

# BEHAVIOR PROFILE: CONDOM USE

## HEALTH GOAL

Reduce HIV transmission

## BEHAVIOR

Women and men use a condom during high risk sex

↻ Percentage of women who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months.

↻ Percentage of men who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months.

## BEHAVIOR ANALYSIS

## STRATEGY

### BEHAVIOR AND STEPS

### FACTORS

### SUPPORTING ACTORS AND ACTIONS

### POSSIBLE PROGRAM STRATEGIES

What steps are needed to practice this behavior?

What factors may prevent or support practice of this behavior?

Who must support the practice of this behavior, and what actions must they take?

What strategies will best focus our efforts based on this analysis?

#### Behavior

Women and men use a condom during high risk sex

#### Steps

1. Decide to use a condom during all high-risk sex
2. Talk with partner about using a condom during sexual intercourse
3. Obtain condoms
4. Check the expiration date on the package and look for any tears, holes, signs or damage; discard if expired or damaged
5. Properly apply condom, keep on throughout intercourse
6. Discard condom once intercourse is over
7. Use a new condom every time sex occurs

#### STRUCTURAL

**Accessibility:** Women and men do not obtain condoms because they are expensive.

**Accessibility:** Women and men do not use condoms because condoms are not readily available, especially in rural areas.

#### SOCIAL

**Family and Community Support:** Women and men with multiple partners do not use condoms because their partners refuse to do so and persuade them not to use them.

**Gender:** Women with multiple partners do not talk with partners about using condoms because they lack power to negotiate for use of condoms due to economic constraints (esp. if they receive gifts or money from the sexual partner).

#### INTERNAL

**Attitudes and Beliefs:** Men and especially women do not obtain condoms because of embarrassment or fear to purchase or ask for them.

**Attitudes and Beliefs:** Women and men do not use condoms because they believe they are uncomfortable and reduce pleasure.

**Attitudes and Beliefs:** Women and men do not discuss or use condoms because condoms are perceived as a sign of lack of trust or unfaithfulness.

**Self-Efficacy:** Women and men lack the confidence to negotiate condom usage with a partner.

#### INSTITUTIONAL

**Policymakers:** Explore innovative avenues to increase access to and affordability of condoms.

**Managers:** Integrate sexual health programming into regular health services, including resources relating to condom usage, importance, benefits, and availability.

**Providers:** Counsel sexually active patients at each visit regarding the benefits and importance of condoms, where to obtain them, and negotiation skills.

#### COMMUNITY

**Teachers:** Engage parents and students in discussions on the importance of condoms to prevent HIV and other sexually transmitted infections.

**Community and Religious Leaders:** Promote positive attitudes towards condoms and encouraging community members to take responsibility for their own health and safety.

#### HOUSEHOLD

**Family Members:** Engage family members, including youth, on using condoms during all risky sexual encounters.

↻ Strategy requires Communication Support

#### ENABLING ENVIRONMENT

**Partnerships and Networks:** Cultivate private sector engagement in recommendation, pricing, and distribution of needed services and products.

**Policies and Governance:** Introduce, upgrade, or extend national policy for large-scale distribution of free or low-cost condoms. ↻

#### SYSTEMS, PRODUCTS AND SERVICES

**Products and Technology:** Develop creative marketing strategies and distribution systems, including social enterprises and community-based programs to increase appeal of, access to, and use of condoms. ↻

**Supply Chain:** Use community-based condom distribution systems which are outside of health facilities and engage existing social networks. ↻

**Quality Improvement:** Introduce healthy behavior counseling around condom usage and negotiation into pre-service training programs.

#### DEMAND AND USE

**Advocacy:** Cultivate local media champions to share healthy behavior and healthy relationship messages, especially regarding condom use and negotiation.

**Communication:** Conduct integrated communication campaigns with mass media social media, and interpersonal components focusing on self-efficacy, risk perception, and negotiation to improve condom usage.

**Skills Building:** Integrate condom negotiation skills building sessions into existing women's groups, community groups, lessons for youth, and facility-based small group sessions.