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February HIV/AIDS Journal Articles

AFRICA

6420

"Food Insufficiency Is Associated with High-Risk Sexual Behavior among Women in Botswana and Swaziland"

Location:

AA VERTICAL FILE - AFRICA - AF 41

Publication Type:

JOURNAL ARTICLE (ONLINE)

by Weiser1, S D et al

PLOS MEDICINE

Volume: 4 Issue: 10 Day: Month: October Year: 2007 Page numbers: pp 1589-1598

Subjects:

1. AFRICA 2. WOMEN 3. POVERTY 4. RISK BEHAVIOUR

Abstract:

Both food insufficiency and HIV infection are major public health problems in sub-Saharan Africa, yet the impact of food insufficiency on HIV risk behavior has not been systematically investigated. We tested the hypothesis that food insufficiency is associated with HIV transmission behavior. We found that food insufficiency is an important risk factor for increased sexual risk-taking among women in Botswana and Swaziland. Targeted food assistance and income generation programs in conjunction with efforts to enhance women's legal and social rights may play an important role in decreasing HIV transmission risk for women.

COMMUNITY DEVELOPMENT

6429

"Involving HIV-positive people in policy and service development: Recent experiences in England"

Location:

AA VERTICAL FILE - COMMUNITY DEVELOPMENT - CD 17

Publication Type:

JOURNAL ARTICLE

by Maxwell, C

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 72-79

Subjects:

1. HIV POSITIVE PEOPLE 2. POLICY

Abstract:

Although the 'Greater Involvement of People Living with or Affected by HIV/AIDS' (GIPA) principle was first articulated over a decade ago (UNAIDS, 1999), relatively few studies have examined the extent to which it is being implemented. A study was undertaken in three areas of England to establish the types of user involvement mechanisms in place for HIV-positive people to influence service and policy development. Drawing on group discussions with 38 people living with HIV and six HIV professionals across the three geographical research sites, as well as interviews with eight professionals with expertise in this area, this paper illustrates variability in opportunities for involvement. Also identified are a range of (innovative) methods for facilitating HIV-positive people's greater participation in service planning and delivery, as well as some of the challenges encountered

by people living with HIV and service providers when implementing GIPA. The paper concludes by identifying some specific strategies for improving user involvement in HIV service provision.

DISCRIMINATION

6413

"Associations between stigmatization toward HIV-related vulnerable groups and similar attitudes toward people living with HIV/AIDS: Branches of the same tree?"

Location:

AA VERTICAL FILE - DISCRIMINATION - DIS 35

Publication Type:

JOURNAL ARTICLE

by Lau, J T F et al

AIDS CARE

Volume: 19 Issue: 10 Day: Month: November Year: 2007 Page numbers: pp 1230-1240

Subjects:

1. HIV POSITIVE PEOPLE 2. SEX WORKERS 3. MEN WHO HAVE SEX WITH MEN
4. INTRAVENOUS DRUG USERS 5. STIGMATIZATION 6. CHINA

Abstract:

This study tested the hypothesis that stigmatization toward people living with HIV/AIDS (PLWHA) was associated with stigmatization toward different vulnerable groups, including men who have sex with men (MSM), injecting drug users (IDUs), female sex workers (FSW) and their clients (CFSW). A number of scales and indicators were constructed for the purpose: the four Overall Stigmatization Scale for a Vulnerable Group (OSSVG) and the five Dimensional Stigmatization Scale (DSS) each measuring different dimensions of stigmatization toward the four vulnerable groups, together with four indicators measuring stigmatization toward PLWHA. A random sample of 2,008 Hong Kong Chinese adults aged 18-50 years in the general population were interviewed by telephone. Of these respondents, 22.8- 76.8% perceived that FSW, CFSW, MSM and IDU were pathological and 42-82.2% perceived them as immoral; 74.7% believed that PLWHA are promiscuous. Furthermore, the four OSSVG and the five DSS scales were inter-correlated with one another (Spearman coefficient = 0.11-0.67) and most of them were significantly associated with the four PLWHA stigmatization indicators (Odds Ratio = 1.25-4.27). Other factors were associated with the OSSVG and DSS scores (e.g. age, marital status, religion affiliation, education level, income and perceived severity of the HIV problem in Hong Kong). Campaigns for removing stigmatization toward these vulnerable groups are required in order to reduce stigmatization toward PLWHA. Stigmatization toward FSW and their clients might have been over-looked. The removal of the public's blame on these groups for spreading HIV may be useful. The impact of HIV prevalence of a vulnerable group onto the associations between stigmatization toward that particular group and PLWHA warrants investigation.

