DRAFT REPORT

2008 HIV/AIDS Knowledge Attitudes and Behavior Survey, Jamaica

Report of Findings from HIV/AIDS Knowledge Attitudes and Behavior Survey, Jamaica 2008

Prepared: by Hope Enterprises Ltd.

INDEX

INDEX TO TABLES

INDEX TO FIGURES

Report of Findings from HIV/AIDS Knowledge Attitudes and Behavior Survey, Jamaica 2008

A. INTRODUCTION

The Caribbean is second only to sub-Saharan Africa in HIV & AIDS prevalence. Jamaica, the largest island in the English speaking Caribbean island has however been relentless in its efforts to stem the spread of the disease and in 2007 estimated that approximately 1.3% of the adult Jamaican population was infected with two-thirds being unaware of their status. Behavioural surveillance is part of the Ministry of Health's ongoing efforts. This report documents the results of the 2008 National Knowledge, Attitude, Behavior and Practices (KABP) survey conducted among adults 15-49 years in the general public. This survey is conducted every 3-4 years as part of the behavioural surveillance conducted for HIV/AIDS in Jamaica in which global and country specific behavioural indicators and intervention efforts are monitored. This 2008 survey was commissioned under the Caribbean Social Marketing Programme for HIV & AIDS Prevention (CARISMA) programme funded by PANCAP and its partner, the German Development Bank (KfW).

The Jamaican Situation:

Recent statistics estimate that as of year 2007, 25,000 persons or approximately 1.3% of the Jamaican adult population is infected, with almost two-thirds thought to unaware of their status. At the end of 2006, the cumulative number of persons reported with AIDS in Jamaica was 11,739 and the cumulative number of AIDS deaths was 6,673.

Among reported AIDS cases on whom risk data are available (73% of cases), the main risk factors fuelling the epidemic are multiple sex partners, history of STDs, crack/cocaine use, and sex with prostitutes.

Socio-cultural and economic factors contribute to the vulnerability of many persons and result in persistent risky behaviors. High levels of unemployment, persistent poverty, and a growing commercial sex industry coupled with gender inequality have resulted in early sexual debut, age-mixing (sexual relationships between adolescent girls and older men) and increasing transactional sex.

A PEER Study carried out on young women and sexual relationships in Kingston Jamaica found that multiple partners were likely to be the norm and were a rational response to realities rather than the result of individual behavior preferences. The study also concluded that various partners fulfill various emotional and economic needs (Options and Hope, 2007).

Against this background of HIV/AIDS risk behaviour it remains important to continue to track the sexual behavior of the nation particularly in the face of increasingly difficult economic climate. It is also increasingly important to seek to delve further into understanding the needs and motivations of behaviour exhibited whether it is of a risky or protective nature.

The 2008 KABP Survey covered 1800 adults 15-49 years.

- Executive Summary

Results of the 2008 KABP survey indicate that:

Multiple partnerships, identified as one of the main risk factors fuelling the epidemic in Jamaica, increased among all groups in 2008 but more so among males 15-24 years, 76% of whom reported multiple partnerships in the previous 12 months compared to 52% of older men. Different partners have been found to fulfill different economic and emotional needs and with our increasingly harsh economic climate this may become an even more of a feature in our social landscape.

While the foregoing gives cause for concern, it is encouraging however to see that risky sex in respect of the proportion of the sexually active population, 15-49 years that had unprotected sex with a non cohabiting partner declined significantly over 2004. This signals that many are cognizant of the risk they expose themselves to and have taken appropriate protective action. Among the sexually active population it was <16% of men and <21% of women who reported unprotected sex with a non cohabiting partner in the previous 12 months. Reported condom use is high and varies between 72% - 84% for males and 54% - 66% for females.

Commercial sex by men (sex with a prostitute) also declined over 2004 however condom use by those practicing this risk behavior also declined.

Transactional sex, defined as the exchange of gifts or money for sex, carries with it an inherent power imbalance and it was 37% of the sexually active population or 27% of the population 15-49 years who were so involved. Transactional sex could become an even more important economic reality for many in the face of an increasingly difficult economic climate. With this risk behavior however females will have to learn how to negotiate condom use as currently it is 46% of females who have had transactional sex in the last 12 months who have either never or occasionally protected themselves in the last 10 sex acts (whether or not transactional).

Casual sexual encounters involving new partners often involve unplanned sex and are also a cause of concern. It was 34% of the sexually active population 15-49 years who reported such a partner. Not unexpectedly this was more likely among men and the younger age cohort.

Again it was just over 40% who had either never or only sometimes protected themselves in the last 10 sex

Looking at the total population 15-49 years, whether or not sexually active, it was 7.9% of the total population who would be exposing themselves to risk of infection by not protecting themselves in situations of risk.

Even as many report protecting themselves however, there was a significant increase in reported lifetime incidence of STIs among persons engaged in any of the risk behaviours discussed above. This was more so among the females 15-24 years who remain a very vulnerable group for whom transactional sex are important survival options.

The foregoing indicates that intervention efforts to encourage condom use in risk situations must not be relaxed. Correlation analysis in this surveys indicates that issues of trust of partner and a view that condoms reduce sexual pleasure act as barriers to condom use. These will need to be addressed directly in intervention campaigns.

Use of mass media in this regard cannot be discounted given the experience of the CARISMA media campaign. The CARISMA media campaign sought to promote condom use irrespective of partner status by empowering the sexually active with messages to continue condom use and "run your show with a condom, everytime". Based on self-reported data collected in this survey the campaign appears to have positively impacted behavior. The campaign achieved a 92% recall among the total sample with a third indicating it has already positively impacted their behavior in respect of condom use and another 54% indicating it could impact their behavior in the future. Further, it stimulated discussion on HIV/AIDS among friends (60%) and among partners (46%).

B. METHODOLOGY

A cross-sectional, household-based, survey among a randomly selected sample of 1800 persons islandwide was used to provide data for this study. Respondents represented persons aged 15-49yrs with the younger group, 15-24years, over sampled to facilitate a more robust sample of sexually active persons in this age cohort.

i Sample Design and Selection

The sample design reflected the following multi-staged approach:

1. The island was stratified into 14 parishes with Kingston and St. Andrew treated as two parishes to ensure that the inner city areas of Kingston in particular, were fully represented in the sample.
2. Each parish was further stratified into constituencies.
3. Each constituency was stratified into three areas, namely:
    a. Parish capitals and main towns
    b. Rural areas
4. Each of the two areas comprising the constituencies was then divided into primary sampling units (PSU's) or Enumeration Districts.
5. A random sample of PSUs was then selected with probability proportional to size (PPS). This statistical technique was designed to ensure that the larger PSUs were selected with a greater probability while at the same time, each household was selected with equal probability irrespective of the PSU from which it came. Kingston Metropolitan Region (KMR) and St. James were purposively selected.
6. 72 EDs were selected as follows:
    - 23 EDs in KMR and Montego Bay
    - 25 EDs in other urban areas
    - 24 EDs in rural areas
7. Twenty five households were then systematically selected from each ED and one person identified within each household as the person to be interviewed. Interviewers identified the households to be included using a map of the area, a random starting point and a pre-determined sampling interval. Within the household one (1) respondent was then randomly selected to participate using the Kish card method.
8. The sample was quota controlled for age and gender.

The sample size was estimated to enable results projectible +/- 5% at a 90% confidence level.

- Data Collection:

Data was collected in face-to-face confidential interviews by trained interviewers. Answers to sensitive questions on sexual behavior were however not told to the interviewer but answered by the respondent himself on separate cards provided for the purpose. These cards were then dropped into a large sealed reinforced envelope by the respondent.

The instrument was first pretested for flow, comprehension and to identify areas that would need specific attention in administering. Following refinement of the instrument, trained interviewers from Hope Enterprises traveled to each enumeration district selected the household and the person to be interviewed then administered the questionnaire to available and consenting persons.

Respondents who were at home at the time of the survey and consented to being interviewed, after being read the informed consent form, were interviewed. In urban areas where the selected respondent was not at home at the time of the survey, interviewers requested information on a convenient day and time when they could be interviewed. Based on suggested return days and times a second visit to the urban ED was made.

If respondent was still unavailable at the time of the second visit they were removed from the sample and a new respondent selected from the specific household. This substitute respondent was the person who answered the door when the interviewer approached the house, provided their demographic quota had not yet been filled. If this quota had been filled then the household was removed from the sample and no interview conducted.

The interviewer then substituted the entire household with the household to the *right* of the "non-response" household (provided this household had not already been included in the survey)[1] and began selection of a new respondent. Respondent will be selected using the Kish card method. If the selected respondent was not at home then the interviewer substituted with the person who first answered the door, provided their demographic quota had not been filled. Only one call/attempt was made to any substitute household. Interviewer continued substitution until a qualifying interview was gained.

Interviewers were rigorously trained over a five day period with two days devoted to field practice. Interviewers were all female and travelled in groups of 4 with an intTeams consisted of two females, two males and a supervisor (for the purpose of on site validation).

Informed consent was obtained from each respondent before proceeding with the interview. Interviewers assured participants of their anonymity and the confidentiality of the information. No identifiers (name, address, etc) were included on the questionnaires.

The data collection instrument utilized indicator measures and definitions consistent with UNGASS. Where appropriate existing indicators (similar to those used in YR 2004) were used to ensure comparability with previous surveys. Fieldwork was conducted between February and April 2008.

[1] If household has been included then substitution was made with the nearest household that has not been included

Results of Fieldwork

- A total of 2031 households were called on and 70% of initially selected respondents were completed.
- 30% of respondents were substituted.
- Refusals accounted for 13.2% of initial calls.

Absence from home at time of first visit was highest among males and females of employment age as shown in table below.

Profile of respondents absent on first visit to household

	Profile of selected respondent absent from household at time of first visit (n=410) %
Males 15-24yrs	20.2
Females 15-24yrs	20.0
Males 25-49yrs	31.2
Females 25-49yrs	28.5

ii Questionnaire Design:

The questionnaire was designed to accommodate both face-to-face interviewing and respondent completed sections. This was handled as follows:

Questionnaires were each given a unique identifier number which was also recorded on the self-administered cards for each questionnaire. For the self-administered portion respondents were given Card A if they were married/cohabiting and Card B if they were sexually active in the last year but neither married nor cohabiting. The questions were then read by the interviewer and the respondent asked to filled in the appropriate response on the card without the interviewer seeing. On completion the respondent was asked to fold the card and drop it inmto a large sealed and reinforced envelope carried by the interviewer. This served as the receptacle carried by each interviewer into which all cards collected for the day were dropped. Envelopes had a slot cut into them through which the completed cards were dropped. Envelopes were then brought back to the office where they were opened and the cards attached to the correct questionnaire based on the assigned identification number.

The following areas were self-administered:

- Sexual behaviour with main partner based on being in a cohabiting union and not being in a cohabiting union
- Multiple partnerships
- High risk sexual activities including transactional, coercion, casual partners and commercial sex
- Condom use based on partner type
- Last time condom use
- Substance use
- Sexually transmitted infections

The following areas were covered in the face to face portion of the interview:

- Demographics
- Union status
- HIV/AIDS knowledge and protective practices
- Stigma and discrimination
- Condom attitudes and access
- Voluntary counseling and testing
- Risk perception
- Exposure to intervention
- CARSIMA Campaign recall

Sample Demographics:

	Frequency	Percentage
15-24yrs	893	49.6%
25-49yrs	907	50.4%
Male	896	49.8%
Female	904	50.2%
Upper/middle income (ABC1)	389	21.6%
Working class (C2)	864	48.0%
Lower income (D)	544	30.2%
Refused	3	0.2%
Employed full-time	645	35.8%
Employed part-time	241	13.4%
Unemployed	553	30.7%
Student	360	20.0%
No answer	1	0.1%
Actively practicing religion	993	55.2%
Not actively practicing religion	797	44.3%
No answer	10	0.6%

C: DETAILED FINDINGS

CHAPTER 1: BEHAVIOUR OVERVIEW

SEXUAL ACTIVITY & TYPE OF RELATIONSHIPS AMONG SAMPLE

Three quarters of the sample (males: 75%; females: 74%) was sexually active within the previous twelve months. Sexual activity was reported by the majority of adults 25-49 years (84.6%) and two thirds of young adults 15-24 years (64.4%). More females reported being married or in cohabiting partnerships while the reverse was more likely to be true among males. Younger respondents reported to be non-cohabiting or not married (51%) versus older respondents who were (47%). Findings also revealed that four times as many females 15-24 years old were likely to be married or in cohabiting partnerships when compared to their male counterparts (21% vs. 5% respectively). No other significant differences emerged in this regard.

Table 1: Relationship Status by Age & Gender

	Married/cohabiting	Sexually active but not married/cohabiting	Not sexually active in last 12mths
Male (n=896)	26.2	49.0	24.8
Female (n=904)	34.2	39.7	26.1
15-24yrs (n=893)	13.1	51.3	35.6
25-49 yrs (n=907)	47.1	37.5	15.4
Male (15-24yrs); (n=447)	5.1	56.8	38.0
Female (15-24y); (n=446)	21.1	45.7	33.2
Male (25-49yrs); (n=449)	47.2	41.2	11.6
Female (25-49); (n=458)	46.9	33.8	19.2

POPULATION HIV/AIDS RISK PROFILE (Based on last time condom use)

An overview of the HIV/AIDS related risk behavior of the 15-49yrs. population as it relates to sexual activity and last time condom use was derived. Respondents are classified into the following discreet groups:

- Not sexually active (never had sex)
- Currently abstaining
- Have had only one partner in the last 12 months
- Persons currently protecting self*
- Persons at risk**

*Currently protecting self segment comprises of persons:

- married, with multiple partners in last year but reported using a condom at last sex with outside partner
- not in a married/co-habiting union, who have multiple partners but reported using condom last time sex was had

**At risk segment comprises of persons:

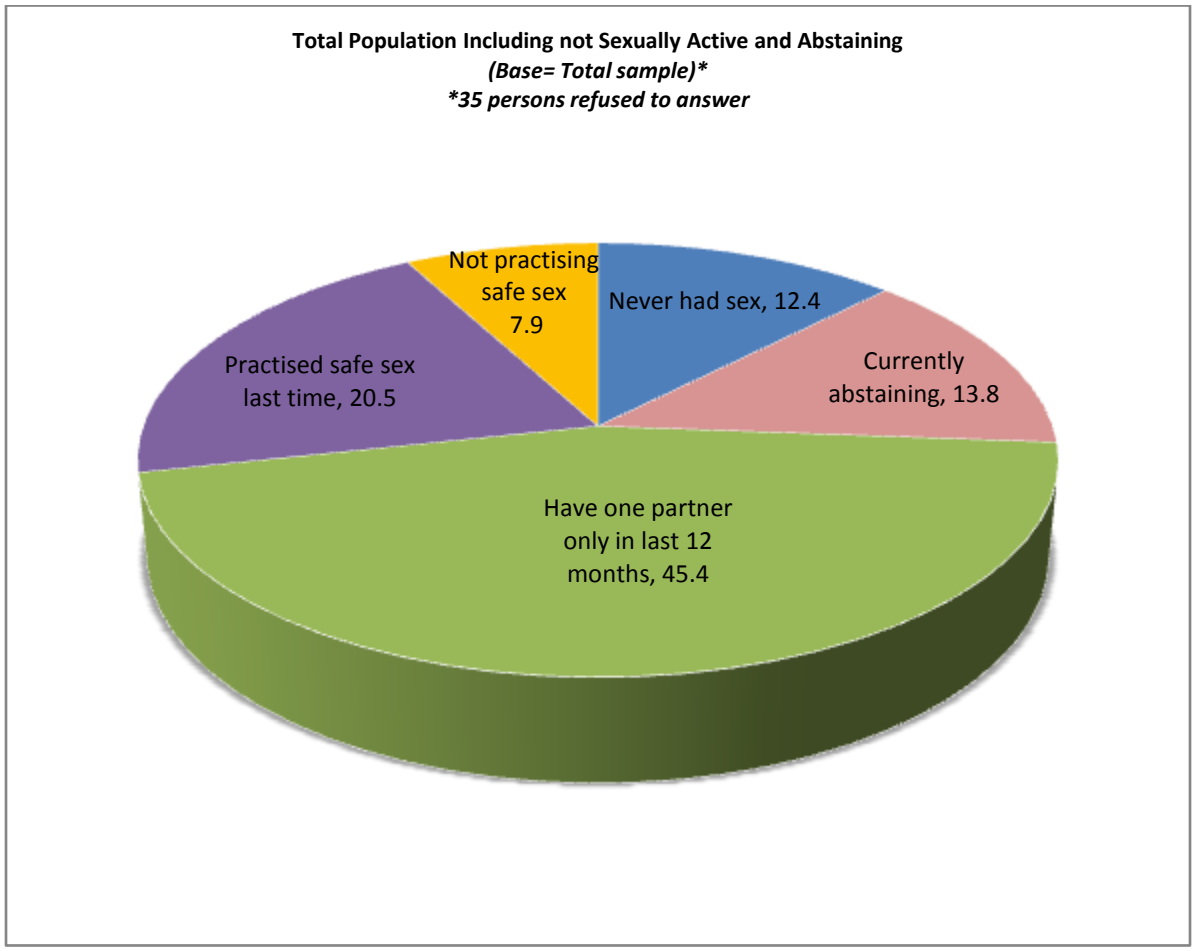
- married, have multiple partners and did not use a condom last time with outside partner
- not married/ cohabiting, with multiple partners who did not use a condom the last time they had sex

Overall it was approximately eight of every hundred persons (7.9%) in the population that engaged in sexual behavior which placed them at higher risk of contracting HIV/AIDS.

