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How does a national mentor mother training project support women living with HIV through pregnancy?

A qualitative evaluation of

4M: My health, My choice, My child, My life

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BACKGROUND

Women living with HIV can face psychosocial challenges during pregnancy and motherhood.¹ Peer-support to women living with HIV during pregnancy improves wellbeing, self-efficacy and adherence.^{2,3} Here we present a qualitative evaluation of a mentor mother programme (4M) for women living with HIV.⁴

4M trained 46 mentor mothers across eight UK regions in April-October 2016. Led by women living with HIV, workshops comprised training on pregnancy and HIV, and a creative writing session.⁵

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METHODS

We adopted a participatory and collaborative approach, with an MSc student from the London School of Hygiene and Tropical Medicine (LSHTM) and a peer researcher working closely together. Between June-July 2017, we conducted semi-structured telephone interviews with nine mentor mothers and two 4M project leads - a highly experienced mentor mother who coordinated the project and led the pregnancy journey training; and a co-trainer with significant close working relationship and understanding of women living with HIV, who led the creative writing workshop. Data were transcribed, followed by thematic coding to identify emergent common themes.⁴

“As a HIV advocate, I am able to inform policy and advocacy with real life accounts. Mentor Mothers help to inform the work I do. Their experiences and being in regular touch with them actually helps me to have a more robust way of responding (Project Lead 2).

I've also done some clips for the health students in a university, so they invited me to record a clip that they will be using whenever they are training. They'll be using that clip to hear from a person from experience. So, before the Mentor Mother training, I don't think I would've be able to do that but now, I've got into that level where I feel I'm okay to share, I'm okay to talk about things (Mentor Mother 6).

“I'd like to use my mentoring skills! I haven't mentored really since completing training other than mentoring this one mum. I would like to use it more but there just haven't been the opportunities. I don't know if that's because it hasn't been there, the communication between women trained and the clinic. We now have mentor mothers that are ready, willing and able to mentor from this training, so it could help maybe, the communication to just tell people (Mentor Mother 13).

The booklet created from the creative sessions was meant as an object that is proof of how far individual Mentor Mothers have come psychologically, physically and how in the process of dealing with those challenges, what is important (Project Lead 1).



RESULTS

Overall feedback was positive. Mentor mothers reported improvements in self-confidence, social networking and coping. They described developing empathy through personal sharing, increasing their sense of belonging and reducing isolation.⁴ They highlighted project leads' sensitivity and reflection, which contributed to an inclusive and safe space. Training provided facts, “It feels good as a woman living with HIV to be able to give the right information” (Mentor Mother 11), confidence, encouragement, offered a fresh perspective “I have learnt a lot from the training, I am able to practise in my own life” (Mentor Mother 19), and optimism, “Training has given me hope that there is more to life than worrying about am I going to die and what am I going to do?” (Mentor Mother 3).

Mentor mothers particularly valued the creative writing component, and its potential to draw out resilience and increase self-confidence in delivering peer-support. Five mentor mothers had provided peer-support to 11 women following 4M training. Barriers to providing ongoing peer-support included mentor mothers' social circumstances; health issues; and lack of robust links with local clinics and support services. Project leads described 4M as reinforcing the importance of sustaining community-based support and creative spaces. “The training made me realise how crucial it is to continue working with women and organisations on a grassroots level” (Project Lead 2). However, capacity was identified as a challenge in terms of number of women trained and geographical coverage.⁴

CONCLUSION AND RECOMMENDATION

4M is a highly valuable and acceptable peer-led platform for the education and self-development of women living with HIV, fostering resilience and self-efficacy. As well as individual benefits to mentor mothers, 4M is a sustainable model of peer-support for women living with HIV during pregnancy and early motherhood, in line with the ethos of national standards for peer-support.⁶ Challenges include ongoing support for mentor mothers and a lack of awareness and uptake of their expertise.

We encourage care providers to work collaboratively with this mentor mother network in order to support women living with HIV effectively during pregnancy and beyond.

“The Mentor Mother training has brought us together more than any other training because all of us were able to volunteer to tell our own story in creative writing sessions... Everybody, even the quietest of the quietest in that group that I have known for a few years, opened up for the first time. People were cheerful, emotional and grateful at the same time. I have been attending trainings but I have never seen anything like that... It brought empathy, you understand someone better (Mentor Mother 19).



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Participating local organisations:



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