Uganda

HIV/AIDS
Sero-Behavioural Survey

2004-05

UGANDA
HIV/AIDS SERO-BEHAVIOURAL SURVEY
2004-2005

Ministry of Health
Kampala, Uganda

ORC Macro
Calverton Maryland, USA

March 2006

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This report presents findings from the 2004-05 Uganda HIV/AIDS Sero-Behavioural Survey (UHSBS) carried out by the Ministry of Health. ORC Macro provided financial and technical assistance for the survey through the United States Agency for International Development (USAID)-funded MEASURE DHS programme, which is designed to assist developing countries to collect data on fertility, family planning, maternal and child health, and HIV/AIDS. Financial and technical assistance was also provided by the U.S. Centers for Disease Control and Prevention (CDC). Financial support was provided by the Government of Uganda, the U.S. Agency for International Development (USAID), the U.S. President's Emergency Plan for AIDS Relief, and the Government of Japan through the Japan International Cooperation Agency (JICA). Additional support was provided by the Uganda Bureau of Statistics, the World Health Organisation, the AIDS Integrated Model (AIM) project, UNAIDS, Makerere University, the Uganda AIDS Commission, and the Uganda Global Fund for AIDS, TB, and Malaria. The opinions expressed in this report do not necessarily reflect the views of the donor organisations. It is also important to acknowledge the contribution of the office and field staff, district officials, communities, and survey respondents, without whom the survey would not have been possible.

Additional information about the survey may be obtained from the Ministry of Health, P.O. Box 7272, Kampala (Telephone: 256.41.340.874 or 256.41.259.669; Fax: 256.41.348.278; E-mail:opioalex@infocom.co.ug; jmusinguzi@infocom.co.ug; wkirungi@starcom.co.ug).

Additional information about the DHS programme may be obtained from MEASURE DHS, ORC Macro, 11785 Beltsville Drive, Suite 300, Calverton, MD 20705, U.S.A. (Telephone: 301.572.0200; Fax: 301.572.0999; E-mail: reports@orcmacro.com; Internet: www.measuredhs.com.

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FOREWORD

Uganda has been affected by the HIV/AIDS epidemic since the early 1980s. This epidemic which started in the Rakai district located in the southwestern part of the country has now spread countrywide, with all parts of the country experiencing the brunt of the scourge.

In response to the epidemic, a national multisectoral response was put in place. In addition, a system for monitoring the magnitude and dynamics of the HIV epidemic and impact of interventions in the country was instituted. This system consists of surveillance of antenatal clinic and sexually transmitted infection clinic attendees, periodic population-based surveys, and mathematical projections.

In line with the above, the Uganda HIV/AIDS Sero-Behavioural Survey was conducted in 2004-2005 to provide additional data that can be used to inform strategic planning, programme evaluation, policy formulation and calibration of the sentinel surveillance system. The main aim of the survey was to obtain national and sub-national estimates of the prevalence of HIV, syphilis, herpes simplex virus type 2, and Hepatitis B, and their risk factors, programme coverage, as well as the indicators of behaviour, knowledge, and attitudes. The survey was conducted on a nationally representative sample consisting of 10,430 households distributed in 417 enumeration areas. During the survey, individual interviews were conducted and biological samples were taken. In all, over 8,000 adult women, 7,000 adult men, and 8,000 children aged 0-4 years were sampled.

This report presents comprehensive information on the HIV/AIDS situation in Uganda based on the results of the survey. The information ranges from biological to behavioural indicators and is now available for public use. Advantage should be taken of the availability of this invaluable information to inform the process of policy formulation, planning, monitoring and evaluation of the HIV/AIDS programme in Uganda. The report will be useful to all HIV/AIDS stakeholders, be those at policy level, programme level, community level, academia and research institutions.

Major General (Rtd.) Jim K. Muhwezi; MP
MINISTER OF HEALTH

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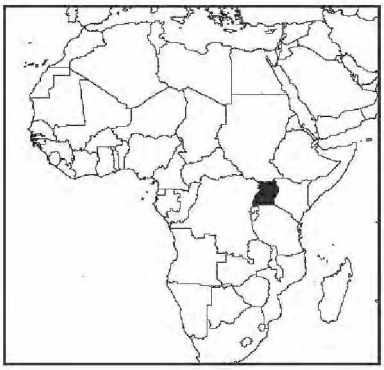


This map shows the districts of Uganda as they were when the Uganda HIV/AIDS Sero-Behavioural Survey 2004-05 was designed. The regions shown on the map were created for survey analysis purposes.

INTRODUCTION 1

1.1 BACKGROUND INFORMATION

Uganda has braved a severe and devastating epidemic of HIV infection and AIDS for almost a quarter of a century. The epidemic started on the shores of Lake Victoria in Rakai district, the initial epicentre of the illness. Thereafter, HIV infection spread quickly, initially in major urban areas and along highways. By 1986, HIV had reached all districts in the country, resulting in what is classified as a generalised epidemic. HIV infection continued to spread relentlessly throughout the 1980s and early 1990s and soon gave rise to a wave of AIDS as more HIV-infected people succumbed to opportunistic infections arising from their suppressed immune systems. As in other countries in sub-Saharan Africa, Uganda's HIV/AIDS epidemic is predominantly spread through heterosexual contact.

Throughout the 25 years of the epidemic, people living in urban areas have had higher prevalence relative to those in rural areas. In all, it is estimated that about 2 million people were infected by HIV during this period, of whom about 1 million have died and another 1 million are living with the infection today.

The impact of the disease has been mainly felt through the escalating morbidity and mortality that disproportionately affects women and men during the prime of their productive life. The consequences of the epidemic span across all spheres of life (individuals and communities nationwide). It has imposed a severe and unsustainable burden on the meager health sector resources, as funds are diverted from other areas to HIV prevention and AIDS care and treatment services. HIV infection has also given rise to an epidemic of opportunistic infections, including tuberculosis (TB). Treatment of some of these opportunistic infections is more expensive than that of AIDS.

The HIV/AIDS epidemic has also had far-reaching social consequences. By depriving families and communities of their most productive population, it has caused untold suffering to individuals and communities. At the community level, mortality of individuals in the prime of their productive lives has imposed unsustainable strains on the extended family structure, leading to a massive burden of orphans and other vulnerable children that are now estimated at almost 2 million in the country, as well as other social consequences such as child- and widow-headed households. Morbidity and mortality of parents has severely affected the schooling of children, especially girls who are forced prematurely into the labour market, further aggravating the vicious cycle of vulnerability.

The micro- and macro-economic consequences are diverse. Economic productivity has been adversely affected by the premature death of women and men during their most productive age, leaving orphans and widows. The loss of critical human capital has affected industrial and private sector growth, and the development of institutional capacity, all of which require skilled workers and leaders. Morbidity and mortality also results in the loss of skilled manpower for teaching, medical care, agricultural production, and other professions that are not easily replaced. Indeed, it is for this reason that the attainment of human development in areas of economic growth, poverty reduction, and improved quality of life indicators is below what it would have been in the absence of AIDS. The demographic consequences of the epidemic are reflected in the quality of life indices in the country, such as infant mortality and life expectancy, that are currently lower than what would have been achieved in the absence of HIV.

Uganda realised the gravity of the epidemic right from the outset and mounted public health interventions to counter its spread. The first National AIDS Control Programme in the world was started by the Ministry of Health, Uganda. The programme piloted and implemented several interventions to avert the further spread of HIV. Specifically, the programme initiated public education campaigns about the epidemic, promoted safer sexual behaviour, including abstinence, mutual faithfulness, and condom use, ensured safe blood transfusion in health facilities, and initiated programmes for care and treatment for infected individuals. It also implemented surveillance activities to monitor the magnitude and dynamic of HIV infection. The interventions evolved over time as more knowledge about the epidemiology of the epidemic emerged. As a consequence, it appears that after the seemingly relentless spread of HIV infection in the late 1980s and early 1990s, the epidemic peaked in the early 1990s, particularly in urban areas with antenatal prevalence ranging between 25-30 percent in the most affected urban areas. Subsequently, antenatal HIV sero-prevalence steadily declined throughout the remainder of the 1990s in both urban and rural areas, but particularly in urban areas. However, there is emerging evidence that during the early part of this decade, HIV sero-prevalence has stabilised at 5-10 percent in urban areas and below 5 percent in rural areas.

Hepatitis B is a global public health concern, with high endemicity in sub-Saharan Africa, China, Southeast Asia, the Amazon basin, and many of the Pacific islands. In Uganda, the prevalence of hepatitis B in the general population was previously unknown, although small studies and data from the national blood bank estimated the prevalence to be 8-16 percent. Moreover, the data are obtained from a highly selected group of people who are thought not to be at risk of HIV infection. For this reason, hepatitis B testing was incorporated into the UHSBS. Similarly, data on the prevalence of syphilis and herpes simplex type 2 were also unavailable from the general population, so these two biomarkers were also added as part of the survey.

As in other countries in Africa, most knowledge about the magnitude and dynamics of HIV and syphilis infection in Uganda is based on antenatal HIV surveillance and a few sub-national, population-based studies. While providing useful information for informing strategic planning and evaluation of programmes, these data sources are either limited in geographical coverage or the population groups that they cover, and therefore the data that are obtained may not be fully generalisable to the whole country.

The 2004-05 Uganda HIV/AIDS Sero-Behavioural Survey (UHSBS) was designed to provide accurate national and sub-national estimates of HIV infection and behavioural risk factors as well as other programme indicators to guide strategic planning and evaluation of programmes, and to complement and calibrate estimates obtained from other sources. The UHSBS was implemented by the Ministry of Health (MOH). ORC Macro provided financial and technical assistance for the survey through the USAID-funded MEASURE DHS programme. Financial and technical assistance was also provided by the U.S. Centers for Disease Control and Prevention (CDC). Financial support was provided by the Government of Uganda, the U.S. Agency for International Development (USAID), the U.S. President's Emergency Plan for AIDS Relief, and the Government of Japan through the Japan International Cooperation Agency (JICA). Additional support was provided by the Uganda Bureau of Statistics, the World Health Organisation (WHO), the AIDS Integrated Model (AIM) Project, UNAIDS, Makerere University, and the Uganda Global Fund for AIDS, TB, and Malaria Project.

1.2 National Policy on HIV/AIDS

From the outset of the epidemic, the Uganda Government recognised the gravity of the problem it posed and initiated public health strategies for containment. Recognising that the majority of new infections were transmitted through heterosexual contact, the strategy to contain the spread of the epidemic sought to address sexual behaviour risk factors to avert further HIV transmission by promoting primary and secondary sexual abstinence, mutual faithfulness among married or cohabiting partners, and

condom use, especially in higher-risk sexual encounters. This approach to prevention, colloquially known as the 'ABC' (abstinence, being faithful, and condom use) approach has continued to form the backbone of HIV prevention strategy in the country to this day. The ABC strategy has since been expanded to the ABC Plus, to include voluntary counselling and testing (VCT), prevention of mother-to-child transmission of the virus (PMTCT), antiretroviral treatment (ART), and HIV/AIDS care and support services.

In addition to recognising the public health consequences of the problem, the government recognised that its impact transcended the sphere of public health, requiring the involvement of all spheres of public life in the country comprising public, civil society, nongovernmental organisations, communities, and individuals. Consequently, the multisectoral approach to HIV prevention and control including care and support services was adopted as early as 1990 and currently forms one of the pillars of the national response. This policy underscores the concerted involvement of all individuals, communities, public and private sectors, including civil society and community-based organisations, in the effort to contain the epidemic. It calls for concerted efforts by all stakeholders according to their mandates and areas of comparative advantage and capacities. In line with this, a multisectoral coordinating body, the Uganda AIDS Commission, was created by statute of Parliament in 1992 and placed under the office of the President to coordinate the harmonised implementation of the multisectoral approach. Furthermore, the Government recognised the importance of political leadership and commitment at all levels of governance in all efforts to prevent the epidemic and mitigate its impact. Involvement of political leadership is the second pillar in the national response. The government also adopted a policy of openness about the epidemic as one of the pillars of the national response, which is vital to fighting stigma and discrimination. Finally, the Ugandan response received unprecedented support and involvement of development partners at all levels of governance and civil society.

The Uganda government recognises the developmental challenges of the epidemic and has taken concrete steps to address it. HIV control is one of the developmental priorities addressed in the country's Poverty Eradication Action Plan (PEAP) and the National Vision for 2025. The National AIDS Policy, which is currently in draft form, provides for a framework for addressing the multidimensional challenges of the epidemic by a variety of stakeholders in a coordinated way. The policy emphasises the main HIV/AIDS concerns in the development agenda in the country by all sectors and sections of society. It also provides for protection of the rights of vulnerable individuals and populations, and mitigation of the impact of the epidemic at the individual and community levels and also on micro- and macro-economic development. It also provides a framework for strengthening the capacity of institutions and communities to overcome the social and economic challenges of the epidemic. The policy also provides a framework for strengthened monitoring and evaluation of HIV/AIDS programmes, conducting research, and for resource mobilisation. Indeed, this report of the UHSBS will be an invaluable source of information for the monitoring and evaluation of HIV/AIDS programmes in Uganda.

1.3 Objectives of the Survey

The UHSBS is a nationally representative, population-based survey designed to obtain national and sub-national data on the prevalence of HIV and other sexually transmitted infections (STIs) and their social and demographic variations in the country. The survey also obtained information on knowledge, attitudes, and behaviour regarding HIV/AIDS. Data collection took place from 14 August 2004 until late January 2005.

The overall goal of the survey was to provide programme managers and policymakers involved in HIV/AIDS programmes with strategic information needed to monitor and evaluate existing programmes and to effectively design new strategies for combating the epidemic in Uganda. The survey data will also be used to make population projections and to calculate indicators of the UN General Assembly Special

Session (UNGASS), USAID, the President's Emergency Plan for AIDS Relief, UNAIDS, WHO, the Uganda Health Sector Strategic Plan, and the HIV/AIDS National Strategic Framework.

The specific objectives of the 2004-05 UHSBS were the following:

- To obtain accurate estimates of the magnitude and variation in HIV prevalence in Uganda
- To obtain accurate information on behavioural and care indicators related to HIV/AIDS and other sexually transmitted infections
- To obtain accurate information on other HIV/AIDS programme indicators
- To provide information on HIV prevalence to calibrate and improve the sentinel surveillance system
- To determine the magnitude and distribution of syphilis, herpes simplex 2, and hepatitis B infection.

1.4 Sample Size and Design

The sample for the 2004-05 UHSBS covered the population residing in households in the country. A representative probability sample of 10,425 households was selected for the UHSBS, and an additional 12 households were found during field work for a total of 10,437. The sample was constructed to allow for separate estimates for key indicators for each of nine regions created for the survey, consisting of eight groups of the (then) 56 districts in Uganda, and Kampala, the capital, as a region on its own. The regions were delineated as follows:

1 Central: Kalangala, Kiboga, Luwero, Masaka, Mpigi, Mubende, Nakasongola, Rakai, Sembabule, and Wakiso
2 Kampala
3 East Central: Bugiri, Iganga, Jinja, Kamuli, Kayunga, Mayuge, and Mukono
4 Eastern: Busia, Kapchorwa, Mbale, Pallisa, Sironko, and Tororo
5 Northeast: Kaberamaido, Katakwi, Kotido, Kumi, Moroto, Nakapiripirit, and Soroti
6 North Central: Apac, Gulu, Kitgum, Lira, and Pader
7 West Nile: Adjumani, Arua, Moyo, Nebbi, and Yumbe
8 Western: Bundibugyo, Hoima, Kabarole, Kamwenge, Kasese, Kibaale, Kyenjojo, and Masindi
9 Southwest: Bushenyi, Kabale, Kanungu, Kisoro, Mbarara, Ntungamo, and Rukungiri.

The sample was allocated roughly equally across all nine regions to allow a sufficient size in each to produce reliable results. Since the sample was not allocated in proportion to the size of each region, the UHSBS sample is not self-weighting at the national level. Consequently, weighting factors have been applied to the data to produce nationally representative results.

The survey utilised a two-stage sample design. The first stage involved selecting sample points or clusters from a list of enumeration areas (EAs) covered in the 2002 Population Census. A total of 417 clusters composed of 74 urban and 343 rural points were selected. The second stage of selection involved the systematic sampling of households from the census list of households in each cluster. Twenty-five households were selected in each EA.

All women and men aged 15-59 who were either permanent residents of the households in the sample or visitors present in the household on the night before the survey were eligible to be interviewed in the survey. Unlike most studies in which the age category reflects the reproductive age group 15-49,

the upper age cutoff in this survey was extended to 59 years so as to include the segment of the population that remains sexually active up to that age. Nevertheless, since most of the internationally accepted HIV/AIDS indicators are based on the population aged 15-49, most of the results presented in this report reflect this age group.

All women and men who were interviewed were asked to voluntarily give a blood sample for testing. Blood samples were also drawn from children under age five years after obtaining consent from their parents or caretakers. Children aged 5-14 years were not enrolled in the survey because other studies have shown a very low HIV prevalence in this age group.

1.5 QUESTIONNAIRES

Two questionnaires were used in the survey, a Household Questionnaire and an Individual Questionnaire for women and men aged 15-59. The contents of these questionnaires were based on the model AIDS Indicator Survey questionnaires developed by the MEASURE DHS programme.

In consultation with a spectrum of government agencies and local and international organisations, the MOH and MEASURE DHS adapted the model questionnaires to reflect issues in HIV/AIDS relevant to Uganda. These questionnaires were then translated from English into six local languages—Ateso-Karamajong, Luganda, Lugbara, Luo, Runyankole-Rukiga, and Runyoro-Rutoro. The questionnaires were further refined after the pretest and training of the field staff.

The Household Questionnaire was used to list all the usual members and visitors in the selected households. Some basic information was collected on the characteristics of each person listed, including age, sex, education, relationship to the head of the household, and orphanhood among children under age 18 years. The main purpose of the Household Questionnaire was to identify women and men who were eligible for the individual interview. The Household Questionnaire also collected information on characteristics of the household's dwelling unit, such as the source of water, type of toilet facilities, materials used for the floor of the house, ownership of various durable goods, and ownership of mosquito nets. Information was also collected on whether the household had received specific types of care and support in the preceding 12 months for any chronically ill adults, any household members who died, and any orphans and vulnerable children. The Household Questionnaire was also used to record respondents' consent to volunteer to give blood samples. The blood collection and testing procedures are described in the next section.

The Individual Questionnaire was used to collect information from all women and men aged 15-59 and it covered the following topics:

- Background characteristics (e.g., education, media exposure, occupation, religion)
- Reproduction
- Marriage and sexual activity
- Husband's background (for women)
- Knowledge and attitudes towards HIV/AIDS
- Knowledge and prevalence of other sexually transmitted infections (STIs)

All aspects of the UHSBS data collection were pretested in June 2004. For this, five teams were formed, each with 1 supervisor, 2 female interviewers, 2 male interviewers and 2 laboratory technicians. Team members were trained for ten days and then proceeded to conduct the survey in the various districts in which their native language was spoken. In total, 300 individual interviews were completed in the pretest. The lessons learnt from the pretest were used to finalise the survey instruments and logistical arrangements for the survey.

1.6 BIOMARKERS

All women and men aged 15-59 who were interviewed were asked to voluntarily provide a blood sample for subsequent testing for HIV, syphilis, herpes simplex virus 2, and hepatitis B. Blood samples were also requested for all children under five for testing for HIV and hepatitis B. The protocol for the blood specimen collection and analysis was developed jointly by all parties to the survey. It was reviewed and approved by ORC Macro's Institutional Review Board and the Science and Ethics Committee of the Uganda Virus Research Institute (UVRI) and was also cleared by the Ethics Committee of the Uganda National Council of Science and Technology and the Centers for Disease Control and Prevention (CDC) in Atlanta. The protocol allows for the merging of the test results to the socio-demographic and behavioural data collected in the individual questionnaires, provided that the information that could potentially identify an individual is destroyed before the linking is effected. This required that cluster and household codes be deleted from the data file and that the back page of the Household Questionnaire that contains the bar code labels be destroyed prior to merging the test results with the individual data file. This report contains the results of the analysis of the fully linked dataset.

For the purposes of blood sample collection, two laboratory technicians were included in each of the 18 field teams. The laboratory technicians were recruited from Ministry of Health, nongovernmental, and private health facilities. As part of the informed consent for blood sampling, the laboratory technician explained the procedure, the fact that the equipment used was sterile and clean, the confidentiality of the data, and the tests to be performed on the blood. Respondents were also informed that they could obtain their syphilis results the following day if they wanted, that those testing positive for syphilis would be treated, and that the other test results could not be linked or made available to the respondent. The laboratory technician was instructed to ask respondents if they had any questions and then ask if they consented to the blood draw, if they wanted to receive their syphilis results the following day, and if they consented to having their blood sample be stored for future unspecified tests.

After obtaining consent, the laboratory technician drew a venous blood sample in a 4.5 ml EDTA Vacutainer tube. If respondents refused the venous blood draw, they were given an option to provide a dried blood spot sample on a filter paper card from a finger prick using a single-use, spring-loaded, sterile lancet. For children under five and youth aged 15-17 years, consent was sought from their parents or guardians to take a dried blood spot sample. Blood tubes and filter paper dried blood spot samples were labeled with a bar-coded identification label, which was also pasted on the Household Questionnaire on the line number for that respondent and on various other laboratory forms.

Before starting work in a given area, each team made arrangements to establish a temporary field laboratory, usually setting up their mobile equipment in a spare room in a laboratory attached to a hospital or health centre. Each team carried cold boxes, centrifuges, a generator, a liquid nitrogen tank, and routine laboratory supplies such as pipettes, gloves, test tubes. In the temporary field laboratory, a number of procedures were carried out on the blood samples. In the case of specimens from adults, the laboratory technicians first made a back-up dried blood spot from the venous blood samples. They then centrifuged the blood and transferred the plasma to microvials, labeled with the same bar code identification. A small aliquot was removed and tested for syphilis using the rapid plasma reagin (RPR) card test. Results were recorded on a preprinted laboratory results form that was given on the morning of the next day to the interviewer on the team who was designated to return the syphilis results to the respective respondents. Packed blood cells remaining in the EDTA Vacutainer tubes were transferred to microvials labeled with the bar code for long-term storage. Microvials containing plasma and packed blood cells were stored in liquid nitrogen tanks and their location within the tank recorded on a preprinted specimen inventory form. All dried blood spots were air-dried overnight in plastic boxes and stored at ambient temperature in lots of 20 separated by glassine paper in ziplock bags containing desiccants. Specimens were periodically

collected from the field and taken to the Uganda Virus Research Institute (UVRI). Recharged liquid nitrogen tanks and resupplies were also provided to the teams.

Syphilis results were provided to respondents who provided a venous blood sample and who indicated that they would like to get their results. At least one of the interviewers on each team was a nurse who was designated to provide the results at the respondent's home the following day. Respondents testing positive for syphilis were treated with a single injection of benzathine penicillin. Anyone who indicated being allergic to penicillin was treated with erythromycin tablets in line with national treatment guidelines.

Specimens received at UVRI were checked against the specimen shipping forms and were then registered electronically using a bar code reader. Each specimen was assigned a unique laboratory number during the registration process, and laboratory testing and storage in the repository were carried out against that number. Specimens were subjected to the following tests:

HIV: Plasma specimens from the venous blood draw were tested with a two HIV EIA parallel testing algorithm—Murex 1.2.0 (Abbott) and Vironostica Uniform II Plus O (Biomerieux)—in accordance with WHO guidelines, with repeat testing for specimens with 'grey zone' or discordant results on the two assays; Western blot was carried out to resolve specimens with repeatedly discordant results using WHO interpretative criteria. For quality control, all positive specimens and 5 percent of negative specimens were retested by the CDC laboratory in Entebbe using the same testing algorithm; specimens with discordant results were resolved by repeating the testing algorithm. Samples with discrepant results between the two laboratories were sent to Nakasero Blood Bank for 'tie-breaker' testing.

Dried blood spot specimens from children and from adults who declined the venous blood sample were tested for HIV by eluting serum from 6 mm discs punched from the blood spots. They were tested with a two HIV EIA parallel testing algorithm—Murex 1.2.0 (Abbott) and Vironostika Uniform II Plus O (Biomerieux). Specimens with unambiguously positive or negative results on both assays were reported without further testing, while all others were tested by Western blot using WHO interpretative criteria. Specimens from children less than 18 months of age with a positive or ambiguous result were further tested for HIV DNA using a polymerase chain reaction (PCR) test (Roche HIV DNA 1.5 kit).

Syphilis: All plasma specimens, regardless of the field result, were screened with the the rapid plasma reagin (RPR) test at a dilution of 1:8; reactive specimens were titrated at doubling dilutions and reported as positive after review by a second reader. All specimens positive on RPR and 10 percent of negative specimens were also tested with the treponemal pallidum haemaglutination assay (TPHA) test. For quality control, all positive specimens and 5 percent of negative specimens were tested using this algorithm. Specimens with discordant results were resolved by repeat testing on the same assays or were reported as indeterminate. Moreover, all positive samples and 5 percent of the negatives were retested by CDC-Uganda lab.

Herpes simplex-2: Specimens were tested on an HSV-2 EIA (Kalon Biological HSV Type 2 IgG indirect ELISA). Specimens with results in the defined 'grey zone' were tested again and because there is no reliable confirmatory assay, those that remain 'grey zone' were reported as 'indeterminate.' For quality control, a proportion of the positive specimens and 10 percent of negative specimens were re-tested and specimens with discordant results are reported as indeterminate. Moreover, all positive samples and 5 percent of the negatives were retested by CDC-Uganda lab.

Hepatitis B: Testing for Hepatitis B was performed on a nationally representative sub-sample of 6035 specimens from adults (a 1-in-3 subsample). The samples were tested with ELISA anti HBc. The number of specimens positive on this assay indicates the overall prevalence of HBV infection (resolved,

chronic, and active). Specimens positive for anti HBc were tested using HBsAg ELISA that gives the prevalence of chronic HBV infection (the algorithm adopted by CDC for determining the prevalence of hepatitis B infection among the general population). For quality control, 5 percent of positive specimens and 5 percent of negative specimens were retested at the CDC-Uganda laboratory. Specimens with results discordant between the two laboratories were resolved by repeat testing using all available assays or were reported as indeterminate.

1.7 Voucher System for Voluntary Counselling and Testing

Respondents who agreed to provide a venous blood sample were offered the opportunity to get the results of the syphilis test that was performed in the field laboratory. However, respondents were not offered the results of any of the other tests, including HIV.

To assist respondents who wanted to know their HIV status, survey respondents were given a voucher for a free voluntary counselling and testing (VCT) visit, as well as an educational pamphlet that summarised available services and benefits of testing. The vouchers could either be used at a nearby health facility or at an outreach point established by the UHSBS project. As part of the VCT voucher system, UHSBS project staff identified and visited health facilities that were located close to each of the sample points selected for the survey. If these facilities did not already offer VCT services, provision was made to assist the facilities to provide it during the survey period. Facilities were provided with rapid HIV test kits and other supplies and forms needed to provide VCT services. A VCT supervisor was appointed in each district and, within each of the identified facilities, two counsellors and a laboratory person were enrolled to assist with the survey. These teams were responsible for making VCT services available at the facilities and, in cases in which the selected sample spot was located far from the facility, for providing outreach VCT services in locations close to the spot. At the end of the data collection phase, UHSBS staff compiled data from all the facilities on the number of vouchers that were utilised. Unfortunately, data on voucher utilization were missing from many of the facilities, making it difficult to estimate the rate of uptake of the free voucher.

1.8 Home-based Counseling and Testing Study

After the data collection for the main UHSBS was completed, a small home-based study was implemented to test the feasibility of providing respondents with their HIV results at home. The study was implemented in 33 clusters outside of the original 417 selected for the main survey, with 11 clusters each in three regions, namely, West Nile, Western, and Central. Six of the 18 teams used for the main survey were selected to implement the home-based study.

The home-based survey was implemented almost exactly like the main UHSBS except that adult respondents in the survey were told that they could get their HIV results the following day if they wanted them. In order to provide the HIV results, 4 counselors and 1 more laboratory technician were added to each team. The extra laboratory technician performed two rapid HIV tests in the field laboratory on the plasma samples at the same time as the syphilis testing was done. They provided the HIV test results using a blinded set of field forms to the counselors who provided the results to the respondents the following day. HIV results were not provided for children, since they had only provided dried blood spot samples.

In 8 of the 33 clusters covered in the home-based study, a qualitative study was implemented to explore how and why respondents accepted the blood draw and consented to a home visit by a counsellor to learn their test results. Results from the home-based study and the companion qualitative study are not addressed in this report, but will be released in other reports (Yoder et al., 2006).

1.9 TRAINING

The training of field staff for the UHSBS was held from 21 July to 6 August 2004. A total of 140 candidates for supervisors and interviewers were trained at the Hotel Africana in Kampala, while 46 laboratory technicians were trained at Tal Cottages in Kampala. Trainers were senior staff from the UHSBS project, assisted by staff from the Uganda Bureau of Statistics, UVRI, Ministry of Health, Makerere University, and ORC Macro.

Because of their large number, trainees for team supervisors and interviewers were divided into three groups, each with two assigned trainers. Training consisted of an overview of the survey and its objectives, techniques of interviewing, field procedures, a detailed description of all sections of the household and individual questionnaires, mock interviews between pairs of trainees, and three tests. During the second week, trainees were divided into language groups to review the questionnaires in their local languages. That week was also taken up with three days of practice in three sites close to Kampala, interspersed with discussions of the experience. A few days before the end of training, project staff identified individuals to be appointed as regional and team supervisors and these individuals were provided a half-day of special training.

The laboratory technicians were trained on blood draw procedures (for both venous and capillary blood), specimen processing in the field lab, storage and transportation of specimens, syphilis testing, lab safety procedures, labeling of samples, and consent administration. The training included a visit to the Acute Care Division of Mulago Hospital for further practice on infants and children. The laboratory technicians joined the interviewer and supervisor trainees for two days of field practice during the last few days of training. The nurse-interviewers were also trained on how to administer syphilis treatment.

An average of two training sessions were held in each of the nine designated regions for the counsellors and lab persons on the VCT teams. Training consisted of a general introduction to the survey, understanding the survey protocols, and how to use rapid HIV kits.

1.10 MOBILISATION AND FIELDWORK

Prior to the start of fieldwork, UHSBS staff arranged for numerous activities designed to promote awareness of the survey and encourage participation. Posters and brochures were printed and distributed to local officials in the areas that fell within the sample. TV and radio spots and talk shows were conducted to raise awareness of the general public to the survey. Teams from the survey office visited local officials immediately before the commencement of the survey to alert them to the survey. Advocacy and mobilisation activities continued throughout the survey period to encourage participation. The purpose of the survey, its design, implementation, utilisation of survey data, and the need for community participation were discussed, as well as issues of confidentiality and reasons for anonymity of HIV testing. Finally, when the survey was launched, UHSBS staff arranged for a press briefing and 'flagging off' of the teams by the Minister of Health and other senior MOH officials. The ceremony was covered by the news media, which also helped to advocate for the survey.

Eighteen teams carried out data collection for the survey. Each team consisted of one supervisor, two female interviewers, two male interviewers, two laboratory technicians and one driver. UHSBS staff coordinated and supervised fieldwork activities, assisted by occasional visits by staff from ORC Macro. Data collection took place over a five-month period, from 14 August 2004 to the end of January 2005.

1.11 DATA PROCESSING

The processing of the UHSBS questionnaires began shortly after the fieldwork commenced. Completed questionnaires were returned periodically from the field to the UHSBS project office in

Kampala, where they were entered and edited by data processing personnel specially trained for this task. Data were entered using ORC Macro's CSPro computer programme. All data were entered twice (100 percent verification). The concurrent processing of the data was a distinct advantage for data quality, because UHSBS staff were able to advise field teams of errors detected during data entry. The data entry and editing phase of the survey was completed in early March 2005.

Laboratory testing at the HIV Reference Laboratory (HRL) at the UVRI began shortly after the data collection. Priority was given to the HIV testing, followed by syphilis testing, Hepatitis B testing and herpes simplex. Testing included quality control testing at the CDC laboratory in Entebbe.

