

Prevention of Mother to Child Transmission

PMTCT



Flip Chart



USAID
FROM THE AMERICAN PEOPLE



BCS
PROJECT



Acknowledgements

The PMTCT Flip Chart was developed and produced by the USAID Ghana Behaviour Change Support (BCS) Project implemented by the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs, with support from the American President's Emergency Plan for AIDS Relief (PEPFAR) Initiative, and in collaboration with the National AIDS Control Programme (NACP) of the Ghana Health Service (GHS). We do appreciate the guidance and support of the Health Advisor (PEPFAR), USAID, in developing the Flip Chart. We also extend much gratitude to our partners and HIV/AIDS focal persons at the national and regional levels who actively participated in the development and the pretesting of the Flip Chart. Their critical inputs greatly enriched the content of this important job aid needed for effective counseling by health providers.

Table of Contents



INTRODUCTION

How to Use this Flip Chart	2
HIV Transmission	3
PMTCT	4

PRE – TEST COUNSELLING

Testing Procedure	5
Possible HIV Test Results	6

HIV NEGATIVE

Post – Test Counseling	7
Partner Testing	8
Discordance	9
Staying HIV Negative	10
Infant Feeding	11
A Healthy Mother and Baby	13
STI Prevention	15
Family Planning	16

HIV POSITIVE

Post – Test Counseling	17
------------------------	----

Partner Testing	19
Discordance	20
Disclosure	21
Starting ARV Treatment	22
Preparing for Birth	24
Early Infant Diagnosis	25
Infant Feeding	26
A Healthy Mother and Baby	28
Opportunistic Infections	30
STI Prevention	31
Family Planning	32
Care and Support	34

REFERENCE

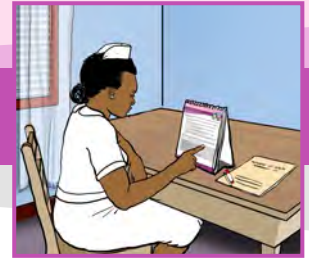
How to Use a Male Condom	35
How to Use a Female Condom	36
Positioning and Attachment– Breastfeeding	37
Recommended Immunizations	38
Nutrition for Pregnant or Breastfeeding Mother	39
Role Play	40
Referrals	41

Positive Counseling Skills

- **Pay attention** to the mother by smiling, leaning forward, making eye contact and nodding to show her you are interested and listening.
- **Use** open-ended questions starting with “Why?”, “How?”, or “What?”.
- **Empathize** with the mother by placing yourself in her situation. Be non-judgmental, sensitive, and understanding.
- **Restate** what the mother has said in a non-judgmental way. This helps the mother to know you are listening and understand her.



How to Use this Flip Chart



This flip chart will guide you through the PMTCT counseling session. It is divided into four sections. Each section is marked by a different color.

- The **purple section** should be explained to every mother. It includes the introduction and pre-test HIV counseling for the mother.
- Based on the results of the HIV test, you will continue with the green **OR** orange section. You do not need to discuss both sections with the mother.
- The **green section** should only be explained to HIV negative mothers. It includes post-test HIV counseling, staying negative, and having a healthy baby.
- The **orange section** should only be explained to HIV positive mothers. It includes post-test HIV counseling, protecting your baby from HIV, and having a healthy baby.
- The **blue section** at the end is a reference section and provides more information if needed. It includes things like position and attachment for breastfeeding, recommended immunizations, and a space to write in referrals.

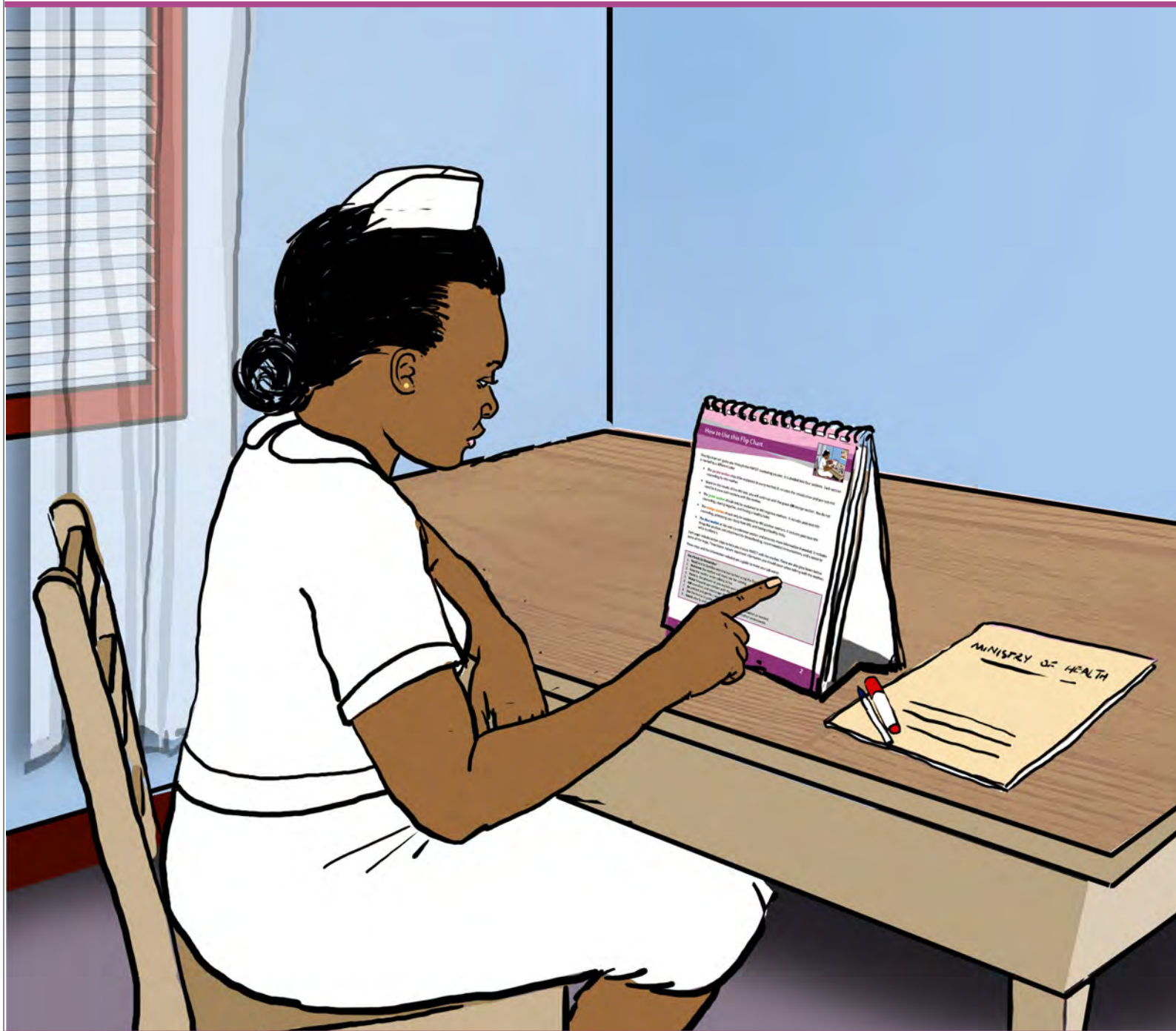
Each page includes action steps to help you discuss PMTCT with the mother. There are also grey boxes below some of the steps. These boxes include important information you should cover when talking with the mother.

These steps and the information included are a guide to make your job easier.

Key Points to Remember

- **Read** and be familiar with the text before using the flipchart.
- **Welcome** the mother and thank her for coming.
- **Face** the mother when talking to her.
- **Point** to the pictures as you explain your point.
- **Make** frequent eye contact with the mother.
- **Ask** questions and encourage discussion.
- **Be** patient and gentle, creating trust with the mother.
- **Use** the text as a guide and include additional information as needed.
- **Speak** clearly and use language and words the mother understands.

How to Use this Flip Chart



HIV Transmission



Introduce the topic of HIV and AIDS to the mother.

Ask the mother what she knows about HIV and AIDS.

Discuss the following points with her:

- HIV can be transmitted through direct contact with:
 - Blood of an HIV infected person.
 - Semen of an HIV infected man.
 - Vaginal fluid of an HIV infected woman.
 - Breast milk of an HIV infected mother.
- HIV can be acquired through:
 - Unprotected sexual intercourse without a condom with an infected person.
 - Sharing sharp objects like razor blades or body piercing instruments with an infected person.
 - An infected mother to her unborn baby during pregnancy, labor, delivery, or breastfeeding.
- The most common ways HIV is transmitted in Ghana is through:
 - Unprotected sexual intercourse.
 - From a mother to her infant.
- All women who are pregnant have had unprotected sexual intercourse and are at risk of HIV infection.
- HIV **CANNOT** be transmitted by:
 - Mosquito bites.
 - Eating from the same plate with an infected person.
 - Shaking hands, hugging, or touching people.
 - Sharing toilet facilities.

Remember to correct any myths or misunderstandings the mother may have.

HIV Transmission





Explain mother-to-child transmission by telling the mother the following:

- Mother-to-child transmission is when an HIV-infected woman passes the virus to her baby during:
 - o Pregnancy
 - o Labor and delivery
 - o Breastfeeding
- There are steps an HIV-positive mother can take to help lower the chance of passing HIV to her baby.
 - o Medicines for her and her baby to take.
 - o Safer ways for her to deliver her baby.
 - o Safer ways to feed her baby.
- The first step in preventing the transmission of HIV to the baby is to know your HIV status.

Tell the mother she will be offered an HIV test today so she can make the right decisions in protecting her baby, her partner and herself.

Discuss the following benefits of testing with the mother:

- o Once you know your results you can deal with your concerns and talk about them with me.
- o You can plan for the future of yourself and your baby.



Testing Procedure



Tell the mother you would like to do an HIV test today as part of regular ANC.

