

## **Project Masihambisane Description**

Project Masihambisane is a randomized clinic trial entitled “Mentor Mothers: A Sustainable Family Intervention in South African Townships” funded by the National Institute of Mental Health in the United States and awarded to the Center for Community Health at the University of California, Los Angeles. Dr. Mary Jane Rotheram-Borus is the Principal Investigator. Research collaborators responsible for project implementation are the Child, Youth, Family and Social Development Program of the Human Sciences Research Council in South Africa.

The purpose of the trial is to test the effectiveness of an HIV+ mentor mother program or intervention. The intervention aims to provide clinic based support to HIV positive mothers and their babies during pregnancy and the baby’s first year of life with the intention of improving the health and wellbeing of HIV positive mothers and their babies.

The intervention will be tested in 8 health care clinics in the Umgugundlovu and Ethekwini districts of KwaZulu-Natal Province, South Africa. All participants will be enrolled from the Department of Health’s Prevention of Mother to Child Transmission (PMTCT) programs. Participants in the 4 standard-of-care clinics will receive the Department of Health’s PMTCT program. In the 4 intervention clinics, the mentor mother support program/intervention will be provided in addition to the PMTCT program.

The intervention will be delivered in 4 visits during pregnancy and 4 visits postpartum (similar to the regularly scheduled health care clinic visits) in a group-based program. The intervention content will focus on mentoring around:

- HIV+ status, disclosure and reproductive health;
- reducing HIV transmission through preventative health and feeding choices and acts; and
- promoting caring for one’s physical and mental health during pregnancy.

During the post natal period the focus will shift to preparing for, planning for, and parenting one’s baby. In addition, health information materials will be delivered to all antenatal attendees in both the control and intervention clinics.

The intervention’s impact will be assessed over 12 months in an effectiveness trial. It is hypothesized that mothers living with HIV who participate in the intervention will demonstrate significantly improved health-related knowledge, behaviors and support than HIV positive mothers who don’t receive the mentor mothers. Study outcomes are that the intervention will result in improved maternal and child health at the end of 12 months.