Knowledge, Attitudes and Practices About Condoms

Population Services International

Botswana

Knowledge, Attitudes and Practices About Condoms

Final Report

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Introduction

In 1993 the AIDS STD Unit contracted SIAPAC Africa to undertake a knowledge, attitudes and practices survey with regard to the sexual behaviours of 18-25 year olds in five locations in Botswana (Lobatse, Serowe/Palapye, Kweneng, Chobe and Gantsi). Population Services International/Botswana (PSI) also contracted SIAPAC Africa to establish baseline levels of AIDS awareness, knowledge and attitudes about condom usage, reported condom usage, and specific marketing questions in the questionnaire designed for the AIDS/STD Unit. This report presents the findings from the study.

Methodology

The quantitative survey was implemented in five locations, including Lobatse, Serowe/Palapye, Kweneng, Chobe and Gantsi. A minimum of two hundred twenty-five (225) youths between the ages of 18-25 were interviewed in each of the five study locations (N=1125 minimal, 1189 actual)[1].

A problem that is likely to arise in any survey is response bias. This is particularly problematic in the case of sensitive topics, including sexual behaviour. Six strategies were used to minimise the bias: 1) careful questionnaire design and repeated pre-testing; 2) extensive enumerator training including sensitivity in the interview; 3) sex matching of enumerator and respondent; 4) a series of internal consistency measures in the questionnaire designed to ensure consistent answers across questions asked in different ways; 5) during analysis and write-up, an examination of possible areas of bias; and 6) lessons learned from a 1992 study on sexual behaviour. The questionnaire administered to respondents is included in Annex A.

Youths interviewed for the study were randomly selected using the World Health Organisation Expanded Programme on Immunization cluster strategy, involving the selection of random starting points. Because the study was clinic-based in the districts, sampling consisted of using the clinic as the location for selecting a random starting direction.

Enumerator teams (made up of 1 male and 1 female interviewer) were assigned to random starting points. After randomly selecting a number (*n*) from a bag of numbers, and randomly selecting a starting direction (by spinning a bottle), enumerators proceeded to the *n*th household. Interviews were conducted with same sex respondents.

A second qualitative data collection instrument was added to solicit more detailed information from groups of same-sex same-age respondents to probe deeper into issues of relevance to five Priority Prevention Indicators identified by the AIDS/STD Unit. Eleven focus groups were conducted. Where relevant, data collected using the qualitative instrument are included in the text. Readers should refer to Monitoring Trends in Youth Sexual Behaviour - 1993 (SIAPAC) for full qualitative findings. The "focus group" instrument is included in Annex B.

Data Analysis

Data were analysed using SPSS (Statistical Package for the Social Sciences) for the Macintosh. For each study location, data were analysed and compared across gender and age, grouping respondents aged 18-20 and 21-25 together. Data were compared using crosstabulations, t-tests and analysis of variance (ANOVA) in most cases. Tests of independence were carried out, and p-values are reported where appropriate. If the p-value is less than or equal to .10, the hypothesis that the variables are independent of each other is rejected and a statistical relationship between the variables is reported[2].

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1 In most cases in the field, it was easier to exceed the sample size than to work out specific sampling frames of unequal numbers of men and women. In addition, the weighting of males and females based on their prevalence in the population was easier when the number of males and females was the same. Therefore, the sample size for each location treated the 225 as a minimum figure.

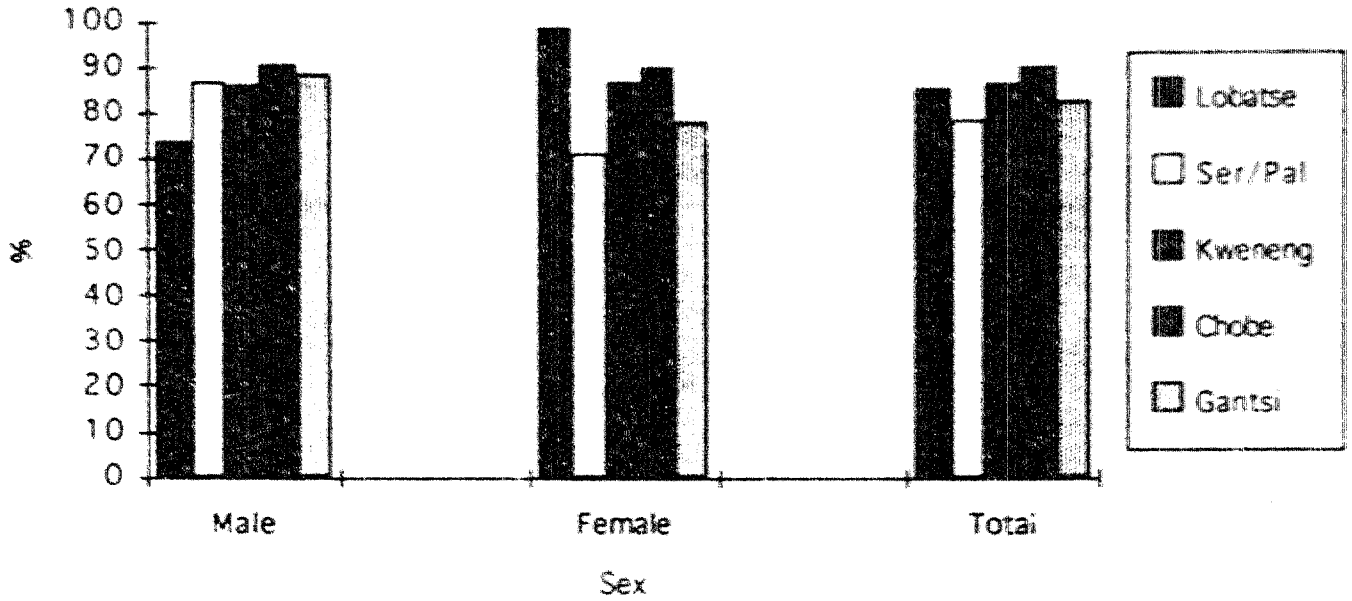
2 In applied survey research, .10 is commonly used as a measure of statistical significance between variables. Actual p-values are presented in the text where relevant.

Findings

Knowledge of Preventive Practices

We investigated the number of people who could identify at least two acceptable ways of protecting themselves from HIV infection. Detailed findings are presented in Table C1 Annex C, and summary information is provided in Figure 1 below.

Figure 1
Knowledge of Preventive Practices by Gender Across Location
(% of Respondents Able to Indicate at Least Two Correct Responses to How People Can Protect Themselves Against Getting AIDS)



Overall, 85.6%, 78.6%, 86.6%, 90.4% and 83.3% of respondents in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi, respectively were able to correctly state at least two correct methods of prevention. Males in Serowe/Palapye and Gantsi were significantly more likely to be able to cite methods of protection against AIDS than their female counterparts (p=.00405 and .02418 for Serowe/Palapye respectively). In Lobatse, the situation was reversed, with females significantly more likely to state correct methods of protection (p=.00000). In Kweneng and Chobe, there was no gender variation (p=.93793 and .84124, respectively).

Knowledge of preventive practices was also compared by age in each study location. There was no significant difference between younger respondents (18-20) and older respondents (21-25) in terms of their ability to cite at least two methods of protection against the AIDS virus (p=.92293, .65935, .82757, .34555, and .42769 in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi respectively).

There was a clear association between knowledge of preventive practices and education, with respondents with higher levels of education significantly more likely to be able to cite correct methods of protection (p=.00293, .00000, .00547, .00023, .00019 in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi respectively).

Table 1 indicates specific methods of protection cited by respondents. The percentages indicate the number of respondents who cited a particular response. Respondents were able to indicate up to five methods of protection.

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Table 1
Methods of Protection Cited by the Respondent (%)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages (male/female/total)	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
Methods of Protection															
% Stating Correct Responses															
Use condoms w/ casual partner	32.5	39.8	36.1	45.5	4.4	24.5	41.9	23.1	32.0	58.8	61.3	60.1	68.6	14.0	4.9
Use condoms w/ any partner	95.8	90.7	93.3	61.6	93.9	78.1	85.5	89.3	87.5	98.3	81.5	90.1	76.0	94.2	84.9
Abstain from sex	15.8	66.9	40.7	67.0	25.4	45.7	52.1	47.9	49.9	26.9	50.4	38.4	52.1	33.1	42.8
Reduce # of partners	0.8	3.4	2.1	8.9	5.3	7.1	3.4	5.0	4.2	1.7	9.2	5.4	15.7	21.5	18.5
Sex w/ only regular partner	1.7	15.3	8.3	41.1	na[3]	20.0	24.8	4.1	13.9	0.8	11.8	5.8	39.7	1.7	21.0
Stick to one partner	50.0	84.7	66.9	82.1	71.1	76.5	65.8	83.5	75.2	58.0	73.1	65.4	71.9	75.2	73.5
% Stating Incorrect Responses															
Go to western doctor	3.3	1.7	2.5	29.5	na	14.4	10.3	na	4.8	na	10.1	4.9	23.1	0.8	12.2
Go to traditional doctor	na	0.8	0.4	0.9	0.9	0.9	2.6	na	1.2	0.8	9.2	5.0	9.1	1.7	5.4
Have sex less frequently	na	na	na	na	na	na	na	na	na	0.8	4.2	2.5	7.4	0.8	4.2
Use contraceptive (birth control other than condoms)	0.8	1.7	1.3	2.7	1.8	2.2	1.7	na	0.8	na	4.2	2.1	0.8	3.3	2.0
Other	2.4	4.2	2.5	21.4	0.9	10.9	14.5	na	6.8	0.8	5.9	3.3	8.2	1.7	5.0

In all study locations, condom use was commonly cited as a method of protection against HIV infection. The percentage of the respondents stating condom use with any partner as a method of protection ranged from 78% to 93%. The response "use condoms with a casual partners" was lower than "use condoms with all partners" in all locations. In Serowe/Palapye, Kweneng and Gantsi, females respondents mentioned using condoms with <u>any</u> partner more frequently than the males, while the males in both locations mentioned the use of condoms with <u>casual</u> partners more frequently than the females. Abstaining from sex was mentioned by about 40% of the respondents as a method of protection, while the response "stick to one partner" was mentioned by over 70% of the respondents. Partner reduction and "have sex with only regular partner" were less common responses, ranging up to 21%. The percentage of respondents stating incorrect responses was very low in all the locations.

