

**FLIPCHART**

# Positive health, dignity and prevention for women and their babies



A treatment literacy  
guide for pregnant  
women and mothers  
living with HIV



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Knowing your rights

# You have the right to...

The information that you need to make choices, free from coercion, about:

whether or not to be tested for HIV

whether to take HIV treatments, when to start and whether to stop

whether to have a child or to choose to have an abortion or be sterilised

whether to use contraception and which contraception to use

whether to breastfeed or not

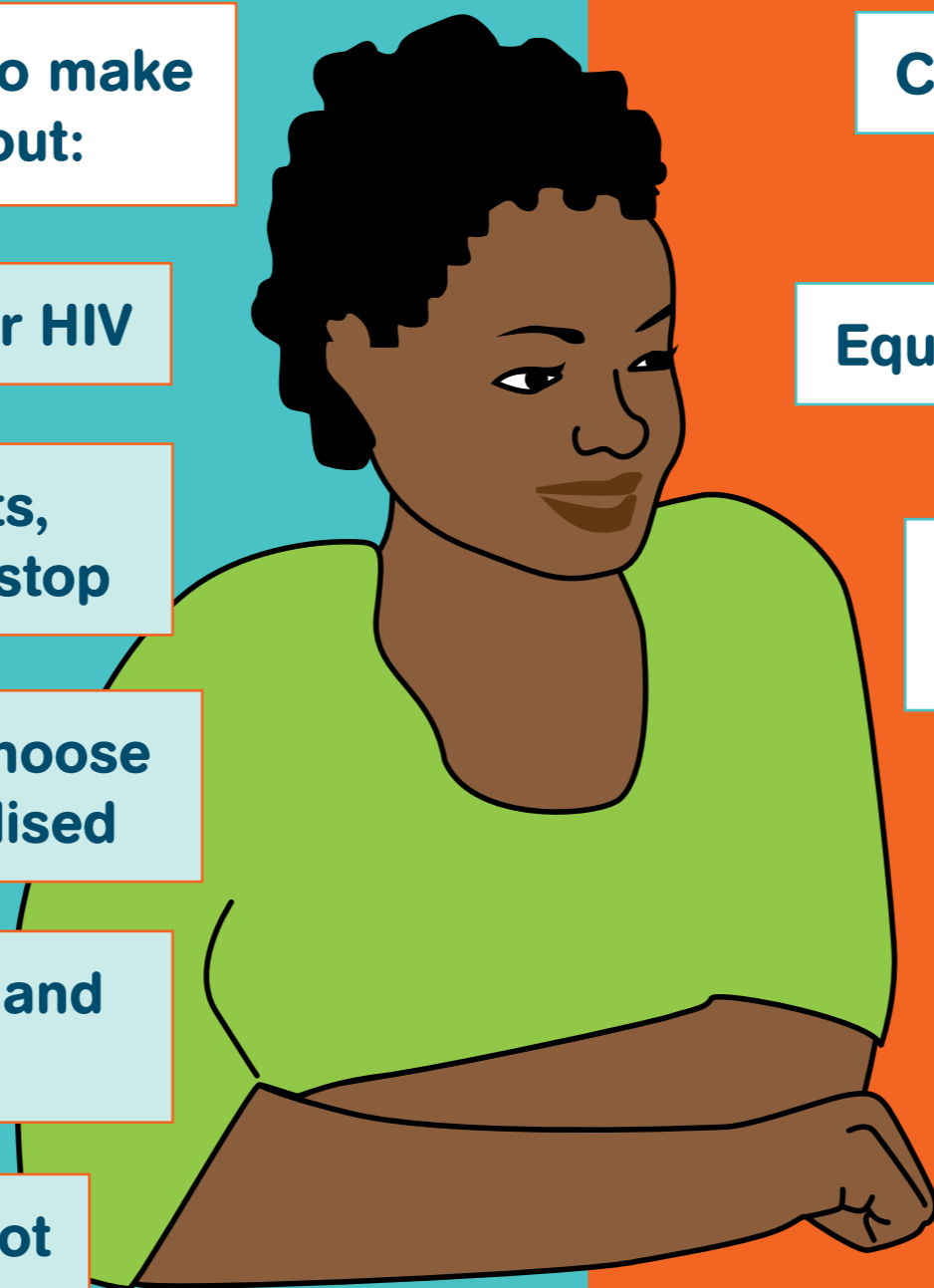
Confidentiality and privacy

Equal and non-discriminatory treatment

Access to acceptable, quality healthcare services

Access to justice and redress

Be free from all forms of violence



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# Young pregnant women's rights

## Find out if you have the right to ...



Choose a friend or relative to be your treatment supporter

decide whether or not you want to have a baby

choose who your health information is shared with

consent to your own treatment and the treatment of your baby

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# Take control of your own care

**Attend the clinic during pregnancy and after your baby is born**



**Be active in your healthcare**



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PREPARE

To make the most of your time with your healthcare team, **PREPARE**

**P**lan

**E**xplain

**A**sk

**E**xplore  
options

**R**esearch

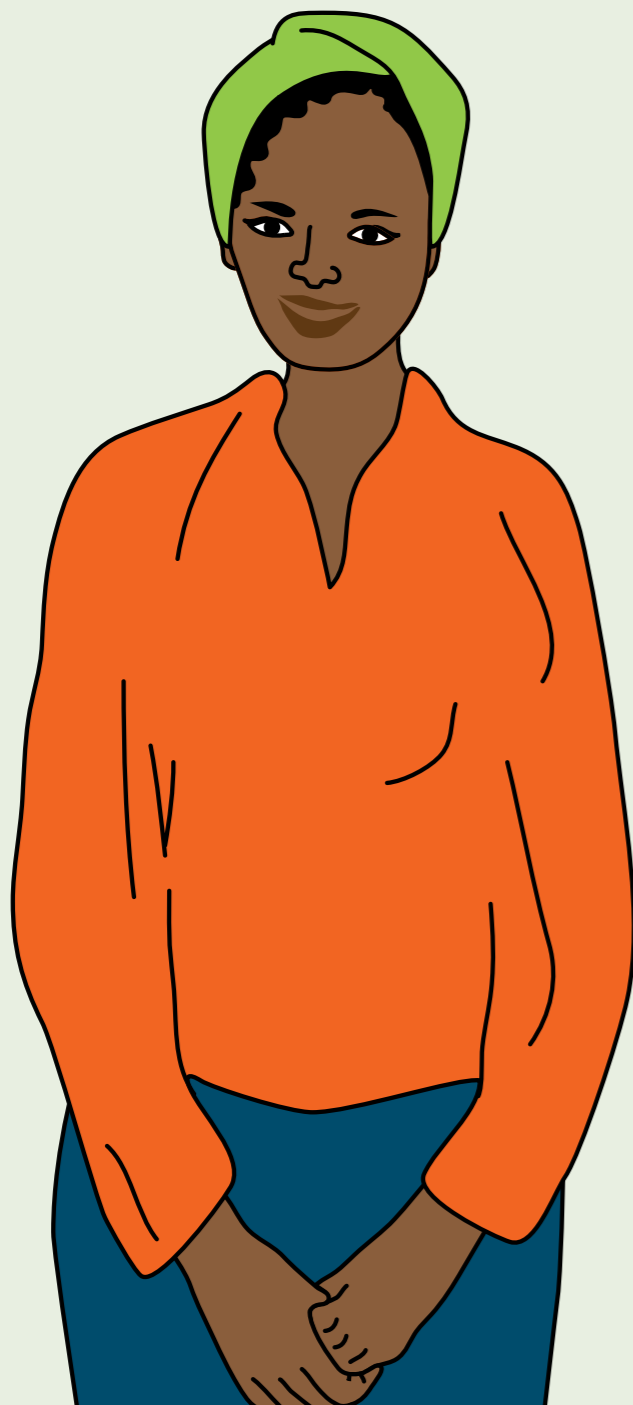
**P**rioritise

**R**eturn

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# Reasons to tell people your HIV status

