

READY

RESILIENT & EMPOWERED
ADOLESCENTS & YOUNG PEOPLE

#READY4UHC



Wow, I can't believe how fast this year has gone by! It's been amazing to see adolescents and young people living with HIV dominating the stage at different levels. But what does this mean for us? HIV remains one of the biggest challenges adolescents and young people face globally, yet sadly not many programmes aim to promote quality of life for this group. Mental health has been a hot topic recently but we still have mental health needs that aren't being addressed.



Audrey, Zimbabwe

Living with HIV isn't easy for us. Many young people sink into depression and anxiety as a result of their status. Many face a lot of stigma in the community and healthcare settings. Mental health is no longer the elephant in the room but it must be confronted with action and boldness. We need strong support structures within the community to help us live positively and healthcare providers need to be youth-friendly. Services should be integrated so that we can access them wherever and whenever. Trust is vital to ensure the uptake of services.

We can't talk about resilience and empowerment when barriers still exist. We need to break down barriers at all levels so we are free to express ourselves and live our best lives as young leaders. Leadership begins today, not tomorrow. And to lead, we need to be healthy, both physically and mentally.

AUDREY NOSENGA, READY+ FOCAL POINT, ZIMBABWE YOUNG POSITIVES (ZY+)

Mental wellbeing

Africaid's mental health tools

BY CAROL WOGGIN, MENTAL HEALTH SPECIALIST, AND SUNGANO BONDAYI, COMMUNICATIONS OFFICER, AFRICAID, ZVANDIRI

Research shows that adolescents and young people living with HIV have higher rates of depression and mental health problems than others of their age. This often affects adherence. Some stop taking their medication as a way of dealing with difficult feelings and experiences. This can be a form of passive suicide.

Africaid's mental health screening tool is an easy to use questionnaire that assesses adolescents and young people living with HIV for risk of depression, anxiety, post-traumatic stress, substance abuse and psychosis. After training, community adolescent treatment supporters (CATS) use the tool to support their peers. We found that 29% of those screened were at risk of mental health conditions. Depression is the most common, followed by anxiety. About one in five (17%) report suicidal thoughts. Those at risk are referred for assessment and support.

Body mapping is a tool we've used. Young people paint a picture of themselves and we ask them questions. This helps them express their feelings, thoughts and experiences, using colours and images. The CATS who drew this body map said, "The small hearts are the love I showed the child. When I first visited her, she was playing alone. She thought that's what you do if you're HIV-positive. She thought that stopping treatment so she'd die was the best thing because there was nothing she could do. But the love and support I gave that child motivated her to keep taking her medication."



A body map drawn by a CATS © Africaid

“Somebody disclosed my status. I felt depressed: two weeks not eating, not leaving the house, not doing anything, not bathing. I was suicidal. Then I realised: what would happen if I talked openly about my status? I woke up one day after all those sessions, somebody asked me if was living with HIV and I said, 'Yes, this is me.'”

Rumbidzai, former CATS, Zimbabwe

“The Journey of Life workshop has helped communities to support young people by building their self-esteem, resilience, knowledge and self-care skills: enabling them to demand their rights. Young people now know how to cope with stress as well as celebrate happy moments.”

Victor Baleka Nestory, Executive Director, Humuliza Organization, Tanzania

Overcoming trauma after Cyclone Idai

BY VIRGILIO SUANDE, PROGRAMME OFFICER, REGIONAL PSYCHOSOCIAL SUPPORT INITIATIVE (REPSI)

In March 2019, the central region of Mozambique was hit by heavy rain and strong winds, caused by Cyclone Idai. I was in Beira at the time. We had no food or money for the first two days and I couldn't tell anyone I was alive. By 7th April, over 600 people were reported dead.

The office of our READY+ partner in Beira was destroyed by the cyclone and seven CATS' homes lost their roofs. Some CATS couldn't take their medication for three days and most lost their belongings. READY+ health facilities were damaged. Most beneficiaries lost their homes and had to live in camps.

From a mental health point of view, the situation has caused fear and

hopelessness, and heightened stress among adolescents, CATS and their families. A 15-year-old READY+ beneficiary said, "I still have no place to sleep, I have to stay with neighbours and I'm not sure how long I can stay there. READY+ helped me and my family after the cyclone. We're doing our best to overcome the trauma; I still go to school but it's difficult."

As soon as we could, we met with all the CATS and implementing partners to hear their experiences during the cyclone. We offered our support, hugged each other and encouraged them. Most CATS and beneficiaries were concerned about confidentiality and how to take medication without disclosing their



REPSI's visit to Beira, Mozambique, supporting the community after Cyclone Idai.

status. To restore their dignity and hope it was important that they felt loved and cared for. REPSI implementing partners continue to provide individual, practical support to CATS and their families.

