

Implementation of Family Matters Program in Chris Hani District

Dr Joven Jebio Ongole

Mr. Msimelelo Febana

About Africare

PEPFAR funded NGO, through CDC/HST

Based in East London

1. Implementation OVC program in Chris Hani District

- Sub-grantee to HST
- OVC services provided in 6 sub-districts in Chris Hani District

2. Implementation Care and Treatment and OVC Program at Amathole District

- Hybrid Program with Beyond Zero

Family Matters Program

Families matter program is an evidence based HIV Prevention program for families, guardians, and other primary care givers of preadolescents ages 9- 12.

The program aims to improve protective parenting practices that help:

- Reduce sexual risk among adolescents and
- increase parent child communication about sexuality and risk reduction.

Background

FMP was implemented at Chris Hani District

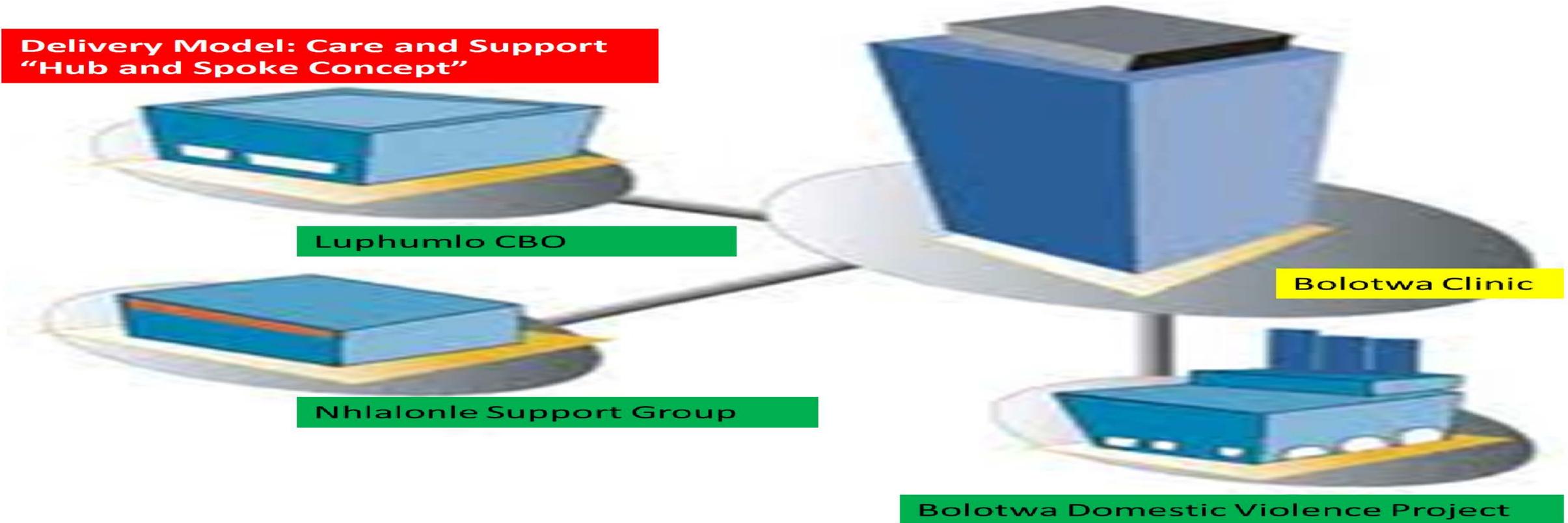
- In 42 Community Based Organisations
- In six sub-districts
- District wide coverage

The FMP was delivered through CBO platforms using “Hub and Spoke” Model

Implementation Period: Feb - Sep 2016

HUB & SPOKE MODEL- Linkage Between Health Facilities & CBOs

**Delivery Model: Care and Support
"Hub and Spoke Concept"**



Distribution of Numbers for Trainings Per sub-districts

Sub-District	Number of CBOs	Percent of total CBOs	Number to train
Emalahleni	10	22%	1056
Instika Yethu	09	20%	960
Lukhanji	07	15%	720
Inxuba Yethemba	06	13%	624
Ngcobo	07	20%	960
Sakhisizwe	05	11%	528

Who did we plan to trained? Planned Numbers?

Organisation	CBOs CHWs	Primary care Givers (PCG)	Health Facilities (CCG)	WBOT (CHWs)	DAC (Ground Diggers)
Africare	190	1654	95	95	95
CMT	230	1836	115	115	115
SACBC	30	184	15	15	15
Total	450	3675	225	225	225

