

The Results Are In

Every year mothers2mothers (m2m) evaluates the performance of our country programmes. The results for 2013 are now in and we are delighted to report that m2m clients and their babies showed continued improvement in health behaviours and outcomes, and the performance at sites with an m2m presence surpassed almost all national rates where data are available. Even more exciting, analysis reveals that women who engaged a Mentor Mother two or more times were significantly more likely to adopt healthy behaviours than clients who saw a Mentor Mother only once.

"This suggests how effective Mentor Mothers are in getting women to adopt healthy behaviours, engage in care, and follow their treatment," says Frank Beadle de Palomo, m2m's President and CEO. "At m2m, we are committed to retaining an even greater number of HIV-positive women in care throughout their pregnancy and after birth to ensure that they adhere to medical treatments so critical to keeping themselves and their babies healthy."

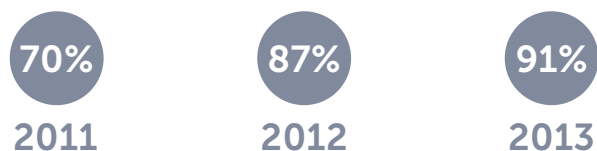
To read the Summary of Key Findings, [click here](#). Below are some of the highlights:

Maternal and Infant Health Behaviours and Outcomes

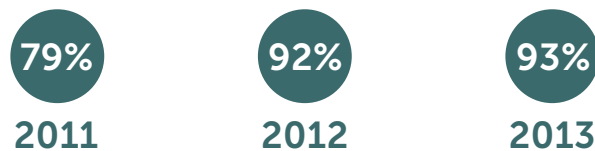
The 2013 m2m Programme Evaluation shows an upward trend in the uptake of prevention of mother-to-child transmission (PMTCT) services and health outcomes among m2m clients and their babies since 2011 when m2m began to conduct in-depth annual reviews. Comparing 2012 with 2013 alone, seven out of fourteen indicators that are tracked on a quarterly and annual basis improved. The other indicators remained constant with no decrease between 2011, 2012, and 2013. They include:

m2m clients in 2011, 2012, and 2013 who...

Disclosed their HIV status



Delivered in a health facility



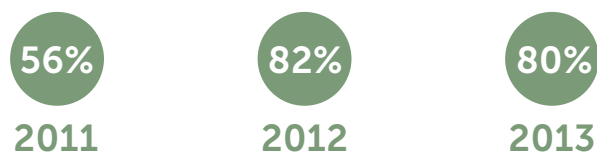
Took a CD4 test while pregnant



Received ARVs after birth



Exclusively breastfed



Babies of m2m clients in 2011, 2012, and 2013 who...

Took an early infant diagnosis (PCR) test



Received ARVs



Babies of m2m clients who tested positive for HIV at 6-8 weeks



National Comparisons

m2m also compared our in-country performance with national rates. Where comparative statistics are available within countries, m2m clients exceeded key national outcomes reported in the 2013 UNAIDS Report on the Global AIDS Epidemic*, including:

HIV-positive women taking ARVs/ART during pregnancy

	Nationally*	m2m clients
Kenya	53%	96%
Lesotho	58%	94%
Malawi	60%	92%
South Africa	83%	98%
Swaziland	83%	94%
Uganda	72%	97%

Babies born to HIV-positive mothers who received ARVs prophylactically

	Nationally*	m2m clients
Kenya	57%	91%
Lesotho	not avail.	96%
Malawi	54%	95%
South Africa	84%	99%
Swaziland	69%	91%
Uganda	not avail.	85%

Babies born to HIV-positive mothers tested at 6-8 weeks to determine if they had been infected with HIV

	Nationally*	m2m clients
Kenya	39%	92%
Lesotho	not avail.	90%
Malawi	4%	85%
South Africa	85%	92%
Swaziland	81%	76%
Uganda	not avail.	96%

Multiple m2m Visits

Clients who engaged a Mentor Mother two or more times were more likely to disclose their HIV status, a behaviour that has been found to increase the likelihood that a woman will take advantage of PMTCT services. They were also more likely to exclusively breastfeed for the first six months of their child's life, a practice that is recommended by the World Health Organization for HIV-positive mothers who are taking a regimen of ARVs to prevent transmission of the virus. In addition, two or more visits to a Mentor Mother are associated with a higher uptake of ARVs as well as increased infant HIV testing for early infant diagnosis.

Conclusion

The improvement of maternal and child behaviour and health outcomes among m2m clients between 2011 and 2013 suggests that the two major initiatives m2m launched in 2012 have been effective. More specifically, Active Client Follow Up (ACFU) has improved the ability of Mentor Mothers to follow up with clients and keep them in care. Strengthening Outcomes by Analysing Results (SOAR) has enabled staff to monitor each of our sites on a regular basis so that we know how they are performing, and can identify and respond quickly to both exceptional and problematic outcomes.

The Annual Evaluation demonstrates that clients who engage a Mentor Mother more than once are more likely to adopt healthy behaviours. This reinforces our commitment to retain more women in care. Last year, m2m launched two programmes that we believe will help achieve this. Our new Enhanced Programme Model (EPM) is designed to increase retention in care by offering a wider range of services critical to our clients. Furthermore, m2m's Community Mentor Mother (CMM) programme, currently being piloted in Malawi and Uganda, will enable Mentor Mothers to reach out into the community to follow up with clients and keep them connected to facility-based services, and engage new women in PMTCT and other critical health services, thereby retaining those who might otherwise be lost to care.