1.12 Response Rates

Table 1.1 shows response rates for the UHSBS. A total of 10,437 households were selected in the sample, of which 9,842 were found to be occupied at the time of the fieldwork. The shortfall is largely a result of structures that were vacant or destroyed. Of existing households, 9,529 were interviewed, yielding a household response rate of 97 percent.

In the households interviewed in the survey, a total of 11,454 eligible women aged 15-59 were identified, of whom 10,826 were interviewed, yielding a response rate of 95 percent. With regard to the male survey results, 9,905 eligible men aged 15-59 were identified, of whom 8,830 were successfully interviewed, yielding a response rate of 89 percent. The response rate for both sexes combined is 92 percent.

Although respondents aged 15-59 were eligible for individual interviews, the focus of the analysis in this report is on those aged 15-49. Table 1.1 shows that response rates for women and men aged 15-49 are very slightly lower than for those aged 15-59.

The principal reason for nonresponse among both eligible men and women was the nonavailability of individuals at home despite repeated visits to the household. The lower response rate for men reflects the more frequent and longer absence of men from the households. Response rates are lower in urban than rural areas, especially for men.

Table 1.1
Results of household and individual interviews, Uganda 2004-2005

Result	Residence		Total
	Urban	Rural	
Household interviews			
Households selected	1,853	8,584	10,437
Households occupied	1,742	8,100	9,842
Households interviewed	1,666	7,863	9,529
Household response rate	95.6	97.1	96.8
Interviews with women 15-59			
Number of eligible women	2,117	9,337	11,454
Number of eligible women interviewed	1,913	8,913	10,826
Eligible woman response rate	90.4	95.5	94.5
Interviews with men 15-59			
Number of eligible men	1,852	8,053	9,905
Number of eligible men interviewed	1,463	7,367	8,830
Eligible man response rate	79.0	91.5	89.1
Interviews with women and men 15-59			
Number of eligible individuals	3,969	17,390	21,359
Number of eligible individuals interviewed	3,376	16,280	19,656
Eligible individual response rate	85.1	93.6	92.0
Interviews with women 15-49			
Number of eligible women	2,021	8,540	10,561
Number of eligible women interviewed	1,827	8,146	9,973
Eligible woman response rate	90.4	95.4	94.4
Interviews with men 15-49			
Number of eligible men	1,763	7,270	9,033
Number of eligible men interviewed	1,387	6,622	8,009
Eligible man response rate	78.7	91.1	88.7
Interviews with women and men 15-49			
Number of eligible individuals	3,784	15,810	19,594
Number of eligible individuals interviewed	3,214	14,768	17,982
Eligible individual response rate	84.9	93.4	91.8

CHARACTERISTICS OF HOUSEHOLDS AND HOUSEHOLD SUPPORT

2

2.1 KEY FINDINGS

- Fourteen percent of children under age 18 are orphans (i.e., they have lost one or both biological parents). The level of orphanhood has not changed in recent years.
- Three in five households get their water from a source considered as safe; almost three-fourths use traditional pit latrines. Nine percent of households have electricity.
- Ugandan households consist of an average of 5.2 members, somewhat higher than the 4.8 members found in 2000-01.

2.2 INTRODUCTION

This chapter presents information on the social, economic, and demographic characteristics of the household population, focusing mainly on such background characteristics as age, sex, educational attainment, parental survivorship, children's living arrangements, place of residence, and socioeconomic conditions of households. The information provided is intended to facilitate interpretation of the key demographic, socioeconomic, and health indices, as well as the trends in these indices. It is also intended to assist in the assessment of the representativeness of the survey.

Information regarding housing characteristics, such as the type of housing and household amenities and assets, is also presented in this chapter. Finally, results regarding the level of orphanhood and fostering of children under age 18 are presented, as well as data on care and support of vulnerable children and ill adults.

In the UHSBS, a household was defined as a person or a group of persons who usually live and eat together. The Household Questionnaire was used to collect information on all usual residents and visitors who spent the night preceding the interview in the household. This method allows calculation of either the *de jure* (usual residents) or *de facto* (those there at the time of the survey) population.

One of the background characteristics used throughout this report is an index of socioeconomic status. The wealth quintile is a measure of relative household wealth that relies on straightforward questions as opposed to more elaborate income and expenditure questions. It has been tested in a number of countries in relation to inequities in household income, use of health services, and health outcomes (Rutstein et al., 2000). It is an indicator of the level of wealth that is consistent with expenditure and income measures (Rutstein, 1999).

The wealth index was constructed using household asset data and principal components analysis. Asset information collected in the UHSBS Household Questionnaire covers household ownership of a number of consumer items ranging from a television to a bicycle or car, as well as dwelling characteristics such as source of drinking water, type of sanitation facilities, and type of flooring material. Each asset was assigned a weight (factor score) generated through principal component analysis and the resulting asset scores were standardised to a normal distribution with a mean of zero and standard deviation of one (Rutstein and Johnson, 2004). Each household was then assigned a score for each asset, and the scores

were summed for each household; individuals were ranked according to the total score of the household in which they resided. The sample was then divided into quintiles from one (lowest) to five (highest).

2.3 HOUSEHOLD POPULATION BY AGE, SEX, AND RESIDENCE

Like many countries with high fertility rates, Uganda has a much larger proportion of its population in the younger age groups than in the older age groups. Table 2.1 shows how the distribution of the household population declines gradually with each older five-year age group. The data also indicate slightly higher percentages of males than females under age 20 and slightly lower percentages of males than females at ages 20-39. A remarkably high proportion of the household population (53 percent) consists of children under age 15. Individuals aged 15-49 represent 38 percent of the population, while those age 50 and over account for only 9 percent of the population. The age distribution reflects Uganda's high fertility (UBOS and ORC Macro, 2001) that produces a large base of youth. The age distribution differs substantially by residence, with fewer children in urban areas than in rural areas. The age distribution in 2004-05 is almost identical to that in 2000-01 (UBOS and ORC Macro, 2001).

Table 2.1

Household population by age, sex, and residence, Uganda 2004-05

	Urban			Rural			Total		
Age group	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-4	16.9	15.4	16.1	19.7	19.3	19.5	19.4	18.8	19.1
5-9	14.2	13.4	13.8	19.4	17.8	18.6	18.9	17.3	18.0
10-14	14.7	13.9	14.3	17.2	15.1	16.1	16.9	14.9	15.9
15-19	12.2	13.5	12.9	9.3	8.3	8.8	9.7	8.9	9.3
20-24	9.6	12.4	11.1	5.4	7.6	6.6	5.9	8.2	7.1
25-29	9.2	10.2	9.7	5.1	6.9	6.0	5.6	7.3	6.4
30-34	7.7	6.4	7.0	5.1	5.6	5.4	5.4	5.7	5.6
35-39	5.0	4.4	4.7	4.0	4.4	4.2	4.1	4.4	4.3
40-44	3.5	2.7	3.1	3.3	3.3	3.3	3.3	3.2	3.3
45-49	2.3	2.6	2.4	2.4	2.5	2.4	2.4	2.5	2.4
50-54	1.4	1.5	1.5	2.2	2.2	2.2	2.1	2.1	2.1
55-59	1.2	0.9	1.0	1.5	1.3	1.4	1.5	1.3	1.4
60-64	0.8	1.0	0.9	1.4	2.2	1.8	1.3	2.1	1.7
65-69	0.4	0.6	0.5	1.4	1.4	1.4	1.3	1.3	1.3
70-74	0.4	0.6	0.5	1.0	1.0	1.0	1.0	1.0	1.0
75-79	0.3	0.3	0.3	0.6	0.4	0.5	0.6	0.4	0.5
80 +	0.3	0.2	0.2	0.7	0.6	0.7	0.7	0.6	0.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	2,747	3,012	5,759	21,503	22,533	44,036	24,250	25,544	49,794

2.4 HOUSEHOLD COMPOSITION

Table 2.2 shows that 71 percent of Ugandan households are headed by men, with a slightly lower percentage in urban than in rural households (66 and 71 percent, respectively).

More than one in four Ugandan households consists of four members, while one-fifth consist of five members. The mean size of households in Uganda is 5.2 persons, somewhat larger than the 4.8 persons per household found in 2000-01. Urban households are smaller than rural households (4.3 and 5.3, respectively).

Table 2.2

Household composition, Uganda 2004-05

Characteristic	Residence		Total
	Urban	Rural	
Sex of head of household			
Male	65.8	71.4	70.6
Female	34.2	28.6	29.4
Total	100.0	100.0	100.0
Number of usual members			
1	16.5	9.4	10.4
2	13.4	8.5	9.1
3	14.4	11.4	11.8
4	26.8	28.0	27.8
5	15.8	22.0	21.1
6	7.9	12.9	12.2
7+	5.0	7.8	7.4
Total	100.0	100.0	100.0
Mean size	4.3	5.3	5.2
Mean number of women 15-49	1.2	1.0	1.1
Mean number of men 15-49	1.0	0.9	0.9
Number of households	1,302	8,227	9,529

Note: Table is based on de jure members, i.e., usual residents.

2.5 EDUCATION ATTAINMENT OF HOUSEHOLD POPULATION

Educational attainment is a key determinant of an individual's life style and status. It also affects many aspects of human life, including those related to demographic and health issues. This study, like many others, shows that educational attainment is strongly associated with awareness, knowledge, attitudes, and behaviour related with HIV/AIDS. Tables 2.3.1 and 2.3.2 show the percent distribution of women and men age five and older by the highest level of education attained.

There are differences in educational attainment between women and men, especially as age increases. Twenty-six percent of women in Uganda have never been to school, compared with 15 percent of men. The proportion with no education increases steadily for both sexes starting with those in their 20s. Those with only some primary education account for 57 percent of females and 61 percent of males. The percentage of females attaining higher education levels is also lower than males. For example, the percentage who completed primary school only is 6 percent among females and 8 percent among males. Eleven percent of women have attended secondary school, compared with 15 percent of men.

Educational attainment is substantially higher in urban areas than in rural areas, with the median number of years of schooling for females being 6.0 in urban areas and 2.6 in rural areas. Among males, the difference is 5.5 in urban areas and 1.9 in rural areas. Level of education differs significantly among regions. The region with the highest educational attainment is Kampala for both females and males, while the region with the lowest is Northeast.

Table 2.3.1

Highest level of education attended by female household population age 5 and over (percent distribution), Uganda 2004-05

Background characteristic	No education	Some primary	Complete primary[1]	Secondary+	Missing	Total	Number	Median number of years
Age								
5-9	30.5	68.4	0.0	0.0	1.2	100.0	4,407	0.0
10-14	3.8	91.8	2.0	2.2	0.2	100.0	3,816	2.8
15-19	6.1	52.0	12.1	29.7	0.2	100.0	2,267	5.5
20-24	16.9	44.0	12.7	26.2	0.2	100.0	2,091	5.0
25-29	22.4	46.5	11.5	19.2	0.4	100.0	1,855	3.9
30-34	30.1	44.8	10.9	14.1	0.1	100.0	1,461	3.0
35-39	32.9	44.0	12.4	10.4	0.3	100.0	1,128	2.7
40-44	42.6	35.3	10.3	11.0	0.8	100.0	828	1.5
45-49	42.3	37.4	8.6	10.9	0.8	100.0	643	1.5
50-54	50.3	35.6	5.8	7.1	1.2	100.0	535	0.0
55-59	55.1	35.1	5.3	3.6	1.0	100.0	327	0.0
60-64	70.2	21.7	1.8	1.3	5.0	100.0	534	0.0
65+	75.0	17.6	0.8	1.3	5.4	100.0	837	0.0
Residence								
Urban	10.0	44.3	10.6	34.7	0.4	100.0	2,549	5.5
Rural	27.7	58.3	5.8	7.3	0.9	100.0	18,18	1.6
Region								
Central	16.1	59.1	7.9	16.3	0.6	100.0	3,461	3.0
Kampala	7.9	35.8	11.6	44.3	0.5	100.0	1,012	6.5
East Central	20.7	57.6	7.7	13.4	0.6	100.0	3,338	2.5
Eastern	25.0	61.2	5.7	7.8	0.3	100.0	2,018	2.1
Northeast	46.4	44.3	4.0	4.1	1.2	100.0	1,671	0.0
North Central	30.4	59.1	5.1	4.3	1.1	100.0	2,230	1.3
West Nile	33.1	57.6	3.2	4.2	1.8	100.0	1,869	0.8
Western	27.5	59.9	5.0	7.1	0.6	100.0	2,388	1.8
Southwest	26.3	58.1	7.6	6.8	1.1	100.0	2,744	1.6
Wealth quintile								
Lowest	40.4	53.2	3.0	2.4	1.1	100.0	3,800	0.2
Second	30.5	59.1	5.1	4.1	1.2	100.0	4,546	1.2
Middle	27.0	61.2	5.9	5.3	0.7	100.0	3,966	1.6
Fourth	20.3	61.5	7.4	10.0	0.8	100.0	4,112	2.3
Highest	10.6	48.0	10.4	30.5	0.5	100.0	4,308	5.0
Total	25.5	56.6	6.4	10.7	0.8	100.0	20,732	2.0

[1] Completed standard 7 at the primary level.

Results show that educational attainment is considerably higher for those in the higher wealth quintiles. For example, the proportion of women with no education declines from 40 percent among those in the lowest quintile to 11 percent among those in the highest quintile.

These results show little change in educational attainment since 2000-01, although there has been a decline since 2000-01 in the proportion of children who have no education, which may reflect the impact of the introduction of universal basic education.

Table 2.3.2

Highest level of education attended by male household population age 5 and over (percent distribution), Uganda 2004-05

Background characteristic	No education	Some primary	Complete primary[1]	Secondary+	Missing	Total	Number	Median number of years
Age								
5-9	31.8	66.9	0.0	0.0	1.2	100.0	4,572	0.0
10-14	3.0	92.9	2.1	1.8	0.1	100.0	4,106	2.6
15-19	3.4	54.8	11.3	30.2	0.2	100.0	2,342	5.5
20-24	6.1	37.6	14.8	41.4	0.2	100.0	1,433	6.4
25-29	10.0	43.2	15.0	31.6	0.1	100.0	1,355	5.6
30-34	10.3	43.9	16.2	29.0	0.6	100.0	1,310	5.6
35-39	12.1	45.9	13.5	27.9	0.6	100.0	999	5.3
40-44	14.9	44.4	17.9	22.3	0.4	100.0	812	5.3
45-49	16.8	41.2	19.6	22.0	0.4	100.0	575	5.1
50-54	16.1	43.7	19.6	20.2	0.5	100.0	515	4.9
55-59	20.8	47.1	15.8	15.6	0.7	100.0	354	3.9
60-64	28.0	46.4	10.1	10.0	5.6	100.0	323	3.3
65+	42.3	43.4	4.5	4.9	4.8	100.0	844	0.9
Residence								
Urban	6.1	44.4	8.4	40.3	0.8	100.0	2,283	5.9
Rural	16.4	62.6	8.1	12.1	0.8	100.0	17,263	2.6
Region								
Central	12.0	63.6	6.6	17.2	0.6	100.0	3,468	3.0
Kampala	5.3	34.0	9.4	50.2	1.2	100.0	909	6.9
East Central	13.8	61.1	7.6	16.8	0.7	100.0	2,977	2.9
Eastern	15.4	62.6	7.3	14.4	0.3	100.0	2,057	3.0
Northeast	32.3	49.0	7.1	9.5	2.0	100.0	1,539	1.5
North Central	14.6	60.8	11.5	12.6	0.6	100.0	2,059	3.4
West Nile	12.7	64.7	7.7	13.4	1.5	100.0	1,796	2.9
Western	17.5	62.2	8.8	11.2	0.3	100.0	2,241	2.5
Southwest	14.1	65.6	9.0	10.4	0.9	100.0	2,502	2.4
Wealth quintile								
Lowest	25.6	61.4	6.1	5.8	1.1	100.0	3,433	1.7
Second	18.1	63.2	8.6	9.5	0.7	100.0	4,178	2.4
Middle	14.7	66.4	8.5	9.7	0.8	100.0	3,857	2.5
Fourth	11.9	64.2	9.2	14.2	0.5	100.0	3,978	3.1
Highest	7.0	47.8	8.3	35.9	1.0	100.0	4,100	5.3
Total	15.2	60.5	8.2	15.4	0.8	100.0	19,546	2.9

[1] Completed standard 7 at the primary level.

2.6 HOUSEHOLD CHARACTERISTICS

To assess the socioeconomic conditions in Uganda, household respondents were asked a number of questions on issues related to their household environment. These included access to electricity, the source of drinking water, sanitary facility, and type of flooring material.

Access to electricity not only opens a household to a wider number of consumer appliances, but also is a measure of socioeconomic level. Only 9 percent of Ugandan households have electricity, the same proportion found in 2000-01. There are huge differences by residence, with almost half of urban households being electrified, compared with only 3 percent of rural households (Table 2.4).

Source of drinking water is important because unsafe sources can contain waterborne diseases, including diarrhoea and dysentery. Sources of water expected to be relatively disease-free are piped water, protected or covered wells, boreholes, and protected springs. Other sources, like open wells, unprotected springs, rivers, streams, ponds, and lakes are more likely to carry pathogens that cause these diseases. Table 2.4 shows that three in five (61 percent) households have water sources considered to be safe. Urban households are greatly advantaged—90 percent have access to safe water, compared with 57 percent of rural households.

Another important aspect of household health is the type of toilet facility. This survey shows that the vast majority of Ugandan households (85 percent) still use pit latrines of some type. This proportion is similar by residence (89 percent of urban households and 85 percent of rural households), with equal proportions of both urban and rural households (63 percent) using covered traditional pit latrines. Urban households are somewhat more likely than rural households to use covered ventilated pit latrines, while rural households are more likely to use uncovered pit latrines. Thirteen percent of all households report having no toilet facility at all, almost all of which are rural households. In contrast, 10 percent of urban households have flush toilets, compared with less than 1 percent of rural households.

There has been some improvement in the availability of sanitary facilities over time, with the proportion of households having no toilet declining from 17 percent in 2000-01 to 13 percent in 2004-05.

The type of flooring material can also distinguish between socioeconomic levels of households. Survey results show that almost three in ten (58 percent) Ugandan households have dirt or earthen floors, with an additional 20 percent having floors made of dung and another 20 percent with cement floors. Dirt and dung floors are much more common in rural areas, while a large majority of urban households have cement floors. The proportion of households with earth or dung floors has declined slightly over time, from 80 percent in 2000-01 to 78 percent in 2004-05. The proportion of households with concrete floors has increased from 13 to 20 percent.

Table 2.4
Housing characteristics (percent distribution), Uganda 2004-05

Characteristic	Residence		
	Urban	Rural	Total
Electricity			
Yes	49.0	2.5	8.9
No	50.9	97.2	90.9
Total	100.0	100.0	100.0
Source of drinking water			
Pipe into dwelling	6.8	0.3	1.2
Pipe into yard/compound	8.2	0.4	1.4
Public tap	48.3	3.4	9.5
Open well	3.8	15.8	14.2
Covered well / borehole	23.1	42.3	39.7
Protected spring	4.0	10.2	9.3
Unprotected spring	1.5	9.9	8.8
River/stream	1.0	6.9	6.1
Pond/ lake/ dam	0.4	9.3	8.0
Other	2.8	1.6	1.6
Total	100.0	100.0	100.0
Type of toilet			
Flush toilet	9.8	0.2	1.5
Covered ventilated pit latrine	23.7	10.8	12.5
Covered traditional pit latrine	63.1	63.1	63.2
Uncovered pit latrine	1.8	10.8	9.6
No facility/ bush/ field	1.0	14.4	12.6
Other	0.6	0.5	0.5
Total	100.0	100.0	100.0
Flooring material			
Earth, sand	18.3	64.2	57.9
Dung	4.5	22.2	19.8
Cement	68.5	12.0	19.7
Carpet	6.0	0.3	1.1
Other	2.8	1.3	1.4
Total	100.0	100.0	100.0
Number of households	1,302	8,227	9,529

Note: Totals include a small number of cases with missing values.

2.7 HOUSEHOLD DURABLE GOODS

Another indication of a household's socioeconomic status is the durable assets that it owns. Ownership of some durable goods is of interest on their own. For example, information on radio ownership is useful in planning educational outreach programmes. Data on refrigerators and cookers may be useful for nutrition programmes. These results are also used in creating the wealth quintile.

The most commonly owned durable goods are mattresses (76 percent of households), radios (60 percent), bicycles (39 percent), and clocks (23 percent—Table 2.5). Surprisingly, 10 percent of Ugandan households have a mobile phone. Only 4 percent of Ugandan households have a colour television, while 3 percent have a black and white television. Only 3 percent own a refrigerator. Motor vehicles are also rare, with only 3 percent of households owning a motorcycle and 2 percent having a car or lorry. Ownership of livestock and poultry is common (half of households). Nine percent of Ugandan households own none of the selected items.

All of the items except bicycles, livestock, and poultry are more prevalent among urban than rural households. For example, 45 percent of urban households own a mobile telephone, compared with only 5 percent of rural households. Similarly, 61 percent of urban households have clocks, compared with 17 percent of rural households.

Table 2.5
Household possession of durable goods, Uganda 2004-05

Consumer goods	Residence		Total
	Urban	Rural	
Clock	60.6	17.2	23.1
Mattress	94.7	73.0	76.0
Black and white television	11.9	1.3	2.8
Colour television	22.2	1.3	4.1
Radio	82.3	56.3	59.8
Mobile phone	45.1	4.6	10.1
Land line	3.2	0.1	0.5
Refrigerator	18.8	0.9	3.3
Cooker	7.5	0.3	1.3
Bicycle	23.6	41.7	39.3
Motorcycle/scooter	4.4	2.4	2.6
Car/lorry	10.1	0.9	2.2
Livestock	18.1	53.6	48.8
Poultry	20.4	55.6	50.8
None of the above	2.2	9.9	8.9
Number of households	1,302	8,227	9,529

Comparison with data from the 2000-01 UDHS shows an increase in ownership of radios, from 52 to 60 percent of households. Ownership of other goods has not changed much over time.

2.8 Ownership of Mosquito Nets

A key intervention for the prevention of malaria transmission is the use of mosquito nets while sleeping, especially ones that have been treated with insecticide. Since the UHSBS focused on issues related to HIV/AIDS, detailed questions about mosquito nets were not included. However, the Household Questionnaire included questions on whether the household had any mosquito nets and if so, how many.

One in four households has at least one mosquito net and 12 percent own more than one net (Table 2.6). The mean number of nets per household is 0.5.

Ownership of mosquito nets is considerably higher in urban areas than in rural areas. Similarly, net ownership is by far the highest in Kampala (67 percent of households), followed by Northeast region (40 percent). Households in the mountainous and less malaria-prone areas like the Southwest (13 percent), Western (18 percent), and Eastern regions (19 percent) are less likely to own a mosquito net. Mosquito net ownership increases with wealth, especially at the highest wealth quintile.

Mosquito net coverage has increased considerably. The proportion of households that have at least one mosquito net has doubled from 13 percent in 2000-01 to 26 percent in 2004-05.

Table 2.6

Mosquito net coverage, Uganda 2004-05

Residence/ region	Percentage of households with: At least one mosquito net	More than one mosquito net	Mean number of nets per household	Number of households
Residence				
Urban	60.1	33.7	1.2	1,302
Rural	20.5	8.7	0.4	8,227
Region				
Central	24.6	13.3	0.5	1,790
Kampala	67.2	37.1	1.4	575
East Central	23.7	9.4	0.4	1,395
Eastern	18.9	6.1	0.3	995
Northeast	40.1	21.5	0.8	729
North Central	27.3	12.3	0.5	955
West Nile	29.8	16.7	0.6	680
Western	18.2	6.3	0.3	1,132
Southwest	13.0	3.9	0.2	1,277
Wealth quintile				
Lowest	14.1	5.2	0.2	1,831
Second	16.9	6.2	0.3	2,025
Middle	16.6	6.1	0.3	1,837
Fourth	24.6	9.3	0.4	1,841
Highest	55.9	32.6	1.2	1,994
Total	26.0	12.1	0.5	9,529

2.9 ORPHANHOOD AND CHILDREN'S LIVING ARRANGEMENTS

Table 2.7 provides information regarding the living arrangements of children under age 18, including those who live with neither biological parent and those whose biological parents have died (orphans), as well as those who live with one parent or the other.

Fifty-four percent of children under 18 are living with both parents, while 20 percent live with their mothers and not their fathers, 6 percent live with their fathers and not their mothers, and 20 percent live with neither parent. Younger children are more likely than older ones to live with both parents.

The table also provides data on the extent of orphanhood, the proportion of children whose natural father or mother has died. The study reveals that 12 percent of children under 18 have lost their biological fathers, 6 percent have lost their mothers, and 3 percent have lost both parents. Altogether, 14 percent of children have lost one or both parents (i.e., they are considered to be orphans). Three percent have lost both parents ('double orphans').

Table 2.7 shows that the level of ophanhood is higher in urban areas, where 19 percent of children under age 18 have lost one or both parents, than in rural areas (14 percent). In terms of regional variation, North Central (20 percent), Kampala (18 percent), Southwest (16 percent), and Central (16 percent) regions have the highest percentages of children under 18 years having lost one or both of their biological parents. This is consistent with the regional variation in HIV prevalence (see Chapter 8). Eastern region has by far the lowest percent of children under 18 years having lost one or both of their biological parents (9 percent). The high level of orphanhood in the northern region may also be explained by the long running civil strife in that area. The level of orphanhood has remained constant since 2000-01 at 14 percent of children under 18.

Table 2.7

Living arrangements and survival status of parents for children under 18 (percent distribution), Uganda 2004-05

Background characteristic	Living with both parents	Living with mother but not father		Living with father but not mother		Not living with either parent				Missing information on father/ mother	Total	Percentage orphaned	Number of children <18
		Father alive	Father dead	Mother alive	Mother dead	Both alive	Only father alive	Only mother alive	Both dead				
Age													
0-1	70.5	23.4	1.9	0.3	0.1	2.2	0.2	0.3	0.0	1.2	100.0	2.4	3,517
2-4	62.3	17.1	3.1	3.3	0.3	10.8	0.6	1.0	0.5	1.0	100.0	5.5	5,883
5-9	53.8	12.8	5.1	5.2	1.0	13.9	1.7	3.6	2.1	0.8	100.0	13.5	8,952
10-14	45.5	11.2	7.7	6.2	2.0	13.8	2.6	5.3	4.7	0.9	100.0	22.3	7,896
15-17	36.7	9.7	9.1	5.6	2.5	17.3	2.9	6.9	7.2	2.0	100.0	28.7	2,848
<15	55.4	14.7	5.0	4.4	1.0	11.6	1.5	3.1	2.2	0.9	100.0	12.9	26,249
Sex													
Male	53.9	14.2	5.6	4.9	1.3	11.2	1.6	3.5	2.9	1.0	100.0	14.9	14,811
Female	53.3	14.2	5.3	4.2	1.1	13.3	1.7	3.5	2.5	1.1	100.0	14.0	14,285
Residence													
Urban	41.6	16.8	5.0	5.8	1.2	15.5	2.4	5.4	4.6	1.7	100.0	18.6	2,899
Rural	54.9	13.9	5.5	4.4	1.2	11.8	1.6	3.3	2.5	1.0	100.0	14.0	26,198
Region													
Central	46.9	14.4	4.7	6.3	1.4	15.6	2.4	4.1	3.4	0.9	100.0	15.9	5,014
Kampala	42.6	17.5	4.3	5.5	1.5	14.8	2.4	4.2	5.2	2.0	100.0	17.7	1,001
East Central	51.3	15.2	3.9	5.9	0.5	15.0	1.5	3.8	2.1	0.7	100.0	11.9	4,786
Eastern	64.3	8.9	2.4	5.1	1.0	11.7	1.3	2.7	1.7	1.0	100.0	9.0	2,935
Northeast	63.7	12.6	8.1	2.1	1.2	7.1	0.9	2.8	1.1	0.5	100.0	14.0	2,366
North Central	55.6	11.8	7.0	2.9	1.5	9.1	2.0	4.5	4.7	0.9	100.0	19.7	3,196
West Nile	50.6	14.5	4.8	5.7	1.0	13.1	1.7	5.0	2.1	1.4	100.0	14.7	2,673
Western	54.1	17.3	5.4	4.4	1.3	10.5	1.0	2.7	2.3	1.0	100.0	12.7	3,374
Southwest	53.7	16.0	8.4	1.9	1.4	10.5	1.7	1.7	2.9	1.7	100.0	16.2	3,752
Wealth quintile													
Lowest	54.5	14.0	6.7	3.0	1.1	12.0	1.7	3.5	2.4	1.1	100.0	15.5	5,182
Second	55.5	13.8	6.4	4.3	1.2	11.3	1.4	2.7	2.1	1.2	100.0	13.9	6,536
Middle	58.3	13.5	5.5	4.4	1.1	9.5	1.3	3.1	2.4	0.9	100.0	13.4	5,984
Fourth	55.0	12.8	4.8	5.2	1.3	12.8	1.7	3.1	2.4	0.8	100.0	13.3	5,975
Highest	43.8	17.2	3.6	5.6	1.1	15.8	2.3	5.1	4.4	1.2	100.0	16.4	5,419
Total	53.6	14.2	5.4	4.5	1.2	12.2	1.7	3.5	2.7	1.0	100.0	14.4	29,097

Orphans are usually considered to be at a disadvantage compared with children whose parents are still alive. To assess whether orphans are educationally disadvantaged, an indicator was devised that compares the proportion of children 10-14 who are attending school among those whose parents are both dead to those whose parents are both alive and who are living with one of them. The results indicate that among children aged 10-14 whose parents are both alive and who are living with one or both parents, 94 percent are in school, compared with 89 percent of children who have lost both parents ('double orphaned') (data not shown). The ratio of school attendance among orphaned to non-orphaned children is 0.9. This implies that double orphans have a disadvantage in school attendance compared with children who are living with one or both parents. Disaggregation of this index by background characteristics is hampered by the small number of orphans in many categories.

2.10 Care and Support for Orphans and Vulnerable Children

The survey also included questions about care and support that was given to households with orphans and vulnerable children (OVCs). In this context, an orphan was defined as a child under the age of 18, one or both of whose parents had died. A vulnerable child was defined as a child under 18, one or both of whose parents was living in the same household, had been very sick for at least three months

during the 12 months preceding the survey or a child living in a household in which an adult aged 15-59 has either been very ill or died in the preceding 12 months.[1] In the case of orphans and vulnerable children, questions were added as to whether the household had received any free, external support (other than from family or friends) for each such child during the 12 months before the survey. Several types of support were detailed: medical support, social/spiritual/emotional support (e.g., companionship, counselling), material support (e.g., clothes, food, money), practical support (e.g., help with housework, legal services), and support with schooling. Results are shown in Table 2.8.

