

The effect of peer support and integrated service delivery in retention in care of PMTCT clients

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Background

- mothers2mothers (m2m) is an African non-profit organisation that unlocks the power of women to eliminate childhood AIDS and create healthy families. m2m trains and employs women living with HIV in sub-Saharan Africa as "Mentor Mothers". Through their training and employment, they become role models who help women and families at health facilities and in their communities access essential services and medical care, start on any treatment they need, and continue with their health journey. From an initial focus on prevention of mother-to-child transmission of HIV, m2m now delivers a range of services for newborns, children, adolescents and families, to ensure the whole community thrives, not just survives.
- Since 2001, m2m has created jobs for over 11,000 women living with HIV in sub-Saharan Africa, and these Mentor Mothers have reached over 11M women and children under two with lifesaving health services. In 2018, we achieved virtual elimination of mother-to-child transmission of HIV for our enrolled clients for the fifth year in a row. For more, see www.m2m.org.
- The need to strengthen bidirectional linkages between the health facilities and community strategically supports PMTCT clients through retention-in-care over time.
- Through a peer-based model that robustly acts as a support system for ART initiation among treatment-naïve clients.
- Retention in care among all HIV PMTCT clients through an integrated service platform (ISP) where Mentor Mothers are deployed both at facilities and in communities.
- The aim is to achieve early identification of clients and strengthening retention in care, treatment adherence and responsiveness to client needs thereby reaching the last mile.

Methods

- Over 2,690 women, 48% of whom were treatment-naïve were enrolled across Eswatini, Kenya, Lesotho, Malawi, South Africa and Uganda.
- The retention-in-care on treatment (RIC) was assessed by reviewing each woman's ART pick-up history from facility records for 24 months.
- The probability of retention on ART at 24 months post-initiation by the number of contact sessions a client has with a Mentor Mother was assessed.
- Retention-in-care at various time points was compared between clients who attend the ISP versus those at facility-only sites.

Results

- Retention rate 24 months post-ART initiation was 94% among m2m's treatment naïve clients which increased with the number of Mentor Mother contacts a client had; however, a minimum of eight sessions is needed to reach the global target retention rate of 90% retention at 24 months (fig. 1).
- Retention peaks at 97% at 12 or more visits, suggesting that 12 visits may be the optimal number when balancing the goal of retaining clients in care and minimizing costs



Conclusion

- The results demonstrate the effectiveness of m2m's ISP in achieving retention-in-care among clients.
- The variation in retention rates by ART exposure and Mentor Mother contact indicates the need for differentiated services to optimise client outcomes; m2m will continue strengthening our risk profiling and client triaging approaches.

