

NAMIBIA • HIV/AIDS COMMUNITY SURVEYS 2007 • FINDINGS

Rundu, Walvis Bay, Keetmanshoop, Oshakati



NawaLife Trust
namibian center for communication programmes

CADRE



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CADRE

Goals of the research

- To track HIV/AIDS related knowledge, attitudes, behaviours and practices in Namibia over time
- To track the reach and exposure to HIV/AIDS-related communication interventions in Namibia
- To track exposure to community-level experiences of HIV/AIDS
- To contribute to understanding of successes and gaps in HIV/AIDS response
- To utilise findings to inform and guide future interventions

HOUSEHOLD SURVEY TIMELINE

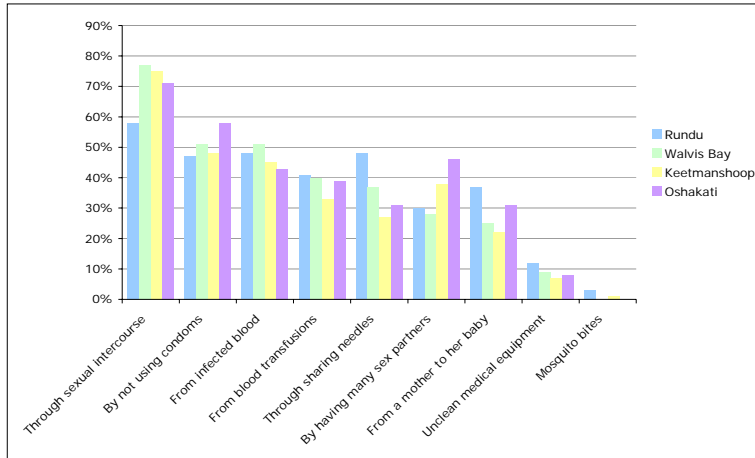
	Base-line	2004 Prev (%) ^a	Prev Rank	Classif.	Midterm Evaluations				Follow-up Evaluations				
					MT 05	MT 06	MT 07	MT 08	FU 07	FU 08	FU 09	FU 10	
Grootfontein	2005	28	1				MT					FU	
Oshikuku	2003	27	3		MT					FU			
Walvis Bay	2004	26	4			MT							
Oshakati	2004	25	5			MT				FU			
Katutura	2004	24	6										
Oniipa	2003	22	7		MT					FU			
Rundu	2004	21	8			MT					FU		
Andara	2004	18	9										
Otjiwarongo	2005	17	10										
Omaruru	2005	17	10				MT					FU	
Khorixas	2006	17	10					MT					FU
Keetmanshoop	2004	16	13			MT					FU		
Nyangana	2004	15	14										
Rehoboth	2003	14	15		MT					FU			
Gobabis	2005	14	15				MT					FU	
Windhoek	2004	10	17										
Opuwo	2006	9	18					MT					FU

Guiding framework

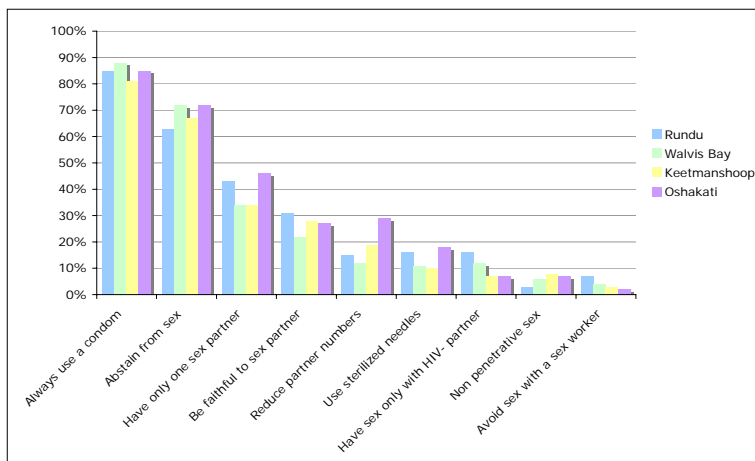
- Sequential studies allow for understanding of change over time (but not necessarily causes of change)
- It is often necessary to modify studies in relation to the changing epidemic. The questionnaire was modified to include additional measures and indicators
- Additional qualitative data assisted interpretation of selected data
- Additional site reports planned which will include additional data – workshop discussion will inform these



