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## TRAC SUMMARY REPORT PSI DASHBOARD

ST LUCIA (2012): HIV/AIDS TRaC Study Evaluating Condom Use among Sexually Active Males 25 to 49 years, with three or more sexual partners in the last year in St. Lucia

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**ST LUCIA (2012): HIV/AIDS TRaC Study Evaluating Condom Use among Sexually Active Males 25 to 49 years, with three or more sexual partners in the last year in St. Lucia**

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## SUMMARY

### BACKGROUND & RESEARCH OBJECTIVES

The purpose of this study is to provide an assessment of the key health behaviors, determinants, and exposure to PSI/Caribbean programming among sexually active males 25 to 49 years, with three or more sexual partners in St Lucia, where PSI/Caribbean is implementing a KFW-funded project (CARISMA II) targeting males at risk. The survey was conducted in all ten (10) Parishes in St Lucia.

### DESCRIPTION OF INTERVENTION

PSI/Caribbean's program targeting sexually active males 25 to 49 years, with three or more sexual partners, delivers didactic and interactive BCC outreach activities, group sessions and face to face interventions combined with mass media. These activities are delivered by experienced Peer Educators trained by PSI/Caribbean. PSI/Caribbean in conjunction with the St Lucia Planned Parenthood (SLPPA) supports a health voucher system where males at risk are able to access a first time health service free of charge.

### METHODOLOGY

Time-location sampling (TLS) was used to recruit sexually active males 25 to 49 years, with three or more sexual partners at known hot spots in the baseline and follow-up. A total of 845 and 526 interviews respectively were completed for the baseline and follow-up studies. Analyses consisted of logistic regression and anovas to examine trends over time, to ascertain which determinants are correlated with key behaviors, and to examine the association between program exposure and changes in health behaviors and determinants. Socio-demographic characteristics and geographic location were controlled for in the analyses<sup>1</sup>

### MAIN FINDINGS

The monitoring table highlights that:

- :: The share of respondents who report condom use at last sex declined from 61.8% in 2010 to 47.9% in 2012 ( $p < 0.001$ ). Demonstrating correct condom use also went down from 37.7% in 2010 to 19.7% in 2012 ( $p < 0.001$ ). The significant decline in these indicators can be attributed to the reduction in the number of activities and interventions facilitated by the PSI-C BCC team which was a direct result from the bowing out of a major donor and other unanticipated challenges with the BCC team.
- :: Respondents who reported having received an HIV test in the past 12 months declined from 62.7% in 2010 to 35.4% in 2012 ( $p < 0.001$ ). Similarly, the share number of respondents who received an STI screening in the past 12 months also dropped from 37.3% in 2010 to 29.1% in 2012 ( $p < 0.01$ ).
- :: There were no significant changes in consistent condom use however there was an increase in the number of non-regular (casual) partners between the two comparative years. There was a reported 1.87 partners in 2010 and 2.41 partners in 2012 ( $p < 0.001$ ).
- :: A major at risk behaviour showed decline with respondents who reported engaging in anal sex in the last three months declined from 29.8% in 2010 to 15.2% in 2012 ( $p < 0.001$ ).

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

- :: Social norms, subjective norms and social support seem to play an important role in condom use. There was a significant increase from 76.4% to 84.8% ( $p < 0.01$ ) in respondents who felt that their peers think it is good to use condoms. Alongside this finding is the increase in the share number of respondents who feel that peers approve of their use of condoms [74.8% in 2010 to 90.8% in 2012 ( $p < 0.001$ )]. Additionally, respondents who reported that peers encourage them to use condoms with their partners also increased from 67.8% to 79.5% ( $p < 0.001$ ).
- :: While there was no significance difference in the socio-economic status of persons who were interviewed in 2010 versus 2012, findings show a widening of the pricepoints of willingness to pay. The pricepoint of a pack (3 units) of condoms regarded as too expensive increased from \$5.91 EC to \$6.48 EC ( $p < 0.001$ ); the pricepoint of a pack (3 units) of condoms regarded as too inexpensive declined from \$4.52 to \$4.18 EC ( $p < 0.001$ ) and the pricepoint of a pack (3 units) of condoms regarded as neither expensive or inexpensive increased from \$4.62EC to \$5.03EC ( $p < 0.001$ ).

The results of segmentation analysis indicate that the probability of sexually active males 25 to 49 years, with three or more sexual partners, correctly using condoms increases with:

- :: *Social Norms.* 84.8% of those who correctly demonstrate condom use were more likely to believe that their friends like using condoms with non-regular partner/s; the respective non-behaviour finding is 63.8% ( $p < 0.01$ ).
- :: *Threat.* Persons who reported that having one STI places you at a higher risk for contracting another were more likely to demonstrate correct condom use (68.9% vs. 55.4%;  $p < 0.05$ ).
- :: *Exposure.* 73.5% of those who demonstrate correct condom use had seen one or more 'GIGI' promotional items; the respective figure for non-behaviours is 45.3% ( $p < 0.001$ ). This finding can be directly related to the distribution strategy of promotional items. GIGI promotional items are used as an incentive during BCC sessions; the items are used to generate the interest among members of the target population. For example, when a participant is engaged in correct condom demonstration as a merit to participation and practice on the penile model they are given one of 'GIGI' promotional items (t-shirts, wristbands and dog tags).