Explain to the mother that an HIV test has three steps.

Pre-Test Counseling

- We will talk about your everyday life.
- We will discuss your HIV concerns and risks and answer any questions you may have.
- We will prepare for the HIV test and discuss the different results you could have.

Testing

- A small amount of your blood will be taken.
- It will be a very short time (_____ minutes) to get your results.

Post-Test Counseling

- You will get your results before leaving the facility today.
- Once I give you your results we can discuss what you can do to protect yourself and your baby.

Encourage the mother to get an HIV test by explaining the following:

- Your HIV test is confidential.
- Only you and select health facility staff who take care of you will know your HIV test result.
- You may choose to disclose your status to others.
- You have the right to refuse an HIV test.
- If you refuse we will continue to offer you the opportunity to test for HIV even if you are not ready now.

Testing Procedure



Possible HIV Test Results



Explain to the mother that an HIV test result can be positive or negative.

If you test negative

- We can discuss ways to protect yourself, your partner, and your baby from getting HIV.

If you test positive

- You can get medicines to reduce the risk of passing HIV to your baby during pregnancy, labor, delivery, and breastfeeding.
- You can learn safer ways to care for your baby to lower the chance of passing HIV.
- You can receive care and support services for yourself and your baby.

Ask the mother if she can invite her partner to get an HIV Test.

Discuss that it is possible for her partner to have the same or different test results.

- You could both be HIV negative.
- You could both be HIV positive.
- You could have different results where one partner is infected while the other partner is not infected. This is called discordance.
- Sometimes couples have been together for many years, may even have children, and still have different HIV test results.

Ask the mother if she is ready to take the test.

Disclose to the mother her results before turning to the next section

- If the results are negative, go to the (**GREEN**) section.
- If the results are positive, go to the (**ORANGE**) section.

Possible HIV Test Results



Post-Test Counseling



Tell the mother that her test result is ready.

Provide the mother's result simply and clearly by saying the following:

- Your test result is negative.
- This means HIV was not found in your blood.

Ask the mother if she understands her result.

Ask the mother how she feels about her result.

Tell all women that tested negative the following:

- There is a small chance the test may not have detected HIV if you have had unprotected sex in the last 3 months.
- You will need to test again after 34 weeks if:
 - o You have recently had sex with someone whose status is unknown, or
 - o This is your first test.

Set-up an appointment for the mother to test again.

Post-Test Counseling



Partner Testing



Explain to the mother that every pregnant woman should ask her partner to get an HIV

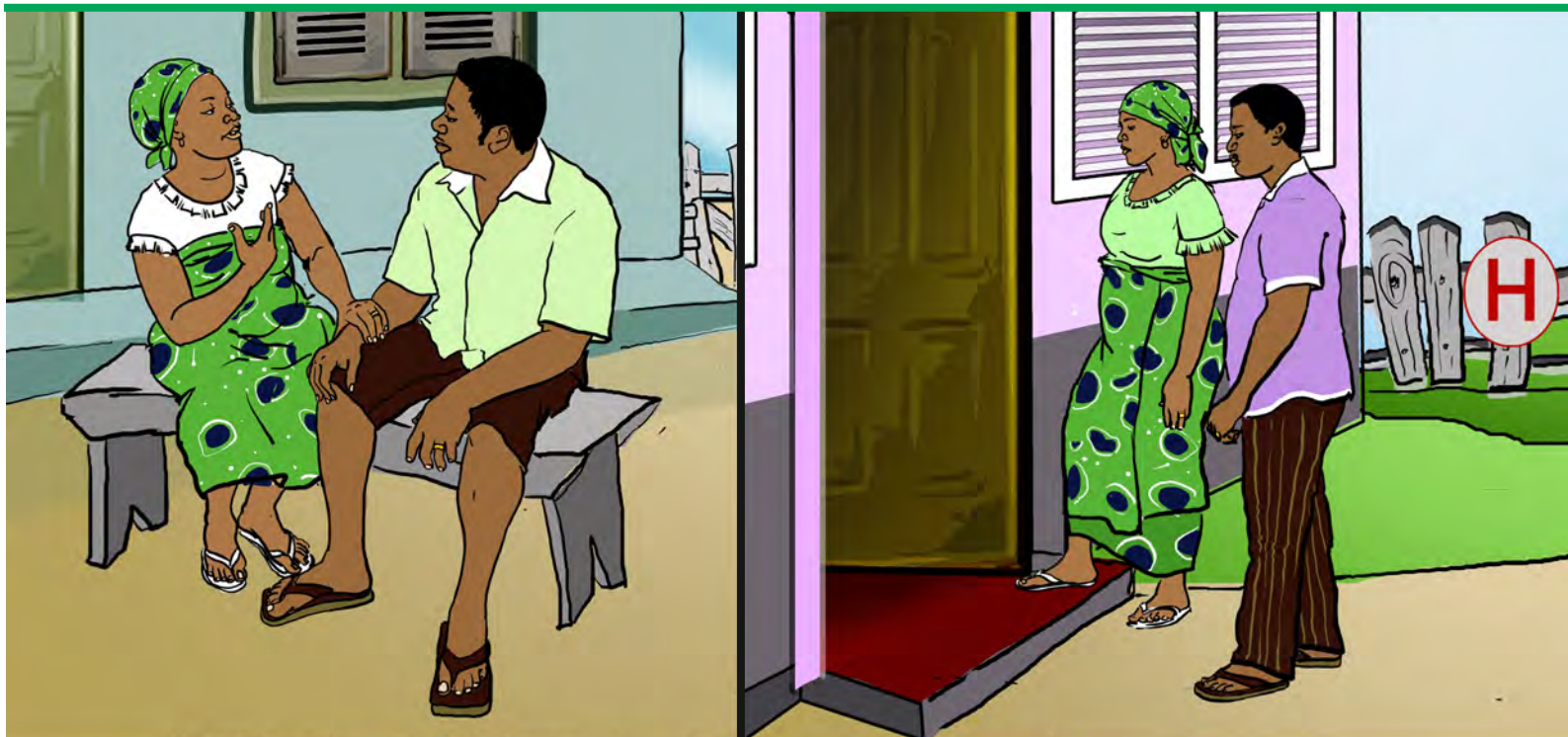
- The fact that you are HIV negative does not mean your partner is also HIV negative.
- It is possible for you to be HIV-negative, and for your partner to be HIV-positive.
- If your partner refuses to get an HIV test done, come back to the clinic and we can discuss how to encourage him to do the test.

Discuss with the mother the benefits of knowing your partner's HIV status.

- When couples have different test results, the HIV-negative person is at risk of getting HIV.
- If you get HIV in pregnancy or while breastfeeding it can increase the chance you will transmit HIV to your baby.

Remind the mother where she and her partner can get HIV testing services (here at the clinic or at another HIV test site).

Partner Testing



Discordance



Explain the following points about discordance:

- It is common for couples to have different test results.
- You and your partner can be together for many years and have different results.
- Having different results does not mean your partner has been unfaithful during your relationship. He could have been infected before you became a couple.

Remind the mother that it is important for her to protect herself and her baby by staying HIV negative.

If your partner is HIV positive or of unknown status, it is very important to protect yourself from becoming infected.

- Although your test results are negative today, you can still get HIV if you continue having sex without a condom.
- If you become HIV positive during your pregnancy, there is a chance of transmitting the virus to your baby.

Remind the mother that she cannot tell if someone has HIV by the way they look. The only way to know one's status is to get an HIV test.

Discordance



Staying HIV Negative



Discuss the following options to prevent HIV infection:

- Know you and your partner's status by getting tested together.
- Use condoms every time you have sex.

Refer to the picture and explain the following to the mother to help her stay healthy:

Testing for HIV with your partner.

- You will learn your HIV status together. This way you are sure about the status of your partner.
- You can deal with your HIV concerns together and talk about them with a counselor.
- You can plan for the future together.

Being committed to one partner who is committed to only you.

- One of the best ways to protect each other from getting HIV is by being faithful to each other.
- This means you only have sex with each other.
- Having sex with other partners without using a condom puts you and your partner(s) at risk of getting HIV.
- If you have other partners, ask them to go for testing.
- If your partner refuses to get tested, try to talk about condom use.
- Talk to your partner about being faithful.

Negotiating the use of condoms.

- It is important to negotiate for the use of condoms.
- Use condoms until you get tested together and are sure he is HIV-negative.
- Use condoms if your partner's HIV status is positive or if your partner will not get an HIV test.
- Use condoms if you think your partner has unprotected sex with others.

