



EARLY CHILDHOOD STIMULATION INTERVENTIONS FOR HIV POSITIVE MOTHERS REDUCE MOTHER-TO-CHILD TRANSMISSION RATES

Though mother-to-child transmission of HIV is preventable, 7.55% of HIV positive women in Malawi vertically transmit HIV to their infants. HIV-exposed infants may be at a higher risk of developmental delays due to the potential effects of HIV infection, exposure to antiretroviral drugs, or other socio-economic factors. OVC programs that extend the reach of clinics into communities can play a critical role in reducing rates of mother to child transmission as well as ensuring that HIV-exposed infants achieve age-appropriate developmental milestones and reach their full potential.

In clinic catchment areas in Southern Malawi with a high-HIV burden, the USAID/PEPFAR funded Ana Patsogolo Activity (APA) delivers an Early Childhood Stimulation intervention designed to: 1) increase adherence for pregnant and breastfeeding women living with HIV; 2) provide psychosocial support and counseling to HIV positive mothers to help them navigate the challenges associated with HIV and motherhood; and 3) equip HIV positive mothers with the knowledge and skills to provide a supportive and stimulating environment for HIV exposed infants.



The APA early childhood stimulation package for mother-baby pairs is designed both to prevent mother to child transmission of HIV and to support child development. The curriculum uses an interactive and play-based approach to foster cognitive, motor language, and socio-emotional development to foster supportive and stimulating environments where HIV exposed infants can thrive.

The 12-session evidence based curriculum covers the following topics:

Early childhood stimulation — Emphasizing play-based activities that encourage exploration and allow infants to actively participate and learn; providing guidance, support and training to caregivers so that they can continue the stimulation activities at home and in their daily routines

Child health and development — Equipping caregivers with information about safe feeding practices, nutrition, hygiene education, childhood immunizations

Responsive parenting — Emphasizing the importance of nurturing and sensitive interactions between caregivers and infants and encouraging caregivers to provide consistent and positive interactions, respond to the infant's cues and needs, and create a secure and supportive environment that fosters attachment and emotional well-being

ART adherence education and information — Providing caregivers with accurate and up to date information about adherence to ART regimens, HIV treatment literacy, and early infant diagnosis

Psychosocial support for mothers — Reducing stress and enhancing resilient through emotional support from trained lay-counselors and peer support between mothers; Providing a sense of community, understanding, and shared knowledge; Reducing isolation and providing a platform for sharing experiences and practical advice.



10,616 HIV positive mothers completing ECS



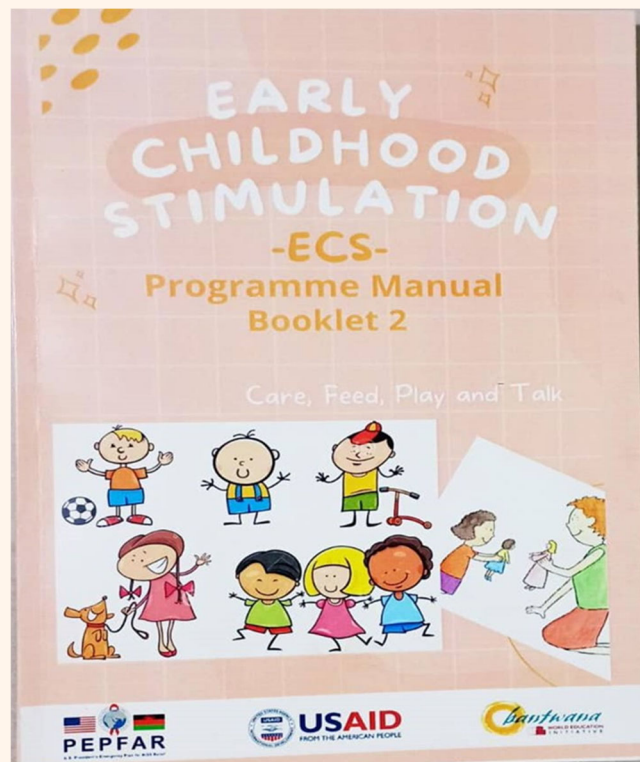
234 community and clinic cadres trained to deliver ECS



