

# Subject Recruitment: Cultural Issues, Gender, Confidentiality and HIV

Lillian Mtei

DARDAR Health Study

# Subject recruitment - HIV

- Specified number – a particular number must be reached
- Specified time – a particular time set for recruitment

# Subject recruitment - HIV

- Eligibility criteria – depends on what the study entails
- Time barrier – finances, subject matter
- Financial barrier – dependent on time

# Cultural issues versus HIV

- Research ethics – a new concept in this part of the world, fair treatment following Good Clinical Practice
- Informed consent – concept not quite understood as do not understand that  
**CAN REFUSE, CAN DROP OUT**

# Cultural issues versus HIV

- Understanding of “research” versus treatment – most cases it’s “intention to treat”
- Medical personnel are right – belief quite common in parts of the world
- Communication with research centre – cannot understand “client rights”, scared to annoy medical personnel

# Gender versus HIV

- Females more likely – easily coerced? partner not notified?
- Health seeking behaviour – through pregnancy, child rearing, caring for the sick
- Do not mind “research” – not a sensitive issue to females as to males

# Gender versus HIV

- Trustworthy – females tend to trust medics, females medics tend to trust females
- Committed – remember appointments, take medications, keep diaries
- Have more time; can plan their time – at home, less important jobs

# Confidentiality versus HIV

- Likely to disappear because in KNOWN HIV related research – overcome by use of same buildings? same rooms? same medics?
- Stigma and discrimination – can occur from research personnel, as a result of breach of confidentiality.



# Confidentiality versus HIV

- Research records – HIV status and other important medical information likely to be known
- Identifiers likely to be floated – especially if research involves follow-up

# Subject Recruitment

- **Retention**

Even after subject recruitment succeeds;  
this is the next hurdle.....