



Enhancing Prevention of Mother-to-Child HIV Transmission in Low-Resource Settings: A Proposed Model

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ABOUT THE STUDY

Preventing Mother-to-Child Transmission (MTCT) of Human Immunodeficiency Virus (HIV) is a critical public health challenge, especially in low resource settings where access to healthcare and resources is limited. In these resource settings MTCT of HIV remains a significant problem, with an estimated 170,000 children infected with HIV each year. In this study, we will discuss a model for enhancing the prevention of MTCT of HIV in low resource settings.

Integrated care approach

An integrated care approach that combines maternal, neonatal, and pediatric care is essential for enhancing the prevention of MTCT of HIV in low resource settings. This approach should include pre- and post-natal care, for the mother, infant prophylaxis, and support for breastfeeding. By integrating these services, healthcare providers can ensure that women living with HIV receive comprehensive care throughout their pregnancy and delivery, and that their infants receive the care they need to prevent MTCT of HIV.

Community involvement

Community involvement is critical to the success of any program aimed at enhancing the prevention of MTCT of HIV in low resource settings. Community-based organizations, religious leaders, and other local stakeholders can help to increase awareness and education about HIV and its transmission, reduce stigma and discrimination, and provide support for women living with HIV.

Task-shifting

Task-shifting, or the delegation of tasks from healthcare professionals to less specialized health workers, can be an effective strategy for enhancing the prevention of MTCT of HIV in low resource settings. By delegating certain tasks, such as ART

initiation and monitoring, to less specialized health workers, healthcare providers can ensure that women living with HIV receive the care they need, even in remote or hard-to-reach areas.

Strengthening health systems

Strengthening health systems is essential for enhancing the prevention of MTCT of HIV in low resource settings. This includes improving access to healthcare, increasing the availability of essential medicines and supplies, and enhancing the capacity of healthcare providers to deliver quality care. In addition, it is essential to ensure that health systems are equipped to respond to the needs of women living with HIV, including by providing ART and infant prophylaxis.

Addressing barriers to care

Addressing barriers to care, such as stigma and discrimination, poverty, and lack of knowledge about HIV and its transmission, is critical to enhancing the prevention of MTCT of HIV in low resource settings. Interventions that address these barriers, such as community-based education and awareness campaigns, can help to ensure that women living with HIV have access to the care they need to prevent MTCT of HIV.

Partnership and collaboration

Partnership and collaboration between different stakeholders, including healthcare providers, community-based organizations, religious leaders, and international organizations, is essential for enhancing the prevention of MTCT of HIV in low resource settings. By working together, these stakeholders can pool resources, share expertise, and coordinate efforts to ensure that women living with HIV receive the care they need to prevent MTCT of HIV.

CONCLUSION

Enhancing the prevention of MTCT of HIV in low resource

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settings requires a multi-faceted approach that integrates maternal, neonatal, and pediatric care, involves the community, delegates tasks to less specialized health workers, strengthens health systems, addresses barriers to care, and involves partnerships

and collaboration. By implementing these strategies, it is possible to ensure that women living with HIV have access to the care they need to prevent MTCT of HIV, even in low resource settings.