• South Africa faces the largest HIV epidemic in the world, with an estimated 5.7 million people living with HIV (PLWH) (UNAIDS 2008).

• Although incident HIV in South Africa derives primarily from unprotected sexual contact between PLWH and non-infected individuals, few studies have investigated the dynamics of risky sex among South African PLWH (e.g., Esetile et al., 2008; Kene et al., 2006; Oyey et al., 2005; Simbayi et al., 2007), and little of this research has specifically involved the close to 1.7 million South African PLWH who are receiving clinical management for their HIV.

Results: Predictors of Risky Sex

Univariate Analyses

• Among sexually active female and male PLWH, recent unprotected sex was significantly associated with the following risk-relevant factors, norm, skills, and intentions; fertility desires (i.e., self/partner currently trying to have a baby); low perceived power to use/negotiate condoms; and considering a traditional healer to get help for one's HIV.

• Significant correlates of risky sex unique to sexually active women included not having a partner, being married to a partner, experiencing threatening sexual physical abuse; and consuming alcohol prior to sex. Unique to sexually active men, risky sex was significantly associated with having no children, experiencing a lower risk of transmitting HIV, and perceived HIV stigma.

Conclusions and Implications

• A proportion of South African PLWH on ARVs who are receiving clinical care continue to engage in high-risk sexual behavior, placing those partners at risk for acquiring HIV and themselves at risk for acquiring additional sexually transmitted infections.

• For both female and male PLWH, the desire to have a child was significantly linked to engaging in unprotected sex, as was perceiving little power to use/negotiate condoms. Furthermore, consistent with the IMB model of sexual risk behavior (Fisher & Fisher 1992), women lacking condom use skills and supportive norms, and men with poor condom-related attitudes, intentions, and lower perceived power; and fertility desires.

Acknowledgements and Contact Information

The authors would like to acknowledge the contribution of data collected from the Center for AIDS Programme of Research in South Africa (CAPRISA), 16 clinics in KwaZulu-Natal Province, South Africa, and the Centre for AIDS Programme of Research in South Africa (CAPRISA), 16 clinics in KwaZulu-Natal Province, South Africa. We would like to thank the clients and staff at our study clinics in KwaZulu-Natal (KZN), the uMgungundlovu and uMkhanyakude District Health Offices, and the KZN

Background and Study Aims

• South Africa faces the largest HIV epidemic in the world, with an estimated 5.7 million people living with HIV (PLWH) (UNAIDS 2008).

• Although incident HIV in South Africa derives primarily from unprotected sexual contact between PLWH and non-infected individuals, few studies have investigated the dynamics of risky sex among South African PLWH (e.g., Esetile et al., 2008; Kene et al., 2006; Oyey et al., 2005; Simbayi et al., 2007), and little of this research has specifically involved the close to 1.7 million South African PLWH who are receiving clinical management for their HIV.

• Building on the previous work in this area, the aims of the present investigation were to: 1) identify factors associated with recent unprotected sexual behavior in a clinical care sample of South African PLWH who were receiving antiretroviral (ART) therapy; and 2) identify factors differentially associated with unprotected sex among sexually active female versus sexually active male PLWH.

Methods

• 1733 PLWH receiving ARTs were recruited from 16 clinical care facilities in KwaZulu-Natal (KZN), South Africa. PLWH, who were pre-screened for recent unprotected vaginal/anal sex, resulting in a stratified sample in which approximately 50% of all participants had engaged in unprotected vaginal/anal sex (defined as "risky sex") during the past four weeks.

• Participants completed a comprehensive audio computer-assisted self-interview (ACASI) in either English or an indigenous language. Few of the participants in the ACASI included measures of key demographics, protected/unprotected sex over the past four weeks; information, motivation, and behavioral skills (IMB) barriers to safer sex (Fisher & Fisher, 1992); alcohol and substance use, and gender and risk-relevant factors.

Statistical Analyses: Univariate logistic regression analyses were conducted to identify factors associated with unprotected vaginal/anal sex during the past four weeks among (1) all sexually active participants; (2) sexually active women; and (3) sexually active men. Univariate factors significant at the p<.10 level for women and men were included in a multivariate logistic regression model to identify factors that independently predicted risky sex among female and male PLWH, respectively.

Results: Sample Characteristics

• Among the sample (stratified for risky sex), approximately 74% had engaged in vaginal/anal sex during the past 4 weeks, and just over half reported having sex without a condom.

• Among sexually active women, significant multivariate correlates included poor condom use skills and norms; lower perceived power; fertility desires; not living with a partner/ unmarried; and alcohol use prior to sex. Among sexually active men, multivariate correlates included poor condom-related attitudes and intentions, lower perceived power; and fertility desires.

Additional Characteristics | Total (N=1733) | Women (n=953) | Men (n=780) |
---|---|---|---|
Live in a rural area | 67.3% | 66.9% | 67.8% | 0.14
Currently unemployed | 72.2% | 75.1% | 68.6% | 3.12**
CSES: Depressed | 24.2% | 25.2% | 22.9% | 1.22
AUDIT: Problem Drinking | 14.0% | 6.1% | 23.7% | **10.21***
Partner engages in physical abuse | 11.2% | 14.9% | 6.6% | **29.85***
On ART, 12+ months (self-report) | 66.1% | 66.3% | 63.5% | 4.12**

Results: Sexual Behavior*

• Among the sample (stratified for risky sex), approximately 74% had engaged in vaginal/anal sex during the past 4 weeks, and just over half reported having sex without a condom.

• Significant correlates of risky sex unique to sexually active women included not living with a partner, experiencing threatening sexual physical abuse; and consuming alcohol prior to sex. Unique to sexually active men, risky sex was significantly associated with having no children, experiencing a lower risk of transmitting HIV, and perceived HIV stigma.

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