You can control how somebody is first told rather than them discovering from someone else



You can take your medicines without hiding them and be supported to adhere to treatment



You can talk to your partner about ...

safer sex  
going for an HIV test  
supporting each other



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## Disclosing your HIV status



### Be prepared

- Plan what to say and how to say it
- Have information on HIV
- Have names of healthcare professionals or friends who your partner or family member can talk to

### Be safe

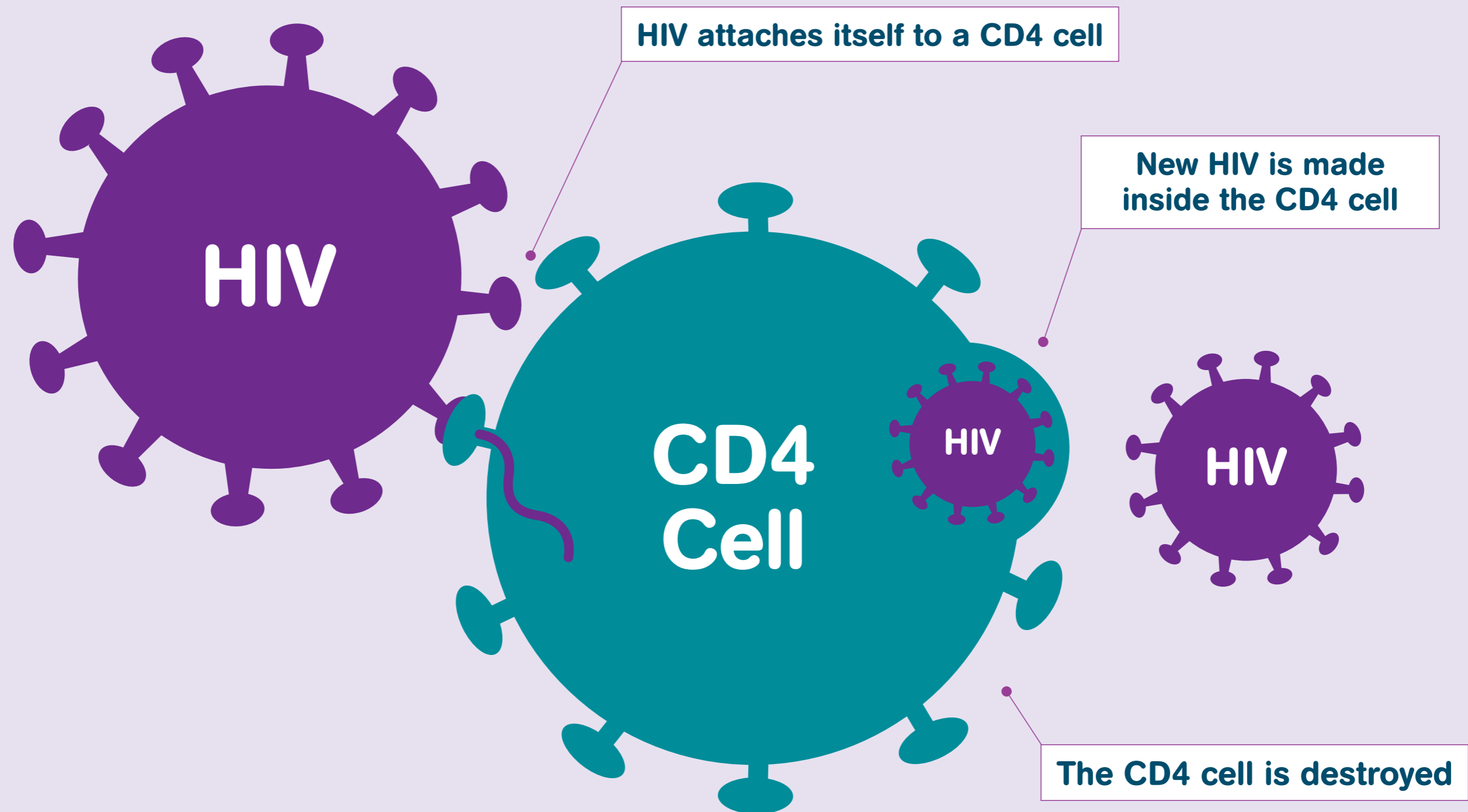
- Choose the right time and place
- Maybe have a friend nearby to help
- Take extra care if your partner has a history of violence
- If you have children, plan for their safety



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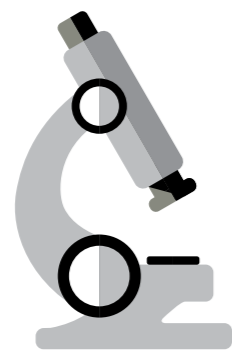
# What is HIV?

HIV is a virus that attacks the CD4 cells in your immune system



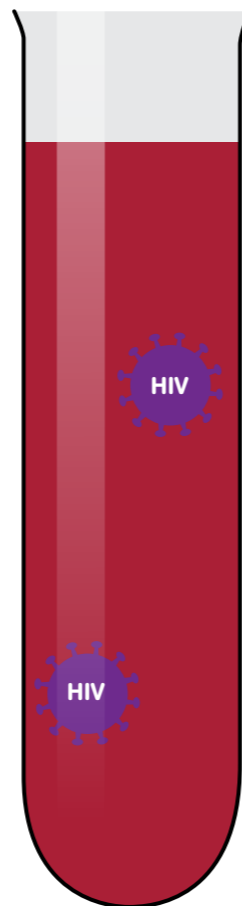
# Understanding viral load and CD4 count

## Viral load

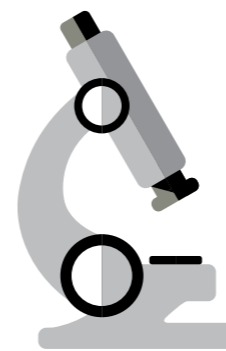


Viral load is the amount of HIV in your blood. A viral load test measures how well your treatment is working.

The lower the number, the healthier you are and the less chance there is that you can pass HIV on to your baby or partner(s).

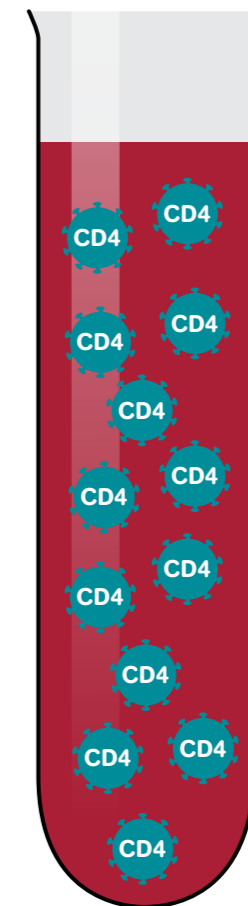


## CD4 count



CD4 count is the number of CD4 cells in your blood. A CD4 test measures how well your immune system is working.