DRUGS (RECREATIONAL)

6417

"Recreational drug use does not adversely affect CD4 cell counts"

Location:

AA VERTICAL FILE - DRUGS (RECREATIONAL) - DR 56

Publication Type:
JOURNAL ARTICLE (ONLINE)
by Bernard, E J
AIDSMAP

Volume: Issue: Day: 16th Month: January Year: 2008 Page numbers:

Subjects:

1. HIV PROGRESSION 2. DRUG USE 3. CD4 COUNT

Abstract:

Use of the recreational drugs, cannabis, cocaine, poppers, or amphetamines, does not adversely affect the number or percentage of CD4 or CD8 cells in either HIV-positive or HIV-negative gay men, according to data from the Multicenter AIDS Cohort Study (MACS) published online on January 3rd in the journal Drug and Alcohol Dependence.

GAY MEN

6410

"Elevated Risk for HIV Infection among Men Who Have Sex with Men in Low- and Middle-Income Countries 2000–2006: A Systematic Review"

Location:

AA VERTICAL FILE - GAY MEN - GM 36

Publication Type:
JOURNAL ARTICLE (ONLINE)
by Baral, Stefan et al
PLOS MEDICINE

Volume: 4 Issue: 12 Day: Month: December Year: 2007 Page numbers: e339

Subjects:

1. MEN WHO HAVE SEX WITH MEN 2. SEROPREVALENCE 3. GLOBAL EPIDEMIC

Abstract:

Background

Recent reports of high HIV infection rates among men who have sex with men (MSM) from Asia, Africa, Latin America, and the former Soviet Union (FSU) suggest high levels of HIV transmission among MSM in low- and middle-income countries. To investigate the global epidemic of HIV among MSM and the relationship of MSM outbreaks to general populations, we conducted a comprehensive review of HIV studies among MSM in low- and middle-income countries and performed a meta-analysis of reported MSM and reproductive-age adult HIV prevalence data.

Conclusions

MSM have a markedly greater risk of being infected with HIV compared with general population samples from low- and middle-income countries in the Americas, Asia, and Africa. ORs for HIV infection in MSM are elevated across prevalence levels by country and decrease as general population prevalence increases, but remain 9-fold higher in medium–high prevalence settings. MSM from low- and middle-income countries are in urgent need of prevention and care, and appear to be both understudied and underserved.

HEPATITIS

6424

"Hepatitis B"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 28

Publication Type:

FACTSHEET

AFAO BRIEFING PAPER Australian Federation of AIDS Organisations

Volume: Issue: Day: Month: January Year: 2008 Page numbers:

Subjects:

1. HEPATITIS B 2. EPIDEMIOLOGY(AUST)

Abstract:

The Hepatitis B virus (HBV) is a virus transmitted in blood, semen and saliva. It was discovered in 1965 in Australia (it was originally named the Australia Antigen after its discovery in Indigenous Australians). Currently, between 90,000 and 160,000 people in Australia are chronically infected with HBV. This paper was created after a discussion on the proposal for a National Hepatitis B Strategy at the AFAO AGM in November 2007. Its purpose is to provide a brief background into the nature and epidemiology of Hepatitis B to assist in further discussion on a Hepatitis B Strategy.

