



**St. Lucia (2010): HIV/AIDS
TRaC Study Evaluation Condom Use
Among Sexually Active Youth 16-24
Years in St. Lucia
Round 1**

T h e P S I D a s h b o a r d

**St. Lucia
September 2010**

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<http://www.psi.org/research/cat_socialresearch_smr.asp>.

Summary

Background & Research Objectives The purpose of the Tracking Results Continuously (TRaC) survey is to provide an assessment of key behaviours, behavioural determinants and exposure to a CIDA funded PSI/SFH HIV prevention programme among sexually active 16-24 year old males and females in St. Lucia. The study was conducted throughout the ten (10) parishes: Castries, Anse La Raye, Canaries, Soufriere, Choiseul, Laborie, Vieux Fort, Micoud, Dennery and Gros Islet.

Description of Intervention PSI/SFHs HIV prevention programme targeting youth promotes safer sexual behaviours through increased condom use among sexually active 16 to 24 year old males and females using peer education and mass media behaviour change communication activities.

Methodology Time location sampling was used to recruit 501 sexually active 16 to 24 year old males and females from known “hot spots.” These “hot spots” were defined as areas where youth are known to congregate: beaches, sporting events, mini groceries, shopping areas and roadsides. Analyses consisted of logistic regression to ascertain which determinants are correlated with key behaviours and anovas to estimate the adjusted means/proportions of each explanatory variable by condom use (at last sex and consistent with any type of partner in the last month). Socio-demographic characteristics and geographic location were controlled for in the analyses.¹

Main Findings

The monitoring table highlights that:

- Only 36% of participants correctly demonstrated how to use a condom, while 38% reported carrying a condom with them at the time of the interview.
- 51% of participants reported being testing for HIV in the past 12 months but a lower percentage 38% of participants indicated that they received STI screening over the same period.
- Access to condoms from a non-traditional outlet was very low at 2%.
- Knowledge among participants was generally high at 6.66 when assessing modes of transmission of HIV and STIs.
- The majority of participants indicated that they did see the GIGI advertisements (68%) over the past 3 months as well as the promotional items (73%) such as wristbands, t-shirts etc. Just 32% of participants however indicated that they heard the GIGI radio advertisements over the past 3 months.
- Accessibility to condoms did not appear to be a major issue as most persons agreed that they could get a condom when they needed one (mean=3.57).
- Overall participants had a high level of self-efficacy where there was a high level of agreement that they know how to use a condom when they have sex (mean=3.39) and they can convince their partner/s to use a condom (mean=3.40).
- Social norms among friends regarding pro-condom, having less than two sexual partners and seeking medically trained professionals was moderate at 2.55 with social support from friends higher at 2.90.

¹ For more details about the methodology and data collection, please contact the first author for a copy of the study design document.

The results of segmentation analysis indicate that the probability of sexually active 16 to 24 year old males and females correctly using condoms increases with

- *Having a condom present:* Almost 49% of those who were carrying a condom at the time of the interview demonstrated correct condom use, the respective figure for non-users is 35% ($p < 0.01$).
- *Knowledge:* sexually active 16 to 24 year old males and females who are knowledgeable about modes of HIV transmission are more likely to be able to correctly demonstrate condom use (7.12 vs. 6.61, $p < 0.01$) and consistently use condoms with their non-regular partners (7.14 vs. 6.53, $p < 0.01$) as compared to those who are not as knowledgeable.
- *Social Support:* Respondents who have friends who disagree that it is okay to have multiple partners are more likely to demonstrate correct condom use than those who have friends who disagree with this (2.54 vs. 3.04, $p < 0.01$). Sexually active 16 to 24 year old males and females who have friends who agree that it is okay to have multiple partners are less likely to consistently use condoms than those who do not have friends who agree (3.03 vs. 2.54, $p < 0.001$).
- *Self-Efficacy:* sexually active 16 to 24 year old males and females who are confident in their ability to use a condom when they have sex are more likely to correctly demonstrate condom use (3.57 vs. 3.33, $p < 0.01$) and consistently use with their non-regular partners (3.54 vs. 3.27, $p < 0.01$) than those who are not confident in their ability.
- *Intentions:* Respondents with higher mean levels of intent to consistently use condoms with regular and non-regular partners and to get tested for HIV and STIs were more likely to correctly to demonstrate correct condom use (3.28 vs. 3.01, $p < 0.01$).
- *Exposure:* Sexually active 16 to 24 year old males and females who were exposed to GIGI over the internet² were also more likely to correctly demonstrate condom use (24% vs. 12%, $p < 0.05$).
- *Social Norms:* sexually active 16 to 24 year old males and females who feel that their friends use condoms with their partners or do not have more than two sexual partners are more likely to consistently use condoms with their non-regular partners than those who do not feel this way (2.62 vs. 2.46, $p < 0.01$).
- *Population Characteristics:* Being from a higher socio-economic background was associated with higher levels of consistent condom use than those who were from a lower socio-economic background (2.94 vs. 2.65, $p < 0.05$).

