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Impact of Program Activities on the Health of HIV+ Children

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Key Program Activities and Impact in 2017

Over the last ten years, this program has grown, matured, and continues to provide a comprehensive package of lifesaving health care services to 350 HIV+ children and their families in Zambia. Key program activities completed in 2017 are given below:

Program services: All 350 HIV+ children receive food, medicines and a package of life saving health care services and will continue to do so till they turn 18 years of age. The package of services provided includes home visits from community health workers, monthly visits from the project nurse, psycho-social counseling, education in HIV prevention, and adherence monitoring and training for older children. In addition, family members are provided with training in basic home nursing, hygiene, HIV care and prevention. The program benefits 350 HIV+ children directly, and an additional 1900 children and family members indirectly as families share their knowledge with others.

Training provided to family members: Twenty-nine new children were added to replace the children who turned 18 years or older in March 2017. Family members of the new children were provided with a five- day intensive training in basic home nursing, psychosocial care, and in HIV care and prevention. Training modules are interactive, hands-on, and in the local language as most trainees have never been to school and many do not know how to read or write. Ongoing training is provided during home visits.

Prevention of HIV: 273 family members tested for HIV and several hundred more from the community were encouraged to go in for voluntary counseling and testing for HIV. Testing and knowing one's status is the first step toward prevention and spread of HIV.

School Expenses: In February 2017, 24 children were provided with funds for school fees and expenses such as uniforms, shoes, and books. All 24 children come from difficult family backgrounds – most are cared for by single moms/aunts with little or no source of income. In addition, families who do not have electricity at home or were facing long power cuts were provided with solar reading lights to help the children complete school work after dark.

Zero new HIV infections: Over the last six years, 100% of the women who received PMTCT education delivered children who are HIV free. For stories of two children born HIV free with PMTCT intervention.

Testing and implementation of EHR: Testing and implementation of a simple electronic health record (EHR) system is in progress. The goal of this EHR system is to track the health (medical history, past infections, new infections etc.) of each child and predict possible illnesses to better monitor, diagnose and treat infections.

Program activities outlined above, have set off a chain reaction of positive outcomes that strengthen the community. For example, better health and improved knowledge leads to a reduction in stigma associated with HIV which encourages more people to

get tested for HIV (critical for HIV prevention and spread). This, in turn, leads to a lower incidence of HIV and fewer deaths due to AIDS.

The Rationale for Power of Love's Pediatric HIV care program

Need and Location: Power of Love's pediatric HIV care program is based in Matero, one of the largest and poorest compounds in Lusaka, Zambia. Matero has a population of 275,000 to 300,000 and is characterized with a high incidence of HIV (prevalence rate of 12% among adults aged 15-49), and unemployment rates upward of 60%. Most residents live on less than a \$2 per day – defined as extreme poverty by the UN. Our estimate is that at least 5,000 children in Matero can benefit from a pediatric HIV care program such as ours.

Vision and goals: Our vision is to strengthen communities by preventing new HIV infections, and reducing the devastating impact of HIV and AIDS. Our goal is to equip families with tools to take better care of their HIV+ children and family members at home, prevent new HIV infections, and the spread of HIV.

Uniqueness: This program is unique because (i) it is comprehensive; it provides support in multiple ways and to multiple family members with the goal of family sustainability, (ii) it teaches self-reliance via multiple trainings and educational sessions, and (iii) has gained the trust of community members as we have been embedded in the community for the past 13 years.

Typical beneficiaries: Direct beneficiaries are children and women as they have been disproportionately impacted by the HIV and AIDS epidemic in Africa. In Zambia, there are 1.4 million orphans in a population of just 14 million. Most orphans are cared for and live in households headed by an older sibling/aunt/grandaunt/grandmother. Further, most caregivers are single moms/grandmothers caring for multiple orphaned children/grandchildren.

Program Impact

Since 2004, more than 700 HIV+ children have benefitted directly, and an additional 4900 children and family members are indirect beneficiaries. With a higher level of care at home, and supported by our health care professionals, most children stabilize and improve in health 4-5 months after enrollment. Over the last 13 years, survival rates for children have been approximately 98%, there is a marked improvement in malnutrition levels, there is a reduction in stigma associated with HIV, and school attendance is higher. The comprehensive package of services provided takes care of physical, educational, social, psychological, and income generation, needs of the women and children. The ripple effects of this approach are significant, sustained and continue to strengthen families in the community.

Next steps and new projects for 2018

Our plan is to add 50 HIV+ children in February/March of 2018 to bring the total number of children under our care to 400. For 2017, our plan is to continue to prevent new HIV infections, increase the number of HIV+ children under our care, track children who graduated, encourage more children to volunteer as mentors, and expand the skill set of community members via the provision of education and training programs.

What have we learned?

Based on 12 years of experience in the field experience we have learned that: (i) knowledge about HIV leads to its prevention, (ii) training family members goes a long way in making the community stronger, (iii) enrollment in multiple programs goes a long way in family sustainability, and (iv) gaining community trust is critical for the success of any grass roots program.

Conclusion

Our goal is to provide high quality care to HIV+ children, prevent new HIV infections and make families self-reliant in taking care of their children's health. With better knowledge about HIV, community residents take steps to prevent new HIV infections and the spread of HIV. This leads to a lower incidence of HIV, reduced stigma, and higher school attendance and performance. Every day we see families, transform themselves from a state of low education and poverty to being better informed and self-reliant. We are confident that all children under our care will continue to show a marked improvement in health, attend school and live close to normal lives.

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