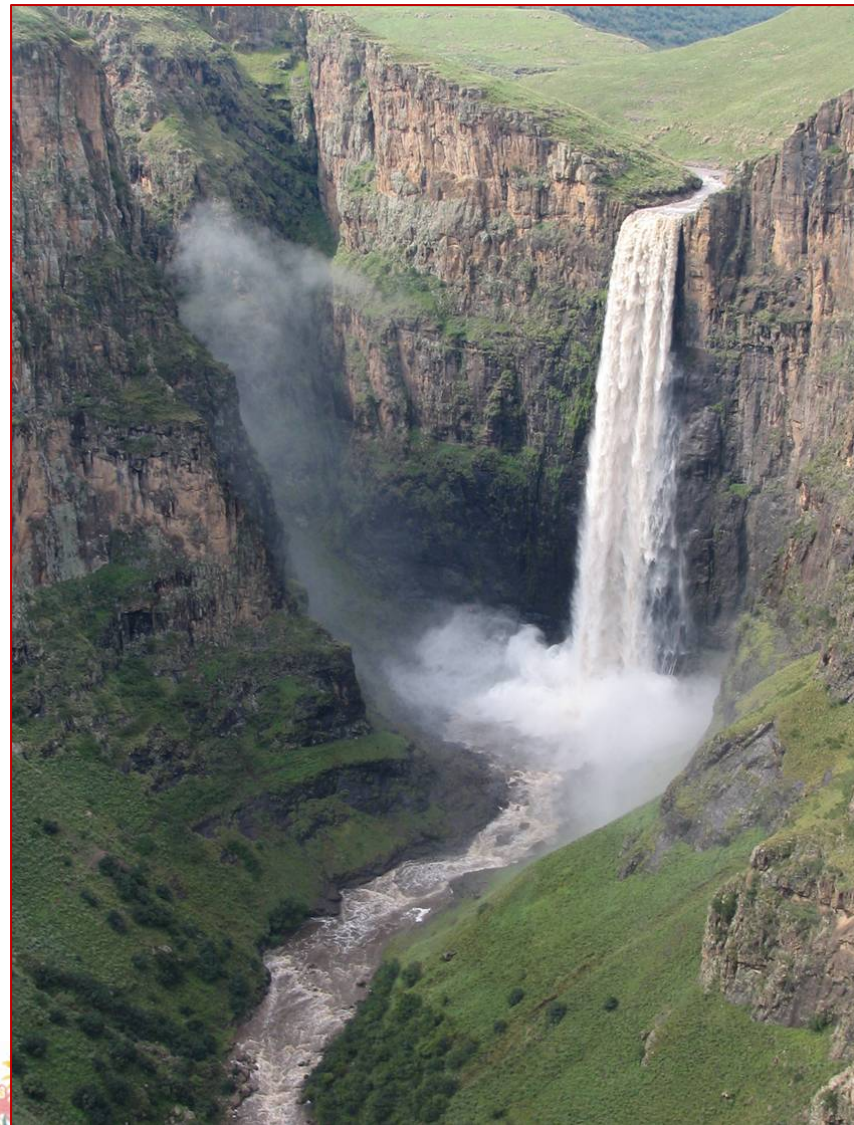


# COMMUNITY MALE INVOLVEMENT IN PMTCT AND CARE AND TREATMENT

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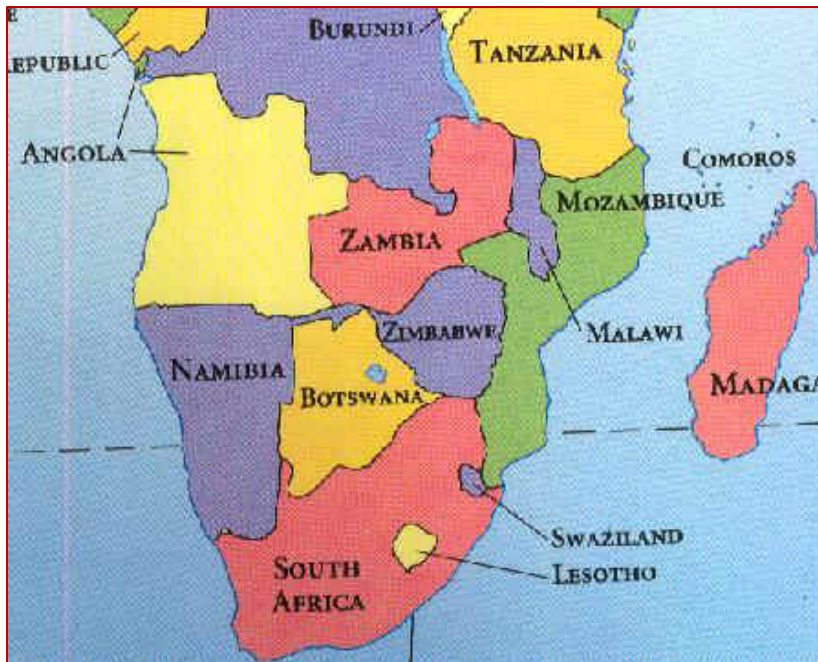


