Prevention of Mother-to-child transmission of HIV in Estonia

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Background
The general aim of this study was to identify women’s contentment with health and social welfare services related to the prevention of the mother-to-child transmission of HIV, introduce possible hindrances and problem areas in their use, and propose recommendations in order to improve the services.

Methodology
In-depth interviews were conducted in Tallinn with 20 women with HIV, so as to study their experience with health services before and after giving birth. Among the participants were two women whose child was infected with HIV.

Results
Generally, the participants in this study were content with HIV related services as well as with the health and social services related to pregnancy, childbirth, and childhood. The main problem areas were considered to be the fee for a doctor’s visit, the availability of ARV-therapy only in one location, and long queues to gynaecologist’s reception. Reasons for delay in starting with ARV-therapy were doubts concerning the efficiency of the therapy and fear of side effects. Some women do not consistently use contraceptives for different reasons. Above all, lack of psychological help free of charge, both during and after pregnancy was missed. Women were especially grateful for having been provided with breast milk substitute free of charge. They also expressed wish for more support for diapers, children’s clothes, food for young children and leisure time activities for their children (hobby groups, theatre events, etc). All health care and support centres should have information on what kind of help and support are available and where to obtain them. Scarceness of information in Russian was particularly pointed out. All in all, the major problem in health services was considered to be disparaging and stigmatizing attitudes of health care professionals toward people with HIV. According to the experience of some of the interviewees, attitude and awareness has improved with years though.

Conclusions
The level of provision and integration of health services related to HIV, pregnancy, childbirth, and childhood in Tallinn are generally good; most of the necessary components are available. Above all, different forms of psycho-social support and addiction treatment for women with HIV with small children need further development. Among women with and at risk of HIV, information related to HIV and pregnancy, incl. information on existing services and possibilities for help, should be continuously spread, and the availability of contraceptives should be ensured too.
One of the most significant aspects is to improve cooperation and communication between different specialists and organisations, as well as improving the attitude toward people with HIV. As unawareness and prejudices related to HI-virus and drug addiction influence the quality of provided health services, continuous in-service trainings have to be organised for specialists of different fields.

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