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Are people using condoms?

Current evidence from Sub-Saharan Africa and Asia and the implications for microbicides

Background to the HIV epidemic and microbicides

There were five million new HIV infections in 2002. Of these new infections, three and a half million were in Sub-Saharan Africa and 58% of those were among women. Many of these women, and others throughout the world, have no access to or control over using current prevention options. Microbicides are not yet available but are a potential new, user-controlled HIV and STI prevention option. Research and development is promising with around 67 products presently at some stage of development, 17 of which are in clinical trials. But despite this promise, lack of funding and strict regulatory requirements for trials are causing delay.

Are people using condoms?

This policy briefing paper summarises evidence of the extent to which men and women in different types of sexual relationships in Sub-Saharan Africa and Asia report using condoms in their most recent sex act.

The analysis focuses on compiling data from South Asia, East Asia and the Pacific, and Sub-Saharan Africa, including a literature review of published literature from 1984 to 2002 on levels of condom use in main, casual and commercial partnerships; review of project documents and behavioural data from published literature on the impact of HIV prevention interventions; and, compilation of data on sexual behaviour and condom use from two key sources:

- o Macro International / MEASURE
- o Family Health International (FHI)

An analysis of this nature does have some limitations. Many of the studies reviewed do not use comparable methods or indicators. As far as possible data from each region is compiled from studies with relatively comparable methods. Sometimes it is hard to assess whether the study populations are in contact with an intervention or not. There is also the question of the reliability of the reported sexual behaviour and condom use.

Key Findings

1. Large population surveys of women in regular partnerships in 15 Sub-Saharan African countries suggest that:

Less than 7% of women used a condom in the last sex act with their main partner.

Less than 50% of women with casual partners used a condom in last sex act with their casual partner.

2. Men in Sub-Saharan Africa also report higher levels of condom use in last sex act with a casual partner.

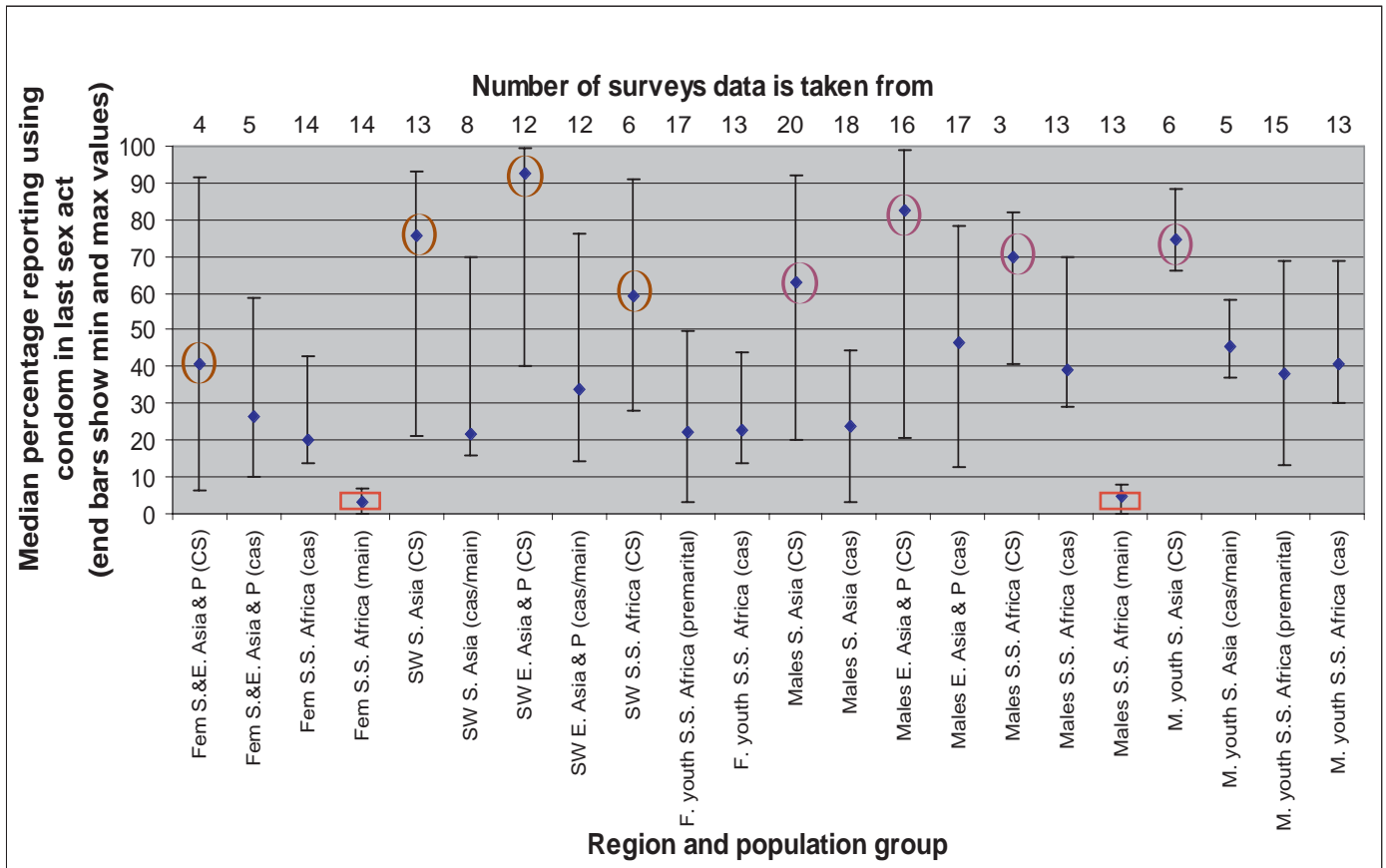
3. In South Asia and East Asia and the Pacific both men and women report higher levels of condom use in commercial sex relationships than in casual partnerships.

4. Asian sex workers generally report high levels of condom use in commercial sex relationships, and lower levels of condom use in non-commercial (main/casual) sex.

5. Although data on sex workers in Sub-Saharan Africa is limited (6 sites), reported condom use for commercial sex seems lower overall than in Asia (although some differences may be due to differences in the study methods used).



Summary of behavioural survey data from South Asia, East Asia and the Pacific, and Sub-Saharan Africa



- SW = Sex Worker
- Fem = Women of reproductive age (15-49)
- F.youth = female youth (15-24)
- M.youth = male youth (15-24)
- CS = commercial sex
- cas = casual partner
- main = main partner
- S. Asia = South Asia
- E.Asia & P = East Asia and Pacific
- S.S. Africa = Sub-Saharan Africa

General trends

What this data illustrates is significant increases in condom use often arise following intervention activity, with the greatest increases being in commercial and casual sex. However, there are generally only small increases achieved within steady partnerships. Overall levels of condom use decrease as the degree of intimacy or regularity of the partner increases. Even amongst those who do use condoms, few condom users achieve 100% consistent use.

Examples of post-intervention levels of condom use

Setting	Intervention population	Pre-intervention level of condom use (self-reported)	Post-intervention level of condom use (self-reported)	Reference
Guangzhou, China	Sex workers	30% always used condom.	81% always used condom.	Ma S., Dukers N.H.T.M., van den Hoek A., et al. <i>Decreasing STD incidence and increasing condom use among Chinese sex workers following a short term intervention: a prospective cohort study.</i> Sex Transm Infect, 2002. 78 (2): p. 110-4.
Tamil Nadu, India	Truckers and factory workers buying sex	55% of truckers used condom at last commercial sex. 28% of factory workers used condom at last commercial sex.	83% of truckers used condom at last commercial sex. 52% of factory workers used condom at last commercial sex.	<i>AIDS prevention and control project. HIV risk behaviour surveillance survey in Tamil Nadu: Report on fifth wave.</i> 1996-1998. Family Health International.
Cameroon	Intervention for male and female youth aged 12 – 25	32% of females used condom in last sex act.	44% of females used condom in last sex act.	Speizer I.S., Tambashe B.O., and Tegang S.P. <i>An evaluation of the "Entre Nous Jeunes" peer-educator program for adolescents in Cameroon.</i> Stud Fam Plann, 2001. 32 (4): p. 339-51.
Kenya	Women in tea, coffee and flower plantations	6% used male condom at last sex act.	42% used male condom at last sex act.	Welsh M.J., Feldblum P.J., Kuyoh M.A., et al. <i>Condom use during a community intervention trial in Kenya.</i> Int J STD AIDS, 2001. 12 (7): p. 469-74.

Why are some people not using condoms?

There are a number of reasons why people do not use condoms. They may not perceive themselves to be at risk of HIV or STI infection or not know that condoms will provide protection against HIV and other STIs. Some may wish to conceive; others do not like using condoms as they feel they reduce sexual pleasure. For some there is an association of condoms with casual sex and not with intimacy and trust. Many women are unable to negotiate their use because men control whether they are used or not. For many, condoms are too expensive or not readily available. In 1999, roughly 724 million condoms were distributed per year across Sub-Saharan Africa, which averaged 4.6 condoms per man aged 15 - 59.

Narrowing the condom gap is important but not the only solution

The review highlights that although further investment in condom distribution and use is needed, even with increased supply and promotion many people will still not use condoms, especially with their main partners. This means that many more women are at risk as many new infections in women are from their long-term male partners.



Conclusions

This review shows that many people are using condoms, particularly in commercial and casual sex but that people generally do not use them in their most intimate relationships. Even following intensive promotion, levels of condom use are unlikely to increase substantially in these relationships.

Microbicides could potentially fill an important gap in providing protection against HIV and STI infection in these relationships, and be used whenever condoms are not being used. However, even when an effective microbicide is identified, condoms will still have an important role in HIV prevention.

Contact details and acknowledgments

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Data Sources

Nationally representative population based survey data on reported sexual behaviour and condom use by women and men of reproductive age in 14 Sub-Saharan Africa countries was compiled from MEASURE Demographic and Health Surveys (between 1997 and 2002) (<http://www.measuredhs.com/hivdata/surveys/start.cfm>). Data on the sexual behaviour of different populations (sex workers, men and women in specific occupations) in East Asia and the Pacific, and South Asia was compiled from the BBS surveys conducted by Family Health International between 1999 and 2001 (<http://www.fhi.org>). Information on the percentages reporting being married or cohabiting, and having casual or commercial sex was extracted from these studies. Data on the percentages reporting using a condom in the last sex act with different partners was also compiled. This data was complimented by sex worker data from Sub-Saharan Africa (*Morison et al. 2001, Ghys et al. 2002, RHRU Johannesburg 2000*).

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Recommendations

1. Increased investment in condom promotion, distribution and strengthened logistics are required, as current supplies are severely inadequate.
2. Alternatives to condoms need to be developed. Microbicides and other female controlled methods of protection could potentially fill the current gap.
3. Microbicide trials need to be adequately funded and supported.
4. Microbicides should be promoted for use in long-term, steady relationships, where condom use is generally low.
5. It is important to plan ahead to ensure that microbicides being developed will meet women's different needs (e.g. conceive / not conceive); are acceptable, affordable and accessible; and, are not seen as a barrier to intimacy.

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