Use of allopathic and traditional health care providers for HIV care in rural Mozambique:
HIV knowledge and health seeking behavior in Zambézia Province

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## 1 Introduction

Zambézia is currently experiencing one of the highest burdens of HIV in Mozambique. Many people within the district still lack access to modern medicine, education about risk factors leading to HIV infection, or practical alternatives to risky behavior perpetuated through cultural norms and poverty. Traditional healers are highly regarded members of their communities who have a strong influence on the understanding of disease causation and treatment of their patients. There is a lack of understanding about particular practices and beliefs of traditional healers in Zambézia Province. Negative stereotypes held by Western-educated physicians coupled with the mistrust of healers toward doctors have created barriers to collaboration. In an effort to diffuse this situation, we performed a qualitative study of the medical beliefs and practices of traditional healers in six districts in Zambézia using semi-structured key informant interviews and an ethnographic study.

### 1.1 Research Aims

### 1.1. 1 To determine characteristics of patients who use traditional healers.

### 1.1.2 To determine characteristics of patients with varying levels of HIV knowledge.

## 2 Methods

### 2.1 Participants

This is a cross-sectional study 349 Mozambican adults. Currently, FGH clinics operate in six districts of Zambézia: Namacurra, Alto-Molocue, Gile, Ile, Inhassunge, and Lugela. Healers are identified in each community through word of mouth; communities were identified at random in each district. Patients were solicited for interviews through home-to-home visits. Only patients older than 18 years old were interviewed. We interview Mozambican patients in an effort to identify trends in behavior, knowledge and treatments. Interviews were conducted within the communities, locations determined at the request of the interviewee, and all patients had the goals of the research explained to them before the interview begins.

### 2.2 Outcomes

The primary outcomes among patient interviews will be the patient's use of a traditional healer and his/her knowledge of HIV/AIDS.

### 2.3 Data Sources and Measurements

The study contains 349 key informant interviews. Participants will be questioned about their experiences with traditional and modern medicine, health issues, views on the cause and treatment of particular illnesses, and preferences of medical practitioners.

### 2.4 Statistical Methods

## 1. To determine characteristics of patients who use traditional healers.

Summary characteristics will be tabulated by those patients who go to healers and those who did not. A logistic regression may identify whether demographics or HIV knowledge are predictive of using a traditional healer. Specifically, age, sex, education level, location, HIV knowledge, and belief in HIV/AIDS cure have been identified as predictors of interest. If needed, missing data methods will be considered. Options include complete case analysis or multiple imputation.
2. To determine characteristics of patients with varying levels of HIV knowledge.

Summary characteristics will be tabulated by patient's HIV knowledge. HIV knowledge will be measured
by the number of ways a participant correctly identifies a method of HIV transmission (range: 0-5). An ordinal (proportional-odds) logistic regression may identify whether demographics or health-seeking behavior are predictive of HIV knowledge. Specifically, age, sex, education level, location, condom use, and source of health information have been identified as predictors of interest. Additionally five separate logistic regressions using the same predictors may identify which demographics or health-seeking behavior are predictive of knowledge for each of five methods of transmission. If needed, missing data methods will be considered. Options include complete case analysis or multiple imputation.

R-software 2.11.1 (www.r-project.org) will be used for data analyses.

## 3 Results

### 3.1 Patients Characteristics

Table 1 summarizes patient characteristics by sex.

Table 1: Summary of Patient Characteristics by Sex

|  | $\begin{aligned} & \text { Female } \\ & (\mathrm{n}=203) \end{aligned}$ | $\begin{aligned} & \text { Male } \\ & (\mathrm{n}=146) \\ & \hline \end{aligned}$ | Combined $(\mathrm{n}=349)$ | P -value ${ }^{\text {a }}$ |
| :---: | :---: | :---: | :---: | :---: |
| Age ${ }^{\text {b }}$ | $29(23,38)$ | $38(27,47)$ | $32(25,43)$ | $<0.001$ |
| Missing age, n (\%) | 30 (14.8\%) | 1 (0.7\%) | 31 (8.9\%) |  |
| Education level | $4(1,7)$ | $5(4,9)$ | $5(2,8)$ | <0.001 |
| Location, n(\%) |  |  |  | <0.001 |
| Alto Molocue | 39 (19.2\%) | 59 (40.4\%) | 98 (28.1\%) |  |
| Inhassuange | 82 (40.4\%) | 37 (25.3\%) | 119 (34.1\%) |  |
| Namacurra | 82 (40.4\%) | 50 (34.2\%) | 132 (37.8\%) |  |
| Rural/Urban, n(\%) |  |  |  | 0.265 |
| Rural | 129 (63.5\%) | 102 (69.9\%) | 231 (66.2\%) |  |
| Urban | 74 (36.5\%) | 44 (30.1\%) | 118 (33.8\%) |  |
| Civil status, n(\%) |  |  |  | <0.001 |
| Divorced | 21 (10.3\%) | 5 (3.4\%) | 26 (7.4\%) |  |
| Married | 146 (71.9\%) | 131 (89.7\%) | 277 (79.4\%) |  |
| Single | 11 (5.4\%) | 9 (6.2\%) | 20 (5.7\%) |  |
| Widowed | 25 (12.3\%) | 1 (0.7\%) | 26 (7.4\%) |  |
| Age at marriage | $18(16,20)$ | $21(20,25)$ | 19 (17, 22) | $<0.001$ |
| Missing age at marriage, n(\%) | 63 (31.0\%) | 33 (22.6\%) | 96 (27.5\%) |  |
| Number of spouses | $1(0,1)$ | $1(1,1)$ | $1(1,1)$ | 0.242 |
| Missing number of spouses, n (\%) | 3 (1.5\%) | 2 (1.4\%) | 5 (1.4\%) |  |
| Number of previous spouses | $1(0,1)$ | $0(0,1)$ | $0(0,1)$ | 0.005 |
| Missing number of previous spouses, n (\%) | 1 (0.5\%) | 2 (1.4\%) | 3 (0.9\%) |  |
| Number of children | $3(1,5)$ | $4(2,5)$ | $3(2,5)$ | 0.027 |
| AIDS mentioned as most common ailment, n(\%) |  |  |  | 0.110 |
| No | 98 (48.3\%) | 84 (57.5\%) | 182 (52.1\%) |  |
| Yes | 105 (51.7\%) | 62 (42.5\%) | 167 (47.9\%) |  |
| Respiratory ailments are common | 119 (58.6\%) | 87 (59.6\%) | 206 (59.0\%) |  |
| Cervical cancer is common | 80 (39.4\%) | 54 (37.0\%) | 134 (38.4\%) |  |
| Know someone with HIV/AIDS | 59 (29.1\%) | 38 (26.0\%) | 97 (27.8\%) |  |
| How do people get infected with HIV/AIDS? ${ }^{\text {c }}$ |  |  |  |  |
| Sex | 168 (82.8\%) | 133 (91.1\%) | 301 (86.2\%) |  |
| Razors | 82 (40.4\%) | 48 (32.9\%) | 130 (37.2\%) |  |
| Mother to Child | 3 (1.5\%) | 2 (1.4\%) | 5 (1.4\%) |  |
| Blood | 12 (5.9\%) | 8 (5.5\%) | 20 (5.7\%) |  |
| Needles | 36 (17.7\%) | 32 (21.9\%) | 68 (19.5\%) |  |
| How do you prevent HIV/AIDS infection? ${ }^{\text {c }}$ |  |  |  |  |
| Condoms | 133 (65.5\%) | 100 (68.5\%) | 233 (66.8\%) |  |
| Do Not Share Razors | 19 (9.4\%) | 16 (11.0\%) | 35 (10.0\%) |  |
| Have One Partner | 33 (16.3\%) | 41 (28.1\%) | 74 (21.2\%) |  |
| Abstinence | 6 (3.0\%) | 10 (6.8\%) | 16 (4.6\%) |  |
| Can you cure AIDS?, n (\%) |  |  |  | 0.506 |
| Do not know | 16 (7.9\%) | 7 (4.8\%) | 23 (6.6\%) |  |
| No | 176 (86.7\%) | 130 (89.0\%) | 306 (87.7\%) |  |
| Yes | 11 (5.4\%) | 9 (6.2\%) | 20 (5.7\%) |  |
| How do you learn about illness and treatment? ${ }^{\text {c }}$ |  |  |  |  |
| School | 6 (3.0\%) | 13 (8.9\%) | 19 (5.4\%) |  |
| Radio | 54 (26.6\%) | 63 (43.2\%) | 117 (33.5\%) |  |
| Traditional Healers | 5 (2.5\%) | 4 (2.7\%) | 9 (2.6\%) |  |
| Traditional Healers | 5 (2.5\%) | 4 (2.7\%) | 9 (2.6\%) |  |
| Community Health Workers | 9 (4.4\%) | 13 (8.9\%) | 22 (6.3\%) |  |
| Traditional Healers | 5 (2.5\%) | 4 (2.7\%) | 9 (2.6\%) |  |
| Clinics | 99 (48.8\%) | 37 (25.3\%) | 136 (39.0\%) |  |

