

# Mayisha II – Community sample HIV positivity



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# Mayisha community sample HIV positivity



- **14% of respondents providing an oral fluid sample were HIV antibody positive**
- **However, Mayisha II probably over-sampled people living with HIV**
  - Recruitment sites included health promotion events organised and attended by people living with HIV (2/5<sup>ths</sup> of respondents were recruited from community events)
  - Willingness of people with HIV to support the study
- **Sample positivity is not indicative of HIV prevalence in the population**
  - Recruitment strategies account for the variation in sample positivity between London, Luton and the West Midlands
  - Direct estimates based on NATSAL, SOPHID and UA surveys
  - Over-sampling of people living with HIV provides data to explore risk factors for HIV



# Diagnosed and undiagnosed HIV

- **63.1% of respondents who were HIV positive reported a previous voluntary HIV test**
  - **53.9% of these reported the previous voluntary test to be HIV positive**
  - **31.5% of those with a previous VCT reported their last test to be negative**
  - **15.7% of those with a previous VCT reported they had not collected or were unaware of the result**
- Those reporting HIV negative or unknown test results include respondents unwilling to disclosure their HIV status on the questionnaire



# Diagnosed and undiagnosed HIV

- **Two-thirds of the 141 respondents with an HIV positive sample reported undiagnosed HIV (66.0%)**

- Based on reporting of previous voluntary HIV tests

- 51 people said they had never tested
- 28 reported their previous test to be negative
- 14 did not know the the result of their previous test

- 72% HIV infection in male respondents and 61% infection in female respondents was undiagnosed

- **Overall, 9.2% of the Mayisha II community sample that provided an oral fluid sample had undiagnosed HIV infection and 4.8% had diagnosed HIV infection**