The results of segmentation analysis indicate that the probability of sexually active males 25 to 49 years, with three or more sexual partners, consistently using condoms increases with:

- :: *Sexual Behaviour.* Predictably, those who said that they consistently used condoms over the previous three months were more likely to have used condoms consistently (92.3% vs 75.7%;  $p < 0.001$ ).
- :: *Intention.* Those respondents who planned to use condoms consistently with regular partners were also more likely to currently use condoms consistently (75.7% vs. 60.8%;  $p < 0.001$ )

The results of evaluation analysis indicate that mass media exposure did not show any significant findings:

- :: The mass media campaign included messages relating to consistent condom use and partner reduction. However, the look and appeal of the advertisements

for example, were targeted to youth as such members of the target population may not have identified with the mass media efforts.

#### **PROGRAMMATIC RECOMMENDATIONS**

- :: The program was successful in increasing HIV awareness. On the other hand, consistent condom use among sexually active males 25 to 49 years with, three or more sexual partners remains moderate to low. The results of segmentation analysis suggest that programmatic activities should focus on social norms and threats as drivers to correct condom use.
- :: Program messages should continue to focus on the importance of condom use with all partners at every sexual contact.
- :: HIV testing along with screening for other STIs among the target population needs to be promoted and emphasis should be placed on reinforcing that unprotected sex even with permanent partners can put one at risk for HIV and other STIs.
- :: Mass media messages should continue to place emphasis on the importance of condom use with all partners at every sexual contact and the benefits of getting tested for HIV and other STI's, the look and appeal of these messages should focus more on sexually active males 25 to 49 years with three or more sexual partners.

The above recommendations will be implemented through the PSI-C St Lucia males at risk program's main activities: maintaining access and availability to condoms by consistent restocking of sales outlets; Behaviour Change Communication (BCC) which focuses on increasing condom use with all partners. BCC approaches should also include: building the capacity to use condoms, signs of sexually transmitted infections, factors that assist with the analysis of self-risk perception and increasing uptake of SRH services including testing for HIV and other sexually transmitted infections.

## MONITORING TABLE

Trends in behaviours, OAM determinants of behaviours and exposure among sexually active males 25 to 49 years, with three or more sexual partners in St Lucia, 2012

**Risk:** Sexually active males 25 to 49 years, with three or more sexual partners

**Behavior:** Consistent Condom Use during the last 30 days

INDICATORS <sup>2</sup>	March 2010 N=845	Nov 2012 N=526	Sig.
<b>BEHAVIOR/USE</b>			
- ● Condom use at last sex	61.8%	47.9%	***
- Condom use at last sex (from beginning to end)	86.8%	90.6%	ns
- ● Demonstrating correct condom use (8 items) <sup>3</sup>	37.7%	19.7%	***
- Received HIV test in last 12 months	62.7%	35.4%	***
- Received STI Screening in last 12 months	37.3%	29.1%	**
- Have a male condom at present	47.6%	43.3%	ns
- Anal sex in the last three months	29.8%	15.2%	***
<b>NEED/RISK</b>			
- Consistent condom use with all sexual partner/s in the last 30 days	27.7%	28.9%	ns
- Consistent condom use with all other sexual partner/s in the last 30 days (excluding regular partners) <sup>4</sup>	53.0%	59.1%	ns
- Consistent condom use with regular female partner/s in the last 30 days <sup>5</sup>	27.3%	29.3%	ns
- Consistent condom use with female partner/s with no benefits in the last 30 days <sup>6</sup>	64.5%	71.5%	ns
- Consistent condom use with female partner/s with benefits in the last 30 days <sup>7</sup>	76.5%	83.5%	ns
- Consistent condom use with male partner/s in the last 30 days <sup>8</sup>	73.7%	53.8%	ns
All Males at Risk who indicated that they had this type of partner			
- Regular female partners in the last 30 days <sup>9</sup>	1.57	1.69	ns
- Female partners with no benefits during the last 30 days <sup>10</sup>	1.87	2.41	***
- Female partners with benefits during the last 30 days <sup>11</sup>	1.60	1.74	ns
- Male partners during the last 30 days <sup>12</sup>	2.08	1.71	ns
- Total number of partners during the last 30 days	3.88	3.73	ns
<b>OPPORTUNITY</b>			
	% or Mean	% or Mean	
Availability			
- Availability Scale (1-4) <sup>13</sup>	3.45	3.49	ns
- ● I can get a condom when I need one	93.1%	93.8%	ns
- The last time that I bought or received a condom I got it from a Non-traditional outlet	58.9%	53.7%	ns
Brand Appeal			

<sup>2</sup> Unless otherwise stated the value of multi-item scales range from 1 to 4

<sup>3</sup> Demonstrating scale 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.