${ }^{\text {a }}$ To compare the distribution of patient characteristics by sex, we employ chi-square tests. Similarly, we use a twosample rank sum test for continuous variables by sex.
${ }^{\mathrm{b}}$ Continuous variables are reported as medians (interquartile range).
${ }^{\text {c }}$ Percentages may sum to greater than $100 \%$ because multiple answers may be provided.

### 3.2 Patients who use Traditional Healers

Table 2 summarizes patient characteristics by use of Traditional Healers. To identify predictors of traditional healer usage, we use logistic regression. We multiply impute age for 31 patients missing this data. Age is a continuous predictor that is nonlinear with log-odds of healer use. To relax our linearity assumption, we model age using a 3 knot restricted cubic spline function (this is why age is summarized in reference to another age). Table 3 summarizes the model effects. Adjusting for sex and education, there are three significant predictors of visiting traditional healers; these are, age, district location and response to the existence of AIDS cure question. This model has decent predictive ability $(c=0.76)$.

Of the 288 patients who use traditional healers, we are interested in determining whether increased cost of visit was associated with increased patient satisfaction. Median (IQR) cost of visit for unsatisfied patients is $100(30,200)$ and for satisfied patients is $50(30,120)$. A test for incremental cost by satisfaction gives $\mathrm{p}=0.11$.

Of the 288 patients who use traditional healers, we are interested in determining whether decreased education was associated with increased patient satisfaction. Median (IQR) education level for unsatisfied patients is $7(3,10)$ and for satisfied patients is $4(2,7)$. A test for incremental education by satisfaction gives $\mathrm{p}=0.006$.

Table 2: Summary of Patient Characteristics and Response by Use of Traditional Healers

| Do you visit traditional healers? | No $(\mathrm{n}=61)$ | $\begin{aligned} & \text { Yes } \\ & (\mathrm{n}=288) \end{aligned}$ | Combined $(\mathrm{n}=349)$ | P -value |
| :---: | :---: | :---: | :---: | :---: |
| Age | $30(23,45)$ | $33(25,43)$ | $32(25,43)$ | 0.430 |
| Missing age, $\mathrm{n}(\%)$ | 4 (6.6\%) | 27 (9.4\%) | 31 (8.9\%) |  |
| Sex, n(\%) |  |  |  | 0.023 |
| Female | 27 (44.3\%) | 176 (61.1\%) | 203 (58.2\%) |  |
| Male | 34 (55.7\%) | 112 (38.9\%) | 146 (41.8\%) |  |
| Education level | $5(3,7)$ | $4.5(2,8)$ | $5(2,8)$ | 0.610 |
| Location, n(\%) |  |  |  | <0.001 |
| Alto Molocue | 33 (54.1\%) | 65 (22.6\%) | 98 (28.1\%) |  |
| Inhassuange | 18 (29.5\%) | 101 (35.1\%) | 119 (34.1\%) |  |
| Namacurra | 10 (16.4\%) | 122 (42.4\%) | 132 (37.8\%) |  |
| Rural/Urban, n(\%) |  |  |  | 0.527 |
| Rural | 43 (70.5\%) | 188 (65.3\%) | 231 (66.2\%) |  |
| Urban | 18 (29.5\%) | 100 (34.7\%) | 118 (33.8\%) |  |
| Civil status, n (\%) |  |  |  | 0.279 |
| Divorced | 4 (6.6\%) | 22 (7.6\%) | 26 (7.4\%) |  |
| Married | 52 (85.2\%) | 225 (78.1\%) | 277 (79.4\%) |  |
| Single | 4 (6.6\%) | 16 (5.6\%) | 20 (5.7\%) |  |
| Widowed | 1 (1.6\%) | 25 (8.7\%) | 26 (7.4\%) |  |
| Age at marriage | 19 (17, 25.5) | 19 (17, 22) | 19 (17, 22) | 0.455 |
| Missing age at marriage, n(\%) | 18 (29.5\%) | 78 (27.1\%) | 96 (27.5\%) |  |
| Number of spouses | $1(1,1)$ | $1(1,1)$ | $1(1,1)$ | 0.428 |
| Missing number of spouses, $\mathrm{n}(\%)$ | 0 (0.0\%) | 5 (1.7\%) | 5 (1.4\%) |  |
| Number of previous spouses | $0(0,1)$ | $1(0,1)$ | $0(0,1)$ | <0.001 |
| Missing number of previous spouses, n (\%) | 0 (0.0\%) | 3 (1.0\%) | 3 (0.9\%) |  |
| Number of children | $2(1,4)$ | $3(2,5)$ | $3(2,5)$ | 0.026 |
| AIDS mentioned as most common ailment, $\mathrm{n}(\%)$ |  |  |  | 0.003 |
| No | 43 (70.5\%) | 139 (48.3\%) | 182 (52.1\%) |  |
| Yes | 18 (29.5\%) | 149 (51.7\%) | 167 (47.9\%) |  |
| Respiratory ailments are common | 35 (57.4\%) | 171 (59.4\%) | 206 (59.0\%) |  |
| Cervical cancer is common | 24 (39.3\%) | 110 (38.2\%) | 134 (38.4\%) |  |
| Know someone with HIV/AIDS | 16 (26.2\%) | 81 (28.1\%) | 97 (27.8\%) | 0.886 |

