



# “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

# Current Study

- ▶ 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:  $M = 5.58$ ,  $SD = 3.62$

# Results: Correlations

- ▶ Greater impulsivity in obtaining an HIV test was positively associated with beliefs that getting an HIV test would help participants to:

<b>Belief</b>	<b><i>r</i></b>	<b><i>p</i></b>
Feel comfortable	.164	.002
Peace of mind	.130	.014
Protect themselves	.147	.005
Have a joyful life	.139	.009
Results are confidential	.154	.003
Seek HIV medication	.179	.001

# Results: Linear Regression

Variable	$R^2$	$B$ (SE)	$\beta$	$p$
Feel comfortable	.027	.031 (.010)	.164	.002
Peace of mind	.014	.026 (.010)	.130	.014
Protect themselves	.022	.028 (.010)	.147	.005
Have a joyful life	.019	.026 (.010)	.139	.009
Results are confidential	.024	.028 (.010)	.154	.003
Seek HIV medication	.032	.032 (.009)	.179	.001

# 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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