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The Demand for, and Impact of, Learning HIV Status

By REBECCA L. THORNTON*

This paper evaluates an experiment in which individuals in rural Malawi were randomly assigned monetary incentives to learn their HIV results after being tested. Distance to the HIV results centers was also randomly assigned. Without any incentive, 34 percent of the participants learned their HIV results. However, even the smallest incentive doubled that share. Using the randomly assigned incentives and distance from results centers as instruments for the knowledge of HIV status, sexually active HIV-positive individuals who learned their results are three times more likely to purchase condoms two months later than sexually active HIV-positive individuals who did not learn their results; however, HIV-positive individuals who learned their results purchase only two additional condoms than those who did not. There is no significant effect of learning HIV-negative status on the purchase of condoms. (JEL: H12, O15)

Over the past two decades, the HIV/AIDS epidemic has afflicted millions of individuals in Africa. In the absence of significantly expanded prevention and treatment programs, the epidemic is expected to worsen in many other parts of the world. One intervention often suggested to alleviate the spread of the disease is HIV testing, and some have gone so far as to say that voluntary counseling and testing (VCT) is the “missing weapon in the battle against AIDS.”¹ Under the assumption that HIV testing is an effective prevention strategy, many international organizations and governments have called for increased investments in counseling and testing, requiring large amounts of monetary and human resources (Global Business Coalition 2005; Know HIV AIDS 2005). For example, in South Africa, government expenditures on counseling and testing increased from \$2.4 million in 2000 to \$17.3 million in 2004, and in Mozambique, 55 percent of all HIV/AIDS program expenditures in 2000 were for HIV counseling and testing (H. Gayle Martin 2003). Some governments have even suggested implementing universal testing programs, sending nurses door to door.²

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¹ Richard H. Beardsley and Richard Farnham, “A Global Battle’s Missing Weapon,” *New York Times*, February 05, 2004.
² John Bransford, “Three Schemes, Diverse Measures: AIDS Testing Urged for All in Remote Nations,” *Boston Globe*, October 23, 2005.

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