Methods of protection were also discussed in the focus group discussions. Respondents in all focus groups were able to correctly state that condoms could prevent the transmission of HIV and STDs.

We investigated general levels of knowledge about AIDS. Respondents were presented with a series of ten questions about AIDS, and asked if they believed the statements were true or false. The questions related to transmission of HIV, prevention, and "cure". Summary results are presented in Figure 2.

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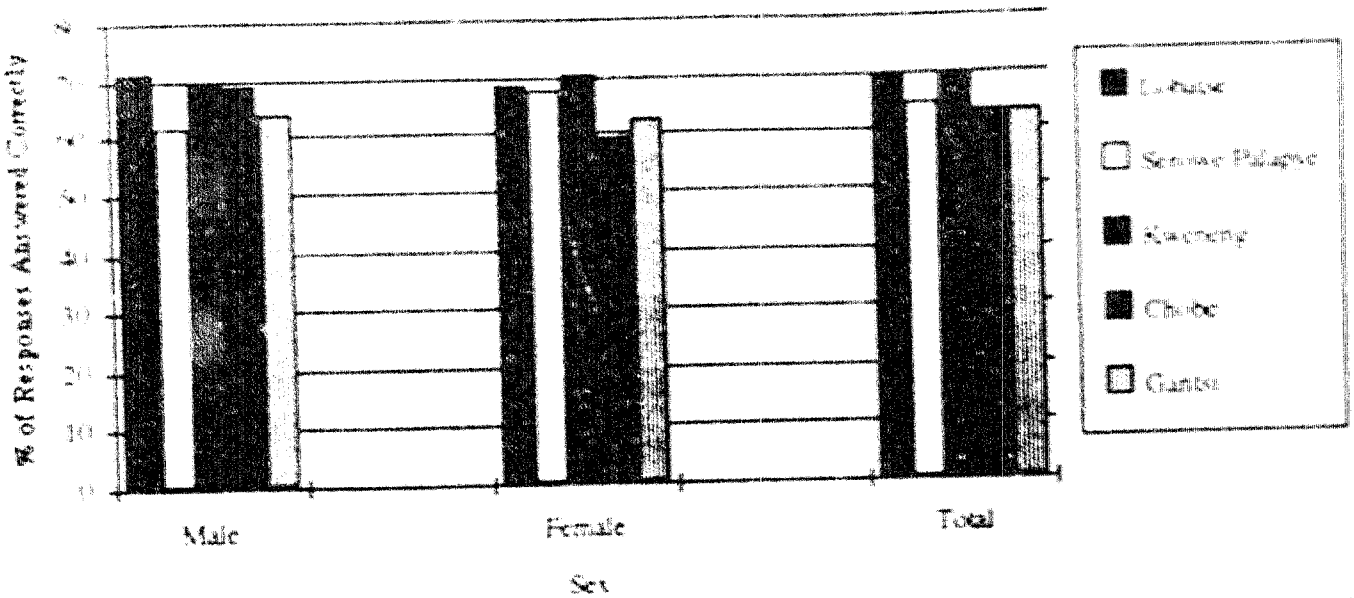
[3] "na" in Table 1 indicates no observations in the cell

Figure 2
Percentage of Correct Responses by Gender Across Location



Percentage of correct responses of general knowledge of AIDS was quite high amongst males and females across location (70.0%, 64.5%, 70.0%, 63.1%, and 63.2% in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi respectively). In Chobe, males were significantly more informed than the females (p=.0246). In Serowe/Palapye, the reverse was true, with females significantly more informed that males (p=.0530). There was no gender difference in Lobatse (p=.3670), Kweneng (p=.7345) or Gantsi (p=.6776).

Findings for each general knowledge item are presented in Annex C, Table C2.

Attitudes About Condoms and AIDS

Twenty four statements were read to respondents, and they were asked if they 'strongly agreed', 'agreed', 'disagreed' or 'strongly disagreed' with the statements. These attitudinal items were grouped into categories along the themes indicated in Table 2 and mean values were obtained. Higher mean values represent more 'positive' attitudes. Mean attitudinal values are reported on a 4-point scale, with 1 being least and 4 being most 'positive'.[4]

Table 2
Attitudes About Condoms and AIDS (Means)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Means (m) male (M), female (F), total (T)	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T
Mean Values															
Attitudes Towards Condom Use	2.9	3.1	3.0	3.0	3.3	3.1	2.9	3.1	3.0	3.0	3.1	3.00	3.0	3.0	3.0
Obtaining Condoms	3.0	3.1	3.1	3.0	3.0	3.0	3.1	3.0	3.0	3.0	3.0	3.0	3.0	3.2	3.1
Responsibility for Condoms	2.5	2.5	2.5	2.3	2.4	2.4	2.5	2.5	2.5	2.7	2.4	2.5	2.4	2.7	2.6
Concern Over Getting AIDS	3.0	2.9	2.9	2.8	2.8	2.8	2.8	2.8	2.8	2.7	2.9	2.8	2.9	2.7	2.8

4 For those referring to the questionnaire, all scales were converted to the positive prior to obtaining mean values. The scale was reversed prior to analysis for the following questions: 37, 40, 41, 42, 53, 54.

Attitudes Towards Condom Use

Overall, attitudes towards condom use were "positive" (averaging just over 3 on a 4-point scale), consisting of the following items: "condoms are easy to use" (agreement indicates a "positive" response), "condoms make sex less enjoyable" (disagreement indicates a "positive" response), "I would be embarrassed to ask a sex partner to use a condom if I could use a condom" (disagreement indicates a "positive" response), "condoms should be used with regular partners/spouses" (agreement indicates a "positive" response), "there is no need to use condoms even with casual partners" (disagreement indicates a "positive" response), and "I use condoms more now than I did a year ago" (agreement indicates a "positive" response). Females in Lobatse and Serowe/Palapye, had more positive attitudes about the usage of condoms than their male peers (p= .0053 and .0002 respectively). In Kweneng, Chobe and Gantsi, there was no gender variation (p= .1415, .4773 and .4830 respectively). These data were also analysed to determine age variation. In all locations, there was no significant attitudinal variation towards condom usage when comparing younger respondents (18-20) with older respondents (21-25) (p=.9036, .5611, .4849, .4630, and .6897 in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi respectively).

Attitudes Towards Obtaining Condoms

Attitudes towards obtaining condoms were also positive (averaging 3), with the attitude statements consisting of "I would be embarrassed to buy condoms" (disagreement indicates a "positive" response), "I would be embarrassed to get condoms from a clinic" (disagreement indicates a "positive" response), and "I would prefer to have condoms distributed by a person of the same gender as myself" (disagreement indicates a "positive" response). In Gantsi, female resondents tended to have slightly more "positive" attitudes than their male peers (p= .0070). In Lobatse, Serowe/Palapye, Kweneng and Chobe, there was no gender variation (p= .3828, .5174, .2338 and .4143, respectively). We investigated whether attitudes about obtaining condoms varied with age. In Lobatse, Serowe/Palapye, Kweneng, and Chobe, there was no significant age variation between younger (18-20) and older (21-25) respondents. In Gantsi, older respondents were significantly more "positive" about obtaining condoms than the younger respondents in the same location (p=.0005).

Responsibility for Condoms

The responsibility for providing condoms was also scaled and consisted of the following items: "I think people who carry condoms are loose" (disagreement indicates a "positive" response), "it is always the man's responsibility to carry condoms" (disagreement indicates a "positive" response), and "women should also carry condoms" (agreement indicates a "positive" response). Attitudes about responsibility for condoms appeared to be neutral across location and gender. In Lobatse and Kweneng, there was no gender variation (p= .3890 and .2827 respectively). In Chobe, males were significantly more "positive" about responsibility for condoms than females in that location (p=.0107). In Serowe/Palapye and Gantsi the reverse was true, with females significantly more "positive" than their male peers (p=.0672 and .0002). We also investigated whether attitudes about who should be responsible for providing condoms varied with age. In Lobatse, older respondents (21-25) were significantly more "positive" about who should carry condoms than younger respondents (18-20) (p=.0954). In the other study locations, there was no significant variation by age (p=.2988, .5625, .5278 and .8718 for Serowe/Palapye, Kweneng, Chobe and Gantsi respectively).

Concern Over Getting AIDS

The level of concern about getting AIDS was 2.8 on the 4 point scale, meaning that people were only moderately concerned about the AIDS situation in Botswana. The concern scale consisted of the following items: "AIDS is not a serious health problem in Botswana" (disagreement indicates a "positive" response), "in general, I think Batswana are afraid of getting AIDS" (agreement indicates a "positive" response), "most people my age have enough information about AIDS" (disagreement indicates a "positive" response), "most people my age know how to protect themselves against AIDS" (agreement indicates a "positive" response), "I am afraid of getting AIDS" (agreement indicates a "positive" response), "I am at risk of getting AIDS" (agreement indicates a "positive" response). Respondents were generally afraid of getting AIDS, averaging 1.2, with women significantly more afraid of contracting the disease than men. Respondents did not perceive themselves at risk of getting AIDS (averaging 2.8).

