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Strengthening High Impact Interventions  
for an AIDS-free Generation

## AIDSFree SUCCESS STORY

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

**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. PMTCT efforts in the Kingdom of eSwatini are led 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 her anticipate changes in location that would prevent her from taking her baby in for clinic visits. Every month the CFMs review the plan with the mother to help her think proactively and plan for the next visit.

CFMs educate mothers on the importance of attending all appointments so the child can receive services to grow well and stay healthy. As more mother-baby pairs attend visits and receive services, the impact of the program is felt in the community. "Illness is declining in the community," says Primrose Mdluli, a CFM. "Mothers are using family planning, they know about HIV testing and TB screening."



*AIDSFree-trained Community Focal Mothers at their monthly meeting at Silele Red Cross Clinic.*



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 baby's clinic visits and ensure that no children are lost to follow-up.

## 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 successful—to date, all 52 referral forms issued have resulted in linkage back to facility care.

CFMs are also able to issue referrals to mother-baby pairs who are moving out of the area or transferring facilities. This allows a child to be officially documented as a transfer-out in the facility register. "Sometimes mothers call me to tell me they are going to be leaving the Chiefdom so I'll know they will be going to another facility," explains Nozipho Ndwaudwe, another CFM. Building strong relationships with the mother-baby pairs in their community helps ensure the success of the program and enables CFMs to take calls and work with mother-baby pairs on their concerns and challenges in attending clinic visits.

## Improved retention in care

Since June 2017, AIDSFree has seen success with this program, with over 350 mother-baby pairs retained in care and attending their facility visits per the Ministry of Health schedule. None of the mother-baby pairs have been lost to follow-up.

CFMs and the traditional government structures in eSwatini both support this program. "I'm proud to have the trust of my community," says Mdluli, one of the CFMs. By working closely through traditional structures, CFMs have also gained buy-in from their local Chiefdoms.: "The Inner Council encourages us to continue our good work," said Fisaui Mbhumane, another CFM

Based on this success, AIDSFree is working with the Ministry of Health and other partners to plan for national scale-up of the CFM model. This will help increase the number of infants who know their final HIV status at 18–24 months and improve PMTCT rates throughout the country.

### AIDSFree

JSI Research & Training Institute, Inc.  
1616 North Ft. Myer Drive, 16th Floor  
Arlington, VA 22209 USA  
Tel.: +1 703-528-7474  
Fax: +1 703-528-7480  
Email: [info@aid-free.org](mailto:info@aid-free.org)  
Web: [aidfree.usaid.gov](http://aidfree.usaid.gov)

