

Introduction: Worldwide, it is estimated that over 90% of HIV-infected individuals are still unaware of their HIV status. Surveys in sub-Saharan Africa have shown that a median of just 12% of men and 10% of women had been tested for HIV and received the results. HIV prevalence in Uganda is higher among women (8.3%) than men (6.1%), it also increases with age until it peaks at age 35-39 for women (12%) and at age 40-44 for men (11%). Many Ugandans do not know their HIV status, despite the routine promotion of VCT. This indicates that there are many missed opportunities, as a large number of clients leave the hospital without HCT.

Objective: To explore factors associated with uptake of provider initiated HIV counseling and testing among adult patients attending the outpatient department of Mukono health center IV.

Methods: This was a cross section study conducted in Mukono health center IV employing qualitative method of data collection. A total of 368 adults were interviewed. Open and closed ended questionnaires were used. Data was coded and entered in Epi data version 3.1 then analyzed using Stata version 12 soft ware. Univariate analysis was carried, bivariate and multivariate analysis was done to find out associations between the independent and the dependent variables. Odds ratios, chi-square and p values were used to determine association at 95% Confidence Interval. Permission for carrying out research was obtained from the hospital administration, consent and confidentiality of the respondents was also thought.

Results: The study showed that 27.2% of the patients were initiated by the health care provider to take up an HIV test and 72.8% tested by other factors. 4.1% of the respondents had tested in less than three months and 97% of the respondents would recommend another person to take up an HIV test. In analysis, the factors which were associated with uptake of provider initiated counseling and testing were; mobility (OR= 2.29, CI =1.214-4.322, p=0.010), distance to testing site (OR=0.34, CI =0.168- 0.696, p=0.003) and type of counseling (OR= 0.40, CI= 0.185-0.865, p=0.02).

Conclusions: Majority of the respondents had been tested for HIV, provider initiated HIV counseling and testing knowledge and awareness was low although many respondents knew about healthy facility testing and would prefer to be tested at a health facility. Factors that were associated

with uptake included distance to the testing site, mobility and accessibility to testing site and type of counseling administered. However, if respondents were initiated by health care provider to take up an HIV test majority would prevent themselves if found negative and access treatment and care if found positive.

Recommendations: The district health team should inform and educate the community using the local media to increase awareness of the service and offer community outreach services to those who are far from the health facility. It should also train village health teams and have refresher courses to counselors on PICT to enable them offer the service. Community members should encourage peers to go for testing in health facilities.