Table 2 - Continued

| Do you visit traditional healers? | $\begin{aligned} & \hline \text { No } \\ & (\mathrm{n}=61) \\ & \hline \end{aligned}$ | $\begin{aligned} & \hline \text { Yes } \\ & (\mathrm{n}=288) \end{aligned}$ | $\begin{aligned} & \hline \text { Combined } \\ & (\mathrm{n}=349) \\ & \hline \end{aligned}$ | P-value |
| :---: | :---: | :---: | :---: | :---: |
| Sex | 51 (83.6\%) | 250 (86.8\%) | 301 (86.2\%) |  |
| Razors | 17 (27.9\%) | 113 (39.2\%) | 130 (37.2\%) |  |
| Mother to Child | 0 (0.0\%) | 5 (1.7\%) | 5 (1.4\%) |  |
| Blood | 0 (0.0\%) | 20 (6.9\%) | 20 (5.7\%) |  |
| Needles | 7 (11.5\%) | 61 (21.2\%) | 68 (19.5\%) |  |
| How do you prevent HIV/AIDS infection? |  |  |  |  |
| Condoms | 40 (65.6\%) | 193 (67.0\%) | 233 (66.8\%) |  |
| Do Not Share Razors | 3 (4.9\%) | 32 (11.1\%) | 35 (10.0\%) |  |
| Have One Partner | 12 (19.7\%) | 62 (21.5\%) | 74 (21.2\%) |  |
| Abstinence | 1 (1.6\%) | 15 (5.2\%) | 16 (4.6\%) |  |
| Can you cure AIDS?, n(\%) |  |  |  | 0.082 |
| Do not know | 5 (8.2\%) | 18 (6.2\%) | 23 (6.6\%) |  |
| No | 49 (80.3\%) | 257 (89.2\%) | 306 (87.7\%) |  |
| Yes | 7 (11.5\%) | 13 (4.5\%) | 20 (5.7\%) |  |
| Condom Usage, n (\%) |  |  |  | 0.315 |
| Do not know/No answer | 0 (0.0\%) | 2 (0.7\%) | 2 (0.6\%) |  |
| No | 19 (31.1\%) | 116 (40.3\%) | 135 (38.7\%) |  |
| Yes | 42 (68.9\%) | 170 (59.0\%) | 212 (60.7\%) |  |
| How do you learn about illness and treatment? |  |  |  |  |
| School | 5 (8.2\%) | 14 (4.9\%) | 19 (5.4\%) |  |
| Radio | 24 (39.3\%) | 93 (32.3\%) | 117 (33.5\%) |  |
| Community Meetings | 13 (21.3\%) | 46 (16.0\%) | 59 (16.9\%) |  |
| Community Members | 3 (4.9\%) | 55 (19.1\%) | 58 (16.6\%) |  |
| Community Health Workers | 2 (3.3\%) | 20 (6.9\%) | 22 (6.3\%) |  |
| Traditional Healers | 0 (0.0\%) | 9 (3.1\%) | 9 (2.6\%) |  |
| Clinics | 20 (32.8\%) | 116 (40.3\%) | 136 (39.0\%) |  |
| Provider Usage, n (\%) |  |  |  | $<0.001$ |
| Missing | 2 (3.3\%) | 14 (4.9\%) | 16 (4.6\%) |  |
| Hospital only | 55 (93.2\%) | 2 (0.7\%) | 57 (17.1\%) |  |
| Hospital first | 4 (6.8\%) | 127 (46.4\%) | 131 (39.3\%) |  |
| TH only | 0 (0.0\%) | 34 (12.4\%) | 34 (10.2\%) |  |
| TH first | 0 (0.0\%) | 53 (19.3\%) | 53 (15.9\%) |  |
| Both at the same time | 0 (0.0\%) | 10 (3.6\%) | 10 (3.0\%) |  |
| Depends on illness | 0 (0.0\%) | 48 (17.5\%) | 48 (14.4\%) |  |
| Provider Usage, n (\%) |  |  |  | $<0.001$ |
| Missing | 2 (3.3\%) | 14 (4.9\%) | 16 (4.6\%) |  |
| Hospital first/only | 59 (100.0\%) | 129 (47.1\%) | 188 (56.5\%) |  |
| TH first/only | 0 (0.0\%) | 87 (31.8\%) | 87 (26.1\%) |  |
| Both at the same time | 0 (0.0\%) | 10 (3.6\%) | 10 (3.0\%) |  |
| Depends on illness | 0 (0.0\%) | 48 (17.5\%) | 48 (14.4\%) |  |
| Visits a specific TH | - | 123 (42.7\%) | - |  |
| Satisfied with last visit | - | 232 (80.6\%) | - |  |
| How much do you pay ( $M Z N$ ) ? | - | $50(30,150)$ | - |  |
| Missing/non-cash amount | - | 84 (29.2\%) | - |  |

${ }^{a}$ To compare the distribution of patient characteristics by use of traditional healers, we employ chi-square tests. Similarly, we use a two-sample rank sum test for continuous variables by use of traditional healers.
${ }^{b}$ Continuous variables are reported as medians (interquartile range).
${ }^{c}$ Percentages may sum to greater than $100 \%$ because multiple answers may be provided.