Self-stigma

BY LYNETTE MUDEKUNYE, ACTING CEO, REPSSI
People who experience stigma and discrimination may begin to believe what others think about them. Self-stigma is an internalised stigma that eats away at self-esteem and self-belief. People often lose confidence and may isolate themselves from others.

Stigma associated with HIV status is found in healthcare settings, communities, places of worship, schools and families. Discrimination, stigma and self-stigma all discourage people living with HIV from

seeking health services, including HIV prevention, testing and treatment.

At REPSSI's Psychosocial Support Forum in August 2019, we heard from PATA that peer supporters and health workers cited stigma as the main reason why people don't adhere to treatment. Presentations looked at ways in which adolescents living with HIV can be supported to counter stigma and self-stigma. Extending social networks, through being part of a support group and receiving help from a trained peer supporter, is helpful. Peer supporter models, including the READY+ one, were highlighted. Peer supporters or CATS, with support from others in safe spaces,

help adolescents to express themselves and gain confidence, which encourages them to access health services and adhere to treatment. We also heard how mobile phones, including apps such as WhatsApp, enable adolescents and young people living with HIV to get support and stay connected: all positive ways to reduce stigma and improve mental wellbeing.

Our understanding of how to combat self-stigma is limited. But we know from experience that interventions which promote community resilience and dialogue seem promising.



See Frontline AIDS' 'What works? Addressing self-stigma among people affected by HIV' and REPSSI's website for resources on self-stigma.

Integrated care for young people living with HIV

BY TINASHE RUFURWADZO, COMMUNICATIONS OFFICER, GLOBAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV (Y+)

There's more to being HIV-positive than having to swallow a pill every day. Adolescents and young people living with HIV also have to deal with stigma and discrimination, and rejection in their relationships because of their status.

Depression, grief, anxiety and suicidal thoughts are made worse by the lack of tailored mental health information and support. According to UNAIDS, in Zimbabwe 1.3 million people are living with HIV. Yet there are only four mental health facilities in four cities. This is a real concern when we consider universal health coverage.

To achieve health for all, mental wellbeing must be integrated into the HIV service delivery package at the health facility and community levels. As Bakita Kasadha, Chair, Y+ Board, said, "People living with HIV who have an undetectable viral load, but are mentally unwell, are not living well. Health service providers need to know the importance of looking beyond the biomedics when we think about the lives of people living with HIV."

In August 2019, Y+ launched its **three-year strategic plan**. Under science – one of the five broad areas – Y+ will be focusing on the mental health issues experienced by adolescents and young people who provide peer support. We need to look after our young peer supporters. And that includes their mental health too.

Anxiety and depression among adolescents and young people living with HIV

BY AUDREY INARUKUNDO, EXECUTIVE DIRECTOR, RÉSEAU DES JEUNES VIVANT AVEC LE VIH (RNJ+)

Adolescents and young people living with HIV in Burundi face many challenges, including stigma and discrimination in the family, community, school and workplace. This can lead to feelings of guilt, helplessness and despair. Hurtful words and thoughtless questions can fuel anxiety and depression.

In RNJ+ support groups we hear how adolescents and young people living with HIV feel. 'A.G' shared how he feels when his friends ask, "Do you still have parents? How is this possible when you have HIV? And how did you get it?" His friends' parents don't let them play with him, saying, "Don't touch him or you'll be contaminated."

Some adolescents don't take their antiretroviral therapy (ART) correctly. When asked why she'd stopped taking her medication, 'I.K.' said, "I'm tired of taking ART every day. If you can't give me just one tablet, I won't take it anymore."

'C.M' is open about her status, but she's anxious. "I don't know if I can get married when I am HIV-positive! The way young men treat young women living with HIV makes them depressed and give up hope for the future."

Language matters. The way communities describe adolescents and young people living with HIV can amplify their anxiety and depression. So it's important to sensitise everyone to use positive, supportive language. We also need advocacy for services and psychosocial support for adolescents and young people living with HIV to prevent and reduce mental health problems.

Ask-Boost-Connect-Discuss

BY HELEEN SOETERS, PROGRAMME MANAGER, PAEDIATRIC-ADOLESCENT TREATMENT AFRICA (PATA)

With an estimated two million adolescent mothers living with HIV in sub-Saharan Africa, they need mental health support that is non-stigmatising, engaging and accessible. Ask-Boost-Connect-Discuss (ABCD) is a package of care delivered by peer supporters to young mothers living with HIV to reduce depression by:

- screening their psychosocial support needs (ASK)
- conducting cognitive behaviour therapy group sessions based on WHO's 'Thinking Healthy' programme (BOOST)
- linking them to professional care (CONNECT)
- providing ongoing supervision and self-care (DISCUSS).



