“I Just Did It”: Health Decision Making and Perceived Outcomes of HIV Testing in the African American Church

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African Americans and HIV

- Disproportionately affected by HIV
  - 13% of the population, but 44% of all new HIV infections in adults and adolescents
  - Rate of infections is eight times that of Whites
- Lack of awareness
- Barriers to screening
- Stigma and negative perceptions about HIV testing are pervasive among the African American community
The Black Church

- Black churches are influential institutions in the African American community

- There is high religiosity among the African American community (e.g., prayer, church attendance)

- The Black church can have an important role in adoption of health behaviors, including HIV testing
  - Enhance discussion of HIV in the African American faith community
  - Increase HIV screening rates in church-based settings
Health Decision Making

- Can be understood as the process of making the decision to engage in a health behavior (e.g., get tested for HIV)

- Scarcity of research on health decision making and HIV testing among African American church and community members
The purpose of the current study was to examine the effect of health decision making for HIV testing on beliefs about post-HIV testing outcomes among AA adult church and community members.
Participants

- N = 542 African American adults
- n = 388 church members
- n = 152 community members who used church outreach services
- Primarily female (64%)
- Age range 18 to 64, M = 42.3, SD = 13.47
- 28% of participants had some college, but no degree
- 33% of participants had an average household monthly income of more than $3,000
Measures: Health Decision Making

- Four Likert-type items
- Responses ranging from 1 to 10
  - I planned it .... I just did it
  - I made an intellectual decision ... I made an emotional decision
  - I weighed the pros and cons ... I just decided
  - I thought it through ... It just hit me
- Items were summed, so that total scores ranged from 4 to 40 (higher scores indicating more impulsivity)
Measures: HIV Testing Beliefs

- Six items with response options ranging from -3 to +3
- To what extent would getting tested for HIV at church, church sponsored event, or health clinic help you to:
  - Feel more comfortable/safe about taking the test
  - Increase your peace of mind about past sex or drug activities
  - Protect yourself from HIV infection in the future
  - Have a joyful life if test results were negative
  - Know that your test results will be confidential
  - Seek HIV medication if the test results were positive
Recruitment

- Participants were recruited from four African American churches in the metropolitan area of Kansas City, Missouri.

- After reading an informed consent form, participants were given a survey that asked about health beliefs and behaviors.

- Surveys took 20-30 minutes to complete, and participants were compensated $10.
Descriptive Results

- 75% had received HIV testing in their lifetime
- 28% had received HIV testing in the past 6 months

Overall, participants showed moderate impulsivity in obtaining an HIV test, $M = 24.7$, $SD = 11.72$
- Planned or just did it: $M = 7.1$, $SD = 3.66$
- Intellectual or emotional decision: $M = 4.86$, $SD = 3.64$
- Weighed pros/cons or just decided: $M = 7.2$, $SD = 3.46$
- Thought it through or just hit me: $M = 5.58$, $SD = 3.62$
Greater impulsivity in obtaining an HIV test was positively associated with beliefs that getting an HIV test would help participants to:

<table>
<thead>
<tr>
<th>Belief</th>
<th>r</th>
<th>p</th>
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<tbody>
<tr>
<td>Feel comfortable</td>
<td>.164</td>
<td>.002</td>
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<tr>
<td>Peace of mind</td>
<td>.130</td>
<td>.014</td>
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<tr>
<td>Protect themselves</td>
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<td>.005</td>
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<tr>
<td>Have a joyful life</td>
<td>.139</td>
<td>.009</td>
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<td>Results are confidential</td>
<td>.154</td>
<td>.003</td>
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<tr>
<td>Seek HIV medication</td>
<td>.179</td>
<td>.001</td>
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## Results: Linear Regression

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<th>$B$ (SE)</th>
<th>$\beta$</th>
<th>$p$</th>
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<tr>
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<td>.027</td>
<td>.031 (.010)</td>
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<tr>
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</tr>
</tbody>
</table>
Exploratory Analyses

- Reasons for obtaining an HIV test:
  - For medical reasons, 42%
  - Doctors asked if interested, 32%
  - To apply for health insurance, 10%
  - Because HIV screening was available at church, 6%
  - Because HIV testing is a routine part of health screenings, 31%
  - Because I was concerned about risk, 21%
  - To apply for a marriage license, 7%
Exploratory Analyses

“Other” reasons for prior receipt of HIV testing:

- Health fair or other event
- Donated blood
- Curiosity
- “Just to make sure” or peace of mind
- Pregnancy
Conclusions

- The majority of participants had received HIV testing in their lifetime, but fewer had received recent HIV testing.

- Impulsivity in receipt of prior HIV testing was directly associated with belief in positive outcomes of HIV testing.

- Impulsivity in receipt of prior HIV testing positively predicted each of the six belief items.
Limitations

- Self-report, recall-based measures, particularly regarding past HIV testing decision making.

- Limited number of health decision making dimensions and HIV testing outcomes.
Future Directions

- Further research is necessary to examine moderators of the relationship between health decision making and beliefs regarding HIV testing.

- Community-based HIV screening may be emphasized, in order to provide additional testing opportunities for individuals who are more impulsive in decision making.

- Understanding the health decision making process regarding HIV testing in AA faith populations could help to inform future HIV prevention interventions in the Black church.
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