Ways to acquire HIV: Unprompted



Ways to prevent HIV: Unprompted





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Knowledge, Awareness, Beliefs

- Overall prompted knowledge is high in all sites:
 - 80% in Rundu
 - 82% in Walvis Bay
 - 75% in Keetmanshoop
 - 81% in Oshakati
- Lower prompted knowledge for *“If you have fewer sexual partners you are less likely to get infected with HIV”*:
 - Rundu (61%)
 - Walvis Bay (56%)
 - Keetmanshoop (41%)
 - Oshakati (62%)



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Knowledge, Awareness, Beliefs

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Witchcraft protects you from getting infected with HIV (disagree)	85%	84%	89%	91%
I am aware of people who have gotten HIV because of witchcraft (disagree)	85%	86%	87%	93%
If a person gets HIV it is God's will (disagree)	76%	72%	71%	72%
Christian healers can cure AIDS (disagree)	74%	76%	76%	84%




Attitudes to PLHA, knowledge changes

- Care for family member with HIV (83%-93%)
- Children who are HIV positive should not go to school - disagree (77%-84%)
- If a teacher has HIV but is not sick, he/she should be allowed to continue teaching (61%-86%)
- Keep HIV status of family member a secret - disagree (45%-55%)

Baseline to midterm

- Increase in incorrect response to “HIV can be passed on through sharing eating utensils” (OR_{adj} 0.6)
- Upward trend in “Medicines can prolong life” (OR_{adj} 3.2)

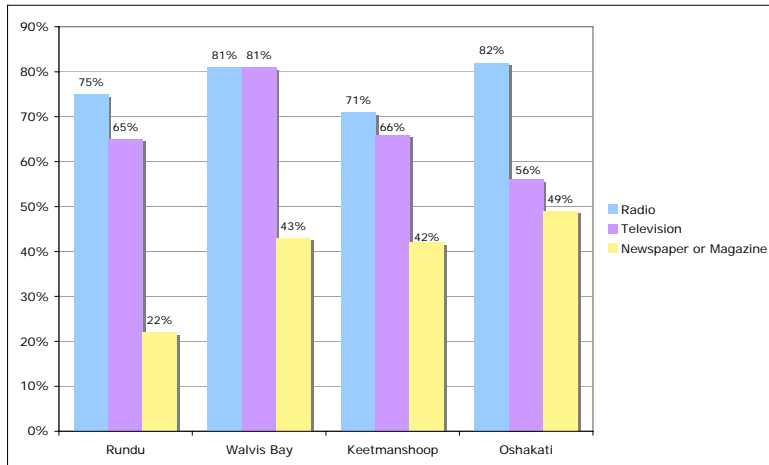


IMPLICATIONS: Knowledge, Attitudes, Beliefs

- Unprompted awareness of importance of condom use is high (81%-85%), followed by abstinence (63%-72%) – but unclear whether abstinence is understood as ‘delay sexual debut’ and the latter requires emphasis
- Quite low unprompted awareness of being faithful (<32%) or limiting partner numbers (12%-29%) and this requires attention
- A relatively small proportion of people link HIV to supernatural phenomena, although only 77% believed that Christian healers could not cure AIDS
- Stigmatising beliefs are not widely held and this suggests communities are/would be receptive to social mobilisation around HIV/AIDS. A wider subset of social norms indicators may be included in follow-up surveys
- Increased awareness of ARVs – useful for treatment interventions



Exposure to mass media channels four days a week or more (1)



Exposure to channels in past week

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Watched NBC television	89%	88%	84%	79%
Watched One Africa TV	51%	60%	41%	15%
Watched M-Net (DSTV)	16%	23%	24%	11%
Listened to Radio Omulunga	53%	54%	39%	73%
Listened to NBC Local Language Station	81%	46%	36%	38%
Listened to National Radio	64%	59%	34%	42%
Listened to Radio Energy	26%	62%	18%	47%
Listened to Kanaal 7/Channel 7	13%	32%	39%	3%
Listened to Radio 99	15%	25%	10%	4%
Listened to Radio Wave	19%	15%	13%	6%
Read <i>The Namibian</i>	66%	70%	48%	79%
Read <i>Republikein</i>	29%	45%	59%	19%
Read <i>Informante</i>	40%	44%	15%	28%
Read <i>New Era</i>	48%	34%	9%	25%