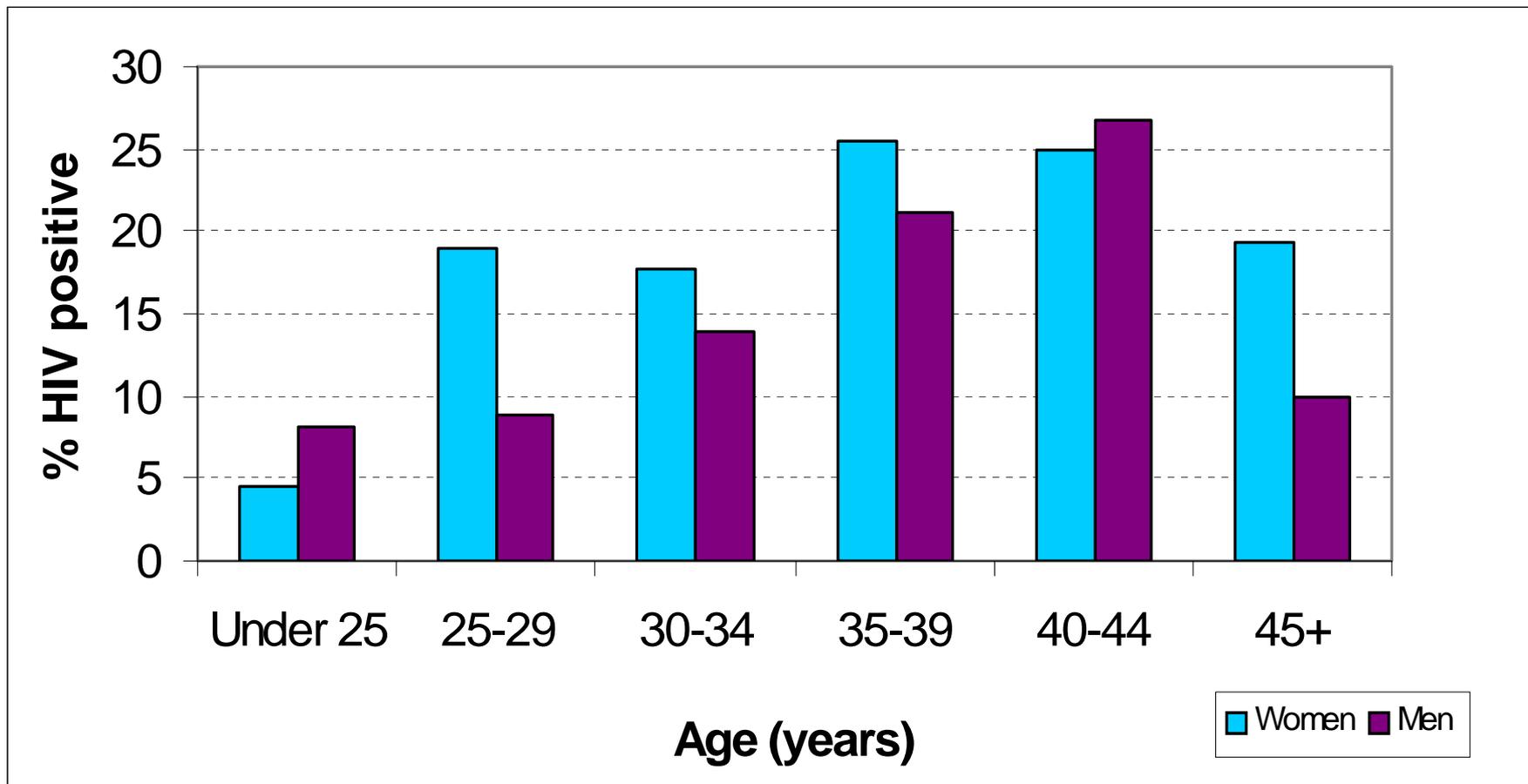
# Community sample HIV positivity

**Those taking part in Mayisha overall tended to be young, but...**

- **Sample positivity was higher overall among older men and women compared to those age under 25 years**
  - 27% of men who gave a sample were age 40 to 44 years
  - 26% of women who gave a sample were age 35 to 39 years
  - Compared to 8% of men and 5% of women were under 25 years
- **But also higher in younger women compared to younger men age 25 to 29 years**
- **15% women and 13% of women providing an oral fluid sample were HIV antibody positive**



# Age & positivity in the Mayisha II community sample





# Community sample HIV positivity and region of birth



## Higher positivity overall among respondents providing a sample who reported being born in

- Southern Africa (26%),
  - Western Africa (25%)
  - South Eastern and Eastern Africa (24%)
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- Higher among women born in Southern Africa (33%)
  - Lower among respondents providing an oral fluid sample born in Horn of Africa (4%)

# Region of birth and sample positivity



<b>Region of birth</b>	<b>Respondents %</b>	<b>Number providing O/F sample</b>
South Eastern and Eastern Africa	<b>24%</b>	<b>434</b>
Horn of Africa and Northern Africa	<b>4%</b>	<b>233</b>
Central and South Western Africa	<b>9%</b>	<b>77</b>
Outside Africa	<b>6%</b>	<b>55</b>
Southern Africa	<b>26%</b>	<b>46</b>
Western Africa	<b>25%</b>	<b>36</b>



# Community sample HIV positivity and relationship status

- Lower among both married women and among men who were single or had a partner they did not live with (9%)
- Higher in married men (17%) compared to single men (9%)
- Higher among men and women who were widowed, separated or divorced (33.3% women and 31.3% men)
- Lower in married women (9%) compared to single women (15%)

# Relationship status and sample positivity



<b>Relationship status</b>	<b>Respondents %</b>	<b>Number providing O/F sample</b>
Widowed, separated, divorced	<b>33%</b>	<b>55</b>
Living with partner	<b>18%</b>	<b>77</b>
Married	<b>13%</b>	<b>324</b>
In relationship (not living with partner)	<b>13%</b>	<b>123</b>
Single	<b>12%</b>	<b>415</b>

# Community sample HIV positivity and same sex partners



- Among women reporting same sex relationships (8%), sample positivity was zero, compared to 17% of women who generally had partners of the opposite sex
- Among men reporting same sex relationships (8%), sample positivity was 22%, compared to 13% of men who generally had partners of the opposite sex



# Community sample HIV positivity and service use

- **Higher in those who had ever tested for HIV compared to those that had not**
  - Higher in women who last tested at GUM / STI clinic rather than GP
  - Higher in men who tested at their GP compared to GUM / STI clinic
- **Higher among those that had previously attended a GUM clinic in past five years (27% women and 22% men)**
- **No difference among women attending an ante-natal clinic in the last five years compared to women who had not**

