

Taking Care of Yourself and Preventing HIV in Your Baby: Introduction

Say: *Welcome. My name is _____. Today we will talk about the ways you can keep yourself and your baby healthy. This is a time when we feel a lot of different emotions. We may feel happy about having a new baby. We may be afraid about passing HIV to the baby. We may wonder if our partners and family will give us support.*

Please feel free to stop me if you have a question or if what I am saying is not clear. We will try and answer all of your questions today, but if you have a question that is not answered, we are always here to talk.

It is important to know that:

- Not all babies born to women living with HIV will become HIV-infected.
- If you, your partner, and your baby get the care and treatment you need, the risk of passing HIV to your baby can be lowered.
- **You can save 2 lives – your own and your baby’s – if you get services to help prevent mother-to-child transmission and live positively with HIV!**

Keep yourself healthy and your body strong:

- The healthier you are and the more your body is able to fight off infections, the less likely it is that your baby will get HIV.
- Even if you do not feel or look sick, you and your baby still need to take medicines called ARVs to stay healthy and strong and lower the chances that your baby will get HIV.
- You also need emotional support – from your family, from your friends, and from your partner.
- If possible, try and tell someone you trust about your HIV-status so they can help you take care of yourself and your baby.

Together, we can lower the chances of passing HIV to your baby:

- We will talk about many things you can do to lower the chances of passing HIV to your baby:
 - While you are pregnant
 - During your labor and delivery
 - After your baby is born
 - When you feed your baby
- We will also talk about how you can plan for and prevent pregnancy if you do not want to have more children in the future.
- It is important to come back to the hospital or clinic often to make sure you and your baby are healthy.
- If you understand and follow the care plan, it will help you stay healthy and lower the chances that your baby will get HIV.
- If your baby does have HIV, there is a lot we can do to keep him or her healthy. By coming to the hospital or clinic and following the care plan, your baby can grow up to be a healthy child and adult.

Ask: *Does anyone have any questions before we move on?*

Staying Healthy During Your Pregnancy

Ask: *What are some of the things you think you can do to stay healthy during your pregnancy and lower the chances that your baby will get HIV?*

Come to the hospital or clinic often:

- You should come to the hospital or clinic for **at least** 3 antenatal care visits.

Ask your partner to get an HIV test too:

- It is important that you and your partner get an HIV test - before getting pregnant or right away after you know you are pregnant.
- Sometimes it is hard to talk to your partner about getting an HIV test. We can talk with you about ways to get your partner to come for an HIV test.

Make sure you get a CD4 test and come back to learn your CD4 test results:

- The CD4 cells are the soldiers in our bodies that help us fight infections.
- HIV attacks the CD4 cells and it becomes more and more difficult for our bodies to fight infections.
- To know how many CD4 cells you have, the nurse will take a sample of blood from your arm and send it to the lab.
- It is very important to come back to learn your CD4 test results.
- The higher your CD4 count the better, because you have more soldiers that will help your body fight infections.
- Also, the higher your CD4 count, the lower the chance of passing HIV to your baby.

Take medicines called ARVs:

- All pregnant women living with HIV need to take medicines called ARVs.
- The type of ARVs that you take depends on your CD4 count. Some women will only need to take ARVs during pregnancy and others will need to take them during pregnancy and for their entire lives.
- All babies born to women living with HIV also need to take ARVs.
- ARVs do not cure HIV. There is no cure for HIV.
- ARVs are safe for you and your baby.

If you have a CD4 count higher than 350, taking ARVs during pregnancy will help prevent your baby from getting HIV:

- Pregnant women with a CD4 count higher than 350 have less chance of passing HIV to their babies than women with a lower CD4 count.
- You should take a medicine called AZT 2 times per day, starting when you are 28 weeks (7 months) pregnant until after you delivery the baby. *(show AZT)*
- You should take another medicine called Nevirapine when you go into labor. *(show NVP)*

If you have a CD4 count of 350 or lower, you need to take ARVs to improve your own health and to help prevent your baby from getting HIV:

- Pregnant women with a CD4 count of 350 or lower are more likely to pass HIV to their baby than women with a higher CD4 count.
- You should take a combination of medicines called AZT, 3TC, and Nevirapine every day while you are pregnant and for your whole life. *(show ARV bottles and tablets)*
- You will also need to take a medicine called Cotrimoxazole every day to prevent infections. *(show CTX)*
- Take your medicines at the same time every day and do not share them.

