Improving family planning uptake among HIV infected post-partum women in Ruiru SDH clinic

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BACKGROUND
About 60% of the HIV infected women of reproductive age have an unmet need for family planning. Long queues in MNCH clinics, lack of synchronization of ART and FP services, unavailability of FP commodities and lack of integration of FP services are some of the reasons that have contributed to the poor uptake.

OBJECTIVES
To increase uptake of FP services among HIV infected post-partum women

METHODOLOGY
To improve uptake of dual contraception, Ruiru SDH in partnership with CHS put in the strategies below:

• Established a synchronized ART and FP appointment system
• Conducted an OJT and mentorship on FP to PMTCT staff
• Provided FP commodities in the PMTCT room
• Conducted health education to the patients through the mentor mothers
• Ensured incorporation of FP messages into psychosocial support group sessions
• Conducted one-on-one mentorship on FP counseling

RESULTS
Ruiru SDH was able to increase uptake of dual contraception while reducing the use of single contraceptives.

CONCLUSIONS
To achieve virtual elimination of new child infections, PMTCT/ART programs must embrace strategies that will increase uptake of FP among HIV infected WRA to 90%, hence reduce the unmet FP need to Zero.

The challenges experienced were the Inability to provide long term methods in the PMTCT room and clients’ refusal to use FP.