Many (45.4%) reported having only one partner in the last 12 months. A fifth (20.5%), all of whom had multiple partners, had used a condom the last time they had sex with someone other than their spouse.

Just over a quarter reported no sexual activity in the last 12 months either due to currently abstaining (13.8%) or not yet sexually active (12.4%).

Figure 1: Population HIV/AIDS Risk Profile (based on last time condom use)



CHAPTER 2: A REVIEW OF SPECIFIC RISK BEHAVIORS

Overall more than a third (36.4%) of the total sample or almost a half (49%) of the sexually active sample had engaged behavior which could increase their risk of exposure to sexually transmitted infections including HIV/AIDS. Such behaviour consists of having multiple partners (more than 1), having transactional sex and having causal partners (a new partner, one night stand or someone picked up in a bar or club in the last year).

MULTIPLE PARTNERSHIPS

Specifically, more than a third (38.9%) of sexually active respondents reported having multiple partners in the last 12 months. Incidence of multiple partnerships was significantly higher among males, persons 15-24yrs. and persons not in a married/cohabiting union. Non-cohabiting unions were equally likely to be new relationships (less than a year 49.8%) as well as steady relationships with at least one year of history (50.2%).

Approximately 4 in 10 (43.9%) of those reporting multiple partners actively practiced religion, which was significantly less than the 58.6% of those who had only one partner.

Table 2: Multiple Partnerships by socio-demographic variables

	RESPONDENTS WITH MULTIPLE PARTNERS %
Total ; (n=1311)	38.9
Male; (n=649)	61.5***
Female; (n=662)	16.8
15-24yrs; (n=566)	47.2***
25-49yrs; (n=745)	32.6
Married/cohabiting; (n=538)	21.7
Sexually active in last 12 months but not married; (n=767)	51.0***
- *Have a main partner (% of those having multiple partners and in a non-married/non-cohabiting union) (n=384)*	70.3
Length of primary relationship (whether married or not) (n=510)	
Less than a year	49.8
More than a year	50.2

Those engaging in multiple partnerships reported significantly more sexual activity than persons with one partner. This cohort reported having sex 1.8 times in the last 7days compared to 1.39 times for persons with one partner only. Multiple partnered males reported an average of 5.68 partners (SD 6.38) while females reported an average of 2.91 (SD2.23) partners.

Overall many (43.9%) of those engaging in multiple partnerships reported using a condom everytime for the last 10 times they had sex. Most persons within this risk group (63.3%) reported using a condom the last time they had sex. Condom use at last sex was higher among those not in a cohabiting relationship (48.45 vs married/cohabiting 30.0%).

Table 3: Frequency of Sex and Condom Use Among Persons with Multiple Partnerships

	RESPONDENTS WITH MULTIPLE PARTNERS %
Mean number of times sex had in last 7 days	
• Total	1.53 (SD1.96)
• Persons with multiple partners	1.39 (SD1.8)
• Persons with 1 partner only	1.8*** (SD2.2)
Mean number of partners had in last 12 months	
• Males with multiple partners	5.68 (SD6.38)
• Females with multiple partners	2.91 (SD 2.23)
• Total persons in multiple partnerships	5.08(SD5.85)
Frequency of condom use last 10 times sex had:	*(n=488)*
Never (0 times)	15.2
Sometimes (1-7 times)	28.1
Most times (8 times)	12.9
Everytime (10 times)	43.9
Condom used last time sex had; (n=509)	63.3
Condom used last time sex had by relationship status	
• Married and used condom	30.0
• Not cohabiting but used a condom with main partner	48.4

- **FACTORS IMPACTING CONDOM USE AND ITS FREQUENCY AMONG PERSONS IN MULTIPLE PARTNERSHIPS**

Promoting consistent use of condoms has been a challenge in getting to the desired behavior change among those at high risk of infection. Frequency of condom use is here analyzed based on reported use for the last 10 times sex was had and is broken down into:

- Non-user (0 times)
- Sometimes user (1-7 times)
- Most times user (8-10 times)

Frequency of condom use among persons with multiple partners was found to be related to some demographic and psychosocial variables. Correlation analysis showed moderate and significant relationships between partner's attitude to condoms and the individual's level of preparedness as evidenced by carrying a condom on their person. Specifically greater frequency of condom use was associated with: a rejection of the view that it is normal to comply with partner wishes to not use condoms, a supportive partner who also preferred condoms and personal preparedness evidenced by carrying a condom on oneself.

Small but significant relationships were also noted between rejection of condoms as reducing pleasure, likelihood of having a condom in the house, loss of erection while putting on condom (males only), rejection of trust as a barrier to use and partner support in terms of reaction if found out they had a condom and partner's likelihood of carrying condoms. This means that higher reported frequency of condom use among this risk group was associated with having a condom in the house, rejection of condoms as reducing pleasure, rejection of trust as a barrier and partner support. Partner support related to partner not being upset if condoms were found and a partner who preferred condoms.

Correlation analysis also showed small but significant relationships between age and relationship status and frequency of condom use. Among persons with multiple partners, greater frequency of condom use was associated with persons 15-24yrs, not in a married/cohabiting union and not having a main partner.

Intention to use a condom at next sex act was related to more frequent condom use the last 10 times sex had. Specifically almost all "most time" users reported being very likely to use a condom the next time they had sex, compared to less than half (45.3%) of the "sometimes" condom user and less than a third of those who had used no condoms the last 10 times they had sex. In fact more than a half of the non-users (56.8%) and a quarter of the sometimes users (24.1%) reported being unlikely to use a condom at next sex act.

Table 4: Condom use among persons with multiple partners in last 12 months: Correlation analysis

Multiple partners	R coefficient	Significance
Age	-.212	***
Relationship status	.294	***
Have a main partner (not married/cohabiting)	.198	***
Rejection of complying with partners wish to not use a condom	.442	***
Partner preference for condoms	.433	***
Commitment: Usually have a condom on person	.318	***
Commitment: Usually have a condom in the house	.234	***
Rejection of condoms reducing pleasure	.190	***
While putting on a condom I have lost an erection (males only)	.180	***
Rejection of trust as a barrier	.157	**
Partner support: partner would be upset if found out had a condom	.110	*
Partner usually has a condom	.102	*
Intention to use a condom next time sex had	.193	***

*=p<.05, ** = p<.005, ***=p<.000

Table 5: Likelihood of using a condom at next sex act by frequency of condom use for persons reporting multiple partnerships in last year

Had Multiple Partners	Non-user (n=74) %	Sometimes User (n=137) %	Most times user (n=277) %
Very likely	29.7	45.3	91.7
Likely	8.1	7.0	5.8
Neither likely nor unlikely	5.4	3.6	0.4
Unlikely (including don't know)	56.8	24.1	2.1

- **PERSONAL RISK PERCEPTION OF PERSONS WITH MULTIPLE PARTNERS**

Most persons engaging in multiple partnerships in the last 12 months, perceived themselves to be at little or no risk for contracting HIV, irrespective of their reported condom use. The vast majority of most time condom users (82.7%) reported little or no chance of contracting HIV, due primarily to "using a condom all the time" (78.9%). Approximately 6 in 10 of those using condoms "sometimes" also perceived little of no chance of infection. This relatively low risk perception was attributed primarily to their "using a condom sometimes" (67.5%). Even those who had used no condoms in their last sex act saw themselves at little or no risk of HIV (78.9%) as they used condoms sometimes (42.2%) and had sex only with their spouse (35.6%). This perceived monogamy however contradicts their self report of having had more than one partner in the last 12 months unless these relationships are not occurring simultaneously and so there is serial monogamy occurring.

Table 6: Risk Perception of Persons with Multiple PartnersAnalyzed by Condom Use

	Non-user (n=74) %	Sometimes User (n=137) %	Most times user (n=277) %
No chance	31.1	21.9	47.3
Little chance	37.8	43.1	35.4
Moderate chance	8.1	12.4	4.0
Good chance	10.8	10.2	2.5
Unsure	12.2	12.4	10.9
Reasons for little or no chance:	(n=51)	(n=89)	(n=229)
- Use a condom all the time	13.3	18.1	78.9
- Use a condom sometimes	42.2	67.5	16.2
- Have sex with spouse only	35.6	12.0	1.8
- Get check-ups regularly	11.1	3.6	2.6

- **HIV TESTING REPORTED BY PERSONS WITH MULTIPLE PARTNERS**

Approximately 5 in 10 of the relatively inconsistent condom users (used a condom 7 times or less of the last 10 times sex had) reported having done an HIV test at least once in their lifetime, compared to 4 in 10 persons who reported multiple partnerships but also reported condom use most (9 times) or everytime (10 times) .

Table 7: HIV testing by Condom usage of those engaging in Multiple Partnerships in last year

	Non-user (n=74) %	Sometimes User (n=137) %	Most times user (n=277) %
Ever had an HIV test done	54.1	50.4	39.4
HIV test done in last year and know the results	50.0	46.7	37.2

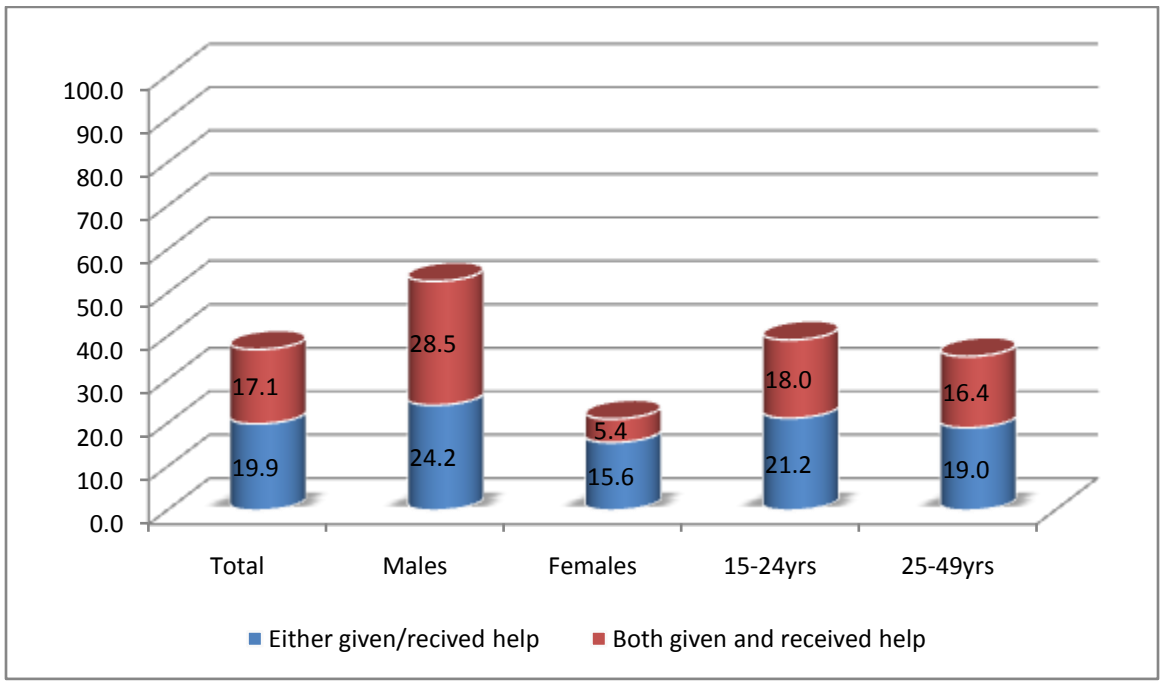
TRANSACTIONAL SEX

Transactional sex, defined as the exchange of gifts or money for sex, carries with it an inherent power imbalance, it is thus important to explore not only its occurrence at a population level but also to explore the nature of condom use within this higher risk group.

Transactional sex within the last year was common among just over a third (37%) of sexually active respondents or more than a quarter (27.3%) of the total population 15-49yrs. Approximately a fifth (19.9%) had either given or received help with 17.1% having been both the giver and recipient of help.

Males were significantly more likely to have engaged in transactional sex and 5 times more likely to have been both the giver and recipient in the relationship. It was just over a half (52.7%) of males who had engaged in transactional sex compared to a fifth (21.0%) of females.

Figure 2: Incidence Transactional Sex by Age and Gender



Incidence of transactional sex was significantly higher among respondents not in a married or cohabiting union. While a quarter of married/cohabiting persons also reported having had transactional sex within the last year, it was almost twice as many (45%) of those not married who reported the same. It should be noted that most (72.1%) of those non-married who had engaged in transactional sex had reported also having a main partner. In a little over a half of these instances this main relationship had existed for at least 12 months or longer (56.7%). This meant that 43% were in a relatively new relationship which had been active for less than 12 months.

Those engaging in transactional sex were significantly more likely to report more sexual activity than those not engaging in transactional sex. Specifically persons who reported transactional sex had had sex an average of 1.81 times (SD1.69) within the last 7 days compared to those who had never engaged in transactional sex who had intercourse and average of 1.36 times (SD2.0) in the last 7 days.

Table 8: Transactional Sex By Socio-Demographic Variables

	Total Transactional sex %
Total (n=1331)	37.0
Male; (n=670)	52.7***
Female; (n=661)	21.0
15-24yrs; (n=573)	39.1
25-49yrs; (n=758)	35.4
Married/cohabiting; (n=540)	25.4
Sexually active in last 12 months but not married; (n=785)	45.0***
- *Have a main partner (% of those engaging in transactional sex and in a non-married/non-cohabiting union) (n=344)*	72.1
Length of primary relationship (whether married or not)	
Less than a year	43.3
More than a year	56.7

*=p<.05, ** = p<.005, ***=p<.000

Overall 4 in 10 respondents (41.2%) who had engaged in transactional sex reported using a condom everytime, and more than a half (57%) had used a condom at last sex. While many reported every time condom use, a fifth (20.3%) reported using no condom in their last 10 sexual encounters. The group engaging in transactional sex reported using condoms an average of 6.32 (SD4.0) for every ten times sex had, which was significantly more than the average 4.63 (SD4.4) times use reported by those not engaging in transactional sex.

Table 9: Safe Sex Behavior by Persons Reporting Transactional Sex

	Total Transactional sex %
Average number of times condom used of last 10 times sex had	
-Had transactional sex	6.32 (SD 4.0)***
-Had no transactional sex	4.63 (SD 4.4)
Frequency of condom use last 10 times sex had:	*(n=468)*
Never (0 times)	20.3
Sometimes (1-7 times)	25.9
Most times (8 times)	12.6
Everytime (10 times)	41.2
Condom used last time sex had	57.1 *(n=487)*

*=p<.05, ** = p<.005, ***=p<.000

Analysis on the frequency of condom use by persons who had engaged in transactional sex was also carried out. Frequency of condom use was based on reported condom use of the last 10 times sex was had and was broken down into:

- Non-user (0 times)
- Sometimes user (1-7 times)
- Most times user (8-10 times)

Correlation analysis conducted on a number of demographic and attitudinal variables showed a small but significant relationship between consistency of condom use and age, gender and relationship status. Increased frequency of condom use was most likely among Males, persons 15-24yrs and those not in a married or cohabiting relationship.

Small but significant relationships were also noted between consistency of use and attitudes to condoms. Specifically, greater frequency of use was also more likely among persons who rejected condoms as reducing and interrupting pleasure as well as those who rejected trust of partner as a barrier to condom use.

Moderate relationships between frequency of condom use among this group and partner preference were also observed. Reported frequency of condom use was higher among persons whose partners preferred condoms and among those who rejected complying with the partner's wishes where this related to not using condoms.

Among this risk group an individual's commitment to using condoms, as evidenced by their likelihood to carry a condom on themselves, have one in the house and willingness to substitute if their favourite brand was unavailable, was also related to greater frequency of condom usage.

Carrying a condom on one's persons showed a moderate relationship to frequency of condom usage.

Past frequency of condom use was also a strong indicator of future intended use. Specifically likelihood of using a condom at next sex act increased as reported past frequency of condom use increased.

Table 10: Condom use among persons reporting transactional sex in last 12 months: Correlation analysis

	R coefficient	Significance
Gender	-.139	**
Age	-.185	***
Relationship status	.266	***
Rejection of condoms reducing pleasure	.140	**
Rejection of trust as a barrier	.152	**
Rejection of complying with partners wish to not use a condom	.412	***
Partner preference for condoms	.331	***
Commitment: Usually have a condom in the house	.328	***
Commitment: Usually have a condom on person	.286	***
Willing to substitute if favourite brand not available	.103	*
Intention to use a condom next time sex had	.520	***

*=p<.05, ** = p<.005, ***=p<.000

Table 11: Likelihood of using a condom next time sex had by Persons Reporting Transactional Sex in Last 12 months

	Non-user (n=95) %	Sometimes User (n=121) %	Most times user (n=252) %
Very likely	29.5	49.6	91.3
Likely	10.5	22.3	5.6
Neither likely nor unlikely	9.5	4.1	0.4
Unlikely (including don't know)	50.0	24.0	2.8

COERCIVE INTERCOURSE

Coercive sexual encounters where someone is pressured or forced into having sex may also compromise the likelihood of negotiating condom use. Approximately 1 in 10 sexually active persons reported having been coerced or pressured to have sex (11.9%). A similar portion (11%) reported having been the aggressor and therefore had forced or pressured someone to have sex within the last 12 months. Interestingly males were significantly more likely to have engaged in coercive intercourse. Males were twice as likely as females to report having been pressured to have sex (15% males vs 8.8% females) and three times more likely to report having been the aggressors (16.4 males vs 5.4% females). Incidence of having been forced was similar among both age groups, while incidence of having been the aggressor was higher among persons 15-24yrs.