Programmatic Recommendations

- Although many sexually active 16 to 24 year old males and females reported condom use at last sex only a few correctly demonstrated how to put on a condom. Future programmatic efforts should be placed on activities that are targeted specifically to youth enabling them to correctly learn how to use a condom.
- Exposure to “Got It, Get It” logo over the past 3 months, being able to easily find a condom when one is needed and, carrying a condom are all variables associated with correct condom use. It is recommended that there should be the continuation of interactive behaviour change communication sessions alongside the continued promotion of carrying condoms, its use and access to condoms.

² At the time of the interview GIGI was not launched formally on the internet either via Facebook or the website. The exposure persons indicate here may have been through informal channels such as YouTube and other social network sites.

- Social support appears to be one of the major drivers of consistent condom use with non-regular partners in particular. Efforts should place emphasis on the promotion of support among friends to use condoms and the open discussions of HIV and STIs amongst their peers.
- Those youth who feel that they can convince their partner/s to use a condom are generally the youth who are able to consistently use condoms with their non-regular partners. From a programmatic standpoint this points to the increasing the ability and confidence of both males and to a larger extent females to negotiate condom use with their sexual partners.
- The relatively large average number of sexual partners in the past 30 days amongst youth indicates that understanding condom use with all partners is important. In particular the dynamics that exists within the relationships with regular partners should be researched further to improve the development of strategies that can promote consistent condom use within these relations.

The above recommendations will be implemented through the PSI/C St. Lucia youth program's main activities: focus on the increasing access and availability to condoms by increasing the number of sales outlets; Behaviour Change Communication (BCC) which focuses on increasing condom use with non-regular partners within concurrent and multi-partner relationships. BCC approaches also include building the capacity to use condoms, signs of sexually transmitted infections and factors that assist with the analysis of self-risk perception.

Monitoring Table

Trends in behaviors, OAM determinants of behaviors and exposure among sexually active youth 16 to 24 years old in St. Lucia, 2010

Risk: Sexually Active Youth aged 16 to 24

Behavior: *Consistent condom use during the last 30 days*

INDICATORS ³	March 2010 (N=501)
BEHAVIOR/USE	
	%
- Consistent condom use with regular partner/s in the last 30 days	34%
- Consistent condom use with commercial and/or casual partner/s in the last 30 days	58%
- Consistent condom use with all sexual partner/s in the last 30 days	29%
- Condom use at last sex with regular partner/s	50%
- Condom use at last sex with non-regular partner/s	74%
- Condom use at last sex with commercial partner/s	81%
- Condom use at last sex with any partner	65%
- Demonstrating correct condom use (8 items) ⁴	36%
- Received HIV test in last 12 months	51%
- Have a male condom at present	38%
- Age at first sex	14.41
- Received STI screening in last 12 months	32%
NEED/RISK	
- Number of regular partner/s in the last 30 days	2.05
- Number of non-regular partner/s in the last 30 days	1.82
- Number of commercial partner/s in the last 30 days	0.90
- Number of any sexual partner/s in the last 30 days	4.77
- Number of sex acts with regular partner/s ⁵	11.09
- Number of sex acts with non-regular partner/s ⁶	7.43
- Number of sex acts with commercial partner/s ⁷	9.06
- Number of sex acts with any sexual partner/s	18.16
OPPORTUNITY	
<i>Availability</i>	% or Mean
- Difficulty finding where to purchase condom	2.67
- I can get a condom when I need one	3.57
- The last time that I bought or received a condom I got them from: A Non-Traditional Outlet	2%
<i>Brand Appeal</i>	
- The brand of condom really does not matter to me	3.00

³ Unless otherwise stated the value of multi-item scales range from: “1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree”.

⁴ Demonstration scale items include: 1) Checked for expiration date and package integrity, 2) Looked for opening notch, 3) Correctly opened package, 4) Identified the correct side to roll on the condom, 5) Pinched the end of the condom, 6) Unrolled the condom on the wooden penis, 7) Correctly took off the condom, 8) Correctly threw away condom.

