



EYE for Life

Working with HIV+ adolescent mothers The EVE model



Good practice/examples in providing
mental health/psychosocial support

Psychosocial support

- ❖ Addresses the ongoing psychological and social problems of HIV infected individuals, their partners, families and caregivers.
- ❖ HIV infection affects all dimensions of a person's life: physical, psychological, social and spiritual.

Why it is Important

- Counselling and social support can help people and their carers cope more effectively with each **stage of the infection** and enhances quality of life.
- PLHIV are more likely to be able to respond adequately to the **stress** of being infected and are less likely to develop serious mental health problems.
- HIV infection often can result in **stigma and fear** for those living with the infection, as well as for those caring for them, and may affect the entire family.
- Infection often results in **loss** of socio-economic status, employment, income, housing, health care and mobility.
- Assist people in making **informed decisions, coping better** with illness and dealing more effectively with discrimination.
- It improves the quality of their lives, and **prevents** further transmission of HIV infection.
- For PLHIV who must adhere to antiretroviral therapy, on-going counselling can be critical in **enhancing adherence** to treatment regimens

<http://www.who.int/hiv/topics/psychosocial/support/en/>

ADOLESCENCE

- What are the challenges ?



ADOLESCENCE

■ Physical

- Adapting to, accepting changes.
- Concerns about appearance.
- Positive/negative effect on self-identity



ADOLESCENCE

- Social & Psychological
- Search for Independence & Identity
- Relating to opposite sex



ADOLESCENCE

- Intellectual



- Intellectual growth spurt
- Abstract thinking
 - possibilities for the future
- Flexing intellectual muscles
- Willing to question and challenge
 - Parental reactions

ADOLESCENCE

- Spiritual
 - Examines belief systems
 - Unwilling to conform



HIV+ ADOLESCENTS

- For the adolescent mother living with HIV, this period becomes more complicated. Typically, the HIV+ adolescents cared for by EVE for Life enter the programme:
- Very low self esteem and self confidence
- Experienced high level of stigma and discrimination from health care providers
- Unhappy with their lives

HIV+ ADOLESCENTS

- Fighting the virus on their own – lack of disclosure (to family and partners)
- Low/no adherence to ARV – what is the use?
- Low condom use, but sexually active
- Multiple babies (most had 2 children by age 19)
- Limited/no knowledge of basic HIV including transmission

HIV+ Adolescents



- Limited knowledge of sexual and reproductive health and rights issues
- Low coping skills (angry, depressed, no affect)

EVE model of care and support

EVE for Life utilises a four-pronged approach to foster behaviour change among the young mothers:

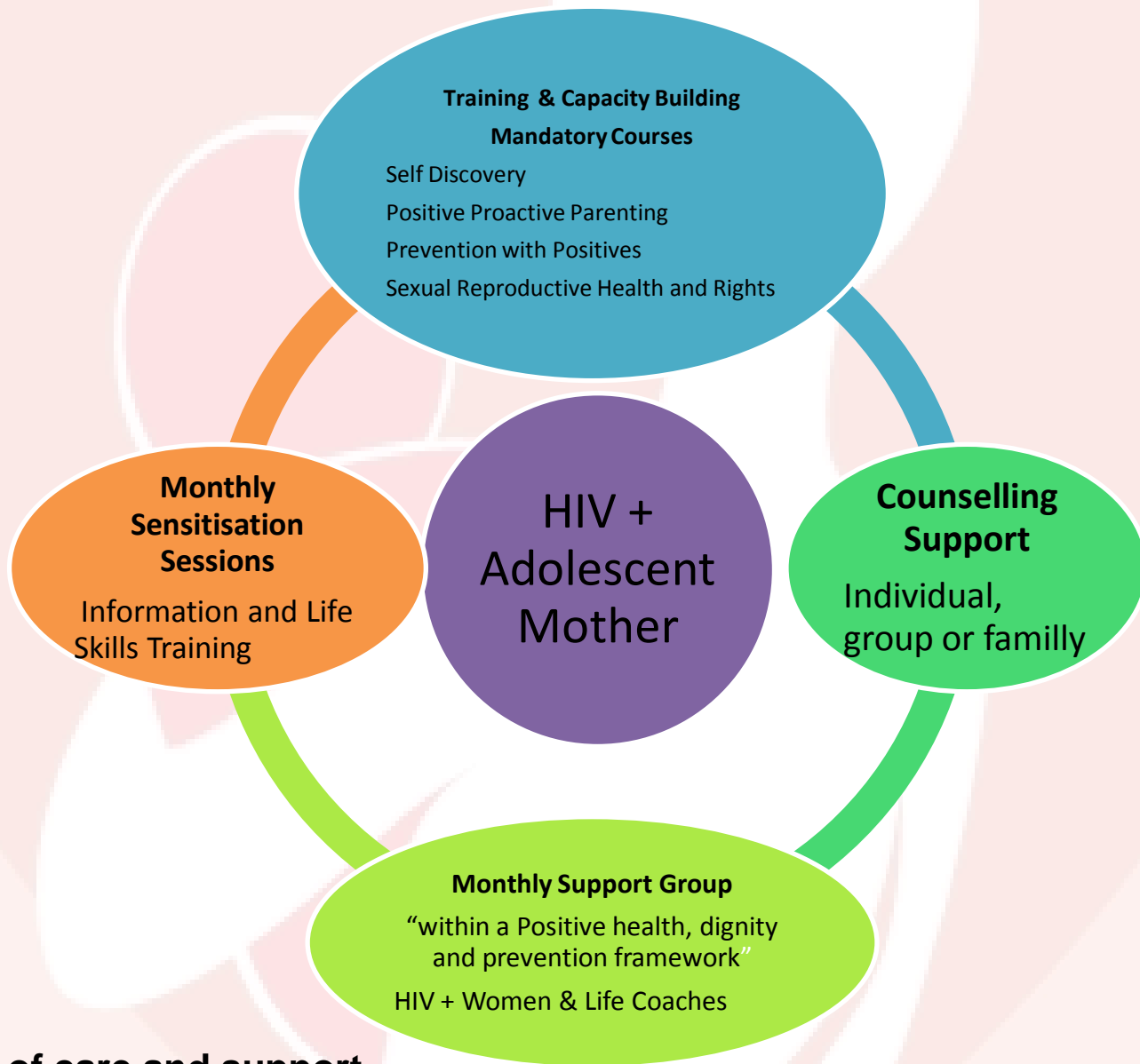
1. Group level intervention which takes the form of monthly sensitisation sessions where key issues eg. adherence, safer sex/risk reduction, disclosure and communicating are addressed. Sessions are skills-based so practical activities including take home activities are done.

