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Abstract

This Abstract

Development of a HIV Voluntary Counseling and Testing Model for a rural population in southern India

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Issues: Rural India remains a largely underserved population for HIV care services. We report on an education and voluntary testing and counseling (VTC) program that we developed in a rural block of Andhra Pradesh state in India.

Description: In 2003, we used three steps to develop VTC services: a needs assessment, an education program based on needs assessment and establishment of VTC services in the area. For the needs assessment we surveyed 750 community residents 18-65 years. Following this, we conducted village based education programs targeting adults. We also began informing residents of the availability of VTC in the project central hospital. To date a total of 3590 residents have availed services. Volunteers provide behavioral risk assessment information and a blood sample for HIV testing.

Lessons Learned: Preliminary survey analysis showed no condoms access in village (93%). Respondents were unaware of accessible VTC centers and 65% recommended the city (30kms away) to friends for VTC. 90% were aware of the need to obtain consent. Community-based education addressed risk perceptions using an 'edu-tain' approach. We also informed of the availability of VTC in a proximate hospital that had village outreach programs for non-HIV health issues. Risk assessment

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at VTC revealed a HIV prevalence rate of 0.7% (36% were married women). Behavioral risk was reported by 10% of married males (premarital sex). 3% of all men reported that their most recent sexual partner was a sex worker. Of these, 40% reported having sex at least 2 or more times and 94% never used condoms. Risk perceptions were low and alcohol use was high.

Recommendations: Enthusiastic participation in our program thus far reveals the large unmet need for VTC services. Targeted HIV interventions in rural areas to address risk perceptions are needed. Condom non-use behaviors need to be understood and programs that can increase communication about male condom use developed. Role of structural factors such as alcohol use in HIV epidemic needs to be examined.

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