Secondary Distribution of HIV Self-testing among Malawian Men: A Qualitative Study Exploring Perceptions, Experiences and its Influence on Masculinity in Blantyre, Malawi

Sibande Wakumanya1, Kumwenda Moses2, Choko Augustine3, Nyirenda Gabriel3, Johnson Cheryl4, Hatzold Karin5, Corbett Elizabeth3,6, Desmond Nicola2,7

1Malawi-Liverpool-Wellcome Trust Clinical Research Programme, Behavior and Health, Chichiri - Blantyre, Malawi, 2Malawi-Liverpool-Wellcome Trust Clinical Research Programme, Behavior and Health, Blantyre, Malawi, 3Malawi-Liverpool-Wellcome Trust Clinical Research Programme, HIV and TB, Blantyre, Malawi, 4World Health Organization, Gineva, Switzerland, 5Population Services International, Washington DC, United States, 6London School of Hygiene and Tropical Medicine, London, United Kingdom, 7Liverpool School of Tropical Medicine, Liverpool, United Kingdom

Background: In Sub-Saharan Africa (SSA), nearly half of the population that is living with HIV is not aware of their status. This has prompted the need for novel approaches to HIV testing and various community-based HIV counselling and testing approaches have proved to increase HIV testing uptake. However, despite the positive strides by these approaches, some segments of the population such as men still remain a challenge for uptake. HIV self-testing (HIVST) has proved to be one of the novel approaches to increase uptake of HIV testing. Challenging the potential of increase in access to HIV testing is the low uptake of HIV testing and poor linkage to care among men compared to women. Secondary distribution of HIVST has potential to increase access to HIV testing and linkage among men.

To explore experiences, perceptions and its influence on masculinity, a qualitative study was conducted within the ANC Cluster Randomized trial of secondary distribution of HIVST being implemented in southern Malawi.

Methods: A qualitative design was used to understand experiences and perceptions of secondary distribution of HIV Self-testing and its influence on masculinity. Respondents were both conveniently and purposively sampled in areas where secondary distribution of HIVST was being carried out. In-depth Interviews (n=45) were conducted with men who received HIVST kits. Female partners (n=15) who initiate secondary distribution were also interviewed. Data collection was carried out in an iterative way where research questions were reviewed after every set of interviews to develop deeper research questions. Data analysis employed a thematic approach, using pre-determined and emerging themes from an iterative approach of data collection and analysis.

Results: (To have finished data collection and analysis and have new findings by Conference dates):HIV self-test kits offered to men by their pregnant partners may undermine men’s decision making power and their domestic position. Most women powerless and struggle to convince their male partners to accept the HIVST kits because of their disempowered economic position.

Conclusions and Recommendations: Secondary distribution can accelerate reaching populations that do not access HIV testing services such as men. However, female partners that distribute the kits need to be well inducted to provide accurate information to their partners since this contributed to their partner’s decision to accept the kits or not.