Introduction: Good day, my name is ______________________, and my colleague is ______________. We represent the Research Alliance to Combat HIV/AIDS (REACH), a programme of the University of Ibadan, and Northwestern University, USA. The aim of this discussion is to advance understanding of HIV related risk perceptions and behaviors in Ugep, Olunloyo, and Badeku through conversation that is centered on cultural beliefs, norms, attitudes, practices, and structures of power and communication that might have influence on HIV risk and prevention.

We know that you have valuable insights on these issues and we want to encourage you to speak as openly and freely as you can—there are no right and wrong answers. The information we gather can be used to develop relevant programs and interventions to assist people and communities in protecting their health. The better the information that we gather, the better the programmes that can be developed.

Confidentiality and Informed Consent: I want you to know that all the information generated from this discussion is for research purposes only and will not be used for any other purpose. All the information you volunteer will be kept confidential and no reference will be made to your name. The interview will take about 2 hours, and your open and candid contribution to discussions will be highly appreciated. We also want to use a recorder so that we can get all the information better so that nothing useful is lost. Do I have your permission to continue?

For focus group discussion participants:
1. Yes (If Yes, remain in group)
2. No (If No, thank them and dismiss from group)

Once all those who provide permission to continue have been identified, proceed with informed consent.
Focus of Discussion:
HIV RELATED RISK PERCEPTIONS

Estimated Time for the Discussion: 1.5 – 2 Hours

START

1. Do you know about HIV/AIDS? What do you know about it? ELICIT MORE THAN ONE RESPONSE, IF POSSIBLE.
   a. PROBE: What are common local or folk terminologies for HIV/AIDS in this community?
   b. PROBE: Do you think your knowledge of HIV/AIDS is different from or similar to other peoples knowledge in your community
   c. PROBE: Discuss primary sources of this knowledge for different people in the focus group and also, for others in the community.

2. How do people become infected with the virus? What are the behaviors that put people at risk for HIV/AIDS?
   a. PROBE: Besides their own ideas about what puts people at risk, are they aware of other ideas held in the community?
   b. PROBE: If there are other ideas about risk in the community, do certain groups of people have these ideas? Do you think they are more a matter of individual differences in knowledge?

3. Are some groups more at risk for contracting HIV/AIDS than others and if so, what groups are at risk and what groups are at less risk?

4. What can be done to protect against HIV/AIDS?
   a. PROBE: Besides the views discussed among participants, are they aware of other ideas in the community about how to protect against HIV/AIDS?
   b. PROBE: If they are aware of other ideas, what groups hold those ideas?

5. How big of an issue do you think HIV/AIDS is for people in your community and what makes it an issue of greater or lesser importance?
   a. PROBE: Has the importance of HIV/AIDS changed in the community over the past few years and if so why?
   b. PROBE: Is it more of an issue for some groups than for others, and if so, which groups and why?
   c. PROBE: Is there denial or do they accept that AIDS is an issue?

6. Do you know people in this community who may be infected with HIV or sick with AIDS or who might have died of AIDS?
   a. PROBE: Do these people belong to any particular social groups? For example, people who are injection drug users, long distance truckers, commercial sex workers, or men who have sex with other men, etc.?
   b. PROBE: In your opinion, what are the factors responsible for their infection? Are they responsible?
7. What does your community think about people who are infected with HIV or are sick with or have died from AIDS?

8. What about HIV testing? How important is HIV testing? Why is it or isn’t it important?
   a. PROBE: Do different groups feel differently and if so, describe these differences?
   b. PROBE: Do opinions differ depending on who is infected and if so describe these differences (e.g. children vs. wives vs. injection drug users, etc)
   c. PROBE: Is there stigma associated with being HIV infected? and if so, describe.
   d. PROBE: Why do you think people hold these ideas?
   e. PROBE: Have these ideas changed over time? How so?
   f. PROBE: How do you think people with HIV/AIDS are impacted by these attitudes?

9. Is testing available in your community?
   a. PROBE: Where do people get tested?
   b. PROBE: How do people find out about testing? Do you think enough people know about testing sites?
   c. PROBE: Is testing convenient in terms of location, proximity to transportation, etc?
   d. PROBE: Is testing accessible in terms of cost, enough locations, ease of obtaining appointments, etc?

10. What is the reputation of the testing locations?
    a. PROBE: Is testing fully confidential? Explain.
    b. PROBE: What are providers like?
    c. PROBE: Are they pleasant and respectful?

