extended ART refills.

When the COVID-19 pandemic unraveled this past year, the COEs found their experience with MMP gave them an advantage to adapt quickly their healthcare practices to ensure patient safety. COEs had to implement new measures that would minimize spread of COVID-19 among patients and staff while continuing to provide lifesaving HIV care and treatment. MMP enabled COEs to reduce the number of patients needing to visit the clinic and extend the time until their next visit.

### Study Publication:

Kim, M., Wanless, R., Caviness, A., Golin, R., Amzel, A., Ahmed, S., Mhango, J., Damba, D., Kayabu, A., Chodota, M., Dlamini, S., Chidah, N., Mokhali, M., Calles, N. and Abrams, E., 2018. Multimonth Prescription of Antiretroviral Therapy Among Children and Adolescents. *JAIDS Journal of Acquired Immune Deficiency Syndromes*, 78, pp.S71-S80.

# PATIENT SPOTLIGHT



Being in pain and agony has trained me to have a deeply planted passion in my heart to become the strong man I am today. In 2005, I tested HIV positive, and my family had no flicker of hope that I would still be alive at the end of that year. Not only had I lost a lot of weight, I also had a CD4 count of zero. When all hope was lost, Baylor-Lesotho came along and rescued my life. I met loving and caring healthcare workers who became friends. I am now a positive leader because of Teen Club and Wise Youth; they raised me. It hurts to see little brothers and sisters living with HIV, struggling with the same challenges I had.

What I hate most is stigma and discrimination attached to people living with HIV. It's my wish to see our government working hard to fight it; we are all human with the same human rights. In relation to this I have been in many places advocating for equal rights. In 2008, I was in England and my story was shared on an international newspaper. In 2016, I attended 21st IAS conference where I was also advocating for youth living with HIV.

It is a proven fact that HIV is second-leading cause of death in the world, and I believe we all have a role to play to stop this. After the conference, we gave the report to the relevant stakeholders and shared with them how we as people living HIV can help curb the spread of HIV in Lesotho. In 2018, I was recruited by Baylor-Lesotho as Volunteer Translator –a chance to give back the love, to share my life experiences with youth and to comfort the hopeless. Baylor-Lesotho through Wise Youth has enabled me to discover the artist in me, and I am using my artwork as a source of income for me and my family and even for the program itself.

Sam, patient of Baylor-Lesotho



## The Legacy of Dr. Peter Kazembe

The 2019-2020 BIPAI Annual Report is dedicated to Dr. Peter Nicholas Kazembe. He was the founding executive director of Baylor-Malawi and served as director until his retirement in 2018. Kazembe, often considered the “grandfather of pediatrics” in Malawi, made monumental contributions to the health of children and families in Malawi and beyond over his decades-long career. He was instrumental in the development of pediatrics as a specialty in Malawi. His collaborations and mentorship impacted the careers of thousands of doctors and health professionals who now provide stellar pediatric care throughout Africa and beyond.

Kazembe’s legacy includes pioneering Malawi’s pediatric HIV/AIDS care, treatment and prevention programming; developing the country’s first HIV treatment guidelines; providing mentorship and education to countless health professionals; and collaborating with pediatricians and child health advocates all over the world. Under his leadership, Baylor College of Medicine Children’s Foundation-Malawi in a public-private partnership with the Government of Malawi and Abbott Fund built and operated the first stand-alone pediatric HIV clinic in Malawi and was the first NGO to provide antiretroviral therapy for children in Malawi, fast becoming the country’s largest provider of pediatric HIV care.

In honor of Kazembe’s work, he was posthumously awarded the American Academy of Pediatrics 2020 Hillman-Olness Award for lifetime service and lasting contributions to global child health. Established in 2011 in honor of the late Liz Hillman, the late Donald Hillman, and Karen Olness, the award recognizes individuals who have devoted their careers to advancing global child health. Kazembe’s contributions span clinical care, research, advocacy, policy, and education – and cross pediatric HIV, tuberculosis, malaria, neonatology, maternal and child health. Among the numerous enduring legacies from Kazembe’s expansive career are the long-standing international and inter-institutional partnerships and collaborations that he forged, all of which continue to benefit the people of Malawi.

Texas Children’s Hospital has created a Dr. Peter Kazembe Memorial Fund to extend his legacy of ensuring care for the most vulnerable children in Malawi. Funds raised will benefit Texas Children’s efforts toward neonatal care and training in Malawi at KCH and the Jan Duncan Center of Excellence for Women at Area 25 District Hospital.

## Quotes:

*“Dr. Kazembe was a dedicated husband, father, leader, advocate, mentor, clinician educator, teacher and friend. I’m deeply saddened by his loss but know his legacy will live on in the work of many.” Michael Mizwa, BIPAI chief executive officer*

*“The work and leadership of Dr. Kazembe has saved countless lives. Without him, we wouldn’t be where we are today.” Phoebe Nyasulu, executive director of Baylor-Malawi*

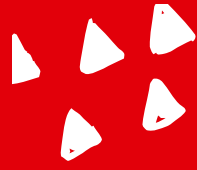
*“Dr. Kazembe was instrumental in the start of every single Texas Children’s global health program in Malawi. His leadership and vision have enabled Texas Children’s to expand care in Malawi to include cancer, cardiology, surgery, maternal health and emergency medicine, his support of which was instrumental in the successful emergency medicine collaboration between Texas Children’s and other organizations.” Dr. Susan Torrey, vice chair of the Global Health Steering Committee*

*“Pediatric and maternal care has advanced by leaps and bounds because of Dr. Kazembe’s efforts. The impact of his knowledge and dedication to pediatric and maternal health care will be felt for generations to come.” Dr. Jeff Wilkinson, vice chair of Global Women’s Health with Baylor College of Medicine and director of Texas Children’s Global Women’s Health Program*

*“I have been inspired not only by his work but by the kind, compassionate, and humorous person that he was. I have smiled so much thinking about him these past days.” Anna Mandalakas, director of Texas Children’s Global Tuberculosis Program*



# PARTNERS



- Baylor College of Medicine
- Texas Children's Hospital
- Abbvie Foundation
- Chevron
- SeriousFun Children's Network
- Simon Bolivar Foundation
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# BIPAI

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