EVE model of care and support

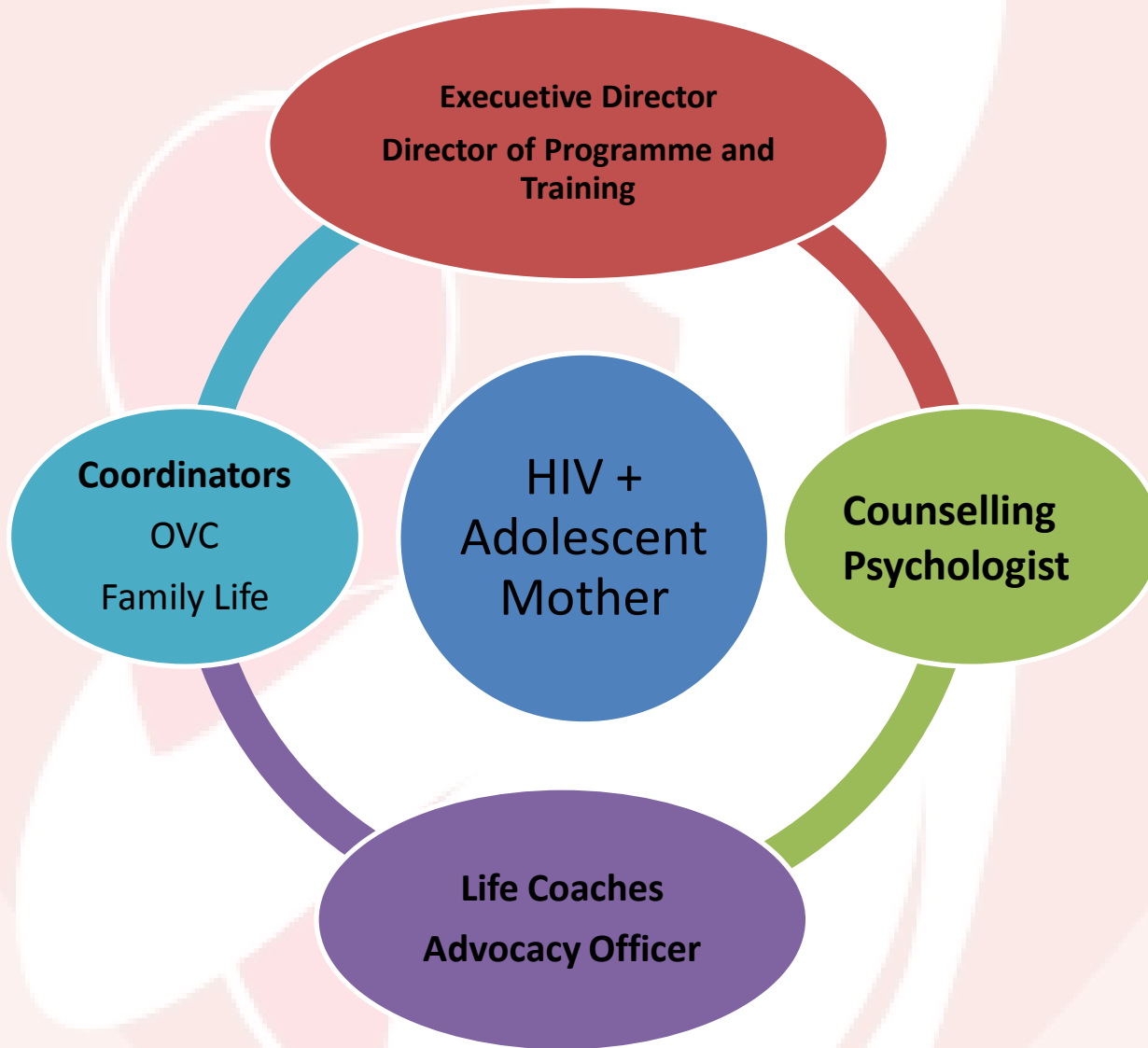
2. Training Workshops: Continuous days of training and skills building around particular areas as reflected in needs assessment eg. Sexual reproductive health and rights, parenting, prevention with positives etc.
3. One-on-one counselling that will integrate, reinforce or build upon issues discussed in levels one and two such as disclosure and safer sex.



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- A stylized illustration in the background shows a woman in profile, wearing a white top, holding a child. The woman's hair is a light pink color, and the child is also in white. The background is a light pink color with a large, faint circular shape behind the figures.
- 4. Support Group Sessions: Led by a capacitated mother. Clients provide peer-to-peer support



EVE model of care and support



EVE Team for care and support

PREPARING FOR TREATMENT AND PREVENTION

Self Discovery

- All EVE for clients go through a 3-day day rigorous course of Self Discovery – where they explore self, their fears, HIV and its impact and goal setting.
- The underlining goal of self discovery is to work on self.

PREPARING FOR TREATMENT AND PREVENTION

Self Discovery

- The young mothers are reminded that the changes they want to see will require them to source from a different and powerful place than what they have been told.
- It requires them to see themselves as all powerful with the innate ability to achieve whatever they want.

