MENTOR MOTHERS: CONNECTING HIV-POSITIVE WOMEN IN DRC

For people living with HIV, a person who is living through the same situation can provide emotional support, education, and advice. In the Democratic Republic of the Congo (DRC), the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) is piloting a project to provide women and families affected by HIV with more personal support. HIV-positive women who have used health care services to prevent mother-to-child transmission of HIV (PMTCT) act as experienced peer “mentors” for other women accessing PMTCT services, and their families.

The Issue
In 2012, an estimated 480,000 people were living with HIV in DRC. Currently, the severe shortage of trained health care providers in clinics and hospitals means that they are not able to provide adequate attention to each woman or child. Additionally, these care providers are not always trained to be sensitive to the delicate and often complex issues experienced by HIV-positive pregnant women.

EGPAF’s Response
Since they are living with HIV as well, “Mentor Mothers” understand the needs of HIV-positive people and families. They have experienced the health care system, and have insight into how to navigate it.

“The Mentor Mothers are very excited to support other HIV-positive women who are going through the PMTCT process,” said Berthe Banzua, EGPAF’s PMTCT Specialist for the Integrated HIV/AIDS Project.

The program serves women in the Kinshasa, Orientale, and Katanga provinces of DRC. Mentor Mothers are women living with HIV who have been trained to work in collaboration with health workers and other peer educators to encourage, educate, and empower HIV-positive pregnant women and new mothers about their health and their babies’ health.

The mentors’ goal is to support HIV-positive mothers and help them to attend necessary health services for themselves and their babies. Mentor Mothers encourage pregnant women to attend doctors’ visits at clinics during and after pregnancy; urge mothers to bring their newborn babies back to clinics for doctors’ visits, immunization, and...
early infant diagnosis of HIV; and talk to women about the recommended techniques for feeding their babies. Mentor Mothers facilitate HIV education through group health talks; provide advice and support to HIV-positive women and couples; follow up with HIV clients who have missed clinic visits for prevention of mother-to-child transmission of HIV (PMTCT); refer clients to PMTCT, maternal and child health, and HIV care and treatment services as needed; and encourage male partners to seek health care with their female partners.

Results
Already, the Mentor Mothers program has shown success in countries like Kenya in increasing the number of mothers and babies receiving HIV medication and health care, while also improving participation of male partners in preventing mother-to-child transmission of HIV, a promising outcome which could have implications for eliminating pediatric HIV in DRC.

With funding from the U.S. Centers for Disease Control and Prevention (CDC), EGPAF operates its Mentor Mothers program in Kinshasa and Katanga provinces under the Malamu project in close collaboration with the DRC Ministry of Health and the National AIDS Control Program.

WHY IT MATTERS
IN 2012

- **35 MILLION** people in the world LIVE WITH HIV
- **3.3 MILLION** of those infected ARE CHILDREN
- **700 CHILDREN** are INFECTED with HIV EVERY DAY
- Almost **50%** of HIV infected infants will DIE BEFORE their **2** ND BIRTHDAYS without diagnosis and treatment
- **90%** of child infections are from MOTHER-CHILD transmission
- Nearly **100%** of these infections are preventable

**Partners**
The activities described above are made possible by the generous support of the American people through the United States Agency for International Development (USAID) and the U.S. Centers for Disease Control and Prevention (CDC) under the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), and through the generous support of other Foundation supporters. The content included here is the responsibility of the Elizabeth Glaser Pediatric AIDS Foundation and does not necessarily reflect the views of CDC, the United States government, or other EGPAF sponsors.

To find out more about EGPAF’s work to eliminate pediatric AIDS, visit www.pedaids.org.

*Elizabeth Glaser acquired HIV in 1981 through a blood transfusion and unknowingly passed the virus on to her daughter Ariel and her son Jake. Following Ariel’s death in 1988, Elizabeth joined with two close friends with one goal: to bring hope to children with AIDS. The foundation that now bears Elizabeth Glaser’s name has become a global leader in the fight to eliminate pediatric AIDS, working in 15 countries and at more than 7,300 sites around the world to prevent the transmission of HIV to children and to help those already infected with the virus. EGPAF’s global mission is to implement prevention, care, and treatment; further advance innovative research; and give those affected by HIV and AIDS a voice - bringing dramatic change to the lives of millions of children, women, and families worldwide.*