Interventions

Training

- Facilitators from Africare and CMT

FMP Implementation Framework and Mapping training interventions

Orientation workshop for Community Based Organisation

- Held CBO forum for all the 42 CBOs supported by Africare

Mentorship of the CBO caregivers

- To be able to communicate to the primary care givers during recruitment

Recruitment of participants

Procurement of training materials including audio in local language

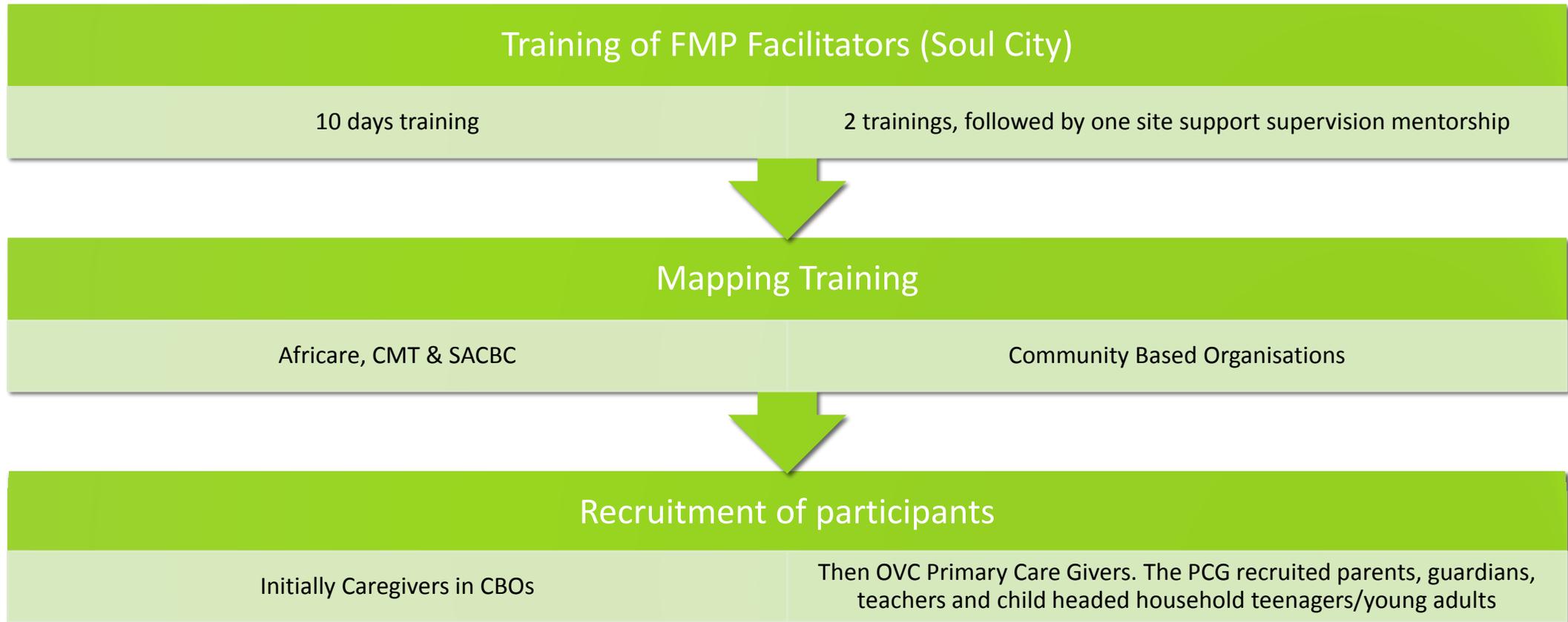
Integration of FMP into OVC services

- HIV Prevention Education, HIV Counseling and testing and Sexual Reproductive Health Promotion

Graduation of participants



FMP Implementation Cascade



Family Matters Program in Chris Hani

Implemented by three organisations:

- Africare
- Community Media Trust
- SACBC – excluded from this presentation

Organisation Target

Africare	2016
CMT	2400
SACBC	384

Training Venues

- Churches, CBO offices, community Halls, school Halls, private venues/homes

Methods

Recruited the participants

- Mixed aged groups and gender

Conducted training using two facilitators in session

Catch up sessions were conducted for participants who attended first session but missed one of the subsequent ones

Two groups are trained per day

- Morning and afternoon

Each group takes six weeks to complete all sessions

- To enable provision of HCT and OVCs services as well

Session 5 includes primary caregivers and children

- HCT is provided, the linked health facility participated

Key Results: Achievements

Sub district	GRADUATED AS AT OCT 2016	
	CMT	AFRICARE
ESD	292	
LSD	252	
NXUBA YETHEMBA		222
IYSD	268	111
NGCOBO	291	80
SSD		138
TOTAL	1103	551

Total Trained in FMP: 1654

Retention and Attrition

Sub-District	Number trained		Number of graduates		Number/rate dropouts		of Retention rate	
	CMT	Africare	CMT	Africare	CMT	Africare	CMT	Africare
ESD	358		244		18%		82%	
Lukhanji	358		177		34%		66%	
Inxuba Yethemba		70		62		11%		89%
Instika Yethu	371	48	159	23	31%	52%	69%	48%*
Engcobo	329	47	196	44	18%	06%	82%	94%
Sakhisizwe		93		71		24%		76%
Total		253		205		48 (19%)	75%	81%

8 Poor

Reflection of the Participants, Children and Primary Care Givers

Professional Nurse participants:

- I have attended trainings but this has meant most to me. I will be able to communicate with my children and I am more confident to talk to adolescents in my clinic. This I was never prepared for by my training in nursing.

Children in session five:

We have seen changes in our parents. They are calm when talking to us and treat us as important. One said “my mother has stop beating us, she only shouts. To me and my siblings, this is a big improvement to how we are treated”

Parents/primary care givers:

This training have given what we never had. The knowledge of our body, how and what to communicate sexuality with our children. We found children more confident and willing to talk about sex and risks than we ever imagined

Conclusion

The Hub and Spoke ensure linkage between health facilities and CBO

- The facility provided support to HIV Counseling Services in session 5 and those positive were immediately linked to care and treatment

The FMP training empowered both the primary care givers, parent and those who work with children to talk effectively communicate on sex and sexual risk behaviour.

There was behavioural change in the primary caregivers and parents

- The communication with children became friendly and open

It was possible to integrate Family Matters Program into OVC services rendered in the CBOs

FMP provided opportunity for HCT for children and caregivers

FMP Take Away Message

FMP improve relationship between adolescents and their parents, guardians, primary care givers and this relationship allows communication about sexual risks and therefore risk reduction

Family Matters Program if implemented widely and systematically is capable of changing not only household risk reduction but population wide sexual risk reduction

- The adolescents will be much empowered and safer with FMP

FMP implementation is easily integrated into OVC provided opportunity to conduct HCT, sexual reproductive health and HIV prevention education to the community

- Contributed to the HCT targets in the linked facility
- Best implemented in integrated setting, than as stand alone program