Reducing Multiple Concurrent Partnerships in Mozambique

A group of 15 women gathered recently to discuss why so many people were infected with HIV in their village outside of Xai-Xai, the capital of Gaza Province of Mozambique, where HIV prevalence is the highest in the country. When a community agent depicted a typical sexual network on the board, they nodded in recognition that this was indeed a problem in their community. Some women blamed men for their behavior. But when the community agent prodded them further, they agreed that women also had extramarital partners. “I have had other partners,” one woman confessed. “I need to feed my children and my husband just can’t take care of us.” Others talked about their husbands working as miners in South Africa while they are left behind for months at a time. The community agent encouraged them to think more about the risk of HIV with these concurrent partnerships and how they can talk about HIV with their partners.

Mozambique is one of several countries where PSI is addressing the phenomenon of “multiple concurrent partnerships” (MCP), known to be an important factor in the high HIV prevalence in eastern and southern Africa. MCP is the practice of having multiple long-term sexual partners that overlap in time, often for months or years. MCP, combined with the period of increased infectiousness immediately following HIV acquisition, spreads HIV through a population much faster than a series of monogamous relationships. MCP can create large sexual networks in communities and when one person contracts HIV, everyone else in the network is immediately placed at risk.

PSI/Mozambique, which has been implementing HIV prevention communications since 1994 with support from USAID, PEPFAR (President’s Emergency Plan for AIDS Relief) and the National AIDS Council (CNCS), works with 180 community agents based in 122 districts (out of a total of 145) in all provinces of Mozambique. Recognizing the importance of addressing MCP to impact the HIV epidemic in Mozambique,
PSI hired Helen Epstein, journalist and author of “The Invisible Cure: Africa, The West and the Fight Against AIDS” to lead an effort to develop a community-based communication program. PSI trained a group of 30 community agents in Maputo and Gaza Provinces in May 2008 to conduct interpersonal communication sessions to increase risk perceptions around MCP and HIV.

Research conducted by PSI shows that over 40% of men in Gaza, 30% of men in Sofala and 20% in Zambezia provinces report having more than one sexual partner during the past month. Condom use remains very low among long term, concurrent partnerships in Mozambique as well with only 32% of men in Gaza, 48% in Sofala and 50% in Zambezia reporting condom use at last sex with primary partners.\(^1\) PSI will conduct qualitative research among men and women in the same provinces in 2009 to understand more about the key drivers of MCP.

As a result of this research, PSI adapted its existing interpersonal communication sessions to include community members who meet with the community leaders (village chiefs, religious leaders, traditional healers, etc.) to discuss the impact of MCP in their community. Community agents were trained to address MCP. One agent named Messias said, “I finally understand why HIV is such a problem in my community and how we can help people acknowledge that it is not sex workers or truckers who are spreading HIV but mothers and fathers in the community.”

Sessions are carried out in groups of 15-20 adults sitting around a blackboard and being asked to identify the sexual networks in their communities. The community agent pins up a figure of a "typical couple" on the board, and elicits their ideas about how many other partners they might have, which partners those other partners would have and encourages open discussion. The community agent asks people to help him or her depict the sexual network by adding partners to the blackboard until everyone can see, quite vividly, how just having one or more "extra" partner(s) can put everyone at great risk of HIV infection through the resulting vast sexual network.

With technical and financial support from USAID and PEPFAR, PSI made some adaptations following pre-testing in Gaza and Maputo provinces to improve moderator techniques used during the session. PSI trained all community agents of the other provinces of Mozambique that capitalized on pre-test findings. MCP sessions using these new techniques are now being carried out in all provinces of the country.

One important change involves getting community leaders involved in the MCP discussion from the beginning. Another change is to invite participants to get involved in role plays to improve their self efficacy or confidence to negotiate fidelity or partner reduction with their sexual partners when they get home.

PSI is working with USAID, PEPFAR, Johns Hopkins University and Mozambique partners FDC and N’weti (the local affiliate of Soul City) to develop a mass media TV, radio and print campaign that will extend similar behavior change messages around risk perceptions of MCP and HIV to more communities in Mozambique.

For more information on PSI’s work in Mozambique please contact PSI/Mozambique HIV Director Dvora Joseph at djoseph@psi.org.mz.

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\(^1\) PSI HIV TRaC Study from Gaza, Zambezia and Sofala Provinces. October, 2008