PREPARING FOR TREATMENT AND PREVENTION

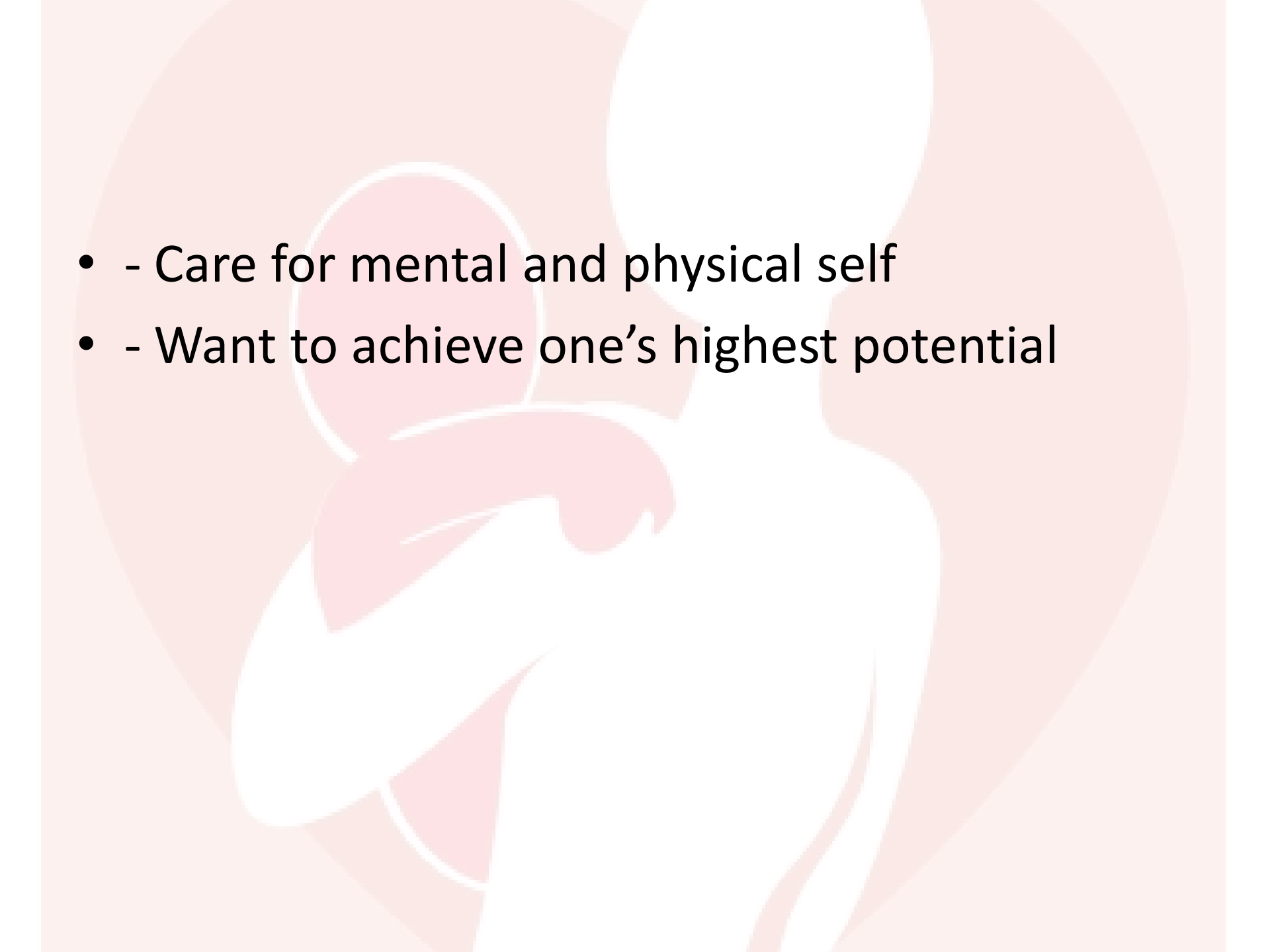
Self Discovery

- They have to source from their “self” and unleash their potential.
- They are reminded that **they** have power over the virus and not the other way around. If they dwell on the latter it will kill them. They are the master of the virus.

PREPARING FOR TREATMENT AND PREVENTION

Self Discovery

- The 3-day session is to clarify the commitment to change on the part of the positive person and to prepare them for HIV prevention and treatment.
- Discovering self is loving self enough to:
 - - disclose to partners (prevent HIV transmission), family/friends(for support)
 - - Adhere to medication

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- A stylized white silhouette of a person in a meditative pose, possibly a yoga or Tai Chi position, set against a light pink background. The figure is centered and occupies most of the frame. The background is a solid light pink color with a subtle gradient.
- - Care for mental and physical self
 - - Want to achieve one's highest potential

EVE model of care and support

- The period of discovering self is a work in progress and continues through the monthly sessions, support group sessions and one-on-one counselling sessions.
- To assist clients to become more, the EVE model includes what we refer to as **Life Coaches**

EVE model of care and support

LIFE COACHES

- These are capacitated HIV+ mothers who closely monitor the young mothers. The life coaches work with the women to develop short, medium and long term plans as it relates to issues relating to adherence, condom use, family planning, setting life goals, among others.

Life Coaches



EVE model of care and support

- Life coaches are assigned three to four young mothers, who they mentor and support. They get to know their families, children etc. They make appointments at clinics, for counselling if needed or other social interventions.



EVE model of care and support

- **Repetition**
- Working with young persons require constant repetition for transfer of learning. This is done through the four components – at workshops, at monthly sessions, at support group sessions and during counselling

EVE model of care and support

- **Fun**
- Adolescents need to have fun while learning and this is facilitated by fun excursions out of Kingston, going to the movies together, Devon House, Facebook/internet access, mobile phones access etc.

