



As little as one peer educator can increase acceptance of HIV testing in a PMTCT programme

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Issue

- HIV testing is an essential step in PMTCT
- Not all pregnant women agree to testing, and not all are offered testing
- A major barrier to expand testing has been insufficient staff to devote to HIV pre- and post-test counselling



Antenatal clinic peer educator

Description of Intervention

Lumumba Health Centre, Kisumu, Kenya

- Busiest municipal antenatal service in Kisumu, with 150 new antenatal clients per month
- At baseline, only 77% were agreeing to HIV testing
- In October 2005, FACES (Family AIDS Care and Education Services), a PEPFAR-funded HIV care and treatment program at Lumumba Health Centre, initiated a Peer Educator service for its patients

Role of FACES Peer Educators

- Provide orientation about clinic and services to new patients
- Facilitate HIV education sessions: transmission, disease progression, treatment, nutrition, prevention for positives, stigma, disclosure
- Provide medication adherence counselling and support

Selection criteria for Peer Educators

- “Positive” living: being open about having HIV, healthy living, healthy HIV treatment choices, etc.
- Ability to communicate with others in a caring and non-judgmental manner
- Knowledge about HIV disease, treatment and prevention
- Good clinic attendance record at FACES (i.e., understands the importance of adhering to care schedule)

The first Peer Educator selected by Lumumba Health Centre was a former PMTCT patient. She received an initial 4 days of training on Treatment Literacy conducted by Medecins Sans Frontieres Belgium, and FACES staff provide ongoing mentoring. The peer educator is compensated ~\$2.50 daily for her services.

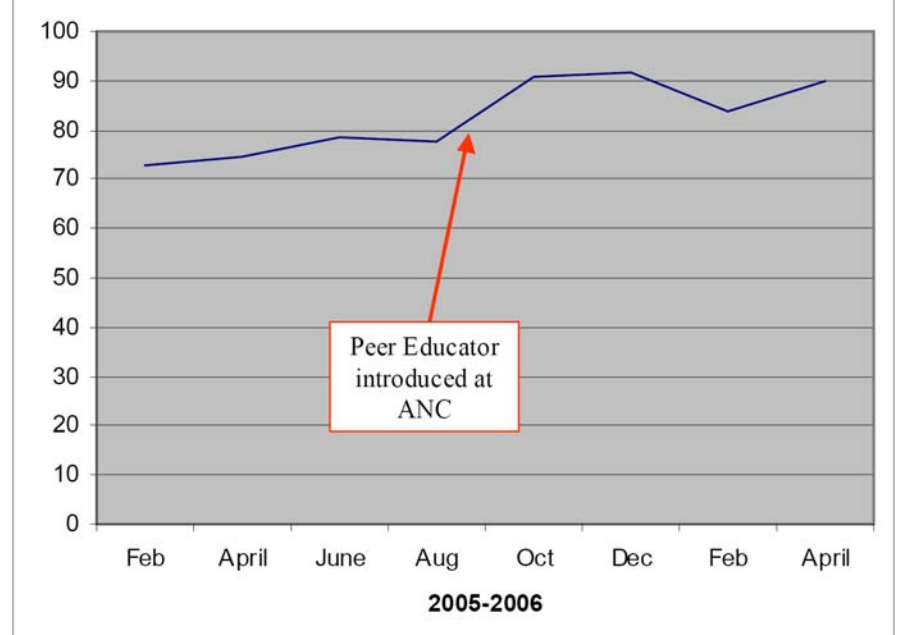
Role of the PMTCT Peer Educator

- Speak with all women presenting for antenatal care
- Share her personal testimony
- Explain the PMTCT process
- Discuss the benefits of involving the male partner in the process
- Respond to questions and concerns before the women see a PMTCT counsellor
- Facilitate a weekly support group for pregnant women
- Collect “locator” information for women who test positive so that they can be traced if they miss an appointment
- Escort patients to FACES clinic to make an appointment

Lessons Learned

- Due to the services provided by the Peer Educator, before seeing the PMTCT nurse-counsellor patients already understand the PMTCT process, the potential benefits of agreeing to HIV testing, and the majority of the other information to be discussed during pre-test counselling
- Lumumba’s PMTCT nurse-counsellor is now able to reach all antenatal clients due to the decreased time required for pre-test counselling, since patients are already familiar with the process
- HIV testing acceptance rate has increased to 89% (see Figure 1)
- Some women still do not agree to HIV testing because they want their husbands’ permission first
- Permission for testing from the husband is less likely to be granted if the husband does not attend any of the antenatal visits with the wife

Figure 1: Percentage of women agreeing to HIV testing at first antenatal clinic visit



Recommendations

- Peer educators should be incorporated into PMTCT programs
- Given that many HIV positive women are not employed, the stipend offered can be an important source of income for the peer educator and remains affordable at the programme level
- More attention to involving the male partner in PMTCT is needed to further improve HIV testing uptake