<sup>4</sup> (2010 N= 721; 2012 N=348)

<sup>5</sup> (2010 N= 687; 2012 N=335)

<sup>6</sup> (2010 N= 584; 2012 N=282)

<sup>7</sup> (2010 N= 410; 2012 N=59)

<sup>8</sup> (2010 N= 69; 2012 N=4)

<sup>9</sup> (2010 N= 687; 2012 N=335)

<sup>10</sup> (2010 N= 584; 2012 N=282)

<sup>11</sup> (2010 N= 410; 2012 N=59)

<sup>12</sup> (2010 N= 69; 2012 N=4)

<sup>13</sup> Availability Scale includes: 1. Condoms are available where I live/hang out during the night; 2. Shops nearby here always have condoms for sale; 3. Condoms are available where I live/hang out during the day; 4. I can get a condom when I need one

- The brand of condom really does not matter to me (strongly agree and agree)	40.1%	47.9%	*
- Preferred brand of condom endorsed by GIGI	9.9%	6.8%	ns
<b>Social Norm</b>			
- My friends think that it is good to use condoms when having sex (strongly agree and agree)	76.4%	84.8%	**
<b>ABILITY</b>			
Knowledge	% or Mean	% or Mean	
- Knowledge Index (0-4) <sup>14</sup>	10.49	11.32	***
- Consistent condom use reduces the risk of getting HIV/STIs (strongly agree and agree)	90.5%	94.8%	*
<b>Social Support</b>			
- Social Support Scale (1-4) <sup>15</sup>	2.89	3.08	**
- Friends who I hang out with encourage me to use condoms with my partner/s (strongly agree and agree)	67.8%	79.5%	***
<b>Self-Efficacy</b>			
- I can convince my partner/s to use a condom	92.2%	93.7%	ns
<b>MOTIVATION</b>			
	% or Mean	% or Mean	*, ** or ***
<b>Belief</b>			
- Using condoms make sex less adventurous (strongly agree and agree)	62.3%	65.9%	ns
<b>Intention</b>			
- Intentions Scale (1-4) <sup>16</sup>	2.08	1.86	***
- I plan to use condoms consistently with my non-regular partners (strongly agree and agree)	84.3%	85.4%	ns
<b>Locus of Control</b>			
- Locus of control Scale <sup>17</sup>	2.40	2.35	ns
- I am directly responsible for the maintenance of my health (strongly agree and agree)	96.9%	95.9%	ns
<b>Subjective Norm</b>			
- Subjective Norm	3.25	3.45	***
- Peers approve of use of condoms (strongly agree and agree)	74.8%	90.8%	***
<b>Threat</b>			
- I am risk for HIV if I have unprotected sex with my non-regular partner (strongly agree and agree)	91.0%	90.6%	ns

<sup>14</sup> Knowledge Index consisted of 14 True/False type questions: 1. Having an STI can increase the likelihood of contracting HIV; 2. Correct condom use reduces the risk of getting HIV, STI; 3. Consistent condom use reduces the risk of getting HIV, STI; 4. The use of creams, oils or Vaseline as a lubricant can damage a condom; 5. Anal sex has the highest risk for contracting HIV; 6. Oral sex is safe if partners do not swallow; 7. Douching after sex will prevent a woman from contracting an STI; 8. HIV is small enough to pass through condoms; 9. If a man ejaculates enough before sex he cannot pass on HIV; 10. HIV can be prevented by reducing the number of sexual partners 11. HIV can be prevented by being mutually faithful (if no one has HIV); 12. HIV can be prevented by abstinence; 13. HIV can be transmitted through mosquito bites; 14. HIV can be transmitted by shaking hands with someone with HIV

<sup>15</sup> Social support scale includes: 1. Friends who I hang out with encourage me to use condoms with all my partners; 2. I can discuss with my friends the possibility of a person contracting an STD/STI if he 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 regular partners; 5. My friends and I discuss the use of condoms with commercial partners; 6. I encourage friends who I hang out with to use condoms when they are going to have sex with their regular partner/s; 7. I encourage friends who I hang out with to use condoms when they are going to have sex with their non-regular partner/s; 8. My friends and I discuss the use of condoms with commercial partners; 9. Friends who I hang out with feel comfortable talking to me if they suspect that they have an infection; 10. I encourage friends who I hang out with to go to the doctor if they suspect that they have an infection; 11. Friends who I hang out with encourage me to go to the doctor if I suspect that I have an infection.

<sup>16</sup> Intentions scale includes: 1. I plan to get tested for HIV within the next three months; 2. I plan to get tested for STI's within the next three months; 3. I plan to use condoms consistently with my regular partners; 4. I plan to use condoms consistently with my non-regular partners; 5. I plan to use condoms consistently with my commercial partners.

