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**AIDSFree SUCCESS STORY**

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# Community Focal Mothers Keep Mothers and Babies in Care in Eswatini

By Alexandra Coombs, *AIDSFree Program Officer, JSI*, and Jennifer Pearson, *AIDSFree Technical Advisor, JSI*.

**T**he mothers in my community now know the importance of taking their baby to the clinic; before they did not understand," Ntombi Dlamini, an AIDSFree-trained community focal mother in the Shiselweni region explains. "Sometimes they tell me that the clinic is far away, maybe they don't have money for transport. But I remind them how important the health services are."

Keeping mother-baby pairs retained in care is important so that infants receive HIV testing and can start on antiretroviral treatment if they are HIV-positive. However, in the Kingdom of Eswatini, less than half of HIV-exposed infants are retained in care long enough to receive their final HIV test at 18 months or after the end of breastfeeding. This means a child may go undiagnosed for HIV, increasing the likelihood of childhood mortality. Regular testing is critical to prevention of mother-to-child transmission of HIV (PMTCT).

Regardless of HIV status, missing clinic visits also means infants are missing crucial immunizations, growth monitoring, and vitamin A supplementation. Mothers who fall out of care also miss important services, including infant feeding counseling, family planning services, and screenings for tuberculosis and cervical cancer.

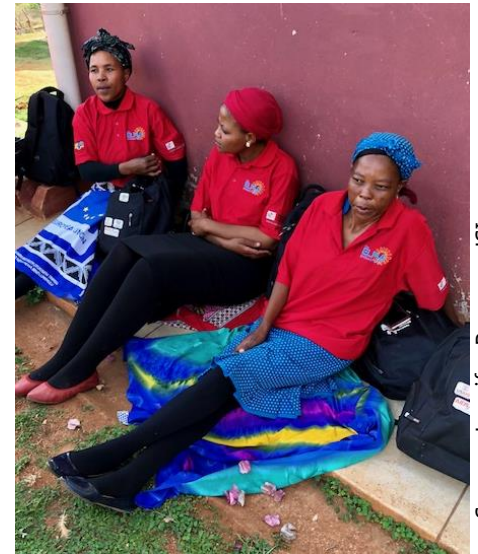
## A proactive approach to prevent loss to follow-up

A proactive approach was developed by the Strengthening High Impact Interventions for an AIDS-free Generation (AIDSFree) Project in the Kingdom of Eswatini. AIDSFree is a five-year project funded by the U.S. President's Emergency Plan for AIDS Relief through the United States Agency for International Development led by JSI Research & Training Institute, Inc., with PMTCT leadership in Eswatini provided by Elizabeth Glaser Pediatric AIDS Foundation (EGPAF).

AIDSFree's mother-baby pair retention in care program recruited local mothers to keep mother-baby pairs connected to care. By training community focal mothers (CFMs) to follow up with mothers in their homes, mothers are reminded and encouraged to bring their child in for clinic visits so both can receive necessary health services.

At the three clinics, mother-baby pairs are enrolled at their six-week postpartum visit and assigned to a CFM for follow-up in the community. The AIDSFree-trained CFMs visit homes with new babies to develop a care plan with the mother, covering the next two years. As many mothers in the Kingdom of Eswatini return to school or work after delivery, this care plan helps them anticipate changes in location that would prevent them from taking their babies in for clinic visits. Every month the CFMs review the plan with the mother to prepare for the next visit.

CFMs also problem-solve challenges with the mother, or the baby's primary caregiver, and remind them of the next scheduled clinic visit. This proactive approach helps ensure babies attend all visits, even when they are left in the care of other family members. "Some babies are left with their grannies, and the CFM comes to educate the grandmothers and ensure that children are taken to the clinic," explains Lencane, age 28, mother of four and client in the program. "The CFM further assists the granny in explaining what is written in the Child Health Card pertaining to the next visit date." The CFM is equipped to speak to whoever is caring for the child, so that they can emphasize to that person the importance of the baby's clinic visits and ensure that no children are lost to follow-up.



