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## **EVALUATING THE BENEFITS OF INCORPORATING TRADITIONAL BIRTH ATTENDANTS IN PMTCT SERVICE DELIVERY IN LILONGWE SEMI-URBAN DISTRICT**

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**BACKGROUND:** The use of traditional birth attendants (TBAs) is common in the African context. In settings of high HIV prevalence, many HIV positive women may deliver with a TBA thus preventing an opportunity for prevention of mother to child transmission (PMTCT). We developed a curriculum for TBAs related to PMTCT and evolving roles of TBA in Malawi, conducted training, distributed delivery kits and supervised the TBAs monthly.

**METHODS:** We conducted focus group discussions in July 2008 (3 months post training) with 13 TBAs from the catchment area of 2 health centres. TBAs were assessed on their willingness, incentives and barriers to participate in PMTCT activities as trained. Additionally, TBA delivery logs were reviewed to confirm understanding of PMTCT documentation and referral practices.

**RESULTS:** From March 2008 to Jan 2009, trained TBAs provided services to a total of 1,707 women, of whom, 134 (7.9%) women were known to be HIV positive and 65 (48.5%) women received nevirapine for PMTCT. 28/65 (20.9%) HIV exposed infants took nevirapine. 1,574 (92.2 %) women were referred to health facilities pre or post delivery. TBAs reported improved knowledge on HIV/AIDS. Frequency of safe deliveries increased due to access to delivery kits. HIV positive women were identified using antenatal cards as evidenced by documentation in TBA logs. Issues hindering success include lack of transport for the delivering mother; lack of sustainable source of income influencing TBAs to continue conducting deliveries; non-disclosure of status by HIV positive women; inability to determine whether nevirapine is taken and inability to tell if referred women reach health facilities or not.

**CONCLUSIONS:** TBAs can supplement efforts to provide PMTCT services in communities if properly trained and supervised. Provision of transport would allow HIV positive women to deliver in health facilities. There is need to devise a proper mechanism to track referrals from TBAs to health facilities.



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