⁵ N=399

⁶ N=359

⁷ N=189

- Preferred brand of condom endorsed by GIGI	7%
Social Norm	
- Social Norms Scale ⁸ (1-4)	2.55
- My friends like to use condoms with their non-regular partners	58%
ABILITY	
Knowledge	
	% or Mean
- Knowledge Index ⁹ (0-9)	6.66
- Consistent condom use reduces the risk of getting HIV/STIs	90%
Social Support	
- Social Support Scale ¹⁰ (1-4)	2.90
- Friends think it is okay to have multiple partners	2.82
- Friends encourage me to use condoms with partners	73%
Self-Efficacy	
- I know how to use a condom when I have sex	3.39
- I can convince my partner/s to use a condom	3.32
MOTIVATION	
Intention	
	% or Mean
- Intentions Scale ¹¹ (1-4)	3.07
- I plan to use condoms consistently with my non-regular partners	3.28
Locus of Control	
- During the last month how many times did you drink alcohol before having sex with non-regular type of partner	2.44
- During the last month how many times did you use drugs (other than alcohol) before having sex with non-regular type of partner	2.06
- Engaging in sex under the influence of alcohol and/or drugs	57%
Subjective Norm	
- Subjective Norms Scale ¹² (1-4)	3.17

⁸ Social norms scale items include: 1) My friends/peers do not like to use condoms with their regular sexual partners (R), 2) My friends do not like to use condoms with their non-regular partners (R), 3) It is common for my friends who I hang out with to have more than one sexual partner (R), 4) My friends think that it is good to use condoms when having sex, 5) It is common for my friends to use traditional remedies rather than medically trained professionals (R).

⁹ Knowledge score items include: 1) Having an STI can increase the likelihood of contracting HIV, 2) Correct condom use reduces the risk of getting HIV or an STI, 3) Consistent condom use reduces the risk of getting HIV or an STI, 4) The use of creams, oils or Vaseline as lubricants can damage a condom, 5) Anal sex has the highest risk for contracting HIV, 6) Oral sex is safe if partners “don’t swallow,” 7) Douching after sex will prevent a woman from contracting an STI, 8) HIV is small enough to pass through a condom, 9) If a man ejaculates enough before sex he cannot pass on HIV.

¹⁰ Social support scale includes: 1) Friends who I hang out with encourage me to use condoms with my partner/s, 2) I can discuss with my friends the possibility of a person contracting an STD/STI if he/she has sexual intercourse without using a condom, 3) My friends and I discuss the use of condoms with non-regular partners, 4) My friends and I discuss the use of condoms with non-regular partners, 5) I encourage friends who I hang out with to use condoms with regular partner/s, 6) I encourage friends who I hang out with to use condoms with non-regular partner/s, 7) Friends who I hang out with feel comfortable talking to me if they suspect that they have an infection, 8) I encourage friends who I hang out with to go to a doctor if they suspect that they have an infection, 9) Friends who I hang out with encourage me to go to a doctor if I suspect that I have an infection, 10) Friends who I hang out with generally think it is okay to have more than one (1) sexual partner.

¹¹ Intentions scale includes: 1) I plan to get tested for HIV within the next three (3) months, 2) I plan to get tested for STIs within the next three (3) months, 3) I plan to use condoms consistently with my regular partners, 4) I plan to use condoms consistently with my non-regular partners.

