



MODULE 6

Linkages to Treatment, Care, and Support for Mothers and Families with HIV Infection



Module 6: Objectives

- Identify support needs of mothers with HIV infection, and their HIV exposed infants
- Identify local support services for mothers, children, and their families
- Develop and strengthen linkages with local support services for women and children infected/affected by HIV



Module 6: Content

- Section1:
Linkage with Local Treatment, Care and Support services
- Section2:
Treatment, Care and Support of the Mother with HIV-infection
- Section3:
Treatment, Care and Support of the Infant and Young Child HIV-Exposed
- Exercises



Linkages to Treatment, Care, and Support for Mothers and Families with HIV Infection

Section 1

Linkages with Local Treatment, Care, and Support Services for Mothers and Families



Ways to Foster Linkages

- Integrate PMTCT services into existing maternal and child health (MCH) services
- Include necessary referrals, and then follow up to ensure families have easy access to linked services
- Community workers, including lay counsellors to assist women in obtaining treatment, care, and support services



Linkages to Local Treatment, Care, and Support Services for Mothers and Families

Promote linkages with:

- MCH and HIV services
- Health programmes for special needs
- Community and faith-based AIDS service programmes



MCH and HIV services

- Entry points for PMTCT treatment, care, and support
- PMTCT is integrated into MCH services through development of human capacity and programme development
- Caring for and treating families affected by HIV shared responsibility



MCH and HIV services (continued)

- All children born to women who are HIV–infected require follow up and appropriate care
- Community MCH workers provide information on health promotion and disease prevention, as well as care and support services to these families
- Specialists may provide consultation, ARV treatment and help with the ongoing management of HIV infection



Health programmes for special needs

- Family planning, treatment of sexually transmitted infections (STIs), or assistance with substance abuse
- Care and treatment for tuberculosis (TB) may
- Nutritional support for mothers and children infected or affected with HIV



Community and faith-based AIDS service programmes

Linkages to community-based organisations can help:

- Address the isolation, social stigma, economic and emotional pressures.
- Provide a way to become involved in voluntary or paid work in HIV-related activities like outreach programs, counselling, group support



Linkages with Local Support Services

Exercise 6.1

Community Linkages: small group discussion



Linkages to Treatment, Care,
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Families with HIV Infection

Section 2

Treatment, Care, and Support of the Mother with HIV Infection



Postpartum Care of the HIV Positive Woman

- Physical assessment
- Infant-feeding support
- Family planning
- Referral for treatment



Postpartum Care of the Woman with HIV Infection

Assessment of Healing

- Wound healing
- Uterine involution
- Cessation of postpartum bleeding



Postpartum Care of the Woman with HIV Infection

Infant-Feeding Support

- Assess infant-feeding practice
- Assist mother to safely implement chosen feeding option
- Work with her to address challenges



Reproductive Health Care of the HIV+ Woman

Family Planning

- Discuss family planning in the context of HIV infection
- Support the mother's choice
- Discuss condom use for dual protection and safer sex
- Provide information about STIs



Antiretroviral Treatment

**Using combination ARVs to lower viral load
is standard of care**

Advantages to ARV treatment:

- Improved health status and quality of life
- Reduced HIV hospitalisation
- Reduced AIDS-related deaths
- Decreased MTCT rates



Symptomatic and Palliative Care

Patient and family-centered care that:

- Provides access to information
- Honors a person's choices
- Optimises quality of life
- Anticipates, prevents and treats suffering
- Addresses physical, emotional, social, and spiritual needs



Nutritional Support

Support:

- Adequate nutritional intake, including vitamin and mineral supplements as needed
- Proper storage, food, and water preparation
- Referral to nutritional services



Social and Psychosocial Support

- Support adjustment to diagnosis and approaches to disclosure
- Support mothers when diagnosis of infant exposed to HIV is unknown
- Refer to AIDS service organisations in the community
- Faith-based organisations may help with support
- Home-based care is also very helpful in providing support



Treatment Care and Support of the HIV+ Mothers

Exercise 6.2

Postpartum Case Study: small group discussion



Linkages to Treatment, Care,
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Section 3

Treatment, Care, and Support of the Infant and Young Child Exposed to HIV



Healthcare and Support of Infants Exposed to HIV

- Schedule regular follow-up visits
- Monitor growth and development, especially the first 2 years
- Immunise according to national protocols



Caution About Live Vaccines

- Live Vaccines should be avoided in symptomatic infants
- They include BCG and Yellow Fever



Follow-up Visits for Infants

- Provide PCP prophylaxis with cotrimoxazole from 6 weeks of age
- Treat helminth infections
- Screen for TB, malaria, and anaemia
- Monitor and support safe infant feeding
- Link mother to primary care and HIV treatment



HIV Testing of Infants

PMTCT interventions reduce, but do not eliminate, the risk of HIV transmission from mother to infant

- All infants born to HIV-infected mothers will test HIV+ with antibody tests at birth
- Antibody based HIV tests are not reliable until 18 months of age, unless test results are negative in child > 9 months of age



HIV Testing of Infants (Continued)

- For Infants that are being breastfed, only tests made 6 weeks after cessation are reliable
- DNA and RNA PCR tests are reliable and diagnostic in early infancy
- Infant testing for HIV is essential for:
 - The child's own health
 - The parents
 - Monitoring programme success



Educate Caregivers to Recognise Early Signs of HIV in Infants

- Low weight and/or growth failure
- Pneumonia including PCP
- Oral candidiasis (thrush)
- Lymphadenopathy
- Diarrhoea
- Tuberculosis



Integration of HIV Paediatric Care into Ongoing Care Using IMCI

Guidelines for IMCI have been adapted to:

- Reflect and address special needs of children with HIV infection
- Guide healthcare workers in provision of treatment
- Integrate care of HIV-symptomatic children into existing MCH services



Paediatric ARV Treatment

Where ARV treatment is available:

- Monitor infants and children for symptoms of HIV infection (and laboratory findings if available) that would make them candidates for ARV treatment
- Refer to the appropriate HIV care setting



Paediatric ARV Treatment

Before starting ARV treatment, consider:

- Existing beliefs about medications and treatment
- Caregiver commitment to provide treatment
- Ability to follow the dosing schedule
- Ease of administration



Treatment Care and Support of the HIV-exposed Infants

Exercise 6.3 **Clinical Presentation of HIV in Infants**



Module 6: Key Points

- A continuum of care is provided through linkages between PMTCT, MCH and available HIV treatment, care, and support services, including those offered by NGO, CBO, and FBO groups in the community
- Linkages to NGOs and FBOs may help families living with HIV/AIDS gain access to social support and assistance with specific needs such as housing, transportation, food, and income-generating activities
- Postpartum care includes clinical assessment, infant-feeding support, family planning, cervical screening and referral for HIV-related treatment and care



Module 6: Key Points

- Infants exposed to HIV require follow-up care to monitor growth and development, immunisations and prophylaxis for infections. They also require testing to determine HIV status.
- IMCI guidelines can help healthcare workers integrate care for children who are HIV exposed or HIV infected into ongoing MCH services



Module 6: Key Points

- PMTCT-Plus programmes provide linkages to treatment, care and support services for mothers who are HIV-infected, their children, and other family members
- Timing of testing and diagnosis of HIV infection in infants and young children varies according to feeding practices and available tests