SUBSTANCE USE AND HIV RISK AMONG HIV INFECTED AND UNINFECTED VOLUNTARY COUNSELLING AND

TESTING (VCT) CLIENTS IN GERT SIBANDE DISTRICT, SOUTH AFRICA

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4th South African AIDS Conference, 31 March - 3 April 2009, Durban

BACKGROUND

Substance use can contribute to unsafe sexual activities and as a result to new HIV infections. It reduces people's commitment to practice safer sex. This paper assesses substance use and HIV risk among HIV infected and uninfected VCT clients in Gert Sibande district, South Africa.

METHODS

The study included a cross-sectional sample of 300 HIV negative and 300 HIV positive clients recruited and interviewed consecutively after post-test counselling from 20 VCT sites in the Albert Luthuli sub-district, Mpumalanga.

ANALYSIS

Data was captured and analysed descriptively and analytically using SPSS version 16.0. Risk measures were calculated and compared between concerned variables (See table 2).

RESULTS

The study participants were mainly women (70.1%), aged 26-35 years (26.1%), 21-25 (21.4%), and most (71.5%) had secondary education, mostly Black (98.8%), mostly unmarried (83.2%) and unemployed (72.2%).

Table 1: HIV risk by sex of VCT clients

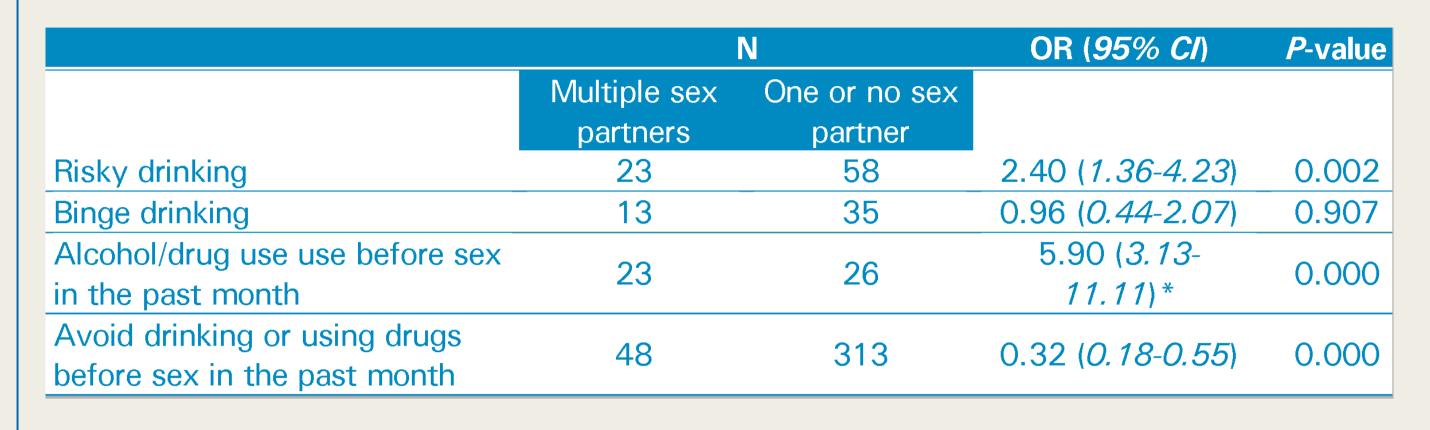
	Total	Male			Female		
	N	%	N	%	N	%	
Risky drinking	101	17.7	57	33.3	44	11.0	
Binge drinking in the past month	60	30.9	34	40.5	26	23.6	
I avoided drinking or using drugs before sex in the past month	467	80.4	124	71.3	343	84.3	
Use of alcohol or drugs before sex in the past month	56	11.5	40	27.8	16	4.7	
Multiple sex partners (two or more partners in the past 3 months)	74	16.7	43	32.6	31	10.0	
Non-Condom use at last sex	280	57 .9	83	57.6	197	57.9	

Among 412 women (70.1%) and 176 men (29.9%), 17.7% engaged in risky drinking, binge drinking in the past month (30.9%), 11.5% used alcohol or drugs before sex in the past month, 16.7% had multiple sex partners (in the past 3 months), and 57.9% admitted to non-condom use at last sex. Male VCT clients engaged in more risky drinking and risky sex than female clients.

Table 2: Risk measures between HIV status; condom-use at last sex; multiple sexual partners; and Substance Use

	N		OR (<i>95% CI</i>)	<i>P</i> -value
	HIV+	HIV-		
Risky drinking	47	54	0.84 (<i>0.55-1.29</i>)	0.432
Binge drinking	27	33	0.91 (0.49-1.67)	0.752
Alcohol/drug use before sex in the past month	36	20	1.83 (<i>1.02-3.25)</i>	0.039
Avoid drinking or using drugs before sex in the past month	224	251	0.63 (<i>0.42-0.95</i>)	0.028
	Condom use	Non-condom		
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Risky drinking	25	30	0.88 (0.55-1.41)	0.558
Binge drinking	31	22	1.36 (<i>0.71-2.62</i>)	0.352
Alcohol/drug use before sex in the past month	47	39	0.58 (0.33-1.02)	0.058
Avoid drinking or using drugs before sex in the past month	243	158	2.08 (<i>1.30-3.33</i>)	0.002





* Insufficient data

HIV positive clients are more likely to use alcohol/drugs before sex in the past month, while HIV negative clients were more likely to avoid alcohol/drugs before sex in the past month.

VCT clients who used alcohol/drug before sex were less likely to use condoms, while those who avoided alcohol/drugs before sex were more likely to use condoms at their last sex. Risky drinking and binge drinking were associated with neither HIV status nor condom use at last sex.

VCT clients who engaged in risky drinking were less likely to have multiple sexual partners, while no association was found between binge drinking and having multiple partners. VCT clients who used alcohol/drugs before sex in the past month were more likely to have multiple partners*, while those who avoided alcohol/drugs before sex were less likely to have multiple partners.



CONCLUSION

VCT clients who use alcohol/drugs before sex are likely to be HIV positive, not use condoms, and have multiple partners. The intergration of risk reduction counselling interventions in VCT sites is important as it can lead to reductions in HIV risky behaviours and further HIV infections among VCT clients.

LIMITATIONS

Since this is a cross-sectional study, causality cannot be determined from the variables being compared.

REFERENCES

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ACKNOWLEDGEMENTS

Bill & Melinda Gates Foundation, for funding the study.