Table 3: Model Effects: Patients who use Traditional Healers

|  | Odds Ratio | Lower 95\% | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
| Age | 1 |  |  | 0.016 |
| 25 (ref) | 1.95 | 1.21 | 3.15 |  |
| 35 | 1.80 | 0.99 | 3.30 |  |
| 45 | 0.59 | 0.30 | 1.17 | 0.133 |
| Male |  |  |  | $<0.001$ |
| District | 1 | 0.06 | 0.33 |  |
| $\quad$ Namacurra (ref) | 0.15 | 0.20 | 1.10 |  |
| Alto Molocue | 0.47 | 0.88 | 1.08 | 0.643 |
| $\quad$ Inhassuange |  |  | 0.048 |  |
| Education (per level) | 0.98 | 0.27 | 2.88 |  |
| Can you cure AIDS? |  | 0.09 | 0.76 |  |
| $\quad$ No (ref) | 1 |  |  |  |
| $\quad$ Do not know | 0.88 |  |  |  |

### 3.3 Patients who identify routes of transmission

Table 4 summarizes patient characteristics by those who identify zero routes of infection versus those who identify one or more. To identify predictors of HIV knowledge, we fit a proportional-odds model with number of correct routes of infection as the outcome. Additionally five separate logistic regressions using the same predictors would identify which demographics or health-seeking behavior are predictive of knowledge for each of five methods of transmission; however, 'Mother to Child' and 'Blood' were too rarely identified for modeling. We multiply impute age for 31 patients and condom usage for 2 patients missing this data. Tables 5 and 6 summarize the model effects.

Table 4: Summary of Patient Characteristics and Response by Knowl-
edge of HIV Transmission

| Identify one of five routes of transmission? | None $(\mathrm{n}=47)$ | $\begin{aligned} & 1 \\ & (\mathrm{n}=164) \end{aligned}$ | $\begin{aligned} & \hline 2 \\ & (\mathrm{n}=59) \end{aligned}$ | $\begin{aligned} & \hline 3 \text { or more } \\ & (\mathrm{n}=79) \\ & \hline \end{aligned}$ | Combined $(\mathrm{n}=349)$ | P -value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Age | $38(25,50)$ | $35(25,45)$ | 30 (23.5, 38) | $29(23,40)$ | $32(25,43)$ | 0.003 |
| Missing age, $\mathrm{n}(\%)$ | 14 (29.8\%) | 11 (6.7\%) | 4 (6.8\%) | 2 (2.5\%) | 31 (8.9\%) |  |
| Sex, n(\%) |  |  |  |  |  | 0.005 |
| Female | 35 (74.5\%) | 82 (50.0\%) | 41 (69.5\%) | 45 (57.0\%) | 203 (58.2\%) |  |
| Male | 12 (25.5\%) | 82 (50.0\%) | 18 (30.5\%) | 34 (43.0\%) | 146 (41.8\%) |  |
| Education level | $3(0,4.5)$ | $4(2,7)$ | $7(4,10)$ | $7(4,10)$ | $5(2,8)$ | $<0.001$ |
| Location, n (\%) |  |  |  |  |  | $<0.001$ |
| Alto Molocue | $8(17.0 \%)$ | 69 (42.1\%) | 12 (20.3\%) | 9 (11.4\%) | 98 (28.1\%) |  |
| Inhassuange | 25 (53.2\%) | 55 (33.5\%) | 16 (27.1\%) | 23 (29.1\%) | 119 (34.1\%) |  |
| Namacurra | 14 (29.8\%) | 40 (24.4\%) | 31 (52.5\%) | 47 (59.5\%) | 132 (37.8\%) |  |
| Rural/Urban, n(\%) |  |  |  |  |  | $<0.001$ |
| Rural | 39 (83.0\%) | 115 (70.1\%) | 26 (44.1\%) | 51 (64.6\%) | 231 (66.2\%) |  |
| Urban | 8 (17.0\%) | 49 (29.9\%) | 33 (55.9\%) | 28 (35.4\%) | 118 (33.8\%) |  |
| Civil status, $\mathrm{n}(\%)$ |  |  |  |  |  | 0.203 |
| Divorced | 5 (10.6\%) | 10 (6.1\%) | 8 (13.6\%) | 3 (3.8\%) | 26 (7.4\%) |  |
| Married | 36 (76.6\%) | 136 (82.9\%) | 42 (71.2\%) | 63 (79.7\%) | 277 (79.4\%) |  |
| Single | 2 (4.3\%) | 5 (3.0\%) | 5 (8.5\%) | 8 (10.1\%) | 20 (5.7\%) |  |
| Widowed | 4 (8.5\%) | 13 (7.9\%) | 4 (6.8\%) | 5 (6.3\%) | 26 (7.4\%) |  |
| Age at marriage | $18(17,20)$ | $19(18,25)$ | 19 (16.5, 21.5) | $19.5(17,21)$ | $19(17,22)$ | 0.831 |
| Missing age at marriage, $\mathrm{n}(\%)$ | 19 (40.4\%) | 46 (28.0\%) | 16 (27.1\%) | $15(19.0 \%)$ | 96 (27.5\%) |  |
| Number of spouses | $1(1,1)$ | $1(1,1)$ | $1(0,1)$ | $1(1,1)$ | $1(1,1)$ | 0.899 |
| Missing number of spouses, $\mathrm{n}(\%)$ | 0 (0.0\%) | 1 (0.6\%) | 1 (1.7\%) | 3 (3.8\%) | 5 (1.4\%) |  |
| Number of previous spouses | $1(0,1)$ | $0(0,1)$ | $1(0,1)$ | $0(0,1)$ | $0(0,1)$ | 0.264 |
| Missing number of previous spouses, $\mathrm{n}(\%)$ | 0 (0.0\%) | $1(0.6 \%)$ | 0 (0.0\%) | $2(2.5 \%)$ | $3(0.9 \%)$ |  |
| Number of children | $4(2.5,5)$ | $3(2,5)$ | $3(1.5,4)$ | $3(1,5)$ | $3(2,5)$ | $0.051$ |
| AIDS mentioned as most common ailment, $\mathrm{n}(\%)$ |  |  |  |  |  | $0.133$ |
| No | 29 (61.7\%) | 91 (55.5\%) | 28 (47.5\%) | 34 (43.0\%) | 182 (52.1\%) |  |
| Yes | 18 (38.3\%) | 73 (44.5\%) | 31 (52.5\%) | 45 (57.0\%) | 167 (47.9\%) |  |
| Respiratory ailments are common | 25 (53.2\%) | 94 (57.3\%) | 37 (62.7\%) | 50 (63.3\%) | 206 (59.0\%) |  |
| Cervical cancer is common | 16 (34.0\%) | 71 (43.3\%) | 22 (37.3\%) | 25 (31.6\%) | 134 (38.4\%) |  |
| Know someone with HIV/AIDS | 4 (8.5\%) | 49 (29.9\%) | 18 (30.5\%) | 26 (32.9\%) | 97 (27.8\%) |  |
| How do people get infected with HIV/AIDS? |  |  |  |  |  |  |
| Sex | 0 (0.0\%) | 163 (99.4\%) | 59 (100.0\%) | 79 (100.0\%) | 301 (86.2\%) |  |
| Razors | 0 (0.0\%) | 1 (0.6\%) | 52 (88.1\%) | 77 (97.5\%) | 130 (37.2\%) |  |
| Mother to Child | 0 (0.0\%) | 0 (0.0\%) | 1 (1.7\%) | 4 (5.1\%) | 5 (1.4\%) |  |
| Blood | 0 (0.0\%) | 0 (0.0\%) | 5 (8.5\%) | 15 (19.0\%) | 20 (5.7\%) |  |
| Needles | 0 (0.0\%) | 0 (0.0\%) | 1 (1.7\%) | 67 (84.8\%) | 68 (19.5\%) |  |
| How do you prevent HIV/AIDS infection? |  |  |  |  |  |  |
| Condoms | $10(21.3 \%)$ | 107 (65.2\%) | 50 (84.7\%) | 66 (83.5\%) | 233 (66.8\%) |  |
| Do Not Share Razors | 0 (0.0\%) |  | 12 (20.3\%) | 18 (22.8\%) | 35 (10.0\%) |  |
| Continued on Next Page. . |  |  |  |  |  |  |