11. What do people think about testing, is there any stigma associated with testing? Why do people get tested or not?

12. Do you think that people are open to go to HIV testing centers to get tested? Why or why not?
    a. PROBE: How does distance or cost affect their openness?
    b. PROBE: Attitude of health care providers?
    c. PROBE: Social-cultural factors (beliefs, taboos, norms etc)?
    d. PROBE: Attitude towards individuals who are infected?
    e. PROBE: Gender power relations or ideas about proper gender roles?
    f. PROBE: Knowledge about where testing centers are?
    g. PROBE: Fear of knowing HIV status?
    h. PROBE: Thinking HIV is a low priority/ or that they are not at risk?

13. Do you think that people return for their test results? Who do they say about their test results? Who do they not tell?

14. What do you think are the greatest barriers to HIV testing in your community?
    a. PROBE: Are peoples attitudes and beliefs about HIV barriers?
    b. PROBE: What structural factors (e.g. availability of services, lack of resources, lack of privacy in the community, etc.)?

15. Do you think there are ever times when people should be required to get an HIV test?
Why or why not? If yes, when should this be required? What do you think others in your community think about that?

16. Are you aware of any instances when HIV testing is offered to people as part of routine care? What are such times?

17. Are there HIV prevention or treatment services in your community?
   a. PROBE: Are there Mother-to-Child prevention services in your community?
   b. PROBE: Do you know of places that provide antiretroviral therapy to people living with HIV/AIDS?

18. What do you think your community is doing about the issue of HIV/AIDS? Is it enough? Could they do more?
   a. PROBE: Could you provide specific examples (e.g. services, overt acts of discrimination, policies, etc.)?
   b. PROBE: Which groups are doing things, either positive or negative (e.g. medical providers, police, religious leaders)?
   c. PROBE: What specifically are political leaders are doing?
   d. PROBE: Is the community response adequate? Why or why not?
   e. PROBE: Are there other things that should be done and if so what are they?

19. What do you think are the greatest barriers to dealing with HIV/AIDS are in your community and in your country and what, if anything, do you think could be done about them?

THANK YOU VERY MUCH FOR YOUR TIME. YOUR CONTRIBUTIONS HAVE BEEN VERY HELPFUL.
AIM: The aim of this discussion is to advance understanding of HIV related risk perceptions and behaviors in Ugep, Olunloyo, and Badeku through conversation that is centered on cultural beliefs, norms attitudes, practices, and structures of power and communication that might have influence on HIV risk and prevention

INSTRUCTIONS TO MODERATOR

- Introduce selves
- Verify comfort level of participants with venue, time and nature of discussion. Express gratitude for their time. Assure them of confidentiality and obtain consent, especially over recording of the discussion. Establish that all participants are to treat the identity of participants and matters discussed as confidential. Explain aim of discussion
- Composition: The FGDs will be conducted among groups identified in the protocol.
- Administration: Trained facilitators will be used to conduct the discussions
- Consent: Seek and obtain consent of participants

Estimated Time for the Discussion: 1.5 – 2 Hours

START

1. First let us talk about girls and the age at which they first have intercourse in this community. What is the average age of first intercourse among girls in this community?
   a. PROBE: What are the disposing factors (financial difficulties, peer pressure, alcohol use, etc.)?
   b. PROBE: What are the most likely reasons girls have for having sex at that age?
   c. PROBE: What is the community’s attitude towards this? (Does it encourage or discourage this? What have been the results?)
   d. PROBE: Do current trends in female sexual debut differ from customary trends? If so, what are responsible for these changes or differences?

2. Now, let's talk about boys and the age at which the first have intercourse in this community. What is the age of sexual debut among boys in this community?
   a. PROBE: What are the disposing factors (financial difficulties, peer pressure, alcohol use, etc.)?
   b. PROBE: What are the most likely reasons boys are have for having sex at that age?
   c. PROBE: What is the community’s attitude towards this? (Does it encourage or discourage this? What have been the results?)
   d. PROBE: Do current trends in male sexual debut differ from customary trends? If so, what are responsible for these changes or differences?
3. In general, how would you describe the sexual mores in this community? In your judgment, have there been changes in the sexual mores in this community?
   a. PROBE: What are these changes? Why are these changes taking place?
   b. PROBE: Any further reasons?
4. We would like to talk about a range of practices that may or may not be common in this community but have been observed elsewhere. These will include transactional sex (including commercial sex work), Men having sex with men (MSM), lesbianism, and others not included in this list that you may want to talk about. Let us start with transactional sex (TS). [Moderator: DEFINE TS AS THE EXCHANGE OF SEX FOR MONEY, GIFTS OR FAVOUR].
5. How often do girls and women engage in TS? Is it common or rare?
6. Without mentioning names specifically, could you provide concrete examples why you think this way? What about boys and men? How often do they engage in TS? Is it common or rare?
7. Who is more likely to provide the money, gift or favor in exchange for sex? Boys/men vs. girls/women?
   a. PROBE: What do you think is the reason behind this pattern?
   b. PROBE: Under what conditions can the pattern you described above be reversed? Without mentioning names specifically, could you provide concrete examples why you think this way?
8. Please give a rough estimate of the number of sex workers living and/or working in this community. Is that a high number?
   a. PROBE: On what basis do you make this estimate?
9. Discuss the risk of sex workers for getting and transmitting Sexually Transmitted Diseases and HIV.
   a. PROBE: What do you think is responsible for the generalized nature of the HIV/AIDS epidemic?
   b. PROBE: Discuss what could be done to reduce these risks.
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Thank you for your frank comments. Can we talk about homosexuality at this time? [Moderator: VERIFY COMFORT LEVEL OF PARTICIPANTS WITH TOPIC.]