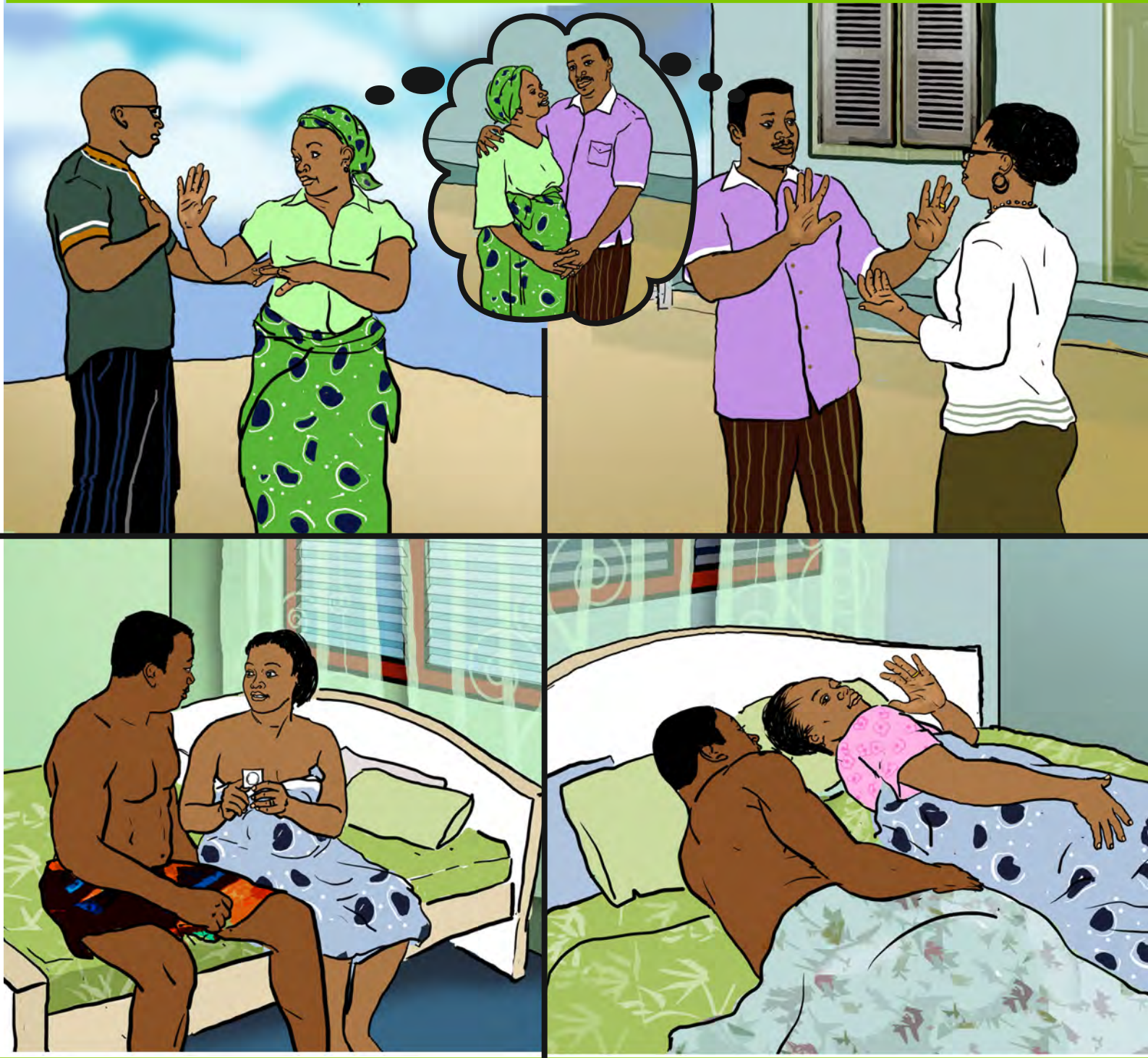
Discuss why it is important to use condoms during pregnancy or breastfeeding.

- If a pregnant woman becomes infected during pregnancy or breastfeeding, there is a chance she will infect her baby.

Abstaining from sexual intercourse.

- Abstain from sexual intercourse until your partner gets an HIV test and you are sure he is negative. This will help to protect you and your baby.

Staying HIV Negative



Infant Feeding



Explain to the mother that breastfeeding her baby provides all the nutrients and water a baby needs, and protects the baby from diarrhoea and other illnesses.

Discuss the following points if the mother chooses to breastfeed:

- Position and attach your baby well to help ensure your baby suckles and you produce a good supply of breast milk (refer to position and attachment in **blue** section).
- Start breastfeeding within 30 minutes after delivery.
- Breastfeed as often as the baby wants, day and night.
- Exclusively breastfeed the baby for six months to protect your baby from many illnesses, such as diarrhoea and respiratory infections. Exclusive breastfeeding means the baby receives only breast milk and no other liquids or foods.
- At 6 months, begin introducing complementary feeds.
- Continue to breastfeed up to 2 years and beyond.

Remind the mother that giving her baby foods or any kind of liquids other than breast milk, including infant formula, animal milks, or water before 6 months can damage her baby's stomach.

If the mother is unable or decides not to breastfeed the baby, she can only use commercial infant formula milk (see next page).

Infant Feeding



Infant Feeding



Counsel the mother on commercial infant formula feeds period.

Remind the mother to **ONLY** give commercial infant formula milk if she is able to:

- Wash your hands with soap and clean water before preparing formula and feeding baby.
- Afford enough supplies for the baby's normal growth and development until he or she reaches at least 6 months.
- Use clean water to mix with the infant formula by bringing the water to a boil for at least 2 minutes
- Store water in a clean flask or covered container specially reserved for boiled water.
- Wash the utensils with clean water and soap, and then boil them to kill the remaining germs.
- Use clean spoons or cups to feed the baby.
- Store the formula tin in a safe clean place.

Remind the mother not to give water, sugar water, cod liver oil, fruit juice, pito, herbal preparations, koko, milk or other liquids or foods for the first 6 months.

Infant Feeding



A Healthy Mother and Baby



Discuss with the mother the following points to help her have a healthy pregnancy and baby:

- Continue to come to ANC for the recommended 4 visits to monitor your health and the health of your baby.
- Eat at least three times each day to keep healthy.
- Eat a good balance diet (refer to nutrition for a pregnant or breastfeeding mother in the **blue** section).
- Drink clean water daily by boiling or treating.
- Do not take drugs that are not prescribed by your health worker.
- Receive Tetanus Toxoid immunization during pregnancy.
- Screen for TB during routine ANC or if you have 24 hours of cough.
- Plan to deliver in a health facility so the midwife can help you deliver safely.
- Come to the clinic 48 hours after giving birth to ensure that you and your baby stay healthy. Maintain good personal hygiene (changing sanitary towels, regular baths, hand washing, etc.).

Explain to the mother that she can prevent malaria in order to protect herself and her baby.

- You can prevent malaria by sleeping under an LLIN during pregnancy.
- You should receive IPTp 3 times during your pregnancy to help prevent malaria. If you have a fever at any time during your pregnancy go to a health facility immediately.
- When your baby has a fever, act quickly by visiting a trained health worker.

A Healthy Mother and Baby



A Healthy Mother and Baby



Discuss the following points about diarrhoea and sanitation with the mother:

Wash your hands with soap and clean water

- Before preparing food, eating and feeding your baby.
- After visiting the toilet, cleaning the baby, and handling chemicals.

If your baby has diarrhoea

- Give ORS + Zinc to replace lost fluid and nutrients and Zinc to reduce diarrhoea.
- Give your child as much fluid as possible; if your baby is still breastfeeding, let him/her feed more often.
- Bring your child quickly to the health facility if he/she refuses to drink or breastfeed and/or you notice blood in the stool.

Explain to the mother that monitoring her baby's growth and development is important.

- Take your baby to the clinic for weighing every month till the age of 2 years.
- Discuss your child's growth with the health worker and follow the health worker's directions.
- Give foods such as carbohydrates, proteins, and vitamins that help your baby grow well and stay healthy.

Encourage the mother to take her baby for immunization and Vitamin A supplementation to protect her baby against many childhood diseases.

- Immunize your baby fully (refer to recommended immunizations in the **blue** section) before the age of 1 year.
- From 6 months to 5 years, take your baby to the clinic for Vitamin A every 6 months.

Remind the mother to immediately take the baby to the health facility if she sees any of the following signs:

- Diarrhoea and blood in stool
- Difficult or fast breathing
- Very sleepy or difficult to awaken
- Convulsing
- Vomiting everything
- Fever
- Not able to drink or breastfeed

A Healthy Mother and Baby



STI Prevention



Introduce the topic of STIs to the mother.

- Sexually Transmitted Infections (STIs) are *mainly* transmitted through unprotected sexual contact with an infected person.
- If you have an STI, you can transmit it to your baby.
- You can have an STI and not show signs or symptoms.

Discuss STI prevention and management with the mother.

Explain to the mother that STIs can increase her risk of HIV or transmission.

Ask the mother if she has any of the following symptoms:

- Vaginal discharge that has a bad smell
- Rashes
- Itching
- Growths
- Ulcers
- Pain
- Lower abdominal pain

Treat or **refer** the mother if she has any of the above symptoms.