Coercive sex was also more likely to be reported by persons not in a married/co-habiting union. Four in ten persons who had been forced (40.8%) or been the aggressor (40.3%) used a condom everytime, while a quarter (24% been forced vs 23.7% forced/aggressor) did not use a condom in any of the last 10 times they had sex.

Table 12: Coercive Intercourse by Socio-Demographic Variables

	BEEN FORCED %	FORCED/AGGRESOR %
Total	**11.9** ***(n=1330)***	**11.0** ***(n=1333)***
Male	15.0*** *(n=668)*	16.4*** *(n=670)*
Female	8.8 *(n=662)*	5.4 *(n=663)*
15-24yrs	13.1 *(n=573)*	14.0 *(n=573)*
25-49yrs	11.0 *(n=757)*	8.7 *(n=760)*
Married/cohabiting	8.6*** *(n=537)*	8.1 *(n=540)*
Sexually active in last 12 months but not married	13.9 *(n=787)*	12.8 *(n=787)*
Frequency of condom use last 10 times sex had:	*(n=152)*	*(n=139)*
Never (0 times)	24.3	23.7
Sometimes (1-7 times)	24.3	25.9
Most times (8 times)	10.5	10.1
Everytime (10 times)	40.8	40.3
Condom used last time sex had	55.7; *(n=158)*	64.4; *(n=146)*

*=p<.05, ** = p<.005, ***=p<.000

CASUAL PARTNERS

Casual sexual encounters, defined as sex partner in the last 12 months who were new, met in a bar or club or a one-night stand or other casual encounter are often unplanned situations where condom use may be compromised. A third (34.4%) of sexually active respondents reported casual partners in the last 12 months. Casual partnerships were highest among males, persons 15-24yrs and persons not in a married/cohabiting union. More than 4 in 10 (44.1%) of respondents with casual partners used a condom every time and 6 in 10 (62.7%) used a condom at last sex. It should be noted however that more than a half (55.9%) reported inconsistent condom use.

Table 13: Casual Partnerships by Socio-Demographic Variables

	RESPONDENTS WITH HIGH RISK PARTNERS %
Total ; (n=1338)	34.4
Male; (n=672)	55.2***
Female; (n=666)	13.4
15-24yrs; (n=573)	44.9***
25-49yrs; (n=7655)	26.5
Married/cohabiting; (n=541)	15.5
Sexually active in last 12 months but not married; (n=791)	47.3***
Frequency of condom use last 10 times sex had:	*(n=442)*
Never (0 times)	15.8
Sometimes (1-7 times)	26.9
Most times (8 times)	13.1
Everytime (10 times)	44.1
Condom used last time sex had; (n=458)	62.7

*=p<.05, ** = p<.005, ***=p<.000

Table 14: Condom Use Among Persons Reporting Casual Sex In Last 12 Months: Correlation Analysis

Casual partners	R coefficient	Significance
Age	-.163	**
Gender	-.164	**
Relationship status	.263	***
Rejection of complying with partners wish to not use a condom	.452	***
Partner preference for condoms	.366	***
Commitment: Usually have a condom on person	.296	***
Commitment: Usually have a condom in the house	.205	***
Rejection of condoms reducing pleasure	.194	***
Rejection of trust as a barrier	.186	***
Sometimes feel embarrassed to buy	.134	**
Partner would be upset if found you had a condom	.145	**
Intention to use a condom next time sex had	.514	***

*=p<.05, ** = p<.005, ***=p<.000

SAME SEX INTERCOURSE:

A total of 21 persons, or 1.6% of persons sexually active in the last 12 months, reported having same sex intercourse within the same period. Persons reporting same sex intercourse were twice as likely to be females (15 females vs 6 males) and from the younger age cohort (12 persons 15-24yrs vs 9 persons 25-49yrs.). Six (6) of the twenty-one (21) persons were currently married or cohabiting. Approximately a half (11) of those engaging in same sex intercourse had used a condom the last time they had sex.

Table 15: Same sex Intercourse by Socio-Demographic Variables

	Had Same Sex Intercourse (n=21) %
Male	28.6
Female	71.4
15-24yrs	57.1
25-49yrs	42.9
Married/cohabiting	14.3
Sexually active in last 12 months but not married	85.8
Frequency of condom use last 10 times sex had:	
Never (0 times)	23.8
Sometimes (1-7 times)	38.1
Most times (8 times)	9.5
Everytime (10 times)	28.6
Condom used last time sex had	52.4

STI INCIDENCE

Lifetime incidence of STIs and incidence of genital discharge in the last 12 months increased among females between YR2004 and YR2008. This increase was most noticeable among younger women where lifetime incidence of STIs increased by more than 50% moving from 8.2% in YR2004 to 14.4% in YR 2008. Incidence of genital discharge more than doubled over the period (YR 2004: 8.1% vs YR 2008; 18.1%) as too did reports of genital ulcer in the last 12 months. Self-reported incidence of STIs also increased among older females where lifetime incidence moved from 15% in YR 2004 to 17.2% in YR 2008. Among females 25-49yrs occurrences of genital discharge in the last 12 months increased from 9% to 16% over the period while self-reports of genital ulcer tripled moving from 0.4% in YR 2004 o 1.4% in YR 2008.

Reported lifetime incidence of STIs was significantly higher among persons currently engaging in high risk sexual behaviors such as multiple partnerships, transactional sex, coercive sex, same sex intercourse and high risk partners including new partners, one-night stands and partners met in a club and bar.

Table 16: Males STI Incidence YR 2004 vs YR 2008

	Males15-24yrs		Males 25-49yrs	
	YR 2004 (n=) %	YR 2008 (n=274) %	YR 2004 (n=) %	YR 2008 (n=398) %
Ever had and STI	9.8	8.0	34.3	34.9
Had genital discharge in last 12 months	2.1	6.6	4.0	4.3
Had genital ulcer in last 12 months	-	2.9	-	1.5

Table 17: Females STI Incidence YR 2004 vs YR 2008

	Females 15-24yrs		Females 25-49yrs	
	YR 2004 (n=) %	YR 2008 (n=299) %	YR 2004 (n=) %	YR 2008 (n=367) %
Ever had and STI	8.2	14.4	15.0	17.2
Had genital discharge in last 12 months	8.1	18.1	9.1	16.1
Had genital ulcer in last 12 months	0.9	2.0	0.4	1.4

Table 18: STI Incidence by Risk Groups

	Had STI at least once in lifetime %
Had multiple partners in last 12 months; (n=508)	25.6***
No multiple partners; (n=746)	15.4
Had transactional sex in last 12 months; (n=490)	25.3***
No transactional sex; (n=836)	16.6
Had casual partners in last 12 months; (n=460)	23.9***
No casual partners; (n=878)	17.9

*=p<.05, ** = p<.005, ***=p<.000

CHAPTER 3: BEHAVIOUR BY MARITAL STATUS

MARRIED COHABITING PARTNERSHIPS:

Married/cohabiting relationships appeared to be well established as males and females reported having been in such relationships for two years or more. Specifically young persons 15-24 years were more likely to report being married or to be cohabiting for the past two to four years (44%) while older respondents were in their relationships for 5 years and longer.

Just under a quarter (20%) of females 15-19 years, who were in a co-habiting relationship, reported having a partner ten years or more their senior.

Table 19: Length of Time in Sexual Relationship with Married/Cohabiting by Age & Gender

	<1yr	1 yr	2 - 4 yrs	5- 9yrs	9+ yrs
Male (n=238)	8.8	10.5	21.0	28.2	31.5
Female (n=308)	8.1	6.5	23.4	24.4	37.7
15-24yrs (n=118)	17.7	17.8	44.1	17.8	2.5
25-49 yrs (n=428)	5.9	5.6	16.4	28.3	43.9
Male (15-24yrs); (n=27)	30.7	26.9	26.9	11.5	3.8
Female (15-24yrs); (n=92)	14.1	15.2	48.9	19.6	2.2
Male (25-49yrs); (n=211)	6.1	8.5	20.3	30.2	34.9
Female (25-49yrs); (n=216)	5.5	2.8	12.5	26.4	52.8

Table 20: Length of Time Living with Married/Cohabiting Partner by Age & Gender

	Less than 1yr	One yr	2 to 4 yrs	5 to 9 yrs	9+yrs
Male (n=238)	10.1	10.9	21.0	27.3	30.7
Female (n=314)	12.1	7.6	21.0	23.6	35.7
15-24yrs (n=121)	31.4	15.7	35.5	15.7	1.7
25-49 yrs (n=431)	5.6	7.2	16.9	27.8	42.5
Male (15-24yrs); (n=27)	37.0	25.9	25.9	7.4	3.7
Female (15-24y); (n=94)	29.8	12.8	38.3	18.1	1.1
Male (25-49y); (n=211)	6.6	9.0	20.4	29.9	34.1
Female (25-49y); (n=220)	4.5	5.5	13.6	25.9	50.5

- **Risk profile of Married/Cohabiting Subgroup:**

Trust has been found in qualitative research to be critical in main relationships. As such condoms, which infer infidelity, are contentious and inappropriate. Condom use has consequently not been the norm in married/cohabiting partnerships. This may however be changing among the younger generation who have grown-up in the era of HIV/AIDS as these young adults (15-24yrs.) were the ones most likely to most times or consistent use of condoms.

Overall it was 10% males and 9% females who reported using a condom every time and another 17% males and 20% females who reported using a condom most times. This translates to more than a third using condoms occasionally or none at all, respectively.

Figure 3: At risk profile of subgroup of Married/Cohabiting

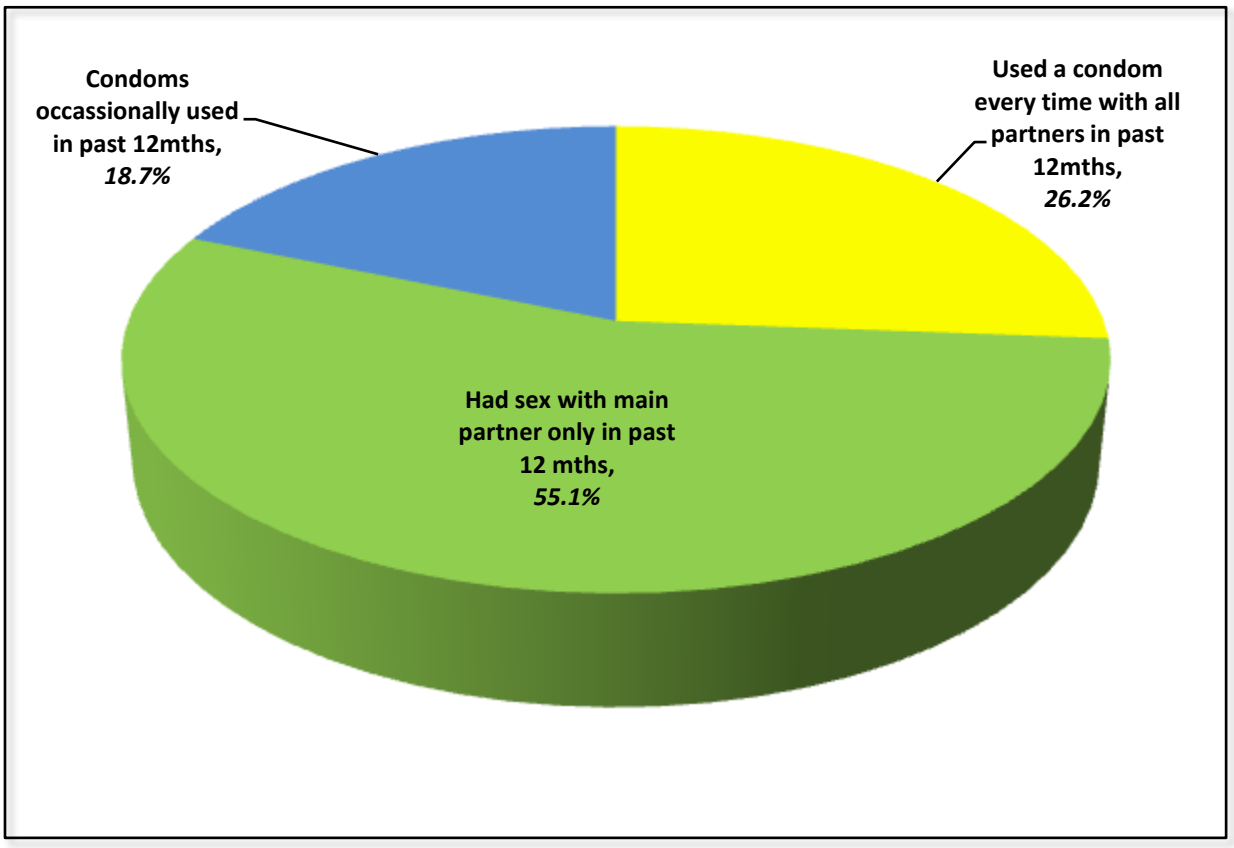


Table 21: Frequency of Condom Use with Married/Cohabiting by Age & Gender

	Every time	Most times	Occasionally	Never
Male (n=241)	10.4	17.4	35.7	32.8
Female (n=313)	9.3	19.8	35.8	33.5
15-24yrs (n=121)	13.2	28.9	33.9	21.5
25-49 yrs (n=433)	8.8	15.9	36.3	36.5
Male (15-24yrs); (n=28)	17.9	28.6	25.0	21.4
Female (15-24yrs); (n=93)	11.8	29.0	36.6	21.5
Male (25-49yrs); (n=213)	9.4	16.0	37.1	34.3
Female (25-49yrs); (n=220)	8.2	15.9	35.5	38.6

**3.7% males and 1.6% females could not recall*

- **Condom Use Last Time and Time Before:**

Inconsistent condom use in married and cohabiting partnerships was further demonstrated by the 26% males and 29% females who reported using a condom the last time they had sex, even fewer than the portion reporting use the time before (males: 31%; females: 34%). Nonetheless, it was the younger respondents who were more likely to be using condoms, whether the last time (34% vs. older adults: 26%) or on the occasion prior to that (46% vs. older adults: 29%).

Table 22: Condom Used at Last Sex with Married/Cohabiting by Age & Gender

Condom use at last sex with married/live in partner		
Male	25.8	(n=240)
Female	28.8	(n=312)
15-24yrs	34.4	(n=122)
25-49 yrs	25.6	(n=430)
Male (15-24yrs)	32.1	(n=28)
Female (15-24yrs)	35.1	(n=94)
Male (25-49yrs)	25.0	(n=212)
Female (25-49yrs)	26.1	(n=218)

Table 23: Condom Used Time Before Last Sex with Married/Cohabiting by Age & Gender

Condom use Time Before last sex with married/live in partner		
Male	31.1	(n=241)
Female	34.0	(n=312)
15-24yrs	45.5	(n=121)
25-49 yrs	29.2	(n=432)
Male (15-24yrs)	46.4	(n=28)
Female (15-24yrs)	45.2	(n=93)
Male (25-49yrs)	29.1	(n=213)
Female (25-49yrs)	29.2	(n=219)

- **Multiple Partnerships in cohabiting unions:**

More than a third of males (38.1%) and less than 1 in 10 females (8.7%) in married or cohabiting partnerships have multiple partners. Moreover, approximately five times as many males as females 15-24 years old had multiple partners (51.9% vs. 9.7% respectively). The risk was similarly as high among older males when compared to females of the same age with 36.3% of males 25-49 years reporting multiple partners versus 8.2% females.

Table 24: Multiple Partnerships with Married/Cohabiting by Age & Gender

Incidence of Multiple Partnerships		
Male	38.1	(n=239)
Female	8.7	(n=312)
15-24yrs	19.2	(n=120)
25-49 yrs	22.0	(n=431)
Male (15-24yrs)	51.9	(n=27)
Female (15-24yrs)	9.7	(n=93)
Male (25-49yrs)	36.3	(n=212)
Female (25-49yrs)	8.2	(n=219)

It was 11% of males and 18% of females who had multiple partners reporting consistent (every time) using a condom with their main partner. Using a condom every time with one's main partner was generally more common among the younger cohort (15-24 years), and males 15-24 years and females 25-49 years.

It was noted that a greater portion of those reporting multiple partners used a condom the last time they had sexual intercourse with their main partner. Specifically, a quarter (23.1%) of males and more than a third (36.8%) of females in multiple partnerships used a condom last time with their main partner.