6432

"Experience of hepatitis C testing among injecting drug users in Sydney, Australia"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 29

Publication Type:

JOURNAL ARTICLE

by Day, C A et al

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 116-123

Subjects:

1. HEPATITIS C 2. TESTING 3. INJECTING DRUG USE 4. INTRAVENOUS DRUG USERS 5. AUSTRALIA

Abstract:

Testing injecting drug users (IDUs) for HIV and hepatitis C virus (HCV) provides a useful opportunity for health promotion, risk-reduction assessment and counselling, and increases opportunities for treatment assessment, yet little is known about IDUs' experience of testing. This study aimed to examine the experiences of testing among IDUs recruited through primary healthcare and drug treatment services. Almost all the 229 participants recruited had been previously tested for HIV (96%) and HCV (97%), a median of five and four times respectively. Reasons for seeking testing were similar for both HIV and HCV, the most common being to protect others (72 and 74%, respectively), blood/needle exposure (66 and 70%, respectively) and to receive early treatment (66%, both). The most common locations for testing were general medical practices (GPs) (53%), specialised clinics (45%) and methadone clinics (43%). Preferred locations were similar for HIV and HCV testing: methadone clinics (47 and 48%, respectively), GPs (42%, both), specialised clinics (32%, both). The most common reasons for delaying testing were being anxious about waiting for results (66%), scared or afraid of finding out results (65%) and having trouble keeping appointments (64%). The majority of participants (HIV 62%; HCV 59%) reported that they would prefer pre-test counselling to be delivered in person rather than receiving written information and would prefer test results to be delivered face-to-face (HIV 83%; HCV 80%). High prevalence of testing suggests good uptake and high acceptability among this population in Australia. Specialised services for drug users such as methadone clinics and primary healthcare are suitable locations to provide access to testing.

6418

"CD4 cell count is no predictor of hepatitis C treatment success"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 30

Publication Type:
ARTICLE (ONLINE)

by Dawson, R
AIDSMAP

Volume: Issue: Day: 18th Month: January Year: 2008 Page numbers:

Subjects:

1. HEPATITIS C 2. HIV 3. CD4 COUNT 4. TREATMENTS

Abstract:

For those coinfecting with HIV and the Hepatitis C virus (HCV), having a higher CD4 cell count when you start HCV treatment with pegylated interferon plus ribavirin does not improve the probability of treatment success, according to a French study published in the January 1st edition of the Journal of Acquired Immune Deficiency Syndromes.

HIV RELATED CONDITIONS

6411

"Unhealthy behaviours for self-management of HIV-related peripheral neuropathy"

Location:

AA VERTICAL FILE - HIV RELATED CONDITIONS - HRC 47

Publication Type:
JOURNAL ARTICLE

by Nicholas, P K et al
AIDS CARE

Volume: 19 Issue: 10 Day: Month: November Year: 2007 Page numbers: pp
1266-1273

Subjects:

1. HIV-RELATED CONDITIONS 2. HIV POSITIVE PEOPLE-SELF CARE
3. TREATMENTS-SIDE EFFECTS 4. DRUG USE

Abstract:

The prevalence of peripheral neuropathy is frequent in HIV disease and is often associated with antiretroviral therapy. Unhealthy behaviours, particularly substance-use behaviours, are utilized by many HIV-positive individuals to manage neuropathic symptoms. As part of a larger study on self-care for symptoms in HIV disease, this study analyzed the prevalence and characteristics of unhealthy behaviours to self-manage peripheral neuropathy in HIV disease. Sociodemographic and disease-related correlates and unhealthy behaviours were examined in a convenience sample of 1,217 respondents who were recruited from data collection sites in several US cities, Puerto Rico, Colombia, and Taiwan. Results of the study indicated that respondents with peripheral neuropathy (n=450) identified a variety of unhealthy self-care behaviours including injection drug use, oral drug use, smoking cigarettes and alcohol ingestion. Specific unhealthy behaviours that participants reported to alleviate peripheral neuropathy included use of marijuana (n=67), smoking cigarettes (n=139), drinking alcohol (n=81) and street drugs (n=30). A subset of those individuals (n=160), who identified high levels of neuropathy (greater than five on a scale of 1-10), indicated significantly higher use of amphetamines and injection drug use in addition to alcohol use and cigarette smoking. For participants from Norway, substance use (using alcohol: 56%) was one of the most frequent self-management strategies. Implications for clinical practice include assessment and