10. Is male homosexuality common in this community? How common is it? Is lesbianism common in this community? How common is it?
    a. PROBE: On what basis do you say this?

11. What is the community’s attitude towards MSM? Elicit responses as to the group’s own attitudes and perceptions regarding MSM, as well as community attitudes and discuss any differences between the two.

12. Please give a rough estimate of the number of MSMs/lesbians living and/or working in this community. Is that a high number?

13. Discuss the risk of MSMs for STIs and HIV. What can be done to reduce their risk and the spread of HIV?
14. Without mentioning names, could you mention instances in which male homosexuals have been diagnosed with AIDS in this community?

EXIT

- Thank discussants for their time and candid participation. Mention the need to use these conversations as the basis for a continuing partnership in light of the long term nature of the study.
- Recap the main points of the discussion. Modify records or probe as appropriate.
- Refer to location of the REACH Community Office and encourage discussants to visit it for further conversations.
- Close.
RESEARCH ALLIANCE TO COMBAT HIV/AIDS

FOCUS GROUP DISCUSSION GUIDE FOR MODERATORS AND NOTE TAKERS

Focus of Discussion:
GENDER ISSUES

AIM: The aim of this discussion is to advance understanding of HIV related risk perceptions and behaviors in Ugep, Olunloyo, and Badeku through conversation that is centered on cultural beliefs, norms attitudes, practices, and structures of power and communication that might have influence on HIV risk and prevention

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Estimated Time for the Discussion: 1.5 – 2 Hours

START

1. Let us start with a brief listing of the responsibilities of men and women/boys and girls in this community. Who is responsible for what?
   a. PROBE: First, at the household level
   b. PROBE: Next, at the extended family level
   c. PROBE: Lastly, at the community level

2. What do you think about this distribution of responsibilities?
   a. PROBE: Do you think it is fair/appropriate?
   b. PROBE: On what is this distribution based on?
   c. PROBE: Has it changed over the past 5 to 10 years? If so how? Why or why not?
   d. PROBE: Can it be changed/Should it be changed? If so, how? Why or why not?

3. Now, let’s talk about the customary household decision making process in this community with regard to the following
   a. Who has deciding power over what food to cook or eat on a daily basis?
   b. Who has deciding power over the schools the children will attend?
   c. Who has deciding power over when to have sex between the couple?
d. Who has deciding power over whether the couple (or just the wife or husband) will use a family planning method or not?
e. Who has deciding power over whether the couple will use a condom during sex or not?
f. Who has deciding power over the number of children the couple will have?
g. Between the man and the woman, whose ideas or opinions are more likely to prevail over use of financial and other household resources?

4. Tell me about land inheritance in your community. Do men and women have an equal chance to inherit or buy property in the community?
   a. PROBE: Does the situation have implications for reproductive decision making? How?

5. Discuss the conditions under which a man could be considered justified in leaving his wife.
   a. PROBE: For neglecting chores (specify kind); refusing sex; unfaithfulness; disobedience; HIV infection, covert use of contraception? Of these (and other conditions for divorce), which do you consider to be the most serious? Why?

6. Discuss the conditions under which a woman could be considered justified in leaving her husband.
   a. PROBE: For failure to financially support the wife and children; beating; unfaithfulness; HIV infection; uncooperative attitude towards contraception? Of these (and other conditions for divorce), which do you consider to be the most serious? Why?

7. How does this community perceive the issue of domestic or intimate partner violence against women by their male partners? Against men by their female partners?
   a. PROBE: Are FGD participants aware of cases? How big of a problem do they think it is in their community?
   b. PROBE: Do they think it’s a problem for some groups more than others and if so, which and why?
   c. PROBE: How are cases resolved? Are there differences in the settlement processes and outcomes?
   d. PROBE: What are issues of justice and equity in your community?

EXIT

- Thank discussants for their time and candid participation. Mention the need to use these conversations as the basis for a continuing partnership in light of the long term nature of the study.
- Recap the main points of the discussion. Modify records or probe as appropriate
- Refer to location of the REACH Community Office and encourage discussants to visit it for further conversations.
- Close