Knowledge and Awareness of Prevention of Mother to Child Transmission of HIV among Male partners of Pregnant and Breastfeeding Women in Mashonaland East, Zimbabwe

Vivian Chitiyo¹, Karen Webb¹, Theresa Ndoro¹, Diana Patel¹, Sara Page-Mtongwiza¹, Patricia Mbetu¹, Barbara Engelsmann¹ ¹Organisation for Public Health Interventions and Development Trust, Harare, Zimbabwe

Families and Communities for the Elimination - FACE HIV Program

BACKGROUND

- An estimated 199 000 children of the 21 Global Plan priority countries in sub-Saharan Africa became infected with HIV in 2013.¹
- HIV prevalence among women attending antenatal care (ANC) in Zimbabwe is high, 15.9% in 2013.²
- The main mode of pediatric HIV transmission (90%) is from mother to child (MTCT) ¹
- Male partners greatly influence uptake of and adherence to PMTCT interventions by pregnant and breastfeeding women in patriarchal societies such as Zimbabwe and other sub-Saharan countries.³

RESULTS continued

Knowledge and Awareness of PMTCT of HIV

- 92% (n=284) of the men reported having heard about PMTCT program
- Knowledge levels about specific prevention methods ranged between 63-69%:
 - Maternal ARVs and ARV prophylaxis by the exposed infant following delivery 69% (n=213)
 - -Exclusive breastfeeding: 63% (n=195)
- Knowledge about MTCT and prevention of mother to child transmission of HIV (PMTCT) using antiretroviral drugs, adoption of safe sexual behaviors and safe infant feeding practices is critical for informed decision making and men's support towards PMTCT.⁴

OBJECTIVE

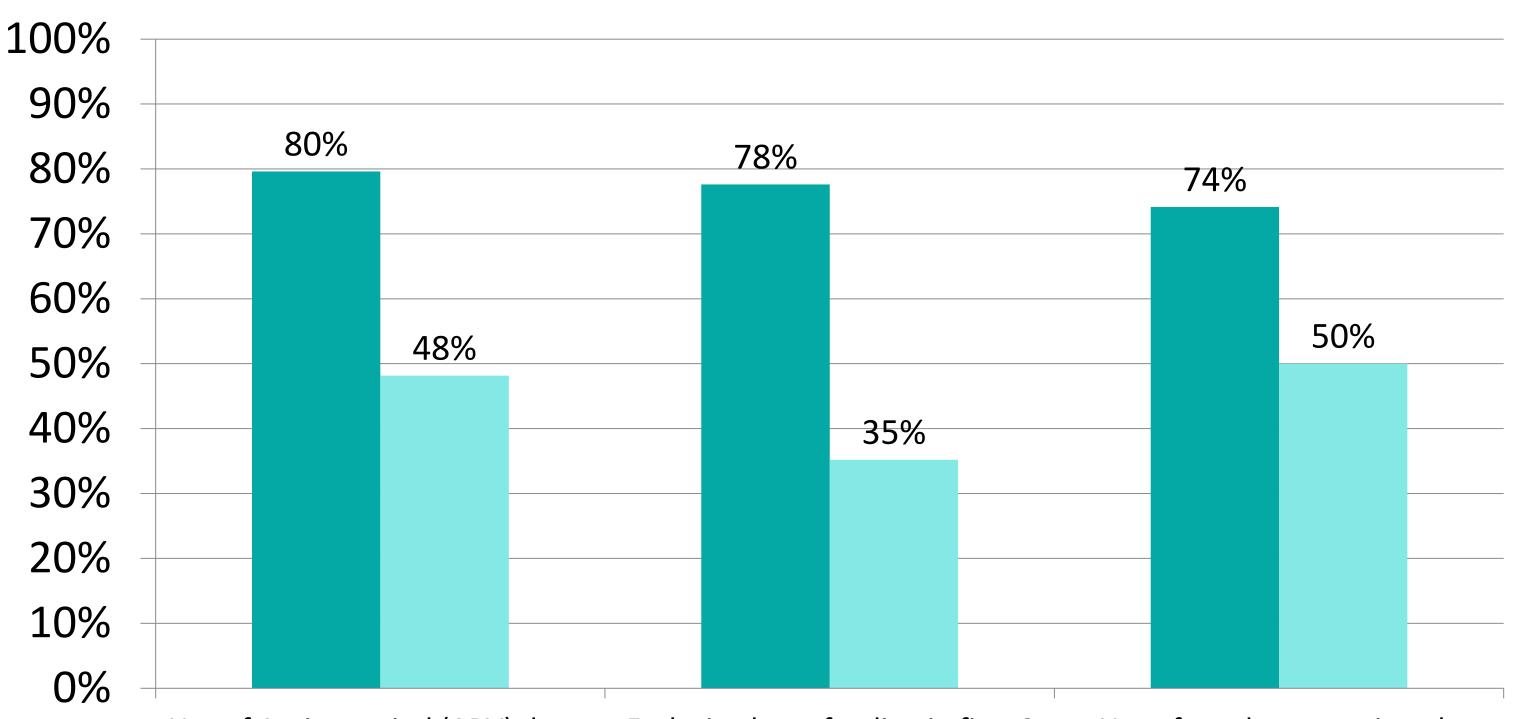
To assess the knowledge and awareness of PMTCT among the male partners of pregnant and breastfeeding women who had received ANC and PMTCT services in Mashonaland East province of Zimbabwe.

