

Interpersonal issues surrounding HIV counseling and testing, and the phenomenon of “testing by proxy.”

Morrill AC, Noland C. (in press).
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Summary

HIV counseling and testing (C&T) is an essential component in preventing the spread of HIV; however, women in close heterosexual relationships who decide to test for HIV may face significant obstacles to implementing recommendations for safer sex and partner testing. The article by Morrill and Noland in the *Journal of Health Communication* explores their experiences through interviews with 81 women who sought HIV counseling and testing and had a regular male sexual partner at the time, and four focus groups with a subsample of 18 women, and 15 men whose female partners had tested for HIV. Findings reveal a dangerous practice of “testing by proxy.” Many participants, believing that transmission of HIV is virtually instantaneous, assumed that if one partner tests negative for HIV after having unprotected intercourse, the untested partner’s serostatus must also be negative. It may be that public health messages, in emphasizing the life-threatening nature of the disease and the urgency and epidemic, have contributed to this phenomenon.

Recommendations

Morrill and Noland studied the challenges faced by women in close heterosexual relationships who decided to test for HIV, and their experiences around instituting safer sexual practices and partner testing. The following are recommendations for those involved in HIV counseling and testing, and other HIV prevention programs.

- Overestimates of HIV transmission contribute to a belief that if one member of a couple tests negative after having unprotected intercourse, the untested partner’s serostatus must also be negative. To discourage the dangerous practice of “testing by proxy” and to encourage partner testing, it is important to help couples understand the unpredictability of transmission, and why one partner’s negative result does not establish the absence of HIV.
- It is difficult for couples to communicate about safer sex and partner testing because these topics suggest suspicions of infidelity. Requests may be better received if they are based on concern about previous partners, or emphasize positive feelings of taking ongoing proactive responsibility for one’s own health. Modeling could be used to help normalize HIV testing and condom use even within the context of an established, loving relationship.
- Programs aiming to reduce heterosexual HIV risk for women should include their male partners and incorporate effective interpersonal communication skills.
- Male partners’ resistance is a significant obstacle to testing and adopting safer sexual practices. Programs need to develop ways to convey information so that men will apply it to themselves, and not dismiss it. Presentations might blend information with personal experiences and portray not only professionals, but also by ordinary couples, perhaps including some people living with HIV.