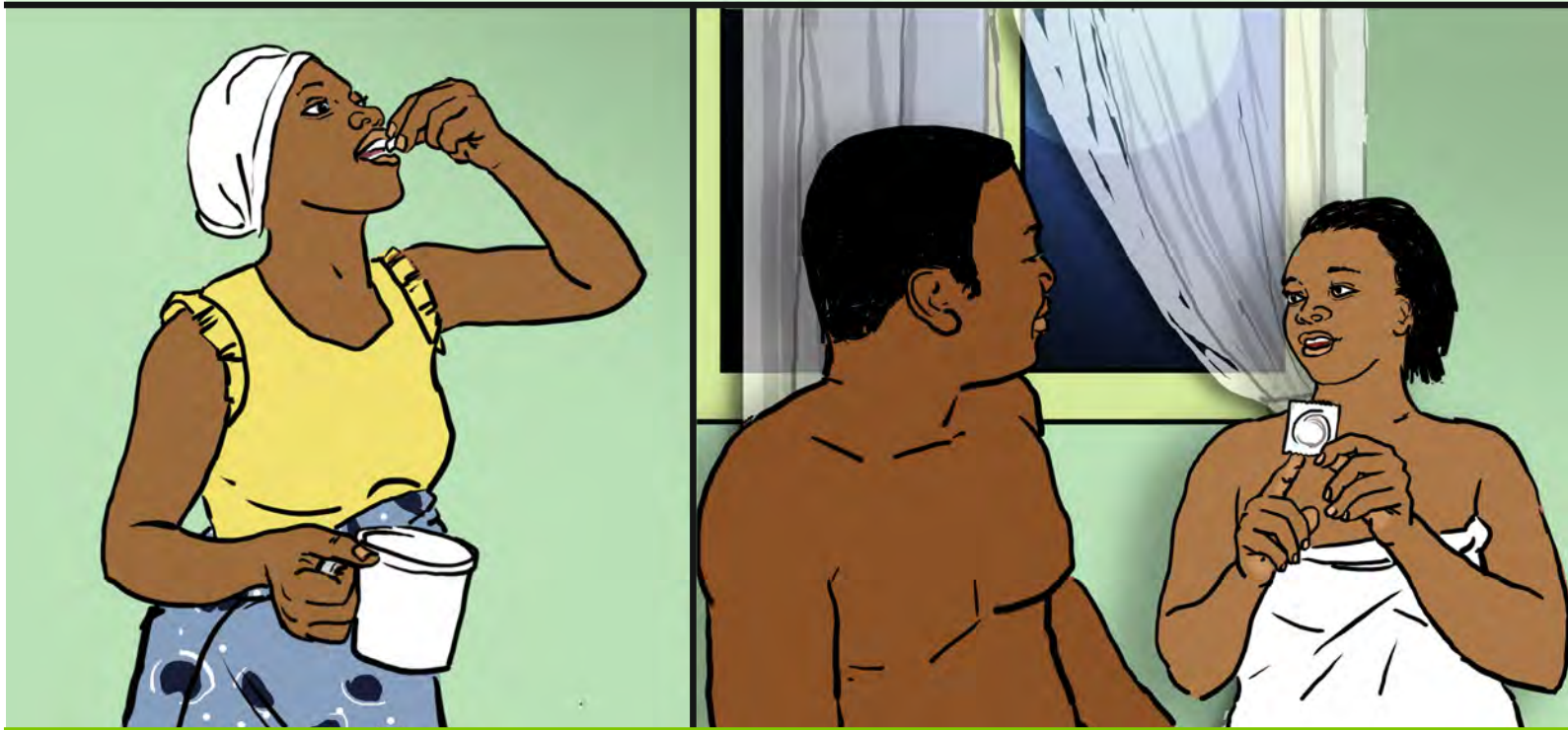
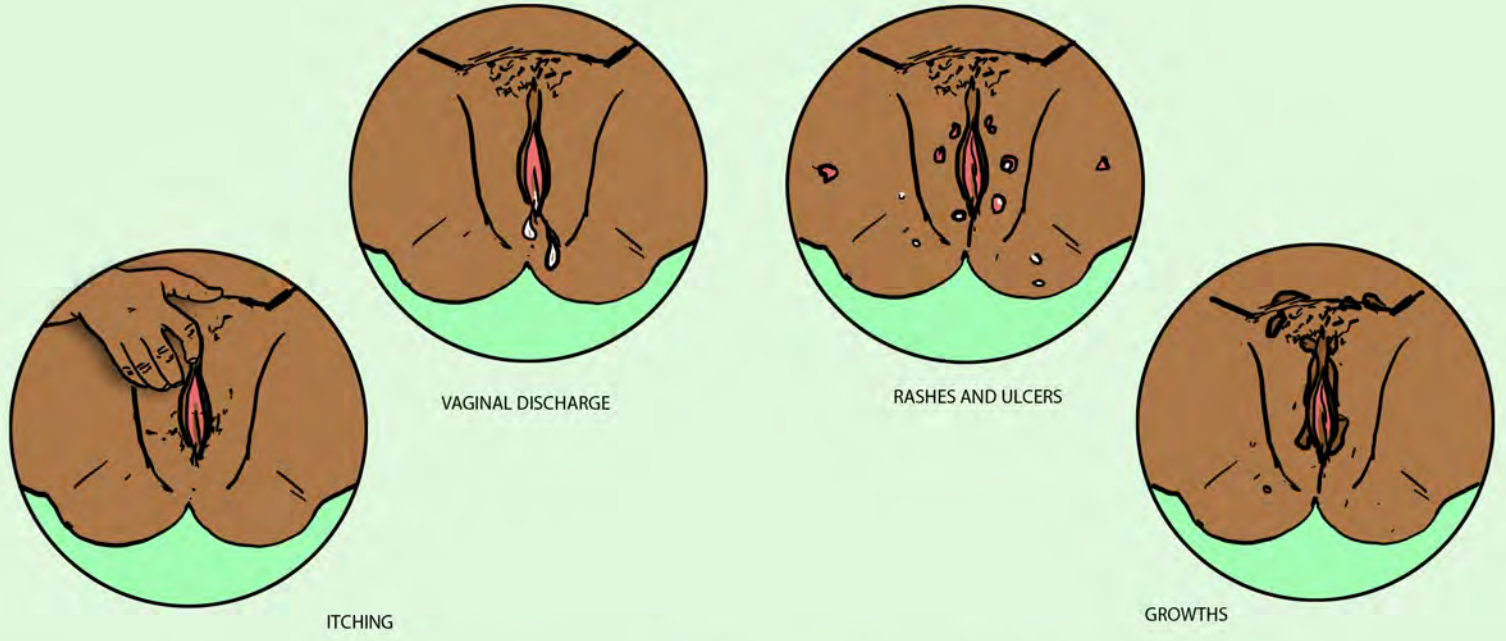
Remind the mother to complete all treatment as directed by her health care provider.

Encourage the mother to involve her partner in STI treatment and management.

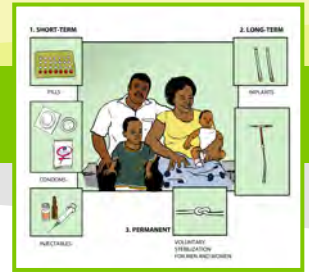
Promote safer sex and condom negotiation during and after treatment.

Schedule a follow-up visit with the mother.

STI Prevention



Family Planning



Introduce family planning to the mother and discuss the benefits.

Family planning is a decision you and your partner can make to use modern contraception. Family planning can help you decide:

- When you want to start having children.
- How many children you want to have.
- How to space your children.
- When you want to stop having children.

There are many benefits to family planning. Family planning helps:

- You and your partner to have the number of children you want and when you want.
- Improve your health and the health of your children through child spacing.
- You and your partner to plan better for your children's needs: food, clothing, and education.

Ask the mother if she is planning to have more children.

Ask the mother the following questions:

- How do you feel about getting pregnant in the future?
- How would you choose to prevent pregnancy if you decide not to have more children?
- The condom is the only family planning method that protects against HIV/AIDS and STIs.

If the mother seems like she still wants to have children, discuss the following:

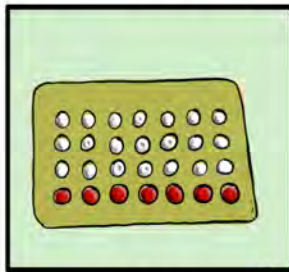
- If you are planning to have more children it is important to stay HIV negative.
- If you are planning to get pregnant it means you are having unprotected sexual intercourse.
 - Emphasize the importance of being faithful to each other.
 - Emphasize that knowing each other's status is key in order to remain negative.
 - Encourage the mother to come to ANC as soon as she knows she is pregnant.

Encourage the mother to talk to her partner about family planning.

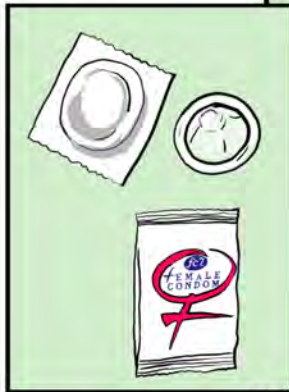
Refer the mother to the family planning clinic to receive full information on the different methods.

Family Planning

1. SHORT-TERM



PILLS

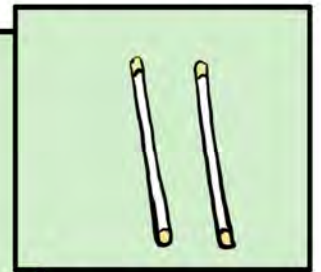


CONDOMS

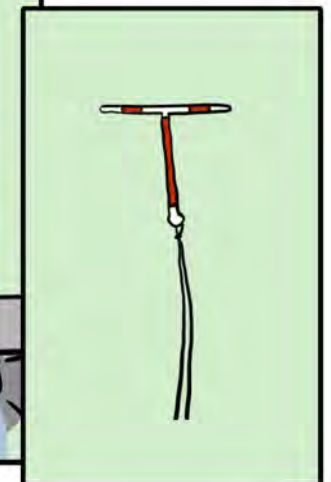


INJECTABLES

2. LONG-TERM



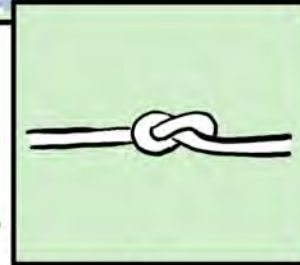
IMPLANTS



IUD



3. PERMANENT



VOLUNTARY
STERILIZATION
FOR MEN AND WOMEN

Post-Test Counseling



Tell the mother that her test result is ready.

Provide the mother's results simply and clearly by saying the following:

- Your test result is positive.
- This means HIV has been found in your blood.
- Take your time. We have plenty of time to talk about your result.
- When you are ready we will talk about what steps you can take to protect yourself and your baby.

Ask the mother if she understands her result.

Ask the mother how she feels about her result.

Share with the mother the following:

- Your feelings are normal.
- Dealing with a positive result is challenging for everyone.
- Many people feel overwhelmed, upset, or angry.
- Being positive does not mean you will soon become ill or develop AIDS.
- You can feel hopeful because you can still have a healthy pregnancy and a healthy baby.
- Now that we know you are HIV positive, there are steps we can take to help protect you, your partner, and the baby.

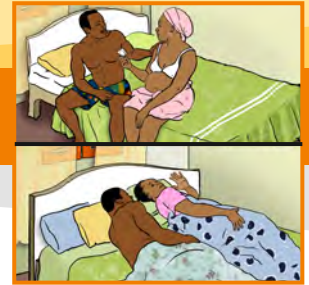
Talk about any concerns the mother may have about her results.

