

Does Race Matter in Risky Sexual Behaviours among young people in Metropolitan Cape Town?: Four-Race Model

Abstract

Context: Risky sexual behaviours predispose adolescents and young adults to HIV/AIDS pandemic because of unprotected sexual activity and there are racial differences in HIV/AIDS prevalence rate. Understanding the factors that promote such risky behaviours which account for this level of HIV/AIDS is crucial for any significant prevention programme.

Objective: This paper examines the association between some selected background and institutional characteristics and sexual behaviours of young people (taking into consideration their race/population group) in Cape Town, South Africa.

Methods: This paper uses Wave 1 data of Cape Area Panel Study (CAPS) which is a longitudinal study of the lives of 4,800 young adults, their families and households. Wave 1 sample was a representative sample of young people who were aged 14 to 22 in 2002. STATA statistical package is used for the analysis, and simple descriptive statistics, correlation, Chi-square, binary and multinomial logistic regression models were employed for the analyses. The key independent variables included in the analyses are age and age at first sexual intercourse measured in single years, gender, type of place where they spent most of their lives, population group/race, religion, marital status, currently enrolled in school, expectation to succeed, self assessment of school, how often they do home work, lateness to school, truancy, work status, whether they have any health problem/disability, self health rating, whether they had any serious illness or injury that kept them from doing normal activities, description of first sexual intercourse, experience of forced sex, number of sexual partners in the last one year, experience of abnormal discharge and ulcer or sore in the private part. Outcome variables are contraceptive use at first and last sexual intercourse and consistency of condom use at last sexual intercourse.

Results: Results showed that a larger proportion of the young people under the study fall within ages of 17 and 19 with mean age of 17.88 years (95% C.I: 17.81years - 17.95 years; N= 4,754). There were more females than males in the sample (53% versus 47%), and more than half were born in Cape Town (65%). Forty-five percent of the respondents were Blacks/Africans, 13% White and 42% Coloureds and Asians; and 64% were currently in school. More than half rated themselves to be an average student (58%). Twenty-eight percent never worked in the last 12 months. Forty-six percent (N=4,744) had been sexually active (45% for males and 46% for females), and majority had their first sexual debut between ages 14 and 18 with the mean age at first sexual intercourse of 16.22 years. Eighty-eight percent of the young adults had their first sex with a girl/boyfriend and 54% of their first sexual partners are below age 18 years. Fifty-three percent reported using protection against pregnancy/disease at first sex and only 1% reported that their first sexual intercourse was forced/rape. Seventy-two percent reportedly use contraceptives at their last sexual intercourse (30% to prevent pregnancy;

10% to prevent disease and 60% to prevent both). Sixty-nine percent reportedly always use condom with last sexual partner (11% usually, 14% sometimes and 6% rarely). Eight percent reported having abnormal discharge in the past 12 months (4% among males versus 12% among females; $P<0.01$) and 4% reported ulcer or sore in the past 12 months (3% among males versus 5% among females). Age, type of place where most of their lives were spent, population group, marital status, whether they are currently enrolled in school and their description of first sex were correlated with use of protection at first sexual intercourse ($P<0.01$ and $P<0.05$). All the variables with the exception of description of first sexual intercourse were significant from the binary logistic regression model ($P<0.05$). With respect to contraceptive use at the last sexual encounter, gender, population group, marital status, whether they are currently enrolled in school and their description of first sex were correlated with use of protection at the last sexual intercourse with gender, population group, marital status and whether currently enrolled in school were significant from the binary logistic regression model ($P<0.01$). For the last outcome variable- consistency of condom use at the last sexual encounter, population group who reported usual use and sometimes use were found to be significant ($P<0.05$ and $P<0.01$) when compared to the always use group. Also, gender, type of place where they spent most of their lives and marital status were found to be significant among group who rarely use condom at last sexual intercourse ($P<0.01$; $P<0.05$ and $P<0.01$ respectively). There is racial difference with respect to the outcome variables (Contraceptive use at first and last sexual intercourse and consistency of condom use at last sexual intercourse ($P<0.01$)).

Conclusions: The paper concludes that prevention and intervention programmes to increase the use of contraceptives and consequently reduce the risk of sexually transmitted infections (STIs) including HIV/AIDS among young people in South Africa must take into consideration their age differences, race/population group, environment and marital aspirations/goals.