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Sources of AIDS information in past year

	Rundu	Walvis Bay	Keetmans-hoop	Oshakati
Radio	87%	88%	84%	95%
Television	78%	85%	72%	70%
Newspaper	72%	77%	65%	80%
Health Workers/Nurse/Doctor/Clinic/Hosp	76%	63%	66%	83%
Friends	68%	72%	67%	69%
Other media (Magazines, Booklets, Pamphlets)	60%	64%	70%	81%
Mother/Father/Family members	65%	73%	57%	61%
Community orgs, AIDS organisations, NGOs	55%	44%	31%	39%
Religious group, church	53%	52%	32%	29%
Community meetings	46%	31%	10%	23%
Traditional healer	4%	2%	3%	2%
Schools/Universities/Teachers (Of all full-time students)	91%	90%	85%	84%
Workplace (employed persons)	55%	52%	18%	32%



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Knowledge of campaigns in past month

	Rundu	Walvis Bay	Keetmans-hoop	Oshakati
Be your own hero	78%	79%	67%	82%
New Start (HIV testing)	84%	83%	48%	61%
My Future is My Choice	86%	77%	40%	54%
Smile condoms	75%	68%	26%	58%
Catholic AIDS Action	76%	64%	38%	43%
UNICEF	54%	59%	13%	21%
Lironga Eparu	63%	36%	10%	29%
Alcohol aids HIV	55%	50%	14%	18%
Window of Hope	45%	35%	17%	16%
LifeLine/ChildLine	51%	44%	10%	10%
Desert Soul	41%	30%	9%	24%
NawaLife	30%	19%	12%	17%
Average	61%	54%	25%	36%



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Influence of campaigns

- Exposure to three or more of 'Be Your Own Hero'; 'New Start'; 'My Future is My Choice' and 'Desert Soul' significantly correlated with
 - 'had an HIV test in past year'
(more than three = 43%, less than three = 31%,
OR_{adj} 1.6)
 - 'used a condom at last sex'
(more than three = 71%, less than three = 61%,
OR_{adj} 2.1)
- No significant influence on 2+ partners in past year, nor 2+ partners in past month
- Use in past year:
 - Smile condoms (37%-64%)
 - New Start testing (35%-57%)



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Exposure and response in past year

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Community level exposure				
Heard AIDS spoken about by religious leaders at church/other religious gatherings	65%	55%	33%	38%
Attended a meeting about HIV/AIDS in the community where I live	50%	36%	20%	27%
Personalised exposure				
Someone I know told me they are HIV positive	49%	45%	29%	39%
Personally know someone who has died of AIDS	75%	68%	46%	53%
Attended funeral of someone who has died of AIDS	71%	62%	45%	53%
Personalised involvement				
Worn a red ribbon, T-shirt, cap with an AIDS message	49%	52%	32%	54%
Attended a training workshop on HIV/AIDS	35%	28%	17%	29%
Volunteered for an HIV/AIDS organisation in my community	26%	16%	15%	26%
Helped care for a child whose parents died of AIDS	35%	27%	25%	32%
Helped care for a person who is sick with AIDS	48%	43%	30%	40%



Influence of knowing someone who died of AIDS

Of those who personally knew someone who had died of AIDS in the past year

- 40% had HIV test in past year vs 33% who didn't know someone (OR_{adj} 1.2)
- 29% had volunteered for an HIV/AIDS organisation in the past year vs 8% who didn't know someone (OR_{adj} 4.8)
- 54% had wore a red ribbon or clothing with an AIDS message in the past year vs 36% who didn't know someone (OR_{adj} 2.1)



Qualitative findings: Exposure to info

- Widespread exposure to HIV/AIDS information – different emphases:
I will give you an example. In the church, the pastor is always saying you have to wait for marriage before you have sex. And with your friends, they just want to tell you 'use condoms.'
(Female, 20-30, Keetmanshoop).
- Messages clear, and understood:
"...but people are ignoring it".
- Seeing/hearing people with HIV, exposure to community counsellors, help reinforce 'messages'.
- Parents open to discussion:
I just wanted to say I have experienced an improvement since most of the parents are no longer scared to discuss HIV with minors. Let me say, the children under age. So it is an open thing.
(Male, 35-50, Oshakati)



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IMPLICATIONS: Exposure to information