# KINGDOM OF LESOTHO





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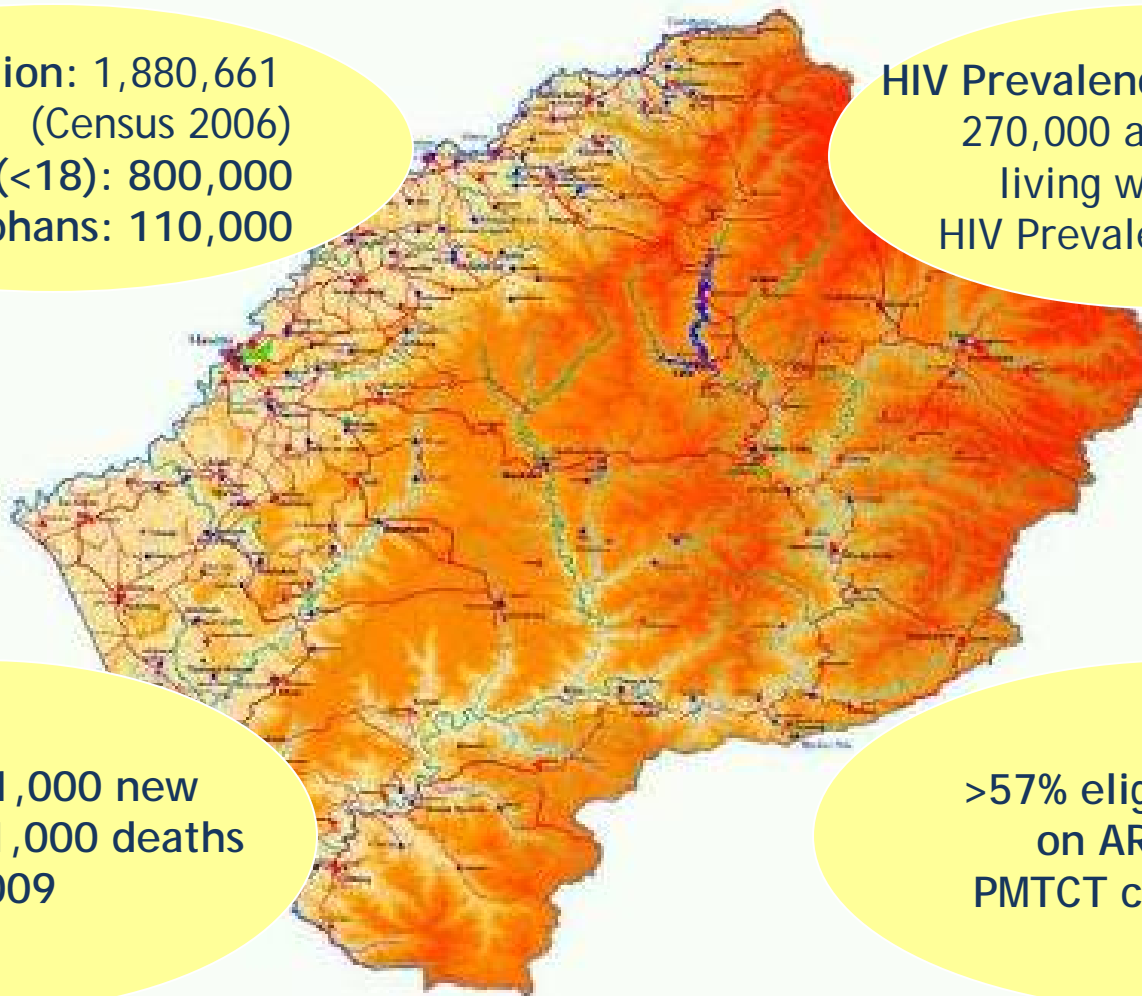
# IMPACT OF HIV IN LESOTHO 2008

