

No Difference between 1- and 2-year Recall Periods in Locatability of
Sexual and Drug Injection Partners

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Abstract

Health professionals engaged in partner notification often limit recall periods (also called interview or notification periods) for HIV contact interviews to one year or less. Periods longer than a year are believed to be unproductive because partners more than a year in the past may be difficult to locate. To test this belief, we compared 1- and 2-year recall periods in terms of the locatability of sexual and drug injection partners. We recruited subjects from the largest HIV testing clinic in Seattle, U.S.A., and a large epidemiologic study of drug injectors in Seattle. After eliciting their partners for the past 1 or 2 years, we asked subjects about their knowledge of different types of locating information for each partner. The proportion of partners who are locatable is similar for 1- and 2-year recall periods. This study highlights the need for research to establish efficient recall periods for HIV contact interviews.

Introduction

Health professionals engaged in partner notification often recommend that recall periods (also called interview or notification periods) for HIV contact interviews be limited to one year or less (1-2). Periods longer than a year are believed to be unproductive because partners more than a year in the past may be difficult to locate. These professionals recognized that their recommendations were not based on formal evidence and called for empirical research to determine the most appropriate recall periods for HIV contact interviews (1, 3). Accordingly, we describe a study that compared 1- and 2-year recall periods in terms of the locatability of sexual and drug injection partners.

Method

Subjects

We used data from our study of memory for sexual and injection partners (4). In that study, we recruited subjects from the largest HIV testing clinic in Seattle, U.S.A., and a large epidemiologic study of drug injectors in Seattle.

Procedure

The memory study focused on the elicitation of sexual and injection partners. Sexual partners include those persons with whom subjects had genital or anal contact (i.e., all anal, manual, oral, and/or vaginal sex partners). Injection partners include those persons with whom subjects had injected drugs.

As part of the memory study's design, we randomly assigned subjects to 1- and 2-year recall periods for partner elicitation questions in a 2:1 ratio, respectively, during the first 8 months of data collection. During the final 4 months of data collection, we assigned all subjects to the 2-year recall period. After eliciting their partners, we asked subjects a series of questions about each of their partners, up to the first 12 they recalled. We randomly assigned subjects to one of four separate subsets of questions about partners. For 40 subjects (one 25% random subsample), the questions asked whether they knew different types of locating information about the partner and, for injection partners, whether they had shared injection paraphernalia with the partner. We obtained informed consent from all subjects, and the Human Subjects Review committee at the University of Washington approved our procedures.

Results

Subject characteristics

Of the 40 subjects, 37 had had sex during the recall period and 20 had injected drugs during the recall period. These 40 subjects were similar in demographic and behavioral terms to the overall sample (4). In brief, the mean age of the 40 subjects was 38, 80% were male, 20% considered themselves homeless, and 75% were white (with the rest African-American, Hispanic, or Native American). Among sexually active subjects, 52% were men who had sex with men. The drug injectors primarily injected heroin and/or cocaine, and reported sharing injection paraphernalia with 64% of their injection partners on average. There were no significant or meaningful differences between subjects assigned to different recall periods on a host of demographic and behavioral variables.

Sexually active subjects assigned to the 2-year recall period recalled more partners (mean = 14.7) than those assigned to the 1-year recall period (mean = 12.2). Drug injectors assigned to the 2-year recall period, though, recalled fewer injection partners (mean = 13.9) than those assigned to the 1-year recall period (mean = 16.4). In addition, subjects assigned to the 2-year recall period who were in a separate random subsample (and were not asked about partners' locatability) last had sex with 33% of their sex partners over 12 months prior to the interview and last injected with 27% of their injection partners over 12 months prior to the interview. This suggests that subjects assigned to the 2-year recall period who did report on partners' locatability (but not when sexual/injection contact occurred) also had a substantial proportion of partners who were more than 12 months in the past.