Emphasize that the test results are confidential.

Post-Test Counseling



Post-Test Counseling



Explain to the mother that it is important to protect her, her partner and her baby by reducing behaviors that increase risk of exposure to the virus.

Refer to the picture and explain the following options with the mother to reduce the risk of HIV re-infection and/ or transmission:

Negotiating the use of condoms.

It is important for you to negotiate the use condoms correctly every time you have sex. Condoms reduce the risk of HIV and STI exposure. This is true even if both partners have HIV.

- If you have sex without a condom you can pass the virus to your partner.
- You and your partner can still re-infect each other and/ or pass on other sexually transmitted infections like herpes, syphilis or gonorrhea.

Discuss why it is important to use condoms during pregnancy or breastfeeding.

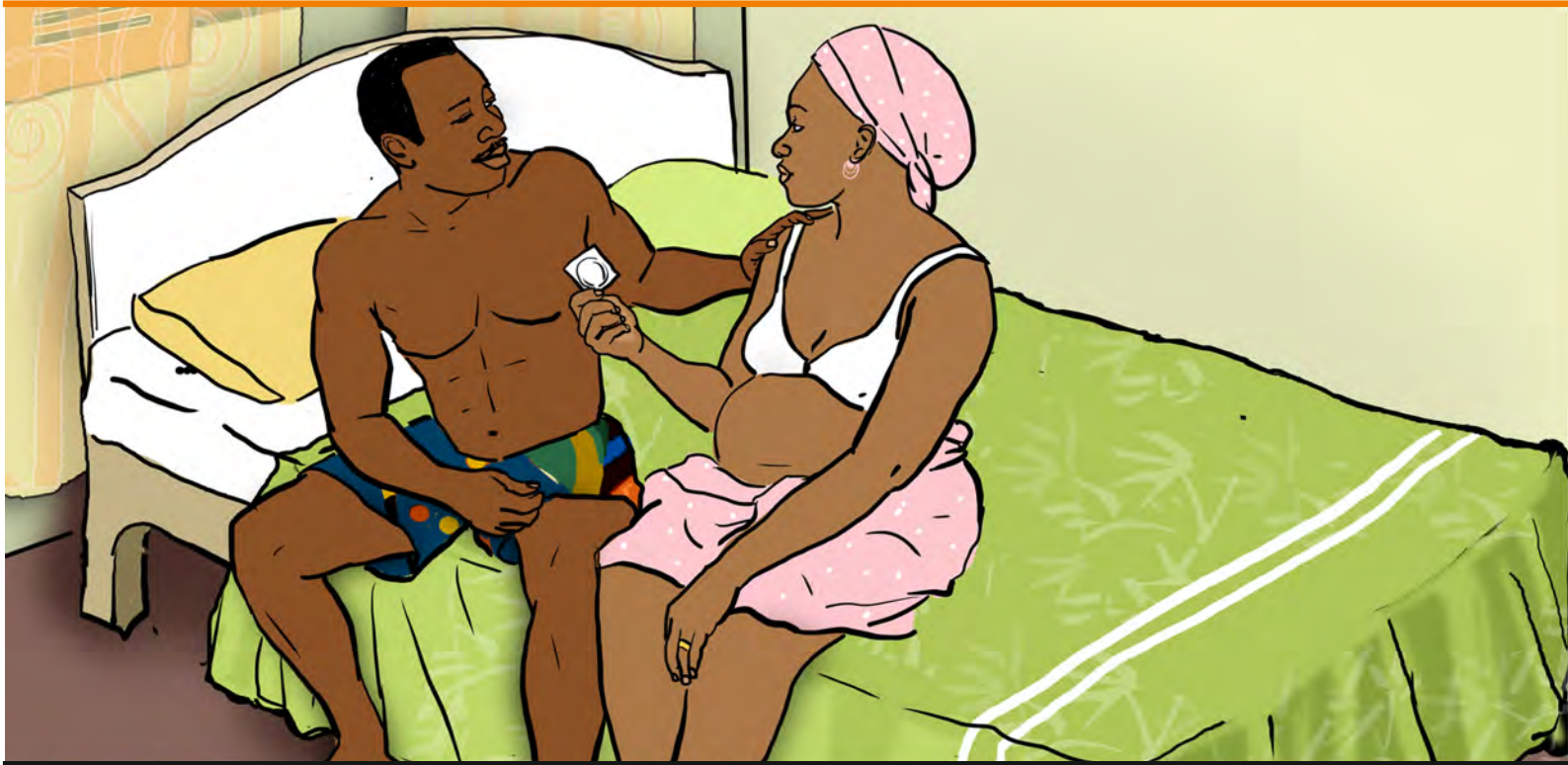
If you are re-infected during pregnancy or breastfeeding, there is an increased chance you will infect your baby.

Abstaining from sexual intercourse.

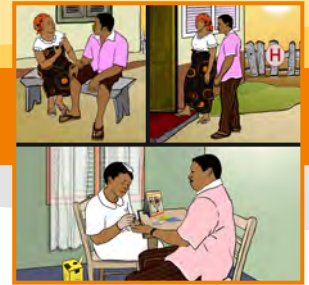
The best way to protect you, your partner, and your baby is to abstain from sexual intercourse.

Remind the mother that she cannot tell if someone has HIV by the way they look. The only way to know one's status is to get an HIV test.

Post-Test Counseling



Partner Testing



Explain to the mother that every pregnant woman should ask her partner to get an HIV test.

- The fact that you are HIV positive does not mean your partner is also HIV positive.
- It is possible for you to be HIV-positive, and for your partner to be HIV-negative.
- If your partner refuses to get an HIV test, come back to the clinic and we can discuss how to encourage him to do the test.

Discuss with the mother the benefits of knowing your partners HIV status.

- When couples have different test results, the HIV-negative person is at risk of getting HIV.
- Re-infection during pregnancy or while breastfeeding increases the chance you will transmit HIV to your baby.

Remind the mother where she and her partner can get HIV testing services (here at the clinic or at another HIV test site).

Partner Testing



Discordance



Explain the following points about discordance:

- It is common for couples to have different test results.
- Couples can be together for many years and have different results.
- Having different results does not mean you or your partner has been unfaithful during your relationship. You could have been infected before you became a couple.

Remind the mother it is important for her to protect her partner from becoming infected.

- Because your test result is positive, you can infect your partner if he is HIV negative and you continue having sex without a condom.
- It is important to disclose your HIV status to your partner.

Discuss the following options with the mother to prevent HIV infection of her partner:

- Use condoms every time you have sex.
- Avoid having penetrative sex.

Remind the mother that if her partner is HIV negative he should come back for a test once every year.

Discordance



Disclosure



Explain to the mother that it is important to share her test results with her partner.

Ask the mother how she feels about sharing her results with her partner, and others she trusts.

If you tell your partner you are HIV-positive:

- You may have someone at home to talk to and share your feelings with.
- Your partner may help you obtain the special care and support you and your baby need.
- Your partner can get tested for HIV.
- You can help prevent re-infection by knowing your partners status.
- You can help protect your partner from getting infected.

If you are not ready to tell your partner now, consider telling someone in your family, or a close friend.

- They can help you get the special care and support you need during pregnancy and after delivery.

Remind the mother that although the decision to disclose is hers, she has the responsibility to let her partner know her status.

Offer the mother the choice to disclose to her partner at home or here in the counseling room.

Ask the mother if she would like to practice disclosing to her partner, family member, or friend (refer to the role play under **blue** section).

Ask her if she would be willing to participate in a support group or additional counseling sessions.

Give the mother a list of post-test clubs, support groups and resources for more counseling (refer to referrals under **blue** section).

Answer any remaining questions and provide support.

Disclosure



Starting ARV Treatment



Discuss with the mother that she and her baby will be given ARVs to help have a healthy life.

- ARVs are a combination of drugs you can take that can slow down HIV from reproducing.
- ARVs will not cure you of HIV, but will help you have a healthy life.
- Even if ARVs make you feel better, you can still infect others with HIV.

Explain to the mother that she will either be given prophylaxis or be on treatment.

Mother

Prophylaxis is a short-term course of drugs you may take while pregnant and during breastfeeding to reduce the risk of transmission.

- You will start ARVs at 14 weeks and stop one week after you stop breastfeeding.
- You will start ARVs even if pregnancy is above 14 weeks and stop one week after you stop breastfeeding.

Treatment means taking ARVs for life to improve your health. Treatment helps protect your health and to reduce the risk of transmission to your baby during pregnancy, labour and delivery as well as during the breastfeeding period.

- ARV treatment is given if your CD4 count is below 350 (CD4 cells help the body to fight HIV).
- You will be given treatment for life.

Baby

Your baby will be given a short-term course of drugs to reduce the risk of HIV transmission to your baby.

- This medicine will not hurt your baby.
- It is important to give the drugs at the same times and right amount every day.
- Your baby will be given AZT prophylaxis daily from birth to 6 weeks.

Explain to the mother that she will be given instructions about dosing once she and her baby begin ARVs.

Remind the mother that for the ARV drugs to work well, it is important she take them at the same times and in the right amounts every day.

- If you stop and re-start or miss tablets this will stop the drugs from working.
- Try to find someone you trust to remind you to take your drugs.
- If you or your baby has a problem taking the drugs, talk to a health care provider.

Starting ARV Treatment



Starting ARV Treatment



Discuss with the mother ARVs and side effects.

- When you start taking ARVs your body can have different reactions. These are called “side effects”.
- Side effects usually go away in 4 – 6 weeks, after your body gets used to the drugs.
- Tell your health care worker or counselor right away about any side effects you feel so they can help you.