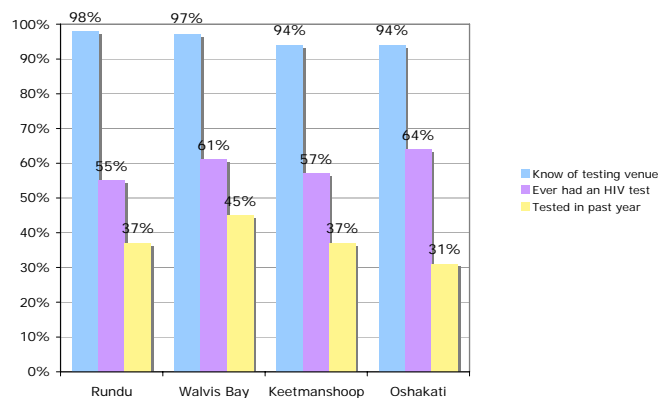
- HIV/AIDS information is pervasive
- Mass media is predominant, but there is also much interpersonal communication including within families
- Very high exposure in educational institutions, and potential to expand in workplaces in Keetmanshoop and Oshakati
- Keetmanshoop and Oshakati had lower than average levels of exposure to campaigns and organisations
- Religious leaders engaging with HIV/AIDS and this should be encouraged. Links could be extended or built with AIDS organisations
- Personal involvement was relatively high and this should continue to be encouraged
- High exposure to people who have died of AIDS and risk is being personalised
- Fundamental high risk behaviours require emphasis




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HIV testing (1)





HIV testing (2)

- Around a third to nearly half of all respondents in various sites have never had an HIV test (36%-45%)
- Reasons for not testing: 'not at risk of HIV', 'I don't see the need' or 'I don't think I am HIV positive'
- Most who tested wanted to know their status (46%-64%)
- Less than ten percent (5%-8%) said they were tested because they were feeling sick
- Venues: high mention of 'clinic or hospital' (62%-79%) and New Start Centre (47%-72%). Catholic AIDS Action (20%-37%)
- Significant changes in knowledge of places to be tested (OR_{adj} 2.4), where to receive counselling (OR_{adj} 20.3), and ever having had an HIV test – 22%-40% (OR_{adj} 3.3)
- Some concerns in qualitative research about confidentiality and fear of testing



IMPLICATIONS: HIV testing

- Significant increase in knowledge of places to obtain an HIV test
- Clear impacts of successful rapid roll-out of VCT services and VCT promotion
- Wanting to know status is an important reason for testing
- Service quality, needs for ongoing counselling, and overall monitoring and evaluation of VCT services could be considered if not already being done by service providers



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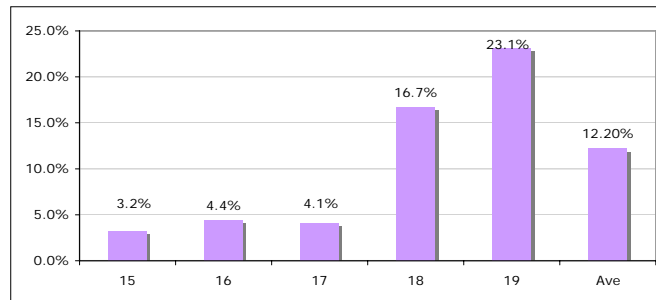


Sexual behaviours and practices: Sexual debut

	15-24	25-34	35-49	50+
Age at first sex: Males				
<13	10%	8%	4%	1%
13	5%	4%	3%	4%
14	10%	5%	4%	7%
15	13%	11%	8%	4%
First sex at 15 or younger	37%	28%	17%	16%
16	16%	14%	9%	5%
17	22%	15%	18%	5%
18	16%	14%	11%	12%
19	6%	12%	16%	11%
20	2%	7%	12%	16%
>20	2%	9%	17%	36%
Age at first sex: Females				
<13	1%	1%	0%	1%
13	4%	2%	1%	1%
14	7%	4%	3%	1%
15	16%	11%	7%	4%
First sex at 15 or younger	27%	17%	10%	8%
16	17%	13%	9%	4%
17	20%	13%	8%	10%
18	18%	14%	17%	10%
19	11%	16%	16%	18%
20	4%	13%	14%	15%
>20	3%	16%	25%	36%