| Identify one of five routes of transmission? | $\begin{aligned} & \hline \text { None } \\ & (\mathrm{n}=47) \end{aligned}$ | $\begin{aligned} & \hline 1 \\ & (\mathrm{n}=164) \end{aligned}$ | $\begin{aligned} & \hline 2 \\ & (\mathrm{n}=59) \end{aligned}$ | $\begin{aligned} & \hline 3 \text { or more } \\ & (\mathrm{n}=79) \end{aligned}$ | Combined $(\mathrm{n}=349)$ | P -value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Have One Partner | 3 (6.4\%) | 48 (29.3\%) | 8 (13.6\%) | 15 (19.0\%) | 74 (21.2\%) |  |
| Abstinence | 0 (0.0\%) | 2 (1.2\%) | 5 (8.5\%) | 9 (11.4\%) | 16 (4.6\%) |  |
| Can you cure AIDS?, n(\%) |  |  |  |  |  | <0.001 |
| Do not know | 12 (25.5\%) | 10 (6.1\%) | 1 (1.7\%) | 0 (0.0\%) | 23 (6.6\%) |  |
| No | 31 (66.0\%) | 146 (89.0\%) | 53 (89.8\%) | 76 (96.2\%) | 306 (87.7\%) |  |
| Yes | 4 (8.5\%) | 8 (4.9\%) | 5 (8.5\%) | 3 (3.8\%) | 20 (5.7\%) |  |
| Condom Usage, $\mathrm{n}(\%)$ |  |  |  |  |  | $<0.001$ |
| Do not know/No answer | 0 (0.0\%) | 1 (0.6\%) | 0 (0.0\%) | 1 (1.3\%) | 2 (0.6\%) |  |
| No | 39 (83.0\%) | 62 (37.8\%) | 17 (28.8\%) | 17 (21.5\%) | 135 (38.7\%) |  |
| Yes | 8 (17.0\%) | 101 (61.6\%) | 42 (71.2\%) | 61 (77.2\%) | 212 (60.7\%) |  |
| How do you learn about illness and treatment? |  |  |  |  |  |  |
| School | 0 (0.0\%) | 7 (4.3\%) | 6 (10.2\%) | 6 (7.6\%) | 19 (5.4\%) |  |
| Radio | 8 (17.0\%) | 55 (33.5\%) | 18 (30.5\%) | 36 (45.6\%) | 117 (33.5\%) |  |
| Community Meetings | 7 (14.9\%) | 32 (19.5\%) | 5 (8.5\%) | 15 (19.0\%) | 59 (16.9\%) |  |
| Community Members | 8 (17.0\%) | 28 (17.1\%) | 8 (13.6\%) | 14 (17.7\%) | 58 (16.6\%) |  |
| Community Health Workers | 3 (6.4\%) | 2 (1.2\%) | 3 (5.1\%) | 14 (17.7\%) | 22 (6.3\%) |  |
| Traditional Healers | 0 (0.0\%) | 3 (1.8\%) | 2 (3.4\%) | 4 (5.1\%) | 9 (2.6\%) |  |
| Clinics | 14 (29.8\%) | 62 (37.8\%) | 34 (57.6\%) | 26 (32.9\%) | 136 (39.0\%) |  |

 tests for continuous variables by knowledge of HIV transmission.
${ }^{b}$ Continuous variables are reported as medians (interquartile range).
${ }^{c}$ Percentages may sum to greater than $100 \%$ because multiple answers may be provided.

