

The Impact of HIV/AIDS on Fertility in Sub-Saharan Africa

Protocol for Systematic Review

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Background:

- **HIV/AIDS pandemic:**

- 40 million people currently infected worldwide.

- about 6 out of 10 new infections are in women

- 5000 women are infected with HIV daily.

- 90% of them in developing countries.

- in Sub-Saharan Africa, 13 women for every 10 infected men.

- 70% of the HIV/AIDS cases in Sub-Saharan Africa.

Background:

- **HIV/AIDS effect:**

- increased morbidity rates.
- higher infant, child and adult mortality.
- dropping life expectancy.
- changing the demographic structure.

Background:

- **HIV/AIDS and Fertility:**

HIV/AIDS influence fertility through proximate determinants, namely; marriage, contraceptives, pregnancy, abortion, breastfeeding, postpartum abstinence and natural fecundity.

Mechanisms for Possible Impacts of HIV/AIDS on Fertility:

Proximate Determinants of Fertility	Possible Mechanism for Impact	Possible Effect on Fertility
Marriage	<ul style="list-style-type: none"> - Delayed marriage or non-marriage - Delayed onset of sexual relations - Reduced premarital sexual relations - Increased divorce - Increased widowhood - Reduced remarriage 	<ul style="list-style-type: none"> - Negative - Negative - Negative - Negative - Negative - Negative
Contraception	<ul style="list-style-type: none"> - Smaller desired family size - Larger desired family size - Increased condom use - Switching condom 	<ul style="list-style-type: none"> - Negative - Positive - Negative - Positive
Pregnancy and Abortion	<ul style="list-style-type: none"> - Reduced pregnancy rates - Increased induced/spontaneous abortion 	<ul style="list-style-type: none"> - Negative - Negative
Breastfeeding and Postpartum abstinence	<ul style="list-style-type: none"> - Reduction in breastfeeding to avoid mother-to-child HIV transmission - Reduction in postpartum abstinence - Reduction in breastfeeding and postpartum abstinence due to increased infant mortality 	<ul style="list-style-type: none"> - Positive - Positive - Positive
Natural Fecundity	<ul style="list-style-type: none"> - Increased foetal mortality - Reduced frequency of sexual intercourse 	<ul style="list-style-type: none"> - Negative - Negative

Background:

- Fertility was lower among HIV-infected women than HIV-uninfected women.
- 0.37% fertility decline for each percentage point of HIV prevalence in Uganda.
- Reduction of 700,000 births in Uganda as a result of reduced fertility in HIV-infected women

Objective:

To review evidence for the effect of HIV/AIDS on fertility in Sub-Saharan Africa.

Methods:

- **Types of studies:**

The review will include cross-sectional and cohort studies that examined the effect of HIV/AIDS on fertility through the approximate determinants of fertility.

- **Type of Participants:**

Women at reproductive age (WRA).

Methods:

Outcome Measures:

- Total fertility rate (TFR),
- Crude birth rate (CBR),
- Contraceptives prevalence rate (CPR).
- Percentage of reduction in fertility for each percentage point of HIV prevalence.

Methods:

- **Search strategy:**

- Database search (Cochrane database for systematic review, Medline, UNAIDS, AEGIS, WHO, Google, and POPLINE).
- Web sites of professional associations, research centers, and universities.
- Manual search.

Methods:

Inclusion criteria:

- Studies conducted between 1990-2005,
- Studies examined the association between HIV/AIDS and fertility through approximate determinants of fertility,
- Cross-sectional and cohort studies,
- Social and demographic studies,
- Studies reported in English.

Exclusion criteria:

- Studies conducted before 1990,
- Studies with no date,
- Clinical trials,

Methods:

- **Key words for search:**

The key words for searching are fertility and HIV/AIDS, HIV-infected women and pregnancy, Sub-Saharan Africa.

Methods:

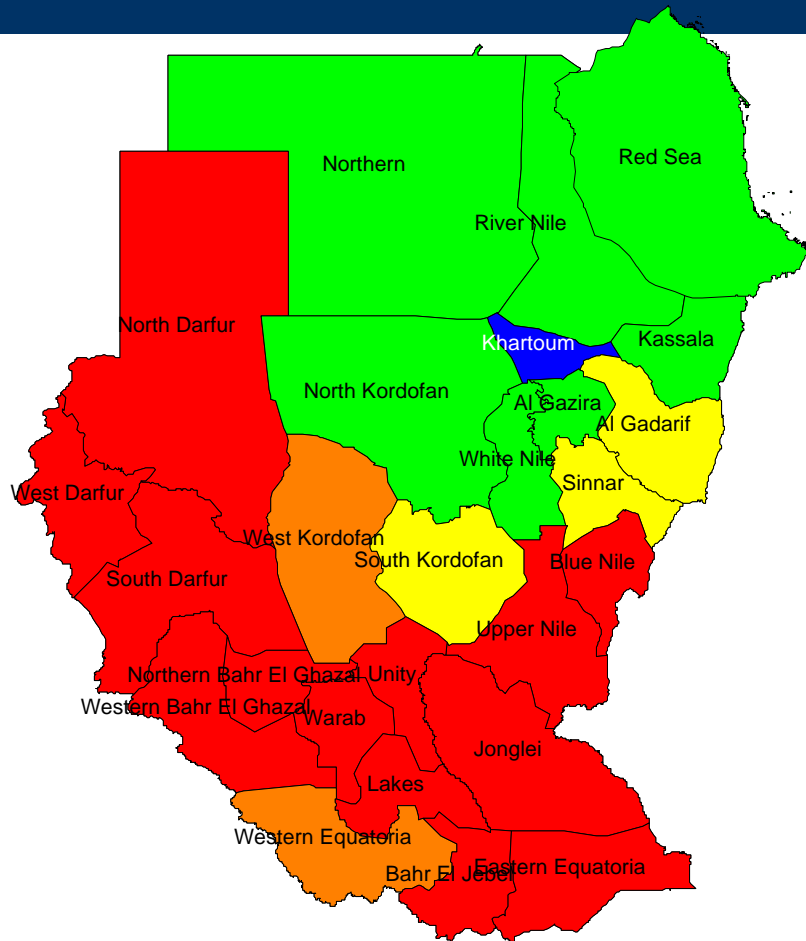
Data collection, analysis and description of the studies:

- Comparative results will be collected and extracted according to the selection criteria.
- Extraction form will be developed to summarize information on title of the study, author, country, period of the study, sample size, methodology, type of the study, and the outcome measures.

Time Frame:

The systematic review will be done in accordance to the following time frame:

- First two months, searching for published studies
- Third month, testing of inclusion criteria
- Fourth month, extraction of data from research reports
- Fifth month, data analysis
- Sixth and seventh month, preparation of the report.



THANKS