Explain to the mother that some side effects from ARVs may include:

- Feeling tired
- Headache
- Skin rash
- Dry mouth
- Nausea / Vomiting
- Diarrhoea
- Dizziness
- Bad dreams

Starting ARV Treatment



Preparing for Birth



Discuss with the mother that she should plan to deliver her baby in a health facility:

- A skilled health care worker is there and can help you in case of a problem.
- Your baby will receive medicines after birth to reduce the chance he or she will get HIV infection.

Explain to the mother the following points:

When you get to the hospital:

- Tell the nurse you are HIV positive or show her your ANC card
- Discuss your preferred infant feeding with the midwife before giving birth.
- Be sure your baby gets medicines within 48 hours after birth to reduce HIV transmission.
- All babies born to HIV positive mothers will receive ARVs for 6 weeks after birth to reduce the chances of HIV transmission.

When you deliver at home:

- Bring your baby to the health facility within 48 hours with your Antenatal (ANC) book/ card.
- Be sure your baby gets medicines within 48 hours after birth to reduce HIV transmission.
- All babies born to HIV positive mothers will receive ARVs for 6 weeks after birth to reduce the chances of HIV transmission.

Preparing for Birth



Early Infant Diagnosis



Discuss with the mother that her baby will be tested for HIV.

- It is important to know the HIV status of your baby.
- As part of PMTCT your baby will be tested for HIV at 6 weeks.
- It is important to bring your baby to be tested at 6 weeks.
- The HIV test your baby will be given at 6 weeks is different from the HIV test you took during pregnancy.
- The test results for your baby will take longer because we will need to send the blood sample to the lab.

Explain to the mother that it is important for her to retest her baby.

Discuss with her the following points:

Your baby will be tested again 6 weeks *after you complete breastfeeding.*

6 weeks after breastfeeding ends

- This test will be like the test your baby had at 6 weeks after being born.
- The test results will take longer because we will need to send it to the lab.

Remind the mother to return to the health center to have her baby tested at 6 weeks.

Explain to the mother the need to have her baby tested again at 18 months

18 months

- This test will be an instant test like the one you received during your pregnancy.
- You will have your baby's results before you leave the facility.

Remind the mother to return to the health facility to have her baby tested at 18 months.

Early Infant Diagnosis



Infant Feeding



Explain to the mother that breastfeeding is best for all babies, even if the mother is HIV positive. It provides all the nutrients and water a baby needs, and protects the baby from diarrhoea and other illnesses.

If you are HIV positive, your breast milk may contain the virus.

- You should know that if you choose to breastfeed you could pass HIV to your baby.
- However, taking ARVs will reduce the risk of transmitting the virus to your baby significantly.
- There are steps you can take to reduce HIV transmission during breastfeeding.

If you decide to breastfeed you should:

- Start breastfeeding within 30 minutes after delivery.
- Breastfeed as often as the baby wants, day and night.
- Position and attach your baby to help ensure that your baby suckles well and helps you to produce a good supply of breast milk (refer to position and attachment in **blue** section).
- Exclusively breastfeed the baby for 6 months to protect your baby from many illnesses, such as diarrhoea and respiratory infections. This means the baby receives only breast milk and no other liquids or foods, not even water.
- At 6 months, begin introducing complimentary feeds.
- You can continue to breastfeed up to 12 months.
- It is important that you take your ARVs as directed throughout your breastfeeding period.
- If you are not on lifelong treatment, stop taking the ARVs 1 week after stopping to breastfeed.

Remind the mother that giving her baby foods or any kind of liquids other than breast milk, including infant formula, animal milks, or water before 6 months can damage her baby's stomach.

If the mother is unable or decides not to breastfeed the baby, she can only use commercial infant formula milk exclusively for 6 months (see next page).

Infant Feeding



Infant Feeding



Emphasize that providing exclusive commercial infant formula feeds means she should not breastfeed.

Remind the mother she should **ONLY** give commercial infant formula milk if she is able to:

- Wash your hands with soap and clean water before preparing formula and feeding baby.
- Afford enough supplies for the baby's normal growth and development until he or she reaches at least 6 months.
- Use clean water to mix with the infant formula by bringing the water to a boil for at least 2 minutes.
- Store clean water in a clean flask or covered container specially reserved for boiled clean water.
- Wash the utensils with clean water and soap, and then boil them to kill the remaining germs.
- Use clean spoons or cups to feed the baby.
- Store the formula tin in a safe clean place.

Explain to the mother not to give water, sugar water, cod liver oil, fruit juice, pito, herbal preparations, koko, milk or other liquids or foods.

Infant Feeding



A Healthy Mother and Baby



Discuss with the mother the following points to help her have a healthy pregnancy and baby:

- Continue to come to ANC to monitor your health and the health of your baby.
- Eat three times each day to keep healthy.
- Eat a balance diet (refer to balanced diet in **blue** section).
- Drink clean water daily by boiling or treating.
- Do not take drugs that are not prescribed by your health worker.
- Receive Tetanus Toxoid immunization during pregnancy.
- People with HIV infection may suffer illnesses such as persistent diarrhoea, TB, and pneumonia. There are medicines you can take while you are pregnant to prevent these illnesses.
- Screen for TB during routine ANC or if you have 24 hours of cough.
- Plan to deliver in a health facility so the midwife can help you deliver safely.
- Come to the clinic 48 hours after giving birth to ensure that you and your baby stay healthy.
- Maintain good personal hygiene (changing sanitary towels, regular baths, hand washing, etc.).

Explain to the mother that she can prevent malaria in order to protect herself and her baby.

- You can prevent malaria by sleeping under an LLIN during pregnancy.
- You should receive IPTp 3 times during your pregnancy to help prevent malaria.
- If you have a fever at any time during your pregnancy go to a health facility immediately.
- When your baby has a fever, act quickly by visiting a trained health worker.

A Healthy Mother and Baby



A Healthy Mother and Baby



Discuss the following points about diarrhoea and sanitation with the mother:

Wash your hands with soap and clean water

- Before preparing food, eating and feeding your baby.
- After visiting the toilet, cleaning the baby, and handling chemicals.

If your baby has diarrhoea

- Give ORS + Zinc to replace lost fluid and nutrients and Zinc to reduce diarrhoea.
- Give your child as much fluid as possible; if your baby is still breastfeeding, let him/her feed more often. Be sure to continue to follow infant feeding practices to reduce HIV transmission to your baby.
- Bring your child quickly to the health facility if he/she refuses to drink or breastfeed and/or you notice blood in the stool.

Explain to the mother that babies and children who are HIV positive can grow and develop normally but need special care.

- Take your baby to the clinic for weighing every month till the age of 2 years.
- Discuss your child's growth with the health worker and take action, when necessary.
- Give foods that help your baby grow well and stay healthy.

Encourage the mother to take her baby for immunization and Vitamin A supplementation to protect her baby against many childhood diseases.

- Immunize your baby fully (refer to recommended immunizations in the **blue** section) before the age of 1 year.
- From 6 months to 5 years, take your baby to the clinic for Vitamin A every 6 months.

Remind the mother to immediately take the baby to the health facility if she sees any of the following signs:

- Diarrhoea and blood in stool
- Difficult or fast breathing
- Very sleepy or difficult to awaken
- Convulsing
- Vomiting everything
- Fever
- Not able to drink or breastfeed

A Healthy Mother and Baby



Opportunistic Infections



Explain to the mother that even when she is on ARVs she can get diseases like malaria, TB, and diarrhea.

Discuss with the mother ways she can protect herself by talking about the following points:

- Take your ARVs in the correct dose and at the right time every day.
- Take cotrimoxazole as prescribed by your health care provider.
- Sleep under a long lasting insecticide treated net.
- Wash your hands with soap and clean water after using the toilet and before preparing and eating food.
- Seek treatment immediately if you have a fever, cough or diarrhoea.

Opportunistic Infections



STI Prevention



Introduce the topic of STIs to the mother.

- Sexually Transmitted Infections (STIs) are *mainly* transmitted through unprotected sexual contact with an infected person.
- If you have an STI, you can transmit it to your baby.
- You can have an STI and not show signs or symptoms.

Discuss STI prevention and management with the mother.

Explain to the mother that STIs can increase her risk of HIV re-infection or transmission.

Ask the mother if she has any of the following symptoms:

- Vaginal discharge that has a bad smell
- Rashes
- Itching
- Growths
- Ulcers
- Pain
- Lower abdominal pain

Treat or **refer** the mother if she has any of the above symptoms.

