

## ABSTRACT

The study analyzed the factors that determine self disclosure of HIV sero-status to sexual partners by sero-positive adults, in Central division, Huruma location, Nairobi, Kenya. New treatment regimens in HIV management have led to the rapid growth in the numbers of People living with HIV (PLWHIV). Disclosure rates among PLWHIV are low which limits protection of their sexual partners and their ability to access necessary emotional support resulting in early progression to death. The study was a descriptive survey with a sample of 232 PLWHIV drawn from HIV support groups in the area selected through non-proportionate systematic random sampling. Multiple logistic regression and Chi-square tests were used to establish the determinants and relationships of self disclosure of seropositive status by PLWHIV to sexual partners. Data was collected using interviewer administered questionnaires, key informant interviews and Focus Group Discussions (FGDs). Quantitative data was analyzed generating descriptive and inferential statistics. Qualitative data was analyzed using content analysis with the use of verbatim quotes to highlight the respondents' voices. Study results showed that the general HIV disclosure rates were high (92.2%), but only 50.5% had disclosed to a sexual partner. Consistent disclosure to all sexual partners was low (29%) and this was mainly involved regular partners. Generally, PLWHIV had a positive perception of HIV self disclosure. Results point to high levels of anticipated stigma and discrimination from all support structures by PLWHIV. However, only 48% of PLWHIV recorded high levels of enacted stigma and discrimination. Chi-square results revealed a significant relationship between HIV self disclosure and PLWHIVs'; financial constraints ( $p=0.003$ ); employment status ( $p=0.000$ ); use of protection in last sexual encounter ( $p=0.000$ ); type of sexual partner ( $p=0.024$ ); discussion on safe sex with partner ( $p=0.039$ ); partners' sero-status ( $p=0.011$ ); method of finding out sero-status ( $p=0.039$ ); gender power control in relations ( $p=0.010$ ); disclosure to friends ( $p=0.000$ ); enacted stigma from friends: isolation, being spoken ill of ( $P=0.011$  and  $p=0.006$ ) respectively; enacted stigma from workplace ( $P=0.011$ ); roles of women in sexual relations ( $p=0.000$ ); communities view of HIV ( $p=0.019$ ); exclusion from rite of wife inheritance ( $p=0.002$ ) and perception of workplace support ( $P=0.004$ ). Regression results revealed that employment status ( $p=0.001$ ); type of sexual partner ( $p=0.002$ ); financial constraint ( $p=0.002$ ); gender power control in sexual relations ( $p=0.011$ ); enacted stigma and discrimination from workplace ( $p=0.002$ ) and friends ( $p=0.001$ ); exclusion from rite of wife inheritance ( $p=0.002$ ) and expectation of domestic violence ( $p=0.005$ ) significantly determined HIV self disclosure to sexual partners by PLWHIV. It was concluded that PLWHIV anticipated high levels of enacted stigma and discrimination from their social networks after disclosure. This acted as a barrier to HIV self disclosure. However, these fears did not translate into high levels of actual enacted stigma and discrimination. The study recommended that initiating income generating activities for the PLWHIV, consistent training and counseling on the management of self stigma and promotion of strategies of living positively with the disease can promote effective self disclosure of sero-positive status to sexual partners.

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The study analyzed the factors that determine self disclosure of HIV sero-status to sexual partners by sero-positive adults, in Central division, Huruma location, Nairobi, Kenya. New treatment regimens in HIV management have led to the rapid growth in the numbers of People living with HIV (PLWHIV). Disclosure rates among PLWHIV are low which limits protection of their sexual partners and their ability to access necessary emotional support resulting in early progression to death. The study was a descriptive survey with a sample of 232 PLWHIV drawn from HIV support groups in the area selected through non-proportionate systematic random sampling. Multiple logistic regression and Chi-square tests were used to establish the determinants and relationships of self disclosure of sero-positive status by PLWHIV to sexual partners. Data was collected using interviewer administered questionnaires, key informant interviews and Focus Group Discussions (FGDs). Quantitative data was analyzed generating descriptive and inferential statistics. Qualitative data was analyzed using content analysis with the use of verbatim quotes to highlight the respondents' voices. Study results showed that the general HIV disclosure rates were high (92.2%), but only 50.5% had disclosed to a sexual partner. Consistent disclosure to all sexual partners was low (29%) and this was mainly involved regular partners. Generally, PLWHIV had a positive perception of HIV self disclosure. Results point to high levels of anticipated stigma and discrimination from all support structures by PLWHIV. However, only 48% of PLWHIV recorded high levels of enacted stigma and discrimination. Chi-square results revealed a significant relationship between HIV self disclosure and PLWHIVs'; financial constraints ( $p=0.003$ ); employment status ( $p=0.000$ ); use of protection in last sexual encounter ( $p=0.000$ ); type of sexual partner ( $p=0.024$ ); discussion on safe sex with partner ( $p=0.039$ ); partners' sero-status ( $p=0.011$ ); method of finding out sero-status ( $p=0.039$ ); gender power control in relations ( $p=0.010$ ); disclosure to friends ( $p=0.000$ ); enacted stigma from friends: isolation, being spoken ill of ( $P=0.011$  and  $p=0.006$ ) respectively; enacted stigma from workplace ( $P=0.011$ ); roles of women in sexual relations ( $p=0.000$ ); communities view of HIV ( $p=0.019$ ); exclusion from rite of wife inheritance ( $p=0.002$ ) and perception of workplace support ( $P=0.004$ ). Regression results revealed that employment status ( $p=0.001$ ); type of sexual partner ( $p=0.002$ ); financial constraint ( $p=0.002$ ); gender power control in sexual relations ( $p=0.011$ ); enacted stigma and discrimination from workplace ( $p=0.002$ ) and friends ( $p=0.001$ ); exclusion from rite of wife inheritance ( $p=0.002$ ) and expectation of domestic violence ( $p=0.005$ ) significantly determined HIV self disclosure to sexual partners by PLWHIV. It was concluded that PLWHIV anticipated high levels of enacted stigma and discrimination from their social networks after disclosure. This acted as a barrier to HIV self disclosure. However, these fears did not translate into high levels of actual enacted stigma and discrimination. The study recommended that initiating income generating activities for the PLWHIV, consistent training and counseling on the management of self stigma and promotion of strategies of living positively with the disease can promote effective self disclosure of sero-positive status to sexual partners.