

PMTCT and Patient's Rights in Zimbabwe:

A journey towards equitable and optimal standard of care for informed patients

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BACKGROUND

- The Zimbabwe Patients Charter focuses on health rights and responsibilities of patients and health staff [1]
- Adopted by the Ministry of Health and Child Welfare in 1996, the Charter focuses on equitable access to high quality services, as well as patients' responsibilities for their own health
- Zimbabwe has an estimated HIV prevalence among women in Antenatal Care (ANC) of 15.9%[2]
- Recent evidence suggests that Zimbabwe is approaching virtual elimination of pediatric HIV, with mother to child transmission rates as low as 5.3% [3]
- While program successes have been well documented, little is known about the application of the Charter in the National PMTCT program

OBJECTIVE

- To explore the perception of the right to health as outlined in the Patients Charter in the PMTCT program from the patient's and service provider's view point

METHODS

- A qualitative cross-sectional study using convenience and random sampling was conducted in February 2014.
- 81 pregnant and lactating women and 10 health care workers (HCWs) were sampled from 3 clinics in Marondera and Mutasa districts of Zimbabwe
- Interviewer administered questionnaires for the women and self-administered questionnaires for the health care workers were used
- Results were analysed thematically, while SPSS version 16 was used to generate descriptive frequencies.

RESULTS

Accessibility of Patients Charter

- The Patients Charter was not visibly displayed at any of the 3 clinics sampled

Patient Perceptions of the Charter

- All participants unanimously agreed on the value of the Patients Charter
- Women were familiar with the concepts of informed consent, right to information and right to treatment, but were not aware of responsibilities of patients and possible channels to report grievances
- The majority of responses (95.1%) pointed out that regarding treatment it was not right for women and their children to get medication from HCWs without being told about **"why"** they are taking the medication and **"how"** the medication works
- In practise, 70% of the women confirmed that HCWs are accommodating, some felt that at times services were **"imposed on them"** (n=14) implying that they get medication without an explanation as to why they should take it
- The majority of women (67.9%) would appreciate HIV positive women being given an option before initiation on life-long ART
- In order to improve adherence, 95.1% of women said medication should not be provided to patients without first explaining **why** they are getting ARVs and **how** they work

RESULTS continued

Perceptions of Health workers

- Health workers acknowledged patient's rights namely the right to choose what is best for them, in access to services, in deciding to get tested, privacy and confidentiality and the right to refuse or accept treatment
- The majority of the HCWs (80%) stated that a patient should be given the option of taking ART as this is perceived to improve adherence to treatment, yet some mentioned that patients should just follow the guidelines of the country
- There was also agreement that patients including children need to be told what medication they are taking and why they are taking it for them to be able to adhere to treatment



Figure 1. Cover of the Patients Charter

RECOMMENDATIONS

- MoHCC and other partners need to be conscious of the Patients Charter and support its application in programming
- Patient-provider relationships will be strengthened by giving patients more room to make decisions for their own treatment after giving them full information on the choices and options available to them
- This empowering process will lead to better retention into care and treatment and ultimately better outcomes for the children in the program

CONCLUSIONS

- There is an evident power imbalance between patients and health workers yet the success of the PMTCT program hinges on the understanding of patients of their own treatment plan
- HCWs demonstrated better understanding of the rights, statements of women indicate that they are not always applied in practise
- Clear channels of problem resolution need to be communicated to patients
- There is need for increased availability and awareness of the Patients Charter and its translation into action for better retention in HIV care and treatment

REFERENCES

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