<sup>17</sup> Locus of Control Scale: 1. I am in control of using condoms or not when I have sex; 2. There is not much that I can do to prevent becoming infected with HIV; 3. Sooner or later I will become infected with an STI; 4. I am directly responsible for the maintenance of my health



- I am not the kind of person who is likely to get HIV (strongly agree and agree)	49.6%	43.3%	*
Willingness to Pay			
- Price of pack of condoms containing 3 is too expensive	\$5.91	\$6.48	***
- Price of pack of condoms containing 3 too inexpensive	\$4.52	\$4.18	***
- Price of pack of condoms containing 3 neither expensive nor inexpensive	\$4.62	\$5.03	***
Exposure			
- How would you describe the number of times that you have seen the "Got it Get it" logo in the last three (3) months (always and most times)	57.2%	36.2%	***
- How would you describe the number of times that you have heard a "Got it Get it" radio advertisement in the last three (3) months (always and most times)	29.4%	20.5%	**
- How would you describe the number of times that you have seen a "Got it Get it" TV advertisement in the last three (3) months (always and most times)	53.9%	50.8%	ns
- How would you describe the number of times that you have seen a "Got it Get it" promotional item in the last three (3) months (always and most times)	64.7%	50.8%	***

Notes:

\*=p<0.05 \*\*=p<0.01 \*\*\*=p<0.001 ns= no significance

● Donor Indicator

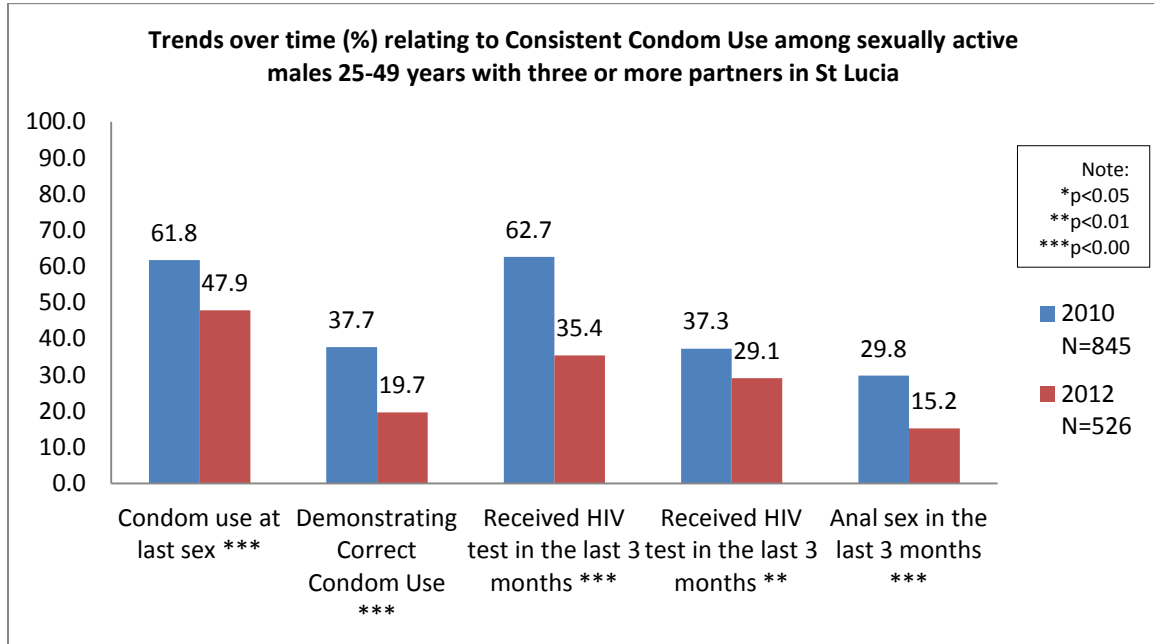
(r): These indicators were asked in the questionnaire in opposite direction, for aims of analysis of this table must of being interpreted as they are written here

The scales which measured the determinants of OAM were 1 to 4 (1 = strongly disagree, 2 = disagree, 3 = agree, 4 = strongly agree). The percentages and adjusted means were obtained controlling for socio-demographic variables following two surveys (2010 and 2012): age, marital status, education and socio-economic status.

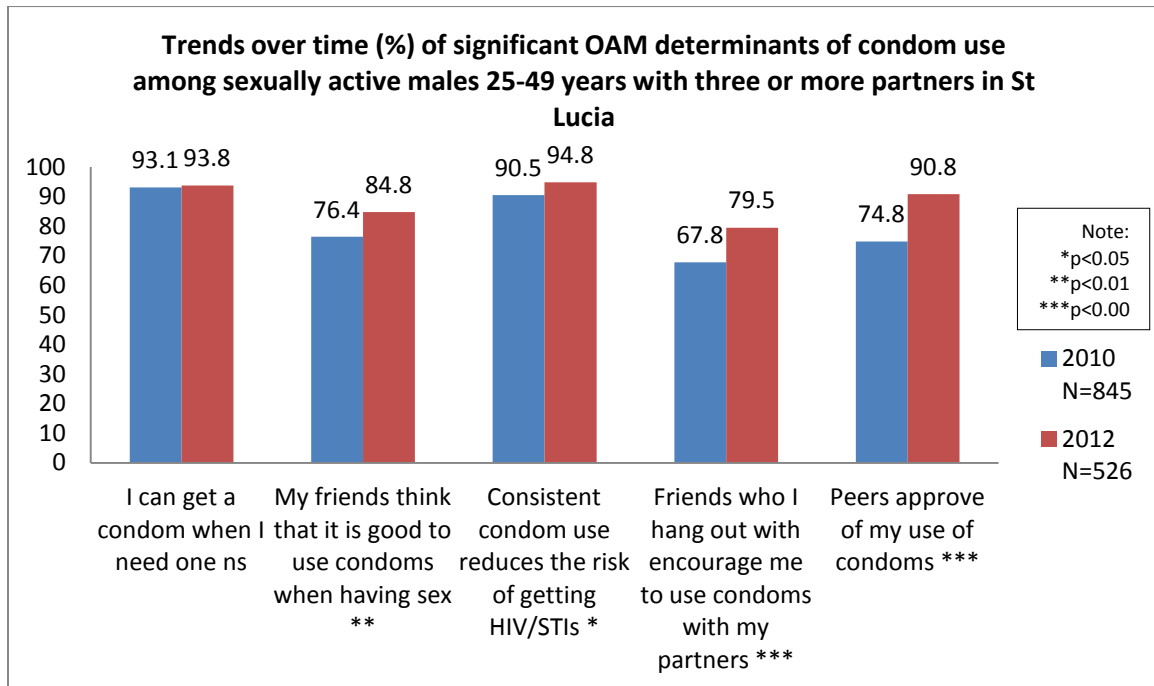
The percentages were obtained through an analysis of univariate, which can be appreciated from two rounds of study hence, in 2010 (first measurement) there is no comparative. This can bring about a difference of several percentage points between the results presented/displayed in those then and contents in this report.