Sexual behaviours and practices: Age differentials and teen births

- 12% of males and 29% of females under twenty years of age reported that their last sexual partner was more than ten years older than they were
- Teenage births range from 3.2% amongst 15 year old girls to 23.1% amongst 19 year olds





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Sexual behaviours and practices: Reasons for sex

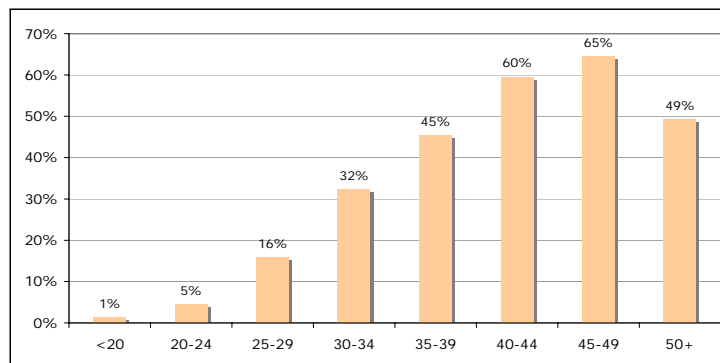
	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Females				
Because I loved him/her	55%	64%	71%	69%
To satisfy a sexual need	40%	36%	26%	34%
To satisfy expectations of others	6%	5%	11%	1%
Because I was forced to	8%	5%	2%	6%
Other	5%	3%	1%	0%
Males				
Because I loved her/him	55%	51%	51%	61%
To satisfy a sexual need	50%	49%	48%	44%
To satisfy expectations of others	3%	5%	4%	1%
Because I was forced to	4%	2%	2%	1%
Other	2%	3%	1%	1%



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Proportion of population who are married: Average of all sites





Sexual behaviours and practices: Sexual partners in last year (turnover)

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Males: None	11%	12%	9%	6%
1	53%	48%	49%	48%
2	14%	15%	22%	18%
>2	22%	25%	21%	29%
Females: None	15%	12%	17%	7%
1	69%	69%	72%	79%
2	9%	11%	10%	12%
>2	8%	8%	1%	3%
15-24: None	14%	12%	10%	5%
1	57%	51%	55%	65%
2	15%	16%	22%	18%
>2	14%	21%	13%	12%
25-34: None	7%	6%	4%	4%
1	62%	59%	63%	65%
2	10%	16%	18%	15%
>2	22%	20%	15%	17%
35-49: None	8%	7%	15%	3%
1	73%	77%	69%	60%
2	10%	5%	10%	12%
>2	9%	11%	6%	25%
50+: None	44%	48%	49%	42%
1	54%	40%	46%	42%
2	2%	10%	5%	8%
>2	0%	3%	0%	8%



Sexual behaviours and practices: Sexual partners in last month (concurrency)

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
None	16%	14%	9%	9%
1	73%	74%	81%	79%
2+	10%	12%	10%	13%
Males: None	17%	18%	8%	10%
1	67%	64%	73%	67%
2+	17%	19%	19%	22%
Females: None	16%	10%	10%	7%
1	80%	85%	90%	91%
2+	4%	5%	1%	3%
15-24: None	25%	20%	12%	12%
1	66%	68%	74%	80%
2+	10%	12%	14%	8%
25-34: None	14%	14%	9%	9%
1	74%	71%	81%	76%
2+	13%	15%	10%	15%
35-49: None	9%	6%	3%	3%
1	82%	86%	89%	78%
2+	10%	9%	8%	19%



Sexual behaviours and practices: Sexual partners in last year / month

Marital status, cohabiting and unmarried by sex

	Married (Males)	Married (Females)	Cohabiting (Males)	Cohabiting (Females)	Unmarried (Males)	Unmarried (Females)
None	5%	8%	1%	3%	12%	18%
1	72%	86%	49%	81%	42%	63%
2	10%	4%	16%	10%	20%	13%
>2	14%	2%	34%	6%	26%	6%

Changes in partner numbers between baseline and midterm

	Rundu		Walvis Bay		Keetmans- hoop		Oshakati	
	Baseline	Midterm	Baseline	Midterm	Baseline	Midterm	Baseline	Midterm
Past Year								
None	0%	13%	6%	12%	1%	13%	2%	6%
One	79%	61%	71%	58%	69%	60%	79%	63%
Two	11%	11%	13%	13%	11%	16%	15%	15%
Three or more	10%	15%	9%	17%	18%	11%	5%	16%
Past Month								
None	37%	16%	30%	14%	17%	9%	39%	9%
One	56%	73%	67%	74%	78%	81%	60%	79%
Two or more	7%	10%	3%	12%	6%	10%	2%	13%