Population: 1,880,661  
(Census 2006)  
Children (<18): 800,000  
Orphans: 110,000

HIV Prevalence Rate: 23.6%  
270,000 adults & children  
living with HIV in 2009  
HIV Prevalence in ANC 27.7%

Estimated 21,000 new  
infections & 11,000 deaths  
in 2009

>57% eligible patients  
on ART in 2009  
PMTCT coverage >71%



# ISSUES

- Lesotho has the 3<sup>rd</sup> highest HIV prevalence with 23.6%
- It is estimated that there are 50,000 births country per year out of which 12,855 infants are born from HIV infected women
- The most significant mode of HIV infection in children and infants is from mother-to child
- Low levels of partner testing
- Limited male involvement in PMTCT
- Males act as financial providers and decision makers on ANC, delivery services, and infant feeding practices

# STEPS: MALE SUPPORT GROUPS

- Mobilization done through Health facility and community councils.
- Health facility male participation committee set up
- Recruitment and establishment of MSG
- Male support groups -59 established in 6 districts.
- Membership range 30-45 attendants per meeting
- To date 2,655 registered members





# SUPPORT OFFERED TO MSGS

- Trainings: there is a clear training curriculum for MSGs
- Monthly meetings to create forums for sharing experiences and peer counseling
- Health education on positive living and support of PLWHAs
- On- going counseling by health workers
- Distribution of IEC materials
- Distribution of condoms



# Examples of Questions to Facilitate a Support Group for a Male Involvement in PMTCT

- What are some common beliefs about men's and women's roles and responsibilities in PMTCT?
- What are some of the factors that make men feel comfortable/uncomfortable about accompanying their partners to the antenatal clinic for PMTCT?
- What are some of the benefits in supporting/collaborating with women to prevent vertical HIV transmission? What are some of the drawbacks of not supporting/collaborating with women to prevent vertical HIV transmission?
- What are some of the roles that men can play as fathers to play a supportive/ collaborative role in preventing vertical HIV transmission?
- What do you think are some of the potential challenges that your partners (female) could face in accessing PMTCT services?
- What might be some of the benefits for men to help their partners overcome these potential challenges in accessing PMTCT services?
- What are some ways that men can help their partners in overcoming these challenges?



# ACHIEVEMENTS IN 2009/2010

- 15 Male sensitization workshops on PMTCT reaching out to 450 males.
- 10 Male sensitization meetings on MCH reaching out to over 600 males
- 4 Public awareness campaigns on MCH with spot-on HIV testing and counseling(HTC)
- 3 Sports Against AIDS Campaigns(Soccer tournaments )with spot-on HTC



## ACHIEVEMENTS CONT.

- Male tested at community level through focal persons(EGPAF supported volunteers) - 5,092
- Male partners referred for care by focal persons -1,083.
- Increased number of men accompanying spouse to clinic.
- Increased use of ARV prophylaxis by women.



# ACKNOWLEDGEMENTS

- Members of Male Support groups
- All teams working at health facilities and in communities
- All EGPAF staff
- All families infected or affected by HIV