117 clinics offering ECS



803 caregivers reached with at-home catch up sessions



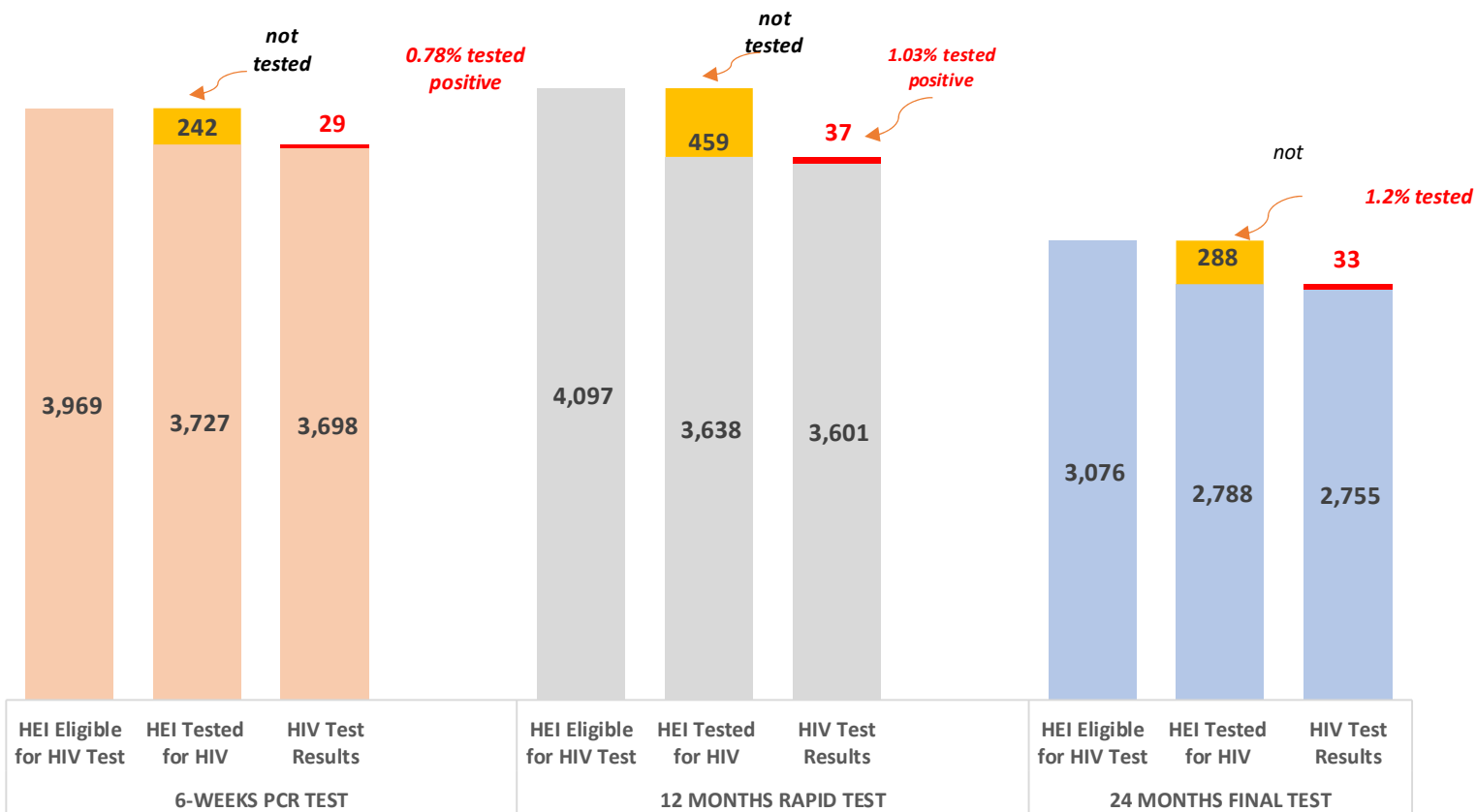
Of the **10,616 mothers who completed the ECS interventions**, **96%** had their infants tested. For the 4% who did not have their infants tested, stockouts were the most common reason.

Mother to child transmission rates were **0.78%** at 6 weeks, **1.03%** at 12 months, and **1.3%** at 24 months.

Program monitoring and follow up home visits indicated good uptake by mothers of the early childhood stimulation techniques and practices, including:

- ⇒ Engaging infants in activities such as sensory play, music, and storytelling to stimulate their infant's senses and promote brain development
- ⇒ Providing opportunities for their infants to crawl and explore their environments and encouraging reaching and grasping by the infants to support their physical development
- ⇒ Practicing nurturing and responsive interactions with their infants to develop their sense of trust, security, and attachment

Through integrated early childhood stimulation interventions, orphans and vulnerable children (OVC) programs can play a crucial role both in supporting the prevention of mother-to-child transmission (PMTCT) of HIV as well as supporting the development and wellbeing of HIV exposed infants and HIV exposed and uninfected infants. Delivering holistic and inclusive support ensures that pregnant and breastfeeding women and their HIV exposed infant receive the care and support they need.



INNOVATIONS AND LASTING IMPACT

IMPROVED ADHERENCE TO ART REGIMES FOR PREGANANT MOTHERS

APA provides psychosocial support and counseling for pregnant women and mothers living with HIV that was essential in helping women navigate the challenges associated with HIV and motherhood, reducing stress, promoting adherence to treatment regimens.

DELIVERED AT HOME CATCH UP SESSIONS

When a mother misses a session, the facilitators alert the community case care worker who is also trained in ECS. The case care worker makes regular home visits and is able to deliver an individualized catch-up session to the mother at home, as well as follow up with the mother about the missed clinic appointment and help the mother to get back on track to not miss any future clinic appointments.

ECS INTERVENTIONS INTEGRATED WITHIN GOVERNMENT HEALTH FACILITIES

Collaboration between community and clinic providers is essential. The ECS intervention is delivered in pairs by the Clinical Linkage Facilitators (community cadres with the OVC program) and Health Surveillance Assistance (Government cadres working within health facilities). Data sharing enables CLFs to use all registers to (antenatal, postnatal, ART registers) to ensure that all HIV positive pregnant women and mothers of children under 2 are enrolled in the ECS program. ECS sessions are conducted at the clinic when mother come for antenatal, postnatal, under five, and ART clinics to eliminate extra trips to the facility. Integrating the early childhood stimulation program within existing health centers and community structures/cadres ensures a comprehensive and coordinated approach.

“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**



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