

## ABSTRACT

### An Evaluation of a Prevention with Positives Intervention within seven Community-based Home Care Programmes in Guyana

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The Prevention with Positives (PwP) project used combination prevention approaches to empower people living with HIV (PLHIV) to reduce sexual transmission of HIV. The PwP project was conducted by 7 non-governmental organisations (NGO) between 2011 and 2012.

A mixed quantitative-qualitative method was used to assess effectiveness of PwP in reducing risk. Analysis of risk surveys of 235 PLHIV from 2011 and 224 PLHIV in 2012 was triangulated with results of on-site NGO programmatic assessments and in-depth interviews of 17 PLHIV and 2 staff from each NGO. Eligibility for PLHIV enrolment in PwP comprised being sexually active and at increased risk for transmitting HIV. Purposive sampling was used to select persons for in-depth interviews.

Two areas of significant risk reduction were observed from 2011 to 2012: the adoption of dual methods of family planning ( $P=0.01$ ) and increase in proportion of PLHIV who knew their partner's HIV status ( $P=0.001$ ). PLHIV who had their partner tested were 34 times more likely to disclose their own status ( $P=0.001$ ). PLHIV with multiple sexual partners were significantly less likely to disclose their status ( $P=0.001$ ). Women were more likely to have fear of violence ( $P=0.04$ ). PLHIV who were employed were 2.5 times more likely to use family planning ( $P=0.001$ ). PLHIV who had not experienced discrimination were more likely to cope successfully ( $P=0.05$ ). PLHIV aged 25-54 were more likely to use condoms than those 15-24 ( $P=0.001$ ).

Qualitative analysis revealed that PLHIV capacity for risk reduction was limited by social determinants. These included poverty, stigma, remote location, language differences, fear of violence, gender inequalities and flawed risk perceptions. There was a lack of disclosure of HIV positivity to casual sexual partners which has significant implications in a culture where multiple sexual concurrency is widely practised.

NGO staff and PLHIV felt PwP was an effective risk reduction strategy worth integrating in the formal health sector.

Keywords: Karen Gordon-Boyle, people living with HIV, primary prevention, secondary prevention, prevention with positives, combination prevention, risk assessment, risk reduction, social determinants, contraceptive uptake, gender-based violence, multiple concurrency.