Table 2.8

External support for households with orphans and vulnerable children (OVC), Uganda 2004-05

Background characteristic	Percentage of OVCs aged 0-17 who live in households that received in the 12 months preceding the survey, free, external:								Number of OVCs aged 0-17
	Medical support	Social, emotional support	Material support	Practical support	School support[1]	Any support	All five types of support[2]	No support	
Age									
0-4	9.2	3.3	2.1	1.0	na	12.4	0.2	87.6	674
5-9	10.3	4.9	2.3	0.5	13.7	22.5	0.1	77.5	1,432
10-14	11.4	5.3	4.1	1.2	19.4	26.1	0.3	73.9	1,964
15-17	11.8	5.3	4.0	0.6	13.8	22.7	0.0	77.3	884
Sex									
Male	11.5	5.0	4.0	1.0	14.7	23.7	0.3	76.3	2,567
Female	10.1	4.9	2.5	0.7	13.5	21.5	0.1	78.5	2,387
Residence									
Urban	5.5	2.1	3.4	1.0	8.9	13.9	0.0	86.1	640
Rural	11.7	5.3	3.2	0.8	14.9	23.9	0.2	76.1	4,314
Region									
Central	4.1	1.9	3.0	0.8	8.5	13.3	0.4	86.7	891
Kampala	3.9	1.9	5.0	0.6	8.3	12.7	0.0	87.3	200
East Central	3.4	4.5	2.7	1.9	9.1	14.0	0.2	86.0	707
Eastern	18.3	13.7	5.1	1.2	34.1	47.3	0.3	52.7	309
Northeast	0.6	1.0	1.2	0.0	7.1	8.3	0.0	91.7	364
North Central	11.8	5.3	2.3	1.2	10.3	18.5	0.3	81.5	817
West Nile	34.8	7.1	2.1	0.1	29.3	45.2	0.0	54.8	492
Western	7.7	7.3	3.4	0.8	15.2	26.4	0.0	73.6	512
Southwest	15.8	4.3	6.0	0.5	16.0	29.0	0.0	71.0	661
Wealth quintile									
Lowest	15.2	5.6	3.0	0.4	17.6	27.4	0.0	72.6	975
Second	9.5	3.9	1.6	0.8	12.3	19.7	0.2	80.3	1,069
Middle	12.6	5.2	4.9	0.5	14.4	26.3	0.0	73.7	961
Fourth	11.7	4.4	4.3	1.6	15.3	23.3	0.2	76.7	901
Highest	6.0	5.4	2.9	1.1	11.5	17.2	0.4	82.8	1,048
Total	10.9	4.9	3.3	0.9	14.1	22.6	0.2	77.4	4,954

Note: All five types of support can be received by those aged 5-17, four types of support (excluding school) can be received by those aged 0-4.
[1] School support received by those aged 5-17.
[2] Those aged 0-4 included in this column if received four types of support (excluding school).
na = Not applicable
OVC = Orphans and vulnerable children, i.e., children aged 0-17 whose mother or father has died or who are living in a household in which a person aged 18-59 has been very sick for at least 3 months during the 12 months preceding the survey, or in which a person aged 18-59 has died in the preceding 12 months. This definition differs slightly from the standard because it omits children whose parents have been very ill in the past 12 months but who do not live in the same household, since such questions were not included in the UHSBS.

The data show that care and support services are not widespread in Uganda. Less than one in four OVCs (23 percent) receives any kind of free, external support. Only 14 percent of OVCs receive

[1] The definition of vulnerable children sometimes includes children whose mother or father was very sick in the past 12 months even if they are not living with that parent. However, detailed questions about these categories of children were not included in the UHSBS.

assistance with schooling, while 11 percent receive medical assistance. Only 5 percent receive social or emotional support, 3 percent receive material support, and less than 1 percent receive practical support. Support services are more prevalent in rural areas than in urban areas and are especially common in Eastern and West Nile regions. The prevalence of care and support services varies erratically by wealth quintile.

2.11 Care and Support for Chronically Ill Adults

Table 2.9 shows the percentage of women and men aged 18-59 who were very ill for 3 or more months during the 12 months preceding the survey and whose households received free, external support in caring for these people within the 12 months preceding the survey. Also included are households that reported the death of someone in the 12 months preceding the survey who had been ill for at least three or more months before death.

The table shows that among chronically ill adults, 20 percent live in households that received medical support for them, 19 percent received social/emotional support, 6 percent received material support, and 4 percent received practical support. Less than 1 percent received all four types of support.

Looking at the place of residence, the survey data reveal that each type of support except practical support is slightly more common for adults living in rural areas than in urban areas. Support also appears to be more common in Eastern and West Nile regions and least common in Northeast, North Central, and Central regions.

It should also be pointed out that, although the intent of the question was to obtain data on the extent of care and support provided to those ill with AIDS, data from the survey indicate that less than 20 percent of adults who were reported to have been very ill for at least 3 months in the 12 months preceding the survey tested HIV positive.

Table 2.9

External support for chronically ill adults, Uganda 2004-05

Background characteristic	Among women and men aged 18-59 who were very ill for 3 or more months during the past 12 months and persons aged 18-59 who were ill for 3 or more months before death, percentage whose households received, in the 12 months preceding the survey, free external:						
	Medical support	Social, emotional support	Material support	Practical support	All four types of support	No support	Number of chronically ill persons
Age							
18-19	(12.6)	(17.6)	(3.6)	(4.1)	(0.0)	(75.3)	34
20-29	20.1	16.6	5.4	4.8	1.3	70.8	214
30-39	21.4	15.6	5.0	3.5	0.5	68.8	319
40-49	21.2	23.7	6.9	2.3	0.8	64.8	254
50-59	18.6	23.0	6.9	5.0	1.0	63.7	171
Sex							
Male	23.8	21.8	5.9	3.3	0.9	63.0	475
Female	17.0	17.0	5.9	4.2	0.7	71.7	517
Residence							
Urban	16.5	18.3	5.4	4.8	3.7	74.7	102
Rural	20.7	19.4	5.9	3.6	0.5	66.7	890
Region							
Central	22.1	17.2	4.6	3.2	0.0	70.5	159
Kampala	(21.2)	(17.3)	(9.6)	(7.7)	(3.8)	(69.2)	29
East Central	19.3	15.5	7.3	3.5	0.9	67.8	142
Eastern	24.9	32.5	9.0	8.8	1.3	52.8	75
Northeast	8.7	13.6	3.5	1.2	0.0	79.0	58
North Central	15.9	13.8	6.2	3.6	1.1	75.8	244
West Nile	40.3	27.3	4.3	5.1	0.6	48.1	103
Western	12.4	28.6	7.0	1.3	0.0	63.3	81
Southwest	18.3	19.4	3.5	2.4	1.2	69.6	100
Wealth quintile							
Lowest	20.6	13.6	6.3	2.1	0.0	71.1	218
Second	21.0	19.2	5.9	3.3	0.5	66.3	252
Middle	19.2	21.9	5.0	2.9	0.9	64.3	206
Fourth	19.2	13.6	5.9	6.5	1.3	71.5	170
Highest	21.2	30.6	6.2	4.9	1.8	64.2	146
Total	20.3	19.3	5.9	3.8	0.8	67.5	992

Note: Figures in parentheses are based on 25-49 unweighted cases.

CHARACTERISTICS OF RESPONDENTS 3

3.1 KEY FINDINGS

- Ugandan women continue to marry at a young age (median age of 18).
- Twenty-three percent of women and 8 percent of men aged 15-49 have never attended school.
- One-quarter of Ugandan men aged 15-49 are circumcised.
- Ten percent of women and 5 percent of men aged 15-49 have ever been widowed.

3.2 INTRODUCTION

This chapter describes some demographic and socioeconomic characteristics of the respondents sampled in the UHSBS. Examining characteristics like age, residence, education, marital status, employment, religion, and ethnicity indicates changes in these traits over time as well as differences in HIV-related knowledge, attitudes, behaviour, and prevalence among Ugandans. Although women and men aged 15-59 were interviewed individually in the survey, this report focuses on age group 15-49, because all the HIV indicators agreed to by Ugandan and international organisations are based on this age group.

3.3 BACKGROUND CHARACTERISTICS

Table 3.1 shows the distribution of UHSBS respondents by age group. The larger proportions in younger age groups reflect adult mortality and Uganda's past high fertility, which causes each succeeding generation to be larger than the one before. Also of note are the lower proportions of men aged 20-34 than women. A similar dearth of men in their 20s was evident in the 2000-01 UDHS and may result from higher male outmigration and higher participation of men than women in these age groups in institutions such as the armed forces and prisons, which are not covered in the survey.

Table 3.1

Age distribution of respondents, Uganda 2004-05

	Women			Men		
Age	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number
15-19	20.2	2,186	2,176	23.4	2,070	2,042
20-24	17.9	1,933	1,945	14.3	1,262	1,261
25-29	16.3	1,764	1,809	13.8	1,220	1,228
30-34	13.5	1,457	1,469	13.6	1,200	1,209
35-39	10.0	1,085	1,074	10.4	916	917
40-44	8.0	870	864	8.9	788	800
45-49	6.0	647	636	6.3	554	552
50-54	5.0	544	520	5.3	470	457
55-59	3.2	342	333	4.0	350	364
Total 15-49	91.8	9,941	9,973	90.7	8,010	8,009
Total 15-59	100.0	10,826	10,826	100.0	8,830	8,830

The distribution of respondents aged 15-49 by background characteristics is shown in Table 3.2. Sixty-four percent of women are married or living in an informal union, compared with only 53 percent of men. Because men marry later in life than women, more than one-third of the surveyed men (39 percent) have never married, compared with only one-fifth (22 percent) of women. On the other hand, women are four times as likely as men to be widowed (less than 6 percent and 1 percent, respectively) and more likely to be divorced or separated (8 and 7 percent, respectively). Twelve percent of women 15-49 were pregnant at the time of the survey.

The vast majority (85 percent) of respondents live in rural areas. Central and East Central regions are the most heavily populated, accounting for roughly one-third of the respondents. Most of the respondents (more than three-quarters) have had at least some formal education, with 23 percent of women and 8 percent of men aged 15-49 having never attended school. However, 46-47 percent of women and men have only attended some primary school, without completing it. Women are considerably disadvantaged in education compared with men. For example, 45 percent of men have completed primary or more, compared with only 31 percent of women. With regard to religion, more than 4 in 10 respondents are Catholic, just more than one-third are Protestant, and 13-14 percent are Muslim.

In terms of ethnic composition, the most common group is Baganda, with 18 percent of women and men. Banyankore is the second most common group, with 10 percent of women and men, followed by Basoga, which has 10 percent of the female respondents and 9 percent of male respondents. Men are more likely than women to be currently employed. Among men aged 15-49, 69 percent are currently employed, compared with 62 percent of women.

Table 3.2

Background characteristics of respondents, Uganda, 2004-05

Background characteristic	Women 15-49			Men 15-49		
	Weighted percent distribution	Weighted number	Unweighted number	Weighted percent distribution	Weighted number	Unweighted number
Marital status						
Never married	22.3	2,220	2,238	39.2	3,140	3,103
Married	64.0	6,358	6,406	52.9	4,237	4,300
Widowed	5.8	581	565	1.3	100	97
Divorced	7.9	781	764	6.6	532	509
Pregnancy status						
Pregnant	11.5	1,147	1,161	na	na	na
Not pregnant	87.1	8,660	8,682	na	na	na
Unsure	1.3	134	130	na	na	na
Residence						
Urban	15.2	1,508	1,827	15.0	1,200	1,387
Rural	84.8	8,433	8,146	85.0	6,809	6,622
Region						
Central	16.7	1,656	942	18.1	1,451	844
Kampala	6.7	668	1,099	6.8	547	811
East Central	15.6	1,555	1,169	14.3	1,146	877
Eastern	8.6	857	915	9.6	770	822
Northeast	8.3	829	1,246	7.6	610	913
North Central	9.8	970	1,034	9.9	795	868
West Nile	9.6	958	1,451	9.2	735	1,148
Western	11.5	1,140	1,058	11.8	945	906
Southwest	13.2	1,309	1,059	12.6	1,012	820
Education						
No education	22.7	2,255	2,494	8.3	668	713
Primary incomplete	46.2	4,596	4,490	46.5	3,723	3,632
Primary complete	11.2	1,115	1,042	14.1	1,133	1,147
Secondary+	19.7	1,957	1,927	30.9	2,477	2,506
Employment						
Currently employed	61.6	6,121	6,252	69.4	5,555	5,423
Employed in last 12 months	7.9	782	701	8.3	661	730
Not employed in last 12 months	30.5	3,029	3,008	22.3	1,788	1,851
Ethnicity						
Baganda	17.8	1,773	1,478	17.5	1,398	1,110
Banyankore	10.2	1,010	846	10.2	818	683
Iteso	6.4	634	788	6.5	522	652
Lugbara/Madi	8.0	792	1,191	7.6	607	939
Basoga	9.7	967	829	9.2	735	631
Langi	5.3	525	564	5.8	463	513
Bakiga	6.8	680	587	7.2	580	496
Karimojong	3.2	316	548	2.7	213	369
Acholi	4.8	480	508	4.5	359	387
Bagisu/Sabiny	4.5	446	448	5.9	471	467
Alur/Jopadhola	5.2	514	560	5.5	442	486
Banyara	3.3	325	279	3.4	272	240
Batoro	2.5	245	246	2.7	219	221
All others	12.5	1,234	1,101	11.4	909	815
Religion						
Catholic	41.9	4,161	4,334	41.9	3,359	3,505
Anglican/Protestant	34.1	3,388	3,235	36.7	2,939	2,821
Pentecostal	6.0	600	585	3.9	315	313
Other Christian	2.7	264	257	2.9	229	202
Muslim	13.9	1,382	1,406	13.2	1,055	1,048
Other/None/Missing	1.5	147	156	1.3	112	120
Total	100.0	9,941	9,973	100.0	8,010	8,009

Note: Totals include a small number of cases with education missing; Primary complete = completed standard 7; secondary+ = attended secondary, whether or not that level was completed. na = not applicable

3.4 EDUCATIONAL ATTAINMENT

Tables 3.3.1 and 3.3.2 show the distribution of respondents by highest level of school attended. As mentioned previously, men are better educated than women.

Younger respondents are more likely to have attended school and to have reached a higher level than older respondents. For example, only 5 percent of women 15-19 have never attended school, compared with 43 percent of women 45-49. Education among women has increased faster than education among men, helping to reduce the gender gap in education among younger respondents. For example, among respondents aged 45-49, 21 percent of men and 10 percent of women attended secondary school or higher, while among respondents aged 15-19, these percentages increase to 33 percent for men and 31 percent for women.

Respondents living in urban areas are better educated than respondents in rural areas. Among urban respondents, 6 percent of women 15-49 and 1 percent of men have never attended school, compared with 26 percent of women and 10 percent of men in rural areas. Education also differs by region. Northeast region has the highest proportion of women (47 percent) and men (26 percent) with no formal education. Kampala has the lowest percentage who have never attended school (4 percent of women and 2 percent of men) and the highest percentage to attend secondary school or higher.

Table 3.3.1

Educational attainment by background characteristics: women 15-49, Uganda 2004-05

Background characteristic	Highest level of schooling attended or completed				Total	Number of women	Median years of schooling
	No education	Primary incomplete	Primary complete[1]	Secondary+			
Age							
15-19	5.4	50.9	12.8	30.8	100.0	2,186	5.6
20-24	17.2	46.1	12.1	24.4	100.0	1,933	4.7
25-29	22.1	47.7	10.5	19.4	100.0	1,764	3.8
30-34	28.9	47.4	9.7	14.0	100.0	1,457	3.0
35-39	32.0	44.3	11.6	11.6	100.0	1,085	2.7
40-44	42.5	39.0	9.3	8.9	100.0	870	1.5
45-49	42.6	37.1	10.6	9.6	100.0	647	1.3
Residence							
Urban	6.4	27.7	14.6	51.2	100.0	1,508	7.0
Rural	25.6	49.5	10.6	14.0	100.0	8,433	3.5
Region							
Central	10.3	46.9	14.2	28.6	100.0	1,656	5.5
Kampala	4.4	20.4	16.0	59.1	100.0	668	7.8
East Central	17.8	42.0	13.8	26.3	100.0	1,555	5.1
Eastern	18.6	54.7	9.7	16.8	100.0	857	4.1
Northeast	47.3	39.0	6.0	7.3	100.0	829	0.2
North Central	27.2	55.6	8.1	9.0	100.0	970	2.9
West Nile	34.0	53.5	5.8	6.5	100.0	958	2.2
Western	25.4	51.3	9.2	13.6	100.0	1,140	3.2
Southwest	26.6	46.0	14.2	13.0	100.0	1,309	3.6
Wealth quintile							
Lowest	38.0	50.8	6.0	5.0	100.0	1,610	1.8
Second	29.7	53.2	9.1	7.8	100.0	2,038	2.9
Middle	25.7	53.3	10.4	10.2	100.0	1,849	3.2
Fourth	19.5	48.6	13.0	18.7	100.0	2,000	4.4
Highest	7.1	30.1	15.4	47.3	100.0	2,443	6.7
Total 15-49	22.7	46.2	11.2	19.7	100.0	9,941	4.1
Total 15-59	25.0	45.5	10.8	18.4	100.0	10,826	3.9

[1] Completed standard 7

Regarding the relationship between education and wealth, the data show that the percentage of women 15-49 who have never attended school drops from 38 percent in the lowest wealth quintile to 7 percent in the highest wealth quintile. The proportion of women who completed primary school increases with wealth, as does the proportion attending secondary school or higher. Wealth is also a factor in education for men, though it is less significant than for women.

Table 3.3.2

Educational attainment by background characteristics: men 15-49, Uganda 2004-05

Background characteristic	Highest level of schooling attended or completed				Total	Number of men	Median years of schooling
	No education	Primary incomplete	Primary complete[1]	Secondary+			
Age							
15-19	2.5	53.2	11.4	32.7	100.0	2,070	5.7
20-24	5.0	38.3	13.8	42.9	100.0	1,262	6.4
25-29	9.6	44.0	14.0	32.4	100.0	1,220	5.7
30-34	10.0	46.0	15.9	28.1	100.0	1,200	5.5
35-39	11.9	48.5	12.8	26.6	100.0	916	5.1
40-44	14.7	46.6	17.3	21.2	100.0	788	5.1
45-49	16.6	42.7	19.4	21.2	100.0	554	4.8
Residence							
Urban	1.4	24.7	11.1	62.5	100.0	1,200	8.1
Rural	9.6	50.3	14.7	25.4	100.0	6,809	5.3
Region							
Central	8.3	49.2	10.4	32.2	100.0	1,451	5.4
Kampala	1.6	19.5	11.8	67.0	100.0	547	8.4
East Central	8.2	41.5	13.4	36.8	100.0	1,146	6.0
Eastern	7.1	47.6	13.2	31.5	100.0	770	5.7
Northeast	26.4	41.0	12.2	20.0	100.0	610	4.3
North Central	3.5	46.2	23.1	27.1	100.0	795	6.0
West Nile	4.2	54.3	14.2	27.3	100.0	735	5.4
Western	10.1	53.3	13.1	23.4	100.0	945	4.9
Southwest	7.4	53.4	17.4	21.8	100.0	1,012	5.0
Wealth quintile							
Lowest	17.4	55.7	12.5	14.2	100.0	1,209	4.3
Second	10.3	53.7	15.9	19.8	100.0	1,628	5.0
Middle	8.5	53.8	16.3	21.4	100.0	1,506	5.1
Fourth	6.3	49.5	15.2	29.1	100.0	1,669	5.6
Highest	2.8	27.0	11.3	58.8	100.0	1,998	7.8
Total 15-49	8.3	46.5	14.1	30.9	100.0	8,010	5.6
Total 15-59	9.2	46.3	14.6	29.8	100.0	8,830	5.6

[1] Completed standard 7

3.5 EMPLOYMENT STATUS

Respondents were asked whether they were employed at the time of the survey, and if not, whether they were employed in the 12 months preceding the survey. Those who had not worked were asked what they had been doing for most of the time over the previous year. Table 3.4 shows that 62 percent of women and 69 percent of men aged 15-49 were employed at the time of the survey.

Table 3.4

Percentage currently employed, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49	
	Percentage currently employed	Number of women	Percentage currently employed	Number of men
Age				
15-19	31.7	2,186	29.5	2,070
20-24	61.8	1,933	69.2	1,262
25-29	70.5	1,764	86.8	1,220
30-34	74.5	1,457	87.4	1,200
35-39	73.5	1,085	87.7	916
40-44	74.1	870	86.7	788
45-49	71.9	647	86.2	554
Residence				
Urban	50.3	1,508	68.8	1,200
Rural	63.6	8,433	69.5	6,809
Education				
No education	68.1	2,255	75.8	668
Primary incomplete	65.1	4,596	72.2	3,723
Primary complete	59.7	1,115	78.1	1,133
Secondary+	46.8	1,957	59.4	2,477
Wealth quintile				
Lowest	66.6	1,610	66.0	1,209
Second	64.6	2,038	68.0	1,628
Middle	66.7	1,849	73.3	1,506
Fourth	62.9	2,000	69.3	1,669
Highest	50.8	2,443	69.5	1,998
Total 15-49	61.6	9,941	69.4	8,010
Total 15-59	62.4	10,826	70.8	8,830

The proportion of women aged 15-49 currently working increases with age until age group 30-34. From age 30 to 44 the proportion of women currently working remains relatively stable and then decreases slightly at ages 45-49. Among men, the proportion currently working increases through age 24 and then plateaus at about 87 percent. Women in rural areas are more likely to be currently employed (64 percent) than those in urban areas (50 percent), but roughly the same proportion of men in urban and rural areas are currently employed.

Women with more education are less likely to be currently employed. Men with no education through completed primary are roughly equally likely to be currently employed, while a lower percentage of men with secondary education or higher are currently working. There is no consistent relationship between employment status and wealth quintile. Among women who were not employed in the last 12 months, the primary activities were housework/child care and going to school (data not shown). Men not employed in the last 12 months were most likely to be going to school.

The proportion of women currently working has decreased since 2000-01 (from 73 to 62 percent), while the proportion of men currently working has increased from 63 to 69 percent. This implies an increase in the female unemployment rate over time, although changes in the wording of the questions could also account for differences.

3.6 MARITAL STATUS

Marriage is an important factor of exposure of women and men to sexual intercourse, which is the primary means of HIV infection in Uganda. In this report, the term 'married' refers to both formal and informal unions, such as living together. An informal union is one in which the man and woman live together for some time, intending to have a lasting relationship, but do not have a formal civil or religious ceremony. The UHSBS classifies marital status into four categories: never married, currently married, widowed, and divorced.

Almost two in three women 15-49 (64 percent) are currently married (Table 3.5). More than one in five has never married, 6 percent are widowed, and 8 percent are divorced or separated. The percentage of women who have never married declines rapidly between age 15 and 30. The proportion married increases with age until the 25-29 age group, where it peaks at 82 percent.

About half of men aged 15-49 are currently married (53 percent). Across all age groups, men are more likely than women to have never married. Men tend to marry at older ages than women. For example, while 61 percent of men aged 20-24 have never married, only 20 percent of women aged 20-24 fall into this group. Men are much less likely to be widowed (1 percent) than women (6 percent).

A comparison of data from the 2004-05 UHSBS and the 2000-01 UDHS shows age at first marriage to be increasing, especially among young women. In 2004-05, 76 percent of women aged 15-19 and 20 percent of women aged 20-24 have never married; this compares to 68 percent of women aged 15-19 and 15 percent of women aged 20-24 never having married in 2000-01.

Table 3.5

Current marital status of respondents, Uganda 2004-05

Age	Current marital status: Never married	Married	Widowed	Divorced/ Separated	Total	Number
			WOMEN			
15-19	76.4	19.8	0.3	3.6	100.0	2,186
20-24	19.6	70.7	1.0	8.7	100.0	1,933
25-29	5.7	82.1	3.7	8.4	100.0	1,764
30-34	2.3	79.6	7.0	11.2	100.0	1,457
35-39	1.8	77.4	12.1	8.6	100.0	1,085
40-44	1.2	77.2	13.3	8.4	100.0	870
45-49	1.2	68.2	21.7	8.9	100.0	647
50-54	1.3	58.4	28.0	12.3	100.0	544
55-59	1.4	52.5	31.4	14.7	100.0	342
Total 15-49	22.3	64.0	5.8	7.9	100.0	9,941
Total 15-59	20.6	63.3	7.8	8.3	100.0	10,826
			MEN			
15-19	97.0	2.0	0.0	1.0	100.0	2,070
20-24	60.9	32.3	0.1	6.7	100.0	1,262
25-29	19.8	69.6	0.7	9.8	100.0	1,220
30-34	4.8	85.5	1.4	8.3	100.0	1,200
35-39	2.7	84.5	3.0	9.8	100.0	916
40-44	3.2	85.3	3.2	8.3	100.0	788
45-49	2.8	84.2	3.6	9.3	100.0	554
50-54	1.3	86.2	4.3	8.2	100.0	470
55-59	1.7	82.6	8.2	7.5	100.0	350
Total 15-49	39.2	52.9	1.3	6.6	100.0	8,010
Total 15-59	35.7	55.9	1.7	6.8	100.0	8,830

Note: The percentage widowed consists of those who have married but are not currently married and who had a previous spouse who died. The percentage divorced/separated consists of those who have married, are not currently married, and did not have a previous spouse who died. Thus, a divorced person who had a prior marriage end in death would be classified as widowed.

3.7 POLYGYNY

Polygyny was measured in the UHSBS by asking currently married women, "Besides yourself, does your husband/partner have other wives or does he live with any other women as if married?" Currently married men were asked, "At this time, do you have more than one wife or woman with whom you are living as if married?"

Table 3.6 shows that 33 percent of women and 22 percent of men are in polygynous unions. The prevalence of polygynous unions increases with age. Women living in rural areas are more likely to be in polygynous unions (33 percent) than women living in urban areas (25 percent). Women living in Kampala followed by Southwest region were least likely to be in polygynous unions. These patterns are similar among men.

Higher education is associated with lower rates of polygyny among women. Only one in four married women with secondary or higher education is in a polygynous union, compared with 39 percent of married women with no education. The relationship between education and polygyny is not as strong for men. Wealth is not associated with polygyny for women or men.

The proportion of women and men in polygynous unions is similar in the 2000-01 UDHS and the 2004-05 UHSBS.

Table 3.6

Polygynous marriages, Uganda 2004-05

Background characteristic	Married women 15-49		Married men 15-49	
	Percentage in polygynous marriage	Number of women	Percentage in polygynous marriage	Number of men
Age				
15-19	20.9	432	(5.7)	41
20-24	23.4	1,367	9.6	408
25-29	30.6	1,448	14.9	850
30-34	35.8	1,159	22.6	1,026
35-39	42.9	840	25.2	774
40-44	37.9	671	29.5	672
45-49	41.2	441	25.7	466
Residence				
Urban	24.6	732	18.3	509
Rural	33.5	5,626	22.0	3,728
Region				
Central	28.5	937	18.3	662
Kampala	18.7	299	11.6	204
East Central	43.4	990	27.7	634
Eastern	29.0	615	19.7	403
Northeast	39.9	622	25.4	417
North Central	33.3	705	28.7	520
West Nile	40.6	607	22.7	384
Western	31.9	780	21.1	510
Southwest	19.5	803	12.4	503
Education				
No education	38.5	1,772	28.1	487
Primary incomplete	31.9	3,055	20.2	1,992
Primary complete	29.4	691	24.6	678
Secondary+	24.6	826	19.0	1,076
Wealth quintile				
Lowest	33.6	1,068	22.6	726
Second	30.1	1,357	18.4	893
Middle	31.5	1,300	23.0	871
Fourth	33.6	1,312	22.9	885
Highest	34.0	1,322	20.9	864
Total 15-49	32.5	6,358	21.5	4,237
Total 15-59	32.6	6,855	22.3	4,932

Note: Figures in parentheses are based on 25-49 unweighted cases.

3.8 RESPONDENTS WHO HAVE EVER BEEN WIDOWED

Table 3.7 shows the proportion of respondents who have ever been widowed. This information differs from current marital status presented in Table 3.5. If a woman who was widowed has since remarried, in Table 2.6 she is included with the currently married group rather than widowed, whereas in Table 3.7, she is included among those who have ever been widowed. Men and women ever widowed gives an indication of adult mortality and the effect of HIV/AIDS, because some of the husbands and wives who died may have had AIDS, especially those who died at younger ages.

Ten percent of women aged 15-49 and 5 percent of men have ever been widowed. Among those aged 15-59, the proportions are slightly higher—12 percent of women and 6 percent of men.

The likelihood of being widowed increases with age. Less than 1 percent of women aged 15-19 have ever been widowed, compared with 30 percent of women aged 45-49. Nonetheless, the proportion of men and women who have been widowed at younger ages is substantial. Seven percent of women and 2 percent of men aged 25-29 have ever been widowed. Among respondents aged 30-34, the proportions who have ever been widowed rise to 12 percent for women and 5 percent for men.

The proportion of respondents widowed is slightly higher in rural areas than urban areas. North Central has the highest percentage of respondents who have been widowed (14 percent of women and 8 percent of men aged 15-49). Kampala and Northeast have the lowest percentage of respondents ever widowed. The likelihood of having been widowed decreases with level of education but not with wealth.

Table 3.7

Percentage ever widowed, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49	
	Percentage ever-widowed	Number of women	Percentage ever-widowed	Number of men
Age				
15-19	0.5	2,186	0.0	2,070
20-24	2.2	1,933	1.0	1,262
25-29	7.0	1,764	2.3	1,220
30-34	12.4	1,457	5.4	1,200
35-39	20.1	1,085	9.7	916
40-44	22.6	870	13.2	788
45-49	29.9	647	17.6	554
Residence				
Urban	8.5	1,508	3.9	1,200
Rural	9.9	8,433	5.1	6,809
Region				
Central	8.9	1,656	3.9	1,451
Kampala	6.3	668	3.9	547
East Central	10.5	1,555	5.1	1,146
Eastern	8.8	857	5.7	770
Northeast	8.4	829	3.2	610
North Central	14.4	970	7.5	795
West Nile	12.4	958	4.5	735
Western	8.5	1,140	5.0	945
Southwest	8.5	1,309	5.5	1,012
Education				
No education	16.2	2,255	6.4	668
Primary incomplete	9.3	4,596	5.2	3,723
Primary complete	8.5	1,115	5.8	1,133
Secondary+	3.9	1,957	3.8	2,477
Wealth quintile				
Lowest	9.3	2,002	4.1	1,555
Second	10.4	2,101	5.7	1,680
Middle	10.2	1,837	5.4	1,505
Fourth	9.7	1,778	5.4	1,492
Highest	9.0	2,221	4.3	1,777
Total 15-49	9.7	9,941	4.9	8,010
Total 15-59	12.1	10,826	6.4	8,830

3.9 AGE AT FIRST MARRIAGE

Age at first marriage may be associated with the spread of HIV, because those who marry at younger ages may be exposed earlier to the risk of contracting the virus. Tables 3.8.1 and 3.8.2 show the percentage of women and men who first married by specific ages. The data show that about one-fifth of Ugandan girls marry before their fifteenth birthday and more than half marry before age 18. The median age at first marriage among women is just under 18. There has been no significant change in the median age at first marriage among women since the 2000-01 UDHS (17.8 years for women 20-49; 17.7 years for women 20-24).

In contrast, less than one-third of men marry before reaching age 20. The median age at marriage among men is almost 22.

Table 3.8.1

Age at first marriage for women, Uganda 2004-05

Current age	Percentage first married by exact age:					Percentage never married	Number of women	Median age at first marriage
	15	18	20	22	25			
15-19	5.3	na	na	na	na	76.4	2,186	a
20-24	16.6	51.4	70.3	na	na	19.6	1,933	17.9
25-29	17.9	53.1	71.0	82.8	91.3	5.7	1,764	17.8
30-34	21.9	56.2	73.9	84.6	91.6	2.3	1,457	17.4
35-39	20.1	52.8	72.3	82.8	91.0	1.8	1,085	17.7
40-44	19.5	50.2	70.1	82.2	89.4	1.2	870	18.0
45-49	22.1	55.0	72.5	79.9	87.3	1.2	647	17.4
20-49	19.2	53.1	71.6	na	na	7.1	7,755	17.7
25-49	20.0	53.6	72.0	82.9	90.6	3.0	5,822	17.7

na = Not applicable
a = Omitted because less than 50 percent of the respondents married before reaching the beginning of the age group

Table 3.8.2

Age at first marriage for men, Uganda 2004-05

Current age	Percentage first married by exact age:					Percentage never married	Number of men	Median age at first marriage
	20	22	25	28	30			
20-24	23.2	na	na	na	na	60.9	1,262	a
25-29	31.6	51.4	72.1	na	na	19.8	1,220	21.8
30-34	33.6	54.0	76.0	88.2	92.7	4.8	1,200	21.5
35-39	30.2	50.5	72.2	86.0	89.8	2.7	916	21.9
40-44	25.3	47.6	71.7	82.7	86.8	3.2	788	22.2
45-49	27.4	47.4	70.6	81.4	87.9	2.8	554	22.3
25-49	30.3	50.8	72.9	na	na	7.8	4,678	21.9

na = Not applicable
a = Omitted because less than 50 percent of the respondents married before reaching the beginning of the age group

3.10 Characteristics of Couples

The 2004-05 UHSBS interviewed men and women in the same households. The data were linked for more than 4,000 cohabitating couples and are shown in Table 3.9. The wife is older than the husband in only 7 percent of couples. In one in four couples, the husband is ten or more years older than the wife. In 7 percent of couples, neither the wife nor husband has any formal education. Both wife and husband are educated in 65 percent of couples. Where education status is discordant within the relationship, it is more common for the husband to have attended school when his wife has not.

