

Couples-Based Voluntary Counseling and Testing and HIV Prevention in South Africa

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Project Description

This project has two primary aims:

1. Identify barriers and facilitators for heterosexual couples pertaining to utilizing couples-based voluntary counseling and testing (CBVCT) in Soweto, South Africa
2. Identify relationship-based predictors of HIV risk behavior in couples (e.g., communication, intimacy, commitment, etc.).

The study is comprised of two phases. The first phase was qualitative in nature, and focused on obtaining information from men and women regarding their relationships and their perceptions and attitudes about couples-based testing for HIV. Both individual interviews and focus groups were conducted (N=48, 16 couples in individual interviews and eight couples in focus groups). Data collection was completed for this phase in February of 2006.

The second phase was a cross-sectional quantitative study of predictors of HIV risk behavior and of utilizing couples-based testing among a sample of 220 couples. The survey included questions about relationship dynamics, such as trust and communication, as well as social norms regarding HIV testing. This project finished data collection in December of 2008. The research is based at the Chris Hani Baragwanath Hospital and the Perinatal HIV Research Unit at the University of the Witwatersrand in Johannesburg, South Africa.

Significance

Although South Africa is one of the countries most impacted by the HIV epidemic, very few studies have examined HIV from a couples-based perspective. There is little to no information about how couples may communicate about sexual issues (e.g., outside partners) and how CBVCT is perceived by the community. In addition, few studies have examined relationship dynamics as predictors of HIV risk behavior in this setting.

Interesting Findings

- We found that for a majority of participants (both male and female) relationship factors were the primary motivation for participating in couples-based voluntary counseling and testing for HIV.
- The reasons fell into several themes, including:
 - Issues pertaining to development and deepening of relationships
 - CBVCT as a necessary precursor to key relationship markers such as getting married or having children
 - CBVCT facilitated establishment of trust in relationships
- We found it more difficult than we had anticipated to recruit couples from the Soweto community, as some people reported a reluctance to come to the clinic for research. This could be attributed to such factors as child care and work responsibilities as couples had to schedule time to come in together.
- However, once couples were recruited and completed their participation, all evaluated their participation positively and commented that they believed a focus on couples' issues and on relationship was important in the context of HIV for the Soweto community

Project End Date: June 2009