Sexual Risks for HIV Infection in Cape Town, South Africa Methamphetamine Use and

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HSRC RESEARCH OUTPOL

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Research Collaborators

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Outline of presentation

- Background
- Aims of the study
- Research methods
- Results
- Conclusions
- Acknowledgements

Background

- South Africa's Western Cape Province (Parry, Myers and in the drug treatment centres in the Cape Town area in methamphetamine use especially from amongst patients Pluddemann, 2004). For example: There is mounting evidence of increased
- Meth use has increased from no reported cases in 2002, to 12% in 2003, to nearly 60% in 2004
- use with 39% of Meth users in treatment reporting daily More than one in four drug treatment patients in Cape Town use Meth as their primary or secondary drug,

Background (contd)

- drugs that drug treatment patients report using. It is also common for Meth to be only one of several
- spread HIV and AIDS faster (Morris & Parry, 2006) A major concern is that Meth has the potential to country. prevalence and fastest growing epidemic in the especially in a province with the lowest HIV
- in Africa, that examines Meth use in a community sample The current study is the first that we are aware of

Aims of the study

sexual risks for HIV infection. and the association of Meth use and of Meth use, characteristics of Meth users, The primary aims of this study were to collect preliminary data on the prevalence

Research methods

Sampling and data collection

- Street intercept methods were used to collect behaviour from 441 men and 521 women living surveys of substance use and sexual in a township in Cape Town South Africa.
- attending one of 25 venues within the township and its surrounding settlements. The participants were approached while
- along main thoroughtares running through the commercial centre of the township as well as township. Interviews were conducted within the

Sampling and data collection

- seven shopping areas (25%), the Community Centre that includes six social service facilities (20%), taxi waiting areas (15%), and nine street junctions that vendors (5%). Venues included a day hospital (35% of surveys), included bus stops, waiting areas, and street
- throughout the township and its surrounding areas. These venues were purposively pre-selected because they represent public access areas
- English, Xhosa (an indigenous African language), and Afrikaans (a South African national language rooted in The questionnaires were mainly self-administered in Dutch).

Measures

- tollowing variables: Questionnaires were developed that measured the
- demographic characteristics,
- sexual behaviors including numbers of partners,
- unprotected and condom protected acts practiced over the previous 6 months
- lifetime history of STI diagnoses for lifetime and for the past 6 months,
- substance use (alcohol* & drug use especially Meth use**),
- HIV risk history, and
- sexual behavior.
- Alcohol Use Disorder Identification Test (AUDIT) to assess quantity and frequency of alcohol use (Allen et al., 1997; Barbor et al., 1992).
- heard of the drug called Tik (Crystal, or Methamphetamine)?", "Do you know anyone who has used Tik?", Do you think Tik is a problem in your community?", and "Have you ever tried Tik?" Participants were asked four questions pertaining to Meth: "Have you ever

Data analyses

- sample that had not indicated using Meth. We first conducted descriptive analyses for substance use in the entire sample followed by descriptive analyses of people who had ever used Meth compared to those in the
- (Mandrax, dagga, cocaine, heroin) in the past 6 months but had not used Meth. The main study analyses focused on comparing individuals who reported currently using Meth, that is people who had used Meth in the past six months, to individuals who had used other non-alcohol drugs
- gender, and race were made using logistic regressions controlling for age, All comparisons of Meth users to non-Meth drug users

Data analyses

- among drug users. examine independent factors associated with Meth use Finally, we conducted multivariate logistic regressions to
- controlling for age, gender, and race. significant in the univariate models, again These analyses included all variables found
- associated significance values. All results report odds ratios (OR) adjusted for all variables included in analyses with 95% confidence intervals
- Numbers of participants included in various models varied due to non-systematic missing values.

Results

Substance use

- Results showed that substance use was common in the sample. Sixty-five percent of men (N = 282) and 37% (N = 188)of women reported currently using alcohol.
- occasions at least monthly. women reported drinking at least six drinks on one of more Thirty-seven percent (N = 164) of men and 19% (N =96) of
- In terms of non-alcohol drug use on more than one occasion, 21% (N = 88) of men and 5% (N = 27) of women had used Cannabis, 7% (N = 32) men and 1% (N = 7) women had used Mandrax, and 2% (N = 8) of men and less than 1% (N = 5) of women had used cocaine in the previous six months.
- Less than 1% of men and women reported injecting drugs.

