

## Relationship counseling encourages couples HIV testing

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It's long been known that couples HIV testing and counseling is an effective way to mutually disclose HIV status and link to health care—unfortunately, couples don't use it even though it's widely available.

Lynae Darbes, associate professor in the School of Nursing at the University of Michigan, wanted to change that, so she and her team developed an intervention designed to improve the likelihood that couples will decide to engage in HIV testing together.

The intervention, called Uthando Lwethu —"our love" in Zulu—took place in a rural area of South Africa in a province with the highest prevalence of HIV in the country. It worked, and of the 334 couples enrolled in their study, 42 percent of the experimental group chose to participate in couples HIV testing, compared to 12 percent of couples in the control group.

The idea was that providing <u>relationship skills</u> to couples would improve their communication and their relationship in general, and this would in turn improve their ability to talk about sex and HIV—as well as HIV testing.

The idea came about from Darbes' earlier work, in which she asked couples why they didn't do HIV testing together. Darbes conducted the research while at the University of California, San Francisco, and it was a partnership with the Human Sciences Research Council in Durban,



## South Africa.

"Many people talked about the importance of communication, but didn't know how to talk about HIV," she said. "It seemed like if we taught them more effective communication, they could discuss HIV and testing, and then they might be able to actually do it.

"What people haven't acknowledged is that we haven't factored in relationship dynamics as much as we should with HIV couples testing. HIV is a complicated conversation to have."

All couples received a group <u>counseling</u> session together, then were randomly placed into the experimental or control groups. The experimental group received an additional couples-based group session, in single-gender groups, followed by four single-couple counseling sessions. Topics included communication skills, intimate partner violence and HIV prevention. The control group only received the first group counseling, but after the study they were offered a condensed version of the couples counseling sessions.

In order to make testing and counseling easily available in the <u>rural area</u>, where <u>health services</u> are often hundreds of miles away, researchers took a mobile testing van to the study participants instead of asking them to travel. Since the area lacks <u>health professionals</u> and therapists, the study team trained laypeople to counsel the couples.

In addition to the higher couples HIV-testing rate, the experimental group also chose to test significantly sooner than those in the control group who tested together. At baseline, nearly 40 percent of the participants (both men and women) had never been tested for HIV, which surprised Darbes, considering the high rate of HIV in the area. Additionally, most couples had not disclosed prior HIV test results to partners.



The model could work well in any area with a dearth of <u>health care</u> clinics and clinicians, Darbes said. It could also be tailored to other health conditions like diabetes, weight control, etc.

"I think that general relationship conversations can cascade out into other <u>health</u> outcomes, and you can talk about issues and behaviors more easily if you improve your overall communication," Darbes said.

The next step is to apply for a grant to investigate ways to feasibly implement the counseling in a real-life community setting.

The study, "Results of couples-based randomized controlled trial aimed to increase testing for HIV," was funded by the National Institute of Mental Health. It appears online in the *Journal of Acquired Immune Deficiency Syndrome* in February.

## Provided by University of Michigan

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