Table 25 Condom Use Every Time & Last time with Main Partner where Multiple Partners Exist

	Incidence of Condom Use Every time	Incidence of condom Use Last Time
Male (n=91)	11.0	23.1
Female (n=27)	18.4	36.8
15-24yrs (n=23)	21.9	30.2
25-49 yrs (n=95)	10.5	25.5
Male (15-24yrs); (n=14)	28.5	28.5
Female (15-24yrs); (n=9)	11.3	33.0
Male (25-49yrs); (n=77)	7.8	22.3
Female (25-49yrs); (n=18)	22.0	39.0

Although condom use was not very prevalent with main partners where multiple partnerships existed, it was clearly customary for respondents to use condoms with partners other than their main partner. In fact, three quarters of those with multiple partners reported this to be true (males: 75.1%; females: 70.1%). These were more likely to be females 15-24 years and males 25-49 years when compared to their counterparts. This leaves 25-30% however who are exposing themselves and their partners to risk.

Table 26 Condom Use with Multiple Partners other than Married/Cohabiting by Age & Gender

Incidence of Condom Use in Multiple Partnerships		
Male	75.1	(n=91)
Female	70.1	(n=27)
15-24yrs	78.1	(n=23)
25-49 yrs	73.2	(n=95)
Male (15-24yrs)	71.3	(n=14)
Female (15-24yrs)	88.7	(n=9)
Male (25-49yrs)	75.8	(n=77)
Female (25-49yrs)	62.2	(n=18)

- **Correlation Analysis and High Risk Partners**

A third (31%) of respondents who were married or cohabiting also admitted to being involved in high risk partnerships such as meeting sex partners in a club/bar, one night stands, commercial, transactional and/or gay sex. Correlation analysis found small to moderate significant associations as follows:

- ✓ On the whole, married and cohabiting males were significantly more likely to have high risk partnerships than females
- ✓ Males married and cohabiting were significantly more likely than females to have: had sex with a new partner, a partner they met at the club/bar, a one night stand, transactional sex, paid for sex
- ✓ Married and cohabiting males and females in high risk partnerships were significantly more likely to have used condoms the last time they had sex
- ✓ Condoms were significantly more likely to have been used at last sex: with partners met a the club/bar, where sex was transactional, with gay partners

Table 27: Gender and Last Time Condom Use Associations among Those Married/Cohabiting and in High Risk Partnerships

	Pearson's r	Chi square
Gender:		
Engaging in any high risk partnerships	-.335	**
Meeting a new partner in past 12 months	-.286	**
Meeting other partner at club/bar	-.219	**
Involved in one night stand	-.270	**
Had partner who they gave money for expenses	-.403	**
Had partner who gave money for expenses	-.136	**
Paid for sex	-.176	**
Condom use at last sex:		
Engaging in any high risk partnerships	-.154	**
Meeting other partner at club/bar	-.113	*
Had partner who they gave money for expenses	-.189	**
Had partner who gave money for expenses	-.133	**
Engaged in gay sex	-.113	*

*=p<.05, ** = p<.005

NON-COHABITING UNIONS

A total of 785 respondents or 43.6% of the total sample were sexually active and in non-cohabiting unions. Sexually active unmarried/non-cohabiting respondents were significantly more likely to be 15-24 years (51.3% versus 25-49 years: 37.5%, p=.000).

Figure 4: At risk profile of subgroup of Unmarried/Non-cohabiting

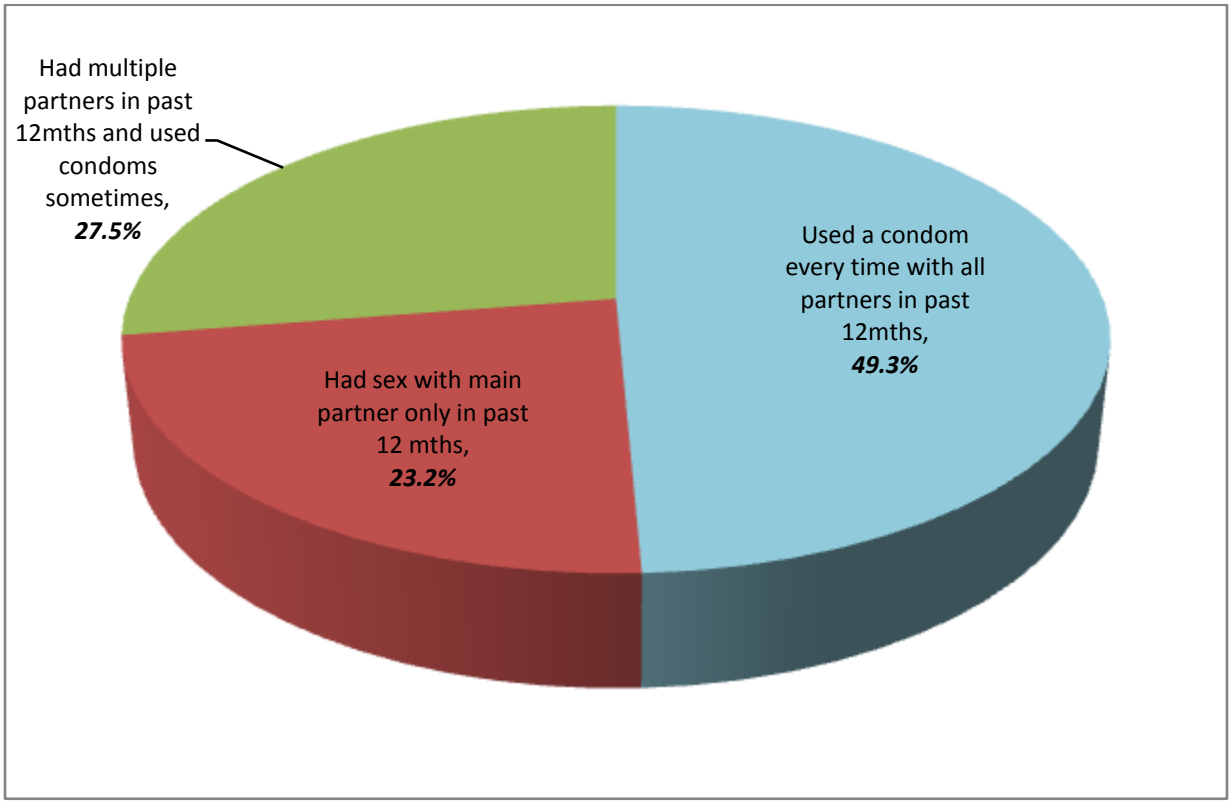


Table 28: Sexually active Unmarried/Non-Cohabiting by Age & Gender

Sexually active unmarried/cohabiting		
Male	49.0	(n=896)
Female	39.7	(n=904)
15-24yrs	51.3	(n=893)
25-49 yrs	37.5	(n=907)
Male (15-24yrs)	56.8	(n=447)
Female (15-24yrs)	45.7	(n=446)
Male (25-49yrs)	41.2	(n=449)
Female (25-49yrs)	33.8	(n=458)

- **Length of time in relationship:**

More than half of females reported relationships of at least 2 years(57.3%) compared to more than a half of males who reported relationships of 1 year or less (60%). As was to be expected relationships among youth were more recent than those of the older cohort.

Table 29: Length of Time in Relationship, Sexually active Unmarried/Non-Cohabiting by Age & Gender

	Less than 3mths	4-11mths	1 yr	2 - 4 yrs	5 years or more
Male (n=322)	21.2	20.2	18.8	27.6	11.5
Female (n=312)	12.2	14.1	15.7	36.2	21.1
15-24yrs (n=360)	19.7	19.4	20.6	31.7	7.8
25-49 yrs (n=274)	12.8	14.2	12.8	32.1	27.4
Male (15-24yrs); (n=182)	26.4	22.0	22.5	25.8	2.1
Female (15-24yrs); (n=178)	12.9	16.9	18.5	37.6	13.5
Male (25-49yrs); (n=140)	14.3	17.9	13.6	30.0	23.6
Female (25-49yrs); (n=134)	11.2	10.4	11.9	34.3	31.4

- **Proportion with main partner**

Three quarters (75.5%) of the sexually active unmarried/non-cohabiting subgroup indicated that they had a main partner. These were significantly more likely to be females than males (83% vs. 69% respectively, p=.000). No significant differences emerged across age groups however (15-24yrs: 77%; 25-49yrs: 74%).

Table 30: Incidence of Sexually active not Married/Cohabiting Having a Main Partner by Age & Gender

Proportion with Main Partner		
Male	69.4	(n=432)
Female	83.0	(n=353)
15-24yrs	76.5	(n=447)
25-49 yrs	74.3	(n=338)
Male (15-24yrs)	69.6	(n=247)
Female (15-24yrs)	85.0	(n=200)
Male (25-49yrs)	69.2	(n=185)
Female (25-49yrs)	80.4	(n=153)

- **Condom Use with Main Partner:**

Among sexually active unmarried and non-cohabiting respondents who had a main partner, two thirds of males (62%) and a half of females (53%) used a condom at last sex. Furthermore, significantly more youth than adults reported the same (67.8% vs. 47.7% respectively, p=.000). While close to a half of males and females 25-49 years reported condom use, significantly more males than females 15-24 years indicated the same (p=.010).

Two thirds of males and females also used condoms the time before last, indicating that fewer females used condoms at last sex. Also, a similar portion of youth 15-24 years reported condom use before the last encounter indicating high consistency. Adults, regardless of gender had also indicated higher incidence of condom use on the occasion before the last. The same was true of females 15-24 years.

Table 31: Condom Use at Last Sex (With/Without Main Partner) by Age & Gender

	Condom use at last sex with Main Partner	*Condom use on occasion before last sex with Main Partner*
Male	62.2 (n=315)	64.6 (n=314)
Female	53.3 (n=300)	61.4 (n=298)
15-24yrs	67.8 (n=357)	69.7 (n=356)
25-49 yrs	47.7 (n=258)	53.9 (n=256)
Male (15-24yrs)	74.0 (n=181)	73.9 (n=180)
Female (15-24yrs)	61.4 (n=176)	65.3 (n=176)
Male (25-49yrs)	46.3 (n=134)	52.2 (n=134)
Female (25-49yrs)	49.2 (n=124)	55.7 (n=122)

Overall approximately 60% of persons report high frequency of condom use (everytime/most times), with the 15-24yrs reporting highest use.

Table 32: Frequency of Condom Use with Unmarried/Non-Cohabiting by Age & Gender

	Every time	Most times	Occasionally	Never
Male (n=313)	27.5	35.1	19.5	17.9
Female (n=291)	30.6	30.9	19.9	18.6
15-24yrs (n=352)	32.1	36.6	16.8	14.5
25-49 yrs (n=252)	24.6	28.2	23.8	23.4
Male (15-24yrs); (n=179)	30.7	38.0	15.1	16.2
Female (15-24yrs); (n=173)	33.5	35.3	18.5	12.7
Male (25-49yrs); (n=134)	23.1	31.3	25.4	20.1
Female (25-49yrs); (n=118)	26.3	24.6	22.0	27.1

- **Multiple partnerships (with or without main partner)**

Roughly a half (52.4%) of sexually active non-married and cohabiting respondents reported having multiple partners in the past 12 months. The data revealed that among this subgroup, persons who had no main partner were more likely than those who did, to have multiple partners.

Males were significantly more likely than females to have multiple partners. With respect to age, three quarters (73%) of youth 15-24 years who had no main partner also reported multiple partnerships, more than any other cohort.

Table 33: Incidence of Multiple Partnerships (with or without main partner)

	Have main partner		No main partner	
Male	74.0	(n=284)	81.2	(n=117)
Female	21.7	(n=272)	30.2	(n=53)
15-24yrs	49.4	(n=330)	72.7	(n=99)
25-49 yrs	47.1	(n=227)	54.9	(n=71)
Male (15-24yrs)	76.2	(n=168)	87.1	(n=70)
Female (15-24yrs)	21.6	(n=162)	37.9	(n=29)
Male (25-49yrs)	70.9	(n=117)	72.3	(n=47)
Female (25-49yrs)	21.8	(n=110)	20.8	(n=24)

Males with multiple partners were significantly more likely to have used a condom at last sex when compared to females. In respect of age, no differences emerged among respondents who had no main partner but admitted to multiple partnerships. On the other hand, youth 15-24 years who reported multiple partners, including a main partner, were significantly more likely to have used condoms last time.

Table 34: Incidence of Condom Use at Last Sex in Multiple Partnerships

	Condom use last time (Have main partner)	Condom Use last time (No main partner)
Male	73.5***(n=211)	77.9***(n=95)
Female	55.9 (n=59)	68.8 (n=16)
15-24yrs	77.3***(n=163)	79.2 (n=72)
25-49 yrs	57.9 (n=107)	71.8 (n=39)
Male (15-24yrs)	81.3 (n=128)	82.0 (n=61)
Female (15-24yrs)	62.9 (n=35)	63.6 (n=11)
Male (25-49yrs)	61.4 (n=83)	70.6 (n=34)
Female (25-49yrs)	45.8 (n=24)	80.0 (n=5)

*=p<.05, ** = p<.005, ***=p<.000

- **Correlation Analysis and High Risk Partnerships**

Risk behavior findings among sexually active unmarried/non-cohabiting respondents were further underscored by correlation analysis which found small to moderate significant associations as follows:

On the whole, sexually active unmarried and non-cohabiting males were significantly more likely to have high risk partnerships than females

Males unmarried and non-cohabiting were significantly more likely than females to have: had sex with a new partner, a one night stand, transactional sex, commercial sex

Females unmarried and non-cohabiting were significantly more likely than males to have engaged in gay sex

Young persons 15-24 years who were sexually active but neither married nor cohabiting were significantly more likely than adults to engage in one night stands

Adults 25-49 years who were sexually active but neither married nor cohabiting were significantly more likely than those 15-24 years to have paid for sex or had a partner who paid their expenses

Table 35: Gender and Age Associations among Unmarried/Non-Cohabiting Respondents in High Risk Partnerships

	Pearson's r	Chi square
Gender:		
Engaging in any high risk partnerships	-.478	**
Meeting a new partner in past 12 months	-.405	**
Involved in one night stand	-.407	**
Had partner who they gave money for expenses	-.424	**
Had partner who gave money for expenses	-.198	**
Paid for sex	-.252	**
Being paid for sex	-.112	**
Engaged in gay sex	.080	*
Age:		
Involved in one night stand	-.126	**
Had partner who they gave money for expenses	.102	**
Paid for sex	.077	*

*=p<.05, ** = p<.005

- **Number of partners in past 12 months**

Sexually active unmarried and non-cohabiting males reported having more partners in the past 12 months on average when compared to females. These males had a mean of 4.7 partners while females had 1.3 partners. Youth 15-24 years had an average of 3.5 partners in the 12 month period while adults had an average of 2.8. Again males 15-24 years reported an average of 5 partners whilst their female counterparts reported a mean of 1.4 partners. Males 25-49 years had an average of 4.1 partners versus 1.2 among females.

All in all sexually active unmarried respondents were likely to have more partners when compared to the married and cohabiting subgroup. Specifically, unmarried youth reported 3.5 partners (vs. 2.1 married youth) and unmarried adults reported 2.8 partners (vs. 1.6 married adults). In addition, unmarried males were more likely to report more partners when compared to married males, on average (4.7 vs. 2.4 respectively).

Table 36: Mean Number of Partners in the Past 12 Months by Age & Gender

Mean Number of Partners in the past 12 months		
Male	4.7	(n=412)
Female	1.3	(n=348)
15-24yrs	3.5	(n=445)
25-49 yrs	2.8	(n=315)
Male (15-24yrs)	5.1	(n=242)
Female (15-24yrs)	1.4	(n=203)
Male (25-49yrs)	4.1	(n=170)
Female (25-49yrs)	1.2	(n=145)

Just under a half (49.3%) of persons who are sexually active but not cohabiting used a condom all the time, with all partners. Although, not reporting condom use, another 23.2% had sex with only their main partner in the past 12 months. This left 27.5% of unmarried and non-cohabiting respondents who had not used a condom with all partners at all times in the past 12 months. The latter were significantly more males (79%) than females (27%), p=.000.

Table 37: Unmarried/non-Cohabiting who did not always use condoms with all partners in past 12mths by Age & Gender

Male	78.9	(n=185)
Female	26.9	(n=167)
15-24yrs	54.2	(n=192)
25-49 yrs	54.4	(n=160)
Male (15-24yrs)	80.6	(n=98)
Female (15-24yrs)	26.6	(n=94)
Male (25-49yrs)	77.0	(n=87)
Female (25-49yrs)	27.4	(n=73)

CHAPTER 4: CONDOM ACCESS AND ATTITUDES TO CONDOMS

ATTITUDES TO CONDOMS

Condoms remain pivotal in protecting from HIV infection among the sexually active. This is particularly important in a society such as Jamaica where 39% of the sexually active reported multiple partners in the previous 12 months. Condoms are even more important if these are concurrent relationships, as emerged in PEER research among young adults in some of Kingston's inner city communities.

Attitudes to condoms have been found to be important to condom use. As a result 18 items expressing evaluative beliefs and attitudes about condoms were probed in the survey. Items were included based on 4 categories:

- Attitudes related to the effectiveness of condoms and condom use
- Attitudes related to trust and condom use
- Attitudes relating to the accessing of condoms
- Condoms and pleasure

Items were derived from the existing PSI condom MAP instrument as also from a re-analysis of previous studies conducted by Hope Enterprises Ltd. Items were also derived from focus group discussions conducted on condom use within primary relationships.

