

PC43 Partner Communication and Decision-making in a Phase III Pilot Microbicide Study

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ABSTRACT TEXT

Background:

In microbicides acceptability research, the focus has been predominantly on 'product' rather than 'processes'. However, the role of gender relations, decision-making power and communication within sexual relationships has been recognised as a determinant of condom use, and is likely to determine microbicide use also. Since sexual behaviour takes place within relationships, social contexts and cultures, we combine relationship-based theories with anthropological work conducted with women and men using a placebo gel. Dimensions of communication and decision-making in gel and condom use, including constructions of risk and trust, are explored. Implications for microbicide acceptability and use are discussed.

Methods:

In depth interviews were conducted as part of the MDP301 Phase III pilot microbicide trial. 298 female participants and a sub-sample of their male partners at 6 sites in South Africa, Tanzania, Uganda and Zambia were interviewed following a 4 week period of placebo gel use. Topics included gel use and acceptability, partner involvement, sexual practices, and condom use. The data were analysed using a grounded theory approach in NVivo.

Results:

Partner communication was characterised by a tension between the perceived need to give information versus the ability to withhold it. Participation necessitated women negotiating the following processes: permission seeking from male partners, disclosure, information exchange, persuasion, deception, initiating and motivating, and appraisal. These stages in communication were present for gel use, condom use and other sexual behaviour practices, and varied according to the level of trust within the relationship and both partners' perception of risk. Although the gel was supposedly 'woman-controlled', men exercised considerable influence in determining whether and how it was used. Local context also played a key role in the decision-making process, with social norms dictating the acceptability of covert use, women's right to use, and open discussion about sexual practices.

Conclusion:

Decisions about the use of condoms and microbicides are made in a dyadic context, and involve a complex negotiation of risk and trust mediated through communication. Whilst preferences relating to product characteristics are largely formed at the individual level, use itself is dependent on partnership dynamics and the broader social context in which sexual relations occur.

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