education of persons with HIV for self-care management of the complex symptom of peripheral neuropathy.

MEDIA ISSUES

6416

"UCSF apologises for 'misleading' multidrug-resistant MRSA story"

Location:

AA VERTICAL FILE - MEDIA ISSUES - MI 7

Publication Type:

JOURNAL ARTICLE (ONLINE)

by Bernard, E J

AIDSMAP

Volume: Issue: Day: 22nd Month: January Year: 2008 Page numbers:

Subjects:

1. INFECTIOUS DISEASES 2. MEN WHO HAVE SEX WITH MEN 3. MEDIA RESPONSES

Abstract:

In response to headlines such as "A new gay disease?" (Newsweek) and "Strain of superbug 'may be new HIV'" (Metro), the University of California at San Francisco's (UCSF) Department of Public Affairs has issued an apology "regret[ting] that our recent news report about an important population-based study on MRSA USA300 with public health implications contained some information that could be interpreted as misleading."

MENTAL HEALTH

6414

"The effect of perceived and actual social support on the mental health of HIV-positive persons"

Location:

AA VERTICAL FILE - MENTAL HEALTH - MH 28

Publication Type:

JOURNAL ARTICLE

by McDowell, T L ; Serovich, J M

AIDS CARE

Volume: 19 Issue: 10 Day: Month: November Year: 2007 Page numbers: pp 1223-1229

Subjects:

1. HIV POSITIVE PEOPLE-PSYCHOLOGICAL ASPECTS 2. MENTAL HEALTH 3. INTERPERSONAL RELATIONS

Abstract:

The purpose of this paper is to compare the ways in which perceived and actual social support affect the mental health of gay men, straight or bisexual men, and women living with HIV/AIDS. Participants included 125 women and 232 men with an HIV-positive or AIDS diagnosis involved in three larger investigations of HIV, disclosure and mental health. Results suggest each sub-group experienced perceived social support as significantly predictive of better mental health while the effect of actual social support was minimal.

6430

"HIV disclosure among adults living with HIV"

Location:

AA VERTICAL FILE - MENTAL HEALTH - MH 29

Publication Type:

JOURNAL ARTICLE

by Arnold, E Mayfield

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 80-92

Subjects:

1. HIV POSITIVE PEOPLE
2. DISCLOSURE OF HIV POSITIVE STATUS
3. IDENTITY
4. INTERPERSONAL RELATIONS

Abstract:

Research on disclosure among heterosexual adult person(s) living with HIV (PLH) was reviewed, omitting disclosure of parental HIV to children. Disclosure has been studied within five additional relational contexts: with partners, family members, friends, healthcare professionals and in work settings. Disclosure is higher among women than men, among Latino and white compared to African-American families, and among younger compared to older HIV-positive adults. Most PLH disclose to their sexual partners and family members, yet there is a significant minority who do not disclose. Similarly, rates of disclosure to employers range from 27-68%, suggesting broad variability in perceived consequences of employment disclosures. Of concern, 40% of PLH do not consistently disclose to their healthcare professionals. Rather than examine HIV disclosures in the context of relationships, it is possible to understand disclosures around personal identity. Disclosure decisions are often made to tell everyone (making HIV status a central attribute of one's identity), no one (requiring strategies for securing social support while remaining anonymous) or some people (requiring strategic decisions based on context). Given that disclosure decisions are central to personal identity, future data on disclosure and interventions designed to increase disclosure or comfort with disclosure must focus on communication strategies adopted by PLH to present a coherent identity.

