

# BEHAVIOR PROFILE: MALE CONDOM USE DURING PAID SEX

## HEALTH GOAL

Reduce HIV transmission

## BEHAVIOR

Men use a condom during paid sexual intercourse

71 Percentage of men reporting condom use the last time they had paid sex, of those who report having had paid for sex in the 12 months preceding the survey.

### 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

Men use a condom during paid sexual intercourse

#### Steps

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

#### STRUCTURAL

**Accessibility:** Men do not use condoms during paid sexual intercourse because condoms are not available (e.g. not provided by sex worker, not purchased in advance).

**Accessibility:** Men do not obtain condoms because they are expensive.

#### SOCIAL

**Family and Community Support:** Men use a condom during paid sexual intercourse because female sex workers require condom usage.

#### INTERNAL

**Attitudes and Beliefs:** Men do not use condoms during paid sexual intercourse because they believe they are uncomfortable and reduce pleasure.

**Attitudes and Beliefs:** Men do not use condoms during paid sexual intercourse because they do not believe they are at high risk of contracting HIV.

**Attitudes and Beliefs:** Men do not use condoms during paid sexual intercourse because they perceive that sex workers who are pretty and clean are also healthy and do not have HIV or sexually transmitted infections.

**Attitudes and Beliefs:** Men do not use condoms with their steady female sex worker partners as they trust them.

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

#### INSTITUTIONAL

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

**Managers:** Integrate sexual health programming into regular health services for both men and sex workers, including resources relating to condom usage, importance, and availability.

**Managers:** Ensure that condoms are readily available for all sex workers and clients in brothels or related settings.

**Providers:** Counsel sexually active patients at each visit regarding the risk of HIV, importance of condoms, where to purchase them, and how to use them.

**Peers:** Engage in discussion with peers who frequent sex workers about the importance of condoms during all sexual encounters.

#### COMMUNITY

**Community and Religious Leaders:** Promote positive attitudes towards condoms and encourage community members to take responsibility for their own health and safety, including educating about the risk of HIV.

**Female Sex Workers:** Demand that a new condom be used every time sex occurs.

Strategy requires Communication Support

#### ENABLING ENVIRONMENT

**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 products, creative marketing strategies, and distribution systems--including social enterprises and community-based programs--to improve perceptions of and increase access to and use of condoms.

**Supply Chain:** Engage existing social networks, including sex worker networks, to utilize or create community-based condom distribution systems.

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

#### DEMAND AND USE

**Communication:** Conduct integrated communication campaigns with mass media, social media, and interpersonal components focusing on risk perception, making condom use more appealing to men, and "normalizing" condom use.

**Collective Engagement:** Institute peer education interventions focusing on male clients in bars, nightclubs, and lodges to hand out condoms and dialogue on the importance and benefits of condom use in occasional and steady relationships with sex workers.