

Pediatric primary care provider practices, knowledge, and attitudes of human immunodeficiency virus screening among adolescents

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OBJECTIVES: To evaluate pediatric primary care provider (PCP) HIV screening practices, knowledge, and attitudes.

STUDY DESIGN: Anonymous cross-sectional, internet-based survey of pediatric PCPs from 29 primary care practices. Survey items assessed current HIV screening practices and knowledge, attitudes, and perceived barriers towards screening. Provider demographics and practice characteristics were analyzed for associations with screening through logistic regression.

RESULTS: Of 190 PCPs, there were 101 evaluable responses (response rate: 53.2%). PCPs reported a screening rate for HIV of 39.6% ("most" or "all of the time") during routine adolescent visits compared with violence (60.4%), substance abuse (92.1%), and depression (94.1%) ($P < .001$). Less than 10% of PCPs correctly answered questions related to Centers for Disease Control and Prevention and state HIV screening recommendations. Of 20 potential HIV screening barriers assessed, mean number of reported barriers was 4.8 ($SD \pm 2.9$); with most concerns related to confidentiality, time for counseling, and follow-up. In a multivariable model, the only factor significantly associated with HIV screening "most" or "all of the time" during routine adolescent visits was urban practice site (aOR 9.8, 95% CI 2.9, 32.9). Provider type, sex, years since training, HIV screening guideline knowledge, and endorsing ≤ 5 barriers were not associated with HIV screening.

CONCLUSIONS: Although providers practicing in urban areas were more likely to report screening adolescents for HIV than those in suburban areas, overall self-reported screening rates were low, and several barriers were identified commonly. Future interventions should target increasing providers' knowledge and addressing concerns about confidentiality, requirements and counseling time, and follow-up of results.

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