Table 3.9

Age and education differences among couples, Uganda 2004-05

Age/education differences	Percent distribution	Number of couples
Age		
Wife older	6.7	285
Husband older 0-4 years	35.2	1,495
Husband older 5-9 years	33.4	1,415
Husband older 10-14 years	15.8	671
Husband older 15 years +	8.9	376
Education		
Husband and wife both none	7.2	306
Husband some education, wife none	21.8	924
Wife some education, husband none	5.2	219
Husband and wife both some education	65.4	2,775
Education missing for one or both	0.4	19
Total	100.0	4,243

3.11 Media Exposure of Respondents

Information about HIV/AIDS is often carried by mass media. Having access to mass media is essential in increasing peoples' awareness and knowledge of HIV/AIDS, which may eventually affect societal norms and influence individuals' attitudes and behaviour. In the 2004-05 UHSBS, access to mass media was assessed by asking how often a respondent reads a newspaper, listens to the radio, or watches television.

In general, men have more exposure to mass media than women (see Tables 3.10.1 and 3.10.2). More than twice as many women as men say they do not have access to any of the types of media asked about (28 and 13 percent, respectively). Radio is by far the most widely used medium by both men and women. Seven in 10 women and 86 percent of men reported that they listen to the radio at least once a week. Television is the least common form of media.

Women and men in younger age groups report greater exposure to all three sources of media. Among women aged 15-19, 74 percent listen to the radio weekly compared with 65 percent of women aged 40-44. Men aged 15-19 report less access to mass media than men aged 20-24, who have greater exposure than every other age group. Urban women and men have greater access to all three sources of media than rural women and men. Television is the medium with the greatest disparity between rural and urban areas. Only 4 percent of women in rural areas watch television weekly compared with 43 percent of urban women. Kampala has the highest proportion of residents who report exposure to each of the three media sources.

Exposure to mass media increases with education and with wealth. Newspaper is the medium most sensitive to changes in level of education, because of the link between education and literacy. Fifty-five percent of men with secondary education or higher read a newspaper at least once per week, compared with 13 percent of men with incomplete primary education and 2 percent of men with no formal education. Television is the medium most sensitive to increases in wealth. Both women and men in the highest wealth quintile have a much stronger probability of watching television once a week than those in the next highest quintile. Exposure to radio varies least with level of education or wealth.

Compared with the 2000-01 UDHS findings, exposure to newspaper and television remains the same while exposure to radio has increased. For example, weekly radio listening increased from 53 to 70 percent among women 15-49. The increase could be a result of the fact that in the 2000-01 UDHS, respondents were asked how often they accessed each type of media in the four weeks preceding the survey as opposed to 'usually.'

Table 3.10.1

Exposure of women to mass media, Uganda 2004-05

Background characteristic	Percentage of women 15 to 49 who usually, at least once a week: Read a newspaper	Watch television	Listen to the radio	Access all three media	Access no media	Number of women
Age						
15-19	24.4	12.3	73.5	6.1	21.7	2,186
20-24	14.4	11.1	72.4	5.5	26.2	1,933
25-29	12.6	11.0	69.7	5.2	29.2	1,764
30-34	9.3	7.6	68.2	3.0	30.8	1,457
35-39	9.9	7.3	66.2	4.1	33.0	1,085
40-44	8.2	5.1	65.4	3.4	33.5	870
45-49	8.7	4.8	66.0	2.2	32.7	647
Residence						
Urban	40.2	42.5	88.8	22.1	8.1	1,508
Rural	9.5	3.6	66.4	1.5	31.8	8,433
Region						
Central	22.8	15.8	79.7	8.1	17.3	1,656
Kampala	42.7	54.4	92.8	26.3	4.2	668
East Central	16.6	11.0	81.3	5.4	17.1	1,555
Eastern	7.5	3.6	61.6	1.4	37.2	857
Northeast	5.9	1.7	44.6	0.7	55.0	829
North Central	9.1	3.8	70.7	2.3	28.9	970
West Nile	15.3	0.9	44.3	0.5	48.6	958
Western	5.9	1.8	68.9	1.2	30.6	1,140
Southwest	5.4	2.7	72.1	0.9	27.3	1,309
Education						
No education	0.2	1.1	50.6	0.0	49.2	2,255
Primary incomplete	7.5	4.8	68.7	0.9	29.4	4,596
Primary complete	16.0	12.5	82.2	5.0	16.1	1,115
Secondary+	44.8	28.6	87.7	18.7	8.2	1,957
Wealth quintile						
Lowest	5.2	0.6	36.5	0.1	60.8	1,610
Second	6.4	1.1	60.1	0.2	37.9	2,038
Middle	5.9	1.3	70.4	0.2	28.4	1,849
Fourth	10.7	2.0	80.3	1.1	18.2	2,000
Highest	35.5	34.7	90.9	17.8	6.7	2,443
Total 15-49	14.1	9.5	69.8	4.7	28.2	9,941
Total 15-59	13.3	9.0	69.2	4.4	29.0	10,826

Table 3.10.2

Exposure of men to mass media, Uganda 2004-05

Background characteristic	Percentage of men 15 to 49 who usually, at least once a week: Read a newspaper	Watch television	Listen to the radio	Access all three media	Access no media	Number of men
Age						
15-19	28.5	19.0	87.1	10.8	10.7	2,070
20-24	34.4	23.1	91.1	15.2	8.0	1,262
25-29	27.9	19.6	86.7	12.7	12.2	1,220
30-34	23.2	13.2	84.7	8.6	14.5	1,200
35-39	20.4	11.3	83.5	8.3	15.7	916
40-44	20.5	11.6	86.3	8.7	13.2	788
45-49	22.7	8.8	80.3	7.2	19.2	554
Residence						
Urban	67.4	55.0	95.4	43.2	2.8	1,200
Rural	19.2	9.8	84.8	5.0	14.2	6,809
Region						
Central	35.1	29.8	95.7	19.1	3.7	1,451
Kampala	74.1	66.5	96.8	53.1	1.4	547
East Central	22.2	18.0	92.4	9.3	6.7	1,146
Eastern	22.9	10.9	87.2	6.4	11.8	770
Northeast	10.8	4.1	64.6	1.9	34.1	610
North Central	16.3	4.6	67.4	3.7	31.5	795
West Nile	31.6	10.2	86.1	5.7	11.8	735
Western	15.0	5.1	88.0	2.9	11.4	945
Southwest	20.0	5.5	86.4	2.7	11.9	1,012
Education						
No education	1.5	4.6	68.3	0.5	31.2	668
Primary incomplete	13.1	9.0	83.7	3.2	15.1	3,723
Primary complete	22.3	12.3	87.5	6.8	11.5	1,133
Secondary+	55.0	33.1	94.6	26.7	4.1	2,477
Wealth quintile						
Lowest	11.2	3.6	68.9	1.5	29.3	1,209
Second	13.1	5.0	79.7	1.8	19.1	1,628
Middle	15.5	5.6	87.3	2.4	11.8	1,506
Fourth	22.4	9.6	92.5	4.0	6.9	1,669
Highest	58.1	47.9	96.5	35.5	2.2	1,998
Total 15-49	26.4	16.5	86.3	10.7	12.5	8,010
Total 15-59	25.5	15.7	85.7	10.1	13.3	8,830

3.12 TRADITIONAL TATTOOING AND CUTTING AND MALE CIRCUMCISION

Table 3.11 shows that traditional tattooing and cutting of the skin is common in Uganda. If the tools are not sterilised, these practices carry a risk of spreading HIV. Forty-four percent of women and 34 percent of men report they have undergone traditional tattooing or cutting of the skin. Older women and men were more likely to have experienced this tradition. Women and men in rural areas are more likely to have traditional tattooing or cutting than those in urban areas. West Nile region has the highest proportion of women (61 percent) who have undergone these practices. Southwest region has the highest proportion of men (74 percent).

Among women, tattooing and cutting decreases with level of education. Among men, tattooing and cutting is highest among men with incomplete and complete primary education and lowest among men with secondary education or higher.

Muslim, Catholic, and Anglican/Protestant women have tattooing or cutting in roughly equal proportions (44-45 percent). Men in the three major religious groups also share similar proportions of tattooing or cutting.

Table 3.11

Traditional tattooing or skin cutting and male circumcision, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49		
	Percentage with tattooing or skin cutting	Number of women	Percentage circumcised	Percentage with tattooing or skin cutting	Number of men
Age					
15-19	35.9	2,186	21.8	28.1	2,070
20-24	41.0	1,933	27.1	30.5	1,262
25-29	45.2	1,764	22.5	34.4	1,220
30-34	46.6	1,457	26.6	36.7	1,200
35-39	50.0	1,085	26.0	39.8	916
40-44	53.3	870	28.3	41.8	788
45-49	53.0	647	25.6	40.3	554
Residence					
Urban	39.8	1,508	36.0	24.5	1,200
Rural	45.1	8,433	22.9	36.0	6,809
Region					
Central	37.4	1,656	23.6	20.5	1,451
Kampala	36.3	668	37.9	15.3	547
East Central	53.3	1,555	34.7	36.6	1,146
Eastern	40.2	857	54.7	36.7	770
Northeast	52.8	829	4.9	16.1	610
North Central	38.7	970	2.4	25.8	795
West Nile	60.5	958	29.1	49.0	735
Western	22.3	1,140	29.9	26.2	945
Southwest	55.0	1,309	7.6	74.2	1,012
Education					
No education	51.3	2,255	23.2	32.4	668
Primary incomplete	44.5	4,596	24.0	37.2	3,723
Primary complete	41.8	1,115	22.5	37.9	1,133
Secondary+	37.2	1,957	27.6	28.8	2,477
Ethnicity					
Baganda	37.8	1,773	31.3	17.4	1,398
Banyankore	53.7	1,010	9.1	62.0	818
Iteso	33.7	634	7.1	22.9	522
Lugbara/Madi	54.9	792	36.5	49.5	607
Basoga	53.5	967	35.0	44.1	735
Langi	47.6	525	1.8	36.2	463
Bakiga	42.6	680	7.3	54.7	580
Karimojong	83.6	316	6.0	5.8	213
Acholi	27.4	480	4.8	11.0	359
Bagisu/Sabiny	47.9	446	80.0	26.1	471
Alur/Jopadhola	55.8	514	18.2	41.6	442
Banyara	22.9	325	15.3	19.1	272
Batoro	15.8	245	22.2	16.9	219
All others	38.6	1,228	36.7	34.8	896
Religion					
Catholic	45.1	4,161	9.5	32.9	3,359
Anglican/Protestant	44.2	3,388	17.2	37.2	2,939
Pentecostal	39.7	600	19.8	33.4	315
Other Christian	38.4	263	24.1	26.2	229
Muslim	44.1	1,382	97.3	34.5	1,055
Other/None/Missing	52.2	147	19.3	16.6	113
Total 15-49	44.3	9,941	24.8	34.3	8,010
Total 15-59	45.2	10,826	24.9	34.7	8,830

Note: Totals include some categories with too few cases to show separately.

Trends in tattooing and cutting of the skin by ethnicity differ by gender. The Karimojong group has the highest percentage of women (84 percent) and lowest percentage of men (6 percent) with tattooing or cutting. Alur/Jopadhola, Lugbara/Madi, Banyankore, and Basoga all have similar proportions of women with tattooing or cutting of the skin (54-56 percent). The Batoro group has the lowest percentage of women with tattooing and cutting (16 percent). Among men, the highest proportion with tattooing and cutting are from the Banyankore group, followed by the Bakiga and Lugbara/Madi.

Circumcision is practiced in many societies in Uganda. The relationship between male circumcision and the risk of contracting HIV remains unclear. Table 3.11 shows that one-quarter of Ugandan men aged 15-49 are circumcised. There is almost no difference in circumcision by age group, implying that there has been little change in the prevalence of the practice over time. The slightly lower prevalence among men aged 15-19 could be the result of a decline in the practice, but it might also be because some of the youngest men have not yet been circumcised.

Male circumcision is more common among urban than rural men. It is also much more common among men in Eastern region (55 percent), as well as in Kampala (38 percent) and East Central region (35 percent). Less than 10 percent of men in North Central, Northeast, and Southwest regions are circumcised. Male circumcision is highest among Muslim men, 97 percent of whom have been circumcised. Prevalence is lowest among Catholic men (10 percent).

The Bagisu are the most likely to circumcise men (80 percent), followed by Lugbara/Madi, Basoga, and Baganda, roughly one-third of whom have been circumcised. Ethnic groups with the lowest proportion of men circumcised include the Langi, Acholi, Karimojong, Ateso, and Bakiga.

3.13 Contraceptive Use Among Women

Information about use of contraceptive methods was collected from female respondents aged 15-49 by asking them if they were currently doing something or using any method to delay or avoid getting pregnant. Table 3.12 shows the level and key differentials in the current use of contraception by method as reported by currently married women. Contraceptive methods are grouped into two types in the table, namely modern and traditional methods. Modern methods include female sterilisation, pill, IUD, injectables, implants, male condom, and lactational amenorrhoea (LAM). Traditional methods include periodic abstinence (rhythm method), withdrawal, and other methods.

Seventeen percent of all women and 20 percent of currently married women are currently using any method of contraception (Table 3.12). Unmarried sexually active women are more likely than currently married women to be using a method of contraception (36 and 20 percent, respectively). Modern methods of contraception are more commonly used (19 percent of married women) than are traditional methods (1 percent). Of the modern methods, injectables are by far the most widely used (used by 10 percent of currently married women), followed by the pill (3 percent) and LAM (3 percent). Contraceptive prevalence peaks among women aged 30-34 and is lowest for women aged 15-19 and 45-49.

The data show a slight decline in contraceptive use by currently married women from 23 percent in 2000-01 to 20 percent currently. The decline is entirely a result of the drop in use of traditional methods (from 4 to 1 percent). The use of modern methods has remained more or less constant at 18-19 percent. There has been a substantial increase in use of injectables (from 6 to almost 10 percent of married women), with a slight decline in reported use of LAM.

Table 3.12

Current contraceptive use among women 15-49 by age (percent distribution), Uganda 2004-05

Age	Any method	Modern method								Traditional method				Not currently using	Total	Number of women
		Any modern method	Female sterilisation	Pill	IUD	Injectables	Implants	Male condom	LAM[1]	Any traditional method	Periodic abstinence	Withdrawal	Folk method			
ALL WOMEN																
15-19	7.2	6.8	0.0	0.9	0.0	2.0	0.0	3.2	0.8	0.4	0.3	0.0	0.1	92.8	100.0	2,186
20-24	18.6	18.0	0.1	3.2	0.0	9.4	0.1	2.3	2.8	0.6	0.3	0.1	0.3	81.4	100.0	1,933
25-29	20.9	20.3	0.6	3.8	0.0	10.5	0.6	2.1	2.5	0.5	0.3	0.2	0.1	79.1	100.0	1,764
30-34	21.5	20.6	1.0	2.9	0.1	11.8	0.4	1.4	3.0	0.9	0.3	0.3	0.3	78.5	100.0	1,457
35-39	20.1	18.5	2.8	2.7	0.4	8.9	0.7	1.1	1.8	1.6	0.6	0.3	0.7	79.9	100.0	1,085
40-44	17.2	15.3	3.9	1.4	0.7	6.9	0.1	1.2	1.1	2.0	0.4	0.5	1.1	82.8	100.0	870
45-49	10.9	9.5	3.9	0.9	0.2	4.0	0.0	0.3	0.0	1.5	0.5	0.6	0.4	89.1	100.0	647
Total	16.5	15.6	1.2	2.4	0.1	7.7	0.3	2.0	1.9	0.9	0.3	0.2	0.3	83.5	100.0	9,941
CURRENTLY MARRIED WOMEN																
15-19	12.4	12.1	0.0	2.5	0.0	5.2	0.0	0.9	3.5	0.3	0.2	0.0	0.2	87.6	100.0	432
20-24	19.3	18.8	0.1	3.4	0.0	10.4	0.1	1.0	3.7	0.5	0.2	0.1	0.2	80.7	100.0	1,367
25-29	20.1	19.5	0.8	3.9	0.0	10.2	0.5	1.0	3.0	0.6	0.3	0.2	0.1	79.9	100.0	1,448
30-34	22.6	21.5	1.2	3.1	0.1	12.2	0.4	1.1	3.3	1.1	0.4	0.3	0.4	77.4	100.0	1,159
35-39	21.7	19.9	2.8	2.8	0.4	10.0	0.8	0.9	2.2	1.8	0.7	0.4	0.7	78.3	100.0	840
40-44	20.8	18.7	5.0	1.7	0.9	8.3	0.1	1.2	1.3	2.1	0.3	0.6	1.2	79.2	100.0	671
45-49	14.4	12.8	5.2	1.0	0.3	5.7	0.0	0.4	0.0	1.6	0.4	0.8	0.4	85.6	100.0	441
Total	19.7	18.7	1.7	3.0	0.2	9.7	0.3	1.0	2.7	1.0	0.3	0.3	0.4	80.3	100.0	6,358
SEXUALLY ACTIVE UNMARRIED WOMEN[2]																
15-19	29.7	29.1	0.0	4.1	0.0	5.6	0.0	19.3	0.0	0.6	0.6	0.0	0.0	70.3	100.0	98
20-24	40.1	39.1	0.0	6.0	0.0	18.5	0.0	14.6	0.0	1.0	1.0	0.0	0.0	59.9	100.0	78
25-29	49.3	49.3	0.0	9.9	0.0	23.8	0.0	15.7	0.0	0.0	0.0	0.0	0.0	50.7	100.0	80
Total	35.5	35.1	0.2	6.0	0.0	16.0	0.0	12.7	0.2	0.4	0.4	0.0	0.0	64.5	100.0	378

[1] Refers to lactational amenorrhoea method.
[2] Total includes age groups with too few cases to show separately.

Table 3.13 shows contraceptive use by background characteristics. There is wide variation in use of a modern method of contraception by residence. Forty percent of women in urban areas are currently using a modern method, compared with only 16 percent of respondents in rural areas. Among the nine regions, use of a modern contraceptive ranges from 8 percent in West Nile to 42 percent in Kampala.

Modern contraceptive use increases dramatically with education. While only 9 percent of women with no education are currently using a modern method, 39 percent of women with secondary education or higher do so. Among the lowest 4 wealth quintiles, use of a modern contraceptive method increases from 10 to 16 percent. However, 37 percent of women in the highest wealth quintile are currently using a modern method of contraception. Use of contraception also varies by the number of children a woman has. Three percent of women with no children currently use a modern contraceptive method, compared with 18 percent of women with one to two children. Surprisingly, contraceptive use does not increase much above this level for women with higher numbers of children.

Table 3.13

Current contraceptive use among married women 15-49 by background characteristics (percent distribution), Uganda 2004-05

Background characteristic	Any method	Modern method								Traditional method				Not currently using	Total	Number of married women
		Any modern method	Female sterilisation	Pill	IUD	Injectables	Implant	Male condom	LAM[1]	Any traditional method	Periodic abstinence	Withdrawal	Folk method			
Residence																
Urban	41.3	39.7	1.7	10.5	1.1	19.8	1.1	3.5	1.9	1.7	0.8	0.5	0.4	58.7	100.0	732
Rural	16.9	16.0	1.7	2.0	0.1	8.4	0.2	0.6	2.9	0.9	0.3	0.3	0.4	83.1	100.0	5,626
Region																
Central	28.6	26.7	3.7	5.1	0.6	13.2	0.2	1.7	2.2	1.8	0.7	0.4	0.7	71.4	100.0	937
Kampala	42.9	41.7	2.2	13.8	1.8	16.3	1.2	4.9	1.4	1.2	0.8	0.0	0.4	57.1	100.0	299
East Central	21.5	20.3	1.2	3.7	0.0	11.6	0.4	1.3	2.0	1.2	0.1	0.5	0.5	78.5	100.0	990
Eastern	22.7	22.3	2.1	1.7	0.0	10.6	0.0	0.6	7.3	0.5	0.2	0.0	0.3	77.3	100.0	615
Northeast	15.6	15.3	0.6	0.7	0.1	4.0	0.1	0.2	9.6	0.3	0.1	0.0	0.2	84.4	100.0	622
North Central	12.0	11.8	1.6	0.8	0.0	7.2	0.3	0.8	0.8	0.3	0.3	0.0	0.0	88.0	100.0	705
West Nile	8.3	7.8	0.3	0.6	0.0	4.6	0.2	0.6	1.4	0.5	0.2	0.0	0.3	91.7	100.0	607
Western	16.4	15.8	0.8	3.9	0.0	9.7	0.3	0.5	0.6	0.6	0.0	0.3	0.3	83.6	100.0	780
Southwest	18.0	15.8	2.1	1.1	0.2	10.9	0.6	0.0	0.9	2.3	0.6	1.0	0.6	82.0	100.0	803
Education																
No education	9.9	9.1	1.2	0.7	0.1	4.4	0.1	0.3	2.3	0.8	0.2	0.3	0.3	90.1	100.0	1,772
Primary incomplete	17.9	16.8	1.6	2.1	0.1	8.7	0.2	0.6	3.5	1.1	0.3	0.3	0.5	82.1	100.0	3,055
Primary complete	28.6	27.8	2.1	5.2	0.0	16.3	0.3	1.6	2.3	0.8	0.4	0.3	0.1	71.4	100.0	691
Secondary+	40.1	38.7	2.8	9.3	1.0	19.7	1.2	3.2	1.3	1.5	0.8	0.2	0.4	59.9	100.0	826
Number of living children																
0	2.8	2.8	0.0	0.8	0.0	1.1	0.0	0.9	0.0	0.0	0.0	0.0	0.0	97.2	100.0	374
1-2	18.6	17.9	0.4	3.8	0.2	9.2	0.3	1.3	2.7	0.7	0.4	0.2	0.1	81.4	100.0	1,742
3-4	20.6	20.0	1.1	3.5	0.4	10.5	0.5	0.9	3.1	0.6	0.2	0.1	0.3	79.4	100.0	1,814
5+	22.5	20.8	3.3	2.4	0.1	10.9	0.3	0.8	2.9	1.7	0.4	0.6	0.7	77.5	100.0	2,427
Wealth quintile																
Lowest	10.4	10.2	1.0	0.7	0.0	4.3	0.2	0.2	3.8	0.2	0.1	0.0	0.1	89.6	100.0	1,068
Second	14.5	13.6	1.2	1.4	0.0	7.2	0.1	0.4	3.3	1.0	0.4	0.3	0.3	85.5	100.0	1,357
Middle	16.3	14.7	1.3	1.1	0.1	7.7	0.2	0.7	3.7	1.6	0.3	0.5	0.8	83.7	100.0	1,300
Fourth	17.2	16.4	1.7	1.9	0.2	10.1	0.1	0.5	1.7	0.8	0.3	0.3	0.2	82.8	100.0	1,312
Highest	38.6	37.1	3.1	9.3	0.6	18.3	1.0	3.0	1.5	1.5	0.5	0.5	0.5	61.4	100.0	1,322
Total	19.7	18.7	1.7	3.0	0.2	9.7	0.3	1.0	2.7	1.0	0.3	0.3	0.4	80.3	100.0	6,358

[1] Refers to lactational amenorrhoea method.

3.14 Number of Children Ever Born

Table 3.14 shows that the mean number of children ever born to all female respondents is 3.7 children. The mean number of living children is 3. Among currently married women, the mean number of children ever born is 4.8, and the mean number of living children is 3.9. As expected, the mean number of children ever born and living increases with age. This table shows fertility in Uganda continues at high levels. For example, 56 percent of women aged 25-29 have given birth to at least four children while 16 percent have given birth to six or more children.

Table 3.14

Number of children ever born (percent distribution) among all women and currently married women, Uganda 2004-05

Age	Number of children ever born											Total	Number of women	Mean number of children ever born	Mean number of living children
	0	1	2	3	4	5	6	7	8	9	10+				
ALL WOMEN															
15-19	78.9	14.8	5.1	0.9	0.2	0.1	0.0	0.0	0.0	0.0	0.0	100.0	2,186	0.29	0.25
20-24	17.5	21.4	25.2	20.2	10.3	3.7	1.4	0.1	0.1	0.1	0.1	100.0	1,933	2.04	1.72
25-29	5.0	7.8	11.8	19.3	22.5	17.2	9.7	4.5	1.4	0.6	0.2	100.0	1,764	3.73	3.17
30-34	2.2	3.9	6.7	8.2	13.2	18.5	18.5	14.1	8.0	4.2	2.5	100.0	1,457	5.25	4.36
35-39	2.5	3.8	4.9	3.2	7.0	11.2	14.2	13.4	16.2	11.2	12.4	100.0	1,085	6.51	5.25
40-44	1.9	3.5	3.4	4.3	5.8	7.9	10.8	11.9	14.9	11.0	24.7	100.0	870	7.23	5.60
45-49	2.7	3.5	3.4	3.8	4.4	7.6	7.6	13.4	14.0	11.4	28.0	100.0	647	7.46	5.71
Total	22.6	10.3	10.2	9.7	9.5	8.9	7.7	6.3	5.4	3.7	5.7	100.0	9,941	3.72	3.02
CURRENTLY MARRIED WOMEN															
15-19	28.5	43.8	22.4	3.4	1.1	0.7	0.0	0.0	0.0	0.0	0.0	100.0	432	1.07	0.90
20-24	4.7	19.9	30.1	24.7	13.3	5.0	1.9	0.1	0.1	0.1	0.1	100.0	1,367	2.48	2.10
25-29	2.0	6.4	11.0	19.9	24.3	18.4	10.7	4.9	1.6	0.7	0.1	100.0	1,448	3.96	3.37
30-34	1.2	3.1	4.8	7.4	12.0	18.8	20.6	15.6	9.3	4.7	2.7	100.0	1,159	5.54	4.62
35-39	1.9	2.5	4.4	2.9	5.4	10.6	14.1	14.1	16.5	12.6	15.0	100.0	840	6.86	5.57
40-44	1.9	3.5	2.7	3.8	3.5	6.7	10.7	11.7	15.7	11.5	28.4	100.0	671	7.53	5.88
45-49	2.5	2.2	2.7	2.7	3.0	6.3	7.3	12.4	15.1	12.0	33.7	100.0	441	7.95	6.12
Total	4.2	10.1	12.4	12.4	11.9	11.3	10.1	8.0	7.0	4.8	7.8	100.0	6,358	4.77	3.90

3.15 BIRTH REGISTRATION

The UHSBS included a question for all women who had given birth in the five years preceding the survey as to whether their most recent birth had been registered. It is important to note that the question did not describe what was meant by registration, so it is possible that the results are not highly accurate. Data in Table 3.15 show that 41 percent of births in the last five years are reported to have been registered. Although similar data were collected in the 2000-01 UDHS, it is not possible to establish trends.[1]

Birth registration is higher in urban areas and among births to mothers in the highest wealth quintile. West Nile region has the highest rate of birth registration, with 82 percent of births registered. Older births are slightly more likely to be registered than those born more recently.

A follow-on question in the survey established that, of women who said their most recent birth in the previous five years had been registered, 42 percent said the birth was registered at a health centre, 34 percent said the birth was registered at a hospital, and 15 percent said they registered the birth with the local authorities (data not shown). Whereas hospitals and local councils do register births, registration at health centres is less common and may indicate some over-reporting of the level of birth registration.

[1] Because of a skip error in the 2000-01 UDHS questionnaire, the results regarding birth registration are erroneous.

Table 3.15

Birth registration, Uganda 2004-05

Background characteristic	Percentage registered[1]	Number of births in the 5 years before survey[1]
Years before survey		
< 2 years	39.5	3,717
2-4 years	43.6	2,000
Residence		
Urban	60.3	685
Rural	38.3	5,032
Region		
Central	46.5	933
Kampala	58.8	285
East Central	29.2	905
Eastern	35.6	524
Northeast	31.6	480
North Central	48.1	640
West Nile	82.1	543
Western	17.1	689
Southwest	36.7	717
Wealth quintile		
Lowest	38.9	974
Second	38.3	1,245
Middle	36.0	1,182
Fourth	36.7	1,162
Highest	54.8	1,154
Total	40.9	5,717

[1] If a woman had more than one birth in the five years preceding the survey, the data refer to only the most recent birth.

HIV/AIDS-RELATED KNOWLEDGE 4

4.1 KEY FINDINGS

- Ninety-nine percent of Ugandans aged 15-49 have heard of AIDS.
- The radio is by far the most important source of information about HIV/AIDS.
- Awareness of the modes of HIV transmission is high, with almost 90 percent of adults knowing that having only one uninfected, faithful partner can reduce the chances of getting AIDS.
- Rejection of misconceptions related to HIV is also widespread; 74 percent of women and 84 percent of men know that a healthy-looking person may be HIV positive and four in five know that HIV cannot be transmitted by sharing food with someone who has AIDS.

4.2 INTRODUCTION

Acquired Immune Deficiency Syndrome (AIDS) is caused by a human immunodeficiency virus (HIV) that weakens the immune system, making the body susceptible to opportunistic diseases that often lead to death. The predominant mode of HIV transmission is through heterosexual contact, followed in magnitude by perinatal transmission, in which the mother passes the virus to the child during pregnancy, delivery or breastfeeding. Other modes of transmission are through infected blood and unsafe injections.

Information obtained from the UHSBS provides an assessment of the level of knowledge regarding transmission of the AIDS virus among Ugandan adults. Survey respondents were asked if they had ever heard of AIDS, about their main source of information, about specific means of transmission of the virus, and if they were aware of mother-to-child transmission. Respondents were also asked about HIV discordance within couples, antiretroviral therapy, and stages of mother-to-child HIV transmission.

4.3 AWARENESS OF AIDS

Survey results indicate that 99 percent of Ugandan women and men aged 15-49 have heard of AIDS (Table 4.1), with more than 90 percent of respondents in all age groups, regions, residence and education groups having heard of AIDS (data not shown). Overall, the level of awareness of AIDS for both women and men has not changed since 2000-01.

Table 4.1

Awareness of AIDS and main source of information, Uganda 2004-05

Awareness/source	Women 15-49	Men 15-49	Both sexes
Percentage who have heard of AIDS	98.6	99.1	98.8
Main source of information (% distribution)			
Radio	52.6	59.4	55.7
Television	0.6	0.9	0.7
Film/drama	0.6	1.4	0.9
Newspapers/magazines	1.0	3.3	2.0
Brochures/community notices	1.0	0.7	0.8
Family	7.0	1.5	4.5
Friends/peers	13.0	8.9	11.1
Health workers	13.3	11.3	12.4
Teachers	4.6	5.9	5.2
Political/traditional leaders	0.4	0.4	0.4
Religious leaders	1.5	0.8	1.2
Seminars/meetings/workshops	0.5	0.9	0.7
Direct experience with AIDS patient	1.2	2.4	1.7
Other/never heard of AIDS	2.7	2.4	2.6
Total	100.0	100.0	100.0
Number of respondents	9,941	8,010	17,950

By far the most important source of information about AIDS is the radio, cited by 56 percent of respondents. Health workers, friends, teachers, and family are the only other main sources of information. The only major gender difference is that women are more likely than men to cite family as the main source of information about AIDS.

The most important messages obtained from the sources cited were related to the ABC strategy, namely, abstinence, being faithful to one partner, and using condoms, with condom use being slightly more commonly mentioned than the other two messages, especially among men (Table 4.2). The message that AIDS is fatal was also commonly mentioned, by one in ten respondents. Although other messages may also have been widely received, the question asked about the most important message only, so the others were not so commonly cited.

There are only minor differences in the types of messages mentioned by women and men.