Methamphetamine use

- statement that Meth use is a serious problem in their community. heard of Meth and 90% of the sample agreed with the The majority (83%) of participants indicated that they had
- Both men (63%, N = 278) and women (58%, N = 302) indicated that they have known someone who used Meth.
- 63) women had used Meth in their lifetime In addition, we found that 18% (N = 78) men and 12% (N =
- reported using Meth in the previous six months In addition, 11% (N = 49) men and 6% (N = 34) women

Methamphetamine use

- who tried Meth were age 25 or younger compared to 37% (N = 307) persons who had not tried Meth, OR = 2.1, 95%CI = 1.4-2.9. Individuals who had ever used Meth were significantly younger than those who had not used Meth; 56% (N = 78) of persons
- In addition, men (56%, N = 78) were significantly more likely to have tried Meth than women (63, 45%), OR = 1.6, 95%CI = 1.1-
- Persons who identified as Coloured race (82%, N = 112) were more likely to have tried Meth than Indigenous Africans (14%, N = 20), and persons of other races (4%, N = 5), OR = 0.6, 95%Cl = 0.4-0.7.
- cnaracteristics Meth and those who had not tried Meth on other demographic There were no differences between individuals who had tried

drugs and persons who had used Meth in the previous 6 months. Table I. Demographic characteristics, STI history, and HIV testing history among persons who used non-Meth

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previous 6 manths. Table II. Alcohol and other drug use among persons who used non-Meth drugs and persons who used Meth in the

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Adjusted for age, gender, and race; $p \le 0$; n/a = nor applicable, small cell sizes.

Table III. Sexual partners and sexual behaviors in the past 6 months among persons who used non-Meth drugs and persons who used Meth in the previous 6 months.

	Drug usets not using Meth (n=131)	nor wing	Meth usets (n=83)	(n=83)		Adjusted
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Projected intercourse	نيا	10.7	خوټ	<u>بر</u> 1	0.99	0.96 - 1.0
Per cent of intercouse	26.2) [] []	س نود	2.2-15.8
occasions protected by condoms	Lyfts					

Note: Odds ratio adjusted for participant age, gender, and race. 'p<.91

Substance Use and Sexual Risks among Meth Users and Non-Meth Drug Users

- drug users. likely to have exchanged sex for money or drugs than non-Meth Meth users were significantly younger and significantly more
- differences in STI history or HIV testing history. Meth drug users on demographic characteristics, as well as no There were no other differences between Meth users and non-
- alcohol and drink more heavily than non-Meth drug users Meth users were significantly more likely to currently drink
- and other drug users. were no differences in non-alcohol drug use among Meth users Results indicated that aside from the use of Meth itself, there

Substance Use and Sexual Risks among Meth Users and Non-Meth Drug Users

- to Meth and 13% reporting use of two more additional drugs. drugs, with 27% of Meth users reporting use of another drug in addition However, Meth users were significantly more likely to use multiple
- past six months and this difference was significant after adjusting for gender, age, and race, OR = 5.1, 95%Cl = 2.6-9.9. In contrast, 89% of non-Meth users reported only using one drug in the
- sex partners than were their non-Meth drug using counterparts. and to have practiced unprotected intercourse while having multiple Meth users were significantly more likely to have multiple sex partners
- There were no differences between the groups on their rates of engaging in unprotected intercourse in the past 6 months.

Substance Use and Sexual Risks among Meth Users and Non-Meth Drug Users

condoms in the past six months as compared to nonof their intercourse occasions were protected by However, Meth users reported that a greater proportion

Meth users.

- drugs in sexual contexts as did 15% of Meth users, a non-significant difference Finally, we found that 9% of non-Meth users used other
- partner had used Meth in sexual situations as did 5% of In contrast, 40% of Meth users indicated that they or their used Meth in sexual contexts in the past six months non-Meth users, indicating that their sex partners had

Multivariate Model

- In a final multivariate test comparing Meth users to nonusers, the results showed significant associations for
- participant gender, adjusted OR = 2.9, 95%Cl = 1.1-
- engaging in unprotected intercourse while having multiple partners, adjusted OR = 5.6, 95%Cl = 2.0-15.6,
- proportion of intercourse occasions protected by condoms, adjusted OR = 4.8, 95%Cl = 1.2-19.1.
- unprotected intercourse while having multiple sex partners, and greater use of condoms Thus, Meth use was related to male gender, engaging in

Conclusions

- disturbing because Meth itself is a dangerous drug, and risks for HIV infection. because of the close association between Meth and sexual The significant use of Meth suggested by these findings is
- association, including sexual enhancing and stimulant addictive pharmaceutical properties. properties of the drug, impaired judgment and its highly Multiple factors likely contribute to the Meth risky sex
- substances, poverty is not as much of a barrier to Meth use as it is to other drug use. Because Meth is inexpensive to make from readily available
- spared from the greatest burden of HIV/AIDS. throughout communities that, until now, have been relatively likely that a new wave of HIV infections will soon spread Without effective measures taken to stem the use of Meth, it is

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