



## MRC/UVRI MONTHLY PUBLICATIONS DIGEST – AUGUST 2015

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**Suzanna C. Francis, Clare Looker, Judith Vandepitte, Justine Bukenya, Yunia Mayanja, Susan Nakubulwa, Peter Hughes, Richard J. Hayes, Helen A. Weiss, Heiner Grosskurth. Bacterial vaginosis among women at high-risk for HIV in Uganda: high rate of recurrent diagnosis despite treatment. *Sexually Transmitted Infections Journal*, 2015 Aug 7. doi: 10.1136/sextrans-2015-052160**

### **OBJECTIVES:**

Bacterial vaginosis (BV) is associated with increased risk for sexually transmitted infections (STIs) and HIV acquisition. This study describes the epidemiology of BV in a cohort of women at high risk for STI/HIV in Uganda over 2 years of follow-up between 2008-2011.

### **METHODS:**

1027 sex workers or bar workers were enrolled and asked to attend 3-monthly follow-up visits. Factors associated with prevalent BV were analysed using multivariate random-effects logistic regression. The effect of treatment on subsequent episodes of BV was evaluated with survival analysis.

### **RESULTS:**

Prevalences of BV and HIV at enrolment were 56% (573/1027) and 37% (382/1027), respectively. Overall, 905 (88%) women tested positive for BV at least once in the study, over a median of four visits. Younger age, a higher number of previous sexual partners and current alcohol use were independently associated with prevalent BV. BV was associated with STIs, including HIV. Hormonal contraception and condom use were protective against BV. Among 853 treated BV cases, 72% tested positive again within 3 months. There was no difference in time to subsequent BV diagnosis between treated and untreated women.

### **CONCLUSIONS:**

BV was highly prevalent and persistent in this cohort despite treatment. More effective treatment strategies are urgently needed.

**Mugisha J, Muyinda H, Wandiembe P, Kinyanda E. Prevalence and factors associated with Posttraumatic Stress Disorder seven years after the conflict in three districts in northern Uganda (The Wayo-Nero Study). *BMC Psychiatry*. 2015;15:170. doi:10.1186/s12888-015-0551-5.**

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### **BACKGROUND:**

Research on the prevalence of Posttraumatic Stress Disorder (PTSD) is still limited in low income countries yet PTSD can be a public health problem in post conflict areas. In order to respond to the burden of PTSD in northern Uganda, an area that experienced civil strife for over two decades, we need accurate data on its (PTSD) prevalence and the associated risk factors to facilitate public mental health planning.

### **METHODS:**

This study employed a cross-sectional study design and data collection was undertaken in three districts in northern Uganda: Gulu, Amuru and Nwoya. Respondents were aged 18 years and above and were randomly selected at community level. A total of 2400 respondents were interviewed using a structured questionnaire in

the three study districts. In this study, multivariate logistic regression was employed to analyze the associations of socio-demographic factors, trauma related variables and the outcome of PTSD.

### **RESULTS:**

The prevalence of Posttraumatic Stress Disorder (PTSD) in the study population was 11.8 % (95 % CI: 10.5 %, 13.1 %) with a prevalence of 10.9 % (95 % CI: 9.3 %, 12.5 %) among female respondents and 13.4 % (95 % CI: 11.2 %, 15.7 %) among male respondents. Quite a number of factors were strongly associated with PTSD. Overall, a respondent had experienced 9 negative life events. In a multivariate logistic regression, the factors that were strongly associated with PTSD were: exposure to war trauma events, childhood trauma, negative life events, negative coping style and food insecurity. The findings also indicate no association between sex, age and PTSD.

### **CONCLUSION:**

The prevalence rate of PTSD in the study communities is unacceptably high. Quite a number of factors were associated with PTSD. Effective public mental health services are needed that combine treatment (medical) psychological and social welfare programs especially at community level to address the high burden of PTSD. Longitudinal studies are also recommended to continuously assess the trends in PTSD in the study communities and remedial action taken.

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**Seeley, J. (2015). "Microfinance and HIV prevention." *Review of African Political Economy* 42(145): 488-496**

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This article provides a brief overview of both the broader microfinance arena and the current evidence on the impact of microfinance on HIV prevention. The available information suggests that the impact of microfinance, as well as the impact of microfinance linked to HIV-prevention programmes in sub-Saharan Africa, show a mixed picture. This is not surprising given the very different contexts in which interventions have been implemented and the varied and sometimes questionable impact of microfinance for the poorest and the less-poor (women and men, older and younger) recipients. While there is little evidence that microfinance alone prevents HIV infections, there is information on unintended outcomes of microfinance as women face HIV-related risks as they struggle to repay debts. Structural changes remain a necessity if HIV prevention and development programmes are to respond to the broader economic and social issues poor women and men face, in Africa and elsewhere.

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**MacPherson, E., J. Sadalaki, V. Nyongopa, L. Nkhwazi, M. Phiri, A. Chimphonda, N. Desmond, V. Mwapasa, D. G. Lalloo, J. Seeley and S. Theobald (2015). "Exploring the complexity of microfinance and HIV in fishing communities on the shores of Lake Malawi." *Review of African Political Economy* 42(145): 414-436.**

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This study utilised qualitative research methodology to explore female fish traders' experiences of accessing microfinance in fishing communities in southern Malawi. Microfinance is a tool that has been used to alleviate poverty. People living in fishing communities in the Global South are at an increased risk of HIV and, equally, microfinance has been identified as a tool to prevent HIV. The authors' research found consistent testimonies of overly short microfinance loan-repayment periods, enforced by the threat of property confiscation. These threats, coupled with gendered power dynamics and the unpredictability of fish catches, left some female fish traders vulnerable to HIV.