EXECUTIVE SUMMARY

Many studies have found that condom use is rare among couples who are married or in steady relationships in developing countries. People are much more likely to use condoms with casual partners. Is it futile to try to get couples in primary relationships to use condoms? Do they even need to use condoms?

This Condom Use Study sought to understand the dynamics of consistent condom use among steady partners. Using in-depth interviews and four focus groups discussions, it compared urban Ugandan couples (married or in stable relationships) recruited from a clinical trial on HIV and hormonal contraception: 39 couples who were consistent condoms users and ten couples who were inconsistent condom users. Consistent users were defined as those reporting that they used condoms 100% of the time they had sex with their steady partner in the three months preceding the Study; inconsistent users reported less than 100% use during the same period. The analysis gives greater weight to results for consistent users, given their larger sample size.

As part of their participation in the previous clinical trial, female partners had been counseled, often through a group or seminar approach, on the importance and mechanics of condom use and had received condom supplies as well as information on HIV and contraception.

The paper is comprehensive and emphasizes the respondents' own words, quoting extensively from interviews and focus groups. From it, short papers on initiating and sustaining condom use by stable couples will be drawn. In many quotes, one is struck by the indirect, sometimes euphemistic, ways many respondents expressed themselves, especially on delicate topics such as infidelity. For example, one respondent stated, "In our relationship, we were not sure of each other's movements so we decided to use the condom," suggesting delicately that both partners may be unfaithful. A summary of the results from the Condom Use Study, organized under seven topics, appears below, followed by conclusions.

Couple Perceptions of Condoms

All but one participant in the focus group discussions (FGDs) agreed that the image of condoms and condom users had improved in the past ten years. Both consistent and inconsistent users had positive perceptions of condoms and condom users. At the same time, some FGD respondents were concerned that condoms foster promiscuity among youth or adults.

Reasons Couples Use Condoms

Uganda has both a large number of HIV infected individuals and very high fertility. Thus, it is not surprising that couples identified two main reasons for using condoms: to prevent infection with STIs, especially HIV/AIDS, and for family planning (FP). A few respondents reported negative experiences with other FP methods. Many expressed a fear of getting infected with HIV. Some were concerned about infecting their partner. For some, an HIV test was a motivating event for condom use—for example, one partner tested negative and wanted to stay that way by asking the other partner to get an HIV test and/or use condoms. It was also common for respondents to mention using condoms for both infection protection and FP.

Condom Negotiation and Use

Those who initiated condom use typically expected a negative reaction from their partners. Only five respondents expected their partners to accept the idea. Of those who expected their partners to refuse, 21 were women and six were men. Respondents, especially women, expected their partners to accuse them of cheating on them or distrusting them.

<u>Women's roles</u>: In this sample, women played a major role in facilitating couples' condom use. In the majority of consistent condom-using couples, women initiated the discussion of condoms. A small but significant number of women also convinced reluctant or resistant male partners to use condoms. This strong role for women may have been due to the fact that women participated in the clinical trial where they had received frequent condom counseling and supplies and had been briefed on HIV and contraception.

Women used different approaches to gain cooperation in condom use. Some took an assertive approach, insisting on condom use and sometimes refusing to have sex with partners unless condoms were used. Other women convinced partners by persuasion and persistence. A few women insisted on condom use even when partners wanted to stop. Women also played a major role in obtaining free condoms from the clinical trial. When the couple had to find a new source of condoms after the clinical trial ended, it was generally considered the male's job.

<u>Men's roles</u>: In our sample, men initiated discussions on condoms in a minority of couples. While in the majority of couples women initiated the discussion, most male partners accepted condom use with little or no resistance. Some were even happy to use them. This agreeableness or willingness to use condoms on the part of men was a pleasant surprise for women who had feared male resistance.

Reasons for the willingness of the men in this sample to accept condoms include their concern about HIV infection, a desire to control family size, and an interest in maintaining a relationship with their partner. Men also played a role in facilitating consistent condom use by purchasing condoms when the couple ran out of their free supply. In a few cases, they convinced partners to continue using condoms when the female partner wanted to stop.

Getting Used to the Condom

Successful condom use requires a learning and adjustment period until it becomes a normal, even routine, occurrence—as common as having and using salt in the home¹ according to one respondent. Given the threats of HIV infection and concerns about unintended pregnancy, most consistent users had come to accept the condom as a rational response to their situation. Over time, some felt that there was no difference in sex when using a condom. However, some couples did report struggles and problems with condom use (such as irritation from the latex condom or the lubricant, interrupted sex, longer or shorter time to climax). Most users managed to persist, despite these problems.

The main difference between consistent and inconsistent users was that the latter's use depended on a situation that was subject to change. For example, they used condoms to postpone a pregnancy temporarily or when a partner had an STI. But when the situation changed, they discontinued condoms.

