

SOCIOLOGICAL RESEARCH

Completed Studies

Psychosocial and demographic predictors of HIV sexual risk and HIV infection in men who have sex with men in Chennai

Collaborative study with Harvard University, USA

Background

Men who have sex with men (MSM) in India are stigmatized, understudied, and potentially at high risk for HIV. The impact of psychosocial issues facing this hidden population on HIV risk behavior and HIV infection can help shape culturally relevant HIV prevention interventions.

Aim

- To study the psychosocial and demographic predictors of HIV sexual risk and HIV infection in MSM in Chennai, India

Methods

Outreach workers recruited 210 MSM in Chennai who completed an interviewer-administered psychosocial assessment battery and underwent HIV testing and counseling. The MSM included Kothis (feminine acting/ appearing and predominantly receptive partners 'in anal sex'), Panthis (masculine appearing, predominantly insertive partners) and Double-deckers (both insertive and receptive and often bisexual).

Results

Twenty two percent (46/210) of the sample reported any unprotected anal intercourse in the past three months, 8% (16/202) tested positive for HIV and 26% (55/210) had previously participated in an HIV prevention intervention. The mean age was 28.9 years (SD=7.83); MSM subpopulations included Kothi (25.7%), Panthi (37.6%) and Double-decker (36.7%). In a multivariable logistic-regression analysis controlling for age, MSM subpopulation, marital status, and religion, significant predictors of any unprotected anal intercourse included education (adjusted OR=0.54; p=0.009; such that more education was protective), not having previously participated in an HIV prevention program (adjusted OR=3.75; p=0.05), depression (adjusted OR=2.8;

p=0.02), weekly alcohol use (adjusted OR=3.56; p=0.07), and self efficacy (adjusted OR=0.40; p<0.0001; such that higher self efficacy was protective). In a multivariable logistic regression analysis controlling for age, MSM subpopulation, marital status, and religion, significant predictors of testing positive for HIV infection were: education (adjusted OR=0.53; p=0.05; such that more education was protective) and not currently living with parent(s) (adjusted OR=3.71; p =0.05).

Conclusions

Given the high prevalence of HIV among MSM and relatively low rate of participation in HIV intervention programs, efforts to reach hidden subpopulations of MSM in India are still needed. Such programs for MSM in India may need to address co-occurring psychosocial problems such as depression and lower self efficacy to maximize their chances of reducing risk.

[Contact person: Dr.Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]

Gender difference in sexual behaviour among people living with HIV in Chennai

Background

Risky sexual behaviour is usually the focus of HIV prevention programmes and little attention has been given to sexual behavior patterns among HIV-positive individuals. In order to ensure that people with HIV receive high quality sexual and mental health services, providers must have a comprehensive understanding of the issues and challenges faced by men and women with HIV.

Aim

- To understand the gender differences in sexual behaviour patterns among seropositive men and women

Methods

This was a descriptive cross sectional study on a cohort of 203 HIV-positive individuals (102 women and 101 men) attending outpatient clinics in the TRC and the STD clinic of the Government General Hospital, Chennai.

Results

Fifty three percent of the women were discontented with the sexual relationship with their spouse as compared to 23% of the men ($p < 0.001$). Thirty two of the 54 women who refused sex said that their spouses reacted violently to their refusal. More men than women reported having extramarital relationships. Men also reported unsafe sexual practices under the influence of alcohol.

Conclusions

The study findings project gender differences in sexual behaviour patterns among the HIV-positive respondents. Understanding these differences is important to plan gender based intervention strategies in order to ensure that people living with HIV have a better quality of life addressing their sexual concerns both within and outside of marriage. The findings will also help in advocacy and prevention programmes aimed at HIV-AIDS control.

[Contact person: Dr.Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]

Ongoing Studies

Health seeking behaviour and awareness of TB among migrants – brick kiln workers - a study from Tiruvallur district, Tamil Nadu

Background

The Model DOTS project was implemented in the Tiruvallur district, Tamil Nadu to study the feasibility and impact of the RNTCP. During the study it was found that there was a fairly large number of brick kiln workers who were a migrant population in this area. There was dearth of information with regard to their health seeking behaviour and management of TB. It was against this background that this study was planned.