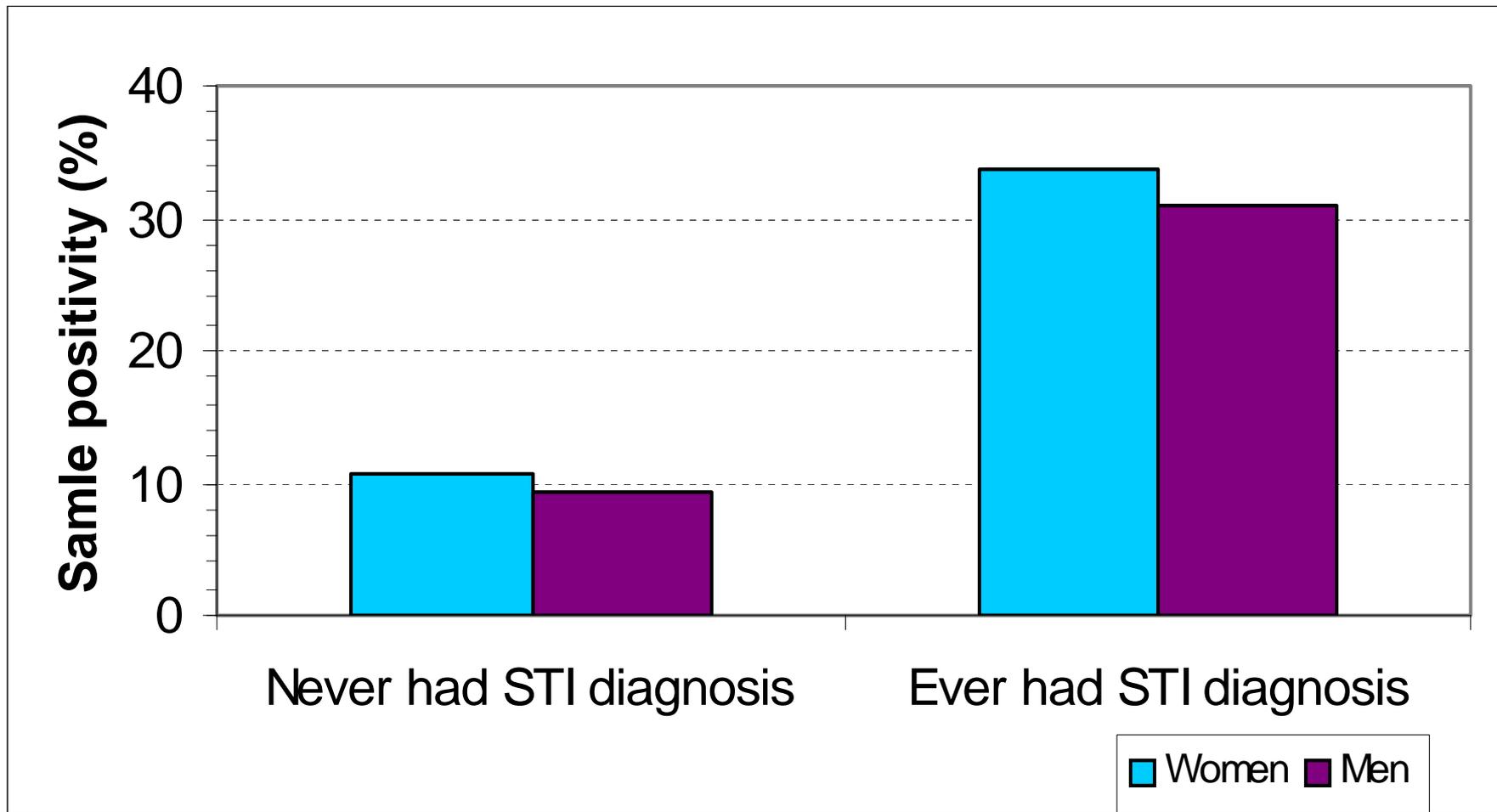
# Service use and sample positivity



<b>GUM / STI clinic attendance</b>	<b>Respondents %</b>	<b>Number providing O/F sample</b>
Never attended	<b>9%</b>	<b>601</b>
Attended less than five years ago	<b>25%</b>	<b>324</b>
Attended over five years ago	<b>9%</b>	<b>55</b>
<b>HIV testing</b>		
Never tested	<b>10%</b>	<b>526</b>
Tested less than five years ago	<b>18%</b>	<b>418</b>
Tested over five years ago	<b>29%</b>	<b>49</b>