The higher the number, the stronger your immune system.



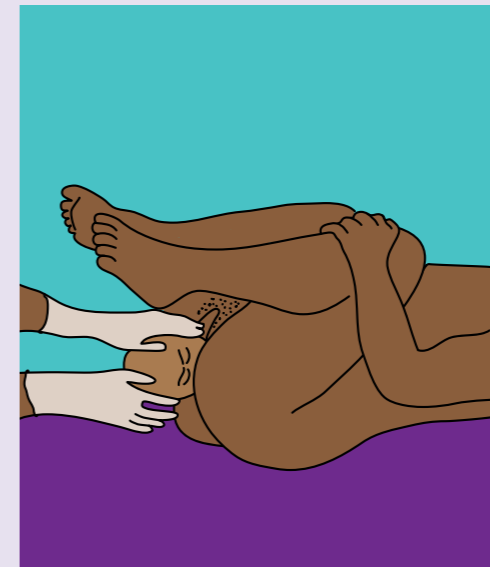
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# How HIV can be transmitted

**Unprotected sexual contact (vaginal or anal) with someone who has HIV (and does not have an undetectable viral load)**



**Mother to baby during pregnancy, delivery and breastfeeding**



**Used needles or syringes**



**Contaminated blood products**



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## How to protect you and your partner during sex

Talk to your partner about HIV and STIs

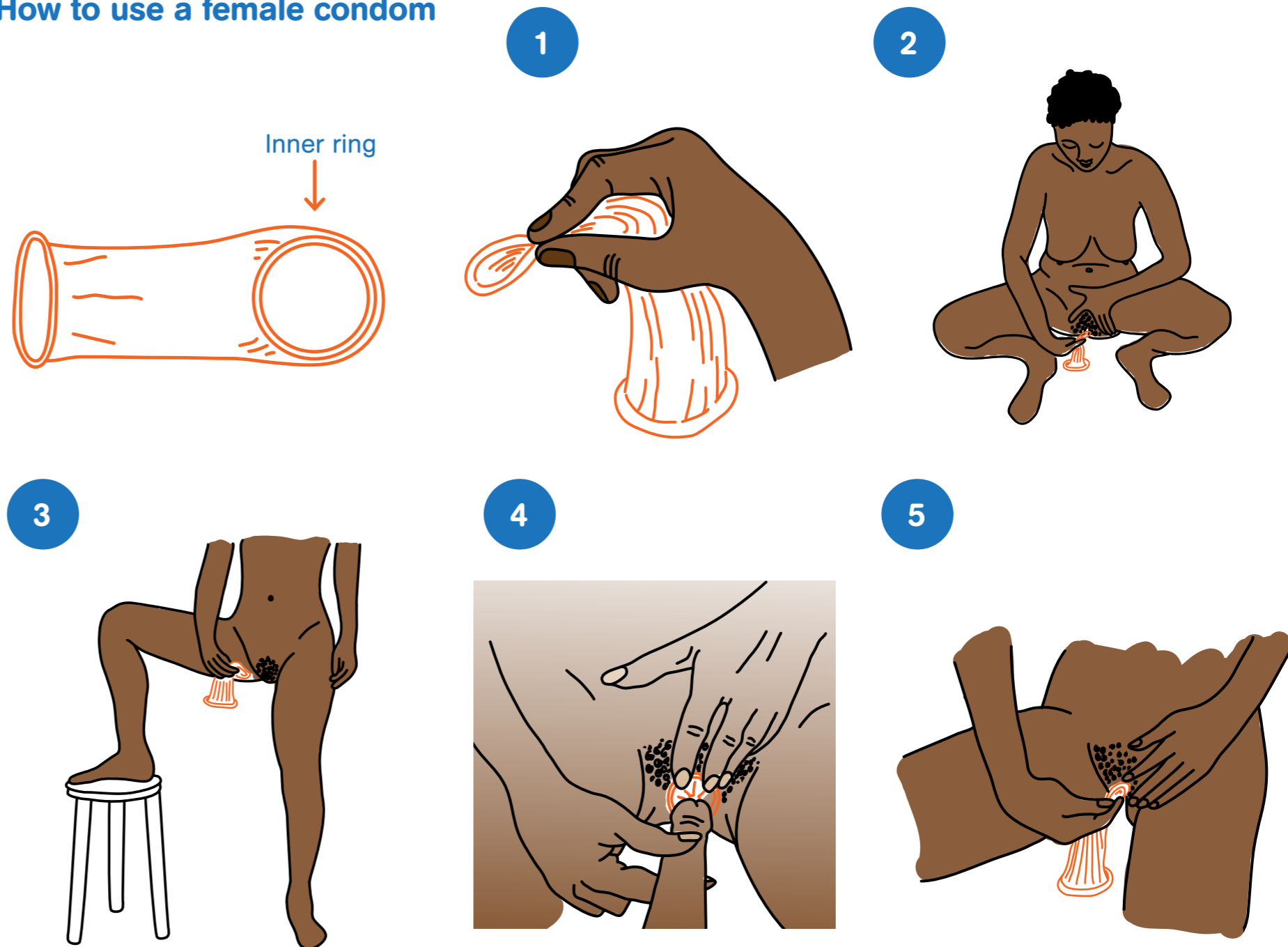


Always take your ARVs on time



Use a male or female condom

How to use a female condom



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# What to do if you want another baby