ABCD session facilitators using the mobile app in Blantyre, Malawi © PATA

ABCD is a pilot study testing the feasibility of a mobile app. Developed in March 2019 by PATA, the Universities of Cape Town and Oxford, adolescent mothers and peer supporters, the app has been used to provide structured support groups to 157 young mothers living with HIV and pregnant young women in Malawi, Tanzania, Uganda and Zambia. Encouraging 'thinking healthy', the groups have supported young mothers to meet and share experiences. The app has helped identify mothers with mental health issues, who have then been referred for professional care. It has also boosted peer supporters' capacity, knowledge and understanding of mental health, pregnancy and psychosocial support, and linked them with facility counsellors for strengthened referral channels. One young mother said, "Ever since

ABCD guided me, I left my husband who beat me, and moved to a friend's place. I feel great. I can now think clearly for my child and she has been crying less."

SPOTLIGHT ON RESEARCH



Systematic mental health review

BY NICOLE EMMANUEL AND LINDA WHITBY, SUPPORT OFFICERS: PROGRAMMES, FRONTLINE AIDS

There are key gaps in research into the effectiveness of mental health interventions for adolescents and young people living with and affected by HIV in low- and middle-income countries. A better understanding should enable us to work together to provide targeted support. Therefore the READY+ consortium commissioned a comprehensive systematic review of evidence on what has and hasn't worked to improve the mental health of adolescents and young people living with and affected by HIV. Of nearly 3,000 relevant studies, only 17 met our criteria for inclusion. And yet we were able to construct an image of what works.

Family strengthening interventions look most likely to foster positive change, particularly around resilience, depression, anxiety and self-esteem. Interventions included education on HIV transmission, responsive parenting, stress and conflict management, disclosure strategies, economic empowerment, and managing stigma. But it's difficult to know precisely which elements are most effective in contributing to mental wellbeing.

Adolescents have diverse needs, and interventions to address mental wellbeing must be equally diverse. Engaging young people living with and affected by HIV in the design of interventions is crucial to create focused, unique approaches that speak to their particular needs.

Look out for 'What works? Systematic mental health review' and other READY resources on Frontline AIDS' [resources](#) page.

Thank you!

Y+ and Frontline AIDS would like to thank our current READY partners: Africaid, Aidsfonds, Alliance Burundaise contre le SIDA (ABS), Alliance Côte d'Ivoire (ANS-CI), Community Organisation of Youth against HIV Uganda (COYAA), Coordinating Assembly of Non-Governmental Organisations (CANGO), GNP+, India HIV/AIDS Alliance, Marie Stopes International Uganda, M&C Saatchi World Services, Network of Young People Living with HIV and AIDS in Tanzania (NYP+), Nakaseeta Initiative for Adult Education and Development (NIFAED), Organisation for Social Services, Health and Development (OSSHD), PATA, Peer to Peer Uganda (PEERU), Positive Vibes, REPSSI, REJUSIDA Mozambique, RNJ+, SPIDER, Stop AIDS Alliance, Swaziland Network of Young Positives (SNYP+), UNYPA, Youth LEAD, Youth RISE and ZY+.

We would like to thank the Dutch Ministry of Foreign Affairs, the Swedish International Development Cooperation Agency, Comic Relief, the MAC AIDS Fund and SPIDER for their support.

Dates for the diary FOLLOW THE MOVEMENT!

25 November	International Day for the Elimination of Violence against Women
25 November	16 Days of Activism against Gender-Based Violence
1 December	World AIDS Day
1 December	International Conference on AIDS and STIs in Africa (ICASA), Youth pre-conference, Kigali, Rwanda
2-7 December	ICASA, Kigali, Rwanda
10-12 December	UNAIDS Programme Coordinating Board
10 December	Human Rights Day
12 December	Universal Health Coverage Day
1 March	Zero Discrimination Day
2 March	SheDecides Day
8 March	International Women's Day
9-20 March	UN Commission on the Status of Women (CSW) 2020
11 April	International Day for Maternal Health and Rights

Support the READY movement by following these events and posting to:

[READYMovement](#) [@READY_Movement](#) [@readymovement](#)

using [#WeAreREADY](#) [#READY4UHC](#). Also visit <https://frontlineaids.org/ready> and www.yplusnetwork.org/ready-movement/ for news and updates.

