Utilization of HIV Testing and Counseling Services by Women with Disabilities during Antenatal Care in Uganda

Hussaini Zandam and Allie Mundis, Lurie Institute for Disability Policy

May 2022

Data from the 2016 Uganda Demographic and Health Survey indicate that pregnant women with disabilities in Uganda were less likely to receive HIV testing and counseling services than pregnant women without disabilities. The findings highlight a need to improve awareness of HIV risk among the disabled community and among healthcare providers, to increase access to HIV testing information and services for women with disabilities, and to improve communication of healthcare professionals with the disability community.

Introduction

This policy brief presents findings from the 2016 Uganda Demographic and Health Survey data on the utilization of HIV testing and counseling (HTC) services among pregnant women with disabilities in Uganda. The data indicate that pregnant women with disabilities are less likely to receive HTC services during antenatal care visits than pregnant women without disabilities. Government, nongovernmental organizations, and other

stakeholders should consider funding disability inclusive campaigns and targeting HIV prevention interventions to pregnant women with disabilities, antenatal care providers, and the disability community.

Background

Mother-to-child transmission (MTCT) of HIV infections is the leading cause of HIV among children in sub-Saharan Africa, with about 61 percent of new global infections in the last decade. Uganda, one of the countries with the largest number of people living with HIV, has scaled up HIV screening and prevention of MTCT by ensuring that pregnant women are tested for HIV and that those diagnosed are placed in treatment. However, there is a lack of evidence on the utilization of these services by women with disabilities, who have the highest risk of HIV infection among the disability community.

Methods

The Demographic and Health Survey is the largest source of key demographic, socioeconomic, and health data for Uganda. The study sample included 10,073 women who had at least one antenatal visit during their most recent pregnancy within the last five years. The study outcome variables were antenatal components of the HTC services, including the following: (1) receiving pre-test HIV counseling, (2) taking an HIV test and obtaining the result, and (3) receiving post-test HIV counseling. Additionally, we created a composite binary variable indicating receipt of all the HTC components mentioned above.

The figure below shows the likelihood of receiving any and all of the HTC services. Compared to women without disabilities, women with disabilities

are less likely to receive pre-test HIV counseling, HIV testing and test results, and post-test HIV counseling.

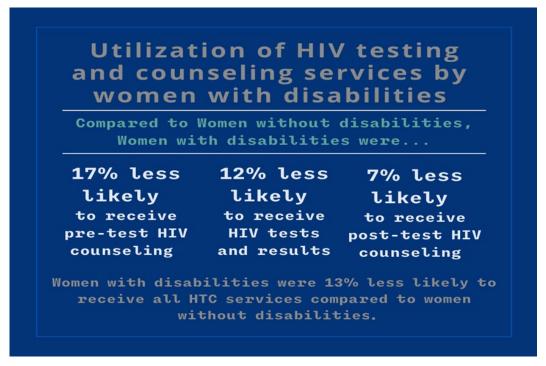


Figure 1. Likelihood among pregnant women with disabilities of receiving HTC services during antenatal care visits. See Appendix for accessible version.

The observed disparity in the utilization of HTC services among people with disabilities is likely the result of rooted negative assumptions about disability. These assumptions result in misconceptions about exposure to risk of HIV among people with disabilities. The fear of stigma may also be a factor that prevents people with disabilities from accessing HIV services, even when they consider that they may be HIV positive.

Conclusion

Pregnant women with disabilities are less likely to receive HTC services during antenatal care visits in Uganda. This finding highlights the need for improved disability risk awareness and training among healthcare providers, increased access to HIV information, counseling, and testing services among

4

women with disabilities, and improved communication, such as sign-

language interpreters at point of service.

Credit

Adapted from Zandam, H., Akobirshoev, I., Allyala, N., & Mitra, M. (2021).

Utilization of HIV testing and counselling services by women with

disabilities during antenatal care in Uganda: Analysis of 2016 demographic

and health survey. BMC Public Health, 21. https://doi.org/10.1186/s12889-

021-12045-4

How to cite this brief

Zandam, H. & Mundis, A. (2022). Utilization of HIV testing and counseling

services by women with disabilities during antenatal care in Uganda. Lurie

Institute for Disability Policy, Brandeis University, Waltham, MA.

Contact

Visit our website: lurie.brandeis.edu

"Like" us on Facebook: facebook.com/LurieInstitute

Follow us on Twitter: twitter.com/LurieInstitute

Or email us: <u>lurie@brandeis.edu</u>

References

1. Abuogi, L. L., Humphrey, J. M., Mpody, C., Yotebieng, M., Murnane, P. M.,

Clouse, K., Otieno, L., Cohen, C. R., & Wools-Kaloustian, K. (2018). Achieving

UNAIDS 90-90-90 targets for pregnant and postpartum women in sub-

Saharan Africa: Progress, gaps and research needs. *Journal of Virus*

Eradication, 4, Supplement 2, 33–39. https://doi.org/10.1016/s2055-6640(20)30343-5

- 2. Maheu-Giroux, M., Marsh, K., Doyle, C. M., Godin, A., Lanièce Delaunay, C., Johnson, L. F., Jahn, A., Abo, K., Mbofana, F., Boily, M.-C., Buckeridge, D. L., Hankins, C. A., & Eaton, J. W. (2019). National HIV testing and diagnosis coverage in sub-Saharan Africa: A new modeling tool for estimating the 'first 90' from program and survey data. *AIDS*, *33*, Supplement 3, S255–69. https://doi.org/10.1097/QAD.0000000000002386
- 3. Hanass-Hancock, J. (2020). Understanding the vulnerability of people with disabilities to HIV: Who is at risk? *EClinicalMedicine*, 25. https://doi.org/10.1016/j.eclinm.2020.100496
- 4. Uganda Bureau of Statistics (UBOS) and ICF. (2017). 2016 Uganda
 Demographic and Health Survey Key Findings. Kampala, Uganda, and
 Rockville, Maryland, USA.
 https://dhsprogram.com/methodology/survey/survey-display-504.cfm?
- 5. Abimanyi-Ochom, J., Mannan, H., Groce, N. E., & McVeigh, J. (2017). HIV/AIDS knowledge, attitudes and behaviour of persons with and without disabilities from the Uganda Demographic and Health Survey 2011. Differential access to HIV/AIDS information and services. *PLoS ONE, 4*(12), e0174877. https://doi.org/10.1371/journal.pone.0174877

Appendix

Utilization of HIV testing and counseling services by women with disabilities: Accessible version

Compared to women without disabilities, women with disabilities were...

• 17% less likely to receive pre-test HIV counseling;

- 12% less likely to receive HIV tests and results;
- 7% less likely to receive post-test HIV counseling.

Women with disabilities were 13% less likely to receive all HTC services compared to women without disabilities.