

Uptake And Determinants of HIV Postnatal Retesting Among Postnatal Mothers In Amolatar District, Northern-Uganda

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Abstract

Introduction: HIV/AIDS remains a global health challenge, with sub-Saharan Africa bearing a disproportionate burden. In 2022, approximately 630,000 people died from AIDS-related illnesses worldwide. Postpartum HIV retesting can help identify new maternal HIV infections and prevent mother-to-child transmission (MTCT). Guidelines recommend retesting HIV negative postnatal women, but data on implementation are limited.

Objectives: The objective of the study was to determine the uptake and factors influencing postnatal HIV retesting among mothers who initially tested negative for the virus during their antenatal care at Amolatar HCIV in Amolatar district of Uganda.

Methodology: This was a descriptive facility-based cross-sectional study conducted using quantitative research methods. A total of 246 Study participants were selected through a systematic random sampling process. Data analysis was carried out using STAT version 15 for 97.6% (n=240) enrolled in the study with statistical significance set at 95% confidence level, and results were presented as narratives, charts and tables.

Results: Uptake of HIV postnatal retesting was at 77.5% (n=186) . Majority who retested did so at six months postnatal (62.4%, n=116), followed by 29.0% (n=54) at three months. A small percentage retested at nine months 5.4% (n=10), and 3.2% (n=6) fell into other categories. Unemployed women were significantly more likely to undergo postnatal HIV retesting compared to their employed counterparts (AOR=4.01, 95% CI: 1.73-9.25, p=0.001). Additionally, women with five or more children were less likely to retest for HIV postnatally compared to those with 14 children (AOR=0.32, 95% CI: 0.12-0.86, p=0.023).

Conclusion: The findings highlight a high retesting rate, indicating promising efforts to prevent MTCT. However, barriers exist, particularly for women with higher parity. The study recommends targeted education campaigns, support groups, and continued research to address these challenges, with a focus on engaging healthcare providers and policymakers to enhance program effectiveness.

Key words: Uptake, Determinants. HIV AIDs, Postnatal Retesting, Postnatal Mothers, AIDs related illnesses, mother to child transmission, Postpartum