**Ask your healthcare team for advice and support**



**Talk to your partner and family**



**Make sure you are healthy**

**Manage your HIV: always take your ARVs on time**

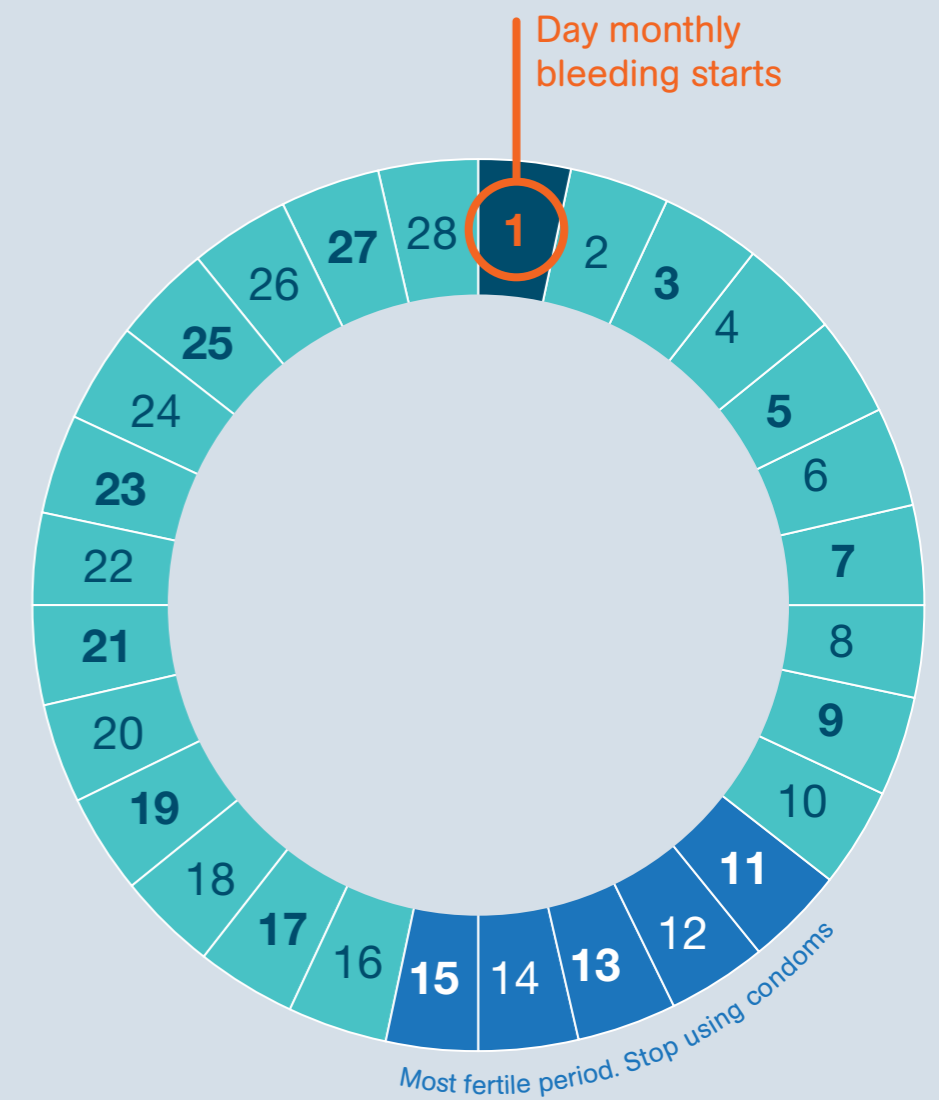


**Be free from opportunistic infections and free from STIs**



**Get pregnant safely**

**Know when you are fertile and stop using condoms for that period**

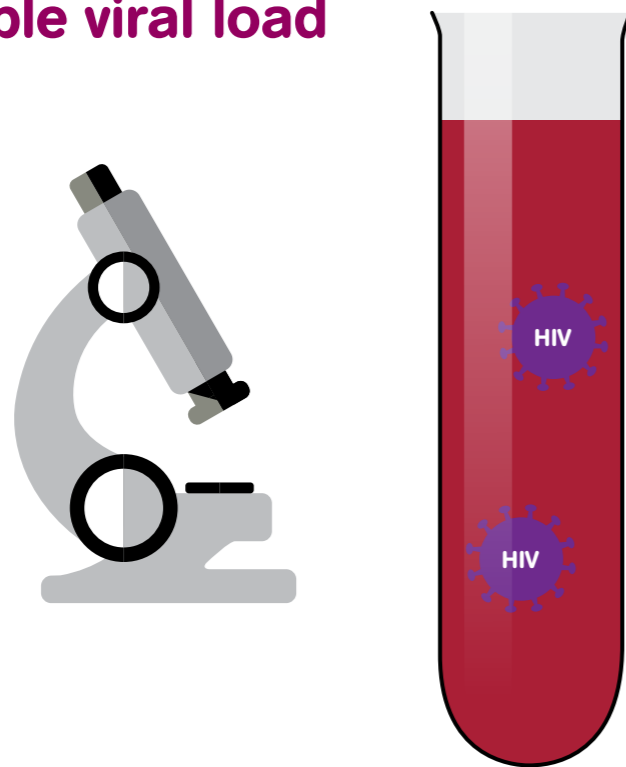


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## Managing your HIV

Managing your HIV during and after pregnancy is good for you and your baby

### Undetectable viral load



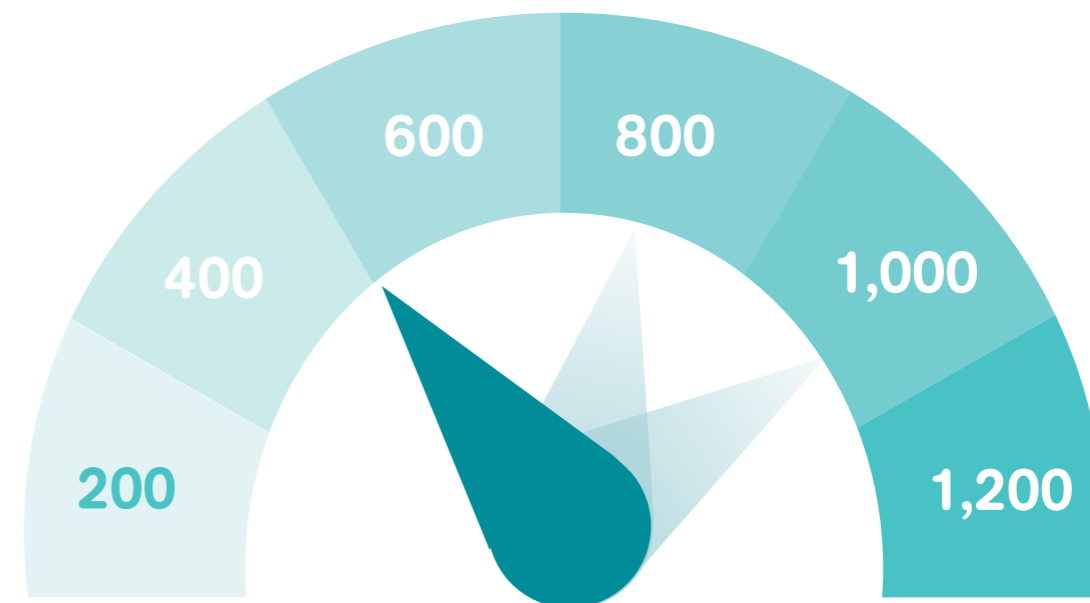
Viral load is 'undetectable' when it is under 40–75 copies in a sample of your blood

A healthy CD4 count is when it is in the range of 500–1,200 cells/mm<sup>3</sup> in a sample of your blood

Free from opportunistic infections such as TB and thrush



### Healthy CD4 count



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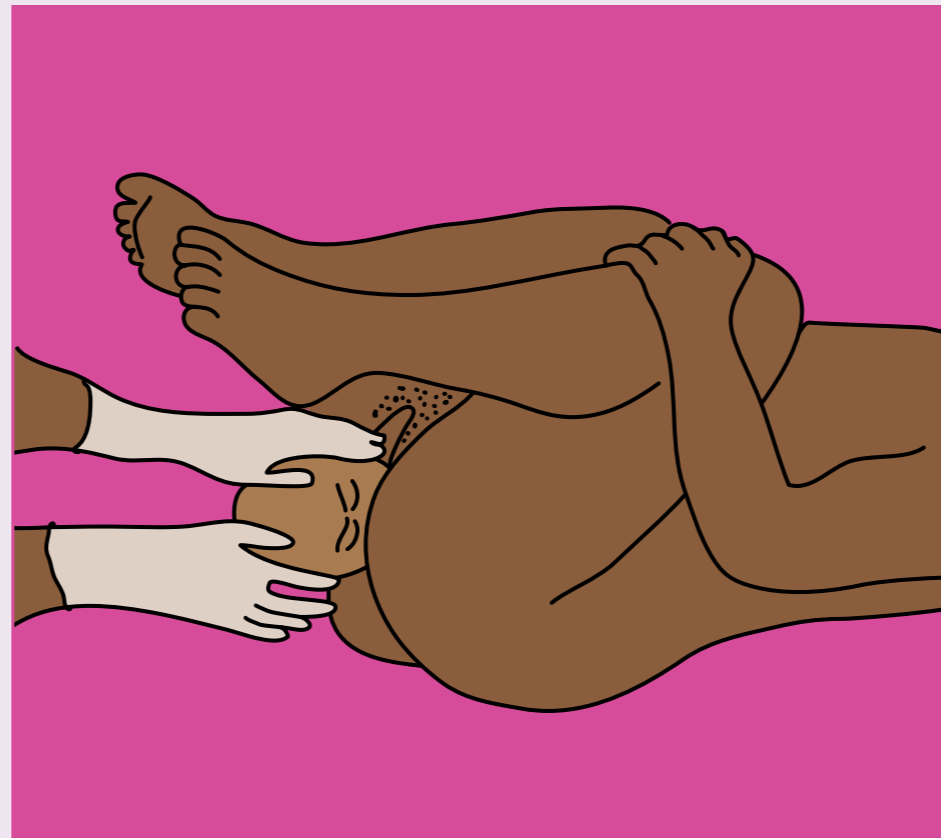
## How HIV can be transmitted from mother to child