PREVENTION

6409

"Space: The New Frontier in HIV Prevention For Young Men Who Have Sex With Men"

Location:

AA VERTICAL FILE - PREVENTION - PV 44

Publication Type:

JOURNAL ARTICLE

by Easton, Delia et al

AIDS EDUCATION AND PREVENTION

Volume: 19 Issue: 6 Day: Month: December Year: 2007 Page numbers: pp 465-478

Subjects:

1. MEN WHO HAVE SEX WITH MEN
2. GAY YOUTH
3. PREVENTION AND CONTROL
4. COMMUNITY DEVELOPMENT

Abstract:

Young men who have sex with men (MSM) in urban areas of the United States continue to be vulnerable to HIV infection. Qualitative data collected with participants in a community level HIV intervention in West Hollywood and Orange County, California, suggest that space—both actual physical space and the concept of having space—should be an integral part of an HIV prevention intervention for young MSM. Having such spaces appears to contribute to youth

sense of empowerment and efficacy and foster community building, all important components of an effective HIV prevention. Data were drawn from a qualitative research sample of 73. Through narratives, young men describe specific characteristics of the space necessary for effective HIV intervention, including mentoring and supportive staff, tolerant and like-minded peers, information exchange, opportunities for strengthening self-esteem, and a sense of collaborative community invested in social change.

6427

"A process evaluation of the implementation of a computer-based, health provider-delivered HIV-prevention intervention for HIV-positive men who have sex with men in the primary care setting"

Location:

AA VERTICAL FILE - PREVENTION - PV 45

Publication Type:

JOURNAL ARTICLE

by Chen, H T

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 51-60

Subjects:

1. PREVENTION AND CONTROL
2. COUNSELLING
3. HEALTH CARE WORKERS
4. COMPUTERS

Abstract:

There is increasing interest in using healthcare providers to deliver HIV-prevention services to their patients. Unfortunately, lack of counselling skills and time constraints within busy clinics serve as barriers to such efforts. The Providers Advocating for Sexual Health Initiative (PASHIN) study used state-of-the-art computer technology to assess each participant's risk behaviours and to determine the patient's readiness for changing each behaviour. The computer synthesized the participant-entered data, determined the targeted risk behaviour and printed a behavioural theory-based provider advice sheet and a 3-point patient prescription for the targeted risk behaviour. Since the intervention does not require providers to spend time performing a detailed sexual-risk assessment and it does not require providers to have received extensive counselling training, it has the potential to minimize some of the barriers associated with provider-delivered interventions. Thus, the purpose of this process evaluation was to assess how the PASHIN intervention was implemented in the field, including issues such as the fidelity of implementation and health providers' views on and experience with implementing the intervention. Overall, the results demonstrated that the computer-based, provider-delivered intervention was successfully delivered by providers within the context of regularly scheduled treatment sessions with HIV-positive men who have sex with men (MSM) patients. The majority of providers (79.4%) and patients (83.5%) reported that the quality of HIV-prevention services delivered during these sessions was 'good'. The majority of the providers also reported that they had received adequate training, felt more confident in communicating HIV-prevention issues with their patients and provided more HIV-prevention counselling to their patients, due to the project. However, the experience of delivering HIV-prevention counselling during an 18-month period did not appear to change providers' attitudes toward a provider-delivered HIV-prevention intervention nor their belief in the effectiveness of HIV prevention in general. Future studies should focus on how to enhance providers' acceptance and commitment to delivering HIV-prevention counselling to their patients during the clinic visit.