Within the KABP survey, respondents were asked to respond to specific statements covering each of the categories listed above on a 5 point scale ranging through 1(strongly agree), 2 (agree), 3 (neither agree nor disagree), 4 (disagree) and 5 (strongly disagree). Factor items were then used to construct three scales and the appropriate scores calculated. The three scales showed great internal reliability with Cronbach alpha values of .7 and higher. Scales represented:

1. Rejection of the view that condoms are unnecessary when partner is trusted
2. Access to condoms
3. Discrimination in product quality

Composite scores for each respondent for each scale was derived. Scores were then grouped to reflect *high*, *moderate* and *low*. The scales were then used in correlation analysis to aid in the identification of condom use influences.

Rejection of: condoms not necessary with trust

The derived scale consisted of 6 items which demonstrate an endorsement of condoms as reducing pleasure and trust. The scale thus generated showed great internal consistency (Cronbach alpha=.79). Statements included:

- It is not necessary to use condoms if you have known the person for a while
- It is not necessary to use condoms if you trust the person

Ready access to condoms :

The derived scale consisted of 3 items which demonstrate ready access to condoms. The scale generated showed great internal consistency (Cronbach alpha= .78).

- I can get a condom around here easily during the day
- I can get a condom around here easily during the night
- Shops nearby here always have condoms for sale

Discrimination in product quality:

The derived scale consisted of 2 items which demonstrate an awareness of differences in the effectiveness of condoms "all condoms are not created equal". The scale generated showed great internal consistency (Cronbach alpha= .85).

- Some condoms are better than others
- Some condoms are stronger than others

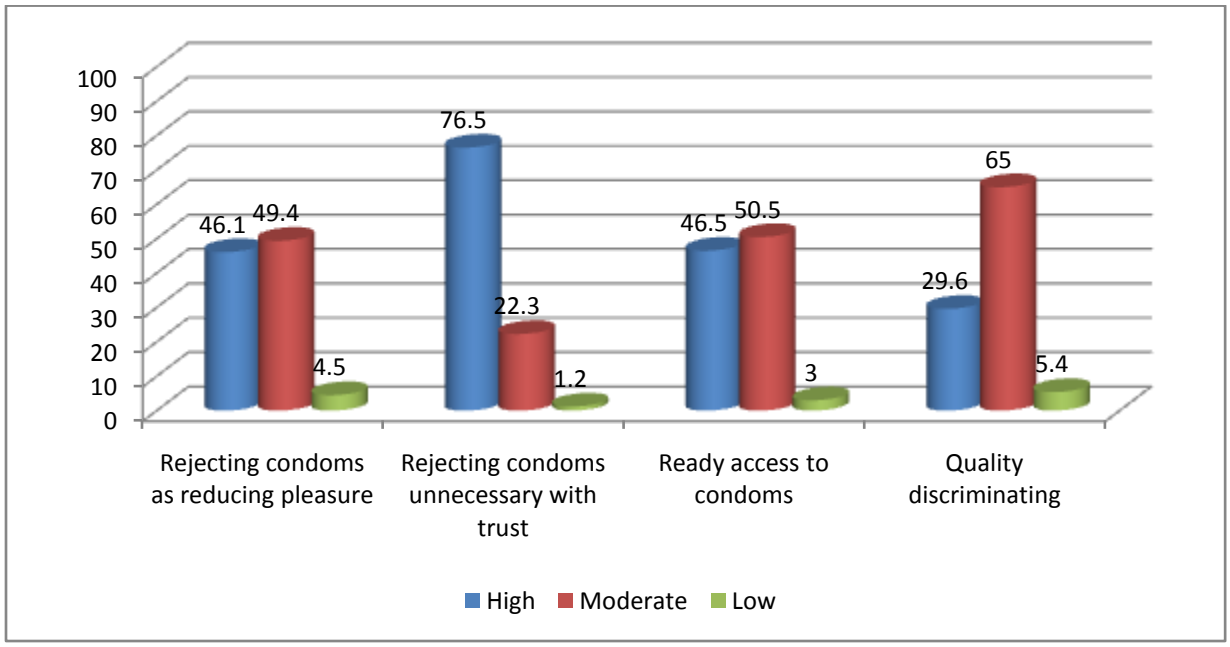
Rejection of Condoms as Reducing Pleasure:

A scale measuring a negative view of condoms particularly as interrupting and therefore reducing please was also used. Although the scale failed to show internal reliability (Cronbach Alpha .586) it was used in correlation analysis to explore the relationship between condom use and perception of the method as reducing pleasure. Items included:

- It is not practical to use condoms
- A condom reduces the quality of sex so much that it is better not to use it all
- Contraceptives ruin the heat and spontaneity of sexual intercourse.

The foregoing analysis shows frequency of condom use being impact by the perception of condoms as reducing pleasure and being unnecessary where trust exists. Specifically an observation of persons engaging in higher risk sexual behaviour showed significant attitudinal differences between those reporting most times condom use and those reporting no condom use[2]. Most times condom users were significantly more likely to reject condoms as reducing pleasure and as being unnecessary where partner was trusted. This means that most times users were more likely to score high on the respective measures than persons reporting non-use of condoms.

Figure 5: Attitudes to condoms by total sample



[2]Frequency of condom use based on reported condom use the in the last 10 sex acts: most times (8-10 times); Sometimes (1-7times); non-user (0 times).

Figure 6: **Attitudes to condoms: Condom Quality by frequency of condom use among persons engaging in higher risk sexual behavior** *(incl. having multiple /transactional / casual partners in last 12 months)*

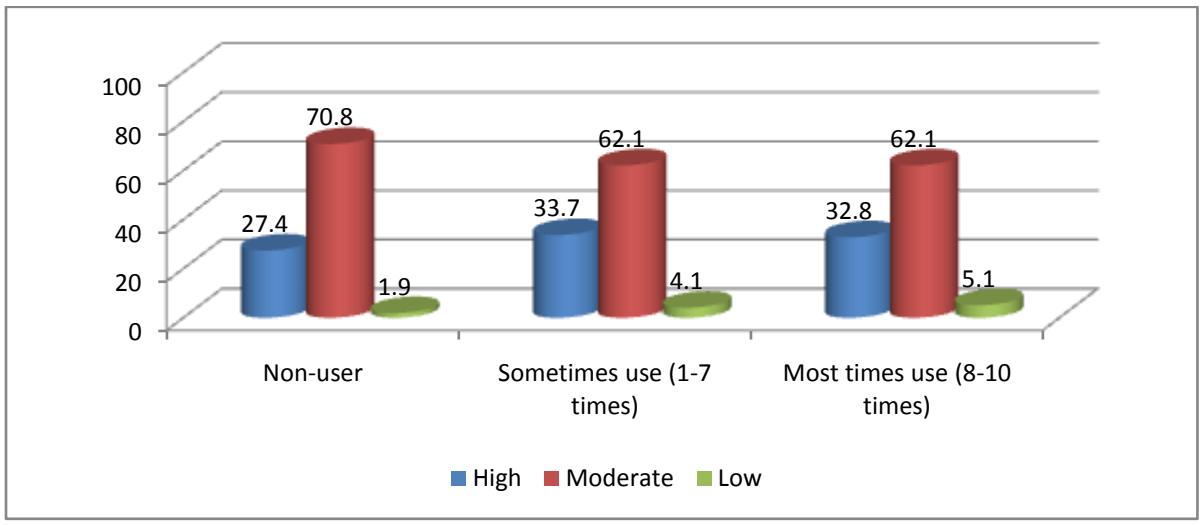


Figure 7: **Attitudes to condoms: Rejection of condoms as reducing pleasure by frequency of condom use among persons engaging in higher risk sexual behavior** *(incl. having multiple /transactional / casual partners in last 12 months)*

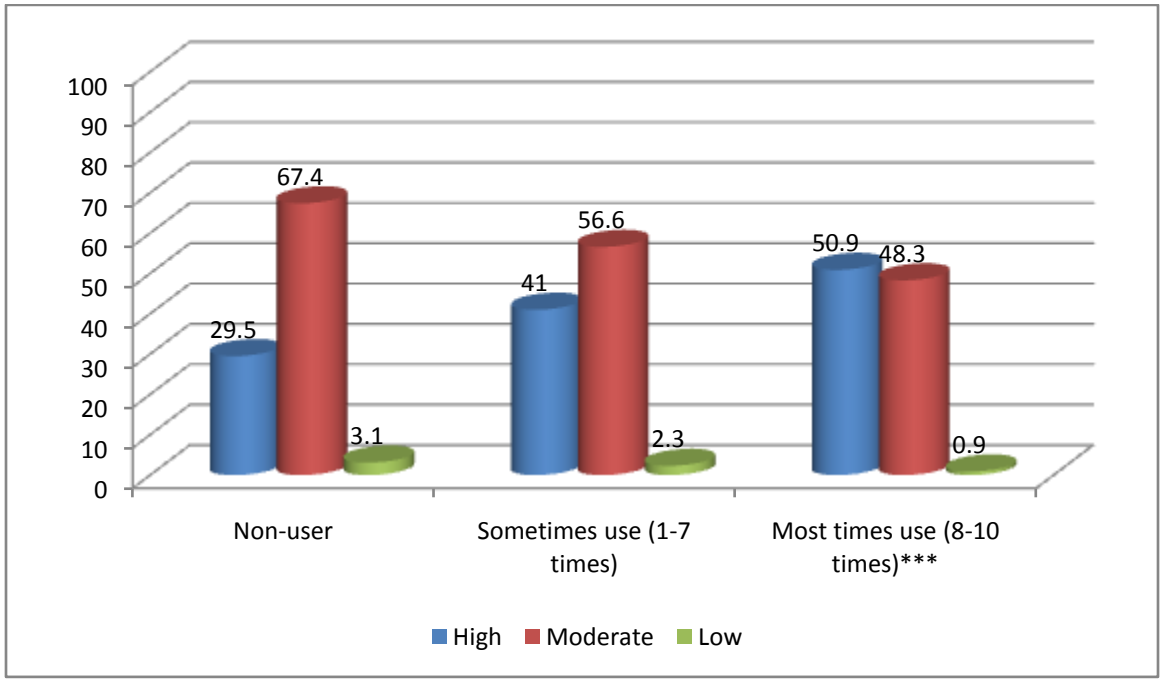


Figure 8: **Attitudes to condoms: Rejection of view that condoms unnecessary when partner is trusted by frequency of condom use among persons engaging in higher risk sexual behavior** *(incl. having multiple /transactional / casual partners in last 12 months)*

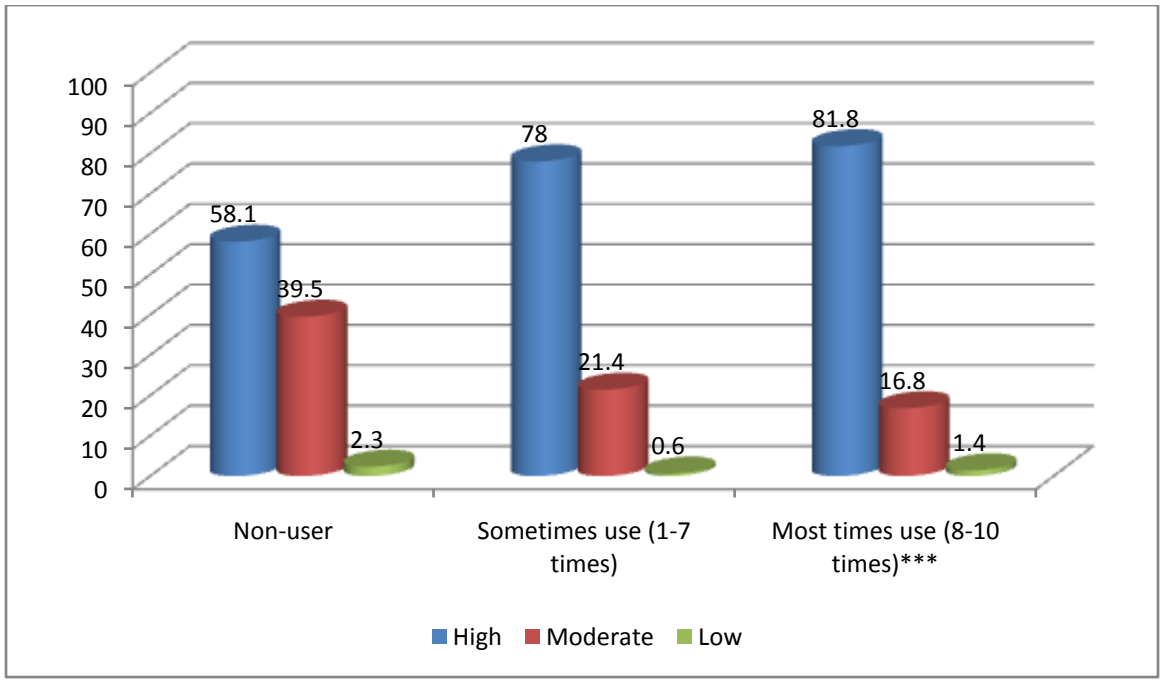
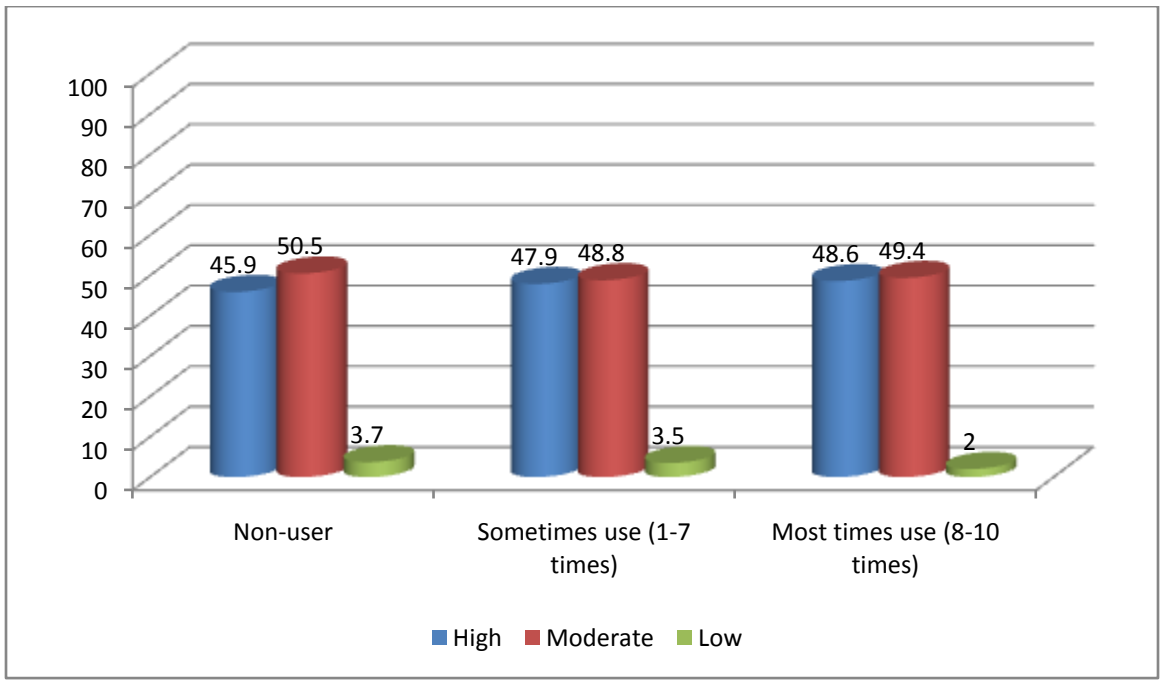


Figure 9: **Attitudes to condoms: Ready Condom Access by frequency of condom use among persons engaging in higher risk sexual behavior** *(incl. having multiple /transactional / casual partners in last 12 months)*



ACCESS TO CONDOMS

Overall respondents perceived themselves readily able to access condoms when needed (95.1%). Nine in ten (90.8%) endorsed that condoms were readily available during the day and 8 in 10 (79.8%) endorsed that condoms were readily available during the night. Males were significantly more likely than females to report being able to access condoms whether day or night.

It was less than a fifth who agreed that it was difficult to always have a condom on hand when needed. Public sector condoms were also thought accessible by most as just under two-thirds (65%) agreed that public sector condoms were easy to source when needed.

Main sources of condoms were the shop (28.6%), the pharmacy (25.5%) and the clinic (14.4%). Males were however significantly more likely to purchase from the shop (39.9%), while females were more likely to source from the pharmacy (27.7%) and their partner (24.6%). The shop was also the main condom source for youth 15-24yrs (32.7%) while the pharmacy (28.3%) was the most preferred source for those 25-49yrs.