Qualitative findings: Sexual partnerships

- Self esteem: *'really a man'; 'proud to have a lot of ladies'*
- Contextual factors:
If your man goes to sea for three months, maybe it is difficult for a woman, and that is when she takes these 'skelm draaitjies' (unfaithful ways) – she does things she wouldn't normally do... you don't even know if this person is healthy or not and this can have a disadvantage to your health (Female, 35-50, Walvis Bay)
- Social norms:
In these modern times, the problem is peer pressure. It was different for our parents... Today you will find that it is funny for people to be faithful if they have been in a relationship for some time. Some will just desire others, and cheat on someone. Despite the trust that is there, someone, somewhere, is not faithful (Male, 20-30, Rundu).
- Money: *"If I don't treat her well, she will go with other men"... "Women do it because they like the money"*

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
15-24	76%	77%	87%	85%
25-34	58%	75%	70%	74%
35-49	39%	32%	49%	61%
50+	33%	32%	38%	57%
Males	65%	72%	75%	78%
Females	55%	55%	62%	71%
Married	32%	24%	36%	50%
Unmarried - cohabiting	47%	63%	61%	60%
Unmarried	80%	79%	85%	87%
Widowed, divorced	46%	75%	92%	94%
Consistency				
Never	13%	14%	17%	9%
Rarely	15%	12%	7%	10%
Occasionally	22%	16%	21%	17%
Usually	17%	15%	19%	25%
Always	33%	43%	37%	39%
Usually / always	50%	58%	55%	64%

- ### IMPLICATIONS: Sexual behaviours and practices (1)
- Over a third of males and quarter of females aged 15-24 have sex earlier than 16. In the context of a high prevalence epidemic there is a need to focus on delayed debut of first sex
 - High levels of teenagers with most recent partners more than ten years older than themselves. This increases risk considerably as a product of exposure to a higher prevalence pool and requires intensified focus
 - High partner turnover amongst both sexes (2+/3+ partners in past year). Low awareness of risks, and increasing trend. Intensify focus
 - High levels of concurrency (2+ partners in past month). High risk as a product of viral load in recently infected individuals. Low awareness of risks, and increasing trend. Intensify focus



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IMPLICATIONS: Sexual behaviours and practices (2)

- Factors contributing to partner turnover include separation, influence of alcohol, lack of satisfaction, boredom, material needs, amongst other factors
- Condom use at last sex is high, and illustrates the positive impacts of distribution and promotion activities. Reported 'always use' and 'use in marriage is also high'. Condom use at these levels is likely to be limiting incidence, and should be sustained
- The promotion of combined approaches to prevention and risk reduction should be considered: eg. condom use and partner reduction; condom use and avoiding concurrency; delayed debut and avoiding older partners when sexually active as teenager (and condom use); managing relationships as well as sexual practices/behaviours



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Alcohol consumption

	Rundu	Walvis Bay	Keetmans-hoop	Oshakati
All ages				
Daily	14%	7%	10%	13%
A few times a week	15%	20%	19%	24%
A few times a week or more	29%	27%	29%	37%
Once a week	12%	11%	21%	20%
Less than once a week	17%	18%	13%	8%
Never drink	42%	45%	38%	35%
Been drunk in past month	35%	29%	34%	36%
15-24 age group				
Daily	6%	3%	6%	6%
A few times a week	15%	16%	18%	18%
A few times a week or more	21%	19%	24%	24%
Once a week	14%	13%	24%	20%
Less than once a week	18%	22%	14%	12%
Never drink	48%	46%	37%	44%
Been drunk in past month	30%	27%	37%	30%
25-34 age group				
Daily	16%	10%	12%	16%
A few times a week	15%	22%	21%	31%
A few times a week or more	31%	32%	33%	47%
Once a week	11%	10%	27%	21%
Less than once a week	17%	20%	15%	6%
Never drink	43%	38%	27%	26%
Been drunk in past month	40%	33%	41%	45%



