

ABSTRACT

Introduction

HIV is an infection with a long asymptomatic period because of which one can hardly identify the infected individuals by their external appearance or by general health status. Therefore, it is important that known HIV positive persons to disclose their HIV status to sexual partner/s so that the partner/s could get precautions, and obtain services like counseling and testing for HIV as soon as possible.

Objectives

To determine the factors influencing the self-disclosure of HIV to partners and to describe the process, experience and outcomes related to disclosure of HIV status among people living with HIV (PLHIV) attending selected HIV clinics of NSACP.

Methods

A mixed study was conducted with a quantitative cross-sectional survey and qualitative research at selected STD clinics in Sri Lanka from September 2019 to September 2020. In the Quantitative study, 270 samples were selected with convenient sampling method, and data were collected with a pre-tested interviewer administered questionnaire. Data analysis was done with SPSS 22.

Purposive sampling was used for the qualitative study, and data was collected from ten PLHIV.till data saturation was reached. Data was collected by In-depth interview with the use of interview guide, and analysis was done manually with thematic analysis.

Ethical clearance was obtained from the ethical review committee, PGIM, University of Colombo.

Results

The mean age was 41 years; SD was 10.4. In occupation, 42%(n=115) were full time workers.

Majority; 36 %(n=98) were educated up to O/L. Forty five percent (n= 122) were married and 47 %(n= 128) were heterosexuals. Majority; 53% (n= 143) belonged to a KP. Seventy five percent (n= 202) was diagnosed at WHO stage 1. All the PLHIV in the sample have been on ART. Twenty five percent (n= 67) had at least one OI and 24% (n= 66) had at least one co morbidity. Out of 270 individuals, 63.7% (n= 172) have disclosed their positive HIV status at least to one sexual partner.

There was a statistically significant association between education level and disclosure rate (p= 0.011). Eighty nine percent (n= 109) of married PLHIV disclosed the status whereas only 34.4% (n= 35) single PLHIV disclosed their status (p= 0.000). Seventy seven percent (n= 99) of heterosexuals disclosed the status, however only 34.5% (n= 19) homosexuals have disclosed the status (p= 0.000). Out of 143 who were in a KP category 44.2% disclosed their status. This rate was higher; 55.8% in low risk category. (P= 0.000).

In qualitative study, most of the interviewees were males and most of them had at least one male partner in lifetime. Some of them do jobs in private companies whereas a few works as labourers. It was observed that the time taken to disclose can vary. Sometimes psychological impact from the diagnosis can affect this timing. PLHIV tend to disclose to closest current partner and most of them disclosed because they felt guilty of not telling. Partner can react in different ways. Most tend to accept, however a few PLHIV thought this is because the partner might have thought they are the culprit. Level of education could be an influential factor for disclosure. Stigma, fear of losing job and not been able to contact partners

were the mostly found causes for not disclosing or delayed disclosure. Rarely some believe that they don't need to disclose as they do protected sex always and the viral loads were undetectable.