

HIV risk screening tool

Screening needs to be once per child aged between 5-14 years

Note: Children should always be offered HIV testing if they present with signs and symptoms of possible HIV infection, are sexually active or report sexual abuse.

Ask questions in a private space

Step 1:

Ask about child's HIV status:	Is the child known to be living with HIV?	
	Yes	Stop screening and check child is on ART. If not, link the child to ART
	No	Continue with Step 2

Step 2:

Ask about mother's HIV status:	Is the mother of the child known to be living with HIV?	
	Yes (or mother not available)	Go to Step 4
	No (Mother tested HIV negative in the last 12 months)	No HIV testing recommended for the child
	Unknown	Continue with Step 3

Step 3:

Testing for the mother:	Unknown status (mother) (No HIV test done on mother in the last 12 months)	Conduct HIV counselling and testing for the mother Go to Step 4
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Step 4:

Testing for the child:	If the mother is HIV positive OR If the mother declines her own testing OR The mother is not present	Conduct HIV counselling and testing for the child (refer to <i>Children's Act below</i>) AND Recommend other children be brought for HIV testing
	If the mother tests HIV negative	No test recommended for the child

Step 5:

Document the screen result (if the child is not tested) or the HIV test result in the child's clinic file.

The Children’s Act and HIV Testing Consent for Children

Children’s Act (No. 38 of 2005) stipulates that a child may give independent informed consent to an HIV test if he or she is:

- twelve years or older; or
- under 12 years of age but with “sufficient maturity” to understand the benefits, risks and social implications of a test.
- a parent or care giver may give consent for a child less than 12 years or a child more than 12 years but without capacity to consent for themselves.

N.B. Where there is no parent, caregiver or designated child protection organization, the superintendent/person in charge of a hospital/clinic may provide the necessary informed consent.

WHO IS A CAREGIVER?

The Children’s Act defines a caregiver as any person, other than a parent or guardian, who factually cares for a child and includes:

- a foster parent;
- a person who cares for a child with the implied or express informed consent of a parent or guardian;
- a person who cares for a child whilst the child is temporarily in safe care;
- the person at the head of a child and youth care Centre where the child has been placed;
- the person in charge of a shelter;
- a child and youth care worker who cares for a child who is without appropriate family care in the community;
- the child at the head of a child-headed household.

TB symptom screening

All people who test HIV positive need to be referred for TB testing

For anyone who tests HIV negative or does not test for HIV: screen using the below:

Table 1: TB Screening for Children ≤ 5 years

	Yes	No
Cough for 2 weeks or more not improving on treatment	If the answer to one or more questions is yes, please investigate the child for TB	If no symptoms are present, only test the child for TB if: - They are living with HIV (newly diagnosed and annually with HIV-VL) - They are a TB contact - They have completed TB treatment in the last 2 years*
Persistent fever for more than 2 weeks		
Documented weight loss/failure to thrive (Road to Health Card)		
Fatigue (less playful/listless)		

Table 2: TB screening for Children >5 years, adolescents and adults

	Yes	No
Cough for more than 2 weeks OR any duration if HIV positive	If the answer to one or more questions is yes, please investigate for TB	If no symptoms are present, only test the child/adolescent/adult for TB if: - They are living with HIV (newly diagnosed and annually with HIV-VL) - They are a TB contact - They have completed TB treatment in the last 2 years*
Unexplained weight loss of 1.5 kg in a month		
Drenching night sweats		
Persistent fever for more than 2 weeks		

**According to the 2022 TB SCREENING AND TESTING STANDARD OPERATING PROCEDURE*