Social contextual factors associated with lifetime HIV testing among the Tushirikiane urban refugee youth cohort in Kampala, Uganda: cross-sectional findings

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Background

- There is an urgent need to address HIV testing and prevention needs among forcibly displaced persons globally.
- In Uganda, which hosts more than 1.4 million refugees, nearly one-quarter (24%) are youth and over 90,000 (6%) live within Kampala's urban areas.¹
- Urban areas in Uganda provide better education and healthcare access options for refugees,² they can also pose challenges such as economic insecurity, overcrowding and elevated violence.³
- Urban refugee youth may live in social contexts characterized by structural drivers of HIV such as poverty and violence, which may also influence HIV testing engagement.

¹UNHCR. Uganda - Refugee Statistics, 2021. ²Dawa I. The hidden population: identity and livelihood of urban refugees in the Arua district, Uganda. Confl Trends 2020: 2020.

³ Sabila S, Silver I. Cities as partners: the case of Kampala. Forced Migr Rev 2020; 63: 41–43.

We aimed to examine social contextual factors associated with lifetime HIV testing among urban refugee youth in Kampala, Uganda

We did this by:

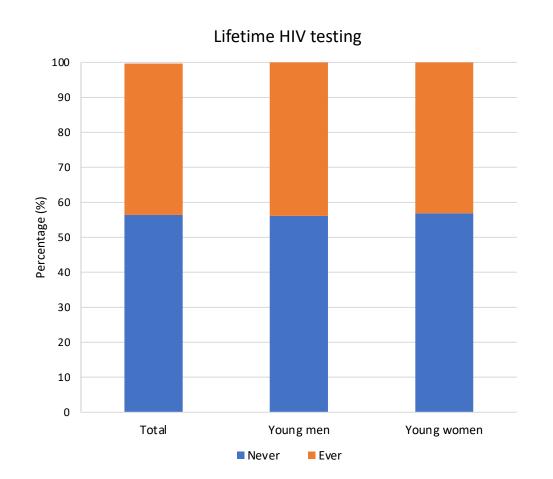
- analyzing baseline data collected as part of the Tushirikiane (Supporting each other) study¹ which consisted of a peer-recruited cohort of urban refugee youth aged 16-24 years living in Kampala's informal settlements (enrolled between February and March 2020).
- conducting descriptive statistics and logistic regression to examine socio-demographic (age, gender, length of time in Uganda), material (employment, income security, education), relational (having children, relationship status, social support), and symbolic contexts (sexual relationship power, condom use efficacy, HIV-related stigma, adolescent stigma, intimate partner violence) associated with lifetime HIV testing.



Kampala, Uganda (image reference: westafrica.rikolto.org)

Results

Slightly under half of participants reported ever having had an HIV test, which was similar among young men and women.



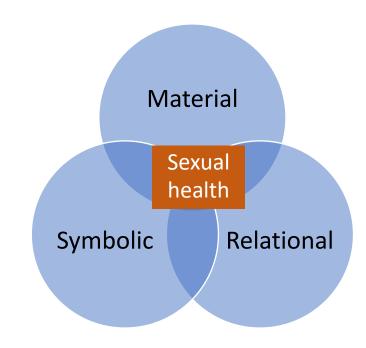
In multivariable analyses, odds of lifetime HIV testing were higher among youth with secondary school education or higher, currently employed, reporting physical IPV, and marginally associated with having children.

	Never had HIV Test	Ever had HIV Test	Baseline Model		Adjusted Model*	
	N (%), or Mean (SD)	N (%), or Mean (SD)	OR (95% CI)	p-value	OR (95% CI)	p-value
Total	n=252	n=194				
Material Context						
Employment status				<0.001		<0.001
No employment	93 (37.7)	65 (34.0)	ref		ref	
Student	104 (42.1)	55 (28.8)	0.59 (0.36-0.97)		0.60 (0.35-1.03)	
Employed (paid/ unpaid)	50 (20.2)	71 (37.2)	1.88 (1.14-3.08)		1.79 (1.03-3.10)	
Highest Level of Education				0.002		<0.001
Less than secondary	65 (26.2)	45 (23.3)	ref		ref	
Some secondary	114 (46.0)	66 (34.2)	0.89 (0.54-1.45)		0.88 (0.51-1.52)	
Secondary +	69 (27.8)	82 (42.5)	1.89 (1.34-3.13)		2.30 (1.27-4.17)	
Relational Context						
Children				<0.001		0.052
No	238 (94.4)	164 (84.5)	ref		ref	
Yes	14 (5.6)	30 (15.5)	3.19 (1.62-6.28)		2.17 (0.98-4.81)	
Symbolic Context						
Experienced Physical IPV				<0.001		0.005
Never	244 (96.8)	173 (89.2)	ref		ref	
Ever	8 (3.2)	21 (10.8)	4.52 (1.92-10.7)		3.61 (1.43-9.10)	

^{*}controlling for settlement and gender a priori and all significant baseline model variables

Conclusions

- Our study revealed suboptimal HIV testing coverage among participating urban refugee youth in Kampala, with less than half ever testing.
- Findings demonstrate the need to meaningfully engage urban refugee youth across material, relational and symbolic contexts to create enabling environments for sexual health.
- Advancing this understanding of social contextual factors can inform targeted HIV testing initiatives required to meet the UNAIDS goal of 95% of persons knowing their status to achieve an AIDS Free Generation.



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