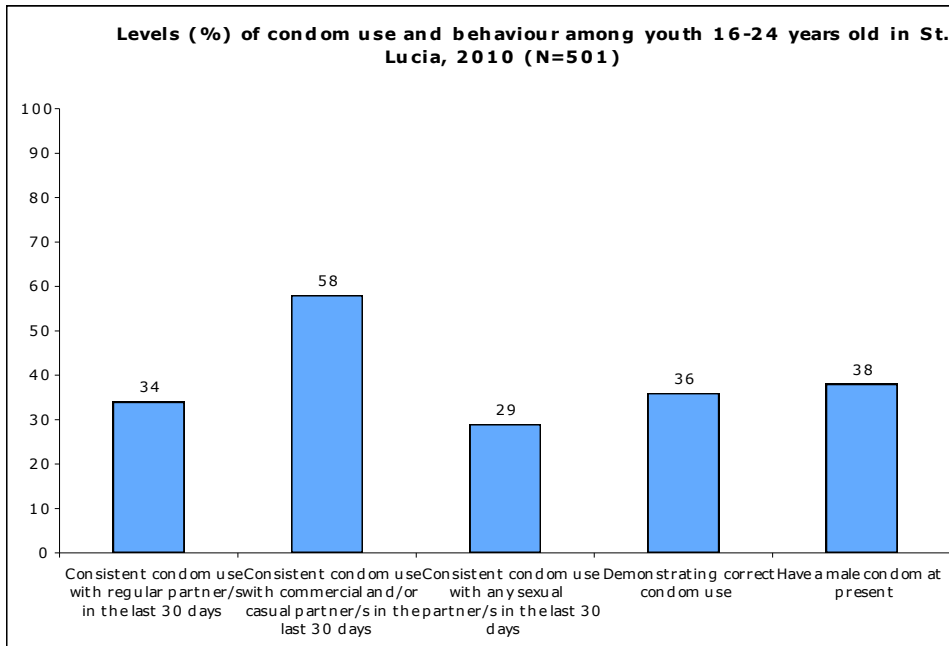
¹² Subjective norms scale includes: 1) My partner will approve of using a condom, 2) My peers will approve of me using a condom, 3) My peers will approve of my getting tested for HIV, 4) My partner will approve of my getting tested for STIs.

Monitoring Table: Youth**St. Lucia, 2010**

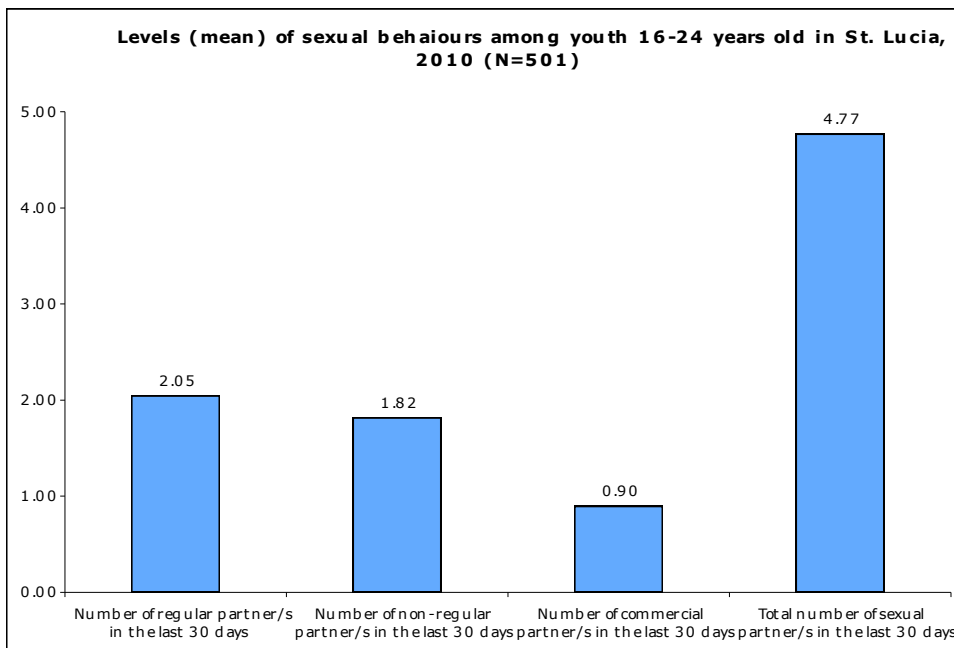
- Peers approve of use of condoms	74%
<i>Threat</i>	
- I am at risk for HIV if I have unprotected sex with my non-regular partners	3.58
<i>Willingness to Pay</i>	
- Price of condom too expensive	\$5.79
- Price of condom too inexpensive	\$4.46
- Price of condom neither expensive nor inexpensive	\$4.91

EXPOSURE	%
- Have you seen the "Got it Get it" logo in the last three (3) months	64%
- Frequently seen 'GIGI' logo in neighbourhood in past 3 months (sometimes/always)	59%
- Have you heard the "Got it Get it" radio advertisement in the last three (3) months	32%
- Have seen the "Got it Get it" promotional item in the last three (3) months (one or more times)	74%