# Reported STI diagnosis & positivity in the Mayisha II community sample



# Conclusions



- **Mayisha II is the largest study of sexual attitudes and lifestyles of African communities to be undertaken in England**
  - Data suggests high levels of GUM clinic attendance and HIV testing
  - Inclusion of additional communities e.g. Horn of African and Western Africa
  
- **Undertaking anonymous HIV antibody testing as part of a community-based behavioural survey is feasible**
  - High uptake of oral fluid sample; diverse sample
  - Commitment of African communities improving sexual health and preventing HIV
  - However, fear of HIV- and immigration-related stigma and discrimination continue to pose a considerable challenge to studies of this nature

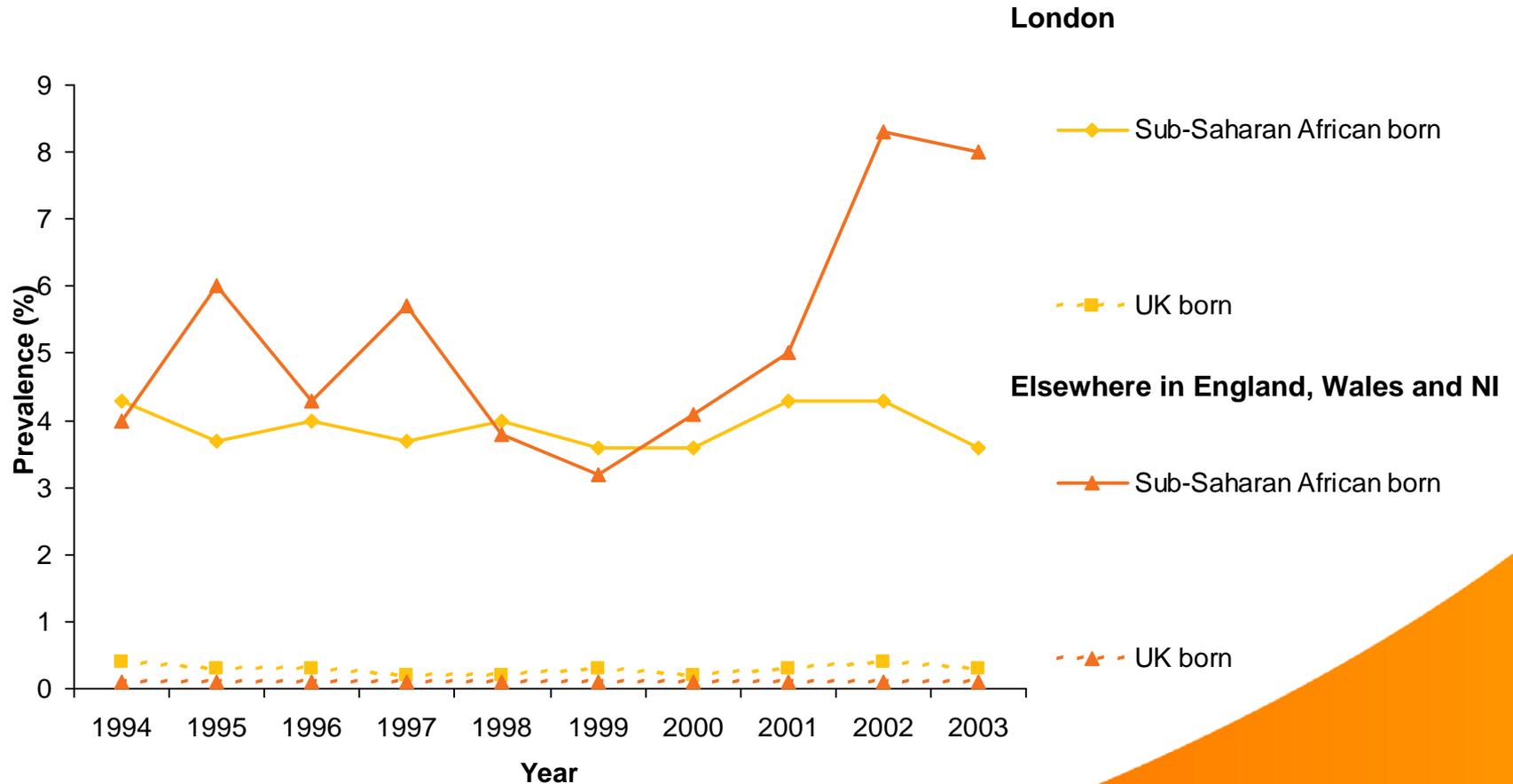
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# Outputs

