

## ***0.a. Goal***

Goal 3. Ensure healthy lives and promote well-being for all at all ages

## ***0.b. Target***

3.8 Ensure that everyone has universal health coverage, including protection against financial risks and providing access to quality essential health services and to safe, effective, quality and cost-effective essential medicines and vaccines. affordable

## ***0.c. Indicator***

3.8.2. Coverage of PMTCT services (Prevention of Materno-Childhood Transmission of HIV)

## ***1.a. Organisation***

MSPLS

## ***1.b. Contact person(s)***

NIYUNGEKO Jacqueline

## ***1.e. Contact phone***

79976694

## ***1.g. Contact email***

niyungeko.jacqueline@gmail.com

## ***2.a. Definition and concepts***

This is the proportion of pregnant women who test positive for HIV / AIDS who are on PMTCT compared to all women who test positive for HIV / AIDS during a given period.

## ***2.b. Unit of measure***

%

## ***3.a. Data sources***

Health statistics yearbook

### ***3.b. Data collection method***

Data is collected from administrative registers of health facilities

### ***3.c. Data collection calendar***

Collection is done annually

### ***3.d. Data release calendar***

Every year

### ***3.e. Data providers***

MSPLS

### ***3.f. Data compilers***

MSPLS

### ***3.g. Institutional mandate***

The Ministerial departments are the members of the SSN whose mission is to collect, process and disseminate the data of their sector.

## ***4.a. Rationale***

The indicator is relevant because it reflects the health situation in Burundi.

## ***4.b. Comment and limitations***

Updating the indicator requires exhaustive collection in health facilities. For most of the data, data from private health facilities are not taken into account.

## ***4.c. Method of computation***

(Number of pregnant women who tested positive for HIV who are on PMTCT during a given period divided by the total number of women who tested positive for HIV during that same period) multiplied by 100.

## ***4.d. Validation***

The results of the data collection are validated at two levels: internal validation and validation at the CTIS level before publication

## ***5. Data availability and disaggregation***

The indicator is available at national level.

## ***6. Comparability/deviation from international standards***

The indicator can be compared to other indicators of the same type at regional and international level

## ***7. References and Documentation***

Health statistics yearbook