Table 5: Proportional-Odds Model Effects: Predictors of Patient Knowledge of HIV Transmission

|  | Odds Ratio | Lower $95 \%$ | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :--- |
| Predictors of suggesting more routes of transmission (proportional-odds): |  |  |  |  |
| Age (per 10 years) | 0.97 | 0.80 | 1.19 | 0.796 |
| Male | 0.75 | 0.47 | 1.19 | 0.223 |
| District | 1 |  |  | $<0.001$ |
| Namacurra (ref) | 0.42 | 0.24 | 0.73 |  |
| Alto Molocue | 0.36 | 0.22 | 0.59 |  |
| Inhassunge | 1.18 | 1.10 | 1.26 | $<0.001$ |
| Education (per level) | 2.58 | 1.56 | 4.28 | $<0.001$ |
| Use condoms | 1.11 | 0.70 | 1.74 | 0.659 |
| Identify AIDS as common |  |  |  |  |

Table 6: Model Effects: Predictors of Patient Knowledge of HIV Transmission

|  | Odds Ratio | Lower 95\% | Upper 95\% | P-value |
| :---: | :---: | :---: | :---: | :---: |
| Predictors of suggesting sex as route of transmission: |  |  |  |  |
| Age (per 10 years) | 1.05 | 0.75 | 1.47 | 0.781 |
| Male | 0.76 | 0.32 | 1.83 | 0.547 |
| District |  |  |  | 0.015 |
| Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 2.33 | 0.84 | 6.44 |  |
| Inhassunge | 0.54 | 0.25 | 1.17 |  |
| Education (per level) | 1.13 | 1.00 | 1.28 | 0.047 |
| Use condoms | 7.08 | 2.97 | 16.88 | <0.001 |
| Identify AIDS as common | 1.53 | 0.72 | 3.23 | 0.266 |
| Predictors of suggesting razors as route of transmission: |  |  |  |  |
| Age (per 10 years) | 0.89 | 0.69 | 1.14 | 0.352 |
| Male | 0.53 | 0.30 | 0.95 | 0.034 |
| District |  |  |  | <0.001 |
| Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 0.25 | 0.13 | 0.50 |  |
| Inhassunge | 0.37 | 0.21 | 0.65 |  |
| Education (per level) | 1.19 | 1.10 | 1.29 | <0.001 |
| Use condoms | 1.94 | 1.07 | 3.53 | 0.029 |
| Identify AIDS as common | 1.09 | 0.63 | 1.86 | 0.766 |
| Predictors of suggesting needles as route of transmission: |  |  |  |  |
| Age (per 10 years) | 1.01 | 0.76 | 1.34 | 0.940 |
| Male | 1.16 | 0.60 | 2.23 | 0.654 |
| District |  |  |  | <0.001 |
| Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 0.21 | 0.09 | 0.49 |  |
| Inhassunge | 0.35 | 0.18 | 0.67 |  |
| Education (per level) | 1.14 | 1.04 | 1.25 | 0.006 |
| Use condoms | 1.51 | 0.74 | 3.12 | 0.260 |
| Identify AIDS as common | 1.08 | 0.59 | 2.01 | 0.796 |

### 3.4 Patients who identify methods of prevention

Table 7 summarizes patient characteristics by those who identify zero, one, two or more methods of prevention. To identify predictors of knowledge of HIV prevention, we fit a proportional-odds model with number of correct methods of prevention as the outcome. Additionally four separate logistic regressions using the same predictors would identify which demographics or health-seeking behavior are predictive of knowledge for each of four methods of prevention; however, 'Do not share razors' and 'Abstinence' were too rarely identified for modeling. We multiply impute age for 31 patients and condom usage for 2 patients missing this data. Tables 8 and 9 summarize the model effects.

Table 7: Summary of Patient Characteristics and Response by Knowl-
edge of HIV Prevention

| Identify one of four | None | 1 | 2 or more |
| :--- | :--- | :--- | :--- | :--- |
| methods of prevention? | $(\mathrm{n}=53)$ | $(\mathrm{n}=237)$ | $(\mathrm{n}=59)$ |


|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| Identify one of four <br> methods of prevention? | None <br> $(\mathrm{n}=53)$ | 1 <br> $(\mathrm{n}=237)$ | 2 or more <br> $(\mathrm{n}=59)$ | Combined <br> $(\mathrm{n}=349)$ |
| Have One Partner | $0(0.0 \%)$ | $53(22.4 \%)$ | $21(35.6 \%)$ | $74(21.2 \%)$ |
| Abstinence | $0(0.0 \%)$ | $4(1.7 \%)$ | $12(20.3 \%)$ | $16(4.6 \%)$ |
| Can you cure AIDS?, n(\%) | $9(17.0 \%)$ | $13(5.5 \%)$ | $1(1.7 \%)$ | $23(6.6 \%)$ |
| Do not know | $40(75.5 \%)$ | $211(89.0 \%)$ | $55(93.2 \%)$ | $306(87.7 \%)$ |
| No | $4(7.5 \%)$ | $13(5.5 \%)$ | $3(5.1 \%)$ | $20(5.7 \%)$ |
| Yes | $0(0.0 \%)$ | $2(0.8 \%)$ | $0(0.0 \%)$ | $2(0.6 \%)$ |
| Condom Usage, n(\%) | $39(73.6 \%)$ | $88(37.1 \%)$ | $8(13.6 \%)$ | $135(38.7 \%)$ |
| Do not know/No answer | $14(26.4 \%)$ | $147(62.0 \%)$ | $51(86.4 \%)$ | $212(60.7 \%)$ |
| No |  |  |  |  |
| Yes | $0(0.0 \%)$ | $12(5.1 \%)$ | $7(11.9 \%)$ | $19(5.4 \%)$ |
| How do you learn about illness and treatment? | $9(17.0 \%)$ | $86(36.3 \%)$ | $22(37.3 \%)$ | $117(33.5 \%)$ |
| School | $5(9.4 \%)$ | $42(17.7 \%)$ | $12(20.3 \%)$ | $59(16.9 \%)$ |
| Radio | $10(18.9 \%)$ | $37(15.6 \%)$ | $11(18.6 \%)$ | $58(16.6 \%)$ |
| Community Meetings | $2(3.8 \%)$ | $13(5.5 \%)$ | $7(11.9 \%)$ | $22(6.3 \%)$ |
| Community Members | $1(1.9 \%)$ | $6(2.5 \%)$ | $2(3.4 \%)$ | $9(2.6 \%)$ |
| Community Health Workers | $19(35.8 \%)$ | $96(40.5 \%)$ | $21(35.6 \%)$ | $136(39.0 \%)$ |
| Traditional Healers |  |  |  |  |
| Clinics |  |  |  |  |

${ }^{a}$ To compare the distribution of patient characteristics by knowledge of HIV prevention (an ordered variable), we employ rank sum tests. Similarly, we use Spearman rank correlation tests for continuous variables by knowledge of HIV transmission.
${ }^{b}$ Continuous variables are reported as medians (interquartile range)
${ }^{c}$ Percentages may sum to greater than $100 \%$ because multiple answers may be provided.

