

Access to HIV Counseling and Testing and Maternity Services
among HIV-Positive Pregnant Women in Uganda's South Western Region:
Does Age and Education Level Play a Significant Role?

Track D: Social Science, Human Rights and Political Science

Category: Analysis of Socio-demographic Factors in Prevention, Treatment, Care and/or Support.

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Background: The STAR-SW Project, established in 2010, aims to increase access to, coverage and utilization of integrated PMTCT services in maternal and child health (MCH) settings. The project undertook a study in July 2010 aimed at assessing access among HIV-positive pregnant women to PMTCT services in South Western (SW) Uganda, while exploring differentials by education and age.

Methods: A community-based survey was conducted in 13 districts of SW Uganda using Lot Quality Assurance Sampling methodology (LQAS). Structured questionnaires were administered to 1,237 mothers of infants 0-11 months in randomly selected households. Data quality assurance measures were taken during data collection, processing and analysis. Data were entered into MS-Access and analyzed using SPSS v17.0. A contingency analysis for categorical variables using chi-square test was conducted, with $P < 0.05$ considered significant.

Results: Of the 1,237 respondents, 88% were tested for HIV. Women with no formal education (77%) were less likely to be tested than those with formal education (91.5%) ($P < 0.001$). Of the 96% of respondents who attended ANC, 84% were HIV-tested and 95.7% received results; women with higher education (91%) were more likely to be tested than those with no formal education (74%) ($P = 0.005$). While 63% of respondents gave birth at a health facility, women with higher education were more likely to have delivered in a health facility (92%) than those with no formal education (42%) ($P < 0.001$). There was an association between age and health facility delivery (66% of mothers aged 16–19 versus 56% of those aged ≥ 30 years [$P = 0.027$]). No statistically significant associations were observed between age and ANC attendance, HIV testing, or receiving HIV results.

Conclusions: The majority of women surveyed had accessed HIV testing and ANC services. However, differences by education and age should be considered by program managers working to ensure access to these services for all pregnant women.