

## Sociocultural Factors of HIV Transmission During Delivery In India

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## Context

- **5.7 million** people living with HIV in India.
- Adult prevalence of HIV infection **0.92%**.
- **38.4%** of those living with the virus are women.
- Median HIV prevalence in ANC: **1%** (UNAIDS;2007)
- Many pregnant women do not know that they are HIV positive.
- At national level, less that 40% of women deliver in biomedical institutions (Govt of India; 2005)

## Objectives

• **Project:** "HIV Prevention of Mother to Child Transmission and delivery practices in South India: An anthropological approach" (April 2003 to April 2007)

• **Specific objectives:**

- Realize an ethnography of birthing practices
- Describe the role of various health practitioners

• **Which factors shape HIV MTCT in India and how ?**

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## Method

Ethnographical data collected in various places in urban and rural Tamil Nadu

• **Observations**

- **In depth interviews with**
  - 15 rural women
  - 3 Traditional Birth Attendants
  - 12 healthcare providers
  - 14 female patients in PMTCT and HAART

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## Results

Intricacy of factors that shape HIV MTCT.

- Gender inequalities & social construction of disease
- Social construction of risk
- Limited access to prevention and ART
- Delivery practices in hospital
- HIV PMTCT & home delivery practices

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### 1. Gender inequalities & social construction of disease

The social construction of gender shape:

Women access to PMTCT

- Women viewed as responsible for the disease.
- Gender inequality

HIV PMTCT strategies

- Women considered as responsible in the health system
- Decision power limited

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## 2. Social construction of risk

- Prevention measures difficult to adopt
- Health risk challenged by other risks
  - Social
  - Economical
  - Affective

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## 3. Limited access to health care

- Limited access to ARV treatment
- Limited access to HIV PMTCT
- Caregivers' social categorisations

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## 4. Delivery practices in hospital

- Lack of attention given to hygiene and obstetrical care
  - Focus on nevirapin tablet during delivery
  - No specific HIV PMTCT obstetrical procedure implemented
- Caregivers fear of HIV infection
  - During vaginal delivery
  - During Caesarean Section

## 5. HIV PMTCT & home delivery practices (I)

- Majority of home delivery
- TBA's Obstetrical practices
  - in favour of HIV MTCT
  - that decrease HIV MTCT
- Social context of home delivery

## 5. HIV PMTCT & home delivery practices (II)

- 16% of patients lost for follow up delivered at home
- No involvement of TBAs in HIV PMTCT in India

## Conclusion

- Social position devoted to women in society
  - Gender relationships
  - Health care access determinants
  - Professional attitudes in the context of Aids
  - Limited scope of HIV PMTCT strategies
- .....shape HIV MTCT rate

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