BARRIERS AND ENABLERS TO HIV TESTING
AMONG WOMEN FROM SOUTH EAST ASIA LIVING IN WESTERN AUSTRALIA

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CONTEXT AND AIMS

Australia has witnessed an increase in HIV notifications in the past five to ten years among people born in high HIV prevalence countries. This has been most noticeable in people born in South East Asia (SEA), who had the highest HIV notification rate by region of birth in 2015. In the past five years, 70% of women born in SEA were diagnosed late. Late diagnosis of HIV among SEA women, associated with low rates of HIV testing, increases the likelihood of onward HIV transmission and delayed treatment initiation. The aim of this research was to explore the barriers and enablers for HIV testing among women from SEA living in WA.

METHODS

This project was a subset of a larger project. Three focus group discussions involving 21 women born in SEA explored the experiences and perspectives of HIV testing in Western Australia. The women were recruited via word of mouth, email, social media and online newsletters. Discussions ran for approximately 90 minutes, were audio recorded and transcribed verbatim. Data was thematically analysed using Nuvo software.

FINDINGS

BARRIERS TO HIV TESTING
Socio culture factors influenced women’s willingness to test for HIV. All women described HIV as being associated with ‘bad’ or ‘sinful’ behaviour within communities. For this reason, many women considered themselves not at risk. In addition, testing for HIV was considered to be an admission of ‘bad behaviour’.

“[HIV] it’s only for bad people... like drug people and prostitutes or... people who have free sex. I’m a good girl... I think that there is no chance I get that issue (HIV)” – Woman from Viet Nam

This possible judgement (from community and general practitioners) was a barrier for many in accessing testing. However many women reflected that there were other modes of transmission that were not due to ‘bad’ behaviour.

Some women experienced difficulties in accessing health services, either due to cost (primarily for international students), language difficulties or difficultly navigating the health system. This impacted on their willingness to seek testing.

ENABLERS TO HIV TESTING
For the few women who had voluntarily tested for HIV, most had done so as part of a general health check-up initiated by their GP.

CONCLUSION

This research highlighted multiple barriers to testing for HIV experienced by SEA women. Testing for HIV is seen as an indication of engaging in what may be considered ‘bad behaviour’ among communities, such as drug use and sex outside marriage. Promoting testing as part of a general health check-up, rather than focusing on behaviour, could reduce the proportion of late diagnosis.

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