## MONITORING GRAPHS

**Monitoring Graph 1:**



**Monitoring Graph 2:**



### SEGMENTATION TABLE 1:

Determinants of correct condom use in St Lucia 2012

**Risk:** Sexually active males 25 to 49 years, with three or more sexual partners

**Behavior:** Correct Condom Use

INDICATORS	Behavior N=84 20%	Non-Behavior N=333 80%	OR	Sig.
<b>OPPORTUNITY</b>	% or Mean	% or Mean	OR	* * * * *
<b>Social Norm</b>				
- My friends like to use condoms with their non-regular partners (4) (1-4)	84.8%	63.8%	0.41	**
<b>MOTIVATION</b>	% or Mean	% or Mean	OR	* * * * *
<b>Threat</b>				
- I am more at risk for another STD/STI if I am already infected with one	68.9%	55.4%	0.55	*
<b>EXPOSURE</b>	% or Mean	% or Mean	OR	* * * * *
- Have you seen one or more 'GIGI' promotional items	73.5%	45.3%	3.67	***

Notes:

\*:p<0.05; \*\*:p<0.01; \*\*\*:p<0.001; ns: no significance

Hosmer-Lemeshow goodness-of-fit:  $\chi^2$  (df=5) = 0.634, p=0.986

Omnibus goodness-of-fit:  $\chi^2$  (df=3) = 34.43, p<0.000

Cox & Snell R<sup>2</sup>=0.083

Scale values range from 1 to 5: 1 = totally disagree, 2 = disagree, 3 = agree, 4 = totally disagree

(r): This item was asked in the opposite direction during the interview, for analysis it should be interpreted as expressed in this table

**SEGMENTATION TABLE 2:**

Determinants of consistent condom use in St Lucia 2012

**Risk:** Sexually active males 25 to 49 years, with three or more sexual partners

**Behavior:** Consistent Condom Use

INDICATORS	Behavior (Consistent) N=251 60%	Non-Behavior (In-consistent) N=166 40%	OR	Sig.
<b>SEXUAL BEHAVIOUR</b>	% or Mean	% or Mean	OR	***,*** , or ns
- How would you describe your condom use over the last three (3) months	92.3%	75.7%	3.38	***
<b>MOTIVATION</b>	% or Mean	% or Mean	OR	***,*** , or ns
<b>Intention</b>				
- I plan to use condoms consistently with my regular partners	75.7%	60.8%	2.80	***
<b>Threat</b>				
- I am more at risk for getting someone pregnant than contracting a STD/STI	40.1%	45.2%	0.63	*

Notes:

\*:p<0.05; \*\*:p<0.01; \*\*\*:p<0.001; ns: no significance

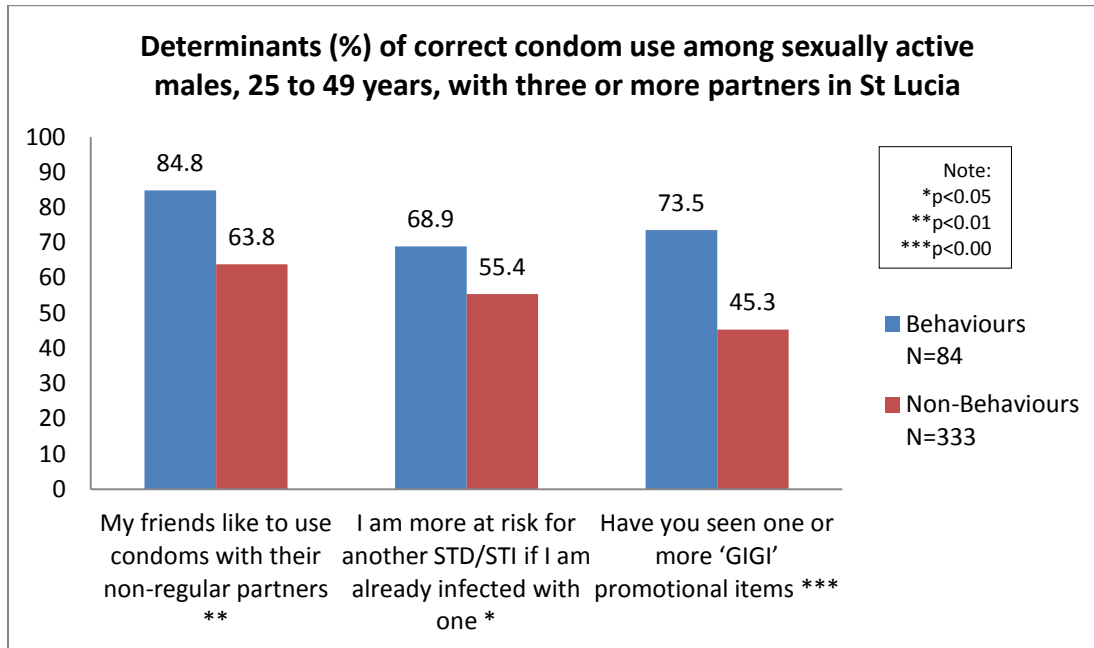
Hosmer-Lemeshow goodness-of-fit:  $\chi^2$  (df=3) = 0.216, p=0.975