Source: Jennifer Pearson, JSI

**AIDSFree-trained community focal mothers at their monthly meeting at Silele Red Cross Clinic.**



## Community to facility referrals

CFMs issue referral forms to mother-baby pairs when they have missed a visit. This encourages them to complete the missed visit as soon as possible and helps link them back to care *before* they are lost to follow-up.

"When a mother has missed a facility visit, I use the referral slip. I encourage mothers to go back to the health facility as soon as possible," describes Nomalanga Matse, a CFM. Mothers take this referral seriously, and act quickly on the advice of the CFM. "With one mother, I wrote a referral and I saw the next day she had already gone to the health facility," says Matse. This referral system has proven to be effective—all 75 referral forms issued resulted in linkages back to facility care.

As CFMs remind mothers about the importance of attending all appointments on time and successfully refer those who have missed visits, the impact of the program is felt in the facility. "This program has helped us as a facility—we've seen quite an improvement in our facility data," said Delsile Nxumalo, data clerk at Silele Red Cross Clinic in Shiselweni Region. "We are seeing children and even their mothers adhering to their visits."

The referral system also takes the burden of defaulter tracing off of health facilities that often lack the staff and resources to identify and contact mother-baby pairs when they miss a visit. "Community focal mothers are our hand in the community," said Thando Khumalo, the clinic focal person assigned to the mother-baby pair program at Silele Clinic. "They have really helped, they visit the mothers and remind them to come to their visits and follow up when they don't."

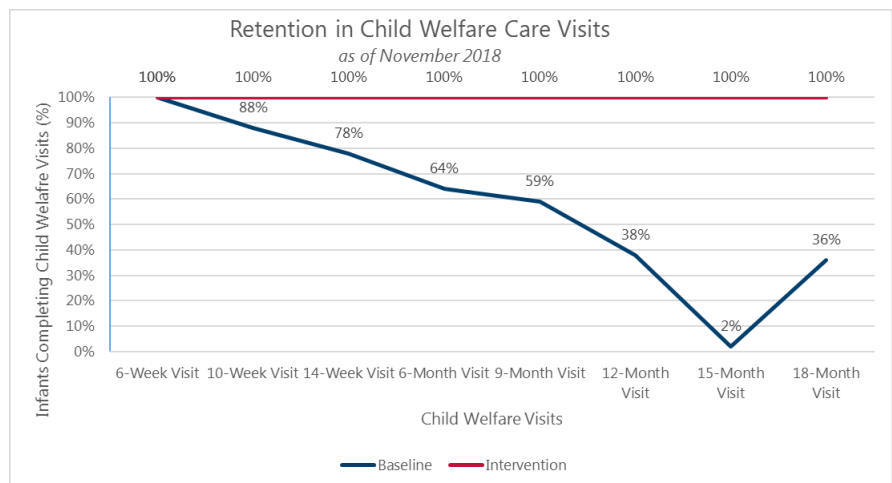
## Improved retention in care

Between June 2017 and November 2018, AIDSFree demonstrated success with this program, with over 400 mother-baby pairs retained in care and attending their facility visits per the Ministry of Health schedule. In the 18 months of implementation, 82% of mother-baby pairs enrolled missed *no visits* and completed all visits on time; 100% of those who did were issued referrals and successfully linked back to care. None of the mother-baby pairs were lost to follow-up.

Staff at Silele Clinic are grateful for the role CFMs play. "CFMs have removed work from us at the health facility," said Zandile Magongo, head nurse at Silele Clinic. "Now we have up-to-date information, thanks to the community focal mothers."

AIDSFree is continuing the program in the three clinics, and is working with the Ministry of Health and other partners in Eswatini to scale up the CFM model nationally using additional community cadres. Clinics that have benefitted from the program support these efforts.

"We would love for this mother-baby pair program to continue," said Magongo. "We don't know what we'd do without our community focal mothers now—and we have the facility data numbers to show it."



Source: AIDSFree Mother-Baby Pair Retention in Care through Community Focal Mothers: Final Report, 2018

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