

# MALE INVOLVEMENT IN PREVENTION OF MOTHER TO CHILD TRANSMISSION OF HIV/AIDS SERVICES AMONG MARRIED MEN IN KYAIKMARAW TOWNSHIP, MON STATE, MYANMAR

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**ABSTRACT:** The cross sectional descriptive study was collected in Kyaikmaraw Township, Mon State, Myanmar. Two hundred and fifty two married men of age (15-60) asked by using structure interview questionnaire. The objectives of the study are 1) To assess the knowledge about HIV/AIDS and perception (2) to find out the involvement of male in prevention of mother to child transmission of HIV/AIDS services utilization. Among married men age from (15 to 60) years, minimum age was 17 years and maximum age was 52 years with a mean age of 31.9 years, 52% of respondents were (25-35) years old and most of the respondents were secondary school and high school. About 44% are working in labor farm, 71% answer that they are not enough money for monthly expenses but no debt. More than two third had (1-3) children and the percentage of male involvement in PMCT were 27.4% in accompany for counseling of PMCT with wife, 36% in discuss about PMCT services with wife respectively. There are significant associations between education at p-value 0.058, occupation at p-value 0.006, number of children p-value 0.04, and level of knowledge at p-value 0.021 and discuss with wife about PMCT services. Besides this, in the perceived susceptibility there was an association between HIV/AIDS can transmit via infected wife at p-value 0.01 and can get infection from receiving blood of infected donor's blood at p-value 0.003 and perceived barriers of "worried for confidential" at p-value 0.03. But there was no association between independent variables and accompany for counseling of PMCT services with wife.

**Keywords:** Prevention of mother to child transmission of HIV/AIDS, Male involvement, Married men, kyaikmaraw Township, Mon State, Myanmar.

**INTRODUCTION:** HIV/AIDS is an unprecedented public health problem facing the entire world. To achieve the millennium development goals reducing child motility, improve maternal health, combat HIV/AIDS took place in vital role. Vertical Transmission of HIV from mother-to-child account for the vast majority of the infections among the children. According to the global data of Human Immunodeficiency Virus there was an estimated 33.4 million people living with HIV, 2.0 million people died due to Acquire Immune Deficiency Syndrome (AIDS) of them 420, 000 cases are children under 15 years old (WHO, 2007)<sup>1</sup>. Myanmar is facing serious epidemic an estimated number of people (all ages) living with HIV, 2007 (thousands) was 370 (UNICEF, at a glance Myanmar, 2007)<sup>2</sup>. An estimated number of death due to AIDS during 2007 are 24,000

(UNAIDS, WHO, 2008) and estimated percentage of HIV cases that occur among (age 15-49) by the end of 2007 is 42%<sup>3</sup>. Moreover, estimated number of women (aged 15+) living with HIV was 100 (thousand), (UNICEF, at a glance Myanmar, 2007) and an estimated number of HIV positive pregnant women is 52%. According to the yearend evaluation of community base PMCT project in Pakhoteku, Myanmar, the majority utilization of PMCT service was pregnant mothers (89%) and participation of male involvement was very weak (35%), (Save the Children Report, 2008)<sup>4</sup>. Men's involvement and participation in PMCT should be the new focus for the program as well as other reproductive health program because men are strong decision makers on reproductive health issues. **METHODS:** The study was quantitative cross sectional

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descriptive study among married men in kyaikmaraw township, Mon State, Myanmar. Two hundred and fifty seven married men were face-to-face interviewed using structured interview form in Burmese language after requesting informed consent verbally. Data was analyzed by SPSS software.

**RESULTS:** Among 252 married men age from 15 to 60 years, minimum age was 17 years and maximum age was 52 years with a mean age of 31.9 years, (52%) of respondents were 25-35 years old and most of the respondents were secondary school and high school (p value =0.058). About 44% are working in labor farm (p value=0.006), 71% answer that they are not enough money for monthly expenses but no debt. More than two third had 1-3 children at (pvalue-0.04), less than one third of respondents had more than 3 children. About 75% of respondents have the experiences of 1-3 times of pregnancies (Table 1)

**Table 1** Dependent variable and discuss with wife about PMCT services

Independent variables	Discuss with wife about PMCT services		Total	P-value
	Yes n (%)	No n (%)		
<b>Education</b>				
Primary school and below	14(24.6)	43/75.4	57	0.05
Secondary school	36(36.4)	63/63.6	99	
High school and above	42(43.8)	54/56.2	96	
<b>Occupation</b>				
Unemployed and others	4(21.1)	15/78.9	19	0.00
Government employee	6(54.5)	5/45.5	11	
Employee in private business	39(52.0)	36/48.0	75	
Own business	10(28.6)	25/71.4	35	
<b>Number of children</b>				
1-3 children	82(41.4)	116/58.6	198	0.04
More than 3 children	9(23.7)	29/76.3	38	
<b>Perceived susceptibility</b>				
If my wife is HIV infected, I can be infected by her				
Agree	90(39.3)	139/60.7	229	0.01
Uncertain	0(0)	12	12	
Disagree	2(18.2)	9/81.8	11	
<b>Perceived barriers</b>				
Worry for confidential				
Agree	65(40.4)	96/59.6	161	0.03
Uncertain	25(34.7)	47/65.3	72	
Disagree	2(10.5)	17/89.5	19	

