Background

mothers2mothers (m2m) was founded in 2001 in Cape Town, South Africa, and is committed to the simple but powerful belief that mothers are the key to ending paediatric AIDS and sustaining the long-term health of women, their children, and families.

- Our innovative Mentor Mother Model employs, trains, and empowers mothers living with HIV.
- Mentor Mothers provide essential health education and one-on-one support to HIV-positive pregnant women and new mothers to help them prevent the transmission of HIV to their babies, and encourage them to seek medical care early in their pregnancy, adhere to life-saving medications, and stay in treatment for optimum results for themselves and their families.
- Since our inception, m2m has helped more than 1.3 million HIV-positive women in nine sub-Saharan countries, and has inspired and supported the establishment of Mentor Mother programmes in two additional countries.
- m2m has enhanced the scope of our work to provide education, support, and referrals on a wide range of health issues important to our clients and critical to improving their overall health, including TB, cervical cancer, nutrition, neonatal male circumcision, gender-based violence, and malaria.
- Currently, m2m provides services in 340 sites in six sub-Saharan countries – Kenya, Lesotho, Malawi, South Africa, Swaziland, and Uganda.
- The Kenya Mentor Mother Program (KMMP), launched in 2012, is based on m2m’s Mentor Mothers Model and is the first programme that m2m has helped develop to integrate Mentor Mothers into a national healthcare system.

The Epidemic

Paediatric AIDS is almost always preventable. It has been virtually eliminated in resource-rich countries, yet continues to persist across sub-Saharan Africa and much of the developing world.

- Each day more than 600 children worldwide are newly infected with HIV; almost 90% of them live in sub-Saharan Africa. Nearly all of these children acquire HIV from their mothers during pregnancy, childbirth, or breastfeeding and approximately half of them will die before the age of two if their HIV infection goes untreated.
- AIDS is a leading cause of maternal mortality in sub-Saharan Africa, resulting in too many children losing their mothers in their early years when they need them most. In addition to high levels of psychological distress that results from losing a parent, AIDS orphans are less likely to receive healthcare, education and other necessary services.

The Challenge

Too few mothers are accessing the safe and affordable antiretroviral drugs (ARV) and strategies available for prevention of mother-to-child transmission (PMTCT), including exclusive breastfeeding and regular CD4 testing to track the progression of their disease. These interventions can reduce the risk of HIV from mother-to-child from 40% without intervention to as low as 2%, while also helping to keep mothers alive to raise their children.

- Healthcare facilities in sub-Saharan Africa are seriously understaffed and often doctors and nurses do not have the time, language, or shared experiences to adequately counsel mothers on preventing transmission of HIV to babies and address other serious healthcare issues prevalent in sub-Saharan Africa.
- In many regions of sub-Saharan Africa, HIV-related stigma and discrimination prevent women from being tested and seeking medical care.

Our Approach

m2m’s Mentor Mothers are mothers living with HIV who live in the community and are trained to work alongside doctors and nurses as paid members of the healthcare team. They fill the gap between medicine and medical care.
by providing essential health education and support to other mothers and their families through one-on-one counselling and group support sessions.

- Mentor Mothers’ ties to the community and first-hand knowledge of HIV make them highly effective peer mentors. Mothers are more likely to trust other mothers in their community.
- Mentor Mothers use the power of shared experience to encourage their clients to disclose their HIV-status, seek treatment and care, and deliver their babies in healthcare facilities. These actions can help prevent the spread of HIV to babies and improve the health and well being of mothers.
- m2m employs over 1,200 HIV-positive mothers as Mentor Mothers.

Our Impact
The success of the Mentor Mother Model demonstrates that a simple solution to a complex problem can improve the long-term health of mothers and children, strengthen healthcare systems, and empower women. More specifically, our model:

- **Improves the Health of Women and Children**
  The women Mentor Mothers serve are more likely to take antiretroviral (ARV) drugs to prevent mother-to-child transmission of HIV and protect their health. Further, the infants of mothers in m2m's programme are more likely to receive ARVs to protect them from HIV infection and be administered an early infant diagnosis test to determine their status than other infants born to HIV-positive mothers. These outcomes have been shown to reduce mother-to-child transmission of HIV and have a tangible, positive impact on maternal and child health.

- **Strengthens Overburdened Health Systems**
  According to the World Health Organization, there is a global shortage of approximately 3.5 million health workers. In sub-Saharan Africa, the impact of this shortage is acutely felt – the region has 25% of the global disease burden but only 3% of the world’s skilled health workers, which has interfered with the timely communication of lifesaving information to pregnant women after they receive a positive HIV diagnosis. Without support and information, many HIV-positive pregnant women and new mothers assume they are facing a death sentence and do not seek the services necessary to keep themselves and their children healthy. By working in health centres, offering personalised education and support to pregnant women and mothers living with HIV, Mentor Mothers strengthen healthcare delivery systems and reduce the burden on medical teams.

- **Employs and Empowers Women**
  As members of a healthcare team, Mentor Mothers earn a salary, which benefits not only their respective families but also the community as a whole. The skills and knowledge they acquire working at m2m makes Mentor Mothers highly employable after they leave. Mentor Mothers are also respected role models in clinics and their community, thus countering HIV-related stigma and discrimination.

Renewed Urgency and a Global Response
The global community has finally united, committing to achieving an HIV-free generation by 2015.

- mothers2mothers is identified as a key strategy in the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive. The plan was launched in 2011 at the United Nations and is dedicated to reducing the number of new HIV infections among children by 90% and the number of AIDS-related maternal deaths by 50% by 2015.
- To further Global Plan goals, m2m is helping countries implement their own Mentor Mother models to strengthen national health systems and reach more mothers. Our work with governments and local implementing partners will ensure local ownership of mentoring programs and allow for lasting progress.

To learn more, visit m2m.org or follow us @m2mtweets.