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Summary Report
SR-HN-hiv-02

Honduras

Five steps for youth and adolescents to confront HIV/AIDS

Five steps for youth and adolescents to confront HIV/AIDS - Honduras 2002

The evidence base

5938 youth aged 15-23 years
3324 of them sexually active
41 communities in 11 cities
in 7 departments of Honduras

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In collaboration with PRAIM/GTZ
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Youth and adolescents of Honduras, like youth throughout the world, are caught up in a pandemic of HIV/AIDS. They can also be a resource for conquering it. An August 2002 baseline study of 5900 Honduran youth from 15 to 23 years of age, in 11 cities where 80% of Honduras's HIV/AIDS cases occur, generated evidence to help evaluate current programmes, design new ones, influence sexual behaviour and encourage youth leadership in preventing HIV.

Throughout the study CIET worked closely with COMVIDA, an alliance of youth-oriented organizations from the governmental, non-governmental, religious and private sectors, supported by German Technical Cooperation (GTZ). UNICEF Honduras requested and financed the study.

The principal results of this baseline study are presented in the form of five steps for HIV/AIDS prevention among Honduran youth. Subsequent studies will be able to measure changes resulting from the strategies adopted.

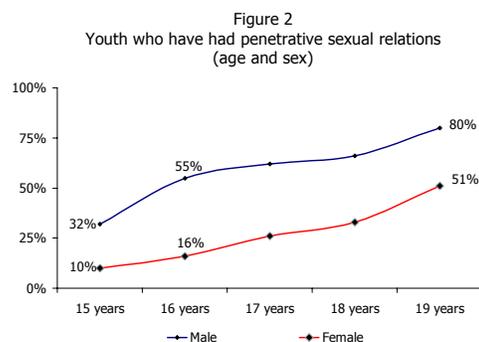
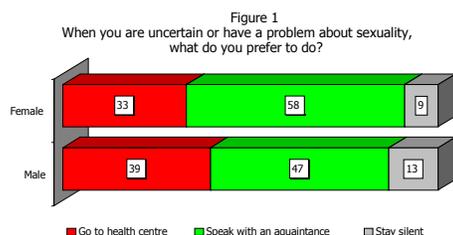
1. Strengthening support networks.

Young people value family and social support networks. These networks can reinforce their capacity to make informed decisions about sex, and avoid unwanted sexual contacts. Indicators of active support networks are:

- Confidence in individual adults in the home (63%)
- Confidence in people outside the home (59%)
- Students' confidence in their teachers (34%)
- Being member of an organization (22%)
- Receiving instruction in health and sexuality in the previous year (39%)
- Playing a sport (86% male, 31% female)
- Belonging to an artistic or cultural group (8%) and
- Feeling that there are organizations genuinely concerned with youth and their problems (15%)

(Percentages in parentheses indicate the frequency with which these indicators were mentioned by the youth surveyed.)

When they have sexual problems, the majority of youth prefer to talk with persons they already know (Figure 1). Two thirds said there was someone in their life in whom they could confide on matters of sexuality. Levels of confidence in adults at home were similar among male and female youth, but male youth were more inclined than female youth to confide in people outside the household. One of every three students feels able to confide in a teacher. The average youth who had received training in health and sexuality was 60% more likely to have confidence in adults than one who had not received such training (OR 1.64, 95%CI1.5-1.8). Some 22% of young people



belong to some organization – two thirds of them religious – and one out of four believes that the organization was concerned for her/his welfare.

2. Being prepared to decide and to prevent

Among young people aged 15 to 19 years, 42% of males and 74% of females said they have not had sexual relations involving penetration. But two of three males and one out of every three females have had sexual encounters involving 'intimate embraces.' Some 39% of male and 57% of female youth saw 'being married' as a condition for starting an active sex life. A further 19% said they would need to 'feel ready'.

