



Acceptance of HIV Testing for Children Ages 18 Months to 13 Years Identified Through Voluntary, Home-Based HIV Counseling and Testing in Western Kenya

[Login \(/login\)](#)

- [IUPUI ScholarWorks Repository](#)
- →
- [School of Medicine](#)
- →
- [Department of Pediatrics](#)
- →
- [Department of Pediatrics Works](#)
- →
- [View Item](#)

Acceptance of HIV Testing for Children Ages 18 Months to 13 Years Identified Through Voluntary, Home-Based HIV Counseling and Testing in Western Kenya

[Vreeman, Rachel C.](#); [Nyandiko, Winstone M.](#); [Braitstein, Paula](#); [Were, Martin C.](#); [Ayaya, Samwel O.](#); [Ndege, Samson K.](#); [Wiehe, Sarah E.](#)



Name: vreeman-2010-acce ...

Size: 216.8Kb

Format: PDF

[View/Open](#)

Permanent Link: <http://hdl.handle.net/1805/4266>

Date: 2010-10

Keywords: [HIV](#); [pediatrics](#); [home-based testing](#); [Western Kenya](#)

Cite As: Vreeman, R. C., Nyandiko, W. M., Braitstein, P., Were, M. C., Ayaya, S. O., Ndege, S. K., & Wiehe, S. E. (2010). Acceptance of HIV testing for children ages 18 months to 13 years identified through voluntary, home-based HIV counseling and testing in western Kenya. *Journal of acquired immune deficiency syndromes (1999)*, 55(2), e3.

Abstract:

Background Home-based, voluntary counseling and testing (HCT) presents a novel approach to early diagnosis. We sought to describe uptake of pediatric HIV testing, associated factors, and HIV prevalence among children offered HCT in Kenya. **Methods** The USAID-AMPATH Partnership conducted HCT in western Kenya in 2008. Children 18 months to 13 years were offered HCT if their mother was known to be dead, her living status was unknown, mother was HIV-infected or of unknown HIV status. This retrospective analysis describes the cohort of children encountered and tested. **Results** HCT was offered to 2,289 children and accepted for 1,294 (57%). Children were more likely to be tested if more information was

available about a suspected or confirmed maternal HIV-infection (for HIV-infected, living mothers OR=3.20, 95% CI: 1.64–6.23), if parents were not in household (OR=1.50, 95% CI: 1.40–1.63), if they were grandchildren of head of household (OR=4.02, 95% CI: 3.06–5.28), or if their father was not in household (OR=1.41, 95% CI: 1.24–1.56). Of the eligible children tested, 60 (4.6%) were HIV-infected. Conclusions HCT provides an opportunity to identify HIV among high-risk children; however, acceptance of HCT for children was limited. Further investigation is needed to identify and overcome barriers to testing uptake.

This item appears in the following Collection(s)

- [Department of Medicine Articles \(/handle/1805/4121\)](/handle/1805/4121)
- [Sarah Wiehe \(/handle/1805/6823\)](/handle/1805/6823)
- [Department of Pediatrics Works \(/handle/1805/4112\)](/handle/1805/4112)



[Show Statistical Information \(#\)](#)

My Account

- [Login](#)
- [Register](#)

Statistics

- [Most Popular Items](#)
- [Statistics by Country](#)
- [Most Popular Authors](#)

[About Us \(/page/about\)](/page/about) | [Contact Us \(/contact\)](/contact) | [Send Feedback \(/feedback\)](/feedback)

[_\(/htmlmap\)](/htmlmap)

FULFILLING *the* PROMISE

[Privacy Notice \(http://ulib.iupui.edu/privacy_notice\)](http://ulib.iupui.edu/privacy_notice)



Copyright (<http://www.iu.edu/copyright/index.shtml>) ©2015

The Trustees of Indiana University (<http://www.iu.edu/>),

Copyright Complaints (<http://www.iu.edu/copyright/complaints.shtml>)