

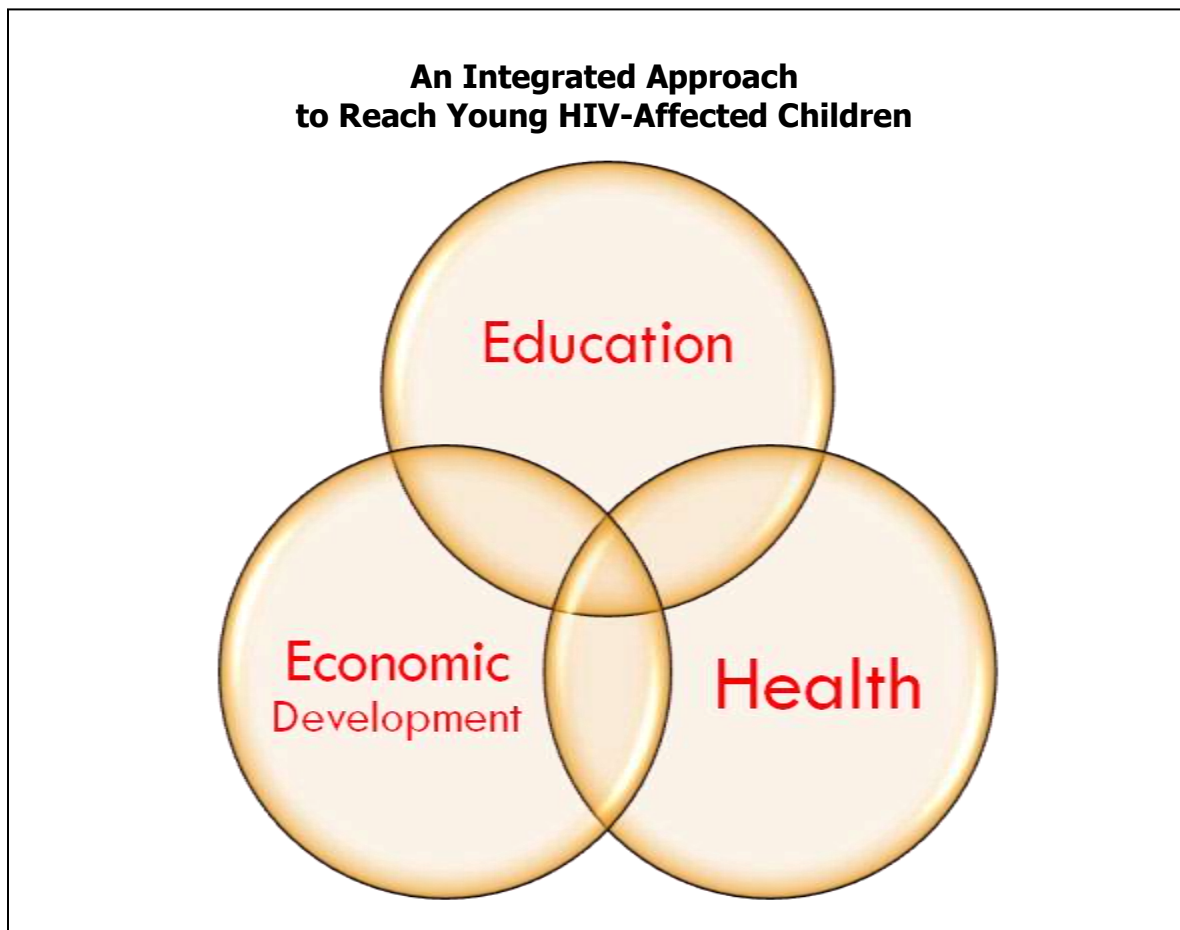
The Road to Melbourne
***Promising and Successful Approaches to Meeting the Holistic Needs of Young Children
Born Into Families Affected by HIV and AIDS***
Cape Town December 5-6, 2013

"Successful Practices Marketplace"

Flipchart Content

Flipchart #1: Explanation of the early interventions / early years component of the program (Important: presenters should not describe all of their services).

- Early childhood is a critical period for interventions in education and health in order to reap long-term benefits that will address inequalities and break the cycle of poverty.
- Children pay a disproportionate cost of urban poverty. in Kibera 1 out of 5 children does not live to see his/her fifth birthday.
- Our holistic model can provide children with these critical elements of education and health, while supporting caregivers in their ability to ensure young children's needs are met.



Flipchart #2: Clear explanation of how it is integrated and uses one of the entry points

Currently, SHOFCO has the following *existing entry points* to target children (ages 0-6) born into HIV-affected families:

Education Services via the Kibera School for Girls:

- Early Child Development (ECD) through pre-school program

Health Services via the Johanna Justin-Jinich Community Health Clinic:

- PMTCT;
- Antiretroviral therapy (ARV);
- Maternal Newborn & Child Health (including IMCI);
- Early Nutrition/Infant and young child feeding (IYCF);

Economic Development Services via our Community Programs:

- Economic strengthening & social savings schemes
Examples: SHOFCO Women's Empowerment Program (SWEP) and Group Savings and Loans (GS&L) in partnership with KivaZip

Examples of integration that we are currently implementing:

- Mentor Mother Support Groups
MNCH + PMTCT + ECD (parenting education on early learning and stimulation)
- SHOFCO Women Empowerment Program (SWEP) → *highlighted as our BEST PRACTICE*
Economic Strengthening and social saving schemes + ECD (parental learning support groups)

Flipchart #3: Key challenges faced (& solutions)

NUTRITION AND HIV PEDIATRICS

The existing capacity of our 14-room clinic is not enough to efficiently serve all the needs of our beneficiaries. SHOFCO is looking into expanding the Clinic to include an HIV Pediatrics department that will handle cases of HIV-affected children. In the meantime, SHOFCO has managed to merge HIV Pediatrics into the Maternal and Child Health (MCH) department, where HIV-affected children are tested and receive post-exposure prophylaxis (PEP). Also, SHOFCO has not yet effectively integrated a special nutrition program for HIV-affected children. Since PEP medication is strong, we have to ensure that young HIV-affected children are adequately fed in order to make the treatment effective. With low incomes, mothers in Kibera are usually unable to ensure that their young children are eating properly. Establishing the HIV Pediatrics department would help SHOFCO achieve this important integration between nutrition and ARV services.

COMMUNITY BUY-IN

In Kibera, there is a profound stigma against HIV-infected women. SHOFCO still faces the challenge of mothers refusing to be tested for HIV, out of fear that they will not be able to manage the consequences of testing positive. This is why SHOFCO's community health workers need to aggressively conduct door-to-door and community-wide outreaches to encourage women to enable themselves and their young children to be tested. Effective outreach can convince mothers that HIV is not a death sentence, it is a manageable disease. This should also increase participation in PMTCT support groups.

ARV DRUG SUPPLY

Currently, we obtain our free ARV drugs from government supplies, which have not been consistently delivered. Sometimes, we divide whatever supply is available among the number of children taking PEP so that every child receives an equal amount of dosage, albeit reduced. This affects efficacy of their medication. To address this problem, we have established relationships with nearby clinics from which we can borrow drugs whenever our stocks are depleted.