Omnibus goodness-of-fit:  $\chi^2$  (df=3) = 52.43, p<0.000

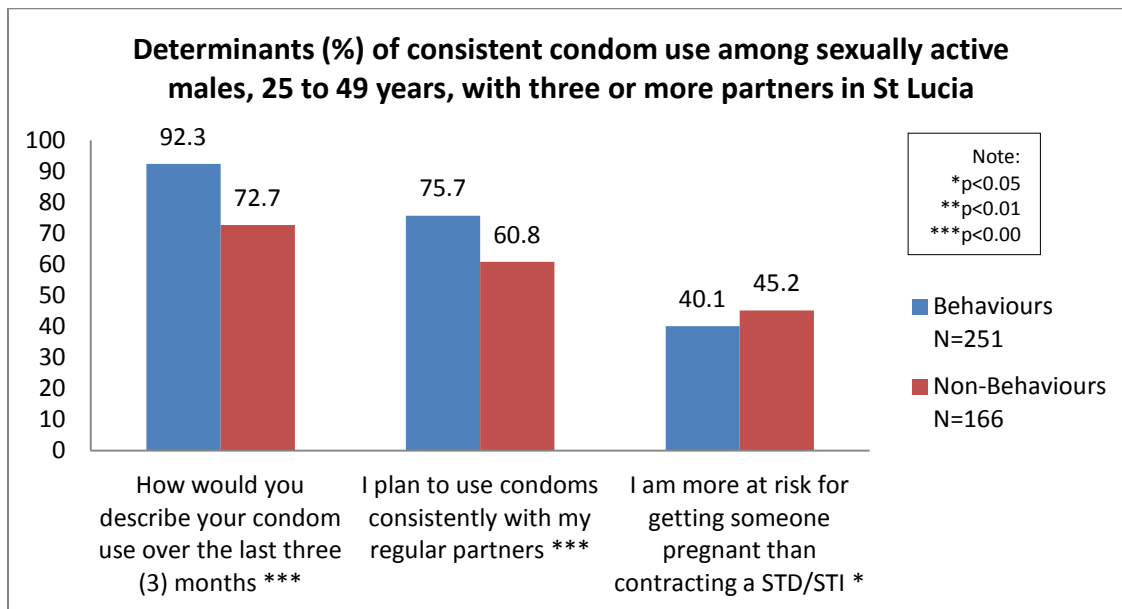
Cox & Snell R<sup>2</sup>=0.121

## SEGMENTATION GRAPHS

### SEGMENTATION GRAPH 1:



### SEGMENTATION GRAPH 2:



## EVALUATION TABLE

Impact of 'GIGI' mass media, St. Lucia 2012

**Risk:** Sexually active males 25 to 49 years, with three or more sexual partners

**Behavior:** Correct and consistent condom use

INDICATORS	BASELINE 2010		FOLLOW UP 2012		Sig *, **, *** or ns
	Non-Exposed N=471	Exposed N=488	Non-Exposed N=115	Exposed N=191	
<b>BEHAVIOUR/USE</b>					
- Condom use at last sex	55.9% <sup>a</sup>	63.0% <sup>a</sup>	52.7% <sup>a,b</sup>	43.2% <sup>b</sup>	***
- Received HIV test in last 12 months	56.6% <sup>a</sup>	61.4% <sup>a</sup>	41.8% <sup>b</sup>	37.5% <sup>b</sup>	***
- Received STI Screening in last 12 months	32.2%	37.1%	31.2%	29.6%	ns
- Female partners with no benefits (casual) during the last 30 days	1.65 <sup>a,b</sup>	1.52 <sup>a</sup>	2.10 <sup>b,c</sup>	2.27 <sup>c</sup>	**
<b>BRAND APPEAL</b>					
- The brand of condom really does not matter to me	45.4% <sup>a</sup>	33.4% <sup>b</sup>	46.1% <sup>a</sup>	49.6% <sup>a</sup>	**
<b>SOCIAL NORM</b>					
- My friends think that it is good to use condoms when having sex	80.6% <sup>a</sup>	74.2% <sup>b</sup>	96.5% <sup>c</sup>	78.1% <sup>a,b</sup>	***
<b>SOCIAL SUPPORT</b>					
- Friends who I hang out with encourage me to use condoms with my partner/s	68.3% <sup>a</sup>	67.9% <sup>a</sup>	84.0% <sup>b</sup>	79.5% <sup>b</sup>	**
<b>SUBJECTIVE NORM</b>					
- Peers approve of my use of condoms	74.1% <sup>a</sup>	76.2% <sup>a</sup>	93.9% <sup>b</sup>	91.3% <sup>b</sup>	***

Note:

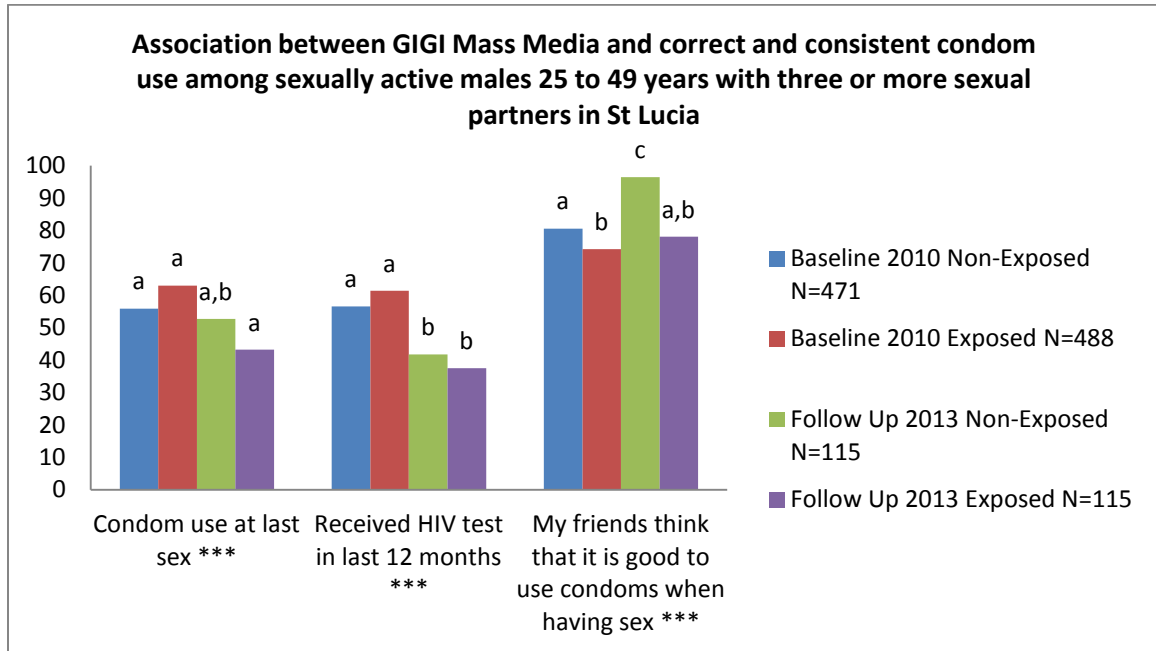
\* p<0.05, \*\* p<0.01, \*\*\* p<0.001, ns= not significant

Percentages and means were calculated controlling by year, exposure to mass media, age, marital status, education and socio-economic status.

Pair-wise comparisons were calculated to reflect significant differences in the exposure variable. Values with the same letter in their superscripts do not differ significantly from one another according to a Least Significant Distance (LSD) test with a .05 limit on family wise error rate.

EVALUATION GRAPHS

EVALUATION GRAPH 1:



## SUMMARY OF EFFECT TABLE: DASHBOARD INTERPRETATION

Program: St Lucia HIV/AIDS Program, 2012

Study Population: Sexually active males 25 to 49 years, with 3 or more sexual partners

Outcomes: Correct and consistent condom use

INDICATORS	Change over time (Monitoring)	Association with program exposure (Evaluation)	Programmatic effect <sup>18</sup>
	+, -, or not sig.	+, -, or not sig.	Positive, Negative, or no impact
<b>BEHAVIOUR/USE</b>			
- Condom use at last sex	-	ns	No impact
- Received HIV test in last 12 months	-	ns	No impact
- Received STI Screening in last 12 months	-	ns	No impact
- Female partners with no benefits (casual) during the last 30 days	-	ns	No impact
<b>OPPORTUNITY</b>			
<b>Brand Appeal</b>			
- The brand of condom really does not matter to me	+	ns	No impact
<b>Social Norm</b>			
- My friends think that it is good to use condoms when having sex	+	-	No impact
<b>ABILITY</b>			
<b>Social Support</b>			
- Friends who I hang out with encourage me to use condoms with my partner/s	+	ns	No impact
<b>Subjective Norm</b>			
- Peers approve of my use of condoms	+	ns	No impact