Half of 16 year-old males and half of 19 year-old females have an active sexual life (Figure 2). The average delay between intimate embraces and the beginning of an active sex life was less than one year. Among youth aged 15 to 19 years, one in every four males and one in every 10 females had their first sexual encounter with penetration at the age of 15 years or younger (46% of males and 33% of females who were sexually active). There was no evidence that the age of initiating an active sex-life has decreased in the past three years (Figure 3).

Only half of the youth aged 15 to 19 years said that their first encounter involving penetration took place because they 'wanted to do it.' The other half mentioned some less-than-voluntary reason: 'I felt pressured' (22%) and 17% said 'I had to show that I am a man,' 'I didn't want to lose him' or 'I wasn't aware'. Some 14% opted not to answer.

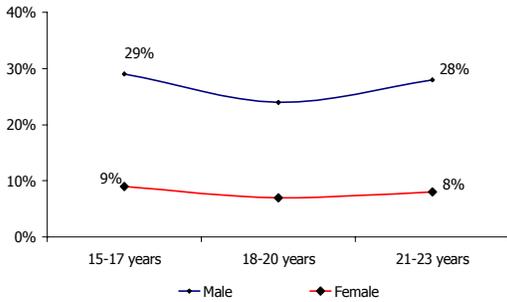
The greater number of involuntary sexual relationships was found among younger adolescents, especially females (60%) (Figure 4). Young women whose first sexual encounter occurred at age 15 or earlier were twice as likely to have felt pressured (33%), compared with those initiated at an older age (16%). Strengthening the sense that there are people in whom they can confide could increase young people's assertiveness in their first sexual relationship by approximately 10%.

3. Protecting oneself

Once the decision is made to have sexual relations involving penetration, the use of a condom protects against HIV and its associated risks. The danger of infection is especially great with casual sex and multiple sexual partners (Figure 5). Some 20% of sexually active male and 13% of sexually active female youth said they had sex with more than one partner in the previous year, yet only half of male and a quarter of female youth said they used condoms in their most recent sexual relation.

Unprotected sex involving anal penetration is the sexual practice with the highest risk of HIV transmission. Some 32% of

Figure 3
% whose first penetrative sexual relation was at the age of 15 years or younger



Gains: Refers to the proportion of the whole population that will benefit as a result of the stated intervention. This is calculated as the product of the risk difference and the proportion requiring intervention. The gain is a useful parameter for comparisons of cost-effectiveness of interventions.

Figure 4
% whose first penetrative sexual relation was without their consent

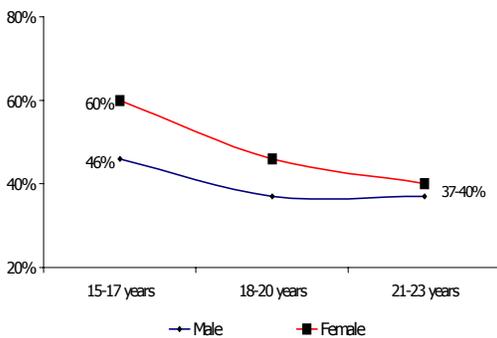


Figure 5
In your last sexual relation with penetration, did you use a condom?

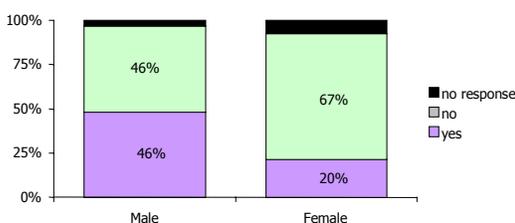
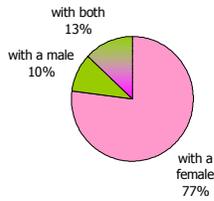


Figure 6
Sex of those with whom male youth reported having anal sex

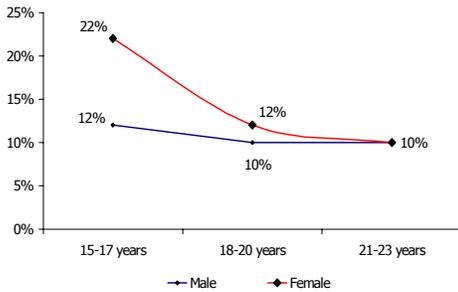


sexually active males and 10% of females said they had anal sex (14% among girls 15 to 17 years old). Among the males practicing anal sex, the majority said they did it 'with women' (Figure 6). Only 44% of these young men and 26% of these young women said they used a condom in their most recent sexual encounter.

