

*[Taking it like men]....***Health Seeking and Sexual Behavior of Young Men Affected by Sexually Transmitted Infections in Botswana: Is there a relationship between normative beliefs about condoms and their health seeking behavior for STI infections?**

This paper investigates the link between men's health seeking behavior for STI infections within the context of their normative beliefs about and attitudes to condoms. The paper seeks to establish if men's normative beliefs about condoms has any association with their health seeking behavior; disclosure of STI infection to partners and sexual practices during the time they were diagnosed with an STI.

The severity of Botswana's heterosexually driven HIV /AIDS epidemic is well documented. The epidemic, which has eroded some of the gains in the quality of life that the country had achieved since independence, has been blamed on a number of factors, significant among which are high prevalence of STIs, unequal gender relations and the subservient position of women in society. At the same time, studies have documented certain masculinity norms that increase men's vulnerability to infections. These include men's reluctance to seek help; willingness to take risks; multiple sexual partnerships and unwillingness to use condoms. Most STI infections result from failure to use a condom or lack of proper use during intercourse. The aim of this paper is to investigate whether men's normative beliefs about condoms have any bearing on their health seeking behavior; disclosure to sexual partners and sexual practices during the time when they were diagnosed with an STI.

Data Sources

Data used in this paper are derived from the 2004 Botswana AIDS Impact Survey II (BAIS II, 2004). BAIS is Botswana's version of the Demographic Health Survey. BAISII, the latest of a series of nationally representative demographic surveys of population aged 10-64 years, documented knowledge, attitudes, behavior, and cultural factors that might influence HIV infection; prevention; and impact mitigation. The survey also included a component on voluntary HIV testing among population aged 18 months to 64 years, in order to generate a nationally representative population-based estimate of HIV/AIDS prevalence.

The survey used the 2001 Population Housing Census as a sampling frame, and is stratified by administrative districts and major population centers. The survey utilized a two-stage stratified probability sample design to pick the sample. The first stage was the selection of the Primary Sampling Units (PSUs), in this case, census enumeration areas (EAs). These were selected with probability

proportional to a measure of size (PPS), where measures of size (MOS) were the number of households in each EA. At the second stage of sampling, the households were systematically selected from a fresh list of occupied households obtained from the sampled EAs. The survey utilized household; individual; workplace and community questionnaires.

Methods

The sample is restricted to males in their reproductive years, who reported ever experiencing an STI during the 12 months before the survey. The analysis uses bi-variate and logistic regression analysis to explore the relationship between men's normative beliefs about condoms and their health seeking, disclosure and sexual practices. The results of the gross effects model are presented first, followed by those of the net effects model. The sample was weighted to make it nationally representative.

Results

Fifteen percent of the men survey indicated that they had experienced an STI in the 12 months before the survey. On average, men sought help for their STI four days after noticing the sign. While the majority of men displayed positive attitudes towards condoms, a smaller percentage of them endorsed the idea that women should carry condoms if they so wish. Preliminary results indicate that men's beliefs about condoms are related to a number of factors, such as age and education. Normative beliefs about condoms were also found to be related to the amount of time that men take before seeking help for STI infections.