### During pregnancy



- An infection in your uterus
- A high viral load
- Malnutrition

### During labour and delivery



- Broken membranes (prolonged labour)
- A sore or tear in your vagina or cervix
- Rubbing as your baby passes through your vaginal canal

### During breastfeeding



- Mixed feeding (in the first 6 months)
- Sores in your baby's mouth
- Cracked or broken nipples

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# Antiretroviral treatment (ART)

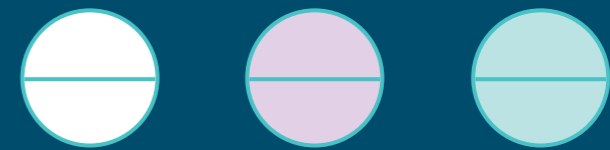


The World Health Organization recommends that all pregnant and breastfeeding women living with HIV begin antiretroviral treatment and continue it for life

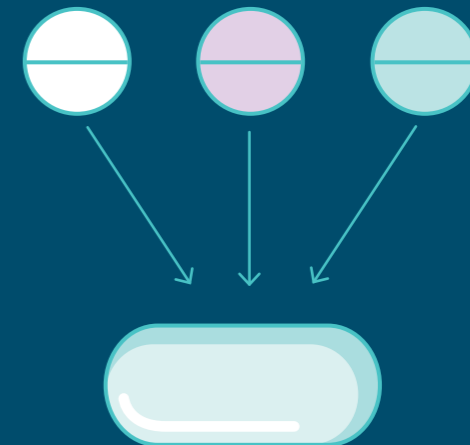


## You need to take a combination of 3 ARVs

The combination is usually 2 different 'nukes' and 1 'non-nuke'



Sometimes the 3 are made into 1 pill. For example, Atripla contains efavirenz (EFV), emtricitabine (FTC) and tenofovir (TDF)





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## Adherence to ARVs

### Always take your ARVs

Every day

At the right time

In the right dose

Doing all these things is called adherence

### Adherence will help you ...



- stay healthy
- protect your baby and your partner, if they do not have HIV
- avoid drug resistance

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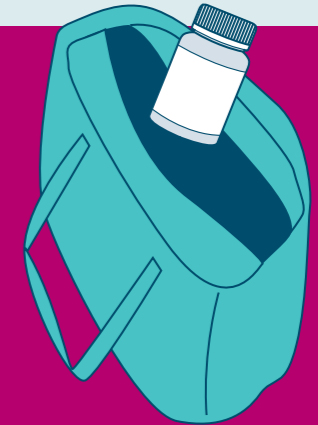
# Adherence tips



Link taking your pills with another activity that you do at the same time every day



Use a pillbox



Keep ARVs in your bag and take extra with you when you go away



Set a reminder on your phone or an online calendar

Ask someone to remind you

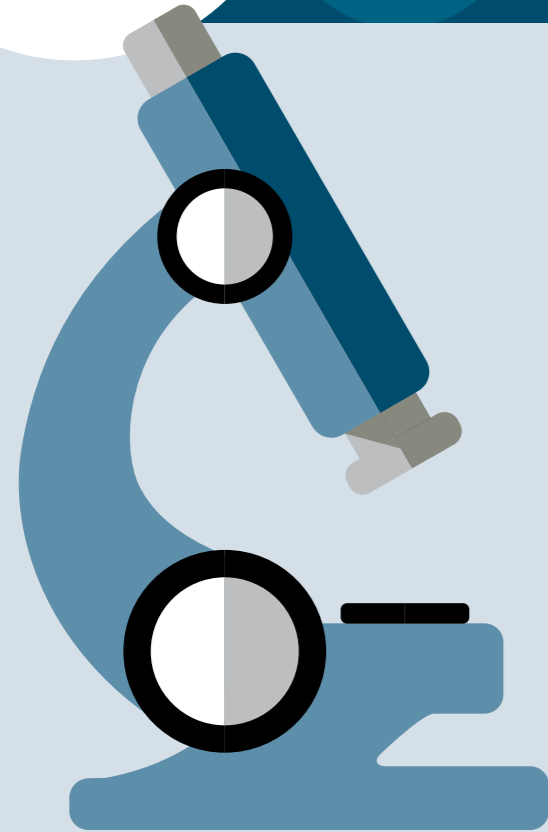


Get peer support

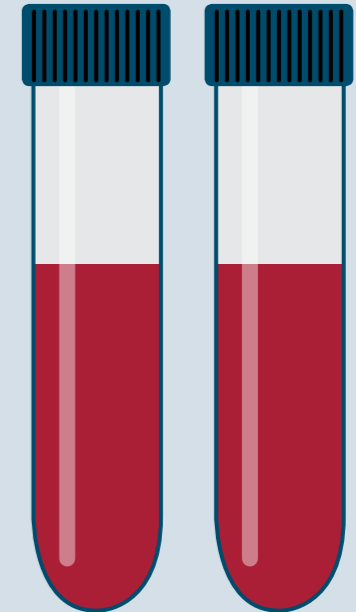


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# Antenatal care and HIV monitoring



- Monitoring how the baby is developing (e.g. listening for heartbeat, feeling for movement etc.)
- Checking for high risk conditions (e.g. diabetes, high blood pressure etc.)
- Detecting pregnancy complications (e.g. anaemia, eclampsia)



- Interventions to prevent health problems (e.g. immunisations, anti-malarial treatment)
- HIV monitoring and treatment (including, blood count, STI testing, liver and kidney function)
- Treatment for health conditions
- Information and counselling
- Birth planning

# Monitoring your baby's health



Immediate postnatal care

Testing for HIV and other infections

Immunisations

Prophylaxis medicines

Good nutrition

Developmental checks

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# Side effects of ARVs



## Short term

Most side effects are not serious and go away after a few weeks

## Long term

Some side effects are not serious but can affect you for a long time

Some side-effects can be serious but they are rare.