METHODS

- From December 2013 to March 2014, a total of 309 men with pregnant or lactating partners who had received antenatal care (ANC) and PMTCT services in Mashonaland East Province were interviewed.
- Exit interviews were administered with 155 men attending ANC with their partners.
- A randomly selected control group of men who had not attended ANC with their partner were interviewed at community-level (n=154).
- Data were collected using a structured, pre-tested questionnaire.
- Descriptive and inferential analysis was conducted using STATA version 12.

- -Consistent, correct use of condoms: 67% (n=204)
- Men who had ever attended ANC with their partners during current or past pregnancy had more knowledge of different methods of PMTCT than those who had not attended any ANC visit (Figure 2).
- However, less than one third of men (28%; n=87) had what can be considered as good knowledge (all methods) of preventing MTCT of HIV.

Figure 2: Knowledge of PMTCT of HIV



RESULTS

Study Population

- Median age of men was 31 years
- 67% (n=207) resided in the rural areas
- 51% (n=157) were informally employed, 41% (n=128) were formally employed and 7% (n=21) were unemployed
- Among the men traced at community level with at least one child, only four out of 24 (17%) reported ever attending ANC/PMTCT services with their partner during the last pregnancy.

Knowledge of mother to child transmission of HIV

Figure 1: Knowledge of main modes of MTCT of HIV

- Knowledge levels each of mode of transmission are still below universal levels, 90%.
- -During pregnancy: 68% (n=210), -During labour and delivery: 81% (n=251) -During breastfeeding: 73% (n=225)
- Men who attended ANC with their partners had more knowledge of MTCT of HIV (Figure 1).
- Fewer than half of men surveyed 45% (n=141) had knowledge of all three main

Use of Antiretroviral (ARV) drugs Exclusive breasfeeding in first 6 Use of condoms consistenly by mother and infant months & mixed feeding during pregnancy and breastfeeding thereafter

> Ever Attended ANC Not attended ANC

Other Factors associated with good knowledge of PMTCT

- The following factors were significantly associated with good knowledge of PMTCT:
 - -residing in urban areas, [OR=2.24; (1.34-3.74)]

-Ever received HIV testing and counselling, [OR=1.59, (1.1-3.61)]

CONCLUSIONS

- The data demonstrates the need for innovative interventions to reach men in the most disadvantaged rural communities to increase specific knowledge and awareness of PMTCT methods.
- Higher knowledge levels among men who had made use of health services by attending ANC with their partners highlights importance of targeting men for outreach including HTC to support family-centred approaches to HIV

Male Participation in PMTCT:

ey on the experiences, attitudes and perceptions of male partner's participation in antenatal and PMTCT services Mashonaland East Province, Zimbabwe



modes of MTCT (comprehensive knowledge) of HIV.

100% 92% 88% 79% 80% 60% 58% 60% 44% 40% 20% 0% During pregnancy if mother is HIV+ At birth if mother is HIV+ Breastfeeding by HIV+ mother Not attended ANC Ever Attended ANC

prevention, treatment, care and support.

The low levels of comprehensive knowledge of PMTCT raise and reinforce the need for intensified knowledge and awareness campaigns in the communities towards the Global Plan to eliminate new HIV infections among children.



Download the full study report at www.ophid.co.zw/

REFERENCES

1. UNAIDS. 2014 Progress Report on the Global Plan towards the elimination of new HIV infections among children by 2015 and keeping their mothers alive. Geneva: UNAIDS. 2014.

2. Zimbabwe Ministry of Health and Child Care. National Survey of HIV and Syphilis Prevalence among Women attending Antenatal Clinics in Zimbabwe 2012. Harare: MOHCC; 2013.

3. Morfaw F., Mbuagbaw L., Thabane L., et al. 2013. Male involvement in prevention programs of mother to child transmission of HIV: a systematic review to identify barriers and facilitators. *Systematic Reviews.* 2(5): 1-13

4. Byamugisha R., Tumwine J.K., Semiyaga N., et al. 2010. Determinants of male involvement in the prevention of mother-to-child transmission of HIV programme in Eastern Uganda: a cross-sectional survey. *Reproductive Health.* 7(12): 1-9



Acknowledgements: We gratefully acknowledge support from the President's Emergency Plan for AIDS Relief (PEPFAR) through USAID and Families and Communities for Elimination of Pediatric HIV in Zimbabwe (AID-613-A-12-00003, FACE Pediatric HIV)



For more information contact: **Organisation for Public Health Interventions and Development** 20 Cork Road, Belgravia, Harare, Zimbabwe www.ophid.co.zw/ Email: vchitiyo@ophid.co.zw