Methods

This study was carried out in two phases. The first phase was to do a qualitative situation analysis of the profile of brick chambers and the brick kiln work structure. The list of brick kilns was obtained from the district collectorate. They were mapped geographically and a random sample was chosen. There were 170 villages with 450 brick kiln chambers. The investigators met the owners of the brick kilns at their general body meeting which is conducted once in three months. The brick kiln owners were briefed about the study and the importance of obtaining information which would help in the health care and management of their workers who are diagnosed with TB. The group offered their full cooperation to the study.

The study site included 170 villages with 450 brick kiln chambers. Eighty brick kiln chambers were randomly selected from these villages. The brick kiln workers, owners and other chamber staff which included supervisors and accountants were interviewed. A semi-structured interview guide to ensure uniformity of questions was prepared with questions pertaining to the health problems usually faced by the workers, the health care facilities accessed and nature and period of work.

Findings of the situational analysis

Tiruvallur district is one of the 33 districts in Tamil Nadu and houses a large number of the brick chambers due to the nature of soil that is suitable for bricks (Census 2001). Each chamber had around 100-150 workers, usually from Madurai, Villupuram and Thiruvannamalai districts. There were a few chambers which comprised exclusively of

workers from Andhra Pradesh and Orissa. The period of stay of the workers was usually between January to June and the workers stayed in one chamber for approximately 6 months after which they went back to their original place of stay. The majority of brick kiln workers accessed private care facilities for health related problems. One of the major reasons for this was that the brick kiln owners have an understanding with these private practitioners, and their consultation fees and medicines are paid by the owners. There was no policy for treatment of those with symptoms of TB or diagnosed with TB. The brick kiln owners said they had no problems in employing workers with TB or diagnosed with TB after being recruited by them and were also willing to have a DOTS centre in their brick kiln chambers. It is important therefore to gain more information of the profile of chest symptomatics, TB patients and their TB management if diagnosed with TB as this is a population that is mobile. The second phase of the study to cover these aspects is being planned.

[Contact person: Mrs.K.J. Jagannatha Rao (E-Mail ID: jaggarajamma@trcchennai.in)]

Community-based approach to designing an AIDS program for HIV-positive mothers in Chennai

Collaborative study with the UCLA - University of Los Angeles, USA

Background

In India, an increasing number of monogamous married women are becoming infected with HIV and the number of children infected with this deadly virus is on the increase. Mothers living with HIV-AIDS (MLH) carry a triple burden of being (a) HIV-infected, (b) being mothers of children who may or may not be positive themselves and (c) care givers to their HIV-infected spouses. These burdens pose huge challenges to MLH and need to be understood in order to plan effective intervention strategies.

Aim

- To explore the perceptions and needs of MLH in order to understand their health seeking behaviour patterns, fears about disclosure and issues related to stigma and discrimination

Methods

This was a qualitative study utilizing focus group discussions. The participants were HIV-infected mothers recruited from a large maternity hospital and STD clinic in Chennai, India. Each group comprised of 5-7 participants. The discussions are being carried out using a semi-structured focus group guide. Content analysis is done to determine common themes discussed among the groups. So far, 7 focus group discussions (FGD) have been done.

Results

Major concerns expressed by MLH during the FGDs have been discrimination by physicians and other health care workers which have been a major impediment in accessing quality health care. Concerns about disclosure have also been expressed.

The study is ongoing

[Contact person: Dr.Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]

A study of the care seeking behaviour of persons with chest symptoms from rural and urban areas in Tamil Nadu after implementation of the RNTCP (Funded by Model Dots Project)

Background

The TB control programme is based on passive case finding. It is therefore crucial to understand the health care seeking behaviour of chest symptomatics (CSs) to understand how they respond to their symptoms, their first point of consultation, delay in seeking care and problems faced if any. A study was carried out by the TRC prior to implementation of the RNTCP in 1997. One of the main findings of this study was that the first point of consultation was a private health care facility, and subsequently the patients shifted to other facilities due to dissatisfaction. After implementation of the RNTCP in 1999, since accessibility and availability of drugs improved at public health facilities. We therefore envisaged that there would be a change in the health care seeking behaviour patterns of CSs after implementation of the RNTCP. It was against this background that the study was planned.

