

**Factors affecting acceptance of couple HIV counselling and testing: Retrospective review of the AIDS support organization (TASO) APAC HBHCT/Malaria 3 years project data, supported by center for disease control (CDC)-PEPFAR funded project, Northern Uganda**

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According to the Uganda National M & E Plan 2011, Uganda aims to reduce HIV incidence by 30% by 2015. The project goal was to provide full Access Home Based HIV/Malaria Counseling and Testing and Basic care services in Apac District.

**Objectives:** To conduct community mobilization and sensitization about HIV/Malaria, provide home based confidential HIV counseling and testing/Malaria screening services. Retrospective review of data of 47369 couples, 23511 couples tested, for October 1<sup>st</sup> 2009 to July 31<sup>st</sup>, 2012 was included. Factors assessed during this study included demographic factors, ever tested for HIV, knowing partner's HIV status and length of years in a relationship. Using logistic regression, odds ratios (OR), adjusted odds ratios (AOR), 95% confidence intervals and appropriate p-values were computed. Couples who had never tested for HIV were less likely to accept couple HBHCT than those who were repeat testers [AOR = 0.922, 95% CI= (0.877-0.970), p=0.002<0.05]. Couples who had never tested for HIV had 7.8% reduced odds to accept couple HCT than those who were repeat testers. Couples who did not know partner's HIV sero status were less likely to accept couple HBHCT than those with partner's who had disclosed their status [AOR = 0.911, 95% CI= (0.862- 0.964), p=0.001<0.05]. Couples who had spent more than 5 years in a relationship were more likely to accept couple HBHCT compared to those who had spend less than 5 years in a relationship [6-11 years: AOR = 1.393, 95% CI= (1.313-1.478)]; [12-17 years: AOR= 1.711, 95% CI= (1.592-1.840)]; [≥18 years: AOR= 1.653, 95% CI= (1.547- 1.767)]. The study revealed that, ever tested for HIV, knowing partner's HIV status and length of years in a relationship were key factors in affecting couple HCT. More resources are needed to scale up, increasing coverage and uptake of couple HCT services in Uganda.

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