

A model infant and young child feeding program

Supportive supervision to guide effective implementation of changing policies

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Scaling up new policy – Are we there yet?



Introducing the new guidelines



New opportunities

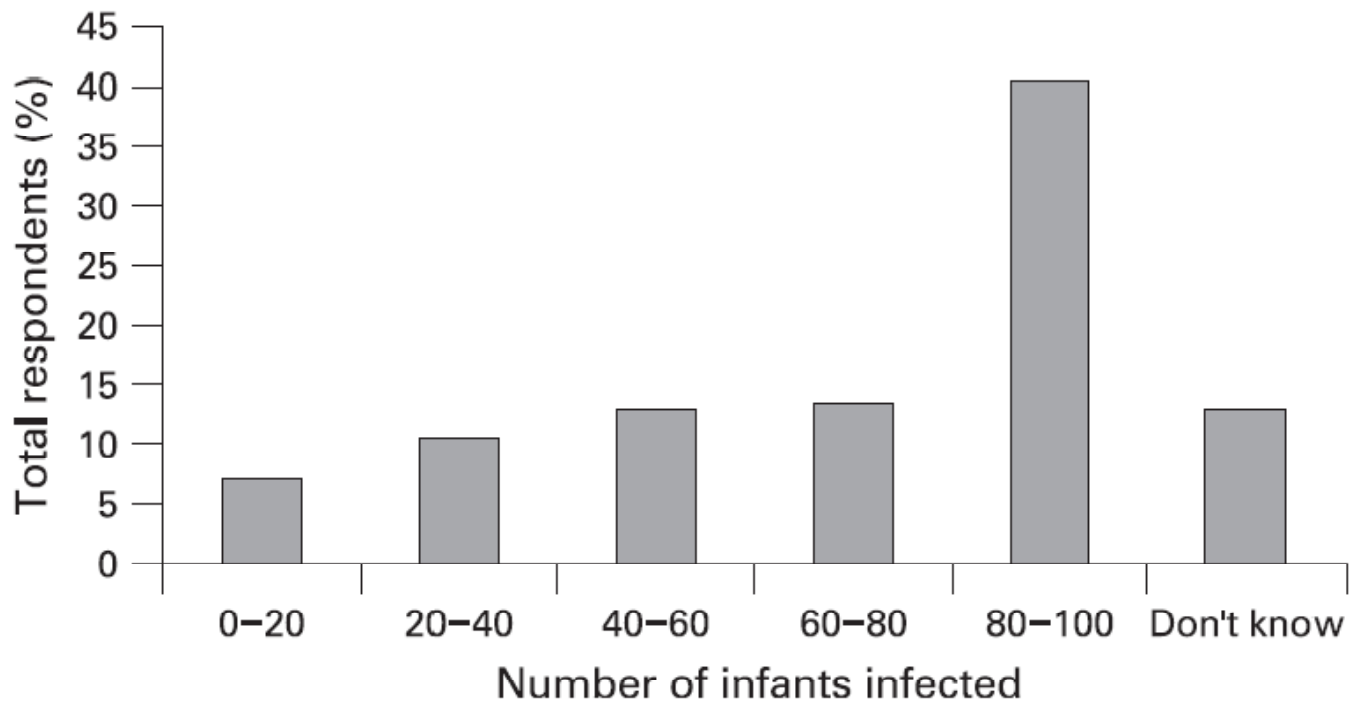


Learning from past challenges

- Lack of prioritizing IYCF within PMTCT programming
 - Focus historically on ART
- Limited IYCF information in PMTCT trainings
- Delays in dissemination and training for revised policies
 - 2006 WHO technical update
- Mixed messaging for IYCF within PMTCT



Miscalculating the balance of risks



Over-estimation of risk from breastfeeding transmission at 2 years (no ART)

Chopra, Arch Dis Child, 2008



Inadequate counseling and AFASS assessments

Appropriateness of feeding choice - presence or absence of piped water, fuel and HIV status disclosure	Adjusted HR for HIV transmission or death at 36 weeks
Met criteria: choice to formula feed	1.0
Did not meet criteria: choice to breastfeed	3.33
Did not meet criteria: choice to formula feed	3.63
Met criteria: choice to breastfeed	3.35

HIV transmission or death according to appropriateness of infant-feeding choice



New IYCF policy: scaling up

- Prioritize integration of IYCF into PMTCT programming
- Build upon and strengthen what exists
- Utilize ART expansion for quality improvement of IYCF



