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ISSN 1435-9871

published by the Max Planck Institute for Demographic Research. A free, open access, expedited, peer-reviewed journal of the population sciences, published regularly on the web since July 1999.

Home

Reviewers Associate Editors

Social inequality and HIV-testing

Editor

Publisher

Contact

Journal Contents
SEARCH
Current Volume
Volumes

Articles

Special Collections

General Information

About the Journal

Information for Authors

Copyright Information

Register for e-mail alerts

Submit a Paper

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Abstract

The plan to increase HIV testing is a cornerstone of the international health strategy against the HIV/AIDS epidemic, particularly in sub-Saharan Africa. This paper highlights a problematic aspect of that plan: the reliance on clinic- rather than home-based testing. First, drawing on DHS data from across Africa, we demonstrate the substantial differences in socio-demographic and economic profiles between those who report having ever had an HIV test, and those who report never having had one. Then, using data from a random household survey in rural Malawi, we show that substituting home-based for clinic-based testing may eliminate this source of inequality between those tested and those not tested. This result, which is stable across modeling frameworks, has important implications for accurately and equitably addressing the counseling and treatment programs that comprise the international health strategy against AIDS, and that promise to shape the future trajectory of the epidemic in Africa and beyond.

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Keywords AIDS/HIV, home-based testing, inequality, Malawi

Word count (Main text) 2861

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[Back to previous page]