Table 4.2

Most important HIV/AIDS message learned from main source, Uganda 2004-05

Message	Women 15-49	Men 15-49	Both sexes
Abstain from sex	21.6	20.3	21.1
Use condoms	20.7	36.6	27.8
Limit sex to 1 partner/stay faithful	28.2	21.0	25.0
Limit number of partners	3.0	3.1	3.1
Follow the ABCs	1.4	1.2	1.3
Avoid sex with prostitutes/those who have many partners	0.9	0.7	0.8
Avoid injections/blood transfusions	0.4	0.3	0.4
Antiretroviral drugs available	0.3	0.1	0.2
Prevent mother-to-child transmission	0.5	0.1	0.3
Avoid discrimination against those with AIDS	0.7	0.2	0.5
Anyone can get AIDS	1.0	0.5	0.8
Get tested for AIDS	5.5	3.2	4.5
AIDS is a killer	10.3	9.8	10.1
Don't take chances	1.2	0.6	0.9
Other	4.3	2.3	3.4
Total	100.0	100.0	100.0
Number of respondents	9,941	8,010	17,950

4.4 Knowledge of Means of Avoiding AIDS

Abstaining from sex, being faithful to one uninfected partner, and using condoms are important ways to avoid the spread of HIV/AIDS. To ascertain the depth of knowledge about modes of HIV/AIDS transmission, respondents were asked specific questions about whether it is possible for people to reduce their chances of getting AIDS by having just one sexual partner who is not infected and has no other partners, by using a condom at every sexual encounter, and by not having sex at all. Table 4.3 shows the percentage of women and men by their answers to these questions.

The results show that knowledge of HIV prevention methods is widespread. More than 4 in 5 respondents (88 percent of women and 90 percent of men) indicate that the chances of getting the AIDS virus can be reduced by limiting sex to one partner who is not infected and who has no other partners. Sixty-eight percent of women and 77 percent of men said that people could reduce their chances of getting the AIDS virus by using condoms every time they have sex. Knowledge of both these means of avoiding HIV transmission is also high, with 63 percent of women and 72 percent of men citing both as ways of reducing the risk of getting the AIDS virus. As expected, the proportion of both women and men who know that abstaining from sex reduces the chances of getting the AIDS virus is high—87 percent among women and 85 percent of men. For each of these knowledge indicators, men are slightly more informed than women, especially about condom use.

Respondents in their early 20s are most likely to know the major ways to avoid getting HIV/AIDS, while those in their 40s are the least likely. Similarly, women and men who have never married, but who have been sexually active, are the most likely to know about the major means of avoiding HIV. Urban residents and those living in Central, East Central, and Kampala regions are more knowledgeable than other respondents. Women in West Nile and Northeast regions and men in North Central and Northeast regions are the least informed about ways to avoid getting HIV/AIDS. Both education and wealth quintile are strongly correlated with knowledge about AIDS prevention.

Table 4.3

Knowledge of ways to reduce the chances of getting the AIDS virus, Uganda 2004-05

Background characteristic	Women 15-49					Men 15-49				
	Using condoms	Limiting sex to one uninfected, faithful partner	Using condoms and limiting sex[1]	Abstaining from sex	Number of women	Using condoms	Limiting sex to one uninfected faithful, partner	Using condoms and limiting sex[1]	Abstaining from sex	Number of men
Age										
15-19	70.9	86.8	64.2	86.2	2,186	79.3	86.3	71.5	85.1	2,070
20-24	71.4	90.6	67.3	87.0	1,933	83.4	90.5	77.8	86.8	1,262
25-29	69.6	88.6	64.7	85.8	1,764	80.0	91.0	75.5	83.2	1,220
30-39	66.7	87.9	61.3	86.8	2,542	76.5	90.3	71.9	84.7	2,116
40-49	60.3	88.4	56.2	87.1	1,516	68.0	90.9	64.6	82.7	1,342
15-24	71.2	88.6	65.7	86.6	4,119	80.9	87.8	73.9	85.7	3,332
Marital status										
Never married	70.4	88.2	64.9	87.1	2,220	79.9	87.5	72.8	86.0	3,140
Ever had sex	83.1	92.0	78.4	91.6	879	85.3	89.7	78.6	87.4	1,701
Never had sex	62.1	85.6	56.1	84.2	1,342	73.6	84.9	66.0	84.4	1,439
Currently married	66.6	88.5	61.7	86.1	6,358	75.2	90.7	71.1	83.5	4,237
Formerly married	71.3	88.1	65.5	87.8	1,362	79.6	91.4	74.7	84.5	633
Residence										
Urban	80.9	92.8	76.4	92.8	1,508	85.4	93.4	80.9	90.4	1,200
Rural	65.8	87.6	60.5	85.5	8,433	76.0	88.8	70.5	83.6	6,809
Region										
Central	86.4	91.3	79.7	92.8	1,656	89.8	92.6	83.6	93.5	1,451
Kampala	83.4	96.3	80.5	95.1	668	88.8	96.5	85.6	96.1	547
East Central	88.4	95.0	84.9	93.9	1,555	88.5	91.9	82.9	93.2	1,146
Eastern	73.0	93.7	70.6	90.4	857	85.5	92.9	80.6	95.2	770
Northeast	40.6	81.9	38.0	68.8	829	60.3	80.7	58.3	72.1	610
North Central	60.4	86.3	52.6	85.6	970	62.9	81.0	56.1	58.6	795
West Nile	52.6	62.4	38.0	70.4	958	77.0	90.8	71.4	88.3	735
Western	58.6	90.6	54.5	81.9	1,140	68.6	82.1	59.3	66.9	945
Southwest	52.4	91.9	50.7	90.9	1,309	65.1	93.6	62.6	89.6	1,012
Education										
No education	47.6	80.2	41.8	77.9	2,255	57.3	76.9	51.7	71.0	668
Prim. incomplete	70.1	88.7	64.5	86.8	4,596	76.5	88.5	70.3	83.9	3,723
Primary complete	77.2	92.4	72.3	90.8	1,115	78.7	91.2	73.9	84.6	1,133
Secondary+	81.8	94.9	78.4	93.8	1,957	83.6	93.5	79.3	89.3	2,477
Wealth quintile										
Lowest	53.0	80.5	47.0	77.3	1,610	68.8	82.9	62.9	77.9	1,209
Second	61.9	85.2	56.1	83.5	2,038	74.2	87.8	68.5	81.1	1,628
Middle	67.2	88.5	61.7	87.9	1,849	76.6	90.7	71.5	83.8	1,506
Fourth	71.6	91.6	66.8	88.9	2,000	78.8	89.8	72.9	86.7	1,669
Highest	81.0	93.5	76.9	92.4	2,443	84.7	93.5	80.2	90.2	1,998
Total 15-49	68.1	88.4	62.9	86.6	9,941	77.4	89.5	72.0	84.6	8,010
Total 15-59	66.7	88.2	61.7	86.6	10,826	76.0	89.4	70.8	84.4	8,830

[1] Percentage who, in response to a prompted question, say that people can reduce the risk of getting the AIDS virus by using a condom every time they have sex and by having sex with just one partner who is not infected and who has no other partners.

4.5 KNOWLEDGE OF MOTHER-TO-CHILD TRANSMISSION

Current strategies in Uganda call for reducing the mother-to-child transmission of HIV. Increasing the level of general knowledge of transmission of the virus from mother to child and of knowledge about the use of antiretroviral drugs is critical to achieving this goal.

All women and men interviewed in the UHSBS were asked if the virus that causes AIDS can be transmitted from a mother to a child. If the answer was in the affirmative, they were further asked whether the virus could be transmitted during pregnancy, during delivery, and/or during breastfeeding. They were also asked if there are any special drugs that a doctor or nurse can give to a pregnant woman who is infected with the AIDS virus to reduce the risk of transmission to the baby.

More than half of women (58 percent) and men (55 percent) know that HIV can be transmitted from a mother to her child by breastfeeding (Table 4.4). Knowledge about antiretroviral drugs is only slightly less widespread, 47 percent of women and 52 percent of men know that there are special drugs that a doctor or nurse can give to a pregnant woman infected with the AIDS virus to reduce the risk of transmitting the virus to the baby. The combined indicator shows that only 35 percent of women and men know that HIV can be transmitted through breastfeeding and that the risk can be reduced by special drugs.

Table 4.4

Knowledge of mother-to-child transmission (MTCT), Uganda 2004-05

Background characteristic	Women 15-49				Men 15-49			
	HIV can be transmitted by breast-feeding	MTCT can be reduced by mother taking special drugs during pregnancy	Knows both[1]	Number of women	HIV can be transmitted by breast-feeding	MTCT can be reduced by mother taking special drugs during pregnancy	Knows both[1]	Number of men
Age								
15-19	56.3	45.1	34.3	2,186	57.3	47.7	33.9	2,070
20-24	60.6	51.1	39.8	1,933	56.0	53.9	36.8	1,262
25-29	59.8	50.8	37.9	1,764	54.7	57.8	37.5	1,220
30-39	56.6	46.3	34.4	2,542	53.2	53.0	35.5	2,116
40-49	54.3	43.4	31.6	1,516	53.3	48.1	32.2	1,342
Marital status								
Never married	57.1	48.9	36.9	2,220	57.5	51.2	36.1	3,140
Ever had sex	65.4	63.7	48.5	879	59.2	55.7	40.3	1,701
Never had sex	51.6	39.2	29.4	1,342	55.5	45.9	31.2	1,439
Currently married	57.9	46.3	34.9	6,358	52.9	51.8	34.3	4,237
Formerly married	56.2	49.2	36.9	1,362	56.3	53.2	34.8	633
Residence								
Urban	64.4	71.9	52.1	1,508	61.1	70.3	47.7	1,200
Rural	56.3	42.9	32.7	8,433	53.9	48.4	32.8	6,809
Region								
Central	66.7	73.9	55.1	1,656	64.8	76.7	53.3	1,451
Kampala	69.5	79.4	58.4	668	62.5	75.2	50.7	547
East Central	63.2	61.7	45.9	1,555	57.9	60.0	40.4	1,146
Eastern	49.3	28.1	20.3	857	43.8	31.2	20.4	770
Northeast	48.6	22.9	15.5	829	35.8	30.8	17.9	610
North Central	52.6	29.0	21.0	970	48.7	35.2	22.1	795
West Nile	40.3	16.0	11.3	958	47.6	24.4	16.4	735
Western	57.2	48.2	37.5	1,140	56.0	49.1	33.6	945
Southwest	60.4	43.9	36.9	1,309	62.7	57.1	41.1	1,012
Education								
No education	49.9	26.3	20.3	2,255	46.7	31.9	25.2	668
Primary incomplete	55.2	43.9	32.2	4,596	55.2	46.3	31.9	3,723
Primary complete	61.3	60.3	44.8	1,115	52.7	53.5	34.4	1,133
Secondary+	69.4	72.2	56.1	1,957	57.9	64.4	42.8	2,477
Wealth quintile								
Lowest	45.8	27.0	18.7	1,610	45.3	32.2	21.2	1,209
Second	54.7	37.5	28.7	2,038	53.0	42.8	29.7	1,628
Middle	56.3	42.7	32.6	1,849	55.5	48.4	33.3	1,506
Fourth	59.2	48.9	36.7	2,000	56.0	55.8	37.3	1,669
Highest	67.1	71.0	54.0	2,443	61.1	69.8	47.2	1,998
Total 15-49	57.5	47.3	35.6	9,941	54.9	51.7	35.0	8,010
Total 15-59	56.9	46.3	34.8	10,826	54.7	51.4	34.8	8,830

[1] Percentage who say that HIV can be transmitted by breastfeeding and there are special drugs that a doctor or nurse can give to a pregnant woman infected with the AIDS virus to reduce the risk of transmission to the baby.

Knowledge of mother-to-child transmission and of antiretroviral drugs varies little by age or by marital status, except that those who have never married but have had sex tend to be more knowledgeable than those who have never had sex. Urban residents and those in Central, Kampala, and North Central regions are more knowledgeable than other respondents. Information programmes might want to target residents of West Nile and Northeast regions. There is a steady increase in knowledge of mother-to-child transmission by education and wealth quintile among both women and men.

The percentage of respondents who know that HIV/AIDS can be transmitted from mother to child by breastfeeding has increased since 2000-01 (from 46 to 58 percent among women and from 43 to 55 percent among men).

4.6 Rejection of Misconceptions about AIDS Transmission

In addition to knowing about effective ways to avoid contracting HIV/AIDS, it is also useful to be able to identify incorrect beliefs about AIDS to eliminate misconceptions. Common misconceptions about AIDS include the idea that all HIV-infected people appear ill and the belief that the virus can be transmitted through mosquito or other insect bites, by sharing food with someone who is infected, or by witchcraft or other supernatural means. Respondents were asked about these four misconceptions.

Data shown in Tables 4.5.1 and 4.5.2 indicate that the vast majority of Ugandan adults know that people infected with HIV do not necessarily show signs of infection. Seventy-four percent of women and 84 percent of men know that a healthy-looking person can have the virus that causes AIDS.

Considerably fewer respondents understand that the AIDS virus cannot be transmitted by mosquito bites: 56 percent of women and 58 percent of men know that AIDS cannot be transmitted by mosquito bites. Similarly, 77 percent of women and 80 percent of men know that people cannot get the AIDS virus by sharing food with a person who has AIDS.

Looking at all three beliefs together, 39 percent of women and 46 percent of men have correct knowledge on all these issues. Respondents were also asked if they thought that people could get the AIDS virus because of witchcraft or other supernatural means. The vast majority of Ugandans reject this idea, with 85 percent of women and 88 percent of men saying witchcraft is not a means of transmission.

As with many other indicators of HIV/AIDS knowledge, results on rejection of misperceptions regarding HIV/AIDS is higher among respondents in urban areas and in Central, Kampala, and East Central regions. Educational attainment is correlated with rejection of misperceptions. Although there is a correlation between rejection of misperceptions and the wealth quintile, it is not so strong as it is for other indicators and mostly appears among those in the highest quintile.

There has been a slight decline in the some aspects of basic knowledge about HIV/AIDS over the last four years in Uganda. For example, the proportion who know that it is possible for a healthy-looking person to have the AIDS virus has decreased from 77 percent in 2000-01 to 74 percent in 2004-05 among women and from 88 to 84 percent of men. Similarly, the proportion of men who know that HIV cannot be transmitted by mosquito bites has hardly changed (from 56 percent in 2000-01 to 58 percent in 2004-05), and the proportion of men who say that people cannot get the AIDS virus by sharing food with someone who has AIDS has stayed steady at 80 percent. However, the proportion of women who know that HIV cannot be transmitted by insect bites has increased from 45 percent in 2000-01 to 56 percent in 2004-05 and the proportion who say that people cannot get the AIDS virus by sharing food with someone who has AIDS has increased from 67 to 77 percent of women.

Table 4.5.1: Women

Rejection of common misperceptions regarding HIV/AIDS, Uganda 2004-05

Background characteristic	Percentage of women 15-49 who know that: A healthy-looking person can have the AIDS virus	People cannot get the AIDS virus from mosquito bites	People cannot get AIDS by sharing food with a person who has AIDS	A healthy-looking person can have AIDS and mosquito bites and sharing food cannot transmit AIDS	People cannot get the AIDS virus through witchcraft or supernatural means	Number of women
Age						
15-19	68.2	61.9	76.9	39.0	86.8	2,186
20-24	74.9	57.4	77.4	39.5	85.6	1,933
25-29	77.2	54.8	78.6	40.2	84.9	1,764
30-39	76.4	54.6	76.3	38.4	83.5	2,542
40-49	73.5	51.2	73.7	35.2	81.5	1,516
15-24	71.3	59.8	77.1	39.2	86.2	4,119
Marital status						
Never married	70.8	66.7	80.7	45.0	86.9	2,220
Ever had sex	82.3	64.9	82.6	50.9	90.1	879
Never had sex	63.4	67.9	79.4	41.1	84.7	1,342
Currently married	74.8	53.0	75.6	36.4	83.8	6,358
Formerly married	75.4	54.6	75.1	38.2	84.3	1,362
Residence						
Urban	90.2	67.4	85.9	57.2	92.1	1,508
Rural	71.1	54.3	75.0	35.2	83.2	8,433
Region						
Central	88.6	63.8	82.6	53.5	90.7	1,656
Kampala	96.9	68.3	87.4	62.0	94.6	668
East Central	86.2	57.6	75.9	44.3	88.4	1,555
Eastern	87.4	49.5	74.9	40.2	81.7	857
Northeast	65.0	46.5	71.5	32.4	65.6	829
North Central	67.9	43.4	76.3	28.7	88.1	970
West Nile	58.6	42.9	67.1	22.7	74.2	958
Western	75.6	51.6	71.6	34.6	84.5	1,140
Southwest	40.9	73.1	80.6	26.1	86.2	1,309
Education						
No education	60.7	45.8	66.5	24.8	71.9	2,255
Primary incomplete	71.6	52.0	74.1	32.9	85.1	4,596
Primary complete	82.5	64.5	84.5	47.8	91.1	1,115
Secondary+	90.3	73.6	89.8	62.5	94.4	1,957
Wealth quintile						
Lowest	61.9	49.1	69.8	29.5	74.6	1,610
Second	68.0	51.3	73.7	31.6	81.3	2,038
Middle	70.7	54.1	74.6	32.8	84.7	1,849
Fourth	74.7	56.8	75.9	38.1	85.9	2,000
Highest	89.0	66.4	85.7	55.0	92.8	2,443
Total 15-49	74.0	56.3	76.6	38.6	84.6	9,941
Total 15-59	73.7	55.2	76.0	37.7	84.2	10,826

Table 4.5.2: Men

Rejection of common misperceptions regarding HIV/AIDS, Uganda 2004-05

Background characteristic	Percentage of men 15-49 who know that: A healthy-looking person can have the AIDS virus	People cannot get the AIDS virus from mosquito bites	People cannot get AIDS by sharing food with a person who has AIDS	A healthy-looking person can have AIDS and mosquito bites and sharing food cannot transmit AIDS	People cannot get the AIDS virus through witchcraft or supernatural means	Number of men
Age						
15-19	77.9	61.1	79.2	43.2	87.7	2,070
20-24	88.2	59.9	81.9	49.5	90.9	1,262
25-29	88.0	59.3	82.6	50.5	88.9	1,220
30-39	86.4	55.5	80.0	46.1	87.5	2,116
40-49	84.5	54.7	78.0	44.0	86.5	1,342
15-24	81.8	60.6	80.2	45.6	88.9	3,332
Marital status						
Never married	81.7	62.5	80.7	47.2	88.6	3,140
Ever had sex	87.8	61.2	81.1	49.0	90.6	1,701
Never had sex	74.6	64.1	80.1	45.2	86.3	1,439
Currently married	86.0	56.0	80.1	46.1	88.3	4,237
Formerly married	87.1	50.3	77.9	42.1	84.8	633
Residence						
Urban	94.0	69.5	88.1	61.8	91.1	1,200
Rural	82.7	56.1	78.8	43.5	87.6	6,809
Region						
Central	95.4	59.4	80.5	51.5	91.8	1,451
Kampala	96.7	70.2	87.8	62.4	92.2	547
East Central	90.5	57.9	78.3	49.7	92.6	1,146
Eastern	87.9	54.1	78.2	44.1	88.4	770
Northeast	66.0	52.5	74.8	38.0	72.6	610
North Central	91.5	55.6	84.7	48.8	93.2	795
West Nile	88.2	60.0	84.2	49.4	88.1	735
Western	79.1	54.6	73.1	40.1	77.0	945
Southwest	60.2	60.0	82.5	33.8	91.1	1,012
Education						
No education	67.5	38.9	61.3	25.1	71.3	668
Primary incomplete	81.2	49.0	74.9	35.7	86.8	3,723
Primary complete	85.9	62.0	85.4	49.7	92.0	1,133
Secondary+	93.2	75.1	90.9	66.1	92.9	2,477
Wealth quintile						
Lowest	76.2	50.2	74.8	36.5	81.4	1,209
Second	80.5	54.7	78.3	42.0	86.2	1,628
Middle	81.9	55.2	78.7	42.2	89.2	1,506
Fourth	85.7	57.9	80.4	46.0	90.3	1,669
Highest	93.4	67.9	85.8	58.7	91.2	1,998
Total 15-49	84.4	58.1	80.2	46.2	88.1	8,010
Total 15-59	84.2	57.4	79.7	45.6	87.9	8,830

4.7 COMPREHENSIVE KNOWLEDGE ABOUT HIV/AIDS

An indicator of comprehensive knowledge about HIV/AIDS combines several individual indicators previously discussed. It is the percentage of respondents aged 15-49 who say that: 1) people can reduce the chances of getting the AIDS virus by using a condom every time they have sex, 2) people can reduce the chances of getting the AIDS virus by having sex with just one partner who is not infected and who has no other partners, 3) that people cannot get the AIDS virus from mosquito bites, 4) that people cannot get the AIDS virus from sharing food with a person who has AIDS, and 5) that a healthy-looking person can have the AIDS virus.

As shown in Table 4.6, slightly more than one-fourth of women and one-third of men have such comprehensive knowledge about HIV/AIDS. Sexually active, never-married respondents are more likely than those in other marital status categories to have comprehensive knowledge of HIV/AIDS. The same is true for women and men who live in urban areas, in Kampala, Central, and East Central regions, and those who are better educated and in the higher wealth quintiles.

Table 4.6

Comprehensive knowledge about HIV/AIDS, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49	
	Comprehensive knowledge[1]	Number of women	Comprehensive knowledge[1]	Number of men
Age				
15-19	29.0	2,186	32.5	2,070
20-24	30.1	1,933	39.9	1,262
25-29	30.7	1,764	41.6	1,220
30-39	27.0	2,542	35.4	2,116
40-49	24.2	1,516	32.6	1,342
15-24	29.5	4,119	35.3	3,332
Marital status				
Never married	33.7	2,220	36.5	3,140
Ever had sex	42.6	879	40.2	1,701
Never had sex	27.9	1,342	32.0	1,439
Currently married	26.2	6,358	35.7	4,237
Formerly married	29.0	1,362	34.0	633
Residence				
Urban	46.3	1,508	52.1	1,200
Rural	25.0	8,433	33.0	6,809
Region				
Central	45.6	1,656	44.2	1,451
Kampala	52.5	668	55.4	547
East Central	38.7	1,555	43.6	1,146
Eastern	31.6	857	38.1	770
Northeast	13.2	829	28.4	610
North Central	16.1	970	29.0	795
West Nile	11.6	958	37.6	735
Western	20.4	1,140	24.7	945
Southwest	17.1	1,309	21.9	1,012
Education				
No education	12.4	2,255	16.5	668
Primary incomplete	24.0	4,596	26.3	3,723
Primary complete	37.6	1,115	39.5	1,133
Secondary+	51.1	1,957	53.7	2,477
Wealth quintile				
Lowest	17.3	1,610	26.4	1,209
Second	21.3	2,038	31.5	1,628
Middle	23.9	1,849	31.9	1,506
Fourth	28.5	2,000	34.9	1,669
Highest	44.4	2,443	48.8	1,998
Total 15-49	28.3	9,941	35.8	8,010
Total 15-59	27.3	10,826	35.0	8,830

[1] Percentage who say that people can reduce the risk of getting the AIDS virus by using a condom every time they have sex and by having sex with just one partner who is not infected and who has no other partners, who say that people cannot get the AIDS virus from mosquito bites or from sharing food with a person who has AIDS, and who say that a healthy-looking person can have the AIDS virus.

4.8 PERCEPTIONS ABOUT DISCORDANCE

Data in Chapter 8 indicate a not inconsiderable level of HIV discordance among cohabiting Ugandan couples, that is, a situation in which one is HIV positive and the other HIV negative. Ignorance about how common discordance is leads couples to neglect taking precautions even in cases in which they know or suspect that one of them is infected, because they feel the situation is hopeless.

In the UHSBS, respondents were asked two questions: "If a man has the virus that causes AIDS, does his sexual partner always have the AIDS virus, almost always, or only sometimes?" and "If a woman has the virus that causes AIDS, does her sexual partner always have the AIDS virus, almost always, or only sometimes?" Results are shown in Table 4.7.

Table 4.7

Perceptions about discordance of HIV infection in couples, Uganda 2004-05

Belief	Women 15-49	Men 15-49
Believes if a man has the virus, his sexual partner has the virus:		
Always	75.8	73.3
Almost always	8.5	9.0
Sometimes	7.4	12.8
Don't know/missing	8.3	4.9
Total	100.0	100.0
Believes if a woman has the virus, her sexual partner has the virus:		
Always	76.4	74.2
Almost always	8.3	8.8
Sometimes	7.5	12.4
Don't know/missing	7.8	4.5
Total	100.0	100.0
Number of respondents	9,941	8,010

The data show that three-quarters of both women and men believe that coinfection is inevitable—if one partner is infected, the other always is too. Eight to 9 percent believe that the partner is almost always infected. Only 7-8 percent of women and 12-13 percent of men know that if a person is HIV positive, his or her partner is only sometimes infected.

Interestingly, there are very few differences in the responses of female and male respondents. Moreover, respondents do not see any difference in the likelihood of HIV transmission from men to women and from women to men.

ATTITUDES RELATING TO HIV/AIDS 5

5.1 KEY FINDINGS

- Although Ugandan adults generally have accepting attitudes towards those living with HIV/AIDS, a sizeable minority express discriminatory beliefs.
- Women are slightly less likely than men to express accepting attitudes about people with HIV.
- There is widespread acceptance of the ability of a woman to negotiate safer sex with her husband either by refusing to have sex or in requesting condom use if she knows he has a sexually transmitted infection.
- Six in 10 adults believe children aged 12-14 should be taught about condom use to avoid AIDS.
- More than one in five Ugandan adults believes it is very likely he or she will get HIV.

5.2 INTRODUCTION

This chapter covers issues related to attitudes towards HIV/AIDS. Specifically, it includes indicators of the level of stigma towards people living with HIV/AIDS, as well as findings related to the ability to negotiate safer sex, and attitudes towards teaching youth about condom use.

5.3 HIV/AIDS-RELATED STIGMA

Stigma refers to the fact that, in some societies, people living with HIV/AIDS are viewed as shameful and the disease is perceived to be a result of personal irresponsibility. If not counteracted, such attitudes fuel prejudice against those living with HIV/AIDS, marginalising and excluding individuals. Ultimately such attitudes allow societies to excuse themselves from the responsibility of caring for and looking after those who are infected. More importantly, stigma leads to secrecy and denial that hinders people from seeking counselling and testing for HIV, as well as care and support services. In Uganda, efforts have been made to reduce fear and discrimination towards those living with HIV/AIDS.

To assess the level of stigma, UHSBS respondents who had heard of AIDS were asked four questions related to their attitudes towards those infected by HIV/AIDS. They were asked if they would be willing to care for a relative sick with AIDS in their own households and if they would be willing to buy sugar, fresh vegetables, or other food from a market vendor who had the AIDS virus. Another question assessed whether respondents thought that a female teacher who has the AIDS virus but is not sick should be allowed to continue teaching. A more personal question concerned, if a member of their family got infected with the virus that causes AIDS, whether they would they want it to remain secret or not. Tables 5.1.1 and 5.1.2 show the results for women and men, respectively.

Survey results show that almost nine in ten Ugandans aged 15-49 say they would be willing to care for a relative who is sick with AIDS in their own household. Far fewer women (59 percent) and men (72 percent) say they would buy sugar or fresh vegetables from a vendor if they knew that he/she is HIV positive. About 6 in 10 Ugandans feel that a female teacher who has the AIDS virus but is not sick should be allowed to continue teaching in the school, while 45 percent of women and 53 percent of men say that if a member of their family got infected with the AIDS virus, they would not necessarily want it to remain a secret.

Table 5.1.1: women

Accepting attitudes towards people who are HIV infected, Uganda 2004-05

Background characteristic	Percentage of women aged 15-49 who say they: Would be willing to care for a relative sick with HIV in own home	Would buy sugar or fresh vegetables from market vendor with HIV	Believe an HIV-positive female teacher should be allowed to teach	Would not want HIV-positive status of family member to remain secret	Percentage expressing acceptance on all 4 measures[1]	Number of women who have heard of HIV/AIDS
Age						
15-19	82.2	57.1	59.2	40.0	15.0	2,148
20-24	86.7	60.5	61.6	45.0	17.6	1,908
25-29	88.5	61.8	62.8	47.0	20.9	1,740
30-39	86.9	59.8	61.5	47.0	20.1	2,508
40-49	88.2	58.0	60.9	49.3	20.4	1,497
15-24	84.3	58.7	60.4	42.4	16.3	4,056
Marital status						
Never married	84.6	62.9	64.3	41.0	18.4	2,185
Ever had sex	90.2	69.7	72.3	40.1	21.6	874
Never had sex	80.9	58.4	59.0	41.6	16.3	1,311
Currently married	86.2	57.9	60.0	46.9	18.4	6,268
Formerly married	89.4	60.7	61.7	45.8	20.8	1,348
Residence						
Urban	92.7	76.2	78.6	40.3	24.8	1,505
Rural	85.2	56.4	58.0	46.3	17.6	8,296
Region						
Central	87.9	70.1	69.3	35.7	20.0	1,650
Kampala	94.0	78.3	79.5	32.6	20.3	666
East Central	93.3	62.2	71.2	32.1	15.3	1,555
Eastern	80.1	58.2	57.4	44.5	16.5	848
Northeast	80.0	51.0	51.2	58.5	15.4	760
North Central	79.7	53.6	56.8	81.2	28.2	962
West Nile	75.3	50.5	54.5	48.4	18.5	938
Western	95.1	60.1	62.2	48.3	24.2	1,124
Southwest	85.1	48.6	44.9	42.1	12.1	1,297
Education						
No education	79.8	48.1	47.5	43.0	11.5	2,160
Primary incomplete	85.2	53.7	56.7	47.7	16.7	4,557
Primary complete	89.4	68.0	70.3	44.1	22.4	1,111
Secondary+	94.4	80.3	81.5	43.2	29.1	1,955
Wealth quintile						
Lowest	80.4	49.8	49.7	47.8	13.4	1,544
Second	82.1	52.6	55.0	47.9	16.0	1,990
Middle	86.0	56.0	56.8	48.6	18.1	1,840
Fourth	87.7	59.2	61.5	44.6	18.8	1,990
Highest	92.6	73.8	76.5	40.2	24.6	2,437
Total 15-49	86.3	59.4	61.2	45.4	18.7	9,801
Total 15-59	86.2	59.0	60.8	46.1	18.7	10,671

[1] Say they would be willing to care for a relative sick with AIDS in their own households and would be willing to buy sugar, fresh vegetables, or other food from a market vendor who had the AIDS virus, they think that a female teacher who has the AIDS virus but is not sick should be allowed to continue teaching, and that if a member of their family got infected with the virus that causes AIDS, they would not necessarily want it to remain secret.

Table 5.1.2: men

Accepting attitudes towards people who are HIV infected, Uganda 2004-05

Background characteristic	Percentage of men aged 15-49 who say they: Would be willing to care for a relative sick with HIV in own home	Would buy sugar or fresh vegetables from market vendor with HIV	Believe an HIV-positive female teacher should be allowed to teach	Would not want HIV-positive status of family member to remain secret	Percentage expressing acceptance on all 4 measures[1]	Number of men who have heard of HIV/AIDS
Age						
15-19	83.5	67.3	59.2	46.0	21.4	2,037
20-24	87.7	74.6	69.1	50.8	26.9	1,253
25-29	90.0	74.5	68.0	54.6	30.6	1,213
30-39	88.5	73.6	66.9	56.5	31.6	2,104
40-49	87.8	70.5	64.9	61.0	32.0	1,332
15-24	85.1	70.1	63.0	47.8	23.5	3,290
Marital status						
Never married	85.4	71.5	64.2	47.5	24.6	3,094
Ever had sex	87.7	74.2	66.5	48.3	26.7	1,689
Never had sex	82.7	68.3	61.4	46.5	21.9	1,405
Currently married	88.6	71.8	65.5	57.3	30.5	4,213
Formerly married	86.1	72.9	66.9	55.7	30.6	633
Residence						
Urban	92.3	82.5	76.6	53.9	35.5	1,199
Rural	86.3	69.9	63.0	53.3	26.9	6,740
Region						
Central	92.1	76.9	68.5	42.3	24.1	1,451
Kampala	93.0	86.3	78.6	53.2	35.6	546
East Central	92.2	73.6	67.3	32.2	18.6	1,146
Eastern	74.0	67.9	59.0	53.9	26.5	770
Northeast	67.5	61.8	53.8	76.5	31.4	568
North Central	91.8	65.2	72.3	83.1	43.7	792
West Nile	92.5	76.2	72.5	61.3	35.2	728
Western	90.6	71.6	62.1	51.6	29.0	932
Southwest	81.8	65.0	53.1	52.5	22.3	1,007
Education						
No education	71.8	52.7	44.4	50.9	13.5	628
Primary incomplete	84.2	64.9	57.7	51.5	22.1	3,694
Primary complete	91.4	77.6	69.7	58.9	34.6	1,131
Secondary+	93.7	84.1	79.2	54.3	38.0	2,476
Wealth quintile						
Lowest	79.8	62.3	57.9	55.0	22.7	1,175
Second	85.2	66.9	59.8	58.5	27.7	1,605
Middle	86.3	69.2	60.2	55.9	27.6	1,502
Fourth	88.3	73.5	66.0	47.9	26.2	1,664
Highest	92.8	81.7	76.5	50.9	33.9	1,994
Total 15-49	87.2	71.8	65.1	53.4	28.2	7,939
Total 15-59	86.9	71.0	64.8	54.0	28.0	8,755

[1] Say they would be willing to care for a relative sick with AIDS in their own households and would be willing to buy sugar, fresh vegetables, or other food from a market vendor who had the AIDS virus, they think that a female teacher who has the AIDS virus but is not sick should be allowed to continue teaching, and that if a member of their family got infected with the virus that causes AIDS, they would not necessarily want it to remain secret.