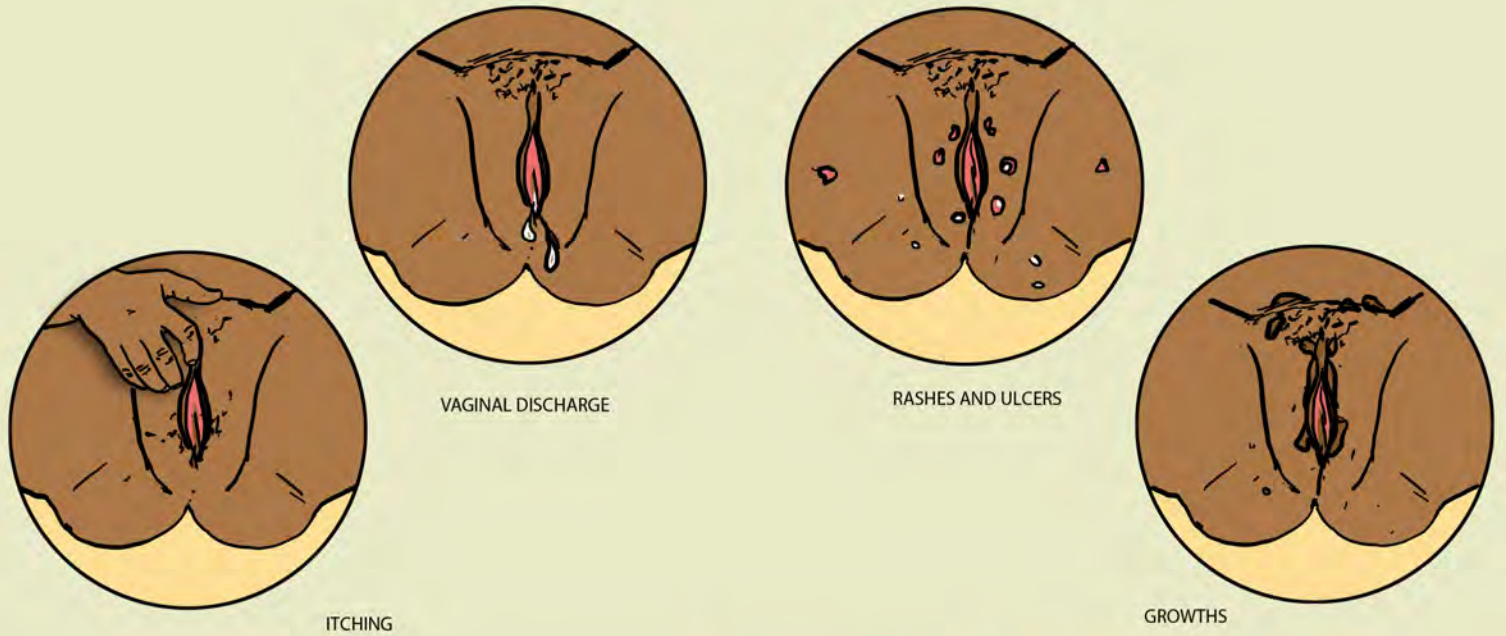
Remind the mother to complete all treatment as directed by her health care provider.

Encourage the mother to involve her partner in STI treatment and management.

Promote safer sex and condom negotiation during and after treatment.

Schedule a follow-up visit with the mother.

STI Prevention



Family Planning



Introduce family planning to the mother and discuss the benefits.

Family planning is a decision you and your partner can make to use modern contraception to decide:

- When you want to start having children.
- How many children you want to have.
- How to space your children.
- When you want to stop having children.

There are many benefits to family planning. Family planning helps:

- You and your partner to have the number of children you want and when you want.
- Improve your health and the health of your children through child spacing.
- You and your partner to plan better for your children's needs: food, clothing, and education.

Ask the mother if she is planning to have more children.

Ask the mother the following questions:

- How do you feel about getting pregnant in the future?
- How would you choose to prevent pregnancy if you decide not to have more children?

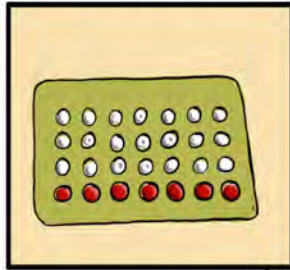
Explain to the mother that modern contraception is safe for people who are HIV-positive.

- You can choose not to have any more children by using a family planning method that is right for you. This is the best way to prevent HIV transmission to your baby.
- Condoms are the **ONLY** method of family planning that protects partners from passing HIV and other STIs to each other.

If the mother seems like she still wants to have children, continue to discuss the risks of mother-to-child transmission (see next page).

Family Planning

1. SHORT-TERM



PILLS

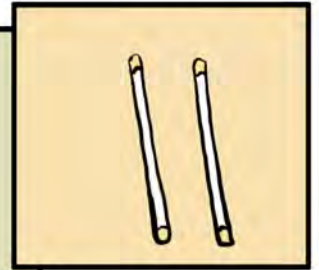


CONDOMS

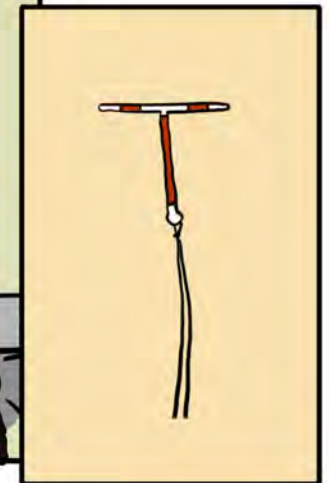


INJECTABLES

2. LONG-TERM



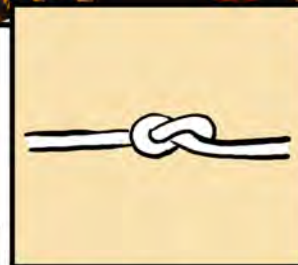
IMPLANTS



IUD



3. PERMANENT



VOLUNTARY
STERILIZATION
FOR MEN AND WOMEN

Family Planning



Remind the mother that HIV can be passed on to the child if she is HIV-positive.

- You can choose to have children, but you must remember to follow all (PMTCT) steps to reduce the chances of giving your child HIV.
- If you are planning to get pregnant it means you are having unprotected sexual intercourse.
- If your partner is negative and you are having sex without a condom, he is at risk of HIV.

Encourage the mother to talk to her partner about family planning.

Refer the mother to the family planning clinic to receive full information on the different methods.

Family Planning



Care and Support



Explain to the mother that positive living means taking care of herself and her baby so they both live a long and healthy life.

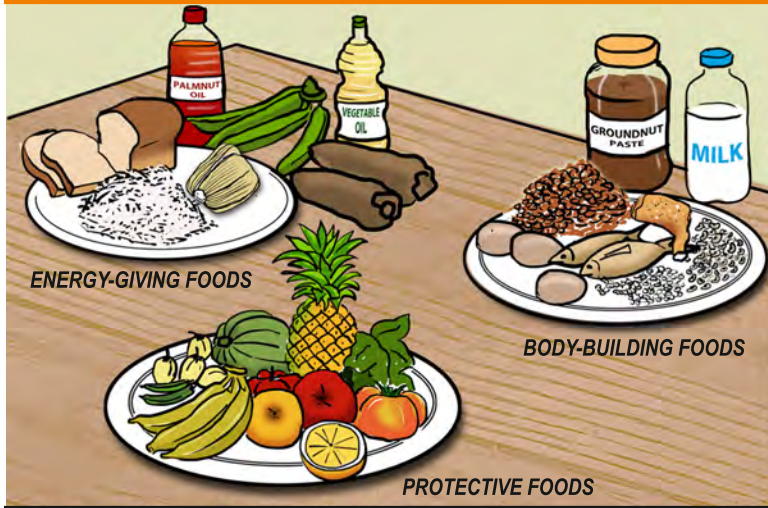
Remind the mother that many people with HIV are living well, and so can she, her baby, and her family.

Discuss the following steps to positive living:

- Go for care and treatment services as soon as possible.
- Eat a balanced diet, which includes a variety of the following:
 - o Energy-giving foods (like rice, potatoes and bread)
 - o Body building foods (like meat, chicken, eggs, beans, and ground nuts)
 - o Protective foods (fruits and vegetables)
- Sleep under a mosquito net to prevent malaria.
- Prevent diarrhoea by drinking clean water.
- Take walks or do other types of exercise.
- Go for regular check-ups.
- Join a support group to help you keep your emotions high.

Encourage the mother to adhere to all treatment as directed by her health care provider.

Care and Support



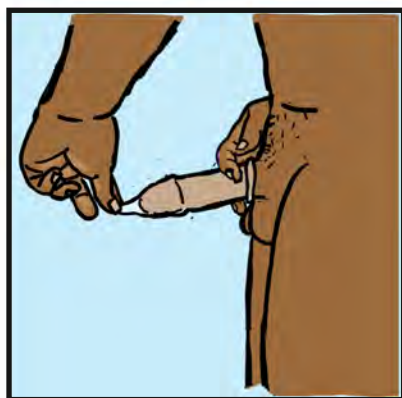
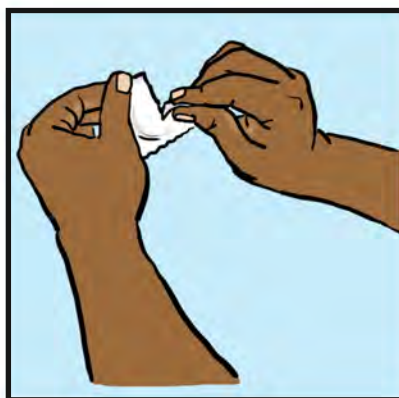
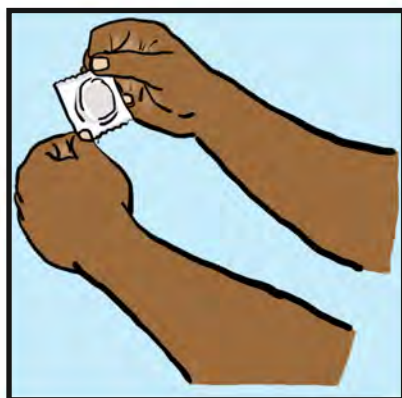
How to Use a Male Condom



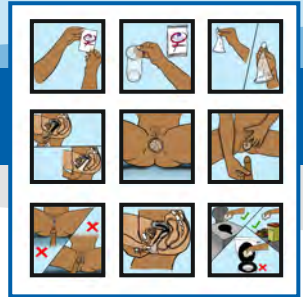
If the woman does not know how to use a condom, refer to the chart and explain the following:

1. **Inspect the condom.**
 - Look carefully at the condom package. Do not use the condom if there are tears.
 - Look for the expiry date. Do not use a condom after the expiry date.
2. **Open the condom carefully.**
 - Squeeze the condom inside the package to one side.
 - Tear the empty side of the package and take out the condom.
 - Look carefully at the condom to see how it will unroll when you place it on the penis.
3. **Put the condom on.**
 - To prevent the condom from bursting, squeeze the tip of the condom to take out the air, and place the condom on the head of the erect penis.
4. **Put the condom on.**
 - While holding onto the tip, use your other hand to unroll the condom down the shaft of the penis all the way to the base of penis.
 - Ensure that the shaft of the penis is free from lubricant to prevent the condom from falling off.
5. **Use the condom.**
 - Be sure the vagina is naturally lubricated before beginning sex. You can injure the vagina if it is not lubricated.
 - Do not use grease/oil/petroleum-jelly based lubricants that may cause the condom to tear.
6. **Withdraw the penis with the condom still on after sex.**
 - After the man ejaculates, hold on to the condom at the base of the penis.
 - Withdraw the condom from the vagina while the penis is still hard.
7. **Remove the condom from the penis.**
 - Hold the condom at the base of the penis as well as the tip.
 - Slide the condom off the penis carefully so the semen does not spill or leak out.
8. **Safely dispose of the condom after use.**
 - Tie a knot in the condom.
 - Dispose of the condom in a latrine or burn the condom so it cannot be handled by anyone else.
 - Wash your hands.

