HIV sero-discordant relationships among black African people in England

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Background

The Knowledge, the Will and the Power
(1) People with HIV;
(2) People in sexual relationships with people with HIV;
(3) People with multiple sexual partners;
(4) People who have sex with people with multiple sexual partners
(5) People who are or will be sexually active.

www.kwp.org.uk
Background

- The Knowledge, the Will and the Power
  (1) People with HIV;
  (2) People in sexual relationships with people with HIV;
Method

- Community-participatory approach
- Recruited via community-based agencies
- Team of peer interviewers
- Inclusion criteria:
  - Black African or in relationship with person who is
  - In an sero-discordant relationship
  - Or experience of SD relationship within last year
N = 60

<table>
<thead>
<tr>
<th>HIV STATUS</th>
<th>AREA OF RESIDENCE</th>
</tr>
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<tbody>
<tr>
<td>Diagnosed positive female</td>
<td>London</td>
</tr>
<tr>
<td>Diagnosed positive male</td>
<td>Leeds/Bradford</td>
</tr>
<tr>
<td>Negative or untested male</td>
<td>Huddersfield</td>
</tr>
<tr>
<td>Negative or untested female</td>
<td>Nottingham</td>
</tr>
<tr>
<td></td>
<td>Others</td>
</tr>
<tr>
<td>32</td>
<td>27</td>
</tr>
<tr>
<td>12</td>
<td>20</td>
</tr>
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<td>9</td>
<td>4</td>
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<td>7</td>
<td>4</td>
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<td>5</td>
<td>5</td>
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<table>
<thead>
<tr>
<th>RELATIONSHIP STATUS</th>
<th>TIME IN RELATIONSHIP</th>
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<tbody>
<tr>
<td>Currently in SD relationship</td>
<td>Average (median)</td>
</tr>
<tr>
<td>No longer in SD relationship</td>
<td>Range</td>
</tr>
<tr>
<td>52</td>
<td>3yrs</td>
</tr>
<tr>
<td>8</td>
<td>1m-12yrs</td>
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Findings
Adia’s story
Adia is 43 and has been with her partner for the last 8 years. They have 3 children together, all below the age of 10. She was diagnosed with HIV during anti-natal HIV testing for her youngest child who was born here in the UK last year. She doesn’t know what her CD4 count is and is not certain of her viral load. Her whole world collapsed when she received her diagnosis and she immediately worried that her unborn child and her partner might also be infected. She was absolutely convinced that she would die, probably in the same, slow, agonising pain as her brother and cousin did back in Zimbabwe when they developed AIDS. She told her partner as soon as she got home from the clinic that afternoon. He didn’t shout or get angry, he just became very quiet and sad. He won’t talk to her about it or tell her how he is feeling. She is convinced that he will leave her for another woman and she has no idea how she will cope practically and financially looking after 3 children on her own. They still have sex occasionally but he really doesn’t like using condoms and they have experienced condom failure on a few occasions. He wants to have sex without condoms and keeps pressuring her into doing it. She has let him a few times but is terrified of infecting him. She was really surprised to hear about PEP [emergency treatment] when her interviewer mentioned it and wished she had known about it before. Their sex life feels like a duty and she doesn’t feel able to negotiate the kind of sex she really wants.

Her husband was so fearful of the reaction that he forbid her from telling anyone else about her status. She felt so desperate and alone that she finally told her sister, who was actually quite supportive, and accessed her local HIV charity in secret. This, she says, is the one place she really feels free and supported. The charity have helped her to understand what HIV is all about and meeting other people in her situation has helped her to gain confidence about living well with HIV.
Obasi’s story
Obasi’s story

Obasi is 35 and has been with his partner for about 2 years. About 6 months into their relationship his partner told him that she had HIV. This was a huge shock and he felt a little betrayed that she did not tell him sooner. She explained that she had really bad experience of disclosure before and was terrified that he might leave her. At first he didn’t quite know what to think. He didn’t know much about HIV, other than what he saw back in Nigeria, of people being very sick and dying. There wasn’t much information that he could find to tell him about what it all meant but eventually he managed to piece things together from reading around on the internet. They came together and talked things through, airing all their concerns for the future, including his firm desire to have children at some point. They have spoken to a doctor about the possibilities of conception and while he described how artificial insemination can work, he also mentioned that because of her undetectable viral load they can probably just have sex without condoms now. Neither of them quite understood what this meant and they both firmly believe that if they have unprotected sex then he will get HIV.

About a year ago he confided in a friend about his partner’s HIV status. This friend reacted really badly, assuming that Obasi must also have HIV. This friend proceeded to tell lots of their friends and other people on their estate. The impact has been devastating. Lots of people will no longer talk to them or socialise with them. His partner has been the victim of verbal assault in the street and is afraid to go out on her own. They were referred to a local HIV charity by her clinician. They have been really good at supporting his partner and helping her to come to terms with HIV and also offering advice about their unsettled immigration status. However he doesn’t really feel like there is a space for him as a negative partner to gain support or advice.
Coming to terms with HIV

- Perception of HIV as a death sentence
- Difficulties with disclosure
- Fears for the future
Managing the relationship

• Difficulties with communication

• Power and disempowerment

• HIV isn’t the only issue to contend with
Sex and risk

• Problems with condom use

• Lack of awareness, or uncertainty, about new prevention technologies

• Difficulties negotiating sex
External influences

Community

Family

Person with HIV

Negative partner

Children

HIV charities

Health/social care services
Conclusions

- Interventions targeting basic need
  - Essential information
  - Therapeutic interventions
- Engagement with other SD couples
- HIV-related stigma
- Gender dynamics and disempowerment
Acknowledgements
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- Gary Hammond

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- John Owour
- Lawrence Ola
- Pamela Mahaka
Executive summary

The aim of this qualitative research study was to explore the experiences of black African people living in England where there was an estimated HIV prevalence of 0.5% in 2007. The research was conducted in London and included 34 interviews with men and women aged 18 to 50. The main findings of the study are that the experiences of black African people living in England were shaped by a number of factors, including their identity as black and African, their experiences of discrimination and racism, and their access to healthcare and support. The study also highlighted the need for more research on the experiences of black African people living in England.