EVE model of care and support

- **Babies/Children Welcome**
- A key aspect of the EVE model is its family-centred approach. A session will inevitably be interrupted by a screaming baby/child, but we provide support to the young mothers in the form of child care so they can participate and learn.

EVE model of care and support







Successes to date

- Women are highly motivated
- Display initiative towards learning and support
- Peer relationship and leadership skills developed
- Increased self confidence: Women no longer cry about being discriminated against in communities or at home.

Successes to date

- Improved relationship with family and community – women who taxis refused to transport are now being transported
- Improved reading skills: Work with Life coaches paying off
- Improved child care skills: 100% improvement in nutrition. Physical abuse of children significantly less.

Successes to date

- Greater advocacy to improve treatment and care service: Not willing to accept mediocre treatment from health care providers. They ask questions that need to be asked
- Increased condom use and improved negotiation skills: One new pregnancy since 2010 and one reported incidence of STI

Successes to date

- All but one of the women have now disclosed their status to current sexual partner and family
- Now on facebook providing peer support for other young teenage mothers.
- One young woman represented Jamaica at the recent HLM on HIV in New York
- One represented Jamaica at a Youth conference on HIV in Mali.

Successes to date

- Others have done training in leadership in Jamaica and Grenada
- Two attending Heart NTA -Information Technology & Customer Service

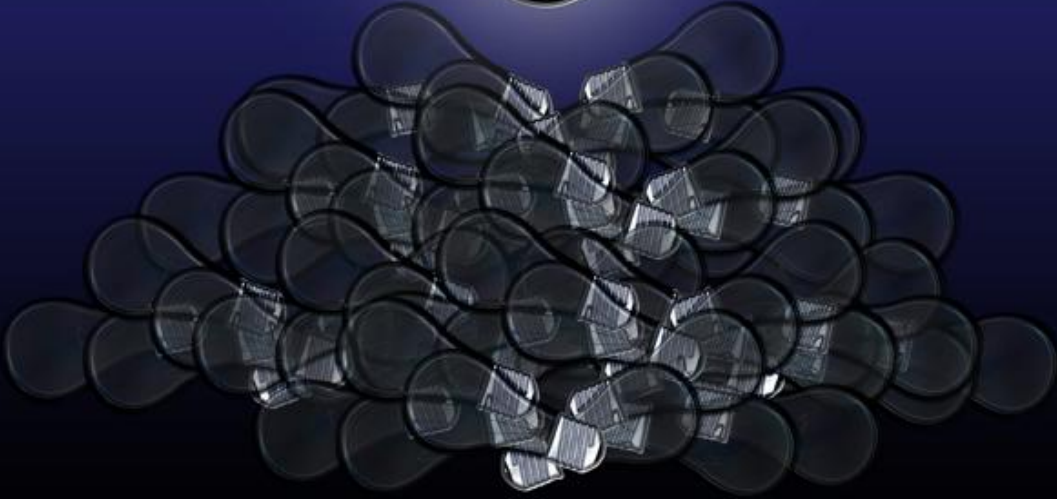


CHALLENGES

- Lack of funds to assist clients with domestic needs
- No funding support for babies
- Limited funding for Life Coaches
- The need to provide parallel training for interested spouses and family
- Limited access to psychiatrist
- Limited focus on adolescent girls, thus limited funding

LESSONS

LEARNED



LESSONS LEARNT

- ❖ Positive adolescent mothers lack accurate information to take care of their sexual and reproductive health
- ❖ Positive adolescent mothers lack knowledge about their rights in relation to sex, sterilisation and access to prevention and treatment information

LESSONS LEARNT

- ❖ Adolescents are willing to participate in their own health care if given the tools (education, information)
- ❖ Close partnership with champions in the health sector can reduce the stigma and discrimination encountered.
- ❖ Risk taking behavior will be reduced with increased knowledge of SRH



NEXT STEPS

- Income Generating programme for young mothers (Improve livelihoods)
- Provision of grants to return to school
- Facilitation of community service through PMTCT programme
- Family centered programming

ACKNOWLEDGEMENT

- Caribbean Treatment Action Group
- US Ambassador's Fund
- UNESCO
- UNAIDS PAF
- Food for the Poor
- Kiwanis Club of Mona

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THANK YOU