Have safer sex:

- Always use a new male or female condom every time you have sex. *(demonstrate male and female condom use)*
- Even though it can be hard, it is good to talk to your partner about using condoms - especially while you are pregnant.

Prevent and treat sexually transmitted infections (STIs):

- If you or your partner have signs of STIs like itching, a rash, strange discharge, or sores around the genitals, come to the hospital or clinic right away.
- Both you and your partner will need to get treatment.

Eat enough nutritious foods:

- Pregnant women need to eat more food to stay healthy and have a healthy baby.
- Take vitamins and iron tablets that you get at the hospital or clinic.

Prevent and treat tuberculosis:

- Make sure you have a lot of fresh air in your home.
- Cover your mouth when you cough or sneeze and have others do the same.
- Stay away from people that have active TB.
- If you have signs of TB, like coughing, night sweats, fever, or if you lose a lot of weight, come to the hospital or clinic right away.

Plan to deliver your baby safely:

- Plan on having a safe delivery in the hospital or clinic.
- Talk with your partner and family members about how you will get to the hospital or clinic and why it is important to have your baby there.

Find emotional support:

- You may want to join a mother's support group to talk with other women going through the same situation. We can link you to a support group if you are interested.

Ask: *I want to make sure I explained everything well. Can anyone volunteer to say some of the things you can do to stay healthy and prevent passing HIV to the baby during your pregnancy?*

Ask: *Does anyone have any questions before we move on?*

Having a Safe Labor and Delivery

Ask: *There is a high chance that HIV will be passed from a mother living with HIV to her baby during labor and delivery. What are some of the things you think can lower the chances of passing HIV to your baby during this time?*

Have a safe delivery in a health care facility:

- Deliver your baby in a hospital or clinic, with a trained health care worker.
- Find someone you trust who can give you emotional support during labor and delivery. This could be a family member, partner, or friend.
- Bring your *Bukhana* to the hospital or clinic. Tell the health care worker your HIV-status and any medicines you have taken during your pregnancy, like ARVs.

Take your ARVs:

- If the doctor or nurse gave you single doses of Nevirapine during an antenatal visit:
 - Take your dose as soon as you go into labor.
 - Bring the baby's dose with you to the hospital or clinic and tell the health care worker you have been given Nevirapine.
- If you started taking ART during pregnancy, be sure to bring your medicines to the hospital or clinic and keep taking them at the same time every day.
- If you did not take any ARVs during your pregnancy, it is not too late. You will get medicines called AZT and Nevirapine as soon as your labor starts.

Your baby needs to take ARVs right after he or she is born:

- Your baby will need to be given a single dose of Nevirapine syrup within 72 hours of birth and AZT syrup 2 times every day for either 7 days or 4 weeks. The doctor or nurse will guide you. (*show NVP and AZT syrups*)
- These medicines will help protect your baby from HIV.

Taking care of yourself and your baby after the delivery:

- What babies need most after delivery is to be loved.
- Spend as much time as you can with the baby skin-to-skin on your chest. Cuddle, sing, and talk to the baby.
- Be sure the baby is warm enough. Wrap a blanket around yourself and the baby.
- The baby will naturally want to breastfeed once he or she is lying on your chest. The baby will need to eat within one hour of being born.
- Delivering a baby is hard, but rewarding work. Be sure to take care of yourself by resting (with your baby if possible), drinking lots of fluids, and eating healthy foods.

Ask: *I want to make sure I explained everything well. Can anyone volunteer to say some of the things you can do to lower the chances that your baby will get HIV during labor and delivery?*

Ask: *Does anyone have any questions before we move on?*

Feeding Your New Baby

Ask: *Breastmilk is the best food for all babies, but we know that there is HIV in breastmilk. There are many things we can do to safely feed our babies. What do you think are some of the ways we can safely feed our babies?*

You can lower the chances of passing HIV to your baby through breastmilk if:

- You have a high CD4 count.
- You are on ART and take it every day at the right times.
- Your baby **ONLY** gets breastmilk for as long as possible, up to 6 months. This means no other liquids or foods - like water, herbal mixtures, juice, porridge, or cow's milk. Medicines from the doctor or nurse are OK.
- You prevent and treat breast infections right away.
- You treat thrush (white spots) in the baby's mouth right away.

Important things to know about feeding your baby during the first 6 months:

- Breastmilk is healthy, free, and prevents deadly diseases in your baby, like diarrhea and infections.
- Breastmilk is the only food your baby needs until he or she is 6 months old.
- You should take ART if the doctor or nurse prescribes it for you. This will decrease the amount of HIV in your breastmilk.
- It is important that you watch out for cracking, sore, or painful nipples, and come to the hospital or clinic right away if this happens.

Giving your baby foods other than breastmilk after 6 months:

- You should NOT stop breastfeeding before 6 months. Stopping breastfeeding early will cause more harm than good to your baby.
- At 6 months, your baby will need to have other foods as well as breastmilk to get the nutrition he or she needs.
- Your baby can have breastmilk and other foods until he or she is 12-18 months old.
- You should only stop breastfeeding if you have enough, healthy foods and milk to feed your baby. You can discuss this with the doctor or nurse.
- Even if your baby is tested and found to be HIV-infected, it is best to keep breastfeeding. Breastmilk helps keep babies with HIV healthy.

Ask: *I want to make sure I gave you all the right information. Can anyone volunteer to say some things you will do to safely feed your new baby?*

Ask: *Does anyone have any questions before we move on?*

Taking Care of Yourself and the Baby After He or She is Born

Ask: *Caring for yourself and your baby after he or she is born is very important. What do you think you can do to take care of your own health after your baby is born? What have you heard about caring for babies of mothers living with HIV?*

Taking care of yourself:

- It is important for you to come back to the hospital or clinic often because:
 - You will need a post-natal check-up.
 - You need to continue your own HIV care and treatment for your whole life.
- You may want to use a family planning method if you do not want to have any more babies or if you want to wait some time before having another baby. Always remember to use condoms too!

Taking care of your baby:

- The baby needs Nevirapine syrup within 72 hours of birth and AZT syrup 2 times each day for 7 days or 4 weeks. The doctor or nurse will guide you.
- Make sure the baby is getting good nutrition and growing well. Remember that breastmilk is the only food your baby needs for the first 6 months.
- Make sure to bring your baby to the hospital or clinic on time for immunizations.
- When your baby is 6 weeks old, he or she needs to start taking a medicine called Cotrimoxazole to prevent infections. How much Cotrimoxazole syrup you give will depend on your baby's weight. (*show CTX syrup and how to measure*)
- You and your baby will need to come back to the hospital or clinic every month to get more medicine and to check the baby's health.

Testing your baby for HIV:

- Your baby can be tested for HIV when he or she is 6 weeks old.
- If your baby tests HIV-negative, he or she will need to get another HIV test when you have stopped breastfeeding completely to know his or her HIV-status for sure.
- It is important that all of your children get an HIV test. The sooner you know your child's HIV-status, the more quickly they can take medicines to avoid being sick.

Important things to know if your baby is HIV-infected:

- There is help available for your baby if he or she is HIV-infected.
- Babies with HIV can get sick very quickly and they need to be seen at the hospital or clinic very often – at least every month.
- There are special ARVs for babies to take. It is important that the baby takes the medicines the right way, and at the same time every day.

Ask: *I want to make sure I gave you all the right information. Can anyone volunteer to say some of the most important things about caring for yourself and your baby?*

Ask: *Does anyone have any questions about what we have discussed today? Remember, if you get pMTCT services and live positively with HIV, you can save 2 lives – your own and your baby's. We are always here if you want to talk about something in private or if you think of other questions. Thank you.*