Survive and Thrive:
2 Years into the Hilton ECD Program

Jack Menke MD, MPH, DTM&H
Technical Director Elizabeth Glaser Pediatric AIDS Foundation Zambia.
Blueprint presentation

• Overview 2 years into S&T program
• Description of integrated ECD services
• Challenges
• lessons learned
Survive & Thrive
Project Information

- Initiated in 2012 with support from the Conrad N. Hilton Foundation
- A 3 year Pilot to establish ECD services in the primary health care setting.
- Activities based at 2 Survive & Thrive Units - natural extensions of clinics with an addition of specific ECD activities
- Little programmatic information progress on implementation

PROJECT OBJECTIVE 1:
Parents, caregivers, and ECD teachers have the knowledge and skills to actively support the developmental needs of their children; especially children exposed to HIV in utero

PROJECT OBJECTIVE 2:
Two Lusaka-based clinics which serve vulnerable communities demonstrate increased capacity to assess and respond to the developmental needs of HIV-exposed, positive and/or vulnerable children

PROJECT OBJECTIVE 3:
EGPAF through its national profile will work to promote ECD knowledge and skills throughout Zambia

Young children, ages 0 to 5 years, in two high-density, high-HIV prevalence areas of Lusaka are supported to adequately realize their full cognitive, social, emotional, and physical potential.
Site Information

Mandevu
- Catchment population: 86,700
- Women age 15-49 years: 19,081
- Expected live births per year: 4,267
- Population Under 5: 13,877

Mount Makulu
- Catchment population: 17,370
- Women age 15-49 years: 3,821
- Expected live births per year: 860
- Population Under 5: 3,473

Clinical Services Provided

<table>
<thead>
<tr>
<th></th>
<th>VCT</th>
<th>Under 5</th>
<th>OPD</th>
<th>ART</th>
<th>Antenatal Care</th>
<th>Family Planning</th>
<th>TB Corner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandevu</td>
<td>X</td>
<td></td>
<td>X (0-14)</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Mount Makulu</td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
S&T unit
Mount Makulu Caregiver information & support groups
Training of HCW and volunteers

Health care workers (40)
- Developmental assessments for children 0-5 years
- How to identify and refer children with developmental delays
- Growth monitoring
- Nutritional training

Volunteers (40)
- 2 stage initial training
  - to identify children with developmental delays
  - HIV management.
- Growth monitoring
- Nutritional training
- Pediatric Counseling
- Mbuya DAISEY disclosure
- CPR
- Business management (performance based asset transfer program)
volunteer
Children identified with developmental delays in PY2

• In PY2, 117 children were screened with 87 identified as having developmental delays

• 89% of children screened in PY2 had a developmental delay in at least one domain. 61% of children had delays in three or more domains.
Children identified with developmental delays in PY2

<table>
<thead>
<tr>
<th>Age</th>
<th>Total # Delayed</th>
<th>Cognition</th>
<th>Communication</th>
<th>Gross Motor</th>
<th>Fine Motor</th>
<th>Personal Social</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Months</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6 Months</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>12 Months</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>18 Months</td>
<td>7</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>2 Years</td>
<td>12</td>
<td>7</td>
<td>11</td>
<td>10</td>
<td>12</td>
<td>6</td>
</tr>
<tr>
<td>3 Years</td>
<td>15</td>
<td>8</td>
<td>11</td>
<td>10</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>4 Years</td>
<td>11</td>
<td>6</td>
<td>9</td>
<td>9</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>5 Years</td>
<td>12</td>
<td>7</td>
<td>10</td>
<td>9</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>6+ Years</td>
<td>25</td>
<td>17</td>
<td>19</td>
<td>19</td>
<td>20</td>
<td>18</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>53</td>
<td>66</td>
<td>65</td>
<td>68</td>
<td>55</td>
</tr>
</tbody>
</table>
HIV Testing and Status of Mothers and Children of S&T

<table>
<thead>
<tr>
<th>Site</th>
<th># Mothers Tested for HIV</th>
<th># Mothers with Confirmed HIV+ Status</th>
<th># HIV+ Mothers Who Are on Treatment</th>
<th># Children Tested for HIV</th>
<th># Children with Confirmed HIV+ Status</th>
<th># HIV+ Children Who Are on Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandevu</td>
<td>64</td>
<td>11</td>
<td>10</td>
<td>51</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Mount Makulu</td>
<td>37</td>
<td>8</td>
<td>6</td>
<td>32</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>101</strong></td>
<td><strong>19</strong></td>
<td><strong>16</strong></td>
<td><strong>83</strong></td>
<td><strong>6</strong></td>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>
Description of package of integrated services at the S&T units

- Assessments and development of care plans for newly identified children
- Nutrition screening, counselling and monitoring and provision of HEPS/RUTF
- PCOE developmental intervention clinic
- Attend to children identified with disabilities
- Psychosocial counselling
- School readiness sessions
- Caregiver information & support groups
- Early stimulation sessions
- Referral to specialist services
Initial Assessments and care plans

- Children that attend the unit are assessed and a care plan is formulated (case history, household care plan, developmental screen and C-DAZ)
- Currently, S&T units are on average identifying 15 children with delays per month
Nutrition screening, counselling and support

- Volunteers trained in Infant and Young Child Feeding (through the DHO) conduct nutrition promotion talks.
- Children enrolled and new children will have height for weight measurements and MUAC scores recorded.
- Clinic is supported to provide HEPS/RTUF to children as indicated. Children will receive ongoing nutrition monitoring.
PCOE Assessment days

• Monthly visits to S&T clinics by multidisciplinary team from PCOE (Paediatric neurologist, Physiotherapist and Occupational Therapist, behaviour specialist and communication support teacher)

• Children identified from initial assessment who require appointment with and/or multidisciplinary assessment attend accompanied by their volunteer.
Services for handicapped children

• SHN staff will complete developmental assessments on each child in order to establish each child’s current performance level in Cognition, Communication, Motor, Socio-emotional, and Adaptive skills.
• Develop Individualized Educational Plans (IEPs) according to need
• To run specialized intervention sessions from the ‘Survive & Thrive’ units (educational physical and sensory stimulation)
Psychosocial counselling

• Paediatric Counselling: All the volunteers and health staff at the clinic have been trained in and will provide PC sessions.

• School readiness sessions. Site-coordinators support the running of small groups for children aged 4-5 falling behind in vital pre-school skills across both sites
Referrals

• Referral to specialist services (+/- transport support) (to Beit cure for operations, for EEGs, ophthalmology audiology, cerebral palsy children to optimal feeding clinics, etc.)

• Referral to clinic VCT and ART services
Challenges

• Identification of ECD by volunteers resulted in identification of children with disabilities in communities
• These children though not exactly target population need services as well.
• ART services in Mandevu.
Lessons learned

• We have developed a simple scalable package of small number of key ECD services integrated at primary health care level.

• Importance of the volunteer workforce and the need for development and livelihood strategies (PBAT Performance Based Asset Transfer) for this group.
Lessons learned cont.

• Community ownership for sustainability
  – Monthly partnership meetings (with the clinic and District staff )
  – Monthly Stakeholders meeting (with the community)

• Integration of services; primary Paediatric care as entry point for early integrated interventions.
Caregivers, children and volunteers, Christmas Party 2013
acknowledgements

• Conrad N. Hilton Foundation
• Susan Strasser
• Elizabeth Kazembe
• Elizabeth Chatora
• Charles muneene
• Stephanie Ahn
• Lisa Boemer
• Andrea Uehling.
• Thank you.