Figure 10: % Able to obtain a condom immediately

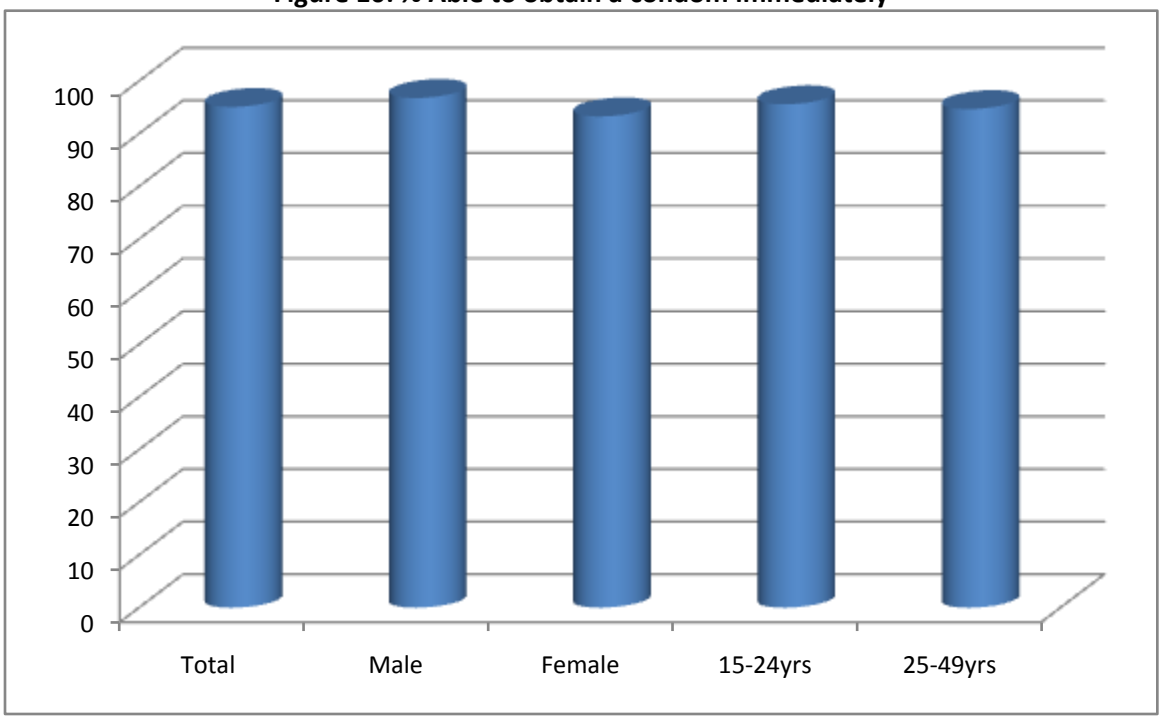


Table 38: Where condoms usually bought by Age

Source	Total (n=1406) %	15-24yrs (n=633) %	25-49yrs (n=773) %
Shop	28.6	32.7	25.2
Pharmacy	25.5	22.0	28.3
Clinic/don't buy	14.4	11.4	16.9
Partner provides it	12.5	1.6	0.3
Supermarket	9.5	9.8	9.3
Gas Station	2.4	2.5	2.3
Wholesale	2.0	1.4	2.5
Bar	1.0	1.3	0.8
Anywhere	0.6	0.6	0.6
Vendor	0.2	0.3	0.1

(p=0.000)

Table 39: Where condoms usually bought by Gender

Source	Total (n=1406) %	Males (n=731) %	Females (n=675) %
Shop	28.6	39.9	16.3
Pharmacy	25.5	23.4	27.7
Clinic/don't buy	14.4	12.4	16.6
Partner provides it	12.5	1.4	24.6
Supermarket	9.5	11.6	7.3
Gas Station	2.4	3.3	1.5
Wholesale	2.0	2.1	1.9
Bar	1.0	1.4	0.6
Anywhere	0.6	1.2	0.0
Vendor	0.2	0.4	0.0

(p=0.000)

Table 40: Extent to Which usually have Condom on Self by Gender

Source	Total (n=1470) %	Males (n=753) %	Females (n=717) %
Extent to which usually have a condom on self:			
- Everytime	22.0	29.2	14.5
- Most times	14.2	19.5	8.6
- Sometimes	13. 3	17.3	9.2
- Rarely	10.5	11.6	9.5
- Never	39.7	22.0	58.2
Extent to which usually have a condom in the house:			
- Everytime	52.5	58.3	46.4
- Most times	11.8	14.2	9.3
- Sometimes	11.9	10.8	13.1
- Rarely	7.3	6.6	8.1
- Never	16.3	9.8	23.0

Table 41: Extent to Which usually have Condom on Self by Age

Source	Total (n=1470) %	15-24yrs (n=641) %	25-49yrs (n=829) %
Extent to which usually have a condom on self:			
- Everytime	22.0	24.2	20.4
- Most times	14.2	19.3	10.3
- Sometimes	13. 3	17.3	10.3
- Rarely	10.5	8.6	12.1
- Never	39.7	30.6	46.7
Extent to which usually have a condom in the house:			
- Everytime	52.5	53.5	51.7
- Most times	11.8	12.0	11.7
- Sometimes	11.9	15.4	9.2
- Rarely	7.3	5.5	8.8
- Never	16.3	13.6	18.3

Figure 11: Perceived condom access day and night by Gender

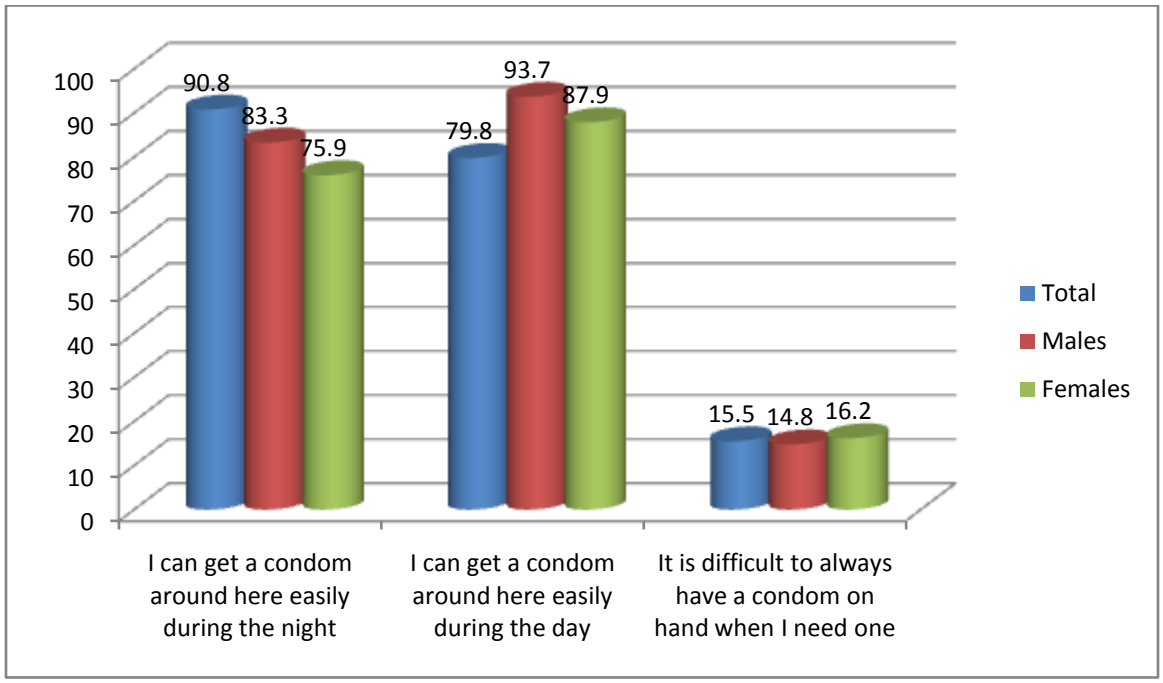
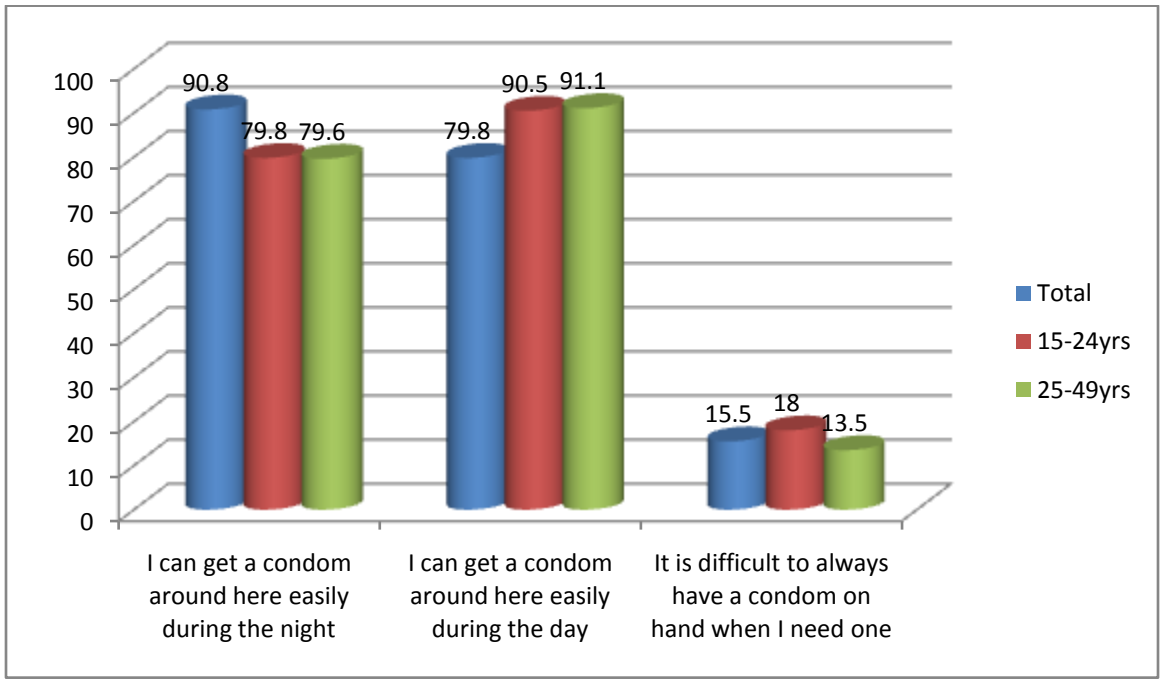


Figure 12: Perceived condom access day and night by Age



CHAPTER 5: KNOWLEDGE

ENDORSEMENT OF CORRECT PREVENTIVE PRACTICES:

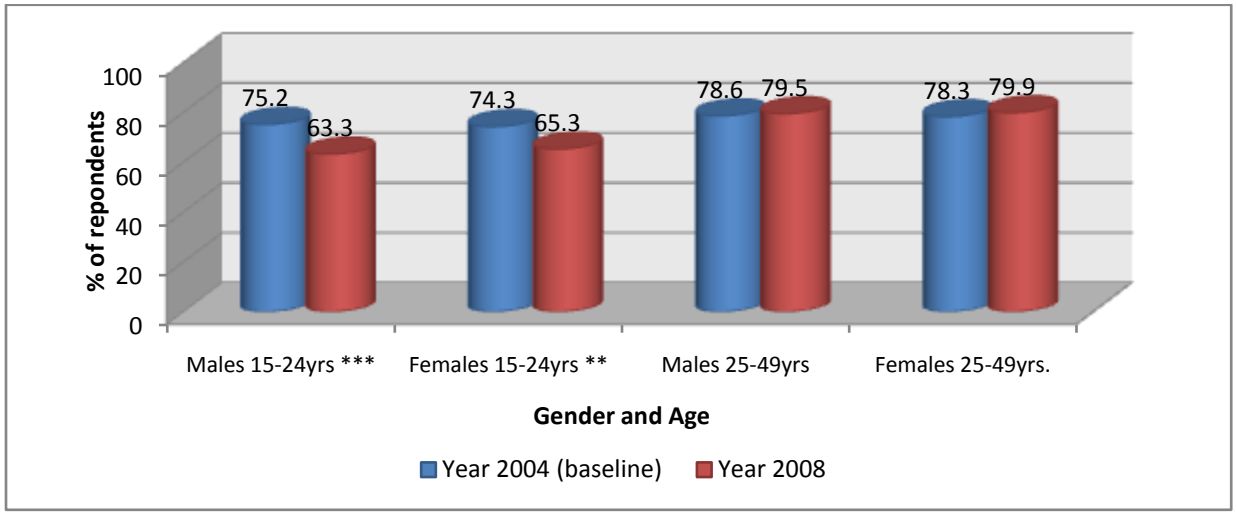
Overall endorsement of the relevant correct preventive practices[3] decreased among 15-24yr olds between YR2004 and YR 2008 while knowledge among those 25-49yrs. remained comparatively the same.

In YR 2004 approximately three-quarters of males and females 15-24yrs endorsed abstinence, condom use always and having one faithful as means of preventing HIV/AIDS. In YR 2008 endorsement of all three preventive methods declined significantly by 12 percentage points among males and 9 percentage points among females. This meant that correct endorsement of preventive practices within this group moved from 3 out of 4 persons in YR 2004 to 3 out of 5 persons in YR 2008.

Endorsement of each of the three specific statements comprising this indictor fell among both males and females 15-24yrs in YR 2008, with endorsement of having one faithful uninfected partner showing the greatest decline.

Among the older age cohort, endorsement of both consistent condom use and having one faithful uninfected partner increased marginally over the same the period with approximately 8 in 10 males and females endorsing these in YR 2004 and YR 2008.

Figure 13: Endorsement of Correct Preventive Practices



[3] Correct preventive practices is a Ministry of Health HIV/AIDS Program indicator which measures the proportion of the population able to endorse correct HIV/AIDS preventive practices. The younger age cohort (15-24 year olds) must endorse 3 preventive practices: condom use always, one faithful partner, abstinence while the older age cohort (25-49 year olds) must endorse 2 preventive practices: condom use always, one faithful partner

Table 42: Endorsement of Correct Knowledge by Age & Gender

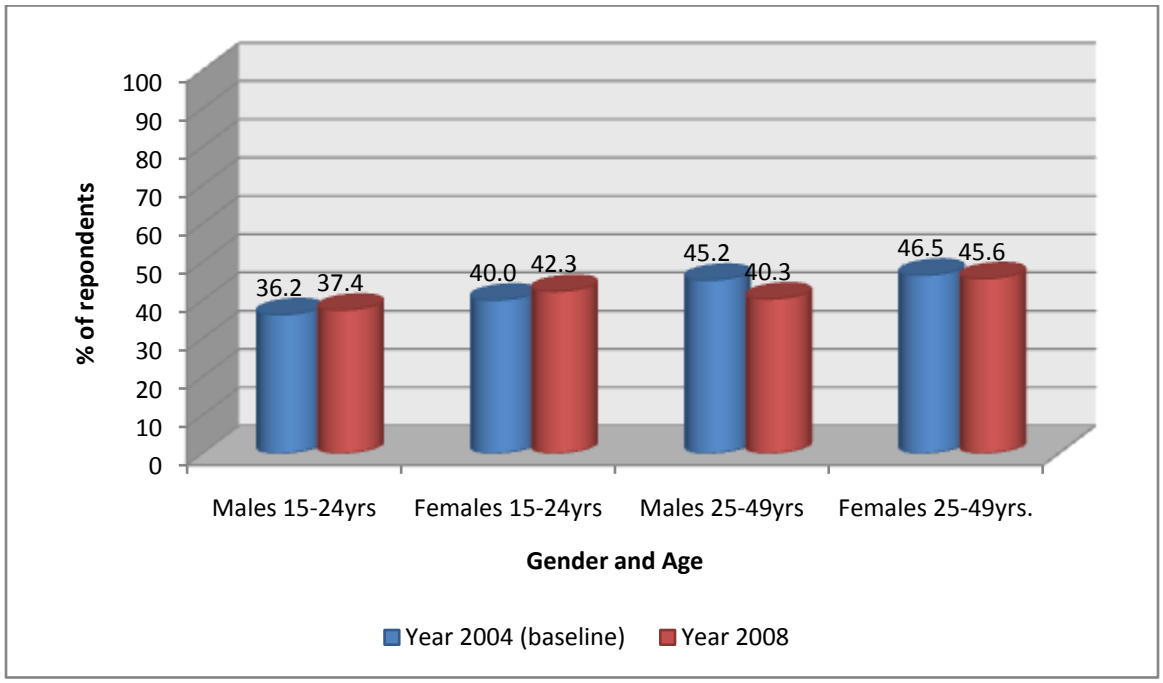
	Endorsement of Use a condom always	Endorsement of Have one faithful uninfected partner	Endorsement of Abstinence	Base
Total sample; YR 2008	90.6	83.9	79.8	*(n=1800)*
Males 15-24yrs; YR 2004	93.4	90.3	83.0	(n=453)
Males 15-24yrs; YR 2008	89.0	83.0	77.2	*(n=447)*
Females 15-24yrs; YR 2004	93.1	86.1	85.7	*(n=447)*
Females 15-24yrs; YR 2008	92.8	80.3	82.7	*(n=446)*
Males 25-49yrs; YR 2004	94.4	93.6	n/a	*(n=425)*
Males 25-49yrs; YR 2008	89.5	87.1	n/a	*(n=448)*
Females 25-49yrs; YR 2004	93.1	93.3	n/a	*(n=475)*
Females 25-49yrs; YR 2008	91.0	85.6	n/a	*(n=458)*

- **COMPREHENSIVE CORRECT KNOWLEDGE:**

Comprehensive correct knowledge defined as the percentage of persons who correctly identify the two major ways of preventing the sexual transmission of HIV (using condoms and limiting sex to one faithful, uninfected partner), who reject the two most common local misconceptions about HIV transmission, and who know that a healthy-looking person can transmit HIV was also measured

Comprehensive correct knowledge decreased marginally among males and females 15-24yrs and declined among the males and females 25-49yrs. Comprehensive correct knowledge declined by less than a percentage point among older females, and by almost 5 percentage points among older males.

