ORIGINAL ARTICLE

Status of family planning service integration for women in their reproductive age in chronic HIV care clinics in Dessie town, Ethiopia

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Abstract

Background: Integrating of family planning (FP) service in chronic HIV care clinics is an appropriate intervention to prevent newborns from acquiring HIV by enabling women who have the desire to prevent pregnancies.

Objective: To assess the level of FP service integration in chronic HIV care clinics in Dessie town, Ethiopia.

Methodology: A health facility based cross sectional study was conducted in 2011 in Dessie town, North East Ethiopia, among 401 HIV positive women in the reproductive age who attended chronic HIV care. Clinics. As well as program document review quantitative data were collected using structured questionnaire through clients exit interview method as well as program document review. Qualitative information was gathered from nine chronic HIV care providers and program managers.

Result: Three hundred ninety three (98%) HIV positive women who attended chronic HIV care had heard about one FP methods during the course of their care, of which 238 (60.5%) reported receiving counseling about FP. One hundred sixty eight

methods during the course of their care, of which 238 (60.5%) reported receiving counseling about FP. One hundred sixty eight (42.7%) of the respondents reported receiving condoms for FP purpose of which 108 (64.3%) were provided with condoms after being counseled for FP. Among respondents who ever heard about FP, 378 (96.2%) supported the idea of having FP services integrated in the chronic HIV care. Care provider's work load, level of FP training, lack of space and FP supplies were found to affect extent of service integration. Only 110 (27.9%) of respondents were provided with FP counseling and services during their chronic HIV care visits.

Conclusion: Although integration is supported by the health policy, and favored by clients and providers alike, the program environment and facility capacity (both human and logistics), were serious challenges for the integration of FP counseling and services in to the chronic HIV care (Ethiopian Journal of Reproductive Health, 2012,6(1): 14-21).

Key Words: Family planning; Integration; FP/HIV service Integration; HIV

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