Full findings for the attitudinal items are found in Table C3, Annex C

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Focus Group Discussions

Attitudes about condoms were solicited from focus group respondents. We asked respondents whether they felt there were pressures on young people to not use condoms. Respondents in the focus groups identified social and peer pressures to not use condoms. Males stated that men do not use condoms because women did not like condoms, condoms can remain inside the women after sex, and condoms make sex less enjoyable. Females stated that the reason they did not use condoms was because their male partners did not like using condoms. Females also stated that using condoms puts stress on a relationship, as it shows lack of trust in a relationship. Females also stated that condoms can remain inside the woman after sex, and this was a reason for non-use of condoms. Both male and female groups mentioned that some men cut off the tip of the condom, making the condom ineffective as protection against HIV. Several of the groups stated that they did not like using condoms because they did not like the smell of the condoms. Although all the groups felt that condoms should be promoted for use with all partners, they also believed that asking partners to use condoms was a sign of distrust of their partners.

Focus group findings are presented in Annex D.

Availability of Condoms

We investigated where respondents usually get their condoms. Results are presented in Table 3:

Table 3
Where Respondent Get Condoms %

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages male (%M), female (%F), total (%T)	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
Where Respondent gets Condoms															
Clinic	78.2	76.1	77.3	90.7	70.1	80.8	85.5	82.1	83.9	88.8	91.1	89.6	87.8	88.0	87.9
Chemist	16.1	19.4	17.4	6.7	26.9	16.4	13.3	17.9	15.4	9.2	8.9	9.1	7.8	6.7	7.3
Friends	5.7	3.0	4.6	1.3	1.5	1.4	1.2	na	0.6	2.0	na	1.3	4.4	5.3	4.8

In all the study locations, the majority of respondents (77-90%) stated clinics as their primary source for condoms. The chemist was rarely reported as a primary source for condoms, with the highest percentage being recorded in Lobatse (17%). The variable was also investigated to determine age variation. In Serowe/Palapye, Kweneng, Chobe, and Gantsi, younger respondents (18-20) were more likely to state clinics as their primary source for condoms than older respondents (21-25). In Lobatse the trend was reversed. However, in Lobatse, Serowe/Palapye, Kweneng, and Chobe, statistical tests were invalid, as the number of respondents obtaining condoms from friends was too small. In Gantsi, the difference was not significant (p=.27083)

Reported Condom Use

We asked respondents if they had ever used a condom, and if they had used condoms during the most recent sexual intercourse with a regular and a casual partner. Results are presented in Table 4:

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Table 4
Ever Use of Condoms, Use of Condoms During Most Recent Sexual Intercourse (%)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages: male female total	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
% ever use of condoms	75.6	63.3	68.6	67.0	60.5	63.7	68.6	60.5	64.3	84.0	55.8	70.2	75.4	66.4	71.0
% using condoms during last sexual event	47.1	29.2	38.4	49.1	43.0	46.0	50.8	34.7	42.3	47.8	25.0	36.4	54.9	43.4	49.3
% using condoms during last sexual event with casual	64.6	68.4	65.6	80.5	65.4	74.5	67.4	[illegible]	65.2	42.9	19.2	31.2	66.7	73.9	68.7
% using condoms during last sexual event with regular	55.1	26.8	37.7	32.3	25.0	30.0	69.0	40.2	49.1	36.3	21.7	30.0	66.0	42.9	51.8

64 to 71% of respondents had used condoms, with males being more likely to have ever used a condom than females. The gender difference was significant in Lobatse and Chobe (p=.08434 and .00000). We also investigated whether ever use of condoms varied with the respondents' age. Older respondents (21-25) were more likely to have ever used a condom, although the age difference was significant in only two locations (p=.11697, .01109, .03301, .13473, .79820 in Lobatse, Serowe/Palapye, Kweneng, Chobe and Gantsi, respectively).

Between 47 and 55% of all males reported that they used a condom during the last sexual event, compared to approximately 25-43% for female respondents. Males were significantly more likely than females to use condoms in Lobatse, Kweneng,Chobe and Gantsi (=.00078, .01766, .00028 and .07017, respectively). In Serowe/Palapye the difference in condom use during the most recent sexual event of sexual intercourse was not significantly different between men and women (p=.35202). Condom use during the most recent sexual intercourse did not vary significantly with age in any of the study locations (p=.94038, .13236, .25768, .52247, and .76081 in Lobatse, Serowe/Palapye, Kweneng, Chobe, and Gantsi, respectively).

Reported condom use during last intercourse with a casual partner was significantly higher than condom use during last intercourse with a serious partner. For males, the use of condoms with serious partners did not vary greatly with condom use with casual partners, except in Serowe/Palapye, where condom use with serious partners was much lower than with casual partners. For females, condom use during the last sexual event with a regular partner was much lower than use with a casual partner.

Condom use during the most recent sexual event with a serious partner did not vary significantly with age in Lobatse, Serowe/Palapye, Chobe, and Gantsi (p=.81730, .15175, .27372, and .46539, respectively). In Kweneng, younger respondents (aged 18-20) were more likely to report use with a serious partner than older respondents (21-25) (p=.06912). Similarly, condom use during the most recent sexual event with a casual partner did not vary with age in Lobatse, Kweneng, Chobe, and Gantsi (p=.12252, .48596, .68491, and .67334, respectively). In Serowe/Palapye, older respondents were significantly more likely to use a condom during the most recent event of sexual intercourse with a casual partner (p=.05427).

We asked respondents how often, in general, they used condoms with both serious and casual partners:

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Table 5
Frequency of Condom Use (%)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages male female, total	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
Frequency of Condom Use															
Serious Partners															
always almost always	43.2	29.2	35.7	23.3	42.9	34.5	41.6	26.2	32.8	22.1	22.7	22.4	33.9	22.8	27.4
about half the time	23.0	18.0	20.3	33.3	18.2	24.7	26.2	25.6	25.8	48.1	12.4	28.5	11.3	27.2	20.6
hardly ever never	33.8	52.8	44.0	43.3	39.0	40.8	32.8	46.7	41.3	29.9	64.9	49.1	54.8	50.0	52.0
Casual Partners															
always almost always	60.5	54.5	58.5	59.2	71.7	63.2	63.9	54.5	60.8	50.0	43.1	47.6	63.6	39.0	56.0
about half the time	28.4	15.9	24.1	22.4	7.9	17.4	18.1	15.2	17.1	34.0	13.7	27.1	14.8	29.3	19.3
hardly ever never	11.1	29.5	17.4	18.4	21.1	19.3	18.1	30.3	22.1	16.0	43.1	25.3	21.6	31.7	24.7

In all locations males were more likely to use condoms "always/almost always" with both serious partners and casual partners than females. There was a higher percentage of females reporting use "about half the time" or "hardly ever/never". With serious partners, males were significantly more likely to use condoms "always/almost always" than females in Lobatse, Serowe/Palapye, Chobe and Gantsi (p=.04541, .02849, .00000, and .03872, respectively). In Kweneng, the difference between males and females was not significant (p=.15317). The same relationship was seen with reported condom use with casual partners. The gender difference was significant in Lobatse (p=.02147), Chobe (p=.00049), and Gantsi (p=.02564), but not in Serowe/Palapye and Kweneng (p=.15181, and .35257, respectively).

We investigated the effect of age on the frequency of condom use with serious and casual partners. In Lobatse, Kweneng, Chobe, and Gantsi, younger respondents (18-20) were significantly more likely to use condoms with serious partners 'always/almost always' than older repondents (21-25) (p=.04641, .01858, .01675, and .00121, respectively). In Serowe/Palapye, the trend was the same, but the difference was not statistically significant (p=.47265).

A similar relationship was observed for condom use with casual partners in Kweneng (p=.02443), with younger respondents (18-20) significantly more likely to use condoms 'always/almost always' than older respondents (21-25). In Lobatse (p=.55652), Serowe/Palapye (p=.94385), Chobe (p=.58032), and Gantsi (p=.19136), the relationship did not hold, e.g. younger respondents were not more likely to report a greater frequency of condom use than ~~younger~~ older respondents.

We asked respondents whether they believed that they use condoms more now (at the time of the interview) than they did a year ago. Results are presented in Table 6 as a mean, on a four-point scale, with 1 representing strong agreement with the statement, and 4 representing strong disagreement with the statement.

Table 6
Use of Condoms More Now Than One Year Ago (Means)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Means male female total	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T	m-M	m-F	m-T
I use condoms more now than I did one year ago															
Age															
18-20	2.6	2.6	2.6	2.6	1.8	2.3	3.0	2.5	2.7	2.5	2.9	2.7	2.7	2.6	2.6
21-25	2.5	2.6	2.6	2.5	2.6	2.3	2.7	2.4	2.6	2.4	2.8	2.7	2.6	2.6	2.6

Respondents did not feel that they were using condoms more now than than they had a year ago. The exception was females from Serowe/Palapye, who were in agreement with the statement. Other age and gender groups were in slight disagreement with the statement.

Reasons for Use and Non-Use of Condoms

We also asked those interviewees who used condoms the reasons why they used them. Results are indicated in Table 7:

Table 7
Reasons for Using and Not Using Condoms (%)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages male (%M), female (%F), total (%T)	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
Reasons Why Respondent USES Condoms															
Protect myself from AIDS	87.1	63.2	77.8	95.9	95.2	95.6	89.9	83.9	87.1	78.8	87.0	81.6	98.9	91.0	95.6
Protect myself from STDs	96.5	80.3	89.3	94.6	92.1	93.4	97.5	91.9	94.9	98.0	94.2	96.8	98.9	86.6	93.8
Prevent pregnancy	58.8	71.8	64.6	83.8	50.8	68.4	75.9	67.7	72.2	42.4	74.1	53.3	77.8	61.2	70.9
Reasons Why Respondent DOES NOT USE Condoms															
I trust my partner	43.3	24.1	34.1	46.2	24.1	30.8	45.0	40.0	41.6	38.7	22.9	29.3	12.5	21.2	20.0
I have one regular partner	13.3	24.1	18.5	15.4	6.9	9.5	5.0	17.5	13.6	19.4	22.9	21.5	12.5	17.3	16.6
Do not like condoms do not believe they are effective	10.0	10.3	10.2	23.1	31.0	28.6	15.0	25.0	21.8	22.6	14.6	17.8	25.0	13.5	15.1
My partner refuses	na	24.1	11.6	23.1	24.1	23.8	na	na	na	9.7	27.1	20.1	na	32.7	28.2
I am using another contraceptive	na	na	na	na	3.4	2.4	na	20.0	13.7	na	39.6	29.3	na	na	na

The overwhelming majority (between 78% and 97%) reported using condoms in order to protect themselves from AIDS and STDs whilst another 53 to 72% reported using condoms as contraceptives. We also investigated the reasons why some respondents did not use condoms. The major reason for non-use cited was "I trust my partner", with responses ranging from about 42% in Kweneng to 20% in Gantsi. "I only have one regular partner" was rarely given as a reason for non-use, with Chobe recording 21.5%. Respondents' dislike of condoms was a less frequent response. Partner refusal was stated by about 25% of female respondents.

Preferred Condom Characteristics

We asked respondent what characteristics a condom should have to make it good. Results are reported in Table 8:

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Table 8
Characteristics of a Condom That Would Make it Good (%)

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages male (%M), female (%F) total (%T)	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%	M%	F%	T%
What Respondent Recorded as characteristics of a condom that would make it good															
well/attractively packaged	5.7	9.2	7.5	25.3	3.1	15.6	19.8	7.9	13.4	7.8	16.7	12.2	24.0	na	12.7
Strong	43.7	36.7	40.1	37.9	36.9	37.5	40.0	31.5	36.8	43.1	32.4	37.9	48.0	22.8	41.5
smells nice	11.8	37.8	25.1	33.3	20.0	27.5	28.0	27.0	28.0	10.8	42.2	28.2	25.0	7.6	16.8
sensitive	5.7	4.1	4.9	41.4	1.5	24.0	21.6	4.5	12.6	9.8	2.0	6.0	38.0	2.2	21.2
nothing	44.8	6.1	24.7	1.1	32.3	14.7	27.3	15.7	21.2	28.4	8.9	16.4	28.0	43.7	34.7
lubricated	1.1	11.2	6.4	25.3	23.1	24.3	18.2	16.9	17.5	7.8	6.9	7.4	25.0	19.6	22.5
donot know	na	34.7	18.0	36.8	15.4	27.5	12.5	31.5	22.4	12.7	38.2	25.2	11.0	25.0	17.6

Approximately 40% cited condom "strength" as a positive attribute. A condom that has a "nice smell" was also seen as an important characteristic, being cited by over 25% of the respondents (except in Gantsi where the response rate reached only 17%). There was also a large percentage who responded that there is no characteristic of a condom that would make it good, ranging from from a high of 35% in Gantsi to a low of 15% in Serowe/Palapye. Sensitive and lubricated condoms were two other characteristics mentioned in connection with a good condom.

Discussion

A brief summary of the findings is presented here. As the study was descriptive, it will be used to monitor PSI's condom social marketing programme in the future

Knowledge: Knowledge of preventive practices was high. Of particular interest to the condom social marketing programme, 78-93% of respondents were able to cite condom use with any sexual partner as a method of prevention against contracting the AIDS virus (Table 1). Approximately 93% of respondents could correctly identify that "condoms can prevent AIDS" (Table C2).

Attitudes: Attitudes about condom use were "positive" averaging three on a four-point scale. Females had more positive attitudes about condom use than did men. Attitudes about obtaining condoms were also positive, averaging 3 on a four-point scale. Respondents were moderately concerned about getting AIDS, averaging 2.8 on the four-point scale (Table 2 and Table C3)

Availability of Condoms: The overwhelming majority of respondents got their condoms from clinics or health facilities.

Reported Condom Use: Males generally reported higher use of condoms ever and during the last event of sexual intercourse, than did females. The main reasons cited for using condoms was for the prevention of AIDS and STDs, and to prevent pregnancy. The most common reasons for non-use of condoms was "I trust my partner". Approximately 20% of respondents stated that they did not like condoms or did not think that they are effective. Partner refusal was a common response amongst women interviewed (Tables 4, 5, 6, and 7).

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Annex A
Quantitative Questionnaire

Questionnaire Number _____

MONITORING TRENDS IN YOUTH SEXUAL BEHAVIOUR - Confidential

Prepared and Administered by SIAPAC-Africa for the AIDS and STD Unit
March 1993

Enumerator Self Check. (field), print initials: _____
Field Supervisor Check. (field), print initials: _____
Field Supervisor Ck. (office), print initials: _____
Date Questionnaire Entered, print initials: _____
Date Questionnaire Verified, print initials: _____

Information for repeat visit, if necessary. Try to schedule visit.

Number of repeat visits _____

Date of scheduled visit: _____

Time: _____

Location / plot number: _____

_____

_____

Village Code _____

Enumerator Code _____

Date _____

Start Time _____ Finish Time _____ Total Time _____

==========

[Enumerators: **This survey is to be administered to males and females aged 18-25 only.**]

This is a survey on **health behaviour** and youth. It is a study being undertaken on behalf of the Ministry of Health AIDS and STD Unit. Some of the information requested is quite personal. Please answer the questions honestly and remember that the information is entirely confidential. We are not recording your name, and there will be no way to link your responses to you. Your responses will be reported only as aggregate data with other young people from this village / town. Your help is very much appreciated and will help the Unit develop better programmes for young people like you.

Demographic Information

1) Age _____

2) Sex
1 male
2 female

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3) *Go tswa ka 1990 motse / toropo o nseng mo go one thata ke ofe?*
In what village or town have you spent most of your time since 1990?
____-1 this same rural location
____-2 this same urban location
____-3 a rural area other than the one currently living in
____-4 an urban area other than the one currently living in
____-5 outside Botswana
____-## other _____

4) *O na le dingwaga tse kae o nna mono?*
How many years have you been living here (in this village/town)? [Enumerator: round up at 6 months, e.g. 1 year 5 months = 1 year, 1 year 6 months = 2 years]

5) *O tsene sekolo go ema fa kae?*
Highest formal education level
____-1 no education
____-2 Primary (stds 1-7 including PSLE)
____-3 Junior Secondary (Forms 1-2 including JC pass)
____-4 Senior Secondary (Forms 3-5 including O-level)
____-5 Post secondary (> O-level)
____-# other _____

6) *Ke mang yo o neng e le tlhogo ya lelwapa fa o gola?*
Who was the head of the household when you were growing up? [Enumerator: PROBE. Household where they spent most of their time during their teen years. If male, probe to determine if he was present > 6 months of each year. If not, household is female headed.]
____-1 male
____-2 female

7) *Tlhogo ya lelwapa e tsene sekole go ema fa kae?*
Highest educational level of head of household?
____-1 no education
____-2 Primary (stds 1-7 including PSLE)
____-3 Junior Secondary (Forms 1-2 including JC pass)
____-4 Senior Secondary (Forms 3-5 including O-level)
____-5 Post Secondary (> O-level)
____-6 Don't know
____-# Other _____

8) [Urban and Rural] *A go nale mongwe mo lwapeng yo o nang le dikgomo?*
Does anyone in your household own any cattle?
____-1 yes [go to 8a]
____-2 no [skip to 9]
____-3 don't know [skip to 9]

8a) *A di masome mabedi kgotsa ko tlase kgotsa go feta?*
Do they own twenty or less cattle, or more than twenty cattle?
____-1 ≤20
____-2 >20
____-3 don't know

9) *Tiro ya gago ke eng?*
What is your usual occupation?
____-1 employed - skilled
____-2 employed - semi-skilled
____-3 employed - unskilled
____-4 employed - professional
____-5 employed - temporary/piece work
____-6 unemployed/seeking work
____-7 working at home/agriculture
____-8 student
____-## other _____

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Lifetime Sexual Relationships

Dipotso tse di latelang ke tse di mabapi le ditirisanyo mmogo tsa lorato mo nakong ya gompieno le ee fitileng. Dikakgelo tsa gago ga di na go itsiswe ope wa masika. ditsala kgotsa batho ba o dirisanang nabo
The next set of questions deal with past and present relationships. Please remember that your answers will not be shared with anyone else. Your responses will **not** be reported back to any of your family, friends or partners

10) *A o tserwe / tsere?*
What is your marital status?
____-1 single
____-2 cohabitating / living in communion [skip to 12ai]
____-3 married [skip to 12ai]
____-# other _____

11) *A o kile wa tlhakanela dikobo le mongwe?*
Have you ever had sexual intercourse?
____-1 yes
____-2 no [skip to 30]

12) *A o kile wa dirisanya le mongwe yo o tsayang gore ke wa nnete?*
Have you ever had a regular sex partner? By regular sexual partner, I mean someone you dated regularly or considered your steady boyfriend / girlfriend and had sexual relations with.
____-1 yes
____-2 no [skip to 13]

12a) *A o na le mongwe wa go nna jalo gompieno?*
Do you have a regular sexual partner now?
____-1 yes
____-2 no [skip to 13]

12ai) *Le na le lobaka le le kae le le mmogo?*
How long have you been together? [Record months and years here: _____ years and _____ months. Supervisor: code as months]

13) *O ne o le dingwaga di le kae fa o simolola go tlhakanela dikobo?*
Think back to the first time you had sexual intercourse. How old were you then? [Enumerator: record age or respondent's estimate] _____

14) *Mo botshelong jwa gago jotlhe o tlhakanetse dikobo le batho ba le kae?*
How many different people have you had sex with in your whole life? [Probe for estimate] _____

15) *Go nale mekgwa mengwe ya go tlhakanela dikobo ee sa tlwaelesegang, jaaka go tlhakanela dikobo mme batho ba dira mo maragong. A wena o kile wa dira jalo?*
Some kinds of sexual behaviour are not normally talked about, like anal intercourse. [Enumerator: remind respondent that answers will be confidential]
Have you ever engaged in anal intercourse?
____-1 yes
____-2 no

15a) *A e ne ele le monna kgotsa mosadi?*
Was this with a woman or a man?
____-1 woman
____-2 man

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16) *A o kile wa tlhakanela dikobo le mongwe yo o neng a go kopa madi kgotsa dimpho?*
Have you ever had sex with someone who asked for gifts / money in return for sex?
____-1 yes
____-2 no

17) *A o kile wa tlhakanela dikobo le mongwe yo o neng a go fa madi kgotsa dimpho?*
Have you ever had sex with someone who gave you gifts / money in return for sex?
____-1 yes
____-2 no

Current Sexual Relationships and Condom Use

Ke tla kopa gore o ikgakolole ditiragalo tsa ngwaga o o fetileng go simolola ka Mopitlo / Moranang 1992.
Now I would like you to recall events of the past year, since March/April1992.

18) *A o kile wa tlhakanela dikobo mo lobakeng lwa dikgwedi tse di lesome le bobedi tse di fetileng?*
Have you had sexual intercourse in the past year?
____-1 yes [go to 18a]
____-2 no [skip to 19]

18a) *O tlhakanetse dikobo le batho ba le kae ba ba farologanyeng mo lobakeng la ngwaga o o fetileng?* [Enumerator: Include regular partner, too]
How many different people have you had sex with in the past year?
_____

18b) *Mo bathong bao ke ba le kae ba o ka ba tsayang gore e ne ele ba nakwana ?*
Of those different people, how many would you say were casual partners? By casual, I mean one with whom you did not or will not have a serious relationship with. _____

19) [For married respondents and those with "regular" sexual partners now]
A o akanya gore Monna, mosadi kgotsa tsala ya gago e kile ya tlhakanela dikobo le mongwe/ bangwe mo dikweding tse di lesome le bobedi tse di fetileng?
Do you think your spouse / current partner has had any other sex partners (casual or otherwise) in the past year?
____-1 no, no other partner [skip to 20]
____-2 yes [go to 19a]
____-3 don't know but think so [go to 19a]
____-4 don't know [skip to 20]

19a) *O akanya gore o ka tswa a tlhakanetse dikobo le bale kae mo di kgweding tse di lesome le bobedi tse di fetileng?*
How many sex partners do you think he / she has had in the past year?
_____

20) *Ikgakolole nako ya bofelo o tlhakanela dikobo le mongwe, a e ne ele le motho wa nakwana kana wa nnete.*
Recall the last time you had sex. Was this with a casual or serious partner?
____-1 casual partner [skip to 22]
____-2 serious partner [go to 21]

21) *A nako eo sekausu sene sa dirisiwa?*
Was a condom used this last time?
____-1 yes
____-2 no
____-3 can't remember

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21a) *A labofelo fa o tlhakanela dikobo le motho yo o mo tsayang gore ke wa nakwana a lo ne la dirisa sekausu?*
Recall the last time you had sex with a casual partner Was a condom used?
____-1 yes
____-2 no
____-3 don't know, don't remember
____-4 no casual partners in the past year

[Enumerator: skip now to 23]

22) *A nako eo sekausu sene sa dirisiwa?*
Was a condom used this last time?
____-1 yes
____-2 no
____-3 can't remember

22a) *Ikgakolole la bofelo o tihakanela dikobo le motho wa gago wa nnete. A sekausu sene sa dirisiwa?*
Recall the last time you had sex with a serious partner . Was a condom used?
____-1 yes
____-2 no
____-3 don't know, don't remember
____-4 no serious partners in the past year

23] *Ka kakaretso o dirisa sekausu makgetho a le kae le batho ba nakwana?*
How often, in general, do you use condoms with casual partners? [Tick only one] [Probe]
____-1 always/almost always
____-2 about half the time
____-3 hardly ever/never
____-4 no casual partner

24) *Ka kakaretso o dirisa dikausu makgetho a le kae le motho wa gago wa nnete?*
How often, in general, do you use condoms with your serious partner? [Tick only one] [Probe]
____-1 always/almost always
____-2 about half the time
____-3 hardly ever/never
____-4 no serious partner

25) [Ask only if respondent indicates no condom use in 21 and/or 21a and 22 and/or22a]
A o kile wa dirisa sekausu mo botshelong jwa gago?
Have you ever used a condom in your life?
____-yes
____- no [skip to 27]

26) [If yes to in 21 and /or 21a and 22 and /or 22a]
Dikausu gantsi o di tsaya kae?
Where do you usally get condoms ?
____-1 clinic/hospital/health facility
____-2 chemist
____-3 friends
____-# other _____

27) [Enumerator: ask if respondent does not always/almost always use condoms with both regular and casual partners]
Ke ka goreng o sa dirise dikausu?
Why don't you use condoms? [Tick up to 3 responses]
____-1 I trust my partner
____-2 only have regular partner, so no need for condoms
____-3 condoms physically hurt my partner
____-4 condoms make sex less enjoyable
____-5 I am using another contraceptive
____-6 condoms can remain in female genitals
____-7 condoms cause rash on genitals
____-8 I don't know how to use condoms
____-9 condoms not always available
____-## Other _____

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28) [Enumerator: ask if respondent uses condoms]
Ke ka goreng o dirisa dikausu?
Why do you use condoms? [Tick up to 3 responses]
___-1 to protect myself/us from AIDS
___-2 to protect myself/us from STDs
___-3 to stay healthy
___-4 I have many partners
___-5 to prevent pregnancy
___-# other _____

_____

29) *Fa re re dikausu ke tse di siameng re a bo re lebile eng mo go tsone?*
What are the characteristics of a condom that would make it good? [Tick up to 3 responses]
___-1 well packaged/attractively packaged
___-2 strong
___-3 sensitive
___-4 inexpensive
___-5 commercially well known brand
___-6 smells nice
___-7 lubricated
___-8 colour I like (specify) _____
___-9 nothing
___-## other _____

Attitudes Toward Condoms

State your level of agreement or disagreement with the statement 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree, DK=don't know

Agree Disagree

30) *Dikausu di motlhofo go dirisiwa*
Condoms are easy to use — 1 2 3 4 DK

31) *Dikausu di dira gore tlhakanelo dikobo e seka ya kgotsofatsa?*
Condoms make sex less enjoyable — 1 2 3 4 DK

32) *Gompieno ke dirisa dikausu thata go feta ngwaga o o fetileng?*
I use condoms more now than I did a year ago (if condom use for 21 or 22 or 25) — 1 2 3 4 DK

33) *Ke ka tlhabiwa ke ditlhong go reka dikausu*
I would be embarrassed to buy condoms — 1 2 3 4 DK

34) *Ke ka tlhabiwa ke ditlhong go tsaya dikausu mo kokelwaneng*
I would be embarrassed to get condoms from a clinic — 1 2 3 4 DK

35) *Ke bona go le botoka gore dikausu di abiwe ke monna / mosadi jaaka nna*
I would prefer to have condoms distributed by a person of the same sex as myself — 1 2 3 4 DK

36) *Ke ka tlhabiwa ke ditlhong go kopa motho yo ke tlhakanelang nae dikobo gore a dirise / kana ke dirise sekausu*
I would be embarrassed to ask a sex partner to use a condom / if I could use a condom — 1 2 3 4 DK

37) [For men] *Ke ka tlhabiwa ke ditlhong fa mosadi a ka nkopa gore ke dirise sekausu pele ga ke tlhakanela dikobo nae*
I would be embarrassed if a woman asked me to use a condom before having sex with her — 1 2 3 4 DK

38) *Dikausu di tshwanetse go dirisiwa ke banyalane kgotsa baratani ba nnete*
Condoms should be used with regular partners / spouses — 1 2 3 4 DK

39) *Ga go tlhokafale godirisa dikausu le fa ele le motho wa nakwana?*
There is no need to use condoms, even with casual partners — 1 2 3 4 DK

40) *Ke akanya gore batho ba ba tsamayang ba tshotse dikausu ba matlho matlho*

41) *Ke tshwaneio ya banna go tsamaya ba tshotse dikausu nako tsotlhe*
It is always the man's responsibility to carry condoms — 1 2 3 4 DK

42) *Basadi le bone ba tshwanetse go tshola dikausu?*
Women should also carry condoms — 1 2 3 4 DK

Symptoms / Experience of STDs

[Enumerator: This section is for men only]

43) *Mo ngwageng o o fetileng a o kile wa lemoga sengwe se se sa tlwaelesegang se tswa mo bonneng jwa gago mme se tsaya malatsinyana?*
In the last year have you noticed any unusual discharge from your penis that lasted a few days?
____ 1-yes
____ 2-no [skip to 44]

43a) *Fa go ntse jalo go diragetse ga kae mo ngwageng o o fetileng?*
If yes, how many different times did this happen in the last year? _____
[Enumerator: record number of times]

44) *Mo ngwageng o o fetileng a o kile wa nna le diso mo bonneng kgotsa mo maragong*
In the last year, have you had any sores on your genital or anal areas?
____ 1- yes
____ 2- no [skip to 46]

44a) *Fa go ntse jalo go diragetse ga kae mo ngwageng o o fetileng?*
If yes, how many different times did this occur in the last year?
[Enumerator: if no, record 0]

45) [Enum: If yes to 43 or 44]
O akanya gore o bo tsere kae?
Who do you think you got the infection from? [Tick only one response]
__- 1 regular partner
__- 2 someone you met in a bar/disco
__- 3 someone you met at a party
__- 4 someone your met at school/ college
__- 5 Don't know
__-# Other _____

Knowledge About AIDS

46) *Batho ba ka dira jang go itshireletsa mo megareng e e bakang AIDS?*
[Enumerator: Probe and tick as many as stated. Write down verbatim, when in doubt of how to code]
How can people protect themselves from getting the AIDS virus?
[Enumerator: Probe and tick up to 5 responses. Write down verbatim, when in doubt of how to code]

____-01 use a condom with casual partner
____-02 use a condom with any partner
____-03 abstain from sex
____-04 go to the doctor (western doctor)
____-05 go to a traditional doctor
____-06 have sex less frequently
____-07 have sex only with a spouse or regular partner
____-08 reduce the number of partners
____-09 stick to one partner
____-10 use a contraceptive (other than a condom)
____-## Other _____
____-## Other _____

I am going to read some statements about AIDS. Tell me if you think the statements are true or false or if you don't know. [Enumerator: 1=true, 2=false, DK=Don't know]

	True	False	
47) *Megare ya AIDS e ka anamisiwa ke menang kgotsa ditshidinyana tse dingwe* The AIDS virus can be transmitted by mosquitos or other insects	1	2	DK
48) *Megare ya AIDS e ka anamisiwa ka go tlhakanela dikobo* The AIDS virus can be transmitted sexually	1	2	DK
49) *Motho o ka tsenwa ke megare ya AIDS fa a tlhakanela dijo kgotsa diana le motho yo o nang le AIDS* A person can get the AIDS virus by sharing food or cups with a person who has AIDS	1	2	DK
50) *Motho o ka tsenwa ke bolwetse jwa AIDS fa a bereka / a tsena sekole le monwe yo onang le megare ya AIDS?* A person can get AIDS by working or going to school with someone who has the AIDS virus	1	2	DK
51) *Motho o ka tsenwa ke bolwetse jwa AIDS ka go tshwara motho yo o nang le megare AIDS ka letsogo* A person can get AIDS from holding hands with someone who has the AIDS virus	1	2	DK
52) *AIDS e ka alafiwa ka melemo le dipilisi tsa sekgoa* AIDS can easily be cured with medicines / tablets	1	2	DK
53) *Basadi ba ka dirsa dipilisi tsa boiphemelo go ikganela AIDS* Women can use birth control pills to protect themselves against AIDS	1	2	DK
54) *Motho yo o nang le megare ya AIDS o ka lebega a itekanetse* Someone with the AIDS virus can look healthy	1	2	DK
55) *Dikausu di ka thibela megare ya AIDS go anamisiwa* Condoms can prevent the AIDS virus from being transmitted	1	2	DK
56) *Basadi ba ba nang le megare ya AIDS ba ka bo tshela masea a bone ka nako ya fa ba imile* Mothers with the AIDS virus can pass the disease to their babies during pregnancy	1	2	DK

Attitudes About AIDS and People With AIDS

State your level of agreement or disagreement with the statement 1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree, DK=don't know

	Agree		Disagree		
57) *AIDS ga se mathata a matona a botsogo mo Botswana* AIDS is not a serious health problem in Botswana	1	2	3	4	DK
58) *Ka kakaretso ke akanya gore Batswana ba tshaba AIDS* In general, I think Batswana are afraid of AIDS	1	2	3	4	DK
59) *Bontsi jwa batho ba dingwaga tsa me ba na le kitso e e lekaneng ka bolwetse jwa AIDS* Most people my age have enough information about AIDS	1	2	3	4	DK
60) *Ke tla nna ke nna tsala le motho le fa ke itse gore o nale AIDS/ kgotsa megare ya AIDS* I would still be friends with someone even if I learned that they had the AIDS/AIDS virus	1	2	3	4	DK
61) *Nka tlhokomela mongwe wa losika fa a nale bolwetsi jwa AIDS* I would take care of a family member with AIDS	1	2	3	4	DK
62) *Bontsi jwa batho ba dingwaga tsa me ba itse go itshireletsa mo bolwetseng jwa AIDS* Most people my age know how to protect themselves against AIDS	1	2	3	4	DK

63)	*Batho ba ba nang le megare ya AIDS ba otlhaelwa go nna botlhaswa mo tlhakanelo dokobo* People with the AIDS virus are being punished for being sexually promiscuous	1 2 3 4 DK
64)	*Ke tshaba go tsenwa ke AIDS* I am afraid of getting AIDS	1 2 3 4 DK
65)	*Ke mo diphatseng tsa go tsenwa ke AIDS* I am at risk of getting AIDS	1 2 3 4 DK
66)	*Batho ba ba nang le megare ya AIDS ba tshwanetse go tshela ka tshosologo mo setshabeng* People with the AIDS virus should live normally in the community	1 2 3 4 DK
67)	*Batho ba ba nang le megare ya AIDS ba tshwanetse go tswelela ka tiro* People with the AIDS virus should be allowed to continue working	1 2 3 4 DK

68) *A o kile wa itse mongwe yo o nang le megare ya AIDS?*
Have you ever personally known anyone with the AIDS virus? _____
____-1 yes
____-2 no

69) *Ba tshwanetse go fiwa kemo-nokeng ya mofuta mang?*
What kind of support if any should be given to people with AIDS /the AIDS virus? [tick only one] _____
____-1 financial
____-2 psychological
____-3 nursing care
____-4 help in carrying out day to day tasks
____-5 No support for people with AIDS/ the AIDS virus [skip to 70]
____-# other _____

69a) *Ke mang yo o tshwanetseng go ba ema nokeng?*
Who should give that support? [tick up to 3 responses]
____-1 family _____
____-2 government _____
____-3 church _____
____-4 NGO's
____-5 friends
____-6 Community
____-# Other _____

70) *Kitso ka ga AIDS kgotsa kaga megare ya AIDS gantsi o e tsaya kae?*
[Enumerator: rank 1-4]
Where do you get most of your information about AIDS virus? [Enumerator: rank 1-4]
____-01 friends 1_____
____-02 parents 2_____
____-03 doctor / nurse / family welfare educator 3_____
____-04 older relatives 4_____
____-05 younger relatives
____-06 radio
____-07 books / magazines / newspapers
____-08 school
____-09 church
____-10 pamphlets / brochures / handouts
____-11 posters / billboards
____-12 T V
____-## other _____

71) *Ke kae / ke ko go mang kwa o tsayang tshedimosetso e e ikanyeçang ka bolwetse jwa AIDS?* [Rank 1 to 4]
Where / who do you think is the most reliable source for information about AIDS?

____-01 friends
____-02 parents
____-03 doctor / nurse / family welfare educator
____-04 older relatives
____-05 younger relatives
____-06 radio
____-07 books / magazines / newspapers
____-08 school
____-09 church
____-10 pamphlets / brochures / handouts
____-11 posters / billboards
____-12 T V
____-## other _____

1_____
2_____
3_____
4_____

End of interview. Thank the person for their cooperation. Leave the compound or area. Record finish time on front. Tick level of cooperation below. If there are any responses that you think are unreliable, write under "comments" which questions and why you think that they are unreliable.

72) Level of cooperation _____
____-1 high
____-2 medium
____-3 low

Comments

_____

_____

_____

Annex B
Focus Group Discussion Instrument

MONITORING TRENDS IN YOUTH SEXUAL BEHAVIOUR - Confidential

Prepared and Administered by SIAPAC-Africa for the National AIDS Control Programme
March 1993

Name of Interviewer _____

Village of Interview _____

Focus Group

____ 4-5 teenage females (aged 18-20)

____ 4-5 teenage males (aged 18-20)

____ 4-5 females (aged 21-25)

____ 4-5 males (aged 21-25)

Date and Length of Time of Discussion _____

[Interviewer: Inroduce study as a health study, with particular emphasis on the spread of sexually transmitted diseases. Ensure that it is clearly understood that issues discussed will be treated confidentially. Begin discussion with basic health topics. Discuss issues of quality of health care services, diseases spread by littering and bad water, and teenage pregnancy. This discussion should take no longer than 15 minutes.]

[Interviewer: Ensure that the group is now comfortable with yourself and the other group members. Move to a discussion of sexually transmitted diseases. Your goal is to facilitate a healthy debate, will all members of the group contributing. The objective is to facilitate and lead the debate, but not to stop people from talking. Another objective is to make people feel that they are free to say and discuss anything, even though you are leading the debate in certain directions.]

1) What methods of birth control are available that would prevent pregnancy?

   1a) Which of these could prevent the transmission of sexually transmitted diseases?

   1b) Which of these could specifically prevent the transmission of HIV infection / AIDS?

2) What pressures are there on yourselves and other women/men (depending on your group) your age to not use condoms?

   Probes males not wanting to use condoms females not wanting to use condoms peer pressure think that a relationship should be built on trust and love and condoms interfere with these must show that a woman is ertile religion females believe that men are not using condoms properly (e.g. making a hole or cutting off end of condom) so what is the point

3) Are relationships between men and women changing these days making for shorter relationships and more sexual partners?

   Probes men / women do not respect women / men enough so many males leave for other locations peer pressure on men require them to not 'stick to one partner' more women / men in full time professional employment creating new challenges and stresses on a relationship financial difficulty of women resulting in prostitution

4) If you worked for the National AIDS /STD Unit what message would you want to develop that would reach people of your own age to help prevent AIDS?

   Probes effectiveness fo 'stick to one partner' what is a 'casual' partner what is the attitude towards condom use both for long-term partners and short-term sexual relationships

ANNEX C

Table C1
Respondents Indicating Two or More Correct Responses to How People Can Protect Themselves Against Getting AIDS

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Percentages male, female, total	M/F	F/F	T/F	M/F	F/F	T/F	M/F	F/F	T/F	M/F	F/F	T/F	M/F	F/F	T/F
% of Respondents Indicating ≥ Two Correct Responses	73.6	98.3	85.6	86.6	71.1	78.6	86.4	86.8	86.6	90.8	90.0	90.4	88.5	77.9	83.3
Location															
Urban	71.3	98.8	84.2	83.3	100	91.0	90.9	94.1	92.4	91.4	86.2	89.1	93.3	87.5	90.4
Rural	79.4	97.4	88.9	87.0	67.6	77.1	85.4	85.6	85.5	90.5	90.9	90.7	87.7	76.0	82.0
Respondent's Education															
no formal education	57.1	100	62.3	60.0	45.5	49.9	61.1	75.0	63.8	0.0	33.3	33.3	70.0	36.4	52.7
primary	64.3	100	82.6	68.4	58.1	63.7	91.3	82.6	85.3	86.0	84.6	85.2	83.3	79.3	80.9
junior secondary	88.9	98.1	94.4	97.4	76.7	86.3	88.9	89.1	89.0	92.3	100	95.7	93.3	81.1	87.9
senior sec +	75.9	94.4	82.8	100	86.2	96.2	93.8	92.0	92.9	95.7	100	96.9	93.5	93.8	93.6
Occupational Status of Respondent															
skilled professional semi-skilled	68.7	100	76.0	88.9	90.9	90.0	82.6	92.3	86.3	92.5	88.5	91.2	89.7	87.5	89.2
unskilled temporary employment	76.5	100	87.6	75.0	71.4	73.8	92.9	78.6	85.4	87.5	94.1	90.2	100	66.7	81.6
unemployed seeking work	73.6	97.3	87.2	90.6	61.7	73.2	82.8	96.2	91.6	84.2	85.5	85.1	83.3	81.7	82.2
work in home agriculture	100	na	100	50.0	52.9	52.2	69.2	70.8	70.3	0.0	100	100	77.3	66.7	71.5
student	75.0	100	88.3	97.3	91.7	95.0	94.9	83.3	91.0	95.7	100	96.3	93.9	100	95.2

Table C2
Knowledge - % of Correct Responses

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Female, female, total	FM	F	FT	FM	F	FT	FM	F	FT	FM	F	FT	FM	F	FT
% Knowledge	71.5	68.4	70.0	61.3	67.5	64.5	69.3	70.3	70.0	60.0	60.1	60.1	63.0	62.5	62.2
Age															
18-19	73.5	72.0	72.7	64.3	74.3	69.3	69.8	69.2	69.5	64.4	58.2	61.0	56.7	60.7	64.4
20-21	70.0	65.6	67.8	60.0	64.8	62.6	74.3	72.0	73.2	70.3	55.4	64.5	60.4	63.5	66.0
22-23	63.4	66.1	65.0	70.7	60.0	65.3	67.0	67.1	67.0	64.0	67.0	65.7	53.3	61.8	59.7
24-25	82.4	66.1	75.0	44.7	60.0	53.0	62.8	70.0	67.1	67.0	55.8	61.7	60.0	62.4	61.2
Lived Since 1966															
Urban	76.8	71.6	74.4	67.5	72.0	69.6	77.3	77.1	77.2	61.7	58.5	60.0	61.1	59.9	60.5
Rural	57.9	61.9	59.9	60.6	66.5	63.6	67.5	69.2	68.4	79.7	61.4	71.6	81.3	78.1	79.7
Gender of HHH															
male	69.0	68.1	68.6	56.2	67.5	62.5	69.2	69.8	69.5	66.5	63.6	65.1	62.9	62.8	62.8
Female	79.0	68.9	72.6	67.3	67.6	67.4	69.7	71.0	70.5	68.1	54.8	59.9	65.7	62.3	63.7
Respondent's Education															
no formal education	70.0	66.3	68.1	26.0	33.0	31.3	38.3	57.5	42.1	na	33.3	33.3	47.3	35.0	41.3
primary	73.6	66.5	70.4	43.4	58.1	50.1	48.7	61.5	57.5	48.4	46.9	47.5	54.5	41.7	49.4
junior secondary	80.0	84.0	81.4	65.8	68.6	67.3	76.7	72.4	74.4	70.0	73.1	71.4	69.2	69.3	69.3
senior secondary +	85.5	83.3	83.3	83.5	84.0	80.2	91.3	84.8	88.3	93.5	87.0	91.6	86.9	91.0	89.6
Highest Education of Household Head															
no formal education	36.4	50.0	38.1	56.1	54.8	55.4	65.0	68.9	67.2	55.7	54.6	55.1	58.5	57.6	58.1
primary	60.5	56.7	58.6	64.6	75.4	69.2	70.9	72.8	71.6	75.5	65.2	70.3	70.0	67.3	68.6
junior secondary	82.8	72.2	76.5	90.0	71.4	75.5	85.0	80.0	83.2	72.5	76.7	74.2	71.1	90.0	72.9
senior secondary +	90.3	88.9	89.8	72.5	90.0	77.8	85.0	95.0	87.7	100	63.3	82.0	75.0	73.3	74.3
Occupational Status of Respondent															
skilled professional semi-skilled	67.5	70.0	66.1	58.9	75.4	68.1	73.0	84.6	77.4	69.2	57.3	65.4	75.2	67.5	73.6
unskilled temporary employment	62.4	70.0	66.0	54.3	54.3	54.3	59.3	71.4	65.6	47.5	65.3	54.7	55.0	47.1	51.5
unemployed seeking work	70.8	64.5	67.1	58.8	62.3	60.9	63.1	66.3	65.2	58.4	54.7	55.7	52.4	64.3	60.9
work in home agriculture	63.3	40.0	57.7	45.0	57.6	53.2	49.8	63.3	55.8	0.0	63.9	63.9	56.9	53.3	52.2
student	93.1	83.2	87.8	72.2	87.6	78.5	84.9	86.0	83.2	89.1	82.5	88.2	77.9	88.9	80.2

A lower mean number indicates agreement with the statement, while a higher one indicates disagreement with the statement.

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Mean (m): males, females, total	m M	m F	m T	m M	m F	m T	m M	m F	m T	m M	m F	m T	m M	m F	m T
AIDS is not a serious health problem in Botswana §	4.0	4.0	3.9	3.8	4.0	3.9 *	3.8	3.7	3.8	3.4	3.3	3.4 *	3.3	3.6	3.4 *
In general, I think Batswana are afraid of AIDS	1.8	2.1	1.9 *	1.6	1.8	1.7	1.9	1.8	1.9	1.9	1.7	1.8	1.6	2.1	1.8 *
Most people my age have enough information about AIDS	2.2	1.9	2.0 *	2.0	2.3	2.0	2.1	1.7	1.8 *	2.0	1.8	1.9 *	2.0	2.2	2.1
Most people my age know how to protect themselves against AIDS	2.2	2.1	2.2	1.9	2.1	2.0	2.1	2.1	2.1	2.2	2.2	2.2	2.0	2.2	2.1
I am afraid of getting AIDS §	1.3	1.1	1.2 *	1.1	1.0	1.0 *	1.2	1.2	1.2	1.5	1.3	1.4 *	1.2	1.4	1.3 *
I am at risk of getting AIDS §	2.6	2.5	2.6	3.0	3.4	3.2 *	2.7	2.9	2.8	3.1	2.6	2.9 *	2.7	3.0	2.8 *
Condoms are easy to use	1.8	1.8	1.8	2.0	1.3	2.0	1.6	1.4	1.5 *	1.6	1.8	1.7	1.6	1.7	1.6
Condoms make sex less enjoyable §	2.7	2.8	2.7	3.0	3.5	3.2 *	2.8	3.2	3.0 *	2.8	2.6	2.7	2.6	3.2	2.9 *
I would be embarrassed to buy condoms §	3.2	3.3	3.2	3.4	3.6	3.5 *	3.4	3.2	3.3	3.2	3.0	3.1 *	3.3	3.6	3.4 *
I would be embarrassed to get condoms from a clinic §	3.2	3.2	3.2	3.4	3.4	3.4	3.5	3.2	3.4 *	3.4	3.5	3.4	3.4	3.5	3.4
I would prefer to have condoms distributed by a person of the same gender as myself §	2.6	2.8	2.7	1.8	1.8	1.8	2.4	2.4	2.4	2.5	2.7	2.6	2.2	2.5	2.4 *
I would be embarrassed to ask a sex partner to use a condom §	3.2	3.2	3.2	3.4	3.8	3.6 *	3.3	3.4	3.3	3.2	3.3	3.3	3.4	3.5	3.4
There is no need to use condoms, even for casual sex §	3.6	3.7	3.6	3.5	3.7	3.6	3.6	3.5	3.5	3.5	3.5	3.5	3.5	3.3	3.4 *
If a man would be embarrassed if a woman asked me to use a condom before having sex with her §	3.2	na	3.2	3.4	na	3.4	3.4	na	3.4	3.2	na	3.2	3.2	na	3.2
Condoms should be used with regular partners always §	2.6	2.2	2.4 *	3.0	3.2	3.1	2.6	2.6	2.6	2.7	2.4	2.6 *	2.8	3.0	2.9 *
I think people who claim condoms are [illegible]	2.6	2.8	2.7	2.4	2.8	2.6 *	2.8	2.6	2.7	2.8	2.3	2.6 *	2.6	3.0	2.8 *

Best Available Copy

Variable	Lobatse			Serowe/Pal.			Kweneng			Chobe			Gantsi		
Mean (m): males, females, total	m M	m F	m T	m M	m F	m T	m M	m F	m T	m M	m F	m T	m M	m F	m T
It is always the man's responsibility to carry condoms §	1.8	1.7	1.8	1.5	1.3	1.4 *	1.8	1.6	1.7 *	2.2	1.8	2.0	1.5	1.7	1.6 *
I use condoms more now than last year §	2.5	2.6	2.6	2.5	2.0	2.3 *	2.9	2.5	2.7 *	2.5	2.9	2.6 *	2.6	2.6	2.6
Women should also carry condoms	2.0	2.0	2.0	2.0	1.8	1.9 *	2.1	1.8	2.0 *	1.9	2.1	2.0	2.0	1.7	1.8 *
People with AIDS AIDS virus should live normally in the community	2.6	2.5	2.6	2.3	3.2	2.8 *	2.7	2.8	2.7	2.8	2.5	2.7 *	2.4	2.9	2.7 *
People with AIDS AIDS virus continue to work	2.6	2.4	2.5	2.5	3.0	2.8 *	2.6	2.7	2.7	2.7	2.7	2.7	2.5	2.8	2.7 *
I would still be friends with someone even if I learned they had the AIDS AIDS virus §	2.8	2.8	2.8	2.7	3.3	3.0 *	2.7	2.6	2.7	3.0	3.0	3.0	2.8	3.3	3.0 *
People with AIDS virus are being punished for being promiscuous §	2.5	2.3	2.4	2.8	2.5	2.6	2.8	2.6	2.7	2.5	2.1	2.3 *	2.8	2.7	2.7
I would take care of a family member with AIDS §	2.0	1.9	1.1	1.9	1.6	1.7 *	1.9	2.2	2.1 *	1.9	2.2	2.1 *	1.8	1.9	1.8

* indicates a significant difference between sex within the location.

§ indicates a significant difference across location.

Scale: 1 = strongly agree, 2 = agree, 3 = disagree, 4 = strongly disagree

Note: The scales on the items presented here have not been reversed to reflect "positive" or "negative" attitudes, as presented in the text and Table 2.

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Annex D
Focus Group Discussions

A Kweneng (Mmankgodi) Males (21-25)
B Kweneng (Mmankgodi) Females (21-25)
C Gantsi (Charlesbill) Males (21-25)
D Gantsi Females (21-25)
E Palapye Males (18-20)
F Serowe Females (21-25)
G Chobe (Kasane) Males (18-20)
H Lobatse Males (21-25)
I Lobatse Females (21-25)
J Kweneng Males (18-20)
K Kweneng Females (18-20)

1) What methods of birth control are available that would prevent pregnancy?

A. The following were methods of birth control mentioned: the condom, the pill, the loop, the diaphragm, the IUD.

B. Methods of birth control that are available are: the condom, the loop, diaphragm, the pill, the injection, safe period.

C. Methods of birth control that would prevent pregnancy are: birth control pills, the injection - for both males and females, condom - even though they feel they are not as effective as women don't like them and therefore refuse to use them.

D. The following are the suggested methods of birth control: the loop, injection, condom.

E. The following were the suggested available various methods of birth control: the pill, injection, condom, loop.

F. Methods of birth control that can prevent pregnancy are: the condom, the pill, injection, loop, diaphragm.

G. Methods of birth control: the pill for females, the condom, injection, traditional medicine men/doctors.

H. Methods of birth control: condoms, the pill, diaphragm.

I. Methods of birth control: pills, condoms, loop, diaphragm, injection.

J. Methods of birth control: abstain from sex, withdrawal, the pill, condom, traditional doctors/medicine.

K Methods of birth control: pill, condom, loop, injection.

1a) Which of these could prevent the transmission of sexually transmitted diseases?

A. The condom is thought of as the only form of contraceptive of the above mentioned which can actually prevent the transmission of sexually transmitted diseases.

B. The condom is the only birth control method that can prevent the transmission of sexually transmitted diseases and also prevent the transmission of AIDS.

C. The condom, they feel, can prevent the transmission of sexually transmitted diseases.

D. The group stated that only condoms of the above mentioned forms of contraceptives could actually prevent the transmission of sexually transmitted diseases.

E. Condoms are the only safe method, and this is because its the only one which ensures that there is not contact between the two fluids produced by both sexes.

F. The condom can prevent sexually transmitted diseases.

G. The condom can prevent STDs.

H. Only condoms can prevent the transmission of STDs.

B Kweneng (Mmankgodi) Females (21-25)
C Gantsi (Charleshill) Males (21-25)
D Gantsi Females (21-25)
E Palapye Males (18-20)
F Serowe Females (21-25)
G Chobe (Kasane) Males (18-20)
H Lobatse Males (21-25)
I Lobatse Females (21-25)
J Kweneng Males (18-20)
K Kweneng Females (18-20)

I. Condoms and diaphragm prevent the transmission of sexually transmitted diseases.

J. The group felt that traditional medicine and the condom could prevent the spread of sexually transmitted diseases.

K. Condoms can prevent the transmission of sexually transmitted diseases.

1b) Which of these could specifically prevent the transmission of HIV infection/AIDS?

A. The condom is thought to be the only one that can specifically prevent the transmission of HIV infection.

B. The condom is the only method of birth control that can prevent the transmission of sexually transmitted diseases and also prevent the transmission of AIDS.

C. The condom yet again prevents the transmission of the AIDS /AIDS virus.

D. The condom still because it ensures that there is no contact between the two fluids produced by both sexes.

E. Condoms can prevent the transmission of AIDS.

F. The condom can also prevent the transmission of the AIDS /AIDS virus.

G. The condom can prevent AIDS and the AIDS virus.

H. Condoms can prevent the transmission of AIDS/AIDS virus.

I. Condoms and diaphragm specifically prevent the transmission of AIDS virus/AIDS. Diaphragm is the best because there is no way men can cheat the way they do with condoms. Condoms are easily cut at the ends by some men.

J. Traditional doctors and use of condoms can prevent AIDS and the AIDS virus.

K. Condoms can specifically prevent the transmission of AIDS /AIDS virus.

2) What pressures are there on yourselves and other females/males (depending on your group) your age to <u>not</u> use condoms?

A. The most important but not the only reason that forces males not to use condoms is the fact that their women claim not to enjoy sex whenever a condom is used. Besides, they (the women) also complain that the condom has a bad odour which causes the vaginal fluid to be secreted resulting in not reaching climax as expected. The males further went on to say that their women do not want condoms to be used because they are left in their genitals. They also said some reliable condoms with all the necessities were expensive and as such the males were not prepared to use them.

B. Females say that they don't use condoms for the following reasons:
- They're afraid that condoms will remain in their genitals
- Their partners (males) say condoms make sex less enjoyable and therefore want "flesh to flesh".

C. The reason why males do not use condoms are as follows:
- Females don't want to use them
- Females say condoms smell
- Sometimes you go to a bar/disco without a condom handy, where you meet up with a woman who offers. Since you don't want to loose the chance, you engage in sex without a condom.

D. A lot of pressure comes from our male partners. They always make funny accusations to us whenever we urge them to use a condom before having sex with them. They say we don't trust

C	Gantsi (Charleshill) Males (21-25)
D	Gantsi Females (21-25)
E	Palapye Males (18-20)
F	Serowe Females (21-25)
G	Chobe (Kasane) Males (18-20)
H	Lobatse Males (21-25)
I	Lobatse Females (21-25)
J	Kweneng Males (18-20)
K	Kweneng Females (18-20)

them and that condoms make them sick. They complain of abdominal pains and experience a rash around their genital area. Females despise using condoms because they have an extremely bad smell and on the other hand they also make us feel ill. We usually experience pains in the groin. But as stated before the main pressure for us not to submit to condom use comes from our male partners who think we don't love them whenever we bring up the issue of condomising. Condoms can also remain inside a woman after sex.

E. The Palapye males said they don't use condoms because "most of us come home drunk and as such we tend to forget to use condoms whenever we have sex".

F. Females say they don't use condoms because:
- condoms remain in their genitals.
- their partners refuse to use them.
- some condoms, especially those from clinics, have a very bad smell.

G. There are pressures on males from other males, and also on females from males against the use of condoms.
- Peer pressure: Many times a peer (usually of the same sex) discourages the use of a condom. If your friends know that you use condoms, they will try to discourage you.
- Many people think that a good sexual relationship should be built on "love and trust." Therefore the use of a condom could upset a good sexual relationship.
- Many males cut the condom at the tip and a lot more females have found it useless to use a condom .
- In some cases females get a lot of pressure from peers and other people around them to prove that they are fertile. In such cases these women eventually decide against the use of a condom, in order to become pregnant.

H. There are no pressures on us against the use of a condom. These days every one has to use a condom not only with a casual partner but with everybody until you have stayed together for a year. There has been talk that some men cut the condom at the end. It is the responsibility of any of the people involved in sexual intercourse to make sure a condom is used properly. Women must actually ask to see a condom being put on properly by their sexual partner.

I. Most females do not use condoms because their partners do not like to use condoms. Males think they lose trust in them if women want to use condoms. Males always have the final say so if they say no there is no way out. Most men do not use condoms properly, they cut them at the end so the best solution is to be watchful. This can be done by helping your partner when unwrapping his condom. Make sure he puts it on properly. Even though condoms interfere with trust and love women feel that condoms should always be used because one never knows what the future holds, e.g., one partner may be unfaithful.

J. Many teenagers do not want to use condoms because their friends/peers are against the use of condoms. Other people do not use condoms because their sex partners become suspicious that they are being cheated if a condom is being used. They suspect that the other partner is using a condom because they already had sex with somebody else. Males sometimes cut the condom at the end and this has discouraged many women from using condoms because it does not help to use a cut condom.

K. Most females are afraid to use condoms because their friends have told them that condoms remain in their genitals. Some are not using condoms because they are told that men cut holes at the end so they don't think there is any use to use condoms. Most females think condoms are meant for people who have many partners so they think if a couple uses them it is because one of them is cheating.