6431

"Knowledge and acceptability of alternative HIV prevention bio-medical products among MSM who bareback"

Location:

AA VERTICAL FILE - PREVENTION - PV 46

Publication Type:

JOURNAL ARTICLE

by Nodin, N et al

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 106-115

Subjects:

1. HIV TRANSMISSION 2. MICROBICIDES 3. VACCINES 4. POST EXPOSURE PROPHYLAXIS 5. MEN WHO HAVE SEX WITH MEN 6. ANAL SEX

Abstract:

Condom use is the best available strategy to prevent HIV infection during sexual intercourse. However, since many people choose not to use condoms in circumstances in which HIV risk exists, alternatives to condom use for HIV prevention are needed. Currently there are several alternative bio-medical HIV-prevention products in different stages of development: microbicides, vaccines, post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP). Seventy-two men who have sex with men (MSM) who took part in a study on Internet use and intentional condomless anal intercourse were asked about these four products during a semi-structured interview. The questions explored knowledge and acceptability of all the products and willingness to participate in microbicide and vaccine trials. Qualitative analysis of the data suggests that these men had virtually no knowledge of PrEP, very limited knowledge of microbicides, some information about PEP and considerably more knowledge about vaccines. Reactions towards the products were generally positive except for PrEP, for which reactions were polarized as either enthusiastic or negative. With the exception of PrEP, many men expressed willingness to use the products in the future. Most men would be willing to participate in trials for microbicides and vaccines if given basic reassurances. Concerns over negative side effects and preoccupation with possible infection were some of the motives given for non-willingness to participate in a vaccine trial. These results should inform the development of future trials of biomedical prevention products.

PRISONS

6428

"Psychiatric disorders, HIV infection and HIV/hepatitis co-infection in the correctional setting"

Location:

AA VERTICAL FILE - PRISONS - PRI 22

Publication Type:

JOURNAL ARTICLE

by Baillargeon, J G

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 124-129

Subjects:

1. PRISONS 2. MENTAL HEALTH 3. HIV 4. HEPATITIS C

Abstract:

Psychiatric disorders such as bipolar disorder, schizophrenia and depression have long been associated with risk behaviors for HIV, hepatitis C virus (HCV) and

hepatitis B virus (HBV). The US prison population is reported to have elevated rates of HIV, hepatitis and most psychiatric disorders. This study examined the association of six major psychiatric disorders with HIV mono-infection, HIV/HCV co-infection and HIV/HBV co-infection in one of the nation's largest prison populations. The study population consisted of 370,511 Texas Department of Criminal Justice inmates who were incarcerated for any duration between January 1, 2003 and July 1, 2006. Information on medical conditions and sociodemographic factors was obtained from an institution-wide electronic medical information system. Offenders diagnosed with HIV mono-infection, HIV/HCV, HIV/HBV and all HIV combined exhibited elevated rates of major depression, bipolar disorder, schizophrenia, schizoaffective disorder, non-schizophrenic psychotic disorder and any psychiatric disorder. In comparison to offenders with HIV mono-infection, those with HIV/HCV co-infection had an elevated prevalence of any psychiatric disorder. This cross-sectional study's finding of positive associations between psychiatric disease and both HIV infection and hepatitis co-infection among Texas prison inmates holds both clinical and public health relevance. It will be important for future investigations to examine the extent to which psychiatric disorders serve as a barrier to medical care, communication with clinicians and adherence to prescribed medical regimens among both HIV-mono-infected and HIV/hepatitis-co-infected inmates.

SEX WORKERS

6423

"Working girls in Melbourne brothels"

Location:

AA VERTICAL FILE - SEX WORKERS - SW

Publication Type:

NEWSLETTER

by Resourcing Health and Education in the Sex Industry (RhED)

RHED Resourcing Health and Education in the Sex Industry (RhED)

Volume: Issue: 13 Day: Month: Year: 2008 Page numbers:

Subjects:

1. SEX WORK(AUST) 2. SEX WORKERS 3. AUSTRALIA

Abstract:

This conference poster presents a summary of results of a survey of Melbourne brothel workers and includes statistics on age, marital status, education and working patterns.

