Improving the quality of sexual and reproductive health and rights (SRHR) through pre-service training, research, and evidence-based clinical care delivery in Sub-Saharan Africa



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HIV status disclosure to male sexual partners and predictors among young women living with HIV in semi-rural Uganda: a cross-sectional study.

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Background:

In 2020, in sub-Saharan Africa, 25% of new human immunodeficiency virus (HIV) infections occurred among young women aged 15-24 years. Specifically, in Uganda, the HIV prevalence is three times higher among young women aged 15-24 years at 2.9% compared to 0.8% among their male counterparts. HIV status disclosure is a gateway to the preventive health services. We set out to estimate the prevalence of HIV status disclosure to current male sexual partners before the first sexual intercourse, and the predictors among the adolescent girls and young women living with HIV (AGYWLHIV) in a semi-rural northern Uganda.

Methods

In a cross-sectional study design, a consecutive sample of the AGYWLHIV was recruited from six antiretroviral therapy clinics between November 2022 and April 2023. Participants were administered an interviewer-guided questionnaire. They were specifically asked whether they have ever disclosed their HIV status to their current male sexual partners. They were also asked about their socio-demographics, sexual and reproductive health profiles, knowledge and perceptions of dual protection methods, and safer conception methods for AGYWLHIV. The Statistical Package for Social Sciences (SPSS) 26 was the software used for the statistical analysis. Percentages to estimate prevalence, Chi-square tests to assess associations, simple and multivariate modified Poisson regression to identify predictors were conducted. Statistical significance was set at p < 0.05 and 95% confidence intervals (CI) were considered.

Results

Overall, 423 participants with a median age of 22 (IQR 4.0) years participated in the study. The prevalence of HIV status disclosure to the current male sexual partners before the first sexual intercourse was found at 73.3% (95% CI 69.0-77.5). The prevalence of disclosure of the HIV status of the current male sexual partners to the young women living with HIV was 64.5% (95% CI 59.9-69.0). The prevalence of two-way disclosure of HIV status was 54.4% (95% CI 49.6-59.1) among the couples. The predictors for HIV status disclosure were found to include the women's knowledge of their HIV status (APR 1.1 (95% CI 1.0-1.2), p 0.032), knowledge of their male partner's HIV status (APR 0.8 (95% CI 0.7-0.9), p 0.003), and the male sexual partners' disclosure of their HIV status to the women (APR 0.7 (95% CI 0.5-0.9), p <0.016).

Conclusions

About three-fourths of the AGYWLHIV in semi-rural northern Uganda disclosed their HIV status to their current male sexual partners before their first sexual intercourse. The predictors of disclosure included the women's knowledge of their HIV status, knowledge of their current male sexual partner's HIV status, and the current male sexual partner's reciprocal disclosure of their HIV status. To enhance HIV disclosure rates, knowledge of HIV status should be enhanced among a couples through post-test, and disclosure counseling for both individuals and couples is recommended as part of the routine HIV testing, treatment, and care programs. Future studies should consider using the disclosure process model should to allow investigations into the HIV status disclosure decision-making process, events, mediators, and outcomes. Furthermore, future studies on the motivations for HIV status disclosure preferably using qualitative approaches are also highly recommended.

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