Aim

- To find out the health care seeking pattern of the persons with chest symptoms after implementation of the RNTCP

Methods

This study is being conducted in two urban and two rural communities in Tamil Nadu, south India. Households are selected from the randomly selected streets. The heads of the selected households are contacted to find out “persons with chest symptoms”. It is proposed to cover a total of 600 CSs, 150 in each of the four communities. A semi-structured interview schedule is being used to collect data.

The study is ongoing.

[Contact person: Mrs. Niruparani Charles (E-Mail ID: nirupa@trcchennai.in)]

Perceptions of HIV-positive individuals on disclosure of their HIV status to their children

Background

With the introduction of ART and the need for life long treatment, HIV-infected parents are faced with the challenge on how to disclose their HIV status to their children.

Although HIV disclosure serves as a stressor, there is some evidence that suggests that it facilitates emotional support, which may lead to more effective coping and enhanced psychological adaptation. However, the fear of stigma and discrimination by the children of people living with HIV-AIDS (PLHAs) may inhibit people from disclosing their HIV status.

Aim

- To study the perception of HIV-positive individuals on disclosure of their HIV status to their children

Methods

This cross sectional study is being carried out covering PLHAs attending the out patient TRC clinics in General Hospital and Chetpet after obtaining their consent. In-depth interviews are done using a semi-structured interview schedule. So far, 75 patients have been recruited.

The study is ongoing.

[Contact person: Dr.Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]

A study on sexual behaviour among sero-discordant individuals

Background

There is dearth of information in India on sexual behaviour and sexual risk factors among HIV sero-discordant couples. Such information could help to understand the sexual behaviour patterns and sexual risk factors for HIV transmission which could be useful for health care providers in dealing with this group of individuals.

Aim

- To explore the sexual behaviour patterns among sero-discordant individuals

Methods

In-depth interviews are conducted among eligible patients after obtaining their consent. Patients are being recruited from outpatient clinics of TRC and TRC subcentres at Government Hospital and Vellore unit. So far, 70 interviews have been conducted.

The study is ongoing.

[Contact person: Dr.Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]

Parental and care givers perceptions on disclosure of HIV diagnosis to seropositive children

Background

One of the most difficult challenges for health care providers dealing with HIV-AIDS is dealing with seropositive children. The challenges vary from diagnosis, administering drugs, nutrition and most of all, how to disclose the HIV diagnosis to their children. This includes how and when to disclose, whether to disclose, who needs to disclose and how to deal with the problems after disclosure. In order to answer these questions, this study is being done as part of a clinical observational pediatric study done at the TRC.

Aim

- To study the perception of care givers on disclosure of HIV diagnosis to seropositive children

Methods

Children are referred to the TRC clinics from various government hospitals, institutions and NGOs dealing with children. The children are accompanied by either their parents or care givers depending on where they come from. The respondents for this study are either the parents or the care givers who are enrolled to the study after obtaining their consent. A semi-structured interview schedule is being used to elicit data. So far, 50 care givers have been interviewed.

The study is ongoing.

[Contact person: Mrs. Meenalochani Dilip (E-Mail ID: meenudilip@trcchennai.in)]

A study on quality of life among HIV-TB patients on ART

This study is part of a controlled clinical trial to evaluate the safety and efficacy of two different once daily ART regimens along with ATT in patients with HIV-1 and TB. All patients enrolled to this study are considered eligible if they consent to being part of the study. The WHO-QOL BREF questionnaire is used to measure quality of life at 0, 1 year and 2 year intervals. The study will throw light on factors that influence QOL among HIV-TB patients on different regimens of ART. So far, 47 patients have been enrolled.

The study is ongoing.

[Contact person: Dr. Beena Thomas (E-Mail ID: beenathomas@trcchennai.in)]