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# What to do if you have side effects

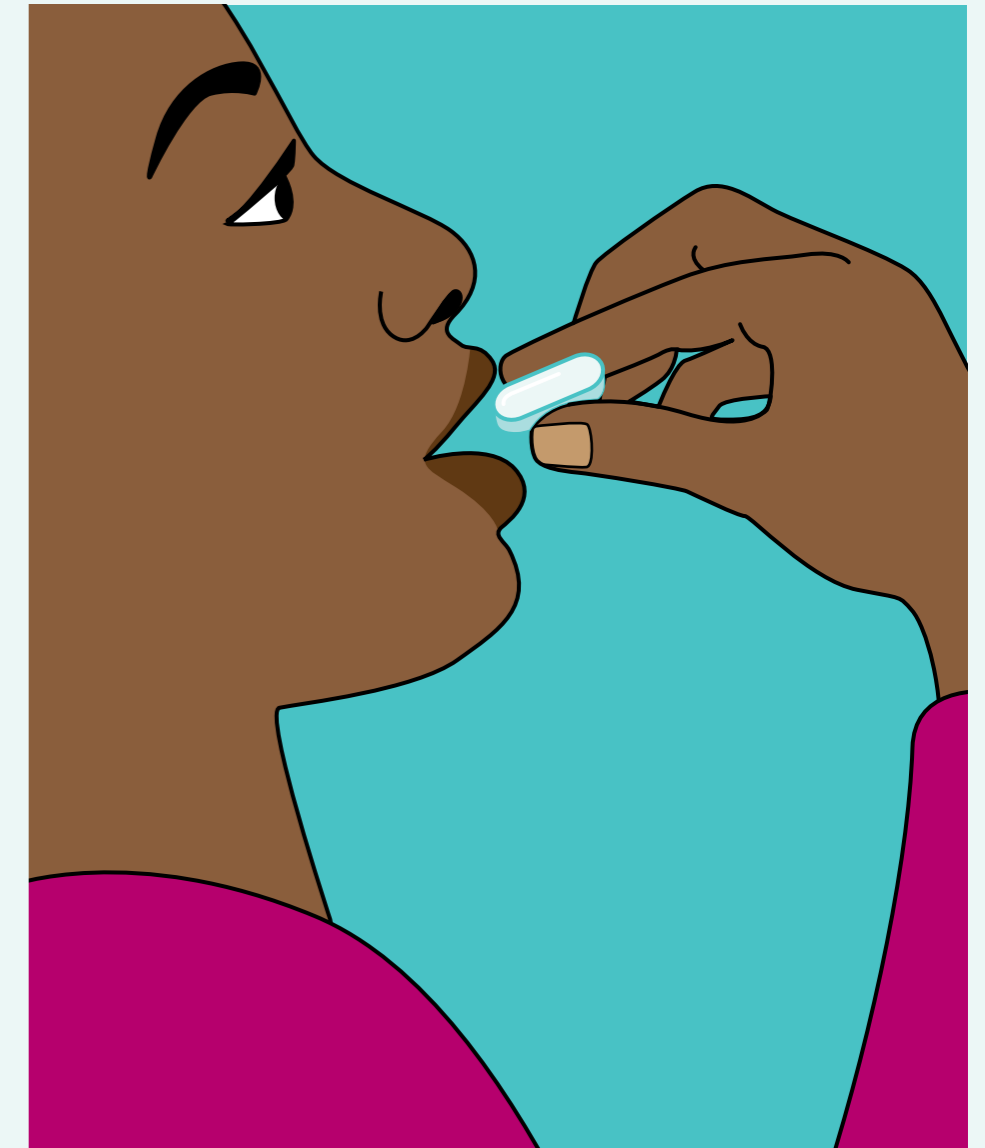
**Visit or contact your clinic as soon as possible**



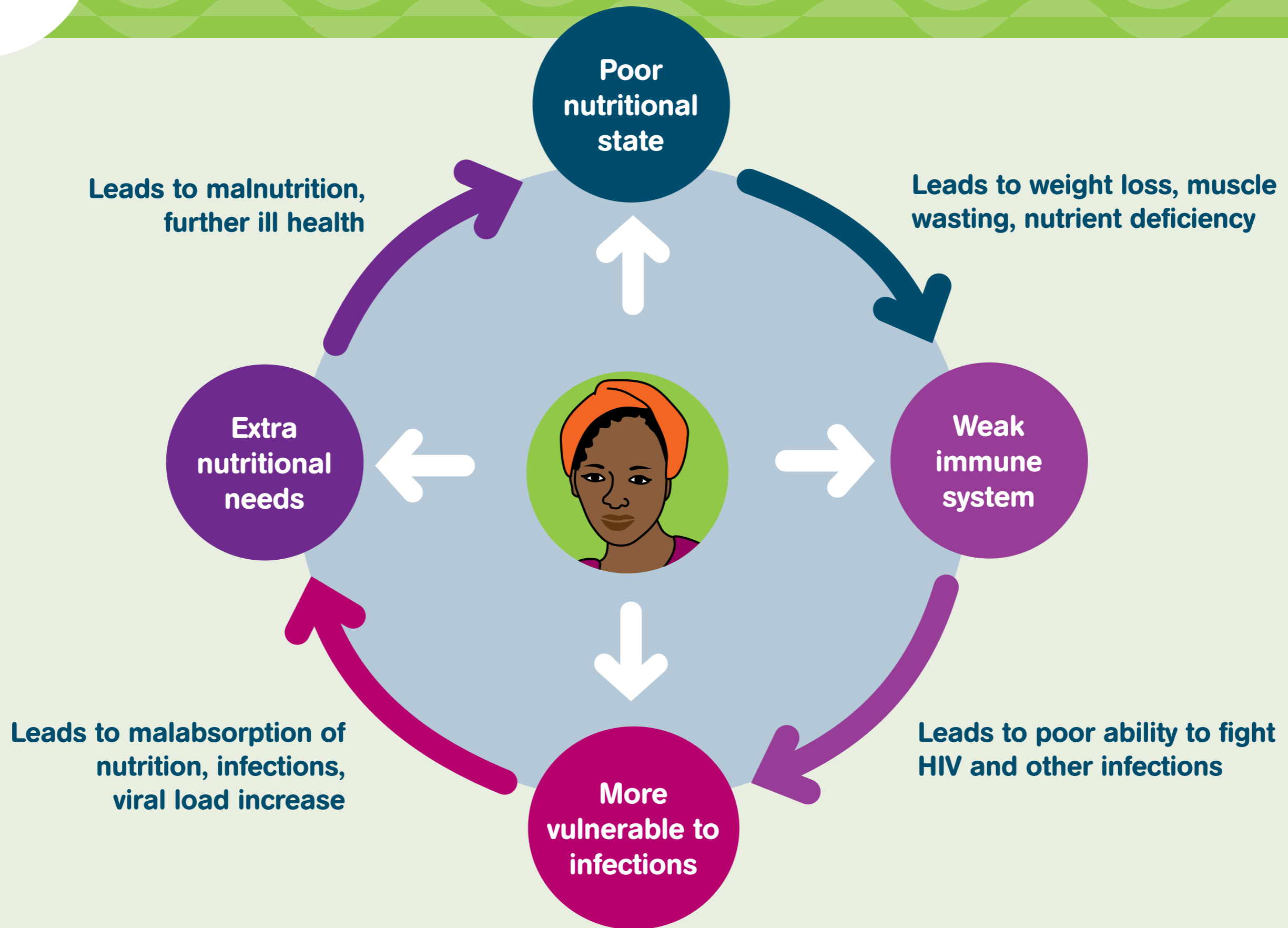
**Work with your healthcare team to monitor and manage side effects**



