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WORLD AIDS DAY

Listening to adolescent mothers with HIV

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THIS World Aids Day (December 1) comes towards the end of a remarkably challenging year for addressing the HIV epidemic. Years-long momentum, built by a global community of clinicians, researchers, policymakers, advocates and activists working to end HIV/Aids, has been halted by the sobering reality of millions in funding cuts. Progress in eliminating HIV has once again become precarious and uncertain.

In South Africa, adolescent girls and young women are often part of the conversation around HIV. New HIV infections are far higher among adolescents than they should be, and adolescent girls are six times likelier to acquire HIV than boys in the same age group. Years of data from South Africa and other high-burden countries show that adolescents struggle more than adults to connect to and stay engaged in HIV care. Importantly, this group have been consistently included in groundbreaking studies to test new advances in care, such as injectable pre-exposure prophylaxis, which promises to transform how HIV can be prevented, and eventually eliminated.

In reality, though, the voices of adolescent girls, especially those under the age of 18, are often missing from data and programmes. All adolescents navigate questions of identity, peer relationships, and family roles in moving from childhood to adulthood. For so many girls in South Africa, early exposures to violence and gender inequitable norms make this transition more complex and increase the risk of HIV. Alongside critical data from clinical

trials and technological breakthroughs, highlighting the stories of adolescent girls is essential to truly understanding what it will take to eliminate HIV.

Our team's Masana Young Moms Project is working with adolescent mothers in the Eastern Cape, including both those living with HIV and without HIV. In 2022, one in seven births in South Africa were to adolescents, and girls in the Eastern Cape have an even higher chance of being a young mother. Our team of researchers and practitioners has engaged with adolescent mothers and key adults in their support networks since early 2024, to help understand the barriers to HIV and sexual and reproductive healthcare that they face.

Adolescent mothers living with HIV who gave birth before age 18 have told us that the most persistent barriers to accessing care are social and psychological, not clinical. Many participants spoke about visiting a clinic for a pregnancy test, only to find out they were also living with HIV.

These experiences are often accompanied by shock, disbelief, and grief. Adolescent mothers describe these interactions at clinics as difficult, and often traumatic – lacking sensitive, tailored counselling that could enable them to effectively manage life with HIV and share their status with others. At the same time, they also describe the psychological and social fallout from their unintended pregnancies. They regularly face disappointment and blame from family members, loss of romantic relationships, and exclusion from school and peer networks – all before they officially enter adulthood.

Consequently, many adolescent

mothers find themselves isolated from the support structures they need most. While this isolation has implications for their own mental well-being and life-long health, it also affects the futures of their children. Being disengaged from HIV care increases the risk of poorer health as well as passing on HIV to partners or children. Critical life events – HIV diagnosis, school dropout, and childbirth – can fundamentally change the trajectories of adolescent mothers and their children.

So, what do adolescent girls and adolescent mothers living with HIV need to get through these high-risk periods, and to ultimately thrive? The solutions – shared by adolescent mothers themselves, as well as by the key adults who play significant roles in their lives – may be simpler than we tend to think. Adolescent mothers consistently emphasised the need for supportive, trusted adults who are willing to listen without judgement and offer guidance. These adults may be parents or caregivers, aunts, older siblings, grandparents, teachers, or other community members who are involved in adolescents' daily routines.

These adults also include healthcare providers. Young adolescent girls who go to a clinic for contraception are often shamed or scolded by healthcare providers, limiting opportunities for early intervention to prevent pregnancy, but also HIV. Empathic communication from healthcare providers continues to be a critical skill for development that could foster trust and keep adolescents engaged in necessary care.

Re-imagined educational and awareness campaigns that reduce stigma and blame around HIV, and cultivate kindness, are also essential

for adolescents and the adults who support them. Schools, community-based organisations, and other digital platforms are important entry points for reaching adolescents living with HIV, including adolescent mothers, and can help them feel supported and valued without judgement.

Adolescents may also benefit from peer role models who have had similar experiences. They may find these peers in community-based support groups, or on social media, which has already proven to be a powerful platform through which adolescents can connect, share, and learn about HIV disclosure and taking treatment.

For young mothers, support can and should extend beyond people to encompass services and systems, too. Streamlining services in the period after childbirth may help adolescent mothers obtain birth certificates, ID cards, and SASSA grants more easily and quickly – paving the way for them to transition to motherhood, and back to school when they are ready. Again, these systems need to be championed with adolescents in mind but stewarded by supportive adults who understand that care and empathy is a critical starting point.

As we enter an uncertain chapter in tackling the HIV epidemic, approaches that prioritise the needs, priorities, and voices of adolescent girls – and provide structure through supportive adults – can no longer be overlooked.

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