## POPULATION CHARACTERISTICS

POPULATION CHARACTERISTICS	2010: N=845	2012: N=526
	% or mean	% or mean
Average age	34.56	34.70
Marital Status		
- Unmarried living with sex partner	32%	35.7%
- Single	42%	44.1%
- Married living with spouse or sex partner	17%	13.0%
- Married not living with spouse	7%	2.7%
- Other	1%	4.6%
Education		
- Never attended school	1%	0.7%
- Did not finish primary school	8%	6.0%
- Primary	19%	26.7%
- Secondary	54%	49.6%
- Tertiary	15%	14.7%
- University	3%	2.2%
Employed		
- No	15%	15.7%
- Yes	85%	84.3%
Monthly Income		
- No income	2%	7.3%
- 1 - 249	1%	1.3%
- 250 – 499	1%	3.5%
- 500 – 999	13%	11.9%
- 1000 – 1499	23%	19.7%
- 1500 – 1999	18%	15.9%
- 2000 – 2999	16%	16.2%
- 3000 and above	12%	19.2%
- No response	15%	4.8%
TV		
- No	6%	4.9%
- Yes	94%	95.1%
Radio		
- No	9%	7.9%
- Yes	91%	92.1%
DVD Player		
- No	20%	31.3%
- Yes	80%	68.7%
Computer Desktop/Laptop		
- No	46%	38.4%
- Yes	54%	61.6%
Cell Phone		
- No	7%	4.6%
- Yes	93%	95.4
MP3 Player		
- No	58%	61.8%
- Yes	42%	38.2%
Internet		
- No	55%	43.7%
- Yes	45%	56.3%
Cable/Satellite		
- No	24%	14.7%
- Yes	76%	85.3%
Car		
- No	57%	59.8%
- Yes	43%	40.2%

## RELIABILITY ANALYSIS

Composite Variables	2010 (N=845) Cronbach's Alpha	2012 (N=526) Cronbach's Alpha
<b>OPPORTUNITY</b>		
<b>Availability (1- strongly disagree to 4 – strongly agree)</b>		
1. Condoms are available where I live/hang out during the night		
2. Shops nearby here always have condoms for sale		
3. Condoms are available where I live/hang out during the day	0.87	0.86
4. My preferred condom is always available in nearby shops/supermarkets		
5. I can get a condom when I need one		
<b>ABILITY</b>		
<b>Social Support A – (1- strongly disagree to 4 – strongly agree)</b>		
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	0.89	0.94
4. My friends and I discuss the use of condoms with regular partner/s		
5. My friends and I discuss the use of condoms with commercial partner/s		
6. I encourage friends who I hang out with to use condoms when they are going to have sex with their regular partner/s		
7. I encourage friends who I hang out with to use condoms when they are going to have sex with their non regular partner/s		
<b>Social Support B – (1- strongly disagree to 4 – strongly agree)</b>		
8. Friends who I hang out with feel comfortable talking to me if they suspect that they have an infection		
9. I encourage friends who I hang out with to go to a doctor if they suspect that they have an infection	0.93	0.79
10. Friends who I hang out with encourage me to go to a doctor if I suspect that I have an infection		
<b>Self Efficacy – (1- strongly disagree to 4 – strongly agree)</b>		
1. I can convince my partners to use a condom		
2. I feel comfortable asking my partners to use a condom		
3. I would feel comfortable refusing to have sex if my partner or I do not have a condom	0.77	0.71
4. I know how to use a condom when I have sex		
<b>MOTIVATION</b>		
<b>Beliefs (1- strongly disagree to 4 – strongly agree)</b>		
1. If my partner comes from a good family I am less likely to use condoms		
2. Using condoms make sex less adventurous		
3. If my regular partner says that they use condoms with other partners there is no need to use condoms	0.84	0.82
4. If my casual partner says that they use condoms with other partners there is no need to use condoms		
5. Condom use is only necessary with a commercial partner		
6. Condom use is only necessary with a casual partner		
<b>Subjective Norms (1- strongly disagree to 4 – strongly agree)</b>		
1. My partner will approve of using condoms		
2. My peers will approve of me using condoms	0.91	0.90
3. My peers will approve of my getting tested for HIV		
4. My partner will approve of my getting testing for STIs		
<b>Threat A (1- strongly disagree to 4 – strongly agree)</b>		
1. I am not at risk for HIV if I don't have anal sex	0.89	0.92
2. I am not at risk for HIV if I don't have vaginal sex		

<p>3. I am not at risk for HIV if I don't have oral sex</p> <p><b>Threat B (1- strongly disagree to 4 – strongly agree)</b></p> <p>4. I am risk for HIV if I have unprotected sex with my regular partner/s</p> <p>5. I am risk for HIV if I have unprotected sex with my non-regular partner/s</p> <p>6. I am risk for HIV if I have unprotected sex with my commercial partner/s</p>	0.75	0.77
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