









ONE CHILD ONE LIFE

# Lentera Anak Pelangi Program Effectiveness in Supporting Children & Adolescents Living with HIV in Indonesia (2009-2022)







# **LAP Program: 5 Pillars**

**OUTCOMES** 

**+ LONG TERM IMPACTS** 

1. Home visit & Care Support
Monitor condition of family & child, monitor ART &
opportunistic illnesses, educate & counseling

Increase families' care, knowledge & attitudes toward HIV and adherence to treatment

Improve nutrition

and health

Improve managed care

Improve psychosocial well

Prevent children from being neglected or/and abused

#### 2. Nutrition Support

Provide baby formula, nutritions & vitamins, nutrition for special needs

Hama Vicit & Cara Support

Improve quality of lives

#### 3. Medical & Hospital Support

Accompany children during medical check-up, monitor access to ART, VL, & other tests, support hospitalized children & families

& adherence to treatment

Reduce morbidity & mortality

#### 4. Psychosocial Support & Life Skill Education

Provide counseling, facilitate character building group sessions for children, peer support groups for caregivers. Facilitate support group & vocational training programs for youth (16-21)

being for families, CHLHIV,
ALHIV
Rec

Reduce horizontal and vertical transmission

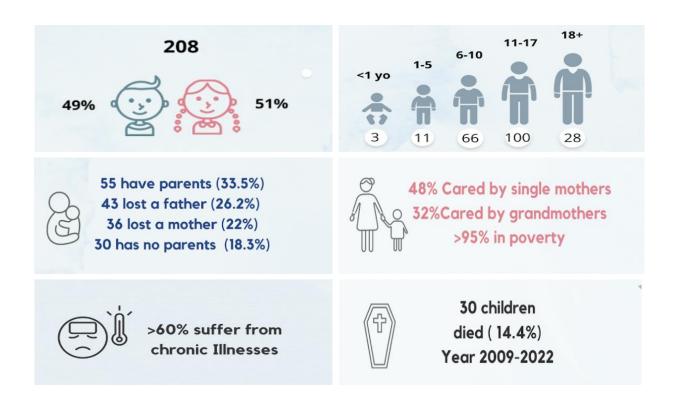
#### 5. Capacity Building & Advocacy

Increase awareness & knowledge in communities, schools, and others

Educate and increase general populations awareness and attitudes towards PLHIV



## **Beneficiaries**



### **Orphan and Vulnerable Children**









## **LAP Monitoring Dashboard**

- Monthly, quarterly, annual data records
- Monthly BMI: A,B,C
- Monthly Adherence to ARV (case manager + caregiver report): A,B,C,F, Stop
- ARV regimen status: LINI 1, LINI 2
- HIV-related diseases categories; mild, moderate, severe (based on CDC Pediatric HIV-RElated Diseases Categorization)
- Annual/Biannual Lab Test: VL, CD4, HB (and other indicators)

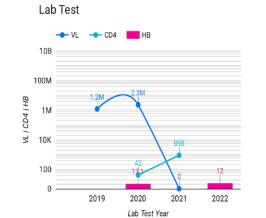
Longitudinal data analysis enables LAP to monitor and provide intervention recommendations



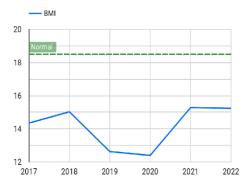
14.24	Nutritional Status  Underweight
% Adherence to ARV	Adherence to ARV Status

Full name (Mast	BMI Month -	LINI Status	BMI Status	Health Risk C	Adherence to ARV
053/LAP/2009	Dec 1, 2017	Lini 1	С	mild	В
053/LAP/2009	Mar 1, 20	Lini 1	С	mild	В
053/LAP/2009	Jun 1, 2018	Lini 1	В	mild	В
053/LAP/2009	Sep 1, 2018	Lini 1	В	mild	В

1-14/14 <



#### **BMI** Distribution









# **Psychosocial Support & Life Skill Education**













- Character building group sessions for children Sekolah LAP
- Support group for caregiver
- Support for disclosure of HIV status
- Support group & vocational training programs for youth
- Psychosocial assessment for adolescents
- Counseling

# **Capacity Building & Advocacy**









Increase awareness & knowledge in communities, schools, and others







# **Key Takeaways:**

- Most CLHIV & ALHIV are orphans and vulnerable children. They
  need additional care and support network that can monitor and
  motivate them to adhere to the HIV care and treatment.
- LAP's home visit and hospital support, as well as psychosocial support programs are crucial in building caring and supportive HIV communities. Especially for ALHIV who often feels displaced and alone.
- The availability of data and data analytics enable LAP to monitor, recommend interventions, and act faster based on the medical and psychosocial needs of our beneficiaries.
- LAP cannot do this alone. We need the cooperation of families/caregivers and collaboration from governments, International HIV-AIDS foundations, and local HIV stakeholders to build comprehensive care programs for CLHIV in Indonesia.
- LAP programs, system, and tools are available to be shared and can be a model for other HIV organizations in Indonesia. Let's grow together.









## Lentera Anak Pelangi

**Contact Information** 

+62.8111.525.888

- O LntrAnakPelangi
- **f** LenteraAnakPelangi

lentera.anakpelangi@gmail.com











# **Additional Information Beneficiaries**

