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South Africa: Providers should encourage sexually active youth to use condoms

Frontiers in Reproductive Health

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South Africa Youth

Providers Should Encourage Sexually Active Youth To Use Condoms

OR Summary 24

Many sexually active young people in South Africa are knowledgeable about the sexual transmission of HIV/AIDS, but they do not use condoms consistently. Service providers can do more to promote condom use among youth by placing condom dispensers in private places. Service providers should counsel youth on correct condom use and safer sexual practices.

Background

To assess the effectiveness of youth centers in reaching adolescents with reproductive health information, life skills and services, the Reproductive Health Research Unit (RHRU) in KwaZulu Natal and Population Council conducted an assessment of 12 youth centers and their affiliated peer education programs. The centers were run by the KwaZulu-Natal Department of Health (KZN DoH), the *loveLife* program, and the Youth and Adolescent Reproductive Health Program (YARHP). The overall study addressed the effectiveness of the youth centers (see *OR Summary 23*); but researchers also examined young people's use of condoms as protection against pregnancy and HIV/AIDS.

Data sources for this study, conducted in 2000, were: an inventory of youth center services, interviews with center staff and clients, service statistics, and community surveys of 1,399 young people aged 12-24 and their parents.

Findings

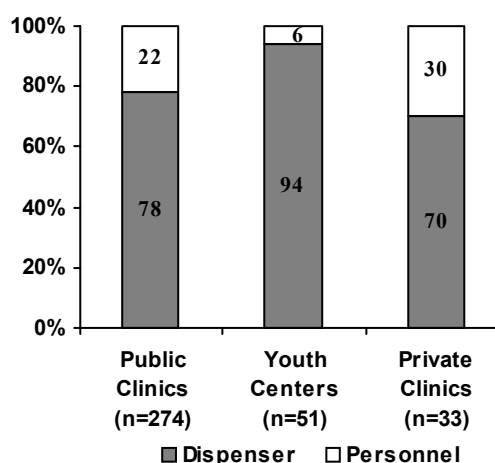
◆ Condom use is relatively high among sexually active youth, but there is room for improvement. More than 70 percent of sexually experienced adolescents living near the youth centers have used condoms. About one-third of sexually experienced boys and girls reported that they had consistently used condoms

during the last five acts of intercourse. Boys are more likely than girls to use condoms.

◆ Youth are more likely to obtain condom supplies from public clinics (cited by 63% of condom users as their most recent source) than from youth centers (11%), friends (9%), and private clinics (8%). Among sexually active youth who had visited youth centers, 52 percent obtained condoms from the youth center, but 36 percent still relied on public clinics for condom supplies.

◆ Young people report that they most often take condoms from a dispenser or box rather than from health personnel (see Figure). Very few youth center visitors obtained condoms from the nurse or

Source of Condoms by Type of Facility



other health providers. Young people appear to be reluctant to ask for condoms. However, none of the 12 youth centers visited had condom dispensers in private places such as the restrooms, which offer anonymity.

◆ Among young people who had never used a condom, roughly 30 percent said that their main reason for non-use was that they trusted their partner. When asked if there was ever a time that they had not used a condom when they wanted to, more than two in five boys and girls said that a condom was not on hand. Boys were more likely to say that sex was not planned, while girls explained that their partner did not approve of condom use.

◆ Youth are more knowledgeable about HIV/AIDS than pregnancy prevention. More than three in four youth correctly answered six questions about HIV/AIDS transmission. Also, 43 percent of youth know someone who has died of AIDS. However, fewer than one in five young people could identify the fertile period during a woman's cycle.

◆ Girls who had become pregnant were more likely than non-pregnant girls to have experienced forced sex, offers of money or gifts in exchange for sex, and beatings by a partner. Earlier sexual initiation was not associated with becoming pregnant.

Policy Implications

◆ Youth center programs should focus on promoting condom use among sexually active youth. Program managers need to separately address boys' reasons and girls' reasons for non-use of condoms, and to design appropriate messages for young people.

◆ Health programs should make condom supplies easily available to young people, keeping in mind that youth also need counseling on condom use and safer sexual practices. Condom dispensers are acceptable sources, despite problems such as malfunction, stockouts, and the need for regular restocking.

◆ Nurses in youth centers should promote condom use during sessions with young people, including explanations of correct use. They should also be alert to situations and behaviors that put young people at risk of unplanned pregnancy and sexually transmitted infections, including HIV/AIDS.

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