TESTING

6425

"Prevalence and correlates of HIV testing in a multi-site sample of young men who have sex with men"

Location:

AA VERTICAL FILE - TESTING - TES 24

Publication Type:

JOURNAL ARTICLE

by Sumartojo, E et al

AIDS CARE

Volume: 20 Issue: 1 Day: Month: January Year: 2008 Page numbers: pp 1-14

Subjects:

1. TESTING 2. MEN WHO HAVE SEX WITH MEN 3. YOUTH-HIV TESTING

Abstract:

This study assessed HIV testing among 2,621 urban young men who have sex with men (YMSM). Of these, 77% were men of colour, 30% reported recent unprotected anal intercourse (UAI), 22% had never tested for HIV and 71% had not tested recently. Ever testing was associated with older age (OR=1.28), being employed (OR=1.34), exposure to more types of HIV preventions (linear trend $p=0.02$), sex with a main partner (OR=1.92), sex with a non-main partner (OR=1.36), UAI with a non-main partner (OR=0.53), UAI in the last three months (OR=1.32), knowing a comfortable place for testing (OR=5.44) and social support (OR=1.47). Rates of ever testing increased with behavioural risk with main partners; rates were lowest for men reporting high-risk with non-main partners. Recent testing was associated with greater numbers of HIV-prevention exposures (linear trend $p<0.001$), sex with a main partner (OR=1.30), knowing a comfortable place for testing (OR=2.31) and social support (OR=1.23). Findings underscore the urgency of promoting testing among YMSM, point to components for the recruitment and retention of young MSM of colour in testing programmes and highlight the need for a theory-based approach to intervention development.

TRANSMISSION

6412

"Balance of evidence continues to show: undetectable viral load in blood does not equal zero infection risk"**Location:****AA VERTICAL FILE - TRANSMISSION - TRM 42**

Publication Type:

JOURNAL ARTICLE (ONLINE)

by Carter, M

AIDS MAP

Volume: Issue: Day: 18th Month: January Year: 2008 Page numbers:**Subjects:**

1. HIV TRANSMISSION 2. VIRAL LOAD 3. BLOOD 4. SEMEN

Abstract:

The level of HIV viral load in blood and semen is related, but studies looking at the correlation between HIV in blood and semen have yielded a wide variety of results, according to a review article analysing the results of 19 studies examining this issue published in the January 2008 edition of Sexually Transmitted Diseases. The review article's authors found that the association between viral load in blood and semen was affected by a number of factors, with successful antiretroviral therapy strengthening the association and sexually transmitted infections weakening it.

TREATMENTS

6426

"HIV patient insight on adhering to medication: a qualitative analysis"**Location:****AA VERTICAL FILE - TREATMENTS - TRE 124**

Publication Type:

JOURNAL ARTICLE

by Beusterien, K M et al

AIDS CARE

Volume: 20 Issue: 2 Day: Month: February Year: 2008 Page numbers: pp 251-

259

Subjects:

1. HAART 2. COMPLIANCE

Abstract:

Research on HIV medication adherence has relied mainly on quantitative methods. The objective of this study was to explore factors associated with adherence from the HIV-infected patient's perspective. Six focus groups were convened with treatment-experienced HIV-positive individuals. The discussions focused on issues that make it easy or difficult to adhere to HIV regimens. Thirty-five patients participated in the focus groups, which were conducted in Washington, D.C., and Los Angeles. The mean age was 48; 66% were male; 63% were black; and 40% contracted HIV through heterosexual contact. Six major themes emerged from the data that influenced adherence to medication: regimen complexity/medication features (including number of pills), lifestyle fit, emotional impacts (including worry, anger, stress and anxiety), side effects, medication effectiveness, and communication (including information from friends, physicians, and published sources). The data informed a conceptual framework, illustrating the possible interactions among these themes that can potentially be used by clinicians when discussing HIV treatment options with patients. This is potentially one of the first focus group studies concentrating on HIV medication adherence. The findings highlight specific factors that should be considered when trying to improve adherence and may be helpful in clinical decision-making.