Comparison of recall periods in terms of partners' locatability

Table 1 shows the means and standard deviations for three measures of locatability by partner type and recall period. The first measure is the proportion of partners for whom a subject knows the partner's last name and telephone number/address (proportion very likely locatable). The second measure is the proportion of partners who are likely or very likely locatable. Likely locatable partners are those partners for whom the subject knows the partner's last name or telephone number/address. The third measure is the proportion of partners who are potentially, likely, or very likely locatable. Potentially locatable partners are those partners for whom the subject either: a) knows someone else who might know how to locate the partner, or b) knows where the partner typically hangs out, works, or goes to school, and can give at least an "o.k." physical description of the partner.

Overall, the majority of both types of partners were locatable, even for the "very likely locatable" measure. Within each measure and partner type, the means for the 1- and 2-year recall periods are very similar. All differences between recall periods are nonsignificant and small (all point biserial correlations are less than |.28|). We also compared recall periods in terms of the locatability of sex partners for various subgroups of subjects, including women, men, drug injectors, non-injectors, men who have sex with men, subjects with opposite sex partners only, subjects with 12 or fewer partners, subjects with fewer than the median number of partners, and subjects with the median or greater number of partners (medians: sexual partners = 5; injection partners = 8). None of the differences in locatability between recall periods are significant or large in any subgroup and the mean levels for each subgroup parallel those reported in Table 1. We did not conduct any analysis for subgroups defined by age because only 5% of the 40 subjects were less than age 25. We also did not perform any analysis for subgroups of injection partners due to the very small number of drug injectors.

Discussion

In this study, the proportion of partners who are locatable is similar for 1- and 2-year recall periods. However, there are several limitations to our study. First, our sample is small, although it is a random subsample of our overall study sample that is itself representative of much larger populations of persons at high risk for HIV (4). Second, for subjects who provided locatability data, there is no information on precisely when in the recall period subjects had sexual or injection contact with particular partners. Thus, for subjects assigned to the 2-year recall period, we could not determine the locatability of just those partners between 1 and 2 years in the past. We are currently conducting another study with subjects recruited from the same sources in which we ask all subjects about partners' locatability and when sexual/injection contact occurred. Preliminary data indicate that most partners between 1 and 2 years in the past are locatable, which is consistent with the results reported here. Finally, the locatability measures are based solely on self-report, and the currency, accuracy, and detail of the locating information, if subjects were to provide it, might be less in the 2-year recall period.

Despite these shortcomings, this study suggests that clinicians should not automatically assume that sexual and injection partners more than a year in the past are unlocatable. This study further highlights the need for research to establish efficient

recall periods for HIV contact interviews, as has already been done for such infections as gonorrhea (5) and chlamydia (6).

References

1. Potterat JJ, Meheus A, Gallwey J. Partner notification: operational considerations. *Int J STD AIDS* 1991; 2:411-415.
2. Fenton KA, Chippindale S, Cowan FM. Partner notification techniques. *Dermatol Clin* 1998; 16:669-672.
3. Fenton KA, Peterman TA. HIV partner notification: taking a new look. *AIDS* 1997; 11:1535-1546.
4. Brewer DD, Garrett SB, Kulasingam S. Forgetting as a cause of incomplete reporting of sexual and drug injection partners. *Sex Transm Dis* 1999; 26:166-176.
5. Starcher ET, Kramer MA, Carlota-Orduna B, Lundberg DF. Establishing efficient interview periods for gonorrhea patients. *Am J Public Health* 1983; 73:1381-1384.
6. Zimmerman-Rogers H, Potterat JJ, Muth SQ, Bonney MS, Green DL, Taylor JE, White HA. Establishing efficient partner notification periods for patients with chlamydia. *Sex Transm Dis* 1999; 26:49-54.

Table 1. Proportion of sexual and injection partners locatable by recall period

Locatability measure	n	1 year		2 years		
		Mean	S.D.	n	Mean	S.D.
Prop. very likely locatable						
Sexual partners	18	.67	.36	19	.58	.36
Injection partners	8	.41	.34	12	.53	.38
Prop. likely/very likely locatable						
Sexual partners	18	.77	.31	19	.79	.28
Injection partners	8	.57	.29	12	.76	.29
Prop. potentially/likely/very likely locatable						
Sexual partners	18	.87	.21	19	.87	.25
Injection partners	8	.82	.28	12	.86	.24