- **Updating estimates of high risk behaviour**
- **Explore demographic and behavioural associations with diagnosed and undiagnosed infection**
- **Update direct and indirect estimates of HIV prevalence in black African populations in England**
- **Patterns of behavioural change since Mayisha I**
- **Cultural and psychosocial context of sexual lifestyles**
  - Gender roles; impact of migration; attitudes and experiences

# Prevalence of previously undiagnosed<sup>1</sup> HIV infection among heterosexuals attending 27 GUM clinics, by world region of birth, UK<sup>2</sup>, 1994-2003



<sup>1</sup> Excludes HIV-infected individuals who were previously diagnosed.

<sup>2</sup> Attending 16 GUM clinics in England, Wales and Northern Ireland and 11 clinics in Scotland. For Scotland, data from 2002 and 2003 excludes clinic data from Edinburgh.

**Data source:** Unlinked Anonymous Serosurveillance.

# Estimates of prevalent HIV infections among adults, United Kingdom 2003



Exposure Category	Number Diagnosed <sup>1</sup>	Number Undiagnosed <sup>2, 3</sup>	Total
<b>Sex between men</b>	<b>18 100</b>	<b>6400 (26%)</b>	<b>24 500</b>
<b>Injecting drug use:</b>			
Men and Women	<b>1400</b>	<b>400 (22%)</b>	<b>1800</b>
<b>Heterosexuals</b>			
<b>Men</b>	<b>6700</b>	<b>4200 (39%)</b>	<b>10 900</b>
<i>African men</i>	4100	2000	<b>6100</b>
<i>Non-African men</i>	2600	2200	<b>4800</b>
<b>Women</b>	<b>11 800</b>	<b>3300 (22%)</b>	<b>15 100</b>
<i>African women</i>	8700	1400	<b>10 100</b>
<i>Non-African women</i>	3100	1900	<b>5000</b>
<b>Total</b>	<b>18 500</b>	<b>7500 (29%)</b>	<b>26 000</b>
<b>Blood Products<sup>4</sup></b>			
Men and Women	700	0	<b>700</b>
<b>Grand Total</b>	<b>38 700</b>	<b>14 300 (27%)</b>	<b>53 000</b>

<sup>1</sup> Numbers diagnosed were obtained from SOPHID and SCIEH, adjusted for under-reporting and failure to access services.

<sup>2</sup> Numbers undiagnosed derived for England, Wales and Scotland using data from Natsal 2000 and the UA programme in an extension of the method previously described (Petrukevitch *et al. Genitourinary Medicine* 1997; 73:348-54).

<sup>3</sup> Numbers undiagnosed for Northern Ireland derived by using exposure specific factors.

<sup>4</sup> All cases infected through blood and blood products or tissue were assumed to be diagnosed.

**Data source:** multiple <sup>1-3</sup> above.

# Previously undiagnosed HIV infection<sup>1</sup> through unlinked anonymous testing, UK 2003



Area		Genitourinary medicine <sup>2</sup> clinic attendees			Pregnant women
		MSM	Heterosexual		
			Men	Women	
London	Undiagnosed HIV infection (%)	5.2%	0.7%	0.6%	0.3% <sup>5</sup>
	Number positive/number tested <sup>3</sup>	(263/ 5098)	(114/ 16 000)	(144/ 23 288)	(305/ 112 798)
Scotland	Undiagnosed HIV infection (%)	1.8%	0.1%	0.2%	↑ 0.06% <sup>5</sup> ↓ (232/ 386 380)
	Number positive/number tested <sup>3</sup>	(23/ 1265)	(4/ 6492)	(9/ 4926)	
Elsewhere in the UK <sup>4</sup>	Undiagnosed HIV infection (%)	2.1%	0.3%	0.4%	
	Number positive/number tested <sup>3</sup>	(54/ 2599)	(58/ 20467)	(78/ 20 680)	

Data source: Unlinked Anonymous Serosurveillance.