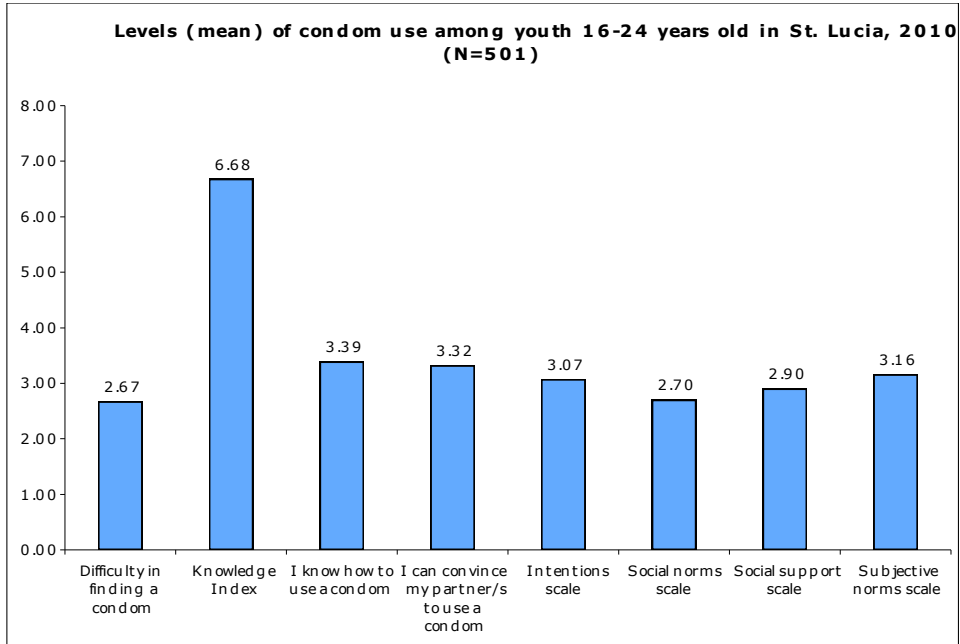
Monitoring Graph 1: Key Percentage Results



Monitoring Graph 2: Key Mean Results



Monitoring Graph 3: Key Mean Results



Segmentation Table

Title: Determinants of consistent condom use in St. Lucia, 2010

Risk: sexually active youth 16 to 24 years

Behavior: Consistent condom use over the past 30 days with non regular partners (these include commercial and casual partners)

INDICATORS	Consistent (N=241) 58%	Inconsistent (N=172) 42%	OR	Sig.
OPPORTUNITY	% or Mean	% or Mean	OR	
<i>Social Norms</i>				
- <i>Social Norms Scale (1-4)</i>	2.62	2.46	1.75	**
ABILITY	% or Mean	% or Mean	OR	
<i>Knowledge</i>				
- <i>Knowledge Index (0-9)</i>	7.14	6.53	1.27	**
<i>Social Support</i>				
- <i>Social Support Scale (1-4)</i>	3.06	2.82	1.98	***
<i>Self Efficacy</i>				
- <i>I know how to use a condom when I have sex (1-Strongly Disagree to 4 –Strongly Agree)</i>	3.54	3.27	1.65	**
MOTIVATION	% or Mean	% or Mean	OR	
<i>Subjective Norms</i>				
- <i>**Subjective Norms Scale (1-4)</i>	3.16	3.35	0.54	**
EXPOSURE	% or Mean	% or Mean	OR	
- Seen or heard of 'GIGI' over the internet (e.g. Facebook, Twitter, Web Page etc.)	12%	24%	0.33	**
POPULATION CHARACTERISTICS	% or Mean	% or Mean	OR	
<i>Socio-Economic Status (1-Low to 5-High)</i>	2.94	2.65	1.24	*

*:p<0.05; **:p<0.01; ***:p<0.001; ns: none significant.

Hosmer-Lemeshow goodness-of-fit: χ^2 (df=8) = 15.17, p=0.056Omnibus goodness-of-fit: χ^2 (df=18) = 84.74, p<0.000Cox & Snell R₂=0.185

