





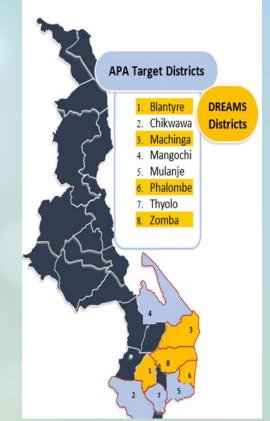
EARLY CHILDHOOD STIMULATION INTERVENTION FOR HIV POSITIVE MOTHERS REDUCES MOTHER-TO-CHILD TRANSMISSION RATES AT 6 WEEKS, I2 MONTHS, AND 24 MONTHS

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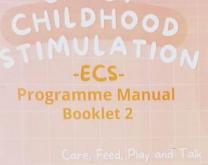
# Introduction

- Though Mother-to-Child Transmission is preventable, 7.55% of HIV positive women vertically transmit HIV to their infants in Malawi (UNAIDS, 2021)
- World Education Inc./Bantwana's integrated clinic and community based early childhood stimulation (ECS) for HIV positive mother-baby pairs seeks to prevent mother-to-child transmission and foster stimulating environments where HIV exposed infants are supported to achieve childhood development milestones
- APA is a 5-year project funded by USAID/PEPFAR, implemented in I 17 high-HIV burden facilities in 8 districts of southern Malawi with the goal of reducing vulnerability to HIV for OVC and AGYW



# **Description of ECS**

- ECS is an evidence-based 12 session curriculum delivered to mother-infant pairs as part of the OVC comprehensive program
- Topics include:
  - Early childhood stimulation
  - Early infant diagnosis
  - Feeding practices, nutrition, & hygiene education
  - Responsive parenting
  - Childhood immunization
  - ART adherence
  - Psychosocial support for mothers





# **ECS Facilitators and Entry Points**

- ECS is delivered by 234 trained Health Surveillance Assistants (HSA) & Community Linkage Facilitators (CLFs) who work in pairs
- HSAs are government employees assigned to a health facility, and CLFs are OVC project staff based in health facilities
- Most ECS sessions are conducted at health facilities when mothers come for:
  - Antenatal clinics
  - Postnatal clinics
  - Under five clinics
  - ART clinics
- Some groups meet in the community



# **Enrollment in ECS**

- Leveraging of multiple service delivery points within health facilities to access data to identify HIV positive women with children aged 0-2:
  - Antenatal clinics and wards;
  - Postnatal Wards;
  - HIV Care Clinics;
  - ART registers;
  - Under-five Clinics
- Enrollment is offered to all identified mother-baby pairs





## Results

Exposed Infants testing milestones Oct-2021 – Sept-2022

- I0,616 mother/ baby pairs were enrolled in and completed ECS. This represents 91% of eligible mothers.
- I0,I53 HIV-Exposed Infants were tested (3,727 @ 6 WKs, 3,638 @ 12 months & 2,788 @ 24 months)
- MTC transmission was 0.78% at 6 weeks, 1.03% at 12 months, and 1.2% at 24 months



### **Lessons Learned**

- ECS provides a safe environment where mothers can access psychosocial and peer support and milestone testing at 6 weeks, 12 months, and 24 months
- ECS provides a platform for layering of other OVC services including economic strengthening
  - (VSL Methodology, Financial Literacy, Business Management, ESPM and Market linkage)
- ECS promotes retention in PMTCT program for the teen mothers



#### **Lessons Learned**

- The ECS provides safe environment and provides psychological relief to HIV positive mothers and promotes treatment adherence.
  - "I greatly appreciate the lesson about prevention of mother to child transmission of HIV. I have always had the fear of passing on the virus to my baby. But now my confidence is regained knowing that, if I follow the stated protocol, my baby will be HIV free at the confirmatory test at 24 months." Rabecca, 18 years old."
  - Rabecca was one of the 300 teen mums that were reached with ECS



#### **Lessons Learned**

 Successful strategies to address long distances to the facility & access challenges during the rainy season include:

- Align ECS sessions with clinical and ART appointment dates for mothers and children to eliminate extra trips to the health facility
- Facilitators deliver individualized "catch up sessions" in homes



## Recommendations



- APA should continue to promote strong community-clinic collaboration in the delivery of ECS interventions within OVC programs to close critical gaps in prevention of mother to child transmission.
- Government should integrate the early childhood stimulation programs within existing health centers and community structures/cadres to ensure a comprehensive and coordinated approach to reduce MTCT rates.
- APA should explore opportunities to engage fathers in ECS.
- APA should scale up the delivery of ECS to target more teen mothers.
- NGOs should train more government employees through Training of Trainers for ECS to promote sustainability in integration within the health system and community structures.



#### **THANK YOU**

### **COMMENTS & QUESTIONS**





