|  |  |
| --- | --- |
|  | ASSESSING HEALTH SYSTEM FACTORS INFLUENCING HEALTHCARE PROVIDERS’ IMPLEMENTATION OF NEW GUIDELINES (OPTION B+) ON MOTHER TO CHILD TRANSMISSION OF HIV IN GHANA. IMPLICATION FOR POLICY. |
|  | Authors:   Laar AS and Dalinjong PA  1 Kybele/Program for Appropriate Technology in Health (PATH), Greater Accra Region.  2 Navrongo Health Research Centre, Navrongo, Upper East Region, Ghana  **Abstract**  **Background:** Option B+” is a World Health Organization-recommended approach to prevent mother-to-child HIV transmission whereby all HIV-positive pregnant and lactating women initiate lifelong antiretroviral therapy (ART). Prevention of Mother To Child Transmission (PMTCT) guidelines in Ghana requires all pregnant HIV-infected women be provided with a cascade of interventions including routine antenatal HIV counseling and testing, provision of appropriate antiretroviral/treatment (ARV/ART) regimen for mothers and newborns, and support for safer infant feeding options and practices. The potential of PMTCT guidelines for eliminating Mother-to-Child Transmission (MTCT) of HIV and improving newborn survival and health is widely acknowledged in Ghana. However, factors influencing health providers’ implementation of the new guidelines (Option B+) have not yet been fully explored. This study assessed health system factors affecting the provision of PMTCT services and the implications on quality service delivery.  **Methods & Materials:** Qualitative research design was employed. Data was obtained through in-depth-interviews with 7 Key informants and 2 Focus Group Discussions with health care providers providing PMTCT services in an urban hospital in Ghana. Data was analyzed using a thematic framework approach.  **Results:**  A good knowledge and understanding of MTCT and PMTCT counseling guidelines by health providers were widespread. However, individual and health-systems factors such as lack of vehicles for monitoring and follow-ups on patients, inadequate supply of ARV drugs, lack of refresher training for health providers, inadequate medical officers, inadequate work-space, lack of privacy, lack of nursing staff and counselors, poor staff relationship with clients and lack of training on compassionate care for health providers were identified as some of the impeding factors affecting PMTCT service provision.  **Conclusion:**  Option B+ holds great promise for improving the lives and health of HIV-infected women and their children. Programs seeking to increase access to PMTCT services and continued use of ART need to address individual and contextual factors to make the elimination of MTCT of HIV more effective.  **Key Words**: prevention of mother-to –child transmission of HIV, Option B+, Health Providers, Health System, Ghana. |