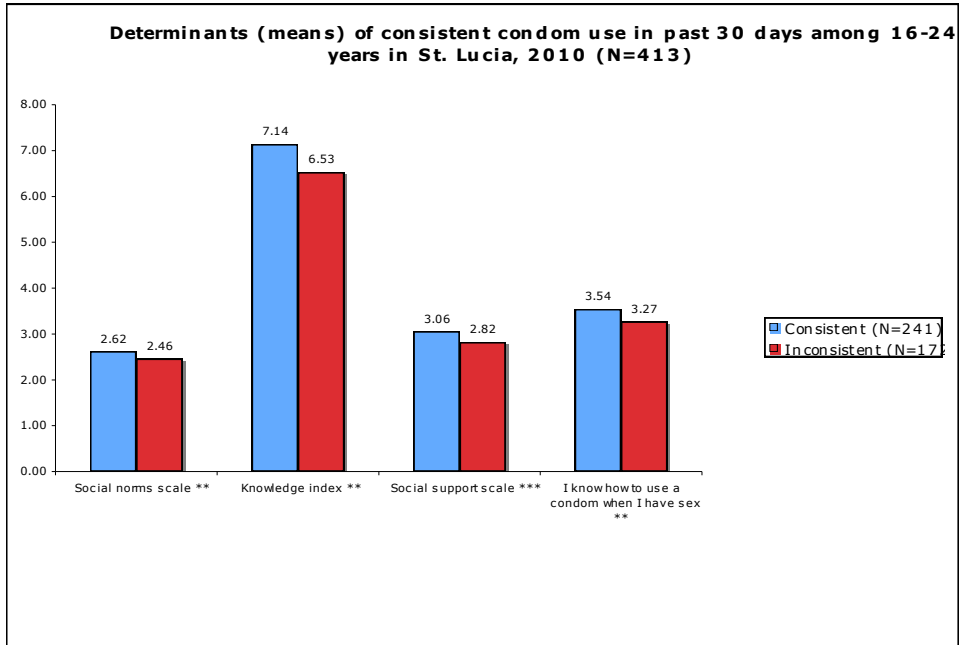
The range of scale items is from 1 to 4: "1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree".

The Knowledge Index was built with 9 true/false questions. The range goes from 0 (none of the 9 questions were responded correctly) to 9 (all questions were responded correctly).

**Subjective Norms Scale independently shows that the consistent condom users score higher on this scale compared to those who do not consistently use. The observed reversal in the segmentation table could be due to missing values.

*** City of residence, was the study design variable. It was included in every step of the regression analysis regardless of its association with consistent condom use. Sex and age were also included in every step of the analysis to control for gender and generational differences of respondents.

Segmentation Graph 1: Key Mean Results



Segmentation Table

Title: Determinants of correct condom use in St. Lucia, 2010

Risk: sexually active youth 16 to 24 years

Behavior: Correct Condom Use

INDICATORS	Correct (N=162) 36%	Incorrect (N=274) 64%	OR	Sig.
BEHAVIOUR	% or Mean	% or Mean		
<i>Behaviour</i>				
- Have a condom at present	49%	35%	2.18	**
ABILITY	% or Mean	% or Mean		
<i>Knowledge</i>				
- Knowledge Index (0-9)	7.12	6.61	1.31	**
<i>Social Support</i>				
- Friends think it is okay to have multiple partners (<i>1-Strongly Disagree to 4 –Strongly Agree</i>)	2.54	3.03	0.59	***
<i>Self Efficacy</i>				
- I know how to use a condom when I have sex (1-4)	3.57	3.33	1.91	**
MOTIVATION	% or Mean	% or Mean		
<i>Intentions</i>				
- Intentions scale (1-4)	3.28	3.01	1.78	**
EXPOSURE	% or Mean	% or Mean		
- Seen or heard of 'GIGI' over the internet (e.g. Facebook, Twitter, Web Page etc.)	24%	12%	2.42	*

*:p<0.05; **:p<0.01; ***:p<0.001; ns: none significant.

