

**FACTORS AFFECTING UTILIZATION OF POST-EXPOSURE PROPHYLAXIS
OF HIV/AIDS AMONG HEALTH CARE PERSONNEL**

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ABSTRACT

This research was aimed at understanding the factors that influence utilization of Post Exposure Prophylaxis (PEP) of HIV among Health Care Personnel (HCP) after occupational exposure. It was done because in Uganda, more than half (55%) of HCP are on a daily basis exposed to HIV mainly through needle stick injuries. The study objectives included the following: (1) To evaluate the effect of counseling on the utilization of PEP services, (2) to investigate HCP's knowledge of the procedures, steps and drugs used in PEP, (3) to investigate HCP's general attitudes and practices towards PEP, and, (4) to identify which cadres are mainly affected and to estimate the prevalence of the exposures among the cadres.

The research was cross-sectional in nature and employed both qualitative and quantitative methods, whereby data was collected from 359 Health Care Personnel from four major hospitals in Kampala district. The Ministry Of Health, health facilities inventory (2004) was used to ensure division representativeness. Simple random sampling and proportional allocation were used in sample selection and analysis was done at univariate, bivariate and multivariate levels. The binary logistic regression model was fitted at multivariate level.

Results indicated that PEP utilization was influenced by qualification/cadre of HCP, income, education, department/ward/unit where Health Care Personnel works, knowledge of dosage, costs involved and type of exposure that HCP was

exposed to. The results also indicated that in spite of the fact that more than three quarters (76.2%) of HCP had had at least one exposure to potentially infectious blood and other body fluids, less than half (41%) had utilized PEP services. It was also observed that the majority, 84.9% were aware that Post Exposure Prophylaxis reduces the transmission rate of HIV; however, more than two-thirds (66.3%) were not aware of how long PEP should continue after initiation.

It was observed from the results that to improve on the utilization of PEP, there is need for results-prompt-prevention and training to be precisely focused and efficiently devised. There is also need to motivate hospital administrators and directors to increase their will and commitment towards advocating for increased budgeting for PEP services. Decentralization of laboratory investigations, counseling and other Post Exposure Prophylaxis services should also be effected in all hospitals and health units.