**Do not stop taking your ARVs without consulting your healthcare team first**



# Nutrition and HIV



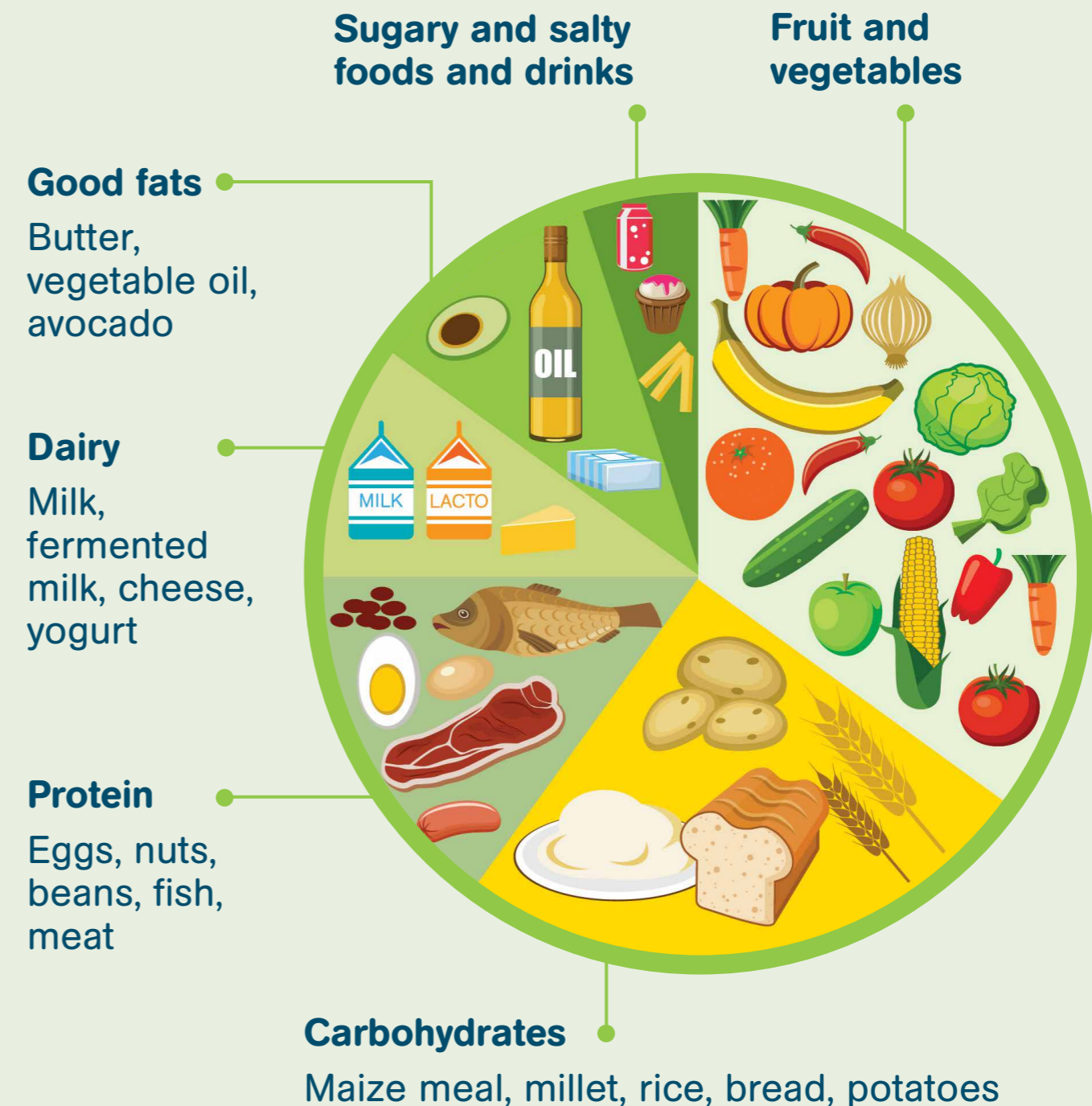
## Try to avoid:

- Smoking, alcohol and any illegal drugs
- Excessive stress and anxiety
- Being exposed to violence

## Remember:

- Take plenty of exercise
- Get enough rest
- Drink lots of water (especially when breastfeeding)
- You do not have to eat for two. Just eat a good variety of foods with an extra snack a day.

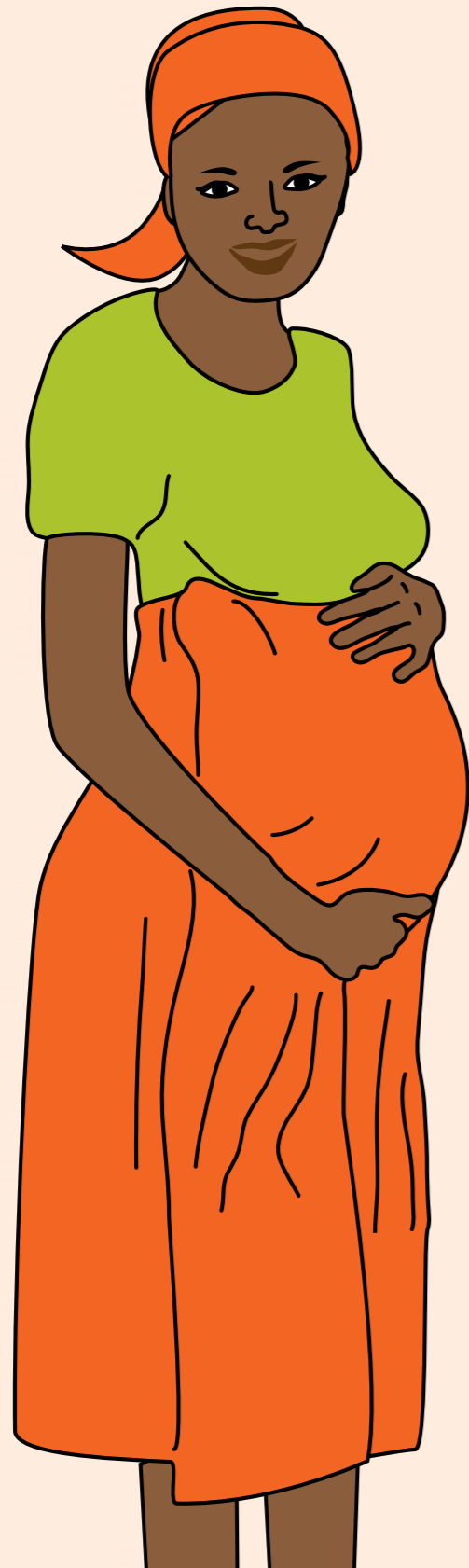
## Balanced diet





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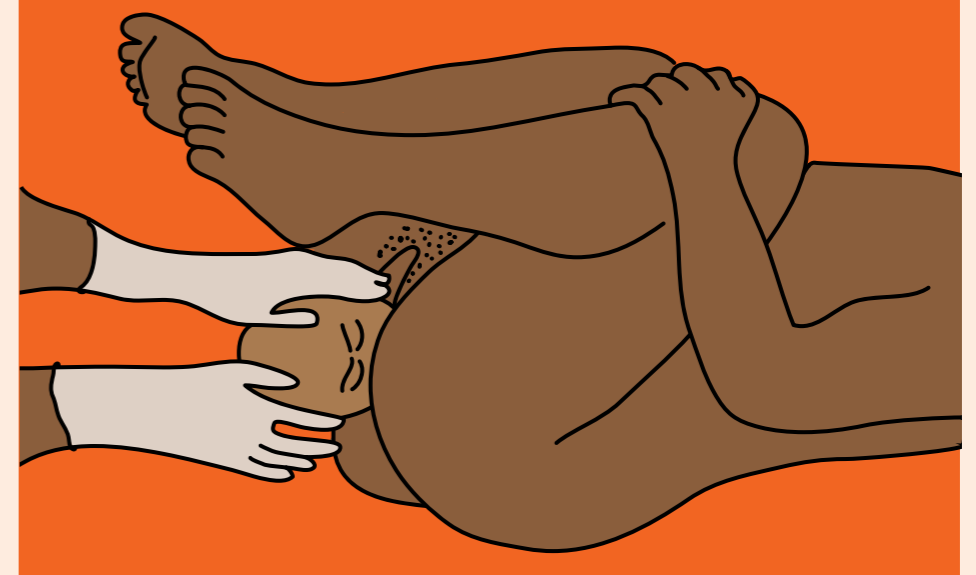
## Be prepared for the birth