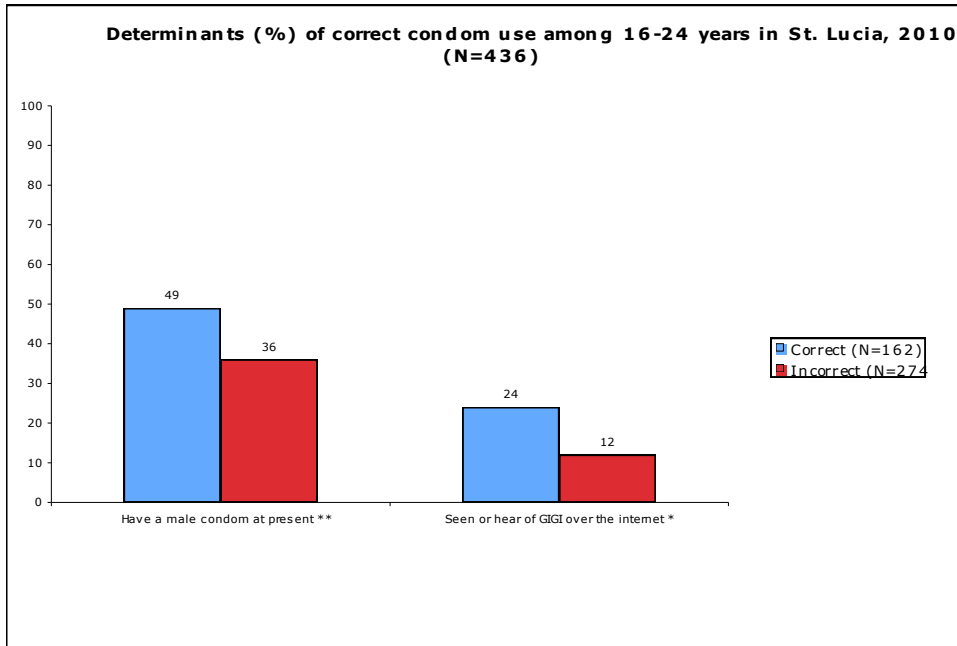
Hosmer-Lemeshow goodness-of-fit: χ^2 (df=8) = 15.81, p=0.045Omnibus goodness-of-fit: χ^2 (df=17) = 162.96, p<0.000Cox & Snell R²=0.312

The range of scale items is from 1 to 4: "1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree".

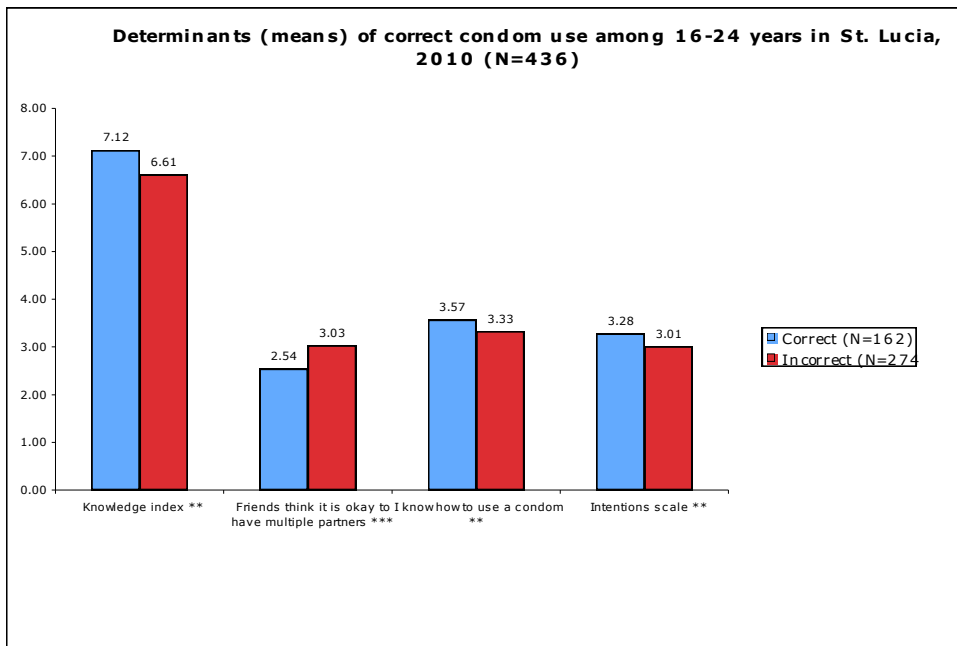
The Knowledge Index was built with 9 true/false questions. The range goes from 0 (none of the 9 questions were responded correctly) to 9 (all questions were responded correctly).

*** City of residence, was the study design variable. It was included in every step of the regression analysis regardless of its association with consistent condom use. Sex and age were also included in every step of the analysis to control for gender and generational differences of respondents.

Segmentation Graph 2: Key Percentage Results



Segmentation Graph 3: Key Mean Results



Population Characteristics

POPULATION CHARACTERISTICS	N=501 % or mean
Gender	%
Male	53.5
Female	46.5
Age at Last Birthday	%
16	6.6%
17	9.4%
18	12.4%
19	13.0%
20	10.8%
21	11.8%
22	9.8%
23	14.2%
24	12.2%
	Mean
	20.30
Marital Status	%
Unmarried living with sex partner	33.7%
Single	58.0%
Married living with spouse/sex partner	2.4%
Married not living with spouse/sex partner	.4%
Other	5.4%
Education	%
Never attended school	.2%
Did not finish Primary	10.2%
Primary	15.6%
Secondary/high school	59.8%
Technical/vocational	13.2%
University	1.0%
Currently Employed	%
No	51.6%
Yes	48.4%

