





CQUIN Differentiated MCH Workshop

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Postnatal clubs (PNC)

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HIV Learning Network
The CQUIN Project for Differentiated Service Delivery

PNC as a response to challenges



Poor retention in care of mothers due to:

- Long clinic waiting times
- High patient volumes at the ART clinic
- Non-disclosure of HIV status
- Lack of partner involvement
- Travel costs
- Poor access to postnatal services

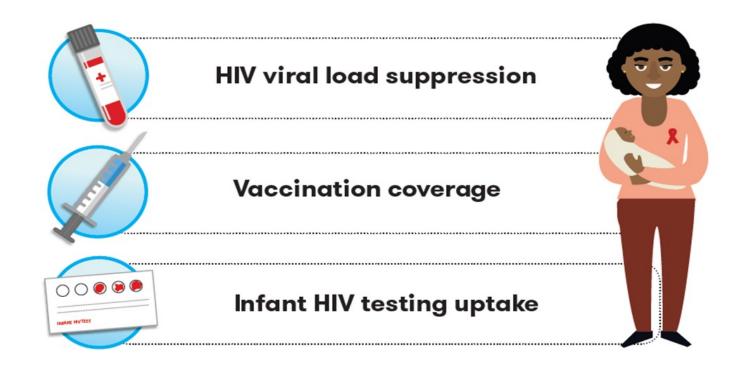
Phillips T et al. J Int AIDS Soc. 2014. Clouse K et al. J Acquir Immune Defic Syndr. 2014. Langlois V et al. Bull World Health Organisation. 2015.

Integrated services benefits known but not implemented well

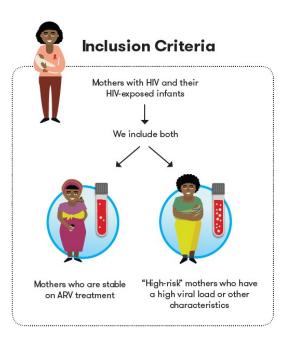
Postnatal Clubs: Aims

POSTNATAL CLUBS AIMS

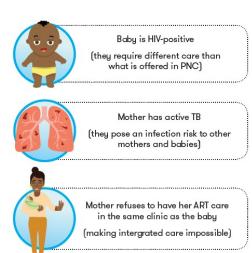
Our aims with the PNC were to improve retention in care and the following health outcomes for the mother-infant pairs (MIP):



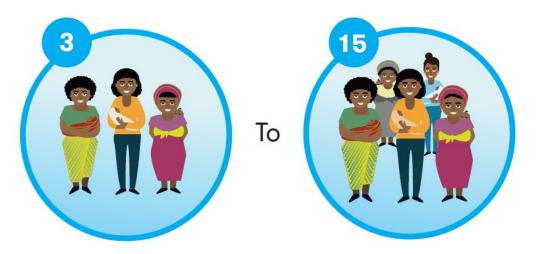
WHO DO WE RECRUIT FOR PNC?



Exclusion Criteria



POSTNATAL CLUBS INCLUDE

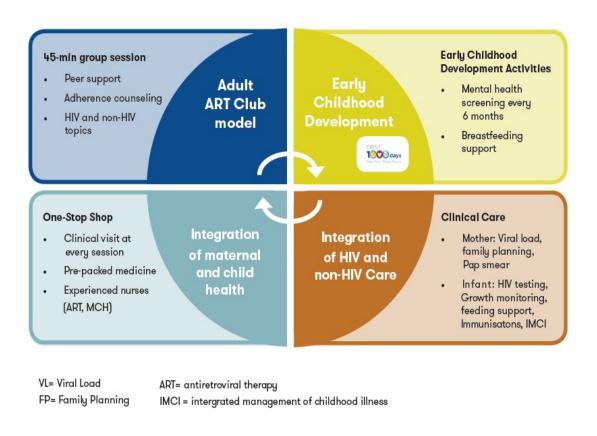


Mother-Infant Pairs

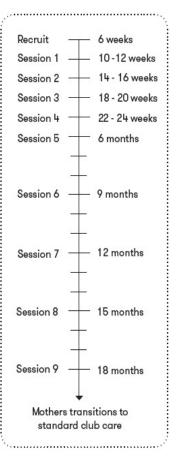
*Experience has been that above 15 pairs, space availability, organization of workload management, efficient peer support and noise levels become difficult to manage.