¹ "On my side, I made it very easy with my wife, because of the reason that we consider it [using condoms] like having salt in the home."

Condoms, Sexual Intimacy and Quality of Relationships

Most respondents reported they were satisfied with the sexual relationship with their steady (or marriage) partner. For the majority of participants, condom use did not affect their sex life. Inconsistent users were no more likely to report negative aspects associated with condom use than consistent users.

Overall, a majority of respondents reported they were happy in their relationships and thought their partners were happy as well. They were satisfied with their knowledge of their partners, and happy with their partner's knowledge of them. Most respondents rated themselves to be close to their partners. However, they thought their partners regarded them as not close enough, especially the men.

The majority of respondents (28 women and 25 men) reported a high level of openness with their spouse about their sexual needs. Fewer women than men stated that they trusted their spouse. More women than men were happy with the decision to use condoms. Similar to consistent users, inconsistent users reported they were satisfied with the quality of their current relationship.

Gender and Power

Previous research has found that when women have more power in relationships, they are more likely to use condoms. Among the couples interviewed, most adhered to traditional gender norms. Men were generally considered the authority in the household and made more major decisions. However, there was evidence that while men had more overall power, most of the women had some power in the relationship. For example, most couples said they resolved differences by discussing and trying to reach a compromise, rather than deferring to the male's wishes. Most women said they made certain decisions regarding the household on their own, while some women said that the couple shared all of the decision-making.

The majority of women expected resistance to condom use by their partners. Some women felt it took courage to bring up the topic. The support for condoms by the clinical trial staff as well as information on condoms from the media and community meetings as well as having an HIV test appeared to have increased women's confidence in asking their partners to use condoms. No respondent mentioned instances of domestic violence related to condom use.

Couple Agreement and Communication

A number of couples emphasized that agreement between partners on the condom issue is a key to consistent condom use. Both partners must see the value and be comfortable using condoms. They must agree that condom use is necessary or beneficial for them. Related to coming to an agreement on condom use, couples noted that communication between partners is essential to consistent condom use. Consistent condom using couples in this Study reported high levels of communication and believed that this helped them achieve consistent condom use. Aspects of communication noted as important to consistent condom use included discussion, agreement, trust and honesty.

Conclusions

Any conclusions must be put in the context of the particular Study sample. Compared to the Ugandan population, Study couples were more likely to live in an urban area (i.e., they resided

in Kampala), were better educated, and had non-agricultural occupations. The female partners, as participants in an intensive clinical trial on hormonal contraception and HIV, had received frequent counseling on HIV, contraception, and condoms as well as condom supplies.

Acknowledging the small sample size and the fact that respondents were recruited from a clinical trial, the Study suggests that it is not a lost cause to promote consistent condom use among stable partners, especially in countries with high HIV prevalence and among couples who do not want more children (or want to delay childbearing). Many respondents appreciated the protective value of condoms against disease and unintended pregnancy and were relieved that their partner agreed to use condoms.

Although this Study has limitations, it challenges a number of stereotypes about condom use in Africa: That it is almost impossible to introduce the use of condoms into a stable relationship. That women cannot influence men in stable relationships. That men will strongly resist using condoms. That condom use harms sexual relationships. That couples will not use condoms as contraceptives. Given a supportive environment, condom supplies, and the twin realities of the HIV epidemic and a high fertility, we believe that in the 21st century, there is clearly a market for condom use among stable couples which has not been tapped.

These stable couples clearly perceive that they need to use condoms. Both men and women in this Uganda Study had serious concerns about contracting HIV. Some partners had legitimate concerns about their partner's sexual fidelity. Equally important, many wanted to control their fertility and some preferred condoms to other FP methods.

However, even when there were good reasons for using condoms, it was often awkward to initiate the topic of condom use in a stable relationship because of the implied distrust. Having the support of counseling, media promotion, HIV testing, seminars and easily available supplies can help couples "break the ice" and facilitate communication and women's empowerment. When the topic of condom was broached among these couples, male resistance tended to be less than the women had expected.

Female insistence on condom use did not upset male participants as much as might be expected. In fact, some seem to cheerfully accept it although not always for the best of motives (i.e., so they could continue to have multiple partners).

Successful condom users, both male and female, could be used to promote condom use in their communities, in the media (i.e., radio programs), or in research which depends on high rates of condom use. Many Study participants were articulate about the advantages of using condoms and how condoms could be integrated into a satisfying sexual relationship.

Perhaps one reason why so few stable couples in developing countries use condoms is that program managers, policy makers, and health care providers believe it is a lost cause and feel it is not worthwhile promoting condoms among stable couples. This Study, which needs to be replicated using more representative samples of couples in diverse countries, suggests that in the early 21st century in countries with large numbers of HIV infected individuals and high fertility and a supportive environment, the use of condoms as a dual purpose device may be attractive to both females and males in stable relationships.