

HIV Testing and Stigma among Black South African MSM

Tim Lane¹, James McIntyre², Steve Morin¹

¹Center for AIDS Prevention Studies, Univ. of California, San Francisco, USA; ²Perinatal HIV Research Unit, Chris Hani-Baragwanath Hospital, University of the Witwatersrand, Johannesburg, S. Africa



“Schoolmaster” Vusi Skhosana presenting the findings of the Gauteng MSM Study to community participants in Atteridgeville, Tshwane

Background

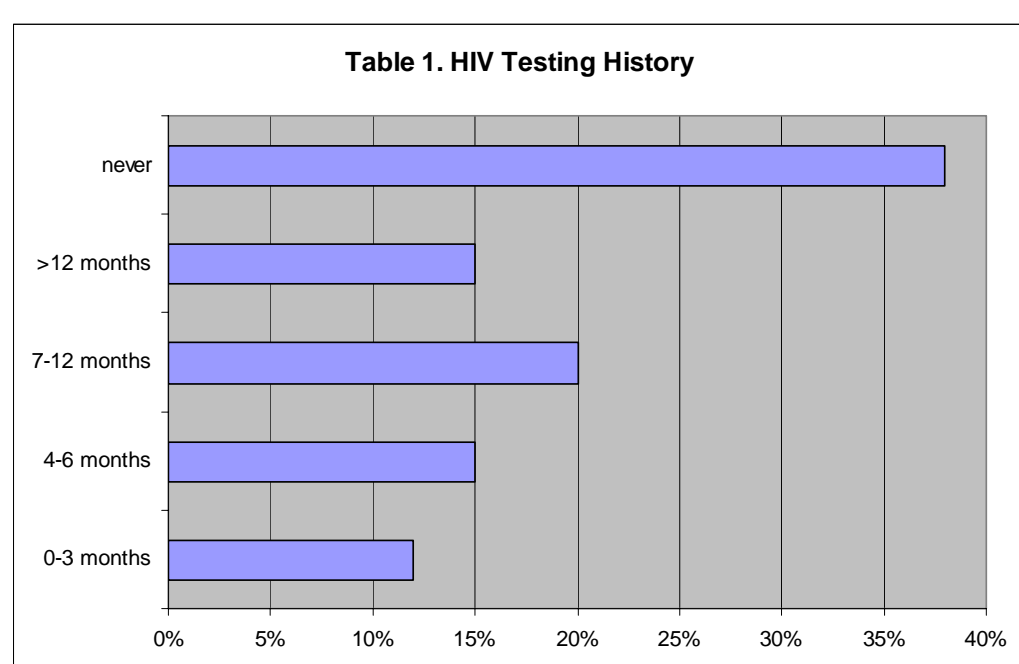
Although HIV voluntary counseling and testing (VCT) services are widely available in urban public health clinics in South Africa, little is known about the attitudes of men who have sex with men (MSM) towards VCT. Anecdotal evidence has suggested that Black MSM do not test regularly and may be reluctant to access available VCT services.

Objectives

- To describe MSM’s HIV testing history and characteristics of tested and untested men
- To assess MSM attitudes towards HIV VCT and identify potential barriers to HIV testing

Methods

- Between October 2004 and March 2005, four male peer outreach workers (3 gay, 1 straight) recruited 199 men through snowball sampling in the Gauteng townships of Soweto, Mamelodi, Atteridgeville, and Soshanguve, as well as in the Braamfontein, Hillbrow, and Yeoville areas of central Johannesburg.
- Men were eligible to participate in the study if they were over the age of 18 and had ever had sex (defined as manual, oral, or anal) with another man.
- Participants were recruited at a variety of venues where gay men and MSM socialized, including lesbian-gay-bisexual-transgender community-based organizations; religious organizations; bars, taverns, and nightclubs; and private social gatherings in the homes of gay-identified community members. Participants also recruited a limited number of members of their social and sexual networks into the sample.
- Participants completed a 93-item standardized questionnaire, administered by one of two interviewers (1 man, 1 woman). Survey questions asked about alcohol and drug use, sexual behaviors and partners, condom and lubricant use, HIV knowledge, attitudes, and beliefs, and HIV testing history.
- Men who had never tested and men who self-disclosed an HIV-negative result from their last test responded to an 11-item Likert scale adapted from the CDC HIV Testing Questions (CHTQ) risk assessment.



