

TITLE

The influence of masculinity on HIVST community intervention: a qualitative evaluation of empirical evidence from Blantyre, Malawi

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Background: For HIV, population surveys and cohort outcomes show men to have a higher risk of undiagnosed disease than women, and higher risk of death following diagnosis. Here we report findings from an HIV self-testing (HIV ST) study with relevance to other chronic conditions, including TB. HIVST addresses barriers associated with traditional models of providing HIV testing, giving notably high male participation. We examined the role of masculinity on HIVST decisions and subsequent actions amongst couples in urban Blantyre.

Methods: Sixty seven self-tested participants were interviewed at baseline, 49 at first follow-up (3-5 months) and 50 at second follow-up (12-15 months). Content analysis was used to interpret study findings.

Results: Conception of masculinity dictated men's actions and prescribed specific behavioral attributes, namely having control, knowledge, strength and toughness, and both sexual and economic productivity. The mandate of constant economic provision prevented men living a hand-to-mouth existence from testing with their partners, as they were not at home when HIV ST was offered. Notions of men as all-knowing could promote denial of positive HIV ST results, with men allowed to question their authenticity especially when their partner had tested negative. Even when positive HIV ST results were believed, notions of strength and resilience, combined with the relentless demands of their household provider role, dissuaded men from promptly seeking HIV care, as they felt no urgency to act when healthy. Notions of sexual productivity encouraged men to insist unprotected sex irrespective of their own or their partner's HIV status.

Conclusions: The social construction of masculinity, which includes relentless pressure to earn in this impoverished urban setting, restricted the potential benefits of early HIV care and prevention, even within established couples. Community HIV strategies need to explicitly account for the obstacles and barriers linked to masculinity to have full impact.