

COMMUNICATING HIV STATUS IN SEXUAL INTERACTIONS: ASSESSING SOCIAL COGNITIVE CONSTRUCTS, SITUATIONAL FACTORS, AND INDIVIDUAL CHARACTERISTICS AMONG SOUTH AFRICAN MSM

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KEY MESSAGES

- HIV communication skills should be promoted to help increase the likelihood that sexual partners communicate about HIV status.
- HIV prevention programs should also target situational factors when promoting HIV prevention behaviors, including communicating about sexual partners' HIV status.
- A more comprehensive understanding of the processes of communication about sexual partners' HIV status and its relationship to safer sex behavior is needed.

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INTRODUCTION

- Communicating HIV status among sexual partners is an important component of safer sex behavior that remains incompletely understood.
- The current study looked at communicating one's HIV status prior to the last sexual encounter (LSE) among men who have sex with men (MSM) in South Africa.
- The current study aimed to answer the following research questions:
 1. Are constructs from a social cognitive behavioral model able to predict partners' communication about their HIV status prior to a sexual encounter?
 2. Can we explain in which situational contexts sexual partners are most likely to communicate their HIV status?
 3. Are there individual characteristics that also allow us to understand if communicating one's HIV status is more likely to occur?
 4. Is partners' communication about one's HIV status associated with safer sex?

METHODS

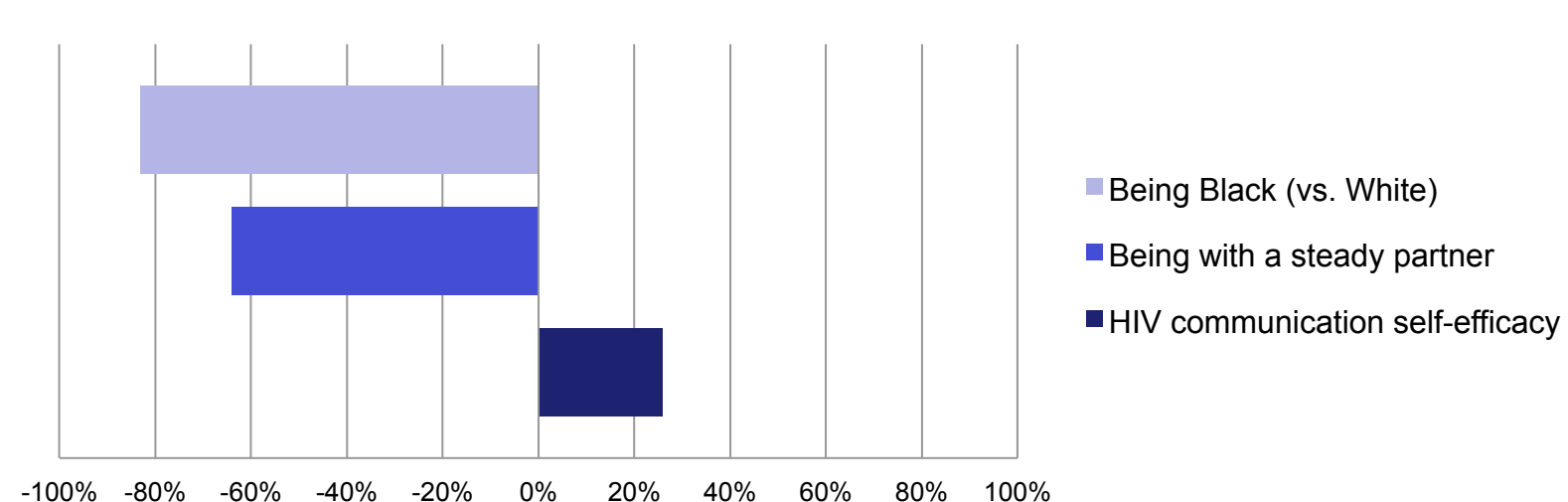
- Computer-assisted self-interviewing was conducted in various settings in Tshwane/Pretoria.
- All men (N = 300) reported having had sex with at least one man in the preceding year.
- Mean age 26.1 years (range 18-40).
- One third of participants were White; two thirds were Black; half lived in townships.
- Bivariate analyses were run to assess associations between: 1) social cognitive constructs; 2) situational factors; and 3) individual characteristics and communication of HIV status.
- All predictors significant at $P < .10$ were included in staged multiple logistic regression models.
- Subsequent analyses were run to assess association between communicating HIV status and unprotected anal intercourse (UAI).

RESULTS

- 59% of MSM reported that they or their partner had communicated their HIV status prior to the LSE.
- Bivariately ($P < .10$), communicating HIV status was positively (+) and negatively (-) associated with the following:

Social Cognitive Constructs	Individual Characteristics
■ HIV communication intentions (+)	■ Being Black (vs. White) (-)
■ HIV communication self-efficacy (+)	■ Township resident (-)
Situational Factors	■ High income (+)
■ Being with a steady partner (-)	■ Employed (+)
■ Respondent was receptive partner (-)	■ Tested for HIV in the past year (+)
■ Alcohol or drug use prior to LSE (-)	■ Femininity (-)
■ Sex occurred in a public place (-)	

Percent Change in Likelihood of Communication of HIV Status



Multivariate Predictors of Communication of HIV Status	AOR (95% CI)
HIV communication self-efficacy	1.26 (1.04 – 1.54)
Being with a steady partner	0.36 (0.19 – 0.67)
Being Black (vs. White)	0.17 (0.07 – 0.44)

Communicating partners' HIV status and sexual risk behavior:

- UAI occurred with similar frequency in encounters where partners communicated about HIV status compared to encounters where they did not (67% vs. 67%, $P = .91$).
- In situations where HIV status was communicated (n=168), UAI occurred at similar frequencies in encounters where partners communicated that they were seroconcordant compared to encounters where they were serodiscordant (64% vs. 71%, $P = .33$).

CONCLUSIONS

- HIV communication self-efficacy increases men's likelihood of communicating one's HIV status.
- Being with a steady partner and being Black reduces the likelihood of communicating one's HIV status.
- Communicating about one's HIV status did not imply that sex was safer.

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