A composite indicator combines all four of these attitudes. As shown in the last column in Tables 5.1.1 and 5.1.2, only 19 percent of women and 28 percent of men express positive attitudes on all four indicators. It is also interesting to note that for all four indicators, women are less likely than men to express accepting attitudes towards people with HIV/AIDS.

The composite measure of accepting attitudes shows some differences across background characteristics. For example, urban women and men are somewhat more likely than rural respondents to express accepting attitudes on all four issues examined. Education is positively related to accepting attitudes. However, the wealth quintile is not. It is only among those in the highest wealth quintile that the proportion reporting accepting attitudes increases. It is also interesting that, although one might consider the capital city to encourage the most open attitudes, other regions appear to be more accepting of those with HIV/AIDS. For example, women in North Central and Western regions and men in North Central are most likely to have accepting attitudes on all four issues.

5.4 Attitudes Towards Negotiating Safer Sex

Knowledge about HIV transmission and ways to prevent it are less useful if people feel powerless to negotiate safer sex with their partners. To gauge attitudes towards safer sex, respondents in the UHSBS were asked if they think a wife is justified in refusing to have sex with her husband if she knows he has a disease that can be transmitted through sexual contact. They were also asked if they think that a woman in the same circumstances is justified in asking her husband to use a condom.

As shown in Table 5.2 and Figure 5.1, 72 percent of Ugandan women and 82 percent of men feel that a wife is justified in refusing to have sex with her husband if she knows he has a sexually transmitted disease, while 71 percent of women and 83 percent of men believe that a wife is justified in asking that they use a condom if she knows that her husband has a sexually transmitted infection. Nearly 90 percent of women and men agree with at least one statement, indicating widespread acceptance of the ability of women to negotiate safer sex with their husbands. Women are somewhat less likely than men to feel that a wife is justified in negotiating safer sex.

Figure 5.1 **Attitudes Towards Negotiating Safer Sex among Women and Men 15-49**

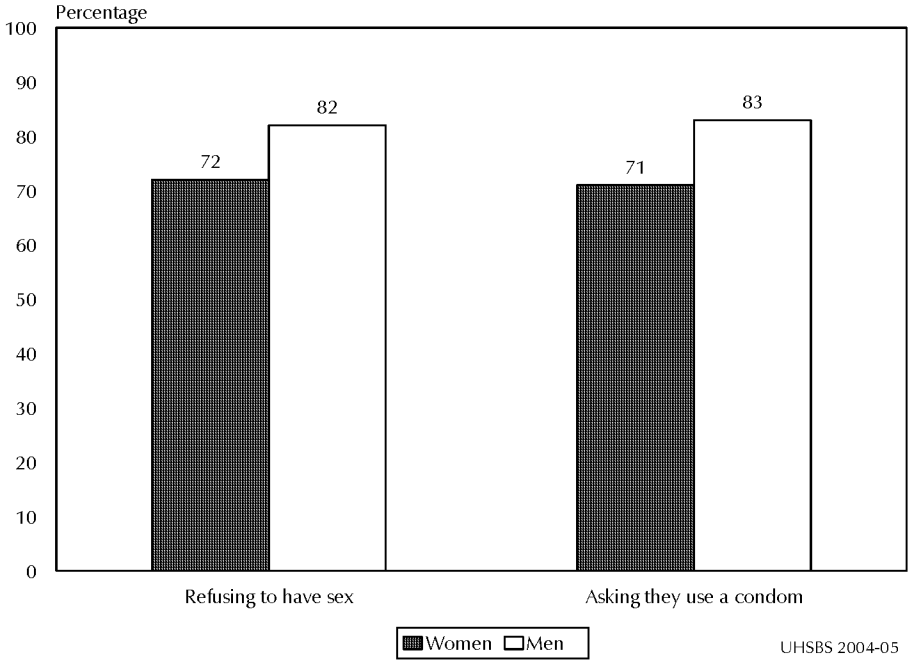


Table 5.2

Attitudes towards negotiating safer sex, Uganda 2004-05

Background characteristic	Percentage of respondents aged 15-49 who say that when a wife knows her husband has a sexually transmitted infection, she is justified in:							
	Women				Men			
	Refusing to have sex	Asking that they use a condom	Refusing sex or asking to use a condom	Number of women	Refusing to have sex	Asking that they use a condom	Refusing sex or asking to use a condom	Number of men
Age								
15-19	70.8	71.2	83.6	2,186	82.2	83.5	90.2	2,070
20-24	73.5	74.5	86.7	1,933	83.1	85.5	92.3	1,262
25-29	72.7	72.8	86.2	1,764	82.5	85.2	91.5	1,220
30-39	72.0	69.1	83.7	2,542	82.0	83.1	90.9	2,116
40-49	71.3	64.1	83.0	1,516	82.5	79.9	88.9	1,342
Marital status								
Never married	72.4	71.8	83.8	2,220	83.0	83.8	90.9	3,140
Ever had sex	78.3	81.3	91.4	879	85.7	87.7	93.1	1,701
Never had sex	68.5	65.5	78.8	1,342	79.7	79.2	88.2	1,439
Currently married	71.3	70.0	84.7	6,358	81.9	83.5	90.6	4,237
Formerly married	75.0	70.5	85.5	1,362	82.5	80.3	90.4	633
Residence								
Urban	83.6	85.0	94.7	1,508	85.7	86.1	94.6	1,200
Rural	70.0	67.9	82.8	8,433	81.8	82.9	90.0	6,809
Education								
No education	63.8	57.6	75.1	2,255	65.7	66.0	72.4	668
Primary incomplete	70.7	69.9	84.8	4,596	80.4	82.3	90.0	3,723
Primary complete	78.3	78.7	89.7	1,115	85.1	86.0	92.8	1,133
Secondary+	81.6	82.4	92.6	1,957	88.5	88.5	95.7	2,477
Wealth quintile								
Lowest	64.5	58.2	76.0	1,610	75.3	76.5	84.1	1,209
Second	68.0	65.6	81.3	2,038	80.5	79.1	88.1	1,628
Middle	71.0	68.3	84.2	1,849	83.5	84.4	92.0	1,506
Fourth	72.2	72.8	85.3	2,000	83.7	86.4	91.7	1,669
Highest	81.2	82.5	92.7	2,443	86.2	87.7	94.9	1,998
Total 15-49	72.1	70.5	84.6	9,941	82.4	83.4	90.7	8,010
Total 15-59	71.3	69.2	83.8	10,826	82.3	82.7	90.4	8,830

5.5 Attitudes Towards Educating Youth about Condom Use

Condom use is one of the main strategies for combating the spread of AIDS. However, educating young people about using condoms is sometimes controversial, with some saying it promotes early sexual experimentation. To gauge attitudes towards condom education, UHSBS respondents were asked if they thought that children aged 12-14 should be taught about using a condom to avoid AIDS. Results are tabulated for respondents aged 18-49 in Table 5.3.

The data show that roughly 6 in 10 adults agree that children aged 12-14 should be taught about using a condom to avoid AIDS. A higher proportion of men than women believe that children should be taught about condom use. Differences by background characteristics are not large. Those in their 40s are less likely to support condom education for youth, as are those with no education, and those in the lowest wealth quintiles.

Table 5.3

Support of education for youth about condom use to prevent AIDS, Uganda 2004-05

Background characteristic	Percentage of those aged 18-49 who agree that children aged 12-14 should be taught about using a condom to avoid AIDS			
	Women	Number of women	Men	Number of men
Age				
18-19	61.3	821	65.5	770
20-24	62.3	1,933	70.1	1,262
25-29	59.6	1,764	66.1	1,220
30-39	54.4	2,542	62.4	2,116
40-49	49.9	1,516	55.1	1,342
Marital status				
Never married	57.5	976	65.6	1,853
Ever married	57.1	7,600	62.6	4,856
Residence				
Urban	61.4	1,277	65.5	1,028
Rural	56.4	7,299	63.0	5,682
Region				
Central	65.2	1,375	70.6	1,220
Kampala	57.0	573	67.9	470
East Central	67.8	1,322	68.9	937
Eastern	63.7	738	71.3	643
Northeast	43.9	750	49.9	530
North Central	71.2	879	49.0	708
West Nile	41.7	817	57.2	607
Western	58.6	1,000	65.0	795
Southwest	38.1	1,123	62.0	800
Education				
No education	43.8	2,195	49.8	634
Primary incomplete	61.7	3,852	65.7	2,943
Primary complete	61.9	942	63.5	984
Secondary+	61.6	1,568	64.2	2,143
Wealth quintile				
Lowest	46.6	1,394	58.1	1,023
Second	52.9	1,753	59.1	1,373
Middle	58.9	1,642	64.0	1,248
Fourth	61.7	1,720	66.8	1,402
Highest	62.5	2,067	67.0	1,663
Total 18-49	57.1	8,576	63.4	6,710
Total 18-59	55.9	9,462	62.3	7,530

5.6 Perceived Risk of Getting HIV

To assess people's perceptions of their risk of getting HIV, respondents were asked whether the chance they might get the virus that causes AIDS was very likely, somewhat likely, not likely, or no chance at all. Tables 5.4.1 and 5.4.2 show the results for women and men, respectively.

More than 1 in 5 Ugandan adults—21 percent of women and 23 percent of men—perceive themselves at high risk of getting infected with the virus that causes AIDS, while slightly more than one-third perceive their risk as moderate. About one-fifth of respondents think they are not likely to get HIV, while 12 percent of women and men say they have no risk of getting AIDS. More than one in ten respondents said they were not sure of their chances of getting HIV. Women and men perceive roughly equal risks of getting infected with HIV.

Younger and older respondents are less likely to believe they are at high risk of getting the AIDS virus than respondents in their twenties and thirties. Similarly, those who have never married are less likely to think they are at high risk of getting the AIDS virus. Urban respondents, especially women, are more likely than rural respondents to say they are very likely to get HIV.

Table 5.4.1: women

Perceived chance of getting the HIV virus, Uganda 2004-05

Background characteristic	Among women aged 15-49, perceived chances of getting the AIDS virus (percent distribution)							
	Very likely (high risk)	Somewhat likely (moderate risk)	Not likely (low risk)	No chance at all	Already has HIV or AIDS	Not sure/ depends/ missing	Total	Number of women
Age								
15-19	14.4	25.2	24.0	26.0	0.0	10.4	100.0	2,186
20-24	22.0	39.8	18.2	7.5	0.1	12.4	100.0	1,933
25-29	23.8	43.1	14.8	5.2	0.5	12.6	100.0	1,764
30-34	25.0	38.0	15.4	6.0	0.5	15.1	100.0	1,457
35-39	23.7	37.9	15.1	7.8	1.1	14.5	100.0	1,085
40-44	21.3	32.7	18.9	9.3	1.1	16.7	100.0	870
45-49	19.3	31.0	18.5	15.3	1.1	14.9	100.0	647
Marital status								
Never married	16.2	24.4	23.5	27.3	0.0	8.7	100.0	2,220
Married	22.0	39.8	16.6	6.7	0.3	14.5	100.0	6,358
Widowed	23.8	28.6	16.6	10.0	4.4	16.6	100.0	581
Divorced	24.2	37.3	17.0	8.7	0.6	12.3	100.0	781
Residence								
Urban	29.2	35.7	14.4	12.2	1.1	7.4	100.0	1,508
Rural	19.6	35.5	18.9	11.6	0.4	14.2	100.0	8,433
Region								
Central	26.1	41.1	14.2	14.3	0.4	3.8	100.0	1,656
Kampala	36.0	32.8	14.7	12.6	1.0	2.7	100.0	668
East Central	32.3	40.5	17.5	7.3	0.5	1.9	100.0	1,555
Eastern	12.0	29.6	20.1	9.2	0.3	28.8	100.0	857
Northeast	14.4	20.0	28.6	2.3	0.2	34.6	100.0	829
North Central	9.7	51.3	5.1	9.9	0.9	23.1	100.0	970
West Nile	8.8	27.8	17.7	19.0	0.5	26.2	100.0	958
Western	16.3	27.3	24.7	18.5	0.3	12.9	100.0	1,140
Southwest	25.0	38.7	22.4	10.5	0.3	3.2	100.0	1,309
Education								
No education	19.1	32.5	18.0	10.1	0.7	19.5	100.0	2,255
Primary incomplete	18.8	35.3	19.0	12.1	0.4	14.4	100.0	4,596
Primary complete	28.1	36.3	14.8	11.3	0.9	8.8	100.0	1,115
Secondary+	24.5	38.8	18.3	12.7	0.2	5.5	100.0	1,957
Wealth quintile								
Lowest	16.2	28.7	20.4	12.4	0.3	22.0	100.0	1,610
Second	17.2	34.0	19.0	12.6	0.5	16.6	100.0	2,038
Middle	18.2	39.1	18.5	11.4	0.2	12.5	100.0	1,849
Fourth	21.9	37.8	17.6	11.0	0.5	11.2	100.0	2,000
Highest	28.7	36.6	16.3	11.1	0.7	6.5	100.0	2,443
Total 15-49	21.0	35.5	18.2	11.7	0.5	13.2	100.0	9,941
Total 15-59	20.3	34.6	18.6	12.7	0.5	13.3	100.0	10,826

The distribution of respondents' perceptions of the risk of getting AIDS by region shows that the largest proportions of those who think they are at high risk are in Kampala, East Central, and Central regions, and among men in Southwest. However, in some regions, large proportions of respondents say they are unable to assess their risk of getting infected. The proportion of respondents who think they are at high risk of becoming infected with the AIDS virus increases with education and wealth quintile.

Table 5.4.2: men

Perceived chance of getting the HIV virus, Uganda 2004-05

Background characteristic	Among men aged 15-49, perceived chances of getting the AIDS virus (percent distribution)							
	Very likely (high risk)	Somewhat likely (moderate risk)	Not likely (low risk)	No chance at all	Already has HIV or AIDS	Not sure/ depends/ missing	Total	Number of men
Age								
15-19	19.7	28.0	20.6	22.0	0.0	9.6	100.0	2,070
20-24	23.8	37.4	17.3	10.3	0.0	11.2	100.0	1,262
25-29	25.6	38.6	14.6	8.0	0.1	13.1	100.0	1,220
30-34	26.2	38.5	15.0	6.6	0.2	13.5	100.0	1,200
35-39	26.4	36.6	14.8	7.9	0.5	14.0	100.0	916
40-44	22.9	35.7	15.3	9.8	0.8	15.6	100.0	788
45-49	20.9	31.7	18.5	12.9	1.0	15.1	100.0	554
Marital status								
Never married	21.5	31.3	18.9	18.6	0.0	9.7	100.0	3,140
Married	23.9	36.8	15.9	8.4	0.3	14.7	100.0	4,237
Widowed	30.1	35.5	11.9	3.6	6.9	12.0	100.0	100
Divorced	28.9	37.4	15.2	7.9	0.0	10.6	100.0	532
Residence								
Urban	26.9	42.3	15.6	8.2	0.3	6.5	100.0	1,200
Rural	22.8	33.3	17.2	13.0	0.2	13.5	100.0	6,809
Region								
Central	31.9	47.0	11.0	8.9	0.1	1.0	100.0	1,451
Kampala	27.0	47.7	16.5	7.3	0.0	1.5	100.0	547
East Central	41.1	32.0	13.9	9.3	0.4	3.2	100.0	1,146
Eastern	11.6	36.6	22.5	12.1	0.6	16.6	100.0	770
Northeast	2.6	32.8	28.1	12.2	0.0	24.2	100.0	610
North Central	10.2	24.2	12.0	11.2	0.1	42.2	100.0	795
West Nile	2.0	29.7	23.5	15.7	0.3	28.8	100.0	735
Western	12.3	24.5	26.1	25.8	0.6	10.7	100.0	945
Southwest	46.7	33.9	9.0	9.0	0.1	1.2	100.0	1,012
Education								
No education	23.1	23.6	20.2	12.2	0.2	20.6	100.0	668
Primary incomplete	22.0	34.0	17.2	13.9	0.3	12.7	100.0	3,723
Primary complete	23.0	34.8	15.3	11.4	0.1	15.3	100.0	1,133
Secondary+	25.9	38.6	16.5	10.3	0.3	8.5	100.0	2,477
Wealth quintile								
Lowest	15.7	28.9	19.9	14.1	0.2	21.1	100.0	1,209
Second	20.0	28.9	18.9	14.3	0.1	17.7	100.0	1,628
Middle	23.2	32.5	17.1	13.7	0.3	13.2	100.0	1,506
Fourth	24.4	38.5	16.7	11.2	0.3	8.9	100.0	1,669
Highest	30.1	41.2	13.8	9.3	0.3	5.3	100.0	1,998
Total 15-49	23.4	34.7	17.0	12.3	0.3	12.4	100.0	8,010
Total 15-59	23.1	34.3	17.1	12.6	0.3	12.6	100.0	8,830

HIV/AIDS-RELATED BEHAVIOUR 6

6.1 KEY FINDINGS

- Since 2000-01, the proportion of women aged 15-19 who have never had sex has increased from 48 to 54 percent, and the proportion of men aged 15-19 who never had sex decreased from 61 to 58 percent.
- There has been an increase in multiple partnering. The proportion of sexually active respondents who reported having had two or more sexual partners in the previous 12 months increased from 2 to 4 percent between 2000-01 and 2004-05 for women and from 25 to 29 percent for men.
- Fifteen percent of women and 37 percent of men aged 15-49 who were sexually active in the 12 months preceding the survey engaged in sex with a nonmarital, noncohabiting partner.
- Thirteen percent of women and 11 percent of men aged 15-49 have ever been tested for HIV and received their results.

6.2 INTRODUCTION

This chapter presents data on sexual behaviours related to the spread of HIV/AIDS and other sexually transmitted infections (STIs). These indicators of sexual behaviours include age at first sex and number of sexual partners. Behaviours such as sex with nonmarital, noncohabitating partners, and paying or receiving money to have sex are considered high-risk sexual behaviours. This chapter also includes respondent reports of symptoms of STIs, seeking treatment for STIs, and the extent of voluntary counselling and testing (VCT) for HIV.

6.3 AGE AT FIRST SEXUAL INTERCOURSE

Sexual intercourse is the most common mode of HIV transmission in Uganda. Looking at age at first sex is one way to understand when individuals are first exposed to the risk of infection with the virus. Table 6.1 shows median age at first sex and the percentage of respondents who had sex by specific ages.

One in five women aged 20-49 had sex by age 15, while two-thirds had sex before age 18. The percentage of women who had sex by age 15 has decreased from 22 percent among women now aged 45-49 to 12 percent of women aged 15-19. The median age at first sex is 17.1 years for women in the 20-24 age group compared with 16.6 to 16.7 years for older women, implying a recent increase in age at first sex.

Among men in the 20-44 age groups, the percentage who had sex by age 15 ranges from 11 to 12 percent. However, among men aged 15-19, 16 percent had sex by age 15. Although there is now a larger group of young men initiating sex at a very early age than women, a lower proportion of men 20-24 initiate sex by ages 18 and 20 than women. Thus, the data show that in general men still start sexual activity later than women.

Comparing the 2004-05 UHSBS data with that from previous surveys shows a steady increase over time in the proportion of women aged 15-19 who have never had sex, from 38 percent in 1995 to 48 percent in 2000-01 and to 54 percent in 2004-05. The proportion of men aged 15-19 who have never had sex varies from 52 percent in 1995 to 61 percent in 2000-01 and to 58 percent in 2004-05. The median age at first sex among those aged 20-24 has increased slightly among women since 2000-01, from 16.7 to 17.1 years, while it has declined slightly among men, from 18.8 to 18.3 years.

Table 6.1

Age at first sexual intercourse, Uganda 2004-05

Current age	Percentage who had first sexual intercourse by exact age: 15	18	20	22	25	Percentage who never had intercourse	Number of individuals	Median age at first intercourse
				WOMEN				
15-19	12.2	na	na	na	na	54.4	2,186	a
20-24	17.0	63.6	87.1	na	na	6.5	1,933	17.1
25-29	18.7	67.5	87.4	95.2	98.0	1.1	1,764	16.7
30-34	21.1	68.6	89.3	95.1	98.4	0.3	1,457	16.6
35-39	22.6	66.0	87.2	94.4	98.4	0.1	1,085	16.6
40-44	20.6	65.3	87.0	95.1	97.3	0.0	870	16.7
45-49	22.0	66.6	87.0	93.6	97.3	0.2	647	16.6
20-49	19.8	66.2	87.6	na	na	2.0	7,755	16.8
				MEN				
15-19	16.3	na	na	na	na	57.8	2,070	a
20-24	10.8	45.0	71.6	na	na	14.9	1,262	18.3
25-29	11.5	44.9	69.8	84.7	94.5	2.8	1,220	18.3
30-34	11.9	45.6	70.7	85.3	93.9	0.7	1,200	18.3
35-39	10.6	42.0	67.6	83.5	90.9	0.3	916	18.5
40-44	11.5	41.7	67.4	85.2	92.1	0.6	788	18.5
45-49	9.4	40.1	68.5	86.3	93.1	0.7	554	18.5
20-49	11.1	43.8	69.6	na	na	4.1	5,940	18.4

[a] Omitted because less than 50 percent of respondents had had sex before the start of the age group
na = Not applicable

6.4 RECENT SEXUAL ACTIVITY

Table 6.2 presents the percent distribution of women and men by timing of last sex, according to their background characteristics. Fourteen percent of women aged 15-49 and 18 percent of men aged 15-49 have never had sex. Among women, 22 percent had sex in the past year and 12 percent had their last sexual encounter one or more years ago. Among men, 18 percent had sex in the past year while 12 percent last had sex more than one year ago. Slightly more than half of men and women reported sexual activity in the four weeks preceding the survey.

Among women, the level of recent sexual activity increases to its highest level in the 25-29 age group and then declines. In the younger age groups, recent sexual activity among men is lower than that of women. Men and women in the 25-29 age group have similar levels of recent sexual activity (69 percent). Recent sexual activity then continues to increase to 80 percent among men in the 30-34 age group before starting a gradual decline. Women and men who are currently married are most likely to have recent sexual activity. Three in four currently married women and 85 percent of currently married men had sex in the four weeks preceding the survey. Among respondents who have never married, recent sexual activity is more prevalent among men (11 percent) than among women (8 percent).

Rural women and men are more likely to have had sex in the four weeks preceding the survey than urban respondents. Women and men with more education are less likely than those with less education to have had sex in the past four weeks, which may be related to the fact that better-educated respondents tend to be younger and not yet married.

Table 6.2

Recent sexual activity, Uganda 2004-05

Background characteristic	Women 15-49					Men 15-49				
	Percent distribution by timing of last sexual intercourse[1]				Number of women	Percent distribution by timing of last sexual intercourse[1]				Number of men
	In the past 4 weeks	Within 1 year	One or more years	Never had sexual intercourse		In the past 4 weeks	Within 1 year	One or more years	Never had sexual intercourse	
Age										
15-19	19.7	17.6	8.1	54.4	2,186	9.1	16.4	16.4	57.8	2,070
20-24	59.4	25.4	8.5	6.5	1,933	39.6	26.9	18.3	14.9	1,262
25-29	69.4	21.7	7.7	1.1	1,764	68.6	20.6	7.8	2.8	1,220
30-34	64.2	24.1	11.4	0.3	1,457	80.2	13.3	5.4	0.7	1,200
35-39	62.5	22.6	14.7	0.1	1,085	76.3	17.3	6.0	0.3	916
40-44	59.2	18.4	22.0	0.0	870	75.8	14.5	9.0	0.6	788
45-49	47.2	19.2	33.4	0.2	647	72.2	14.6	12.1	0.7	554
15-24	38.4	21.3	8.3	31.9	4,119	20.6	20.4	17.1	41.6	3,332
Marital status										
Never married	7.6	18.8	13.1	60.4	2,220	11.4	21.3	21.3	45.8	3,140
Currently married	76.4	19.8	3.6	0.0	6,358	85.4	12.9	1.4	0.0	4,237
Formerly married	15.3	33.9	50.6	0.0	1,362	32.4	36.4	31.0	0.0	633
Residence										
Urban	44.5	23.4	16.5	15.5	1,508	44.2	22.9	15.4	17.0	1,200
Rural	54.2	21.2	11.4	13.1	8,433	53.6	17.2	10.9	18.1	6,809
Region										
Central	52.8	21.8	11.8	13.2	1,656	47.6	20.0	14.4	17.9	1,451
Kampala	43.2	23.7	17.5	15.4	668	40.8	25.4	13.9	19.7	547
East Central	53.0	22.9	12.5	11.6	1,555	55.1	17.1	11.1	16.7	1,146
Eastern	59.5	21.2	8.2	10.6	857	55.4	22.4	9.9	11.8	770
Northeast	50.4	26.1	11.5	11.9	829	54.7	19.1	9.5	15.5	610
North Central	55.3	24.8	12.3	7.6	970	60.3	19.4	9.5	10.3	795
West Nile	41.5	24.2	17.0	17.3	958	45.6	19.9	12.2	22.3	735
Western	61.4	17.1	7.8	13.5	1,140	56.0	15.1	10.1	18.6	945
Southwest	52.7	14.9	12.7	19.6	1,309	52.7	8.8	11.6	26.9	1,012
Education										
No education	60.4	21.7	14.5	3.4	2,255	68.1	14.5	8.7	8.4	668
Primary incomp.	54.1	21.5	10.1	14.2	4,596	52.8	17.2	10.3	19.5	3,723
Primary compl.	51.4	20.9	13.8	13.8	1,115	58.2	18.1	10.1	13.5	1,133
Secondary+	41.2	21.6	13.5	23.5	1,957	44.4	20.2	14.8	20.2	2,477
Total 15-49	52.7	21.5	12.2	13.5	9,941	52.2	18.0	11.5	18.0	8,010
Total 15-59	50.9	20.6	15.9	12.4	10,826	53.9	17.8	11.8	16.3	8,830

[1] Percentages may not add to 100 due to a small number with missing information.

6.5 MULTIPLE SEXUAL PARTNERS

Women and men interviewed in the 2004-05 UHSBS were asked questions about the number of partners with whom they had had sex in the 12 months preceding the survey, the type of relationship they had with these partners, and the number of sexual partners in their whole life.

More than seven in ten respondents reported that they had had sex in the 12 months preceding the survey. Among respondents who were sexually active in the 12 months preceding the survey, only 4 percent of women reported having had more than one sexual partner, compared with 29 percent of men (Tables 6.3.1 and 6.3.2). Sexually active young women aged 15-19 are more likely to report having multiple partners in the previous year (8 percent) than women in other age groups, while there is little difference in multiple partnerships by age group among men. Women who have had sex in the past 12 months and who are formerly married or never married are more likely to have had multiple partners in

the past year than those who are currently married. Among men, those who have never married are least likely to have had multiple partners in the past year, while the formerly married are most likely.

Sexually active women and men in urban areas are slightly more likely to have had more than one partner in the past 12 months than those in rural areas. The results for education show that women and men who have secondary education or higher are more likely to have multiple partners than those with lower levels of education. Among sexually active men, the likelihood of having multiple partners in the past 12 months increases with each wealth quintile. Among sexually active women, those in the highest wealth quintile are most likely to have had sex with more than one person in the past 12 months, but there is no clear pattern among women in the lower wealth quintiles.

Table 6.3.1

Multiple sex partnerships among women, Uganda 2004-05

Background characteristic	Among all women 15-49		Among women who had sex in the past 12 months		Among women who ever had sex	
	Percentage who had sex in the past 12 months	Number of women	Percentage who had 2+ partners in the past 12 months	Number of women who had sex in the past 12 months	Mean number of lifetime sexual partners	Number of women who ever had sex
Age						
15-19	37.3	2,186	7.6	816	1.7	996
20-24	84.8	1,933	3.8	1,639	1.9	1,807
25-29	91.2	1,764	3.2	1,609	2.2	1,745
30-39	86.9	2,542	3.1	2,208	2.4	2,536
40-49	72.8	1,516	3.3	1,105	2.7	1,515
15-24	59.6	4,119	5.1	2,455	1.8	2,803
Marital status						
Never married	26.4	2,220	7.5	586	1.8	879
Currently married	96.2	6,358	2.6	6,119	2.2	6,358
Formerly married	49.3	1,362	11.3	671	2.9	1,362
Residence						
Urban	67.9	1,508	5.8	1,024	2.7	1,274
Rural	75.3	8,433	3.5	6,353	2.2	7,325
Region						
Central	74.6	1,656	6.7	1,235	2.7	1,437
Kampala	67.0	668	7.3	448	2.7	566
East Central	75.9	1,555	5.8	1,181	2.7	1,374
Eastern	80.7	857	4.7	691	2.9	766
Northeast	76.5	829	1.8	634	1.8	730
North Central	80.1	970	1.5	777	1.9	896
West Nile	65.7	958	1.6	630	1.7	793
Western	78.7	1,140	1.8	897	2.2	986
Southwest	67.6	1,309	1.8	884	1.5	1,052
Education						
No education	82.1	2,255	2.5	1,851	1.9	2,180
Primary incomplete	75.6	4,596	4.2	3,474	2.4	3,944
Primary complete	72.4	1,115	3.2	807	2.4	961
Secondary+	62.8	1,957	5.1	1,229	2.4	1,496
Wealth quintile						
Lowest	73.3	1,610	3.5	1,180	2.0	1,389
Second	73.4	2,038	3.4	1,496	2.1	1,742
Middle	78.1	1,849	3.0	1,445	2.2	1,650
Fourth	75.5	2,000	3.7	1,511	2.3	1,732
Highest	71.4	2,443	5.1	1,744	2.6	2,086
Total 15-49	74.2	9,941	3.8	7,376	2.2	8,599
Total 15-59	71.6	10,826	3.7	7,748	2.3	9,483

As for the mean number of lifetime sexual partners, women reported a mean of 2.2, compared with 6.7 for men. As might be expected, the mean number of partners increases with age. Mean number of lifetime sexual partners is also higher in urban areas. Women with no education have a lower number of partners than all other education levels, but there is no pattern in number of lifetime partners among men by education.

There appears to be a slight trend towards an increase in multiple partnering over the past four years. The proportion of women who had sex in the 12 months preceding the survey and who reported having more than one partner in that time period increased from 2 percent in 2000-01 to 4 percent in 2004-05. The proportion of sexually active men reporting multiple partners rose from 25 to 29 percent.

