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RISK FACTORS FOR LOW HIV TREATMENT LITERACY AMONG CLIENTS PRESENTING FOR VOLUNTARY COUNSELING AND TESTING IN MOSHI, TANZANIA

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INTRODUCTION: Availability of antiretroviral therapy (ART) is increasing in sub-Saharan Africa. Although high community levels of HIV treatment knowledge would increase access to ART, few studies have evaluated HIV treatment literacy in target populations. We assessed HIV treatment literacy in the context of a prospective cohort study of factors associated with HIV serostatus among clients presenting for HIV voluntary counseling and testing (VCT) at a community-based AIDS service organization in Moshi, Tanzania.

METHODS: Clients presenting for VCT at the KIWAKKUKI AIDS Information Centre were administered a questionnaire between November 2003 and July 2004 and were asked if they knew of the availability of medications to increase the body's resistance to HIV/AIDS. Factors associated with responses were identified by bivariable analyses and a multivariate logistic regression model.

RESULTS: Among 1,495 clients presenting for VCT, 809 (54%) were female and 256 (17%) were HIV seropositive. The median age was 29 years (range 13-83). Of 1,486 clients responding, only 161 (11%) knew of medications to increase the body's resistance to HIV/AIDS and none could name such a drug. Factors associated with knowledge of ART included tertiary education (odds ratio [OR] 3.55, $p < 0.001$) and a history of TB treatment (OR 3.58, $p = 0.001$). Presenting for VCT on the basis of having had many

sexual partners (OR 4.99, $p<0.001$), suspicion of a partner's unfaithfulness (OR 2.03, $p<0.001$), and future planning (OR 1.96, $p=0.001$) were also associated with treatment literacy. Having exchanged gifts or money for sex was associated with low treatment literacy (OR 0.34, $p<0.001$).

CONCLUSIONS: HIV treatment literacy is low among attendees to this VCT clinic in Moshi but could be improved by including ART education in discussions with clients before and after VCT. Special emphasis should be placed on persons without tertiary education and commercial sex workers, who are at greatest risk for low treatment literacy.

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