Introduction
I analyzed data compiled from 2 studies (ZiMBA and EC RCT) conducted by a branch of the Philani Maternal and Child Nutrition Trust based in the community around Zithulele Hospital.

Objective of the Study
To highlight the social and physiological aspects of sexual and relationship health among new mothers throughout the Eastern Cape and the Zithulele community.

Methods
I used Microsoft Excel and R statistical software to analyze data on contraception, intimate partner violence, HIV prevalence and other aspects of sexual and relationship health gleaned from the two data sets the team at Jabulani and Philani provided me access to.

Results
Reasons behind no contraceptive use:
- Most women (>90%) who use opt for injectables despite side effects and lower efficacy than other options
- Many women answered “no reason” because of the way the survey was translated from English to Xhosa

HIV Status in the Social World:
- Who did mothers in the EC RCT data disclose their HIV positive status to?
- What does this reflect about family and sexual partnerships?

Discussion
• Contraception
  • There is a wide variety of options available, but they are not being used
  • Why do women keep going back to injectables?
• HIV
  • IPV and relationship power dynamics may be at play in whether women are empowered to protect themselves, whether and to whom they disclose

Questions
• Concurrency
  • How true is women’s perception of their partners’ concurrency?
  • Even if not associated with HIV incidence, what does it say about relationship power dynamics that may feed risky behavior that in turn feeds HIV incidence?

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Reported HIV positive disclosures from EC RCT mothers