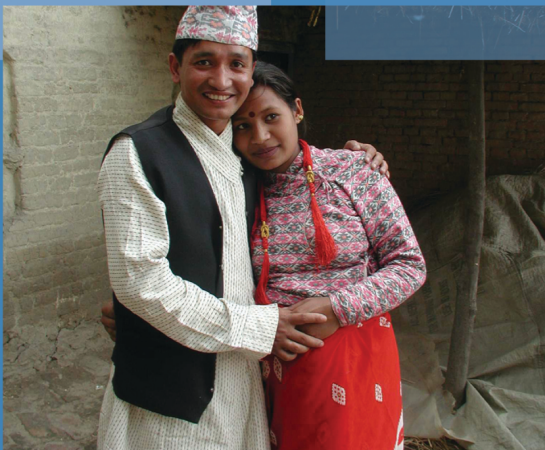


Male involvement in the prevention of mother-to-child transmission of HIV



Male involvement in the prevention of mother-to-child transmission of HIV



Acknowledgements

This paper was written by Eric Ramirez-Ferrero (WHO consultant) and its development and finalization was coordinated in UNAIDS by Karusa Kiragu and in the WHO Department of Reproductive Health and Research (RHR) by Manjula Lusti-Narasimhan. The paper was revised and updated after a Sub-regional consultation to discuss strengthening male involvement in the elimination of mother-to-child transmission of HIV held in Kigali, Rwanda from 24-26 August, 2011, hosted by the Ministry of Health, Rwanda (Meeting report: http://www.who.int/entity/reproductivehealth/topics/linkages/male_involvement_PMTCT.pdf).

The revised paper was further reviewed by and technical input was received from numerous colleagues in WHO/RHR and WHO/HIV and UNAIDS.

WHO Library Cataloguing-in-Publication Data

Male involvement in the prevention of mother-to-child transmission of HIV.

1.HIV infections – transmission. 2.Infectious disease transmission, Vertical – prevention and control. 3.Men. 4.Spouses. 5.Health knowledge, attitudes, practice. 6.Risk reduction behavior. 7.Africa South of the Sahara. I.World Health Organization.

ISBN 978 92 4 150367 9

(NLM classification: WC 503.3)

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« Printed by the WHO Document Production Services, Geneva, Switzerland

cover photos: top right clockwise- WHO, UNICEF, Photoshare, UNICEF

Contents

Abbreviations and acronyms	iv
Summary	v
Introduction	1
Rationale and background	1
Gender inequality and its impact on PMTCT	4
The benefits of men's engagement in PMTCT	5
What is the nature of men's current participation in PMTCT?	8
What are the barriers to men's participation in PMTCT?	9
The evidence base: moving towards gender-transformative programmes	12
How do we move towards gender-transformative programming?	
Suggested characteristics of male-involvement programmes in PMTCT	16
The question of relationship quality: the missing piece?	22
Methodological considerations, questions and resources	24
Issues for consideration	26
Gaps in knowledge and suggestions for further work	28
References	30

Abbreviations and acronyms

AIDS	acquired immunodeficiency syndrome
ANRS	National Agency for AIDS Research (France)
ART	antiretroviral therapy
AZT	azathioprine
CDC	Centers for Disease Control
CHAMPION	Channelling Men's Positive Involvement in the National HIV Response
CHTC	couples HIV testing and counselling
CI	confidence interval
COC	couple-oriented post-test HIV counselling
DALY	disability-adjusted life-year
GEM	Gender-Equitable Men (Scale)
HTC	HIV testing and counselling
HIV	human immunodeficiency virus
HPTN	HIV Prevention Trials Network
IDMT	Interdepartmental Management Team
IPV	intimate partner violence
JHHESA	Johns Hopkins Health and Education in South Africa
MDG	Millennium Development Goal
MTCT	mother-to-child transmission
NGO	nongovernmental organization
OR	odds ratio
PEPFAR	The US President's Emergency Plan for AIDS Relief
PMTCT	prevention of mother-to-child transmission
PPTCT	prevention of parent-to-child transmission of HIV
SANAC	South Africa National AIDS Council
SRH	sexual and reproductive health
STI	sexually transmitted infection
TB	tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VCT	voluntary counselling and testing
WHO	World Health Organization

Summary

In 2009, 370 000 children became infected with human immunodeficiency virus (HIV) globally. Nearly all of these children acquired HIV through mother-to-child transmission. Ninety per cent of them live in sub-Saharan Africa. The World Health Organization (WHO) and Joint United Nations Programme on HIV/AIDS (UNAIDS) guidance calls for a global response that is centred on, and responsive to, the realities of women's lives. Because there is ample evidence documenting the impact of men on the various components of prevention of mother-to-child transmission (PMTCT) programmes, male involvement has been recognized as a priority area of intervention within this woman-centred approach. An extensive review of the public health literature was conducted to assess the current level and nature of male involvement and to identify opportunities for the advancement of constructive male engagement in PMTCT. The geographic focus of this paper is on sub-Saharan Africa. This paper highlights the documented benefits of men's engagement in PMTCT of HIV, barriers to men's engagement, and promising strategies to involve men, as well as conceptual and methodological issues that merit further consideration and research. The paper reveals that despite overwhelmingly positive attitudes towards PMTCT programming among men, their engagement remains very low. Barriers to men's participation include fear of knowing one's status, stigma and discrimination. Perhaps the most significant obstacles are the conceptual and policy barriers that inadvertently support men's exclusion from PMTCT and other reproductive health services. The historic institutionalization of reproductive health as women's health has contributed to men's perception of clinic spaces as "women's spaces", and reproductive health as women's work, and has generally produced health services that are not welcoming of men and couples. This paper argues that to maximize the health outcomes of PMTCT for children, women and men, we must move beyond seeing men as simply "facilitating factors", to enable women to access health-care services but view them as constituent parts of reproductive health policy and practice. This paper demonstrates that men's constructive engagement can and does yield positive results for the health of women, children and families.

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