PNC Description

Each PNC session features four key components:



PNC timeline



Summary of PNC activities & Clinical Care

Summary of PNC activities and clinical care

Sessions*	Counsellor-led**		Nurse-led		
	Activities	Topic /ECD	Mother	Infant	
6 weeks	Recruitment into PNC				
10-12 weeks	Mental Heath Q weight, register, ART (1m)	Infant Feeding/ Mental Health Tummy time/ Felt mobile	Clinical visit, FR VL, risk stratification	PCR, immunisations, growth, PMTCT, (IMCI)	
14-16 weeks	weight, register, ART (1m)	Child health Tummy exercise/ Make rattle	Pap smear, FP	Growth, immunisations, neurodevelopment, PMTCT, (IMCI)	
18-20 weeks	weight, register, ART (1m)	Family planning Sitting with support/ Song	FP	Growth, PMTCT, (IMCI)	
22-24 weeks	weight, register, ART (1m)	Disclosure/ Viral load Early conversations/ Song	FP	Growth, PMTCT, (IMCI)	
6 months	Mental Health Q weight, register, ART (3m) Child HIV test	Complementary feeding/ Mental health Early milestones/ Stacking	Clinical review, FR VL	Growth, immunisations, vitA, neurodevelopment, PMTCT, (IMCI), child HIV PCR test	
9 months	weight, register, ART (3m)	Sexual and intimate partner violence/Pre-test information Motor games/Hide & Seek, Clap with me	FP	Growth, Immunisations, neurodevelopment, PMTCT, (IMCI)	
12 months	Mental Health Q weight, register, ART (3m)	Infant feeding- nutrition for children Language /Read magazine	Clinical, FR VL	Growth, immunisations, deworming, vit A, PMTCT, (IMCI)	
15 months	weight, register, ART (3m)	Caregiver child relationship/ Intro adherence club	FP	Growth, PMTCT, (IMCI)	
18 months	Child rapid HIV test*** Mental health Q	Pre-test information/ Graduation ceremony Refresher/ Graduation activity	Clinical, FR VL	Growth, immunisations, deworming, Vit A, neurodevelopment, PMTCT, (IMCI)	

Credit: Shariefa Patel Abrahams

*These visits should be attended by the mother (as opposed to a buddy) with the baby, as they involve more intensive clinical interventions for the mother and baby.

Acronyms:

PCR= polymerase chain reaction (HIV test) Q= questionnaire

ART= antiretroviral therapy

FP= family planning
VL= viral load
PMTCT= prevention of mother to
child transmission (medications)

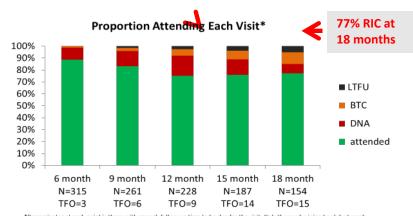
IMCI= integrated management of childhood illness vit A= vitamin A

^{**}IMCI: Integrated management of childhood illness
***Currently m2m mentors done by facility counselor

Results- from July 2016 until October 2018

(n= 383 mothers)

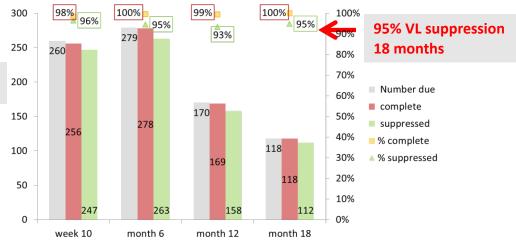
Proportion of mother infant pairs experiencing an outcome at each time point.*



*Denominator at each point is those with enough follow-up time to be due for the visit. Only those who joined a club at week 10 are included

	Infant vaccination coverage*
12 months	193/207 (93.2%)

Postnatal club VL completion and suppression



	Infant rapid test uptake	Positive
9 months	212/216 (98%)	0
18 months	110/118 (93%)	0





Family Planning uptake: Town 2 Clinic

	Clinic controls	PNC mothers	Total
N	1407	101	1508
median age (IQR)	29.6 (26.5-32.3)	28.8 (26.7-32.1)	29.6 (26.5-32.3)
median time on ART (IQR)	2.3 (0.6-4.6)	2.5 (0.8-5.1)	2.3 (0.7-4.6)
Received any contraception 0-6 month n (%)	281 (20%)	42 (41.6%)	323 (21.4%)
Received any contraception 6-12 month n (%)	228 (16.2%)	41 (40.6%)	269 (17.8%)
Received any contraception 12-18 month n (%)	206 (14.6%)	24 (23.8%)	230 (15.3%)

Lessons learnt

- Integrating FP into PNC model is feasible and was appreciated by pts the most.
- No women fell pregnant during the 18mnths postpartum period (PNC period)
- Women want to be involved in the choice of their FP methods & felt empowered by being in control of their reproductive lives.
- More and more women took advantage of educational and economic opportunities to improve their lives.

Thank You