To assess respondent's current knowledge of HIV transmission, of the respondents knew about transmission of HIV from positive mother to unborn baby and (92%) of the respondents knew that using condom cannot prevent Mother to Child transmission and (90%) of respondents identified HIV status can know my testing blood. Respondents (79%) knew pregnant women with HIV/AIDS can transmit to child. (80%) knew transmission cannot prevent by vaccine and (50%) knew HIV cannot transmit by touching. Most of the respondents (80%) did not know "Partner is not responsible for seeking information about PMCT services". About (79%) did not know HIV can transmit by needle sharing and breast feeding can transmit mother to child. It was found there was an association between knowledge and discuss with wife about PMCT services at pvalue-0.021. Among 252 married men, most of the respondents 79% had poor level of knowledge, 16.7% of respondents had moderate level of knowledge and a few respondents 4.4% had good level of knowledge.

About (72.6%) of the respondents answer "No" while asking about "Accompany for counseling of PMCT with wife". About (36.5%) were discussing with about PMCT services. After analyzing of these two questions, there was less male involvement in PMCT services (Table 2).

**Table 2** Male involvement PMCT services among married men

Male involvement in PMCT services	N (%)
<b>Accompany for counseling of PMCT with wife</b>	
Yes	69 ( 27.4)
No	183 ( 72.6)
<b>Discuss about PMCT services with wife</b>	
Yes	92 ( 36.5)
No	160 (63.5)

After analyzing with dependent variables and discuss with wife about PMCT services, there was an significant association between education (pvalue=0.05), occupation (pvalue=0.00), number of children (pvalue=0.04), perceived susceptibility (pvalue=0.01) and perceived barriers (pvalue=0.03) and discuss with wife about PMCT services.

**DISCUSSION:** In the analyzing of discuss with wife about PMCT services, the education level, the vast number of respondents was about one third were in the high school and above educational level (i.e. 43.8% in high school and above). Higher rate of respondents who discuss with wife about PMCT services were found in high school and above. It was concluded that the higher the level of education, the more disuses about PMCT services with wife. It was found that most of the respondents work in private business (52.0%) and there was association between occupation and discusses about PMCT services with wife. A study on "Voluntary HIV counseling and testing among men in rural Western Uganda" study by Hutchinson and colleagues in Eastern Cape, found that the major barriers to VCT use among men were poor utilization of VCT services due to poor access, stigma and confidentiality of services<sup>5</sup>.

In number of children, the large amount of respondents who discusses about PMCT services were respondents who had 1-3 children (41.4%) and there was significantly association between number of children and discuss with wife about PMCT services. In the levels of knowledge amongst respondents, 79.4% of the respondents know that a pregnant woman with HIV/AIDS can transmit HIV to her baby. The majority of the respondents preventive measure of

HIV/AIDS such as "HIV/AIDS can be prevented by using condom properly during sex about (92.5%)". Very few of the respondents know about "A woman with HIV/AIDS can transmit HIV to her baby through breastfeeding (20.6%)", "Using condom during sex cannot prevent mother to child transmission of HIV (13.1 %)" and "A partner is not responsible for seeking information about PMCT services if the wife is pregnant (19%)". According to the knowledge level of in this study, most of the respondent had poor level of knowledge even though their education level is secondary school, high school and above. In poor level of knowledge there were association between level of knowledge and discuss with wife about PMCT services with wife. In a study among young Myanmar male workers on HIV preventive behavior there was no significant association between knowledge about HIV/AIDS and condom use<sup>6</sup>. In terms of the findings, there were association between perceived susceptibility and discuss with wife about PMCT services. The findings revealed that the majority of the respondents in the category of being agree in "I am afraid that health care providers will not keep the results of our HIV test confidential". Among them the respondents who discuss with wife about PMCT services were (40.4%). There was an association between perceived benefits of utilization of mother to child transmission of HIV/AIDS. A study in Malai found that the majority of counseling and testing clients were motivated by perceptions of being at risk of HIV infection<sup>7</sup>. A study in rural community of northern Nigeria found that one of the reasons for rejection of VCT included fear of stigma<sup>8</sup>. PMCT project in Pakhoteku, Myanmar, the majority utilization of PMCT service was

pregnant mothers(89%) and participation of male involvement was very weak(35%), (Save the Children Report, 2008).

**RECOMMEDATION:** Base in the above findings, the following recommendation can be made for improving men's involvement in PMCT. To increase their knowledge and awareness about PMCT, information about the program should be given to all men an in particular to those in a relationship with women in reproductive age. There is a need to adopt a comprehensive approach to reach men through health education. For further research, a quantitative research should be done on the level of men's involvement PMCT.

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