

The uptake of Prevention of Mother to Child Transmission services in rural Burkina Faso: a detailed analysis

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Introduction & Method

The Prevention of Mother-to-Child Transmission (PMTCT) of HIV has become a major focus of HIV control programs in many sub-Saharan African (SSA) countries.^{1,2,3}

A cross sectional survey was conducted from July to December 2004 among 435 pregnant women who had the opportunity to participate in PMTCT program offered by the hospital. Separate multivariate logistic regression analyses were performed to identify factors associated with accepting HIV counseling and HIV testing. Additionally, reported reasons for returning for, and disclosing test results were also analyzed.

Results

While participation in HIV counseling was associated with factors related to social background and discussing HIV testing with the partner, HIV testing participation was only related to discussing HIV screening with the partner (OR 8.47), and the number of ANC visits already accomplished (OR 2.29). Among those who discussed HIV testing with the partner, only 6.6 % reported a partner related barrier as a reason for not participating in testing, in contrast to 25 % among those who did not discuss. The analysis of participants by discussion status and counseling and testing participation revealed that fewer women dropped out at whatever point of the process from the group that discussed HIV testing with their partner.

Conclusion

Communication with the partner appeared to have a crucial in the decision making process about the uptake of HIV testing, and may require some time to succeed. However, many women failed to participate because of perceived fear of objection from the partners. Encouraging women to initiate a discussion about HIV screening with their partners may be a viable intervention to improve participation in HIV programs.

References

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