



POSTER PRESENTATION

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Increased antenatal HIV testing among rural pregnant women: a community-based HIV prevention services program in rural Maharashtra, India

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Background

To characterize changes in antenatal HIV testing utilization, six months after the introduction of a targeted HIV prevention and testing services intervention program.

Methods

Between August 2006 and April 2007, a community-based HIV prevention campaign and antenatal clinic-integrated voluntary HIV testing program was initiated in 52 villages in rural Aurangabad district, Maharashtra, India. Questionnaires assessing HIV risk factors and HIV testing utilization were administered to random cross-sectional community samples of 400 adult women who had given birth in the prior 12 months, at Baseline and, after six months, to 400 women each in the Post-Intervention and a separate Control community.

Results

During the study period, a total of 1200 recently-pregnant women were surveyed. Sociodemographic characteristics including >90% antenatal care utilization were similar for all sample groups. From Baseline to Post-Intervention, HIV testing facility awareness significantly increased (6% to 16%, $p < 0.05$) and independently correlated only with participation in the community-based campaign (AOR 2.1, 95%CI (1.3-3.5)). Antenatal HIV testing utilization increased (3.3% vs 7.5%, $p < 0.05$), and correlated with discussing HIV in antenatal care (AOR 10.2, 95%CI (4.7 - 22.4)) but did not vary with STI

symptom history. Of Post-Intervention women reporting antenatal HIV testing ($n = 30$), 43% sought testing at known voluntary HIV testing facilities, including Intervention clinics and the District-level hospital.

Discussion

The community- and clinic-integrated HIV prevention services program significantly raised women's HIV testing awareness and the number of clinic-integrated facilities for voluntary HIV testing, influencing increased community-level antenatal HIV testing utilization. In all rural communities, it is necessary for current antenatal services to identify and counsel the high-HIV risk subgroup of women with STI symptom history, and to ensure voluntary informed consent, for all clients.

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