Plan how you will get to the clinic



Give birth in a health facility



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## The three stages of labour

1

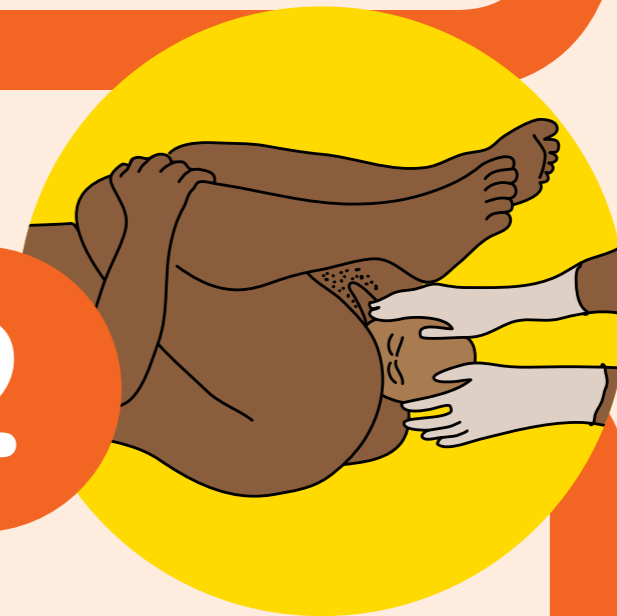
From the beginning of labour pains until the cervix is fully open



8–19 hours

Pushing and delivering your baby

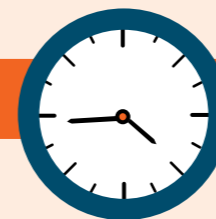
2



20 minutes to 2 hours

3

Delivering the placenta



Up to 30 minutes



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## Why postnatal care matters

### For you

Postnatal depression

High temperature

Mastitis and other problems with your breasts

Pains in the uterus, chest

### For your baby

HIV

Jaundice

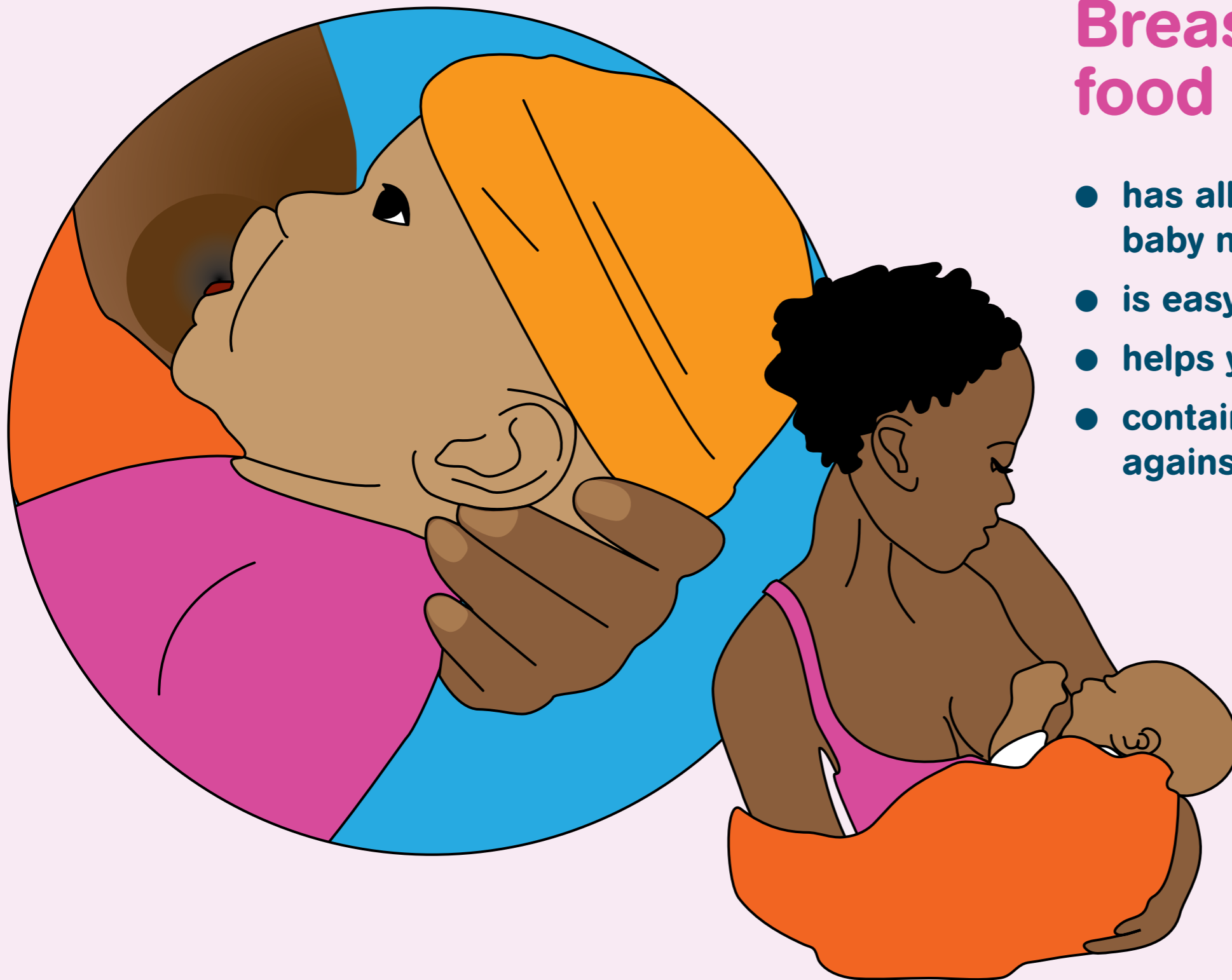
Infections of the cord stump

Blood infections, chest infections

Malnutrition



## Reasons to breastfeed



### Breastmilk is the best food for your baby, it ...

- has all the food and drink your baby needs
- is easy to digest
- helps your baby grow
- contains antibodies to protect against infections and diseases

If you are adherent to ART the risk of passing on HIV through breastfeeding is very low

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## Infant feeding

0–6  
months

**Exclusive breastfeeding**



6–9  
months

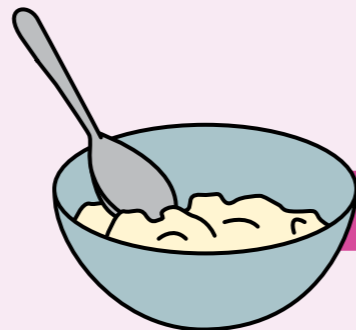
**Complementary feeding**

Consider adding other foods and liquids into your baby's diet alongside breastfeeding



12–24  
months

**Weaning**



Continue breastfeeding until at least 12 months, you may wish to continue until 24 months or longer before you stop breastfeeding altogether