Figure 14: Comprehensive Correct Knowledge



- **PROMPTED KNOWLEDGE**

Overall endorsement of all three appropriate preventive methods declined among both males and females between YR 2004 and YR 2008. In YR 2008, significantly fewer males endorsed one faithful partner, condom use all the time and abstinence as methods of preventing HIV when compared to YR 2004. Significantly fewer females endorsed one faithful partner and abstinence as preventive methods in YR 2008 relative to YR 2004. Endorsement of condom use among females also declined albeit marginally so. While correct specific knowledge declined, endorsement of avoiding mosquito and insect bites as a means of prevention increased significantly among both genders. More than a quarter of all males cited avoidance of insect and mosquito bites as a prevention method compared to less than a fifth (17%) in YR 2004. Similarly it was twice as many females who endorsed avoiding insect bites as a prevention method in YR 2008 compared to the previous period.

Significant gains were however made in respect of rejection of not sharing food with PWAIDS as a prevention method, this declined significantly across both gender between YR 2004 and YR 2008.

Table 43: HIV/AIDS Specific Knowledge by Gender

Appropriate methods (prompted) *(agreement)*	MALES		FEMALES	
	YR 2004 (N=878) %	YR 2008 (N=895) %	YR 2004 (N=922) %	YR 2008 (N=904) %
One faithful partner	91.9	85.0	89.8	83.0
Condom use all the time	93.8	89.3	93.1	91.9
Abstinence	84.1	77.8	85.7	81.9
Inappropriate methods (prompted) *(agreement)*				
Avoid mosquitoes and/or insect bites	17.0	27.4***	12.0	22.3***
Not sharing food with PWAIDS	20.3	13.0***	13.7	8.0***
Not touching someone with AIDS	11.4	11.4	6.5	6.6

*=p<.05, ** = p<.005, ***=p<.000

Endorsement of appropriate methods and rejection of inappropriate methods was similar across both age groups except for endorsement of one faithful partner and rejection of avoiding insect bites. The older age cohort was significantly more likely than those 15-24yrs, to endorse one faithful partner and reject the myth of avoiding insect bites.

Table 44: HIV/AIDS Specific Knowledge by Age

Appropriate methods (prompted)	Age Group (YR 2008)	
	15-24yrs (N=893) %	25-49yrs (N=906) %
One faithful partner	81.6	86.3 *
Condom use all the time	90.9	90.3
Abstinence	80.0	79.7
Inappropriate methods (prompted)		
Avoid mosquitoes and/or insect bites	27.7	22.1***
Not sharing food with PWAIDS	11.5	9.7
Not touching someone with AIDS	8.2	7.6
Withdrawing before man ejaculates	15.1	14.0

*=p<.05, ** = p<.005, ***=p<.000

- **UNPROMPTED KNOWLEDGE:**

Irrespective of age and gender, “use a condom” (61.8%) was the most spontaneously cited method of protection followed by abstinence (37.1%) and “using a condom at all times” (28.8%).

Table 45: Top 5 Ways Person Can Prevent HIV/AIDS (unprompted) by Gender

	Gender of respondent		Total
	Male	Female	
Use a condom	61.5%	62.0%	61.8%
Abstain	34.3%	39.9%	37.1%
Use a condom at all times	29.8%	27.9%	28.8%
Have one partner	17.0%	21.5%	19.2%
Get regular check-ups/Get tested	3.2%	2.8%	3.0%

Table 46: Top 5 Ways Person Can Prevent HIV/AIDS (unprompted) by Age

	Age of respondent		Total
	15-24yrs	25-49yrs	
Use a condom	62.9%	60.6%	61.6%
Abstain	40.4%	33.9%	37.1%
Use a condom at all times	30.1%	27.6%	28.8%
Have one partner	12.7%	25.7%	19.2%
Get regular check-ups/Get tested	4.1%	1.9%	3.0%

- **KNOWLEDGE OF PREVENTION OF MOTHER TO CHILD TRANSMISSION OF HIV:**

The percent of respondents who report that maternal to child transmission of HIV can be prevented through anti-retroviral therapy during pregnancy and avoiding breastfeeding was also measured.

Knowledge of the prevention of mother to child transmission declined over the period among all groups In YR 2008, less than 5% of females and even fewer males, irrespective of age, were able to correctly identify that mother to child transmission of HIV can be prevented via anti-retroviral therapy during pregnancy and avoiding breastfeeding.

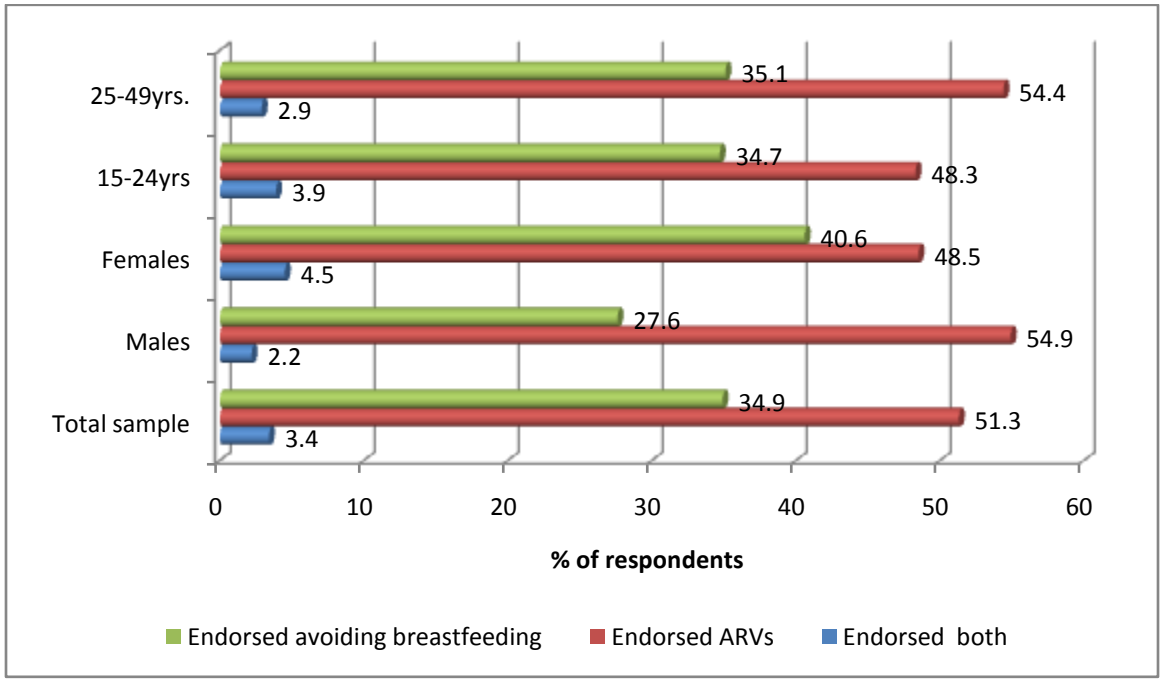
Approximately a half (51.3%) of respondents correctly identified that mother to child transmission could be prevented via the use of ARVs during pregnancy while just over a third (34.9%) correctly identified avoiding breastfeeding as another method. Few cited both methods as means of prevention.

Males were more likely than females to suggest ARV therapy (Males 54.9% vs Females 48.5%) while females were more likely than males to suggest avoiding breastfeeding(Males 27.6% vs Females 40.6%).

Table 47: Knowledge of Prevention of Mother to Choild Transmisson by Age and Gender

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	6.8%	3.2%	*-3.6*
	Female	12.3%	4.5%	*-7.8*
25-49 YRS.	Male	8.0%	1.3%	*-6.7*
	Female	16.6%	4.6%	*-12.0*

Figure 15: Awareness of Prevention of Mother to Child Transmission (unprompted) By Age And Gender



CHAPTER 6: STIGMA AND DISCRMINATION

To measure general acceptance of persons living with AIDS and the extent to which stigma and discrimination exists a series of statements were asked as per the Caribbean indicators. Overall, Jamaicans display increasing acceptance of people living with AIDS with most (82.8%) being willing to care for an infected family member and more than three-quarters (76.4%) supporting a female teacher being allowed to continue teaching if not sick. More than a half (58.2%) were also supportive of a family member disclosing their HIV positive status.

Additionally, less than a fifth endorsed the view that a person who contracts HIV "had let their family down" (17.9%) and even fewer endorsed the view that persons infected with AIDS had "gotten what they deserved" (6.3%).

Generally however, persons remain reluctant to purchase fresh vegetables from an HIV positive vendor with less than a quarter (23.5%) endorsing this measure.

Endorsement of all four components comprising the current stigma and discrimination measure increased between YR 2004 and YR 2008. In YR 2008 more males 15-49yrs and females 25-49yrs were likely endorse all four statements and thus displayed accepting attitudes.

When purchasing of food from a vendor was removed from the score, portion displaying accepting attitudes increased to more than a third (37.8%). Overall accepting attitudes towards people living with HIV/AIDS was higher among males and persons 25-49yrs.

Table 48: Attitudes to People Living with HIV/AIDS by Gender

	Sex of respondent		
	Male (N=896) %	Female (N=904) %	Total (N=1800) %
Accepting attitudes to PLWA (4 components)	14.5	10.2	12.3
Accepting attitudes to PLWA (3 components)	41.4	34.3	37.8
Willing to care for a family member who becomes sick with the AIDS virus	84.8	80.8	82.8
Willing to buy fresh vegetables from a vendor whom they knew was HIV+	24.9	22.2	23.5
Agree that a female teacher who is HIV+ but not sick should be allowed to continue teaching in school	74.9	77.8	76.4
Agree that they would not want to keep the HIV status of a family member a secret	62.0	54.5	58.2
Persons who get AIDS have gotten what they deserve	7.3	5.1	6.3
When a person contracts AIDS they let their family down	18.3	17.4	17.9
Attitudes to disclosure of HIV status:			
– Status should be disclosed to best friend	49.5***	35.4	42.4
– Status should be disclosed to partner	80.0	81.0	80.5
– Status should be disclosed to parent	83.2	83.7	83.5
– Status should be disclosed to co-workers	40.7***	27.7	34.1
– Should be allowed to keep status a secret	24.1	31.2*	27.8

*=p<.05, ** = p<.005, ***=p<.000

Table 49: Attitudes to People Living with HIV/AIDS by Age

	Age of respondent		Total (N=1799) %
	15-24yrs (N=893) %	25-49yrs (N=906) %	
Accepting attitudes to PLWA (4 components)	10.5	14.1	12.3
Accepting attitudes to PLWA (3 components)	36.8	38.8	37.8
Willing to care for a family member who becomes sick with the AIDS virus	84.5	81.0	82.8
Willing to buy fresh vegetables from a vendor whom they knew was HIV+	20.5	26.5*	23.5
Agree that a female teacher who is HIV+ but not sick should be allowed to continue teaching in school	75.0	77.9*	76.4
Agree that they would not want to keep the HIV status of a family member a secret	56.9	59.5*	58.2
Persons who get AIDS have gotten what they deserve	7.1	5.3	6.3
When a person contracts AIDS they let their family down	23.0***	12.8	17.9
Attitudes to disclosure of HIV status:			
– Status should be disclosed to best friend	37.4	47.4***	42.4
– Status should be disclosed to partner	79.2	81.8	80.5
– Status should be disclosed to parent	83.7	83.3	83.5
– Status should be disclosed to co-workers	28.7	39.5***	34.1
– Should be allowed to keep status a secret	30.1*	25.3	27.7

*=p<.05, ** = p<.005, ***=p<.000

Figure 16: Accepting Attitude towards PLW HIV/AIDS (4 components)

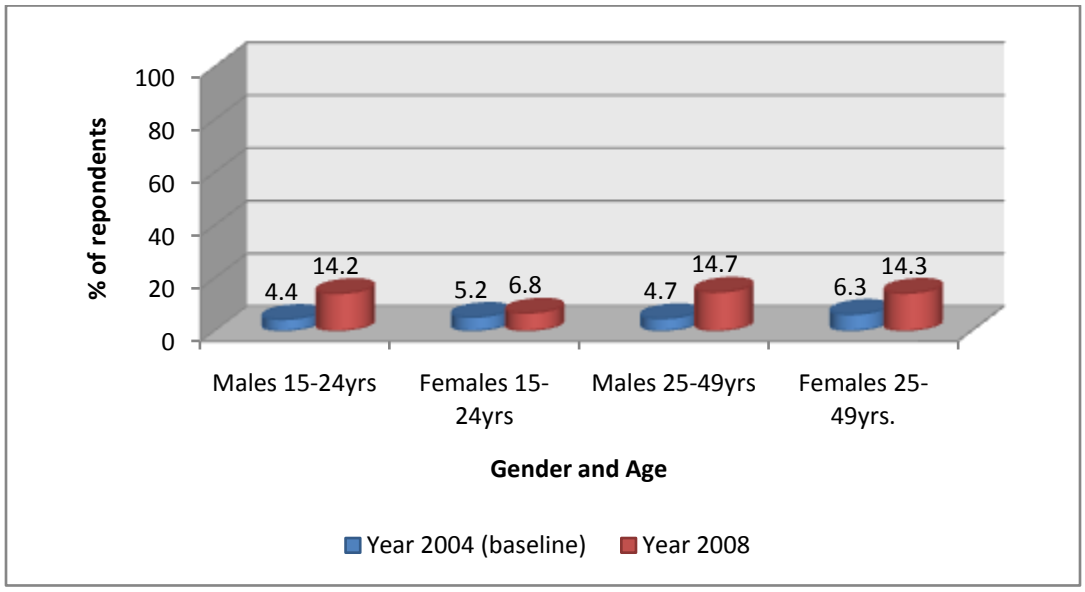
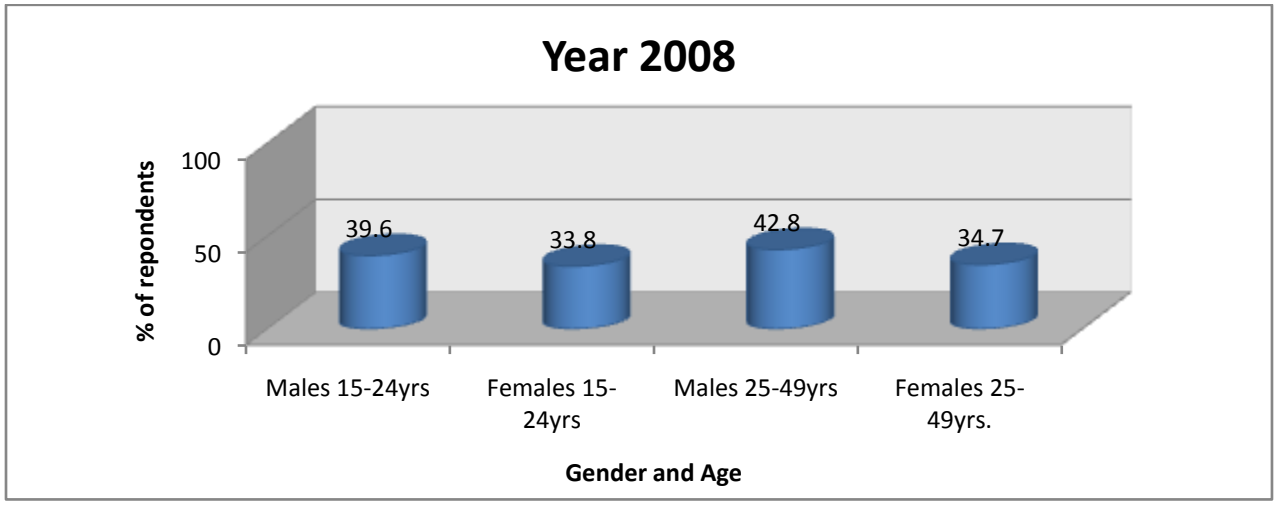


Figure 17: Accepting Attitude towards PLW HIV/AIDS (3 components): Year 2008



CHAPTER 7: RESPONSE TO CARISMA MEDIA CAMPAIGN

As part of the CARISMA project a mass media campaign promoting consistent condom use was developed and launched. The campaign was entitled "Stay pon top a tings, run your show with a condom everytime" and aimed to promote continued condom use even when partners became tested and labeled as main partners. The campaign was comprised primarily of a series of radio and television spots.

The campaign demonstrated high overall recall and message comprehension. Three quarters of persons recalled the campaign spontaneously with an additional 16.5% recalling after being prompted, giving and overall recall of 9 in 10 (91.5%) persons.

The campaign also had relatively high comprehension with 2 out of 3 persons (67%) correctly interpreting the message of the campaign as relating to consistent condom use.

Among persons recalling the messages, the campaign was also able to prompt some discussion of its content. Just under a half (46%) of persons who recalled the campaign had discussed it with their partner and 6 in 10 (60%) had discussed it with their friends. Interestingly persons 25-49yrs were significantly more likely, than those 15-24yrs, to report having discussed the campaign with their sex partner(25 -49y; 51.7% vs 15-24y; 40.5%). More than a half of those who recalled the campaign and had had multiple partners(55.3%) or had a casual partner (53.9%) had discussed the message of the campaign with their sex partner.