How to Use a Male Condom



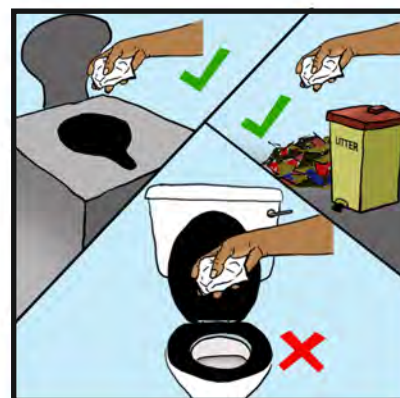
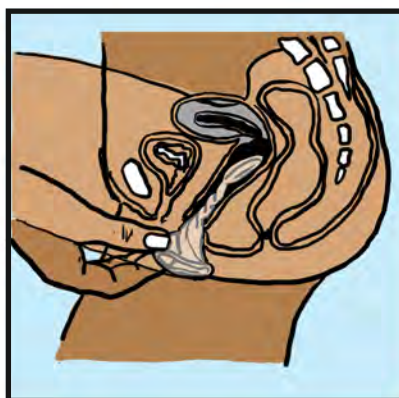
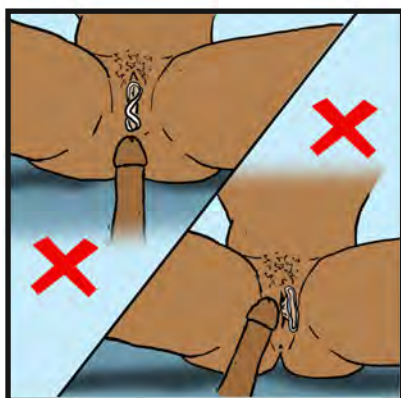
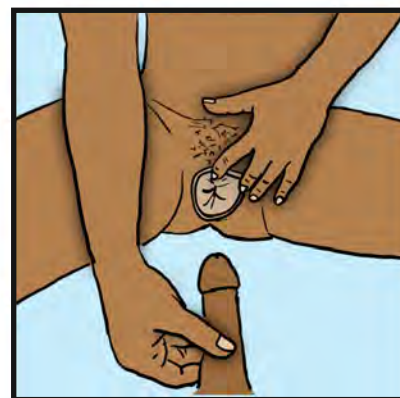
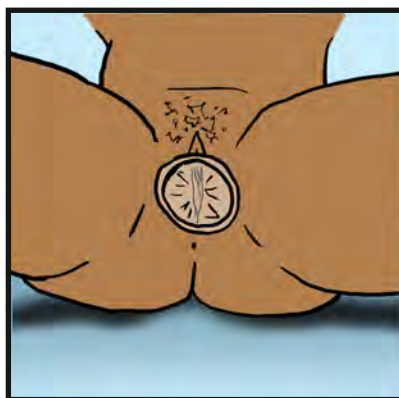
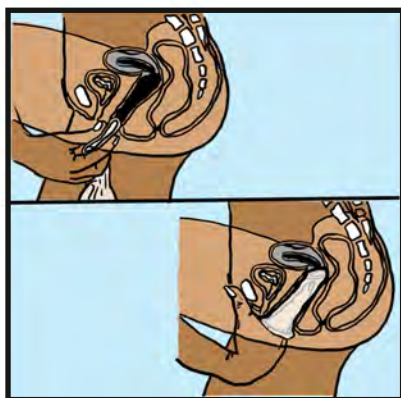
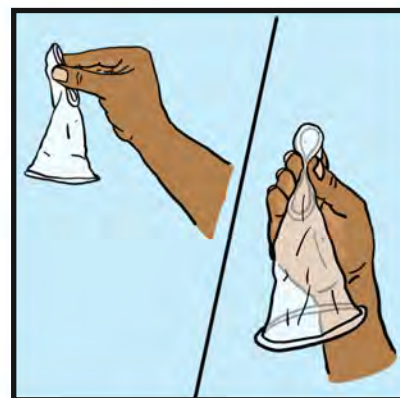
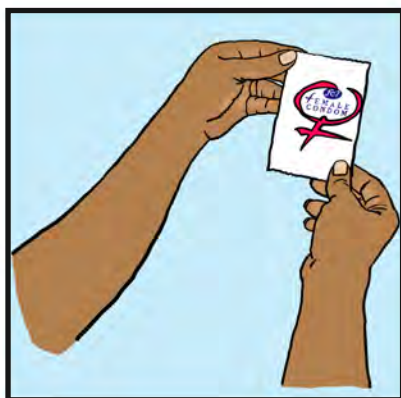
How to Use a Female Condom



If the woman does not know how to use a condom, refer to the chart and explain the following:

- 1. Inspect the condom.**
 - Look carefully at the condom package. Do not use the condom if the package is torn.
 - Look for the expiry date. Do not use a condom after the expiry date.
- 2. Open the condom carefully.**
 - Take out the female condom and look at it closely.
 - Unroll the condom.
 - Be careful not to tear the condom.
 - Rub the sides together to spread the lubricant.
 - If the condom breaks or tears, use a new one.
- 3. Prepare to insert female condom.**
 - Find a comfortable position- stand with one foot on a chair or lie down with knees apart.
 - Hold pouch with open end hanging down.
 - Squeeze the inner ring at the closed end between your thumb and middle finger.
 - Place index finger between thumb and middle finger.
 - Keep squeezing inner ring.
- 4. Insert female condom into the vagina.**
 - Squeezing the inner ring with three fingers, spread the vaginal lips with the other hand.
 - Insert the squeezed female condom into the vagina.
 - Once the condom is inside your vagina, use a finger to push the inner ring up as far as it will go.
 - The inner ring will sit above your pubic bone. It should feel comfortable.
 - A female condom can be inserted up to 8 hours before intercourse.
- 5. Ensure the female condom is positioned correctly.**
 - Make sure the outer ring is outside the vagina and the condom is not twisted.
- 6. Use the female condom.**
 - Add a few drops of lubricant to the penis or to the inside of the condom.
 - Guide the penis inside the condom.
 - The female condom may move around during sex.
 - Never use a male condom and female condom at the same time.
- 7. Stop having sex if:**
 - The outer ring of the condom gets pulled into the vagina.
 - The penis enters under or outside of the female condom.
- 8. Remove the condom from the vagina after intercourse.**
 - Twist the outer ring to keep the semen inside.
 - Pull the condom out gently.
- 9. Safely dispose of the condom after use.**
 - Dispose of the female condom in the trash, a pit latrine, or burn the condom so it cannot be handled by anyone else.
 - Do not reuse the female condom. Use a new female condom each time you have sex.
 - Wash your hands.

How to Use a Female Condom



Position and Attachment- Breastfeeding



Explain and **demonstrate** to the mother how to position her infant.

- Position your baby's body to be straight, not bent or twisted, but with the head slightly back.
- Face your baby's body towards the breast not held flat to your chest or abdomen, and he or she should be able to look up into your face.
- Hold your baby close to you.
- Support your baby's whole body, not just the neck and shoulders, with your hand and forearm.

Describe the four signs of good attachment to the mother.

- Your baby's mouth is wide open.
- You can see more of the darker skin (areola) above the baby's mouth than below.
- Your baby's lower lip is turned outwards.
- Your baby's chin is touching mother's breast

Position and Attachment- Breastfeeding



Recommended Immunizations



Immunizations and Vitamin A	
Age Period	Vaccine
At Birth	BCG
	Polio
6 Weeks	Polio
	DPT/ HEP B/ Hib 1 (5 in 1)
	Pneumococcal
	Rotavirus
10 Weeks	Polio
	DPT/ HEP B/ Hib 2 (5 in 1)
	Pneumococcal
	Rotavirus
14 Weeks	Polio
	DPT/ HEP B/ Hib 3 (5 in 1)
	Pneumococcal
6 Months	Vitamin A
9 Months	Measles 1
	Yellow Fever
12 Months	Vitamin A
18 Months	Vitamin A
	Measles 2
	Treated Net (LLIN)

Recommended Immunizations



Nutrition for Pregnant or Breastfeeding Mother



Explain to the mother the importance of good nutrition during pregnancy and breastfeeding.

- During pregnancy eat one extra small meal every day to provide energy and nutrition for you and your baby.
- During breastfeeding eat two extra small meals every day to provide energy and nutrition for you and your baby.
- Eat the best foods available, including milk, fresh fruit and vegetables, meat, fish, eggs, grains, peas and beans (Give examples based on what is available in your area).
- Drink whenever you are thirsty.
- Do not drink or limit tea or coffee with meals during pregnancy and breastfeeding.
- During pregnancy and breastfeeding special nutrients will help your baby grow well and be healthy.

Nutrition for Pregnant or Breastfeeding Mother



Role Play



Encourage the mother to practice disclosing with you the way she would disclose with her partner, family or friends.

Ask the following questions about disclosure:

1. Who do you think you might want to tell about your HIV status?
2. How or where do you think you would like to tell this person?
3. When would you talk with them?
4. What would you say?
5. How do you think he or she would react?

Role Play