6419

"Treatment Interruptions Lower Quality of Life in SMART Trial"

Location:

AA VERTICAL FILE - TREATMENTS - TRE 125

Publication Type:

ARTICLE (ONLINE)

POZ

Volume: Issue: Day: 29th Month: January Year: 2008 Page numbers:

Subjects:

1. TREATMENTS 2. COMPLIANCE 3. CD4 COUNT 4. VIRAL LOAD 5. HIV PROGRESSION

Abstract:

HIV-positive people report that the quality of their lives is better when they're on treatment, compared with when they're taking a drug holiday, according to new data from a sub-study of a large international clinical trial published in the February 1 issue of the Journal of Acquired Immune Deficiency Syndromes (JAIDS).

WOMEN

6415

"The impact of mental health, sexual desire and sexual importance on the sexual behaviour of women with HIV"

Location:

AA VERTICAL FILE - WOMEN - WOM 69

Publication Type:

JOURNAL ARTICLE

by Craft, S M ; Serovich, J M

AIDS CARE

Volume: 19 Issue: 10 Day: Month: November Year: 2007 Page numbers: pp

1219-1222

Subjects:

1. WOMEN WITH HIV 2. MENTAL HEALTH 3. SEXUAL BEHAVIOUR

Abstract:

HIV infection is increasing among women in the US, particularly among racial minority groups. The hypothesized theoretical model considered the extent to which indicators of depression, sexual desire and sexual importance would predict whether sexual behaviour would occur for a sample of 96 women with HIV. The results of this study supported previous findings that depression significantly decreases the chances that sexual behaviour will occur, while sexual desire and sexual importance moderately increased the chance occurrence of this variable. The results of this study suggested that the mental health of women with HIV significantly affects whether they engage in sexual behaviour. HIV-prevention and intervention models need to be more inclusive of those factors that are most salient in the sexual relationships of women. Moreover, additional research is needed to examine the importance of maintaining sexual behaviour for women with HIV.

6421

"When Do HIV-Infected Women Disclose Their HIV Status to Their Male Partner and Why? A Study in a PMTCT Programme, Abidjan"

Location:

AA VERTICAL FILE - WOMEN - WOM 70

Publication Type:

JOURNAL ARTICLE (ONLINE)

by Brou, H

PLOS MEDICINE

Volume: 4 Issue: 12 Day: Month: December Year: 2007 Page numbers: PP 1912-1920

Subjects:

1. WOMEN WITH HIV 2. DISCLOSURE OF HIV POSITIVE STATUS

Abstract:

In Africa, women tested for HIV during antenatal care are counselled to share with their partner their HIV test result and to encourage partners to undertake HIV testing. We investigate, among women tested for HIV within a prevention of mother-to-child transmission of HIV (PMTCT) programme, the key moments for disclosure of their own HIV status to their partner and the impact on partner HIV testing. We found that in PMTCT programmes, specific psychosocial counselling and support should be provided to women during the key moments of disclosure of HIV status to their partners (end of pregnancy, weaning, and resumption of sexual activity). This support could contribute to improving women's adherence to the advice given to prevent postnatal and sexual HIV transmission.

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1. NURSING CARE-GUIDELINES 2. HIV POSITIVE PEOPLE-HEALTH CARE NEEDS

Abstract:

The Royal District Nursing Service of SA Inc (RDNS) provides community nursing services to People Living With HIV/AIDS (PLWHA) and has done so since the late 1980's. Two specialist community nurses provide this care, underpinned by the broader nursing service. The support and home-based care provided to clients by the HIV portfolio is based on a foundation of district nursing principles and standards of care, together with expertise gathered over time. However, a specific model of care articulating the detail, philosophy and core principles of the care had not been developed. In this newsletter we report on a project that developed a person-centred model of care and philosophy to guide RDNS HIV/AIDS community nursing care.