Overall more than a half (53.9%) of those recalling the campaign felt the messages could impact their behavior via encouraging everytime condom use. It was a third (35.7%) said the campaign had already impacted their behavior in this way. Possible impact and reported impact was significantly higher among males and persons sexually active but not in a married or co-habiting union.

The campaign's general proposition was that couples should continue condom use due to people's own uncertainty as to their HIV status. In fact one secondary message was "if he doesn't know, you can't know either". The campaign appeared to have conveyed the message of continued condom use to many who recalled it as evidenced by the 56.5% who were likely to advise a friend contemplating cessation of condom use with main partner to keep using the condom until both partners get tested. Just under a quarter (23.1%) were also likely to advise said friend to continue using the condom even if you trust him/her

Table: Table Showing Campaign Recall

	Total Recall %	Unprompted Recall %	Prompted Recall %
Total ; (n=1800)	91.5	75.0	16.5
15-24yrs; (n=893)	93.1	75.9	17.2
25-49yrs; (n=907)	89.9	74.1	15.8
Male; (n=896)	90.3	73.7	16.6
Female ; (n=904)	92.7	76.3	16.4
Males 15-24yrs; (n=447)	92.7	76.1	16.6
Females 15-24yrs; (n=446)	93.7	75.8	17.9
Males 25-49yrs; (n=449)	88.0	71.3	16.7
Females 25-49yrs; (n=458)	91.7	76.9	14.8
Married/cohabiting; (n=544)	91.0	74.8	16.2
Not married but sexually active; (n=798)	91.0	74.6	16.4
Ever had sex; (n=1582)	90.9	74.1	16.8
Never had sex; (n=217)	95.9	81.6	14.3

Table 50: Percentage Correctly Interpreting the Message of the Campaign

	Correctly interpreted message %
Total ; (n=1800)	67.3
15-24yrs; (n=893)	68.8
25-49yrs; (n=907)	65.9
Male; (n=896)	68.2
Female ; (n=904)	66.5
Ever had sex; (n=1582)	67.3
Never had sex; (n=217)	67.7
Married/cohabiting; (n=544)	65.1
Not married but sexually active; (n=798)	67.7

Table 43: Percentage Who Have Discussed Message of Campaign with Sex Partner and Friends

	Discussed message with partner	Discussed message with friends
Total; (n=1613)	46.1	60.1
15-24yrs; (n=812)	40.5	62.6
25-49yrs; (n=801)	51.7***	57.7
Male; (n=795)	43.8	60.8
Female ; (n=818)	48.3	59.5
Ever had sex; (n=1408)	52.3	60.7
Never had sex; (n=204)	-	56.4
Married/cohabiting; (488)	56.6	57.8
Not married but sexually active; (n=707)	55.4	65.1
Had multiple partners in last 12 months; (n=459)	55.3	66.2
Had high risk partners (new partner/ one night stand/ someone met in bar or club); (n=414)	53.9	65.9

*=p<.05, ** = p<.005, ***=p<.000

Table 44: Reported Actual & Potential Impact of Message on Condom Use

	COULD IMPACT BEHAVIOUR	HAS IMPACTED BEHAVIOUR
Total; (n=1647)	53.9	35.7
15-24yrs; (n=832)	48.3	37.0
25-49yrs; (n=815)	43.9	34.4
Male; (n=809)	51.1***	41.4***
Female ; (n=838)	41.4	30.2
Ever had sex; (n=1438)	48.2***	38.1
Never had sex; (n=208)	31.7	19.2
Married/cohabiting; (495)	38.0	28.9
Not married but sexually active; (n=726)	54.5***	45.7***
Multiple partners in last 12 months; (n=463)	57.9	48.2
High risk partners (new partner/ one night stand/ someone met in bar or club); (n=414)	55.0	46.9

*=p<.05, ** = p<.005, ***=p<.000

Figure 18: Likely Advice To Friend Planning To Stop Using Condom With Main Partner By Age

(Base=respondents recalling campaign)

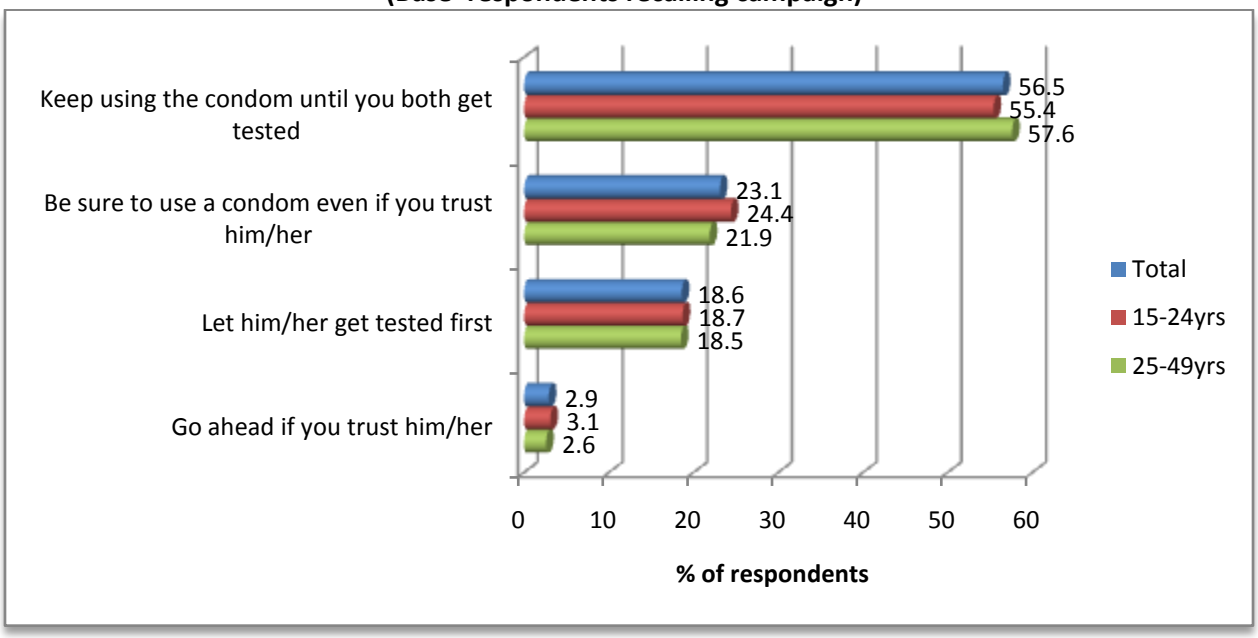
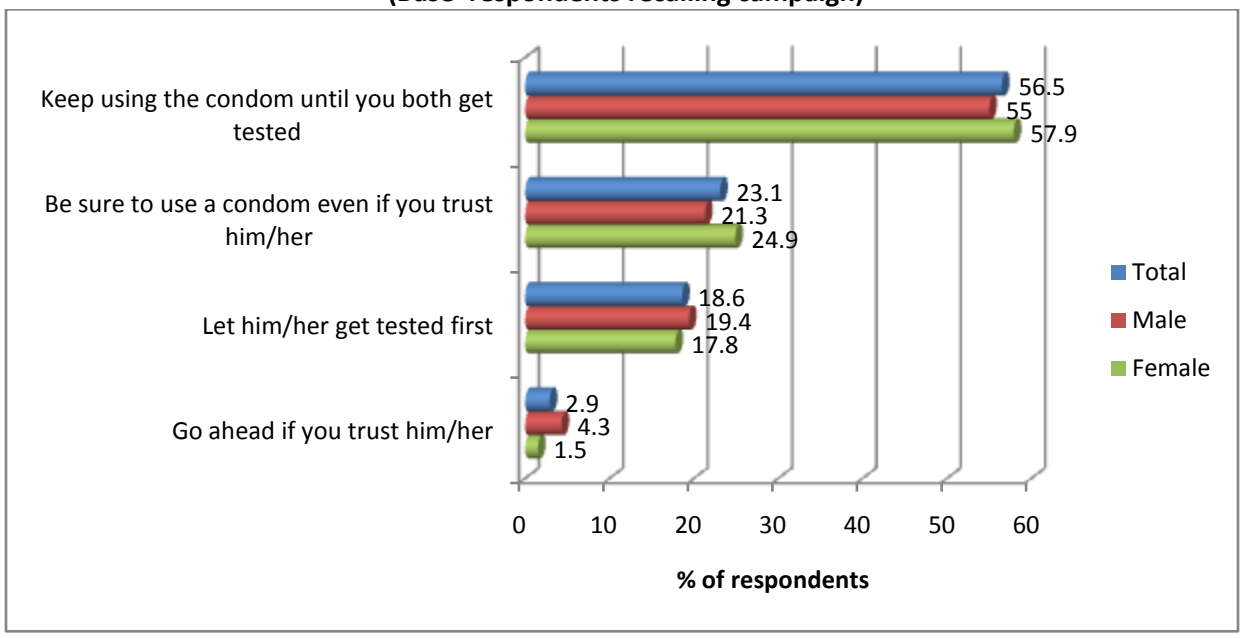


Figure 19: Likely Advice To Friend Planning To Stop Using Condom With Main Partner By Gender

(Base=respondents recalling campaign)



CHAPTER 8: RESULTS OF PROGRAMME INDICATORS

PREPARED BY: HOPE ENTERPRISES LTD.

INTRODUCTION:

The following are the MOH Program Indicators. Year 2008 data is based on the findings of the recently concluded KABP survey, conducted by HOPE Enterprises as part of the KfWand PANCAP funded CARISMA Social marketing project in Jamaica. Where available indicators are tracked against the results of the 2004 KABP.

Behavior Change Communication:

- ***Proportion endorsing correct preventive practices:***
  - 15-24 year olds must endorse 3 preventive practices: condom use always, one faithful partner, abstinence
  - 25-49year olds must endorse 2 preventive practices: condom use always, one faithful partner,

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	75.2%	63.3%	*-11.9*
	Female	74.3%	65.3%	*-9.0*
25-49 YRS.	Male	78.6%	79.5%	*0.9*
	Female	78.3%	79.9%	*1.6*

Knowledge of prevention of mother to child transmission of HIV:

- % of respondents who report that maternal to child transmission of HIV can be prevented through anti-retroviral therapy during pregnancy and avoiding breastfeeding.

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	6.8%	3.2%	*-3.6*
	Female	12.3%	4.5%	*-7.8*
25-49 YRS.	Male	8.0%	1.3%	*-6.7*

	Female	16.6%	4.6%	*-12.0*

- ***Comprehensive correct knowledge about AIDS (2 ways to prevent AIDS and reject 3 misconceptions):***
    - Percentage of 15-24 year olds who correctly identify the two major ways of preventing the sexual transmission of HIV (using condoms and limiting sex to one faithful, uninfected partner), who reject the two most common local misconceptions about HIV transmission, and who know that a healthy-looking person can transmit HIV

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	36.2%	37.4%	*1.2*
	Female	40.0%	42.3%	*2.3*
25-49 YRS.	Male	45.2%	40.3%	*-4.9*
	Female	46.5%	45.6%	*-1.0*

    - % of young people aged **15-19** who have never had sex

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-19 YRS.	Male	27.6%	33.8%	*6.2*
	Female	50.5%	40.4%	*-10.1*

- ***Risky Sex in the last year:***
    - The percent of respondents (15 to 24 yr.) who have had unprotected sex with a non-marital, non-cohabiting partner in the last 12 months of all respondents reporting sexual activity in the last 12 months.

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008**	Points change
15-24 YRS.	Male	30.5%	12.9%	*-17.6*
	Female	31.0%	20.5%	*-10.5*
25-49 YRS.	Male	27.6%	15.9%	*-11.7*
	Female	29.2%	18.3%	*-10.9*

*****YR 2008: responses collected using a self-administered questionnaire***

- ***Condom use at last higher risk sex:***
  - The percent of respondents who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	n/a	83.5%	-
	Female	n/a	66.3%	-
25-49 YRS.	Male	n/a	72.4%	-
	Female	n/a	53.5%	-

- ***Multiple Partnerships in last 12 months:***
  - Percentage of women and men aged 15–49 who have had sexual intercourse with more than one partner in the last 12 months

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	56.2%	76.2%	*20.0*
	Female	16.0%	21.4%	*5.4*
25-49 YRS.	Male	39.2%	51.7%	*12.5*
	Female	6.4%	12.4%	*6.2*

- ***Multiple partnerships in last 12 months:***
    - Percentage of women and men aged 15–49 who have had more than one sexual partner in the past 12 months reporting the use of a condom during their last sexual intercourse.

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	72.0%	77.3%	*5.3*
	Female	59.6%	56.5%	*-1.9*
25-49 YRS.	Male	58.4%	52.0%	*-7.6*
	Female	53.3%	42.2%	*-11.1*

- ***Commercial sex in last 12 months:***
    - The percent of men respondents reporting sex with a sex worker in the last 12 months.

GENDER	Age	YEAR 2004 (Baseline)	YEAR 2008	Points change
Males	15-24 YRS.	6.0%	5.9%	*-0.1*
	25-49 YRS.	15.0%	7.8%	*-7.2*

- ***Condom use at last commercial sex (reported by male client)***
    - The percent of men respondents reporting condom use the last time they had sex with a sex worker, of those who report having had sex with a sex worker in the last 12 months.

GENDER	Age	YEAR 2004 (Baseline)	YEAR 2008	Points change
Males	15-24 YRS.	80.0%	69.2%	*-10.8*
	25-49 YRS.	75.5%	60.0%	*-15.5*

- ***Age mixing in sexual relationships:***
    - The percent of respondents aged 15-19 who have had non-marital sex with a partner 10 years or more older than themselves in the last 12 months, of all those who have had non-marital sex in the last 12 months disaggregated by sex of respondents.

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-29 YRS.	Male	n/a	9.8%	-
	Female	n/a	19.0%	-

- ***Condom accessibility:***
    - The percent of target populations surveyed reporting that they can acquire a condom if they need one within a specific time period (immediately) *(Base= sexually active population)*.

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	94.0%	92.1%	*-1.9*
	Female	86.1%	88.6%	*2.5*
25-49 YRS.	Male	90.6%	92.0%	*1.4*
	Female	77.3%	83.1%	*5.8*

Prevention (VCT):

- ***Population requesting an HIV test, receiving a test and receiving test results:***
    - The percent of respondents who have ever voluntarily requested an HIV test, received the test, and received their results

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	13.7%	18.9%	*5.2*
	Female	29.8%	46.8%	*17.0*
25-49 YRS.	Male	34.3%	49.0%	*14.7*
	Female	46.2%	61.8%	*15.6*

    - Percentage of women and men aged 15-49 who received an HIV test in the last **12 months** and who know their results

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	9.3%	13.3%	*4.0*
	Female	18.1%	34.2%	*16.1*
25-49 YRS.	Male	15.3%	26.7%	*11.4*
	Female	18.5%	33.2%	*14.7*

Prevention (PMTCT):

- ***Pregnant women counseled and tested for HIV:***
    - The per cent of women who were counseled and offered voluntary HIV testing during antenatal care for their most recent pregnancy, accepted an offer of testing and receive d their test results, of all women who were pregnant at any time in the 2 years preceding the survey.

GENDER	AGE	YEAR 2004 (Baseline)	YEAR 2008	Points change
Female	15-24yrs	62.5%	91.2%	*28.7*
	25-49yrs	54.6%	92.1%	*37.5*

Human Rights Stigma and Discrimination:

- ***Accepting attitude towards those living with HIV/AIDS (Composite of 4 components)***
    - The percent of respondents (15 to 49 yr.) expressing accepting attitudes towards people with HIV:
        - The percent of respondents saying that they would be willing to care for a family member who became sick with the AIDS virus
        - The percent of respondents who say they would buy fresh vegetables from a vendor whom they knew was HIV +
        - The percent of respondents who say that a female teacher who is HIV+ but not sick should be allowed to continue teaching in school
        - The percent of respondents who say that they would not want to keep the HIV+ status of a family member a secret

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	4.4%	14.2%	*9.8*
	Female	5.2%	6.8%	*1.6*
25-49 YRS.	Male	4.7%	14.7%	*10.0*
	Female	6.3%	13.3%	*7.0*

- ***Accepting attitude towards those living with HIV/AIDS (Composite of 3 components)***
    - The percent of respondents (15 to 49 yr.) expressing accepting attitudes towards people with HIV:
        - The percent of respondents saying that they would be willing to care for a family member who became sick with the AIDS virus
        - The percent of respondents who say that a female teacher who is HIV+ but not sick should be allowed to continue teaching in school
        - The percent of respondents who say that they would not want to keep the HIV+ status of a family member a secret

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	n/a	39.6%	-
	Female	n/a	33.8%	-
25-49 YRS.	Male	n/a	42.8%	-
	Female	n/a	34.7%	-

- ***Accepting attitudes - Person allowed to keep HIV+ status private***
    - The percent of respondents who say that, if a person became infected with HIV, they should be allowed to keep it private

AGE	GENDER	YEAR 2004 (Baseline)	YEAR 2008	Points change
15-24 YRS.	Male	14.6%	27.4%	*12.8*
	Female	17.3%	32.7%	*15.4*
25-49 YRS.	Male	11.7%	21.0%	*9.3*
	Female	15.5%	29.5%	*14.0*