Results

- A majority of men (61%) had ever tested; however, only 27% had tested within the last six months (Table 1).
- Untested men were significantly more likely to report more than 3 partners in the last six months (OR 1.9, 95% CI 1.0-3.6, p=0.05), but significantly less likely to report condom failure (OR 0.5, 95% CI 0.2-0.9, p=0.03). They were also less likely to report inconsistent condom use, but the difference was not significant (OR 0.6, 95% CI 0.3-1.1, p=0.08).
- Significantly more untested men than tested men agreed that they were at risk for HIV infection (78% and 60%, p=0.01); majorities of both groups agreed that they did not like needles, but the difference was not significant (51% and 52%, p=0.9).
- A majority of untested men, and almost half of tested men, feared the result of an HIV test (71% and 42%, p<0.001).
- On average, untested men scored significantly higher on the adapted CHTQ than men who had tested, and significant differences were observed in each group’s mean scores on individual scale items (See Table 2). However:
 - on average, both untested and tested men disagreed with or were neutral towards most items.
 - on average, untested men tended to agree that they were afraid of an HIV positive test result, and its consequences.
- A majority of men (61%) intended to test for HIV within the next six months; however, 24% of non-testers did not intend to test and 24% were not sure; among testers, 24% did not intend to re-test in the next six months, and 9% were not sure.

Table 2. Gauteng MSM Study adapted CHTQ scale

Question	mean score (SD)		t
	nontesters	testers	
“You are not at risk for HIV infection”	2.5 (1.3)	2.7 (1.4)	-1.298
“It is unlikely that you have been exposed to HIV (since your last test)”	2.8 (1.4)	3.0 (1.4)	-0.645
“You are afraid that the clinic staff will make fun of you”	2.3 (1.4)	1.6 (1.1)	3.844***
“You are afraid the clinic staff will tell you it is wrong to have sex with men.”	2.2 (1.4)	1.8 (1.3)	1.975*
“You don’t like needles”	3.1 (1.4)	3.2 (1.3)	-0.610
“You don’t trust the results to be true”	2.4 (1.3)	2.0 (1.1)	2.455*
“You don’t trust the results to be confidential”	2.9 (1.4)	2.5 (1.4)	1.938
“You are afraid of the results”	3.9 (1.3)	2.9 (1.5)	4.904***
“You are afraid of losing your job, housing, family, or friends if you are HIV positive”	2.8 (1.6)	2.1 (1.3)	2.545*
“You do not know where to get tested”	1.3 (0.7)	1.4 (0.8)	-1.032
“You cannot afford to get tested”	1.4 (0.9)	1.4 (0.8)	0.429

*Pr (|T| > |t|) < 0.05; **Pr (|T| > |t|) < 0.01; ***Pr (|T| > |t|) < 0.001

Conclusions

- Low proportions of men who had tested in the last six months suggests that South African MSM may not test regularly for HIV
- The most highly sexually active MSM may be avoiding testing.
- The proportion of MSM with accurate knowledge of their HIV-status may be low.
- Structural barriers to HIV testing, such as not knowing where to test or not being able to afford to test, appear not to influence decisions not to test.
- The fear of being stigmatized as gay and HIV-positive appears to be a powerful among untested men, and may operate as a significant deterrent to HIV testing.
- Strategies to increase VCT uptake and provide post-test support to Black MSM communities are needed.

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Simply Blue, Braamfontein

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