

Abstract Preview - Step 3/4

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Abstract category: D12 Uptake of HIV testing

Title: Persuaded HIV self-testing during community-based distribution of self-test kits: a population-based survey and nested qualitative study in Zimbabwe

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Text: **Background:** HIV self-testing (HIVST) enables novel implementation strategies that can carry unintended consequences. While introducing HIVST to rural Zimbabwe through community-based distribution, we investigated "persuaded-testing" (feeling unable to refuse a test kit). **Methods:** Trained community volunteers (CV) in 38 rural wards offered HIVST kits door-to-door to individuals aged ≥ 16 years old. A representative population-based survey 6-8 weeks after kit distribution included questions about persuaded-testing. Predictors of persuaded-testing were investigated using multivariable logistic regression, with random effects for wards and households. 26 in-depth interviews, and 15 audio-diaries were held with CV and 31 in-depth interviews and 16 focus group discussions with community members to explore views on HIVST, with data analysed thematically. **Results:** Of 3,724 survey participants receiving self-test kits, 1,061 (28.5%, 95%CI 27.1-30.0) reported persuaded-testing, with men (33.2%), young people < 25 years (48.5%), apostolic faith (30.7%) and better educated at highest risk (figure).

| Factor | N (%) | Persuaded number (%) | Unadjusted OR (95% CI) | p | Adjusted OR (95% CI) | p |
|----------------------------|--------------|----------------------|------------------------|--------|----------------------|---------|
| Male | 1,336 (35.9) | 444 (33.2) | 1 | | 1 | |
| Female | 2,388 (64.1) | 617 (25.8) | 0.69 (0.58-0.81) | <0.001 | 0.82 (0.68-0.99) | 0.04 |
| Age ≥ 25 years | 2,740 (73.8) | 586 (21.4) | 1 | | 1 | |
| Age <25 years | 973 (26.2) | 472 (48.5) | 4.20 (3.43-5.15) | <0.001 | 3.22 (2.52-4.13) | <0.001 |
| Married | 2,392 (64.2) | 645 (27.0) | 1 | | 1 | |
| Never married | 723 (19.4) | 322 (44.5) | 2.67 (2.15-3.31) | <0.001 | 1.02 (0.77-1.34) | 0.002 |
| Widowed/separated/divorced | 609 (16.4) | 94 (15.4) | 0.46 (0.35-0.61) | | 0.60 (0.45-0.80) | |
| Not of apostolic religion | 2,385 (64.0) | 650 (27.5) | 1 | | 1 | |
| Apostolic religion | 1,339 (36.0) | 411 (30.7) | 1.21 (1.02-1.44) | 0.03 | 1.33 (1.10-1.61) | 0.003 |
| None/primary education | 1,504 (40.4) | 249 (16.6) | 1 | | 1 | |
| Some secondary education | 1,014 (27.2) | 375 (37.0) | 3.36 (2.69-4.20) | <0.001 | 2.46 (1.95-3.10) | <0.0001 |
| Ordinary level & above | 1,206 (32.4) | 437 (36.2) | 3.34 (2.67-4.17) | | 2.43 (1.93-3.07) | |

[Factors associated with persuaded-testing [all factors in final multivariable model]]

Most persuaded (68.5%) and other self-testers (61.9%, $p < 0.001$) had previously tested for HIV. Persuading was by spouses ($n=517$), parents/caregivers ($n=272$) and CV ($n=122$) -multiple responses possible. Non-use of HIVST kits was 7.7% for persuaded-testers and 2.0% for other self-testers ($p < 0.001$). Only 37/3,593 (1%) self-testers perceived adverse consequences, including 12 persuaded-testers. However, irrespective of HIV status ($p=0.67$), 87/984 (8.8%) of persuaded-testers regretted testing.

In qualitative interviews/focus groups women openly admitted pressuring their partners; CVs corroborated this. Offering HIVST to young people in the presence of caregivers affected both acceptance and refusal of kits.

Conclusions:

Persuaded acceptance of HIVST kits was common among kit recipients in rural Zimbabwe, especially in groups with traditionally low uptake of HIV testing. Once accepted most kits were used, but with some regrets. While some encouragement may be welcome and have individual/public health benefits, couples need clear messages to avoid over-pressuring partners. For adolescents, HIVST may need to be offered in absence of caregivers.

Country of research: Zimbabwe

Key and vulnerable populations: People living with HIV , Young women and girls (15-24) , Young men and boys (15-24)

Ethical research declaration: Yes

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Working on TB? No
Working on HBV and/or HCV? No
Working on HIV and/or HBV cure? No

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 Back