Table 6.3.2

Multiple sex partnerships among men, Uganda 2004-05

Background characteristic	Among all men 15-49		Among men who had sex in the past 12 months		Among men who ever had sex	
	Percentage who had sex in the past 12 months	Number of men	Percentage who had 2+ partners in the past 12 months	Number of men who had sex in the past 12 months	Mean number of lifetime sexual partners	Number of men who ever had sex
Age						
15-19	25.5	2,070	21.3	528	2.8	873
20-24	66.5	1,262	32.6	840	4.6	1,073
25-29	89.3	1,220	29.2	1,089	5.5	1,186
30-39	93.5	2,116	31.6	1,980	7.5	2,105
40-49	88.8	1,342	26.9	1,192	10.6	1,333
15-24	41.1	3,332	28.3	1,368	3.8	1,947
Marital status						
Never married	32.6	3,140	25.8	1,025	3.8	1,701
Currently married	98.4	4,237	29.8	4,168	7.4	4,237
Formerly married	68.8	633	32.5	435	9.3	633
Residence						
Urban	67.1	1,200	34.4	806	7.3	996
Rural	70.8	6,809	28.5	4,822	6.6	5,575
Region						
Central	67.6	1,451	38.0	980	7.8	1,191
Kampala	66.2	547	34.6	362	7.1	439
East Central	72.2	1,146	39.4	827	7.9	954
Eastern	77.8	770	36.5	599	7.8	679
Northeast	73.8	610	13.8	450	4.0	515
North Central	79.6	795	24.3	633	6.0	713
West Nile	65.5	735	27.7	482	5.2	571
Western	71.2	945	21.7	673	6.8	769
Southwest	61.5	1,012	18.0	622	5.5	740
Education						
No education	82.5	668	23.2	551	6.4	612
Primary incomplete	70.0	3,723	29.7	2,605	7.0	2,995
Primary complete	76.3	1,133	27.6	864	6.6	980
Secondary+	64.6	2,477	31.8	1,601	6.3	1,976
Wealth quintile						
Lowest	71.8	1,209	23.1	867	5.5	990
Second	69.1	1,628	25.0	1,126	6.0	1,317
Middle	73.1	1,506	28.4	1,101	7.3	1,261
Fourth	71.7	1,669	31.5	1,196	7.1	1,387
Highest	66.9	1,998	35.7	1,338	7.1	1,617
Total 15-49	70.3	8,010	29.3	5,628	6.7	6,571
Total 15-59	71.7	8,830	28.5	6,330	7.2	7,390

6.6 Condom Use at Last Sex and Reasons for Non-Use

Respondents who had sex in the past 12 months were asked whether they used a condom at last sex. Table 6.4 shows that men (16 percent) were more likely to have used a condom than women (9 percent). Respondents aged 15-19 were by far the most likely age group to have used a condom at last sex (27 percent of women and 47 percent of men).

As might be expected, never-married respondents were most likely to have used a condom at last sex (53 percent among women and 55 percent among men), while currently married respondents were least likely (4 and 5 percent, respectively). Respondents in urban areas were roughly three times more likely than those in rural areas to have used a condom at last sex. Kampala, Central, and East Central regions have much higher rates of condom use at last sex than other regions.

Condom use at last sex also varies by education status and wealth. The greatest differences are seen between the highest category and all other categories. One-fourth of respondents with secondary education or higher used a condom at last sex, compared with only 3 to 6 percent of those with no education. Similarly, the proportion of those in the highest wealth quintile who used a condom at last sex is at least double the proportion in the next highest quintile.

Table 6.4

Condom use at last sex, Uganda 2004-05

Background characteristic	Among those who had sex in the 12 months preceding the survey, percentage who used a condom at most recent sex			
	Women 15-49		Men 15-49	
	Percentage	Number of women	Percentage	Number of men
Age				
15-19	26.7	816	46.5	528
20-24	9.2	1,639	32.8	840
25-29	8.3	1,609	17.3	1,089
30-34	5.7	1,285	7.0	1,122
35-39	5.7	923	6.5	858
40-44	3.5	675	4.9	711
45-49	4.4	430	5.3	480
Marital status				
Never married	52.7	586	55.2	1,025
Currently married	3.5	6,119	4.8	4,168
Widowed	25.1	222	24.1	55
Divorced/separated	20.1	449	32.2	380
Residence				
Urban	21.9	1,024	34.2	806
Rural	7.0	6,353	13.0	4,822
Region				
Central	13.4	1,235	25.9	980
Kampala	26.1	448	40.6	362
East Central	12.7	1,181	17.2	827
Eastern	7.4	691	17.3	599
Northeast	4.6	634	6.8	450
North Central	5.2	777	9.1	633
West Nile	5.6	630	11.8	482
Western	6.2	897	11.0	673
Southwest	3.0	884	6.1	622
Education				
No education	3.0	1,851	5.9	551
Primary incomplete	6.5	3,474	12.4	2,605
Primary complete	9.2	807	12.1	864
Secondary+	25.6	1,229	27.7	1,601
Wealth quintile				
Lowest	5.0	1,180	8.2	867
Second	6.0	1,496	11.2	1,126
Middle	5.1	1,445	11.3	1,101
Fourth	7.6	1,511	15.0	1,196
Highest	19.1	1,744	30.0	1,338
Total 15-49	9.1	7,376	16.1	5,628
Total 15-59	8.7	7,748	14.7	6,330

Reasons for not using a condom at last sex differ between men and women (Table 6.5). Almost three-quarters of men said they trusted their partners did not have a disease. This is the predominant reason given by men for not using a condom. By comparison, only 40 percent of women cited trust that their partners did not have a disease as a reason for not using a condom. Women gave a wider variety of reasons for not using a condom than men. Almost one-quarter said they did not use a condom because they do not like them (compared with only 7 percent of men); 16 percent of women said their partner refused to use a condom (compared with 2 percent of men); and 15 percent said they had no knowledge of condoms (compared with 7 percent of men).

Table 6.5

Reasons for not using a condom at last sex, Uganda 2004-05

	Among those having sex in the 12 months preceding the survey and did not use a condom at last sex					
	Women 15-49			Men 15-49		
Reason for nonuse	All women	Last sex with husband/ live-in partner	Last sex with non-cohabiting partner	All men	Last sex with wife/ live-in partner	Last sex with non-cohabiting partner
No knowledge of condoms	15.2	15.5	11.4	7.1	6.8	9.3
No knowledge of condom source	7.5	7.7	4.8	2.7	2.6	3.9
Condom source not accessible	4.2	4.1	5.4	4.7	3.4	13.3
Did not have condom at the time	9.1	8.6	15.1	9.6	5.8	34.0
Cost too much	0.6	0.6	0.5	1.4	0.9	4.6
Too messy/ inconvenient	3.1	2.9	5.1	3.0	2.9	3.8
Condoms not effective	1.9	2.0	0.6	1.3	1.3	1.7
Does not like condoms	23.5	23.5	24.1	7.0	6.8	8.5
Wanted to get pregnant	6.2	6.2	5.7	8.5	9.1	4.9
Trusts partner does not have a disease	40.1	41.5	23.3	73.4	79.9	31.0
Respondent does not have a disease	3.0	3.2	1.5	7.2	7.8	3.8
Partner insisted on not using	15.8	15.3	22.6	2.4	1.8	6.4
Religious prohibition	1.4	1.5	0.0	1.5	1.6	0.6
Other	10.2	10.4	7.6	7.3	7.5	5.8
Number of women/men	6,696	6,178	518	4,713	4,084	630

Note: Multiple responses were allowed.

Almost 9 out of 10 respondents who did not use a condom at last sex reported that their last sexual partner was a spouse or cohabiting partner. Therefore, the responses for all respondents who did not use a condom at last sex closely match responses for respondents whose last sex was with a spouse/partner. Different patterns emerge when looking at respondents whose last sexual partner was not a spouse or cohabiting partner. Among women, almost equal proportions (23 and 24 percent) cite dislike of condoms, trust that their partner does not have a disease, and partner's refusal to use a condom as reasons for nonuse. Other reasons given by women whose last sex was with a noncohabiting partner include not having a condom at the time and lack of knowledge about condoms. Among men whose last sex was with a noncohabiting partner, not having a condom is the leading response (34 percent), followed by trust that their partner does not have a disease (31 percent). Thirteen percent of men who did not use a condom in their last sex with a noncohabiting partner said that they did not know a place to get condoms, while 9 percent said they did not know about condoms at all.

6.7 HIGHER-RISK SEX

Condom use is an important tool in the fight to curtail the spread of HIV/AIDS. Although truly effective protection would require condom use at every sexual encounter, the most important sexual encounters to cover are those considered to be 'higher risk.' In the context of this survey, higher-risk sex is defined as sex with a nonmarital, noncohabiting partner in the 12 months preceding the survey. Table 6.6 shows for women and men who were sexually active in the 12 months preceding the survey, the proportion who engage in higher-risk sex and among those, the proportion who used a condom during their last sexual encounter with such partners.

The results show that, among respondents aged 15-49 who were sexually active in the preceding 12 months, 15 percent of women and 37 percent of men engage in sex with a nonmarital, noncohabiting partner. Of them, 47 percent of women and 53 percent of men reported using condoms at the most recent higher-risk sex.

Table 6.6

Higher-risk sex and condom use at last higher-risk sex in the 12 months preceding the survey, Uganda 2004-05

	Women 15-49				Men 15-49			
	Among those who had sex in the past 12 months		Among those who had higher-risk sex in the past 12 months		Among those who had sex in the past 12 months		Among those who had higher-risk sex in the past 12 months	
Background characteristic	Percentage engaging in higher-risk sex in the past 12 months	Number of women who had sex in the past 12 months	Percentage who used condom at last higher-risk sex	Number of women who had higher-risk sex in the past 12 months	Percentage engaging in higher-risk sex in the past 12 months	Number of men who had sex in the past 12 months	Percentage who used condom at last higher-risk sex	Number of men who had higher-risk sex in the past 12 months
Age								
15-19	45.4	816	55.6	371	92.3	528	50.5	487
20-24	16.2	1,639	49.1	266	63.0	840	59.4	529
25-29	10.2	1,609	51.7	164	34.7	1,089	59.1	378
30-39	10.2	2,208	32.6	226	24.2	1,980	52.2	478
40-49	9.3	1,105	31.5	102	15.9	1,192	35.5	189
Marital status								
Never married[1]	93.2	586	55.4	546	98.3	1,025	56.0	1,008
Currently married	3.0	6,119	48.0	183	18.3	4,168	52.4	761
Formerly married	59.5	671	34.3	399	67.4	435	46.8	293
Residence								
Urban	29.0	1,024	64.7	297	52.6	806	73.7	424
Rural	13.1	6,353	40.3	832	34.0	4,822	48.1	1,638
Region								
Central	26.6	1,235	50.6	329	50.1	980	68.1	491
Kampala	34.6	448	66.3	155	60.7	362	78.5	220
East Central	18.9	1,181	55.9	223	38.7	827	55.8	320
Eastern	15.4	691	36.7	107	48.0	599	42.7	288
Northeast	8.6	634	28.0	54	18.5	450	35.9	83
North Central	11.2	777	17.2	87	28.1	633	34.4	178
West Nile	5.5	630	43.2	35	29.0	482	45.8	139
Western	9.9	897	39.0	89	29.4	673	50.0	198
Southwest	5.6	884	29.2	50	23.3	622	26.2	145
Education								
No education	6.2	1,851	26.6	115	19.3	551	36.4	107
Primary incomplete	13.6	3,474	36.7	473	35.8	2,605	44.4	932
Primary complete	17.1	807	42.8	138	31.3	864	47.7	270
Secondary+	32.7	1,229	65.6	402	46.9	1,601	69.1	752
Wealth quintile								
Lowest	12.1	1,180	32.3	142	25.3	867	39.7	220
Second	12.3	1,496	33.1	183	30.7	1,126	41.5	345
Middle	10.4	1,445	34.1	150	32.1	1,101	44.3	354
Fourth	14.3	1,511	43.6	216	38.5	1,196	46.5	460
Highest	25.1	1,744	63.0	437	51.1	1,338	73.1	683
Total 15-49	15.3	7,376	46.7	1,128	36.6	5,628	53.4	2,062
Total 15-59	14.9	7,748	46.1	1,151	34.0	6,330	52.1	2,153

[1] Evidently, a few respondents who had sex in the 12 months preceding the survey and who were recorded as never having been married nevertheless reported having only sexual partners who were either a spouse or cohabiting partner. This is why the proportion is not quite 100.0 percent.

By the definition used here, all premarital sex is higher-risk sex. Consequently, the prevalence of higher-risk sex is greater among the youngest respondents and among those who have never married or who used to be married. Among women, condom use at last higher-risk sex is also highest among younger women, while among men, it is highest among those in their twenties. Urban women and men are more likely than rural respondents to engage in higher-risk sex and also more likely to use condoms when having higher-risk sex. Differences in the extent of higher-risk sex by region could be a result of differences in the age and marital status composition of the respondents. It is encouraging that in those regions where higher-risk sex is more prevalent (i.e., Kampala, Central, East Central and Eastern regions) condom use at last higher-risk sex is also more prevalent.

There is a tendency for the prevalence of higher-risk sexual behaviour to increase with education. However, the likelihood of having used a condom during the most recent higher-risk sexual encounter also increases steadily with education level for both sexes. Differences by wealth quintile are not strong, except at the highest quintile, where both higher-risk sex and condom use are also the highest.

6.8 Sex with Prostitutes

Respondents in the 2004-05 UHSBS were asked about paid sex. Men were asked, "In the past 12 months, did you pay anyone to have sex?" Women were asked, "In the past 12 months, did any man pay you to have sex?" Women who receive payment for sex may have numerous partners. They are at high risk for contracting HIV/AIDS and other sexually transmitted infections and then passing them on to subsequent partners.

The survey results show that less than one-half of one percent of women 15-49 said they had been paid to have sex in the past 12 months, while one percent of men 15-49 reported they engage in paid sex in the 12 months preceding the survey (data not shown). Given the small numbers, it would be misleading to present any breakdown by characteristics. However, it should be noted that 56 percent of men used a condom the last time they paid for sex.

6.9 HIV Counselling and Testing

VCT coverage

Awareness of HIV status can motivate individuals to further protect themselves against infection or to protect their partners from acquiring the disease. However, survey data indicate that the vast majority of Ugandans have never been tested for HIV and do not know their status. As shown in Table 6.7, only 13 percent of women aged 15-49 and 11 percent of men 15-49 have been tested for HIV and received their results. An additional 2 percent of respondents were tested but never received their test results. Individuals may be exposed to risk of infection with HIV repeatedly over time. For this reason, it may be important for an individual to be tested multiple times. Four percent of women and men have been tested in the 12 months preceding the survey.

Men and women aged 25-29 are in the age group most likely to have been tested for HIV. HIV testing is most common among respondents in urban areas and those in Kampala and Central regions. Higher education level and wealth are associated with a higher likelihood of having received an HIV test.

Over recent years, the proportion of women aged 15-49 who have ever been tested for HIV (regardless of whether they received results) has increased from 8 percent in 2000-01 to 15 percent in 2004-05, while the proportion of men 15-49 tested has remained constant at about 12 percent.

Table 6.7
Coverage of prior HIV testing, Uganda 2004-05

Background characteristic	Women 15-49				Men 15-49			
	Percentage ever tested for HIV and received results	Percentage ever tested and did not receive results	Percentage tested and received results in past 12 months	Number of women	Percentage ever tested for HIV and received results	Percentage ever tested and did not receive results	Percentage tested and received results in past 12 months	Number of men
Age								
15-19	7.2	1.7	2.9	2,186	3.7	0.9	1.9	2,070
20-24	14.8	2.3	4.7	1,933	13.1	1.9	5.2	1,262
25-29	16.8	2.9	3.9	1,764	14.4	2.4	4.5	1,220
30-39	14.0	1.9	4.1	2,542	13.8	1.7	4.4	2,116
40-49	11.0	1.3	4.8	1,516	11.5	1.8	3.7	1,342
15-24	10.8	2.0	3.7	4,119	7.3	1.3	3.2	3,332
Marital status								
Never married	9.4	1.6	4.7	2,220	8.0	1.3	3.3	3,140
Ever had sex	17.2	2.2	7.8	879	12.0	1.5	4.8	1,701
Never had sex	4.3	1.3	2.6	1,342	3.2	1.0	1.5	1,439
Currently married	12.5	2.2	3.3	6,358	12.7	1.8	4.3	4,237
Formerly married	18.9	1.8	6.3	1,362	12.0	2.5	3.0	633
Residence								
Urban	31.0	2.5	8.9	1,508	24.3	1.0	8.5	1,200
Rural	9.4	1.9	3.2	8,433	8.4	1.8	3.0	6,809
Region								
Central	16.4	2.2	4.6	1,656	13.0	1.7	3.3	1,451
Kampala	36.6	2.9	9.4	668	26.3	1.2	8.6	547
East Central	10.3	1.1	3.4	1,555	9.9	1.9	3.1	1,146
Eastern	8.9	2.0	4.6	857	9.0	1.6	3.9	770
Northeast	5.8	1.0	1.9	829	7.9	2.1	3.4	610
North Central	13.9	2.6	4.3	970	11.2	1.5	5.3	795
West Nile	10.8	1.5	4.4	958	8.2	2.2	4.1	735
Western	8.9	3.6	3.1	1,140	7.7	1.6	2.6	945
Southwest	9.2	1.6	2.5	1,309	7.8	1.2	2.5	1,012
Education								
No education	6.1	1.8	2.4	2,255	5.2	1.4	2.7	668
Primary incomplete	9.7	1.9	3.2	4,596	6.1	1.4	2.2	3,723
Primary complete	18.1	1.7	4.2	1,115	9.7	1.6	3.3	1,133
Secondary+	24.1	2.7	7.6	1,957	19.8	2.2	6.7	2,477
Wealth quintile								
Lowest	5.8	1.2	2.3	1,610	5.0	1.7	2.0	1,209
Second	8.6	1.7	3.3	2,038	6.6	1.7	3.0	1,628
Middle	8.2	2.3	2.5	1,849	6.4	2.0	2.3	1,506
Fourth	11.1	2.5	3.4	2,000	10.5	1.8	3.9	1,669
Highest	25.3	2.3	7.5	2,443	21.1	1.3	6.7	1,998
Total 15-49	12.7	2.0	4.0	9,941	10.8	1.7	3.8	8,010
Total 15-59	12.1	1.9	3.9	10,826	10.7	1.6	3.8	8,830

Reasons for not seeking voluntary counselling and testing

To increase the proportion of people who know their HIV status, it is important to know why people do not go for voluntary counselling and testing (VCT). Therefore, respondents in the UHSBS who had never been tested for HIV were asked why not. Results are shown in Table 6.8.

The most common reason given by both women and men is that they do not need to get tested or that they have a low risk of having HIV. About one-third of women and almost half of men cite this reason. The next most common reason for not getting tested—given by about 20 percent of women and men—is not knowing where to go. Eighteen percent of women and 13 percent of men say they have never been tested because it costs too much. Not wanting to know the test results is also a fairly common reason for not getting tested, being cited by 16 percent of women and 9 percent of men.

Table 6.8
Reasons for never having had an HIV test, Uganda 2004-05

Reasons for never having an HIV test	Percentage citing reason: Women 15-49	Percentage citing reason: Men 15-49
No knowledge of HIV testing	10.8	6.7
Don't know where to get one	21.9	19.7
Test costs too much	17.6	13.1
Don't need test/low risk	31.2	45.6
Don't want to know if has the virus	15.8	9.4
Can't get treatment if HIV positive	1.3	1.3
Testing center too far	2.7	4.6
Unconcerned, not a priority	8.1	8.2
Other/missing	8.2	6.8
Number	8,480	7,017

HIV testing during antenatal care visits

In theory, all women should be counselled about HIV during antenatal care (ANC) and offered a test. Treatment exists that can significantly reduce the chance of an infant becoming infected with HIV from an infected mother during childbirth. Even where treatment is not available, new mothers infected with HIV should receive counselling on infant feeding practices best for their baby and on future pregnancy choices.

In the UHSBS, only 28 percent of women 15-49 who gave birth in the two years preceding the survey said they were counselled on HIV during ANC (Table 6.9). Almost 6 percent were offered and received an HIV test, but 1 in 7 women tested never received their test result. Only 2 percent of women who gave birth in the past two years were counselled, offered an HIV test, received the test, and found out their test results.

Women in urban areas were more likely to have received HIV counselling and testing during ANC. Prevalence of these services varied greatly by region. Respondents in Kampala were much more likely to receive counselling (76 percent) than respondents in other regions. Respondents in Northeast region were least likely to receive HIV counselling and testing during ANC (19 percent counselled and 3 percent tested).

Table 6.9
HIV testing during antenatal care, Uganda 2004-05

Background characteristic	Among women 15 to 49 who gave birth in the two years preceding the survey, percentage who were: Counselled during antenatal care visit[1]	Tested during antenatal care visit and: Received results[2]	Tested during antenatal care visit and: No results[2]	Tested, counselled, and know results	Number of women who gave birth in the past 2 years
Age					
15-19	28.2	4.3	1.4	2.1	386
20-24	28.1	5.6	0.6	2.5	1,102
25-29	29.3	4.5	1.0	1.8	1,006
30-39	27.4	4.7	0.8	1.8	1,063
40-49	24.0	3.5	0.0	1.5	175
Residence					
Urban	61.7	10.2	1.1	6.4	394
Rural	24.1	4.2	0.8	1.5	3,338
Region					
Central	23.5	5.6	1.4	1.8	604
Kampala	76.1	13.4	1.6	9.3	150
East Central	21.3	5.8	0.4	1.7	603
Eastern	20.7	5.0	1.1	1.8	352
Northeast	19.2	2.8	0.4	1.7	307
North Central	31.6	4.0	0.5	2.6	421
West Nile	25.8	3.6	0.4	1.0	358
Western	31.6	3.4	1.4	0.9	473
Southwest	33.7	4.2	0.5	1.9	464
Total	28.1	4.8	0.8	2.0	3,732

[1] A woman is considered to have received counselling only if she was spoken to about all three of the following: transmission of HIV to babies, preventing the virus, and getting tested for the virus.
[2] Only women who either asked for or were offered the test are included. Women who were required to take the test are excluded from this measure.

6.10 COMMUNICATION ABOUT HIV WITH PARTNERS

Tables 6.10.1 and 6.10.2 show the percentage of men and women who have ever discussed HIV with any of their partners, and the percentage who know the HIV status of their partner or partners. These data show that discussion of HIV between partners and knowledge of partner's status are low. Eighty-three percent of respondents have never discussed HIV with any sexual partner, and 89 percent do not know the HIV status of any of their partners. These percentages are similar among men and women.

Table 6.10.1
Partner communication about HIV among women, Uganda 2004-05

Background characteristic	Among women aged 15-49 who have ever had sex, percentage who: Have discussed AIDS with: All spouses/ partners	Some spouses/ partners	No spouses/ partners	Missing	Total	Know HIV status of: All spouses/ partners	Some spouses/ partners	No spouses/ partners	Missing	Total	Number of women
Age											
15-19	5.9	9.8	83.0	1.4	100.0	9.0	1.2	88.4	1.3	100.0	996
20-24	5.4	11.9	81.3	1.5	100.0	9.2	1.0	88.5	1.3	100.0	1,807
25-29	4.5	12.8	80.9	1.8	100.0	8.9	1.1	88.4	1.6	100.0	1,745
30-34	3.7	10.9	83.7	1.7	100.0	6.9	1.4	90.3	1.4	100.0	1,452
35-39	4.4	8.5	85.2	1.9	100.0	7.6	0.8	89.9	1.7	100.0	1,084
40-44	5.2	7.2	85.6	2.0	100.0	6.9	1.1	90.1	1.9	100.0	870
45-49	4.5	5.6	88.9	1.0	100.0	5.7	1.3	92.3	0.7	100.0	645
Marital status											
Never married	9.0	11.2	78.5	1.3	100.0	13.3	1.7	84.0	1.0	100.0	879
Married	4.2	10.1	83.9	1.8	100.0	7.6	0.8	90.1	1.5	100.0	6,358
Widowed	5.7	9.5	83.2	1.6	100.0	9.0	1.6	87.8	1.6	100.0	581
Divorced	3.9	11.5	83.6	1.0	100.0	5.3	2.8	90.9	0.9	100.0	781
Residence											
Urban	8.8	26.5	64.4	0.3	100.0	18.5	2.4	78.9	0.1	100.0	1,274
Rural	4.0	7.5	86.6	1.9	100.0	6.2	0.9	91.2	1.7	100.0	7,325
Region											
Central	5.6	12.8	81.2	0.4	100.0	9.4	0.7	89.6	0.3	100.0	1,437
Kampala	9.9	32.2	57.5	0.4	100.0	23.8	1.0	75.1	0.2	100.0	566
East Central	4.8	6.7	87.9	0.6	100.0	7.6	1.5	90.4	0.4	100.0	1,374
Eastern	2.7	8.6	87.6	1.0	100.0	4.7	1.6	92.9	0.9	100.0	766
Northeast	1.7	4.8	84.5	8.9	100.0	3.0	0.5	87.8	8.7	100.0	730
North Central	6.1	11.8	80.9	1.2	100.0	9.2	1.0	88.7	1.0	100.0	896
West Nile	7.1	9.1	80.9	2.7	100.0	9.1	1.9	86.8	2.2	100.0	793
Western	1.8	7.2	89.2	1.7	100.0	3.8	1.0	93.9	1.4	100.0	986
Southwest	4.0	7.3	88.4	0.3	100.0	6.4	0.9	92.4	0.3	100.0	1,052
Education											
No education	2.9	4.7	88.0	4.4	100.0	4.1	1.0	90.7	4.2	100.0	2,180
Primary incomplete	4.2	8.2	86.8	0.8	100.0	6.2	1.0	92.2	0.6	100.0	3,944
Primary complete	5.4	14.0	79.9	0.6	100.0	9.9	0.9	88.8	0.4	100.0	961
Secondary+	8.5	21.6	69.3	0.6	100.0	17.6	1.8	80.4	0.2	100.0	1,496
Wealth quintile											
Lowest	3.3	5.5	86.6	4.5	100.0	4.2	1.1	90.3	4.4	100.0	1,389
Second	3.6	6.3	87.6	2.5	100.0	5.1	0.7	92.0	2.2	100.0	1,742
Middle	3.7	6.5	88.9	0.8	100.0	5.5	0.9	93.1	0.5	100.0	1,650
Fourth	5.2	8.7	85.6	0.5	100.0	7.7	1.1	90.7	0.5	100.0	1,732
Highest	7.1	21.1	71.2	0.6	100.0	15.3	1.7	82.7	0.3	100.0	2,086
Total 15-49	4.8	10.3	83.3	1.6	100.0	8.0	1.1	89.4	1.4	100.0	8,599
Total 15-59	4.6	9.6	84.1	1.6	100.0	7.7	1.0	89.8	1.5	100.0	9,483

There is little difference in discussion of HIV with partners by age group. Similarly, knowledge of partner's status does not vary by age. Respondents in urban areas are more likely than those in rural areas to discuss HIV with partners and to know their partner's status. Around two-thirds of urban respondents have never discussed HIV with a partner, compared with 86-87 percent of rural respondents. Four in five urban residents do not know the HIV status of any partner, compared with 91 percent of rural respondents.

Higher education and wealth are associated with more discussion of HIV with partners and knowledge of partner status. Almost 9 in 10 respondents with no education have never discussed HIV with any sexual partner, compared with 7 in 10 respondents with secondary education or higher. Less than 1 in 10 respondents with no education knows the HIV status of any partner, compared with almost 2 in 10 of respondents with secondary education or higher. Among respondents in the highest wealth quintile, 7 to 8 percent have discussed HIV with all sexual partners, compared with 4 to 6 percent of respondents in the lower quintiles. Furthermore, 15 percent in the highest quintile know the HIV status of all partners, compared with 4 to 7 percent of respondents in the other quintiles.

Table 6.10.2
Partner communication about HIV among men, Uganda 2004-05

Background characteristic	Among men aged 15-49 who have ever had sex, percentage who: Have discussed AIDS with: All spouses/ partners	Some spouses/ partners	No spouses/ partners	Missing	Total	Know HIV status of: All spouses/ partners	Some spouses/ partners	No spouses/ partners	Missing	Total	Number of men
Age											
15-19	5.8	3.8	89.2	1.2	100.0	6.8	1.4	90.8	1.0	100.0	873
20-24	6.8	10.7	81.9	0.7	100.0	8.9	2.8	87.6	0.7	100.0	1,073
25-29	5.8	11.0	82.7	0.5	100.0	9.2	1.4	88.9	0.4	100.0	1,186
30-34	5.8	13.4	80.1	0.7	100.0	10.0	2.1	87.4	0.5	100.0	1,191
35-39	4.2	10.0	85.0	0.7	100.0	6.9	2.1	90.3	0.7	100.0	913
40-44	5.0	10.7	83.2	1.1	100.0	7.2	3.0	88.7	1.0	100.0	783
45-49	5.2	8.8	85.0	1.0	100.0	8.6	1.7	88.7	1.0	100.0	550
Marital status											
Never married	6.3	8.2	84.5	1.0	100.0	8.3	2.1	88.7	1.0	100.0	1,701
Married	5.4	11.1	82.8	0.7	100.0	8.8	2.0	88.6	0.6	100.0	4,237
Widowed	7.2	10.7	77.9	4.3	100.0	7.8	1.7	86.2	4.3	100.0	100
Divorced	4.3	7.9	87.8	0.0	100.0	5.6	2.6	91.7	0.0	100.0	532
Residence											
Urban	8.3	23.3	68.0	0.4	100.0	16.8	4.0	79.1	0.2	100.0	996
Rural	5.1	7.7	86.3	0.9	100.0	6.9	1.7	90.6	0.8	100.0	5,575
Region											
Central	9.1	12.3	78.4	0.1	100.0	12.8	2.9	84.4	0.0	100.0	1,191
Kampala	9.1	27.2	63.3	0.5	100.0	19.5	6.3	73.7	0.5	100.0	439
East Central	5.5	9.9	84.4	0.1	100.0	7.6	2.4	89.8	0.1	100.0	954
Eastern	1.7	7.2	91.1	0.0	100.0	3.6	0.8	95.5	0.1	100.0	679
Northeast	2.1	7.9	85.1	4.9	100.0	3.1	1.6	90.7	4.6	100.0	515
North Central	3.8	8.8	87.0	0.4	100.0	6.0	0.4	93.6	0.0	100.0	713
West Nile	8.6	5.7	84.7	1.0	100.0	9.8	1.7	87.7	0.9	100.0	571
Western	4.9	7.9	86.2	1.0	100.0	6.9	2.0	90.2	1.0	100.0	769
Southwest	4.1	7.5	87.6	0.8	100.0	6.6	1.3	91.3	0.8	100.0	740
Education											
No education	3.6	4.4	88.7	3.2	100.0	4.9	1.3	90.5	3.2	100.0	612
Primary incomplete	4.8	6.2	88.3	0.7	100.0	5.9	1.9	91.6	0.6	100.0	2,995
Primary complete	4.9	9.2	85.4	0.5	100.0	6.9	2.3	90.4	0.4	100.0	980
Secondary+	7.8	18.2	73.7	0.3	100.0	14.0	2.5	83.3	0.2	100.0	1,976
Wealth quintile											
Lowest	4.9	4.2	89.1	1.8	100.0	6.0	1.0	91.2	1.8	100.0	990
Second	4.1	6.0	88.4	1.5	100.0	5.4	1.4	91.9	1.2	100.0	1,317
Middle	5.9	6.6	87.2	0.4	100.0	7.2	1.9	90.6	0.3	100.0	1,261
Fourth	4.2	9.2	86.3	0.3	100.0	5.8	2.3	91.5	0.3	100.0	1,387
Highest	8.2	20.5	70.9	0.4	100.0	15.3	3.2	81.3	0.3	100.0	1,617
Total 15-49	5.6	10.1	83.5	0.8	100.0	8.4	2.1	88.8	0.7	100.0	6,571
Total 15-59	5.5	9.9	83.8	0.8	100.0	8.3	2.0	89.0	0.7	100.0	7,390

6.11 PREVALENCE OF SEXUALLY TRANSMITTED INFECTIONS

All respondents who ever had sex were asked if they had had a sexually transmitted infection (STI) or symptoms of an STI in the 12 months preceding the survey. It is important to point out that a respondent's self report of STI symptoms is not the same as a clinical diagnosis. In addition, if a respondent does not report symptoms of an STI, it does not mean that he or she does not have one. Because of the stigma associated with STIs, individuals may underreport the prevalence of STIs and their symptoms. Furthermore, it is possible to have an STI with no symptoms, especially in women.