Annex 1: Population Characteristics**St. Lucia, 2010**

POPULATION CHARACTERISTICS	N=501 % or mean
Average Monthly income/allowance (over last year)	%
No Income	11.7%
\$1-\$249	2.6%
\$250-\$499	7.0%
\$500-\$999	13.1%
\$1000-\$1499	16.1%
\$1500-\$1999	13.6%
\$2000-\$2999	10.0%
\$3000 or above	3.0%
No response	22.9%
TV	%
No	10.3%
Yes	89.7%
Radio	%
No	11.3%
Yes	88.7%
DVD Player	%
No	27.0%
Yes	73.0%
Computer Desktop/Laptop	%
No	55.8%
Yes	44.2%
Cell Phone	%
No	12.9%
Yes	87.1%
MP3 Player	%
No	57.0%
Yes	43.0%
Internet	%
No	63.3%
Yes	36.7%
Cable	%
No	33.9%
Yes	66.1%

POPULATION CHARACTERISTICS	N=501 % or mean
Car	%
No	79.1%
Yes	20.9%
Children	%
No	61.2%
Yes	38.8%
Number of Children	%
0	62.2%
1	21.4%
2	10.3%
3	4.4%
4	1.4%
5	.2%
	Mean
	0.62
Age at First Pregnancy	% (N=111)
13	1.8%
14	8.1%
15	17.1%
16	36.0%
17	7.2%
18	13.5%
19	8.1%
20	4.5%
21	1.8%
22	.9%
27	.9%
	Mean
	16.62

Reliability Analysis

Composite Variables	Year (N=501)
	Cronbach's Alpha
OPPORTUNITY	
Availability (1: strongly disagree; 4: strongly agree): 1. Shops nearby here always have condoms for sale 2. Condoms are available where I live/hang out during the day 3. My preferred condom is always available in nearby shops/supermarkets 4. If a person wanted to buy a condom he/she would have difficulty finding one 5. I can get a condom when I need one	0.88
Social Norm: (1: strongly disagree; 4: strongly agree) 1. My friends do not like to use condoms with their regular partners 2. My friends do not like to use condoms with their non-regular partners 3. It is common for my friends who I hang out with to have more than one sexual partner 4. My friends think that it is good to use condoms when having sex 5. It is common for my friends to use traditional remedies rather than medically trained professionals	0.64
ABILITY	
Social Support: (1: strongly disagree; 4: strongly agree) 1. Friends who I hang out with encourage me to use condoms with my partner/s 2. I can discuss with my friends the possibility of a person contracting an STD/STI if he/she has sexual intercourse without using a condom 3. My friends and I discuss the use of condoms with non-regular partner/s 4. My friends and I discuss the use of condoms with regular partner/s 5. I encourage friends who I hang out with to use condoms when they are going to have sex with their regular partner/s 6. I encourage friends who I hang out with to use condoms when they are going to have sex with their non regular partner/s 7. Friends who I hang out with feel comfortable taking to me if they suspect that they have an infection 8. I encourage friends who I hang out with to go to a doctor if they suspect that they have an infection 9. Friends who I hang out with encourage me to go to a doctor if I suspect that I have an infection	0.93
MOTIVATION	
Intentions (1: strongly disagree; 4: strongly agree) 1. I plan to get tested for HIV within the next three (3) months 2. I plan to get tested for STIs within the next three (3) months 3. I plan to use condoms consistently with my regular partners 4. I plan to use condoms consistently with my non-regular partners	0.87
Subjective Norms (1: strongly disagree; 4: strongly agree) 1. My partner will approve of using condoms 2. My peers will approve of me using condoms 3. My peers will approve of my getting tested for HIV 4. My partner will approve of my getting tested for STIs	0.89

Composite Variables	Year (N=501)
	Cronbach's Alpha
MOTIVATION	
Threat (Sex) (1: strongly disagree; 4: strongly agree) 1. I am not at risk for HIV if I don't have anal sex 2. I am not at risk for HIV if I don't have vaginal sex 3. I am not at risk for HIV if I don't oral sex	0.94
Threat (Rationalise) (1: strongly disagree; 4: strongly agree) 1. I am not the kind of person who is likely to get HIV 2. I am not at risk for another STD/STI if I am already infected with one 3. HIV is not as big a deal as the media makes it out to be	0.64