Best practices identified

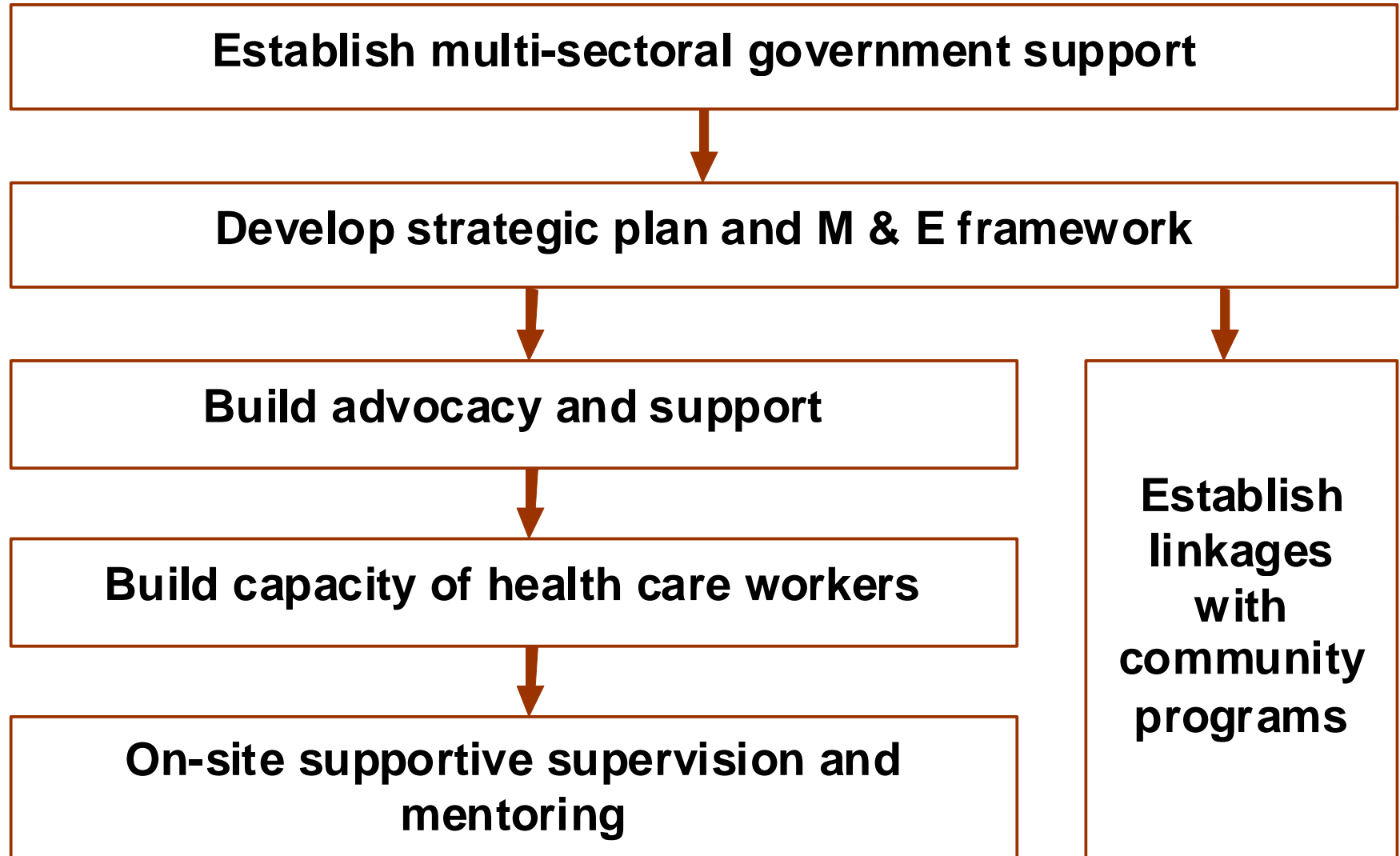
- IYCF technical assistance to EGPAF
 - South Africa, Rwanda, Côte d'Ivoire
- Khusela PMTCT Project
 - Eastern Cape Province, South Africa
- Kenya Country Program
 - APHIAII Western
- Infant and Young Child Nutrition Project



Photo: PATH/Evelyn Hockstein



A multi-pronged model for scale-up



Establish multi-sectoral government commitment

- Link government programs
 - PMTCT
 - MCH
 - Nutrition
- Launch and disseminate revised guidelines
- Identify national advocates
- Create/engage collaborative IYCF working groups



Develop strategic plan and M&E framework

- Revise IYCF-related training materials
- Develop strategic plan and M&E framework
 - Behavior change
 - Scale up



Building advocacy and support

- Create enthusiasm for new opportunities to achieve HIV-free survival
- Coordinate seminars for health managers
- Identify facility champions to promote new policy
- Train and mentor program staff to ensure sustainability



Health managers' seminars: a best practice

- Planning seminar participants
 - PMTCT coordinators
 - Provincial/district managers and representatives
 - Nutrition managers
- Topics
 - Technical review of activities and research
 - Action planning
- Gain support for upcoming activities
- Feedback seminar to share results



Build capacity of health care workers

- Pre-service and in-service trainings
- Comprehensive IYCF training
 - PATH/EGPAF 4-day participatory workshops
 - Knowledge and counseling skills
 - Building motivation and ownership
 - Clinic-based counseling observations
- Multiple cadres
 - Professional nurses
 - Midwives
 - Community health workers



Interactive participatory workshops: a best practice

- Demonstration stations
 - Heat-treating breast milk
 - Safe formula preparation
 - Complementary food preparation



On-site supportive supervision and mentoring: a best practice

- On-site activity based trainings
 - Modules focusing on identified gaps
 - Individualized technical assistance
 - Counseling observations
 - Case by case review
- Mentor program staff
- Develop on-site mentors



Photo: PATH/Evelyn Hockstein



Establish linkages with community programs

- Build on strengths of CBOs
 - Provide training
 - Integrate IYCF into programming
- Peer support
 - Grandmothers, partners, buddies
- Magnet theatre troops
- Key events to build advocacy and awareness
 - World Breastfeeding Week



Photo: PATH/Evelyn Hockstein



The road ahead...

- Challenges
- Possibilities
- HIV-free survival

