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Issues around disclosure of HIV status of pregnant women to their partners and families: Implications for prevention of mother-to-child transmission in Manhiça, Mozambique

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Background: In Mozambique, HIV prevalence rates remain high. In Manhiça DSS area, community prevalence is 46% among adults and 29% among pregnant women attending Ante natal care (ANC). The quasi-mandatory HIV counseling and testing approach for pregnant women receiving ANC, makes this population group the top beneficiaries of this service. However, mother to child transmission (PMTCT) can only be sustained if women receive their partners and families' support, and disclosure of the test result is a first step. We are not aware of any study in Mozambique which has followed up pregnant women after the HIV test to understand the issues regarding disclosure of their serostatus. We aimed at understanding the socio-cultural and behavioural response to the HIV test result. Within the scope of this abstract, we aimed at describing if and how pregnant women disclose their HIV test results to their partners and how this impacts on partners' intention to receive HIV counselling and testing and adopt safe behaviours.

Methods: We carried out a qualitative study involving pregnant and puerperal women from Manhiça DSS area, Southern Mozambique. The information was obtained through 35 in-depth interviews, 12 focus group discussions and 6 observations at the ANC. Data analysis was performed by content analysis, using NVivo.

Results: In general pregnant woman disclose their HIV status to their partners, with no need to recur to third parties, such as nurses, to assist them in the communication of results. They feel an "obligation" to "report" their status to their partners regardless of the result. This "report" is required in order to obtain permission to receive care in case of an HIV-positive result. However, most of the women do not know their partners' HIV status, and very few invite their partners to be tested, due to fears of denial of a positive result, conformation to the fact that men dislike going to the hospital, and trust in partners discourse about their own status.

Conclusions: Although pregnant women in this setting have the positive initiative to reveal their HIV status to their partners, increasing their possibilities to seek treatment when needed, the gains in terms of prevention of vertical transmission can be lost due to their partners' lack of interest in knowing their own status. Partners' ignorance of their own status promotes unsafe sexual behaviours, and therefore the risk of infection and re-infection to pregnant women, and therefore of vertical transmission, remains. Health services should shift their approach towards reaching men of reproductive age as primary target groups for HIV counselling, testing, and information about the risks of vertical transmission.

Biography

Rui Anselmo Guilaze is a Junior Researcher affiliated to Manhiça Health Research Centre, and working at the Social Sciences Research Unit. She has obtained her BSc degree in Sociology in 2008 from Mozambican Eduardo Mondlane University, and has been working at the CISM's Social Sciences Department and currently she is working in Social Science Research Unit since 2007. Her current research activities focus on local perceptions of mother to child HIV transmission and local perceptions of causes of deaths. Her long term goal is to pursue a PhD and become a senior investigator in Social Sciences in the scope of Public Health, in the subject of Health Systems.

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