

Condom use consistency among adolescents and young adults in the Cape Area of South Africa: Dynamics and Determinants

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Abstract

BACKGROUND: Levels of contraceptive use (especially condoms) among young people is high in South Africa when compared to the rest of the countries in Africa. Condom use as a method of modern contraception has a dual advantage of protecting against diseases and pregnancy but inconsistent use of condom may be one of the factors fuelling the high transmission of Human Immuno-deficiency Virus (HIV) infection in South Africa. The main research questions addressed in this paper include (i) what is the proportion of adolescents and young adults using condoms consistently in the study area during the study period?; (ii) what are the changes taking place in the lives of the respondents during the study period in the study area?; and (iii) what are the factors influencing the use of condoms consistently in the study area?.

METHOD: The Cape Area Panel Study data were analysed to identify the factors associated with the reporting of consistent use of condom among 3,210 selected adolescents and young adults who participated in the three waves of data collection between 2002 and 2005. The statistical methods used were simple descriptive statistics, chi-square test of association, and multi-level logistic regression. The secondary quantitative analysis was done using Stata/SE version 12 with Generalised Linear Latent And Mixed Model (GLLAMM) for multi-level modelling and this analysis was based on Social Cognitive Theory (SCT).

RESULTS: The median age at first sexual intercourse in the study area remains 16 years during the study period between 2002 and 2005 with a difference of one year in favour of females only at the third wave of data collection. With regard to the consistency of condom use, those adolescents and young adults who always used condoms decreased from a high of 69 percent at the baseline in 2002 to 47 percent at the third wave in 2005, while inconsistent users of condom at their most-recent sexual intercourse increased from 31 percent at the baseline to 53 percent in 2005. Examining the predictors of consistency of using condoms with most-recent sexual partner at the baseline, self-efficacy of using condom at the first sexual intercourse, positive school attitude and participation in prosocial activities increased the odds of consistently using condom at the event of most-recent sexual intercourse in the study area, while childhood place of residence being rural reduces the odds of consistently using condom at the event of most-recent sexual intercourse. However, condom use at first sexual intercourse was more important for males in particular, while positive school attitude and monetary support was relevant for the female adolescents and young adults. At the second wave of data collection in 2003/2004, those out of school were significantly less likely to consistently use condoms at the most-recent sexual intercourse (OR: 0.90; $p < 0.05$) while at the third wave of data collection in 2005, age, sex, population group, degree of happiness, expectation to live long and school attendance predicted condom use consistency. Those adolescents who used condom at their first sexual intercourse, those who believed in condom as a way of protecting against HIV/AIDS, those who were Christians and those with external monetary support were significantly more likely to consistently use condom at their most-recent sexual intercourse in 2005.

CONCLUSIONS: This study, using a longitudinal dataset, concluded that arrays of individual and social/contextual factors were independently influencing the sexual and contraceptive behaviours of young people in the Cape Area of South Africa between 2002 and 2005. Intervention and programme efforts need to be geared up to encourage young people to use condoms consistently as a modern method of

contraception because of its dual advantage. Although Bandura's Social Cognitive Theory has not been frequently applied to African settings, this theory has been found to be relevant to adolescent sexuality and sexual behavioural research in South Africa, as shown in this study, the framework has much to offer regarding the design and implementation of programmes addressing young people's sexual behaviour.

Specifically, the individual factors of age and racial group to a lesser extent, sex of the respondents being female; self-efficacy factors of degree of happiness and using condom at the event of first sexual activity; the outcome expectancy of believing in condoms as a way of protecting against HIV; the goal factor of being unsure about living long up to old age (marginally) and socio-structural factors of being out of school as a measure of current school attendance, being Christian, having external monetary support and, marginally, childhood rural place of residence, having a positive attitude toward school/education and participation in prosocial activities are significant.