Among sexually active youth aged 15 to 17 years who do *not* use condoms, 11% of males and 22% of females said they did not do so because the partner was unwilling (Figure 7). Factors likely to produce gains in the use of condoms were identified for young men: sports in the schools (7%), confiding in adults (9%) and the attitudes underlying having oneself tested for HIV (9%).

Among sexually active youth, half of the males and a third of the females were aware of the danger of infection from HIV/AIDS independently of whether or not they use any protection during sex. Twice as many young women (21%) as young men (13%) were unaware of the danger.

Figure 7
% who did not use a condom because "the other person did not want to"



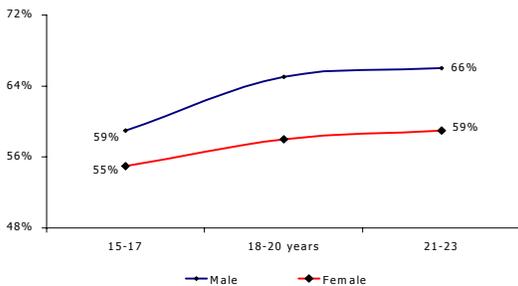
Asked about the best way to prevent HIV/AIDS, sexually active young men most frequently answered 'always use condoms' – 75% of those who do use them and 67% of those who do not. Among sexually active females, the most frequent response was 'fidelity to one's partner' – 70% of those who had only one partner and 60% of those with two or more partners.

4. Engagement with the health services

Only one out of every four young people surveyed knows where to get assistance in matters of health and sexuality. Only 21% have any confidence in the health services. Faced with a sexual problem, 47% would approach a health service in which they had confidence but only 18% if they did not feel confident about the service.

Among sexually active youth, 62% showed interest in being tested for HIV (Figure 8) but one in three do not know where to get it. There is greater likelihood of knowing where the test might be done where there is training in sexuality (4% gain) and confidence to talk with people outside the home (6% gain). One quarter of young people had been tested at least once.

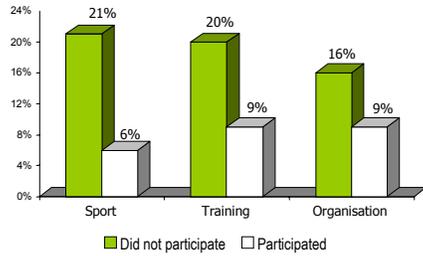
Figure 8
% who intend to have an HIV test



5. Preventing risks associated with HIV/AIDS

Among 15 to 19 year old young women, 15% of all respondents and 57% of those sexually active said they had become pregnant at some time. Pregnancy was three times as likely to occur in young women who do not play any sports compared with those who do, and twice as likely among young women who do not belong to any organization and/or have received no instructions in sexuality (Figure 9). Areas of intervention with

Figure 9
% female youth who said they had been pregnant at least once,
according to their participation in three activities



potential gains in avoiding teen-age pregnancy (15-19 years) were greater involvement in sports (4% among female students and 17% among non-students) and instructions on health and sexuality for students (3%).

One out of every ten sexually active young men (15-19 years old) said he had experienced abnormal secretion from the penis, a marker for sexually transmitted diseases (STD). The frequency of STDs among youth who do not use condoms was double that among those who do use them (14% vs. 7%). Increased participation in organizations and confidence in teachers *each* have the potential for preventing 5% of the STDs that occur among 15 to 19 year old males in school.