Table 8: Proportional-Odds Model Effects: Predictors of Patient Knowledge of HIV Prevention

|  | Odds Ratio | Lower $95 \%$ | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :--- |
| Predictors of suggesting more methods of prevention (proportional-odds): |  |  |  |  |
| Age (per 10 years) | 0.86 | 0.69 | 1.09 | 0.216 |
| Male | 1.44 | 0.83 | 2.48 | 0.191 |
| District |  |  |  | 0.177 |
| Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 0.91 | 0.49 | 1.68 |  |
| Inhassunge | 0.60 | 0.35 | 1.04 | $<0.001$ |
| Education (per level) | 1.17 | 1.08 | 1.26 | $<0.001$ |
| Use condoms | 3.50 | 1.92 | 6.37 | 0.081 |
| Identify AIDS as common | 0.63 | 0.38 | 1.06 |  |

Table 9: Model Effects: Predictors of Patient Knowledge of HIV Prevention

|  | Odds Ratio | Lower $95 \%$ | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :---: |
| Predictors of suggesting condom use for prevention: |  |  |  |  |
| Age (per 10 years) | 0.69 | 0.54 | 0.89 | 0.005 |
| Male | 0.94 | 0.49 | 1.81 | 0.858 |
| District |  |  |  | 0.001 |
| $\quad$ Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 0.27 | 0.13 | 0.56 |  |
| Inhassunge | 0.46 | 0.24 | 0.89 |  |
| Education (per level) | 1.09 | 1.00 | 1.20 | 0.051 |
| Use condoms | 5.00 | 2.73 | 9.16 | $<0.001$ |
| Identify AIDS as common | 1.06 | 0.58 | 1.94 | 0.838 |
|  |  |  |  |  |
|  |  |  |  |  |
| Predictors of suggesting monogamy for prevention: |  |  |  |  |
| Age (per 10 years) | 1.45 | 1.11 | 1.89 | 0.007 |
| Male | 1.56 | 0.76 | 3.21 | 0.227 |
| District |  |  |  | $<0.001$ |
| Namacurra (ref) | 1 |  |  |  |
| Alto Molocue | 5.81 | 2.71 | 12.46 |  |
| Inhassunge | 0.86 | 0.37 | 2.03 | 0.156 |
| Education (per level) | 0.92 | 0.83 | 1.03 | 0.031 |
| Use condoms | 0.46 | 0.22 | 0.93 | 0.534 |
| Identify AIDS as common | 0.80 | 0.39 | 1.63 |  |

### 3.5 Knowledge of HIV Transmission by How Patients Learn About Illness and Treatment

To identify which sources of learning predict increased understanding of HIV transmission, we fit a proportional-odds model with number of correct routes of infection as the outcome. Table 10 summarizes the model effects.

Table 10: Model Effects: Knowledge of HIV Transmission by Source of Knowledge

|  | Odds Ratio | Lower 95\% | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
| School | 4.41 | 1.86 | 10.46 | $<0.001$ |
| Radio | 2.48 | 1.57 | 3.91 | $<0.001$ |
| Community Meetings | 1.58 | 0.90 | 2.78 | 0.112 |
| Community Members | 1.68 | 0.95 | 2.98 | 0.076 |
| Community Health Workers | 10.14 | 3.89 | 26.44 | $<0.001$ |
| Traditional Healers | 3.95 | 1.15 | 13.60 | 0.029 |
| Clinics | 1.97 | 1.24 | 3.13 | 0.004 |
|  |  |  |  |  |

### 3.6 Knowledge of HIV Prevention by How Patients Learn About Illness and Treatment

To identify which sources of learning predict increased understanding of HIV prevention, we fit a proportionalodds model with number of correct methods of preventing HIV/AIDS as the outcome. Table 11 summarizes the model effects.

Table 11: Model Effects: Knowledge of HIV Prevention by Source of Knowledge

|  | Odds Ratio | Lower 95\% | Upper 95\% | P-value |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
| School | 5.81 | 2.20 | 15.37 | $<0.001$ |
| Radio | 2.27 | 1.36 | 3.79 | 0.002 |
| Community Meetings | 2.34 | 1.24 | 4.41 | 0.009 |
| Community Members | 1.60 | 0.84 | 3.03 | 0.153 |
| Community Health Workers | 3.66 | 1.41 | 9.52 | 0.008 |
| Traditional Healers | 2.01 | 0.47 | 8.49 | 0.343 |
| Clinics | 1.68 | 1.01 | 2.82 | 0.048 |
|  |  |  |  |  |

### 3.7 Patients and Provider Usage

Table 12 summarizes patient characteristics by provider usage. Forty-eight patients who said they would go to both providers at once were dropped along with 26 who refused to answer or responded with a non-provider.

Table 12: Summary of Patient Characteristics and Provider Usage

| How do you decide when to go to TH or clinic? | Hospital only/first $(\mathrm{n}=188)$ | TH only/first $(\mathrm{n}=87)$ | Combined $(\mathrm{n}=275)$ | P-value ${ }^{\text {a }}$ |
| :---: | :---: | :---: | :---: | :---: |
| Age ${ }^{\text {b }}$ | $32(25,43.5)$ | $35(24,45)$ | $32(25,45)$ | 0.654 |
| Missing age, $\mathrm{n}(\%)$ | 13 (6.9\%) | 10 (11.5\%) | 23 (8.4\%) |  |
| Sex, n(\%) |  |  |  | 0.073 |
| Female | 114 (60.6\%) | 42 (48.3\%) | 156 (56.7\%) |  |
| Male | 74 (39.4\%) | 45 (51.7\%) | 119 (43.3\%) |  |
| Education level | $4(2,7)$ | $4(2,7)$ | $4(2,7)$ | 0.488 |
| Location, n(\%) |  |  |  | 0.011 |
| Alto Molocue | 68 (36.2\%) | 16 (18.4\%) | 84 (30.5\%) |  |
| Inhassuange | 59 (31.4\%) | 33 (37.9\%) | 92 (33.5\%) |  |
| Namacurra | 61 (32.4\%) | 38 (43.7\%) | 99 (36.0\%) |  |
| Rural/Urban, n(\%) |  |  |  | 0.197 |
| Rural | 122 (64.9\%) | 64 (73.6\%) | 186 (67.6\%) |  |
| Urban | 66 (35.1\%) | 23 (26.4\%) | 89 (32.4\%) |  |
| Civil status, n (\%) |  |  |  | 0.221 |
| Divorced | 16 (8.5\%) | 4 (4.6\%) | 20 (7.3\%) |  |
| Married | 148 (78.7\%) | 73 (83.9\%) | 221 (80.4\%) |  |
| Single | 9 (4.8\%) | 7 (8.0\%) | 16 (5.8\%) |  |
| Widowed | 15 (8.0\%) | 3 (3.4\%) | 18 (6.5\%) |  |
| Age at marriage | 19 (17, 23) | $19(18,21)$ | 19 (17, 22) | 0.502 |
| Missing age at marriage, $\mathrm{n}(\%)$ | 50 (26.6\%) | 24 (27.6\%) | 74 (26.9\%) |  |
| Number of spouses | $1(1,1)$ | $1(1,1)$ | $1(1,1)$ | 0.509 |
| Missing number of spouses, $\mathrm{n}(\%)$ | 2 (1.1\%) | 1 (1.1\%) | 3 (1.1\%) |  |
| Number of previous spouses | $1(0,1)$ | $1(0,1)$ | $1(0,1)$ | 0.698 |
| Missing number of previous spouses, n (\%) | 1 (0.5\%) | 1 (1.1\%) | 2 (0.7\%) |  |
| Number of children | $3(1.8,5)$ | $3(1,5)$ | $3(1,5)$ | 0.932 |
| AIDS mentioned as most common ailment, $\mathrm{n}(\%)$ |  |  |  | 0.116 |
| No | 105 (55.9\%) | 39 (44.8\%) | 144 (52.4\%) |  |
| Yes | 83 (44.1\%) | 48 (55.2\%) | 131 (47.6\%) |  |
| Respiratory ailments are common | 114 (60.6\%) | 53 (60.9\%) | 167 (60.7\%) |  |
| Cervical cancer is common | 75 (39.9\%) | 37 (42.5\%) | 112 (40.7\%) |  |
| Know someone with HIV/AIDS | 55 (29.3\%) | 23 (26.4\%) | 78 (28.4\%) |  |
| How do people get infected with HIV/AIDS? ${ }^{\text {c }}$ |  |  |  |  |
| Sex | 163 (86.7\%) | 70 (80.5\%) | 233 (84.7\%) |  |
| Razors | 67 (35.6\%) | 27 (31.0\%) | 94 (34.2\%) |  |
| Mother to Child | 2 (1.1\%) | 2 (2.3\%) | 4 (1.5\%) |  |
| Blood | 11 (5.9\%) | 5 (5.7\%) | 16 (5.8\%) |  |
| Needles | 32 (17.0\%) | 16 (18.4\%) | 48 (17.5\%) |  |
| How do you prevent HIV/AIDS infection? ${ }^{\text {c }}$ |  |  |  |  |
| Condoms | 124 (66.0\%) | 58 (66.7\%) | 182 (66.2\%) |  |
| Do Not Share Razors | 12 (6.4\%) | 11 (12.6\%) | 23 (8.4\%) |  |
| Have One Partner | 44 (23.4\%) | 17 (19.5\%) | 61 (22.2\%) |  |
| Abstinence | 10 (5.3\%) | 2 (2.3\%) | 12 (4.4\%) |  |
| Can you cure AIDS?, n(\%) |  |  |  | 0.930 |
| Do not know | 12 (6.4\%) | 6 (6.9\%) | 18 (6.5\%) |  |
| No | 165 (87.8\%) | 75 (86.2\%) | 240 (87.3\%) |  |
| Yes | 11 (5.9\%) | 6 (6.9\%) | 17 (6.2\%) |  |
| How do you learn about illness and treatment? ${ }^{\text {c }}$ |  |  |  |  |
| School | 16 (8.5\%) | 2 (2.3\%) | 18 (6.5\%) |  |
| Radio | 64 (34.0\%) | 24 (27.6\%) | 88 (32.0\%) |  |
| Community Meetings | 40 (21.3\%) | 10 (11.5\%) | 50 (18.2\%) |  |
| Community Members | 25 (13.3\%) | 17 (19.5\%) | 42 (15.3\%) |  |
| Community Health Workers | 7 (3.7\%) | 8 (9.2\%) | 15 (5.5\%) |  |
| Traditional Healers | 2 (1.1\%) | 6 (6.9\%) | 8 (2.9\%) |  |
| Clinics | 74 (39.4\%) | 32 (36.8\%) | 106 (38.5\%) |  |

${ }^{\text {a }}$ To compare the distribution of patient characteristics by provider usage, we employ chi-square tests. Similarly, we use a two-sample rank sum test for continuous variables by provider usage.
${ }^{\mathrm{b}}$ Continuous variables are reported as medians (interquartile range).
${ }^{\text {c }}$ Percentages may sum to greater than $100 \%$ because multiple answers may be provided.

This is the odds of visiting TH only/first versus hospital only/first.
Table 13: Model Effects: Patients and Provider Usage

|  | Odds Ratio | Lower $95 \%$ | Upper $95 \%$ | P-value |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  | 0.920 |
| Age | 1 |  |  |  |
| 25 (ref) | 0.92 | 0.60 | 1.40 |  |
| 35 | 0.91 | 0.54 | 1.56 |  |
| 45 | 2.52 | 1.37 | 4.66 | 0.003 |
| Male |  |  |  | 0.001 |
| District | 1 |  |  |  |
| Inhassunge (ref) | 0.26 | 0.12 | 0.55 |  |
| Alto Molocue | 0.85 | 0.46 | 1.60 |  |
| $\quad$ Namacurra | 0.94 | 0.86 | 1.03 | 0.192 |
| Education (per level) | 0.66 | 1.17 | 0.369 |  |
| Routes of Transmission (per 1 increase) | 0.88 |  |  |  |
|  |  |  |  |  |