Alcohol consumption: Risks and changes

- 43% of those who drank a few times a week or more reported having 2+ partners in past year, compared to 26% who drank once a week or less (OR_{adj} 2.1)
- 24% of those who drank a few times a week or more reported having concurrent sexual partners compared to 8% who drank once a week or less (OR_{adj} 3.8)
- 31% of those who drank a few times a week or more reported not using condoms compared to 35% who drank once a week or less (OR_{adj} 1.2)

	Rundu		Walvis Bay		Keetmanshoop		Oshakati	
	Baseline	Midterm	Baseline	Midterm	Baseline	Midterm	Baseline	Midterm
Daily	3%	14%	15%	7%	7%	10%	12%	13%
A few times a week or more	14%	29%	31%	27%	19%	29%	28%	37%
Once a week	7%	12%	8%	11%	13%	21%	8%	20%
Less than once a week	15%	17%	5%	18%	16%	13%	8%	8%
Never	64%	42%	56%	45%	51%	38%	57%	35%



Qualitative findings: Alcohol

- Related to boredom, frustration, unemployment
Sometimes it is the circumstances that this person is in. It is mostly unemployment. The only thing a friend can give you is alcohol. I might look for a job in the morning and in the afternoon you go past your friend's house and then you get alcohol there. I am frustrated because I don't get a job, but I have tried looking for one (Female, 35-50, Walvis Bay)
- Unprotected sex: "Losing control"; "not being able to reason things properly"
- Giving up drinking:
Keeping your limit does not exist with me. I cannot keep a limit. I cannot have a glass of beer and say this is okay. So, to my mind it is better for me if I don't touch it at all... When we talk about responsible drinking, we must see it from both angles. Talking about limit – some people will manage to keep their limit. In many cases, people will fail to keep their limit. For the failures – it will be better for them to rather abstain totally from consuming alcohol (Male, 35-50, Keetmanshoop)



IMPLICATIONS: Alcohol

- There is a high overall pattern of alcohol consumption and this increases vulnerability to HIV risk
- 'Alcohol aids HIV' has had good reach over a short space of time and should be intensified
- Places of drinking are pervasive, and attempting to reduce or stop drinking is complex. There may be a place for individualised and group support programmes to assist in reducing overall patterns of drinking



Leisure activities in past month

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Played soccer	30%	27%	20%	14%
Played other sports	32%	28%	19%	16%
Gone to a bar or shebeen	41%	39%	49%	59%
Gone to a night club	22%	28%	46%	36%
Watched a drama group	27%	24%	4%	21%
Gone to a multipurpose community centre	15%	24%	10%	25%
Gone to an AIDS support group	24%	17%	16%	23%
15-24				
Played soccer (males)	73%	66%	61%	42%
Played other sports (males)	42%	43%	30%	21%
Played other sports (females)	43%	50%	34%	27%
Gone to a bar or shebeen	42%	46%	52%	68%
Gone to a night club	25%	31%	46%	42%
Watched a drama group	27%	23%	4%	22%
Gone to a multipurpose commur	19%	27%	8%	27%
Gone to an AIDS support group	29%	18%	17%	22%
225-34				
Played soccer (males)	50%	46%	41%	21%
Played other sports (males)	34%	23%	24%	8%
Played other sports (females)	28%	17%	16%	12%
Gone to a bar or shebeen	43%	41%	58%	53%
Gone to a night club	24%	39%	60%	31%
Watched a drama group	32%	33%	4%	17%
Gone to a multipurpose commur	14%	27%	10%	20%
Gone to an AIDS support group	22%	17%	16%	23%



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Orphaning

	Rundu	Walvis Bay	Keetmanshoop	Oshakati
Parent or guardian of children in household				
Yes	55%	47%	42%	38%
No	45%	53%	58%	62%
Number of orphans (who have lost both parents) in household, reported by respondents who were parents				
0	53%	52%	54%	35%
1	30%	32%	33%	49%
2	8%	11%	9%	10%
3	5%	2%	2%	3%
4	5%	3%	2%	3%



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Conclusions

- Quantitative baseline and midterm data, in combination with qualitative data provide insights into epidemic and programme impacts, as well as guiding future response
- Knowledge is high and there have been increases in knowledge over time. However, delayed debut, limiting partner turnover and having concurrent partners require attention at the level of knowledge and behaviour
- High awareness of HIV testing services, and high recent uptake of testing
- High levels of community involvement and low levels of stigma
- Alcohol and HIV risk needs focused attention



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