According to Table 6.10, 33 percent of women and 21 percent of men who ever had sex report they had symptoms of an STI or a genital discharge or a genital sore/ulcer in the 12 months preceding the survey. This represents a sizeable increase since 2000-01, when only 17 percent of women aged 15-49 and 6 percent of men aged 15-49 who ever had sex reported symptoms of an STI.

The likelihood of reporting symptoms of an STI is highest among women aged 20-39 and men aged 25-49. Never-married women and men were least likely to report symptoms of an STI. Formerly married women and men were slightly more likely to report STI symptoms than those who are currently married. Women in urban areas are more likely to report symptoms of an STI than women in rural areas. Among men, those in urban and rural areas have roughly the same probability of reporting STI symptoms.

Respondents in East Central region were most likely to report STI symptoms (44 percent of women and 29 percent of men). Respondents in Northeast region, on the other hand, are least likely to report STI symptoms (14 percent of women and 8 percent of men). Reporting of STI symptoms increases with level of education among men and women, with the exception of a slight decrease between complete primary and secondary education or higher. Among women, reporting of STI symptoms increases with each wealth quintile. Among men, reporting of STI symptoms increases from the lowest through the fourth quintile before decreasing slightly between the fourth and the highest quintiles. Circumcised men are slightly less likely to report having had an STI than those who are not circumcised. Women and men with traditional tattooing or cutting of skin are more likely to report symptoms of an STI than those without.

Respondents in the 2004-05 UHSBS who reported having an STI or symptoms of an STI in the 12 months preceding the survey were asked if they sought treatment. Figure 6.1 shows that 56 percent of women and 61 percent of men sought treatment. Most sought treatment from a health facility as opposed to a shop or pharmacy, or a traditional healer.

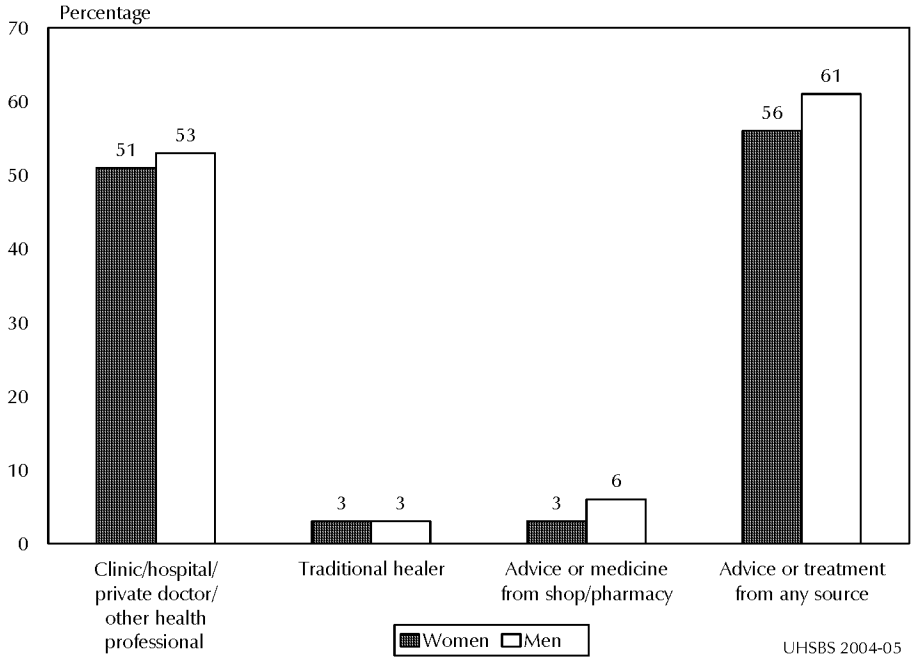
Table 6.11

Prevalence of sexually transmitted infections (STI) and STI symptoms, Uganda 2004-05

Background characteristic	Among women who ever had sex, percentage who reported having in the past 12 months: An STI	An abnormal genital discharge	A genital sore/ ulcer	An STI or discharge or genital sore/ ulcer	Number of women who ever had sex	Among men who ever had sex, percentage who reported having in the past 12 months: An STI	An abnormal genital discharge	A genital sore/ ulcer	An STI or discharge or genital sore/ ulcer	Number of men who ever had sex
Age										
15-19	10.2	16.0	16.2	26.3	996	6.8	9.7	6.2	14.4	873
20-24	17.7	22.2	17.5	33.0	1,807	10.2	13.0	7.2	19.0	1,073
25-29	18.4	22.4	20.9	35.0	1,745	13.6	16.9	9.2	23.4	1,186
30-39	16.5	23.8	19.8	35.3	2,536	12.7	16.4	7.4	22.5	2,105
40-49	11.4	19.4	16.3	28.9	1,515	10.8	15.5	5.5	20.6	1,333
Marital status										
Never married	12.9	14.8	13.6	25.7	879	8.0	10.1	6.6	15.2	1,701
Currently married	15.4	21.6	18.5	32.8	6,358	12.2	16.5	6.7	22.2	4,237
Formerly married	17.8	25.5	21.6	35.9	1,362	13.8	16.8	11.4	24.7	633
Residence										
Urban	20.4	22.0	20.1	36.5	1,274	12.3	15.5	8.2	21.2	996
Rural	14.7	21.4	18.2	31.9	7,325	11.1	14.7	7.0	20.5	5,575
Region										
Central	24.6	29.1	25.1	42.9	1,437	15.5	20.6	7.9	26.0	1,191
Kampala	18.6	19.5	19.5	33.2	566	12.9	17.8	8.0	23.0	439
East Central	20.8	27.3	22.4	44.3	1,374	15.0	21.2	10.1	28.7	954
Eastern	10.3	10.4	14.1	20.9	766	8.0	9.5	8.7	16.5	679
Northeast	2.9	10.8	6.9	14.1	730	3.4	6.1	2.6	8.0	515
North Central	6.6	16.9	14.9	25.5	896	6.9	10.4	8.3	17.5	713
West Nile	8.9	19.0	17.8	28.4	793	6.5	7.4	5.2	12.6	571
Western	21.1	30.1	19.4	37.3	986	12.7	14.6	6.1	21.2	769
Southwest	14.6	18.3	17.8	28.9	1,052	13.6	17.2	4.8	21.3	740
Education										
No education	10.4	18.2	16.1	26.1	2,180	8.8	13.8	5.4	17.1	612
Primary incomplete	15.4	22.9	19.8	34.2	3,944	12.0	15.7	7.9	21.8	2,995
Primary complete	19.4	25.1	19.5	36.8	961	11.1	15.9	8.7	22.5	980
Secondary+	20.8	20.6	17.7	35.0	1,496	11.0	13.4	5.8	19.1	1,976
Wealth quintile										
Lowest	7.5	16.1	14.5	23.5	1,389	7.6	11.5	6.2	16.5	990
Second	12.8	20.4	16.8	29.4	1,742	8.8	12.8	5.7	17.6	1,317
Middle	15.2	22.0	19.9	33.7	1,650	10.5	14.7	6.7	20.3	1,261
Fourth	18.6	24.4	20.8	35.8	1,732	13.6	17.6	9.2	24.6	1,387
Highest	20.8	23.3	19.6	37.7	2,086	14.1	16.3	7.5	22.5	1,617
Circumcised										
Yes	na	na	na	na	na	10.5	12.6	7.6	18.7	1,725
No	na	na	na	na	na	11.6	15.6	7.0	21.3	4,846
Tattoos, skin cuts										
Yes	16.7	22.7	20.8	35.3	3,932	13.1	17.3	7.9	23.3	2,336
No	14.5	20.5	16.6	30.3	4,667	10.3	13.5	6.7	19.1	4,235
Total 15-49	15.5	21.5	18.5	32.6	8,599	11.3	14.9	7.1	20.6	6,571
Total 15-59	15.0	20.9	17.7	31.4	9,483	10.9	14.8	7.0	20.3	7,390

na = Not applicable

Figure 6.1 Sources of Treatment for Sexually Transmitted Infections and Their Symptoms



6.12 Injections, Blood Transfusions, and Contact with Blood

When given with nonsterile equipment, injections and blood transfusions pose risk of infection with HIV and other diseases. An additional risk of infection comes from blood transfusions when the blood is not properly screened. Table 6.11 shows that 51 percent of women and 38 percent of men reported receiving an injection in the 12 months preceding the survey, with an average number of injections per respondent of two. Five percent of women and 2 percent of men report ever receiving a blood transfusion.

The data show little variation in the use of injections and blood transfusions by background characteristics. Having received an injection in the past 12 months varied by education among men and women. For women, the proportion who have received an injection in the past 12 months ranges from 44 percent among those with no education to 55 percent among those with secondary education or higher. For men, the proportion ranges from 29 percent among those with no education to 39 percent of those with secondary education or higher. Prevalence of blood transfusions increased with age among women, from 3 percent among women aged 15-19 to 9 percent among women 45-49. The percentage of women who have received a blood transfusion also varied by region from 3 percent in Northeast to 8 percent in Southwest.

Table 6.12

Injections and blood transfusions, Uganda 2004-05

Background characteristic	Women 15-49				Men 15-49			
	Percentage who received an injection in the past 12 months	Average number injections per person per year	Percentage who ever received a blood transfusion	Number of women	Percentage who received an injection in the past 12 months	Average number injections per person per year	Percentage who ever received a blood transfusion	Number of men
Age								
15-19	48.0	1.9	2.5	2,186	40.1	1.4	2.0	2,070
20-24	51.6	2.2	4.2	1,933	34.0	1.7	2.8	1,262
25-29	54.6	2.5	3.8	1,764	37.3	2.1	2.3	1,220
30-34	54.4	2.7	5.5	1,457	37.9	2.1	1.9	1,200
35-39	51.1	2.7	5.8	1,085	37.7	2.0	1.0	916
40-44	47.3	2.9	5.5	870	38.0	2.3	2.4	788
45-49	50.6	3.2	9.1	647	40.4	2.4	3.3	554
15-24	49.7	2.0	3.3	4,119	37.8	1.5	2.3	3,332
Residence								
Urban	54.0	2.8	4.8	1,508	38.0	2.0	2.3	1,200
Rural	50.8	2.4	4.5	8,433	37.9	1.9	2.1	6,809
Region								
Central	51.5	2.5	4.5	1,656	39.4	2.0	2.6	1,451
Kampala	48.8	2.6	5.5	668	34.8	1.7	2.5	547
East Central	59.7	2.9	4.8	1,555	41.3	2.2	2.9	1,146
Eastern	55.7	3.3	3.4	857	40.5	2.0	1.9	770
Northeast	44.0	2.7	2.7	829	33.4	1.9	0.7	610
North Central	50.8	2.5	3.9	970	39.0	2.1	2.4	795
West Nile	62.6	1.7	3.5	958	43.0	1.8	2.4	735
Western	50.1	2.3	3.9	1,140	30.4	1.4	1.4	945
Southwest	37.0	1.6	7.7	1,309	37.0	1.6	2.0	1,012
Education								
No education	44.2	2.1	4.6	2,255	29.1	1.7	1.2	668
Primary incomplete	52.6	2.5	4.1	4,596	38.4	1.9	1.9	3,723
Primary complete	53.6	2.5	5.5	1,115	38.6	1.9	2.0	1,133
Secondary+	54.9	2.8	5.0	1,957	39.3	2.0	2.9	2,477
Total 15-49	51.3	2.4	4.5	9,941	37.9	1.9	2.2	8,010
Total 15-59	50.4	2.5	4.9	10,826	38.0	1.9	2.3	8,830

Table 6.13 shows that a very low percentage of respondents have ever been immunised against yellow fever. Only 1 percent of women and 2 percent of men have ever received this immunisation. Respondents were also asked whether they had contact with the blood of other persons at work or at home. The results in Table 6.13 indicate that only 7 percent of women and men come into contact with the blood of other persons at home or at work.

Table 6.13

Yellow fever immunisations and contact with blood, Uganda 2004-05

Background characteristic	Percentage of women 15-49			Percentage of men 15-49		
	Ever immunised for yellow fever	Who have contact with blood of others at home or work	Number of women	Ever immunised for yellow fever	Who have contact with blood of others at home or work	Number of men
Age						
15-19	1.2	3.8	2,186	1.4	4.4	2,070
20-24	1.2	5.3	1,933	1.6	6.3	1,262
25-29	1.6	7.4	1,764	1.3	7.9	1,220
30-34	1.2	8.0	1,457	2.0	7.5	1,200
35-39	1.2	8.4	1,085	2.8	8.8	916
40-44	1.4	10.6	870	2.9	8.5	788
45-49	2.4	12.7	647	4.1	7.0	554
Residence						
Urban	2.3	3.6	1,508	3.9	5.9	1,200
Rural	1.2	7.6	8,433	1.6	7.0	6,809
Region						
Central	0.9	3.5	1,656	1.1	3.3	1,451
Kampala	2.2	1.7	668	5.3	2.7	547
East Central	1.2	7.9	1,555	1.6	3.8	1,146
Eastern	1.2	8.7	857	0.6	3.2	770
Northeast	0.2	5.8	829	0.6	12.4	610
North Central	1.0	9.3	970	1.3	2.6	795
West Nile	5.6	8.3	958	3.5	22.9	735
Western	0.2	14.5	1,140	2.9	12.0	945
Southwest	0.9	3.6	1,309	2.4	3.5	1,012
Education						
No education	1.3	7.8	2,255	1.0	9.7	668
Primary incomplete	1.1	7.6	4,596	1.2	6.8	3,723
Primary complete	0.9	6.0	1,115	1.8	5.4	1,133
Secondary+	2.4	5.4	1,957	3.6	6.7	2,477
Wealth quintile						
Lowest	1.4	6.9	1,610	1.0	10.4	1,209
Second	1.4	7.9	2,038	1.0	7.6	1,628
Middle	1.0	8.9	1,849	1.7	5.5	1,506
Fourth	1.0	6.7	2,000	1.6	6.4	1,669
Highest	1.9	5.1	2,443	3.9	5.2	1,998
Total 15-49	1.4	7.0	9,941	2.0	6.8	8,010
Total 15-59	1.4	7.6	10,826	2.1	6.8	8,830

SEXUAL BEHAVIOUR INDICATORS AMONG YOUTH 7

7.1 KEY FINDINGS

- Half of never-married men and 64 percent of never-married women aged 15-24 have never had sex.
- Fourteen percent of both women and men aged 15-24 say they had sex before age 15.
- Twenty-nine percent of young women and 33 percent of young men who have initiated sexual activity said they used a condom the first time they had sex.
- Fourteen percent of young women and 11 percent of young men who have had sex in the previous 12 months have been tested in the previous year and know their results.

7.2 INTRODUCTION

This chapter addresses HIV/AIDS-related knowledge and behaviours among youth aged 15-24. Special attention is paid to this group because it accounts for half of all new HIV infections worldwide (UNAIDS, 2006). In addition to knowledge of HIV transmission, data are presented on age at first sex, condom use, age differences between sexual partners, forced sex, sex related to alcohol use and voluntary counselling and testing for HIV.

7.3 HIV/AIDS-RELATED KNOWLEDGE AMONG YOUTH

Knowledge of how HIV is transmitted is one of several factors that enables people to protect themselves from the virus. Correct knowledge can also reduce stigma and discrimination against people living with HIV/AIDS. Young respondents were asked the same set of questions on facts and beliefs about HIV transmission as all other respondents. As shown in Tables 4.3, 4.5.1, 4.5.2, and 4.6, young people are generally just as likely as older adults to know about the major means of avoiding HIV/AIDS and to reject the major misconceptions (see Chapter 4).

Table 7.1 shows the level of the composite indicator, 'comprehensive knowledge,' among young people by background characteristics. Youth defined as having comprehensive knowledge are those who agree with prompted questions that individuals can reduce their chances of contracting HIV by having sex with only one faithful, uninfected partner and by using condoms, those who know that a healthy-looking person can have the AIDS virus, and those who know that HIV cannot be transmitted by mosquito bites or sharing food with a person who has HIV.

Thirty percent of young women and 35 percent of young men have comprehensive knowledge of HIV/AIDS. Knowledge increases with education and wealth. Urban youth have greater knowledge than rural youth, and knowledge varies greatly by region. More than half of youth in Kampala (52 percent of women and 53 percent of men) have comprehensive knowledge compared with less than 20 percent of young men and women in Southwest region. Notably, among never-married young women, those who ever had sex report much higher knowledge than those who never had sex.

Table 7.1

Comprehensive knowledge about AIDS among youth, Uganda 2004-05

Background characteristic	Women 15-24		Men 15-24	
	Percentage with comprehensive knowledge[1]	Number of women	Percentage with comprehensive knowledge[1]	Number of men
Age				
15-19	29.0	2,186	32.5	2,070
15-17	27.9	1,364	29.8	1,300
18-19	30.7	821	37.2	770
20-24	30.1	1,933	39.9	1,262
20-22	30.6	1,267	40.3	823
23-24	29.2	666	39.1	438
Marital status				
Never married	32.9	2,049	35.4	2,776
Ever had sex	42.5	733	38.6	1,391
Never had sex	27.6	1,316	32.2	1,385
Currently married	26.2	1,799	34.2	449
Formerly married	25.4	271	38.2	107
Residence				
Urban	46.0	725	47.8	546
Rural	26.0	3,393	32.9	2,785
Region				
Central	45.9	730	40.6	649
Kampala	51.6	339	52.9	259
East Central	38.8	655	40.6	477
Eastern	33.8	333	38.9	323
Northeast	16.6	309	32.8	211
North Central	17.1	350	31.7	273
West Nile	13.3	396	39.5	329
Western	17.5	468	23.1	355
Southwest	17.2	538	19.6	454
Education				
No education	10.9	451	13.3	115
Primary incomplete	21.4	2,004	25.6	1,586
Primary complete	35.9	513	36.8	410
Secondary+	48.1	1,146	49.6	1,217
Wealth quintile				
Lowest	18.6	612	28.5	432
Second	21.5	802	33.4	669
Middle	26.0	700	29.7	592
Fourth	27.6	855	34.5	711
Highest	44.4	1,150	44.1	929
Total	29.5	4,119	35.3	3,332

[1] Comprehensive knowledge means agreeing, in response to prompted questions, that people can reduce their chances of getting the AIDS virus by having sex with only one faithful, uninfected partner and by using condoms consistently, and knowing that a healthy-looking person can have the AIDS virus and that HIV cannot be transmitted by mosquito bites or by sharing food with a person who has AIDS.

7.4 KNOWLEDGE OF CONDOM SOURCES AMONG YOUTH

Condom use among young people plays an important role in the prevention of transmission of HIV and other sexually transmitted infections, as well as unwanted pregnancies. Knowing a place to get condoms helps youth to obtain and use condoms. Table 7.2 shows that groups with the highest knowledge of a source for condoms are usually the same groups who are most likely to have ever used a condom.

Table 7.2

Knowledge of a source for condoms and ever use of condoms among youth, Uganda 2004-05

Background characteristic	Women 15-24				Men 15-24			
	Knows a source for condoms[1]	Number of women aged 15-24	Ever used a condom	Number of women 15-24 who ever had sex	Knows a source for condoms[1]	Number of men aged 15-24	Ever used a condom	Number of men 15-24 who ever had sex
Age								
15-19	48.8	2,186	57.0	996	70.5	2,070	51.1	873
15-17	45.9	1,364	61.7	403	64.8	1,300	41.1	418
18-19	53.6	821	53.9	593	80.2	770	60.3	456
20-24	56.7	1,933	41.4	1,807	86.3	1,262	68.5	1,073
20-22	56.1	1,267	44.2	1,158	86.8	823	67.3	675
23-24	57.8	666	36.3	649	85.4	438	70.6	398
Marital status								
Never married	52.2	2,049	73.9	733	75.0	2,776	60.5	1,391
Ever had sex	75.9	733	73.9	733	88.4	1,391	60.5	1,391
Never had sex	39.0	1,316	na	na	61.6	1,385	na	na
Currently married	52.1	1,799	36.4	1,799	84.4	449	60.2	449
Formerly married	57.4	271	43.5	271	81.9	107	65.2	107
Residence								
Urban	79.8	725	81.5	500	91.8	546	75.1	350
Rural	46.7	3,393	39.4	2,303	73.5	2,785	57.6	1,597
Region								
Central	69.6	730	68.2	511	90.3	649	75.4	402
Kampala	84.6	339	84.8	240	92.2	259	89.5	154
East Central	70.5	655	64.6	478	82.4	477	68.7	295
Eastern	59.1	333	44.0	243	85.4	323	57.6	235
Northeast	23.3	309	26.3	211	53.6	211	43.8	124
North Central	38.0	350	30.3	278	65.9	273	52.8	192
West Nile	24.6	396	26.7	233	65.7	329	59.0	174
Western	39.6	468	32.6	317	66.1	355	53.4	186
Southwest	41.2	538	14.6	292	68.3	454	24.4	184
Education								
No education	22.4	451	11.7	383	48.9	115	43.6	72
Primary incomplete	42.0	2,004	36.6	1,359	69.3	1,586	50.1	877
Primary complete	62.5	513	58.7	360	72.5	410	57.4	261
Secondary+	78.4	1,146	80.6	697	89.9	1,217	76.5	734
Total 15-24	52.5	4,119	46.9	2,803	76.5	3,332	60.7	1,947

[1] Friends, family members, and home are not considered sources for condoms.
na = Not applicable

More than half of women (53 percent) and three-quarters of men (77 percent) aged 15-24 report knowing a source for condoms. About half of all youth—47 percent of women and 61 percent of men—have ever used a condom. Knowledge of a source for condoms and ever use of a condom were higher among youth aged 20-24 years than among youth aged 15-19. Never-married youth who have ever had sex are most likely to know a source for condoms. Never-married women who have ever had sex are the group of women most likely to have ever used a condom, whereas among young men, those who were formerly married are most likely to have used a condom.

Youth living in urban areas and those with higher education are more likely to know of a source for condoms and to have ever used a condom. For young women, knowledge of a source of condoms increases from 22 percent among those with no education to 78 percent among those with some secondary education, and ever use of a condom increases from 12 percent to 81 percent. Percentages for men show a similar pattern. Although rates of condom use are generally higher among young men than young women,

women with complete primary and some secondary education are more likely to have used a condom at some time than young men with the same education levels.

7.5 PERCENTAGE EVER MARRIED

Data on age at first marriage among all respondents interviewed is presented in Chapter 3. Table 7.3 shows the percentage of women and men aged 15-24 who have ever been married by single year of age.

The results show a steep increase in the percentage ever married by age, from 2 percent of women and less than 1 percent of men aged 15 to almost 90 percent of women and 63 percent of men aged 24. The data confirm the fact that men marry at a later age than women. More than half of women age 19 have married compared with only 7 percent of men.

Table 7.3
Percentage of youth who have ever been married, Uganda 2004-05

	Women 15-24		Men 15-24	
Current age	Percentage who have ever married	Number of women	Percentage who have ever married	Number of men
15	2.0	512	0.3	434
16	8.4	461	0.6	444
17	18.1	391	2.2	421
18	41.3	453	6.1	439
19	56.9	368	6.6	331
20	68.9	547	18.7	329
21	74.4	312	26.7	203
22	85.9	408	44.4	291
23	88.0	301	48.5	186
24	89.0	364	62.6	253
Total	50.1	4,119	16.7	3,332

7.6 AGE AT FIRST SEXUAL EXPERIENCE

Because heterosexual intercourse is the primary path of HIV transmission in Uganda, age at first intercourse marks the time at which most individuals first risk exposure to the virus. Tables 7.4 through 7.7 and Figure 7.1 all show data on age at first sex.

Table 7.4 shows the proportion of youth who have ever had sex according to their age at the time of the survey. This table shows that the percentage of youth who ever had sex increases steadily with age.

Table 7.4
Percentage of youth who have ever had sex, Uganda 2004-05

	Women 15-24		Men 15-24	
Current age	Percentage who have ever had sex	Number of women	Percentage who have ever had sex	Number of men
15	16.5	512	23.3	434
16	30.1	461	32.2	444
17	45.3	391	41.1	421
18	65.1	453	54.7	439
19	80.5	368	65.1	331
20	87.7	547	76.6	329
21	91.6	312	80.6	203
22	96.1	408	89.0	291
23	96.4	301	89.0	186
24	98.4	364	92.3	253
Total	68.0	4,119	58.4	3,332

Seventeen percent of young women aged 15 at the time of the survey had ever had sex, compared with 98 percent of women aged 24. A higher percentage of young women aged 17 and older have ever had sex than young men. The difference in sexual experience between the genders is greatest at age 19. However, among youth aged 15 and 16, men are more likely to have had sex than women.

Table 7.5 shows the percentage of young women and men who had sexual intercourse before reaching age 15 and age 18, by background characteristics. Because some of those who are aged 15-19 are under age 18 and may still initiate sex before reaching age 18, the proportion who had sex before age 18 can only be shown for those aged 18-24.

Table 7.5

Percentage of youth aged 15-24 who had sex by age 15 and by age 18, by background characteristics, Uganda 2004-05

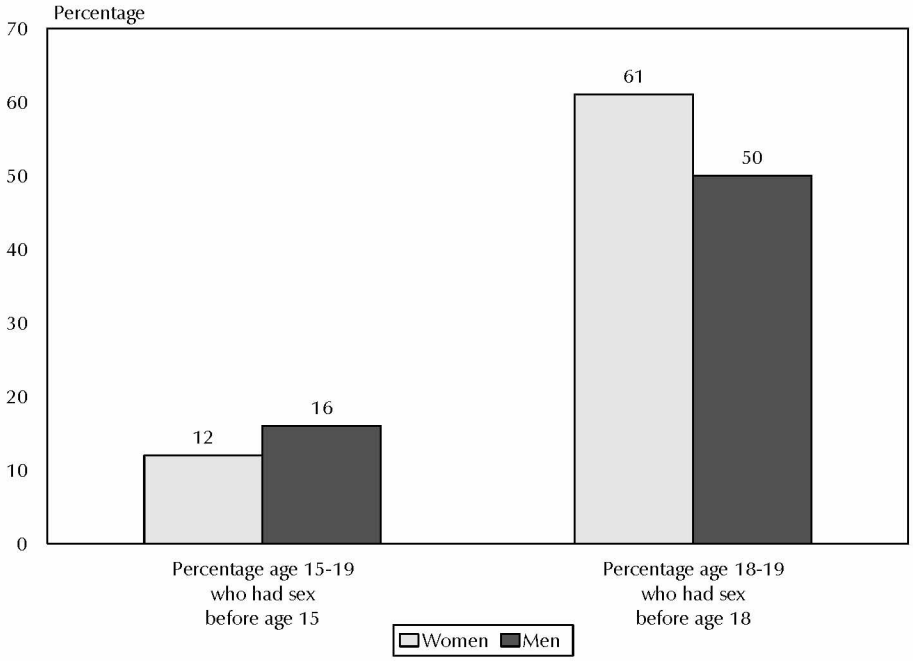
Background characteristic	Women 15-24				Men 15-24			
	Percentage who had sex before age 15	Number of women 15-24	Percentage who had sex before age 18	Number of women 18-24	Percentage who had sex before age 15	Number of men 15-24	Percentage who had sex before age 18	Number of men 18-24
Age								
15-19	12.2	2,186	a	a	16.3	2,070	a	a
15-17	10.1	1,364	a	a	17.5	1,300	a	a
18-19	15.6	821	60.5	821	14.2	770	49.6	770
20-24	17.0	1,933	63.6	1,933	10.8	1,262	45.0	1,262
20-22	15.3	1,267	62.0	1,267	11.2	823	45.7	823
23-24	20.2	666	66.7	666	9.9	438	43.6	438
Marital status								
Never married	7.2	2,049	35.5	804	14.5	2,776	42.6	1,490
Ever married	21.6	2,070	73.9	1,950	12.7	556	58.2	542
Residence								
Urban	12.1	725	62.1	494	11.8	546	44.8	374
Rural	14.9	3,393	62.8	2,260	14.6	2,785	47.2	1,658
Region								
Central	20.2	730	74.1	449	11.8	649	45.3	418
Kampala	12.0	339	60.6	244	10.7	259	43.3	182
East Central	22.2	655	77.2	423	20.3	477	55.8	268
Eastern	22.7	333	71.3	214	22.4	323	72.2	197
Northeast	5.2	309	46.8	230	7.1	211	39.3	132
North Central	16.0	350	74.9	259	18.3	273	51.7	186
West Nile	9.6	396	47.5	255	12.0	329	40.9	201
Western	10.2	468	60.6	328	10.8	355	42.5	206
Southwest	5.1	538	41.3	353	12.3	454	29.7	242
Education								
No education	20.1	451	67.1	391	12.3	115	53.5	81
Primary incomplete	17.4	2,004	69.6	1,261	16.2	1,586	48.9	806
Primary complete	10.7	513	64.0	340	15.5	410	50.2	261
Secondary+	8.8	1,146	48.5	757	11.2	1,217	43.2	883
Wealth quintile								
Lowest	13.5	612	58.8	396	13.1	432	41.8	246
Second	13.0	802	60.5	517	13.0	669	45.4	414
Middle	15.1	700	65.9	492	18.4	592	48.3	333
Fourth	17.4	855	64.5	574	15.2	711	49.8	444
Highest	13.2	1,150	62.8	774	12.0	929	46.5	594
Knows source of condoms[1]								
Yes	17.2	2,163	65.8	1,536	15.4	2,549	49.5	1,707
No	11.3	1,956	58.7	1,218	10.2	783	32.0	325
Total	14.4	4,119	62.7	2,754	14.2	3,332	46.7	2,032

[1] Friends, family members, and home are not considered sources for condoms.

[a] Not calculated because respondents aged 15-17 have not reached age 18 and could still alter the results for the whole age group.

Fourteen percent of young women and men had sex before they turned age 15, and 63 percent of women and 47 percent of young men had sex before age 18. Among women, there is some evidence of a trend towards postponing early sex, because only 12 percent of women aged 15-19 at the time of the survey said they had sex before 15, compared with 17 percent among women aged 20-24. Among men, the opposite pattern pertains, with 16 percent of those aged 15-19 reporting that they had sex before age 15, compared with only 11 percent of men aged 20-24.

Figure 7.1 Sex Before Age 15 and 18 among Youth



Regarding marital status, ever-married women aged 15-24 were more likely to initiate sexual activity before age 15 than those who have never married. For young men, the opposite is true, although the proportions are close. With regard to initiating sex before age 18, those who have ever married are much more likely to have had sex before 18 than those who have never married.

Urban-rural residence is not closely related to early sexual initiation. Age at first sex does vary by region, however. The percentage of young women aged 15-24 who had sex by age 15 ranges from 5 percent in Southwest and Northeast to 23 percent in Eastern region. Among young men, the percentage who had sex by age 15 varies from 7 percent in Northeast to 22 percent in Eastern region.

Wealth quintile shows little association with the proportion who had sex by age 15 or age 18. Early sexual initiation is slightly more likely among those who know of a source for condoms.

Education is closely related to age at first sex for young women. Among women 15-24 with no education, 20 percent had sex before age 15, compared with only 9 percent of young women with at least some secondary school. A similar pattern pertains to having sex before age 18. Education is only weakly associated with age at first sex for young men.

Orphans and vulnerable children (OVC) are likely to be at greater risk in various aspects of life, including early sexual initiation. To assess this risk, Table 7.6 shows the proportion of youth aged 15-17 who had sex before age 15 according to whether they are orphans or vulnerable children or neither. The data show that youth who are orphans or vulnerable children are slightly more likely to have sex by age 15 than other youth. Young women classified as OVC are 1.5 times more likely to initiate sex before age 15 than other young women, while young men who are OVC are 1.1 times as likely.

Table 7.6

Percentage of youth aged 15-17 who had sex by age 15 by OVC status, Uganda 2004-05

	Women 15-17		Men 15-17	
OVC status	Percentage who had sex before age 15	Number of women 15-17	Percentage who had sex before age 15	Number of men 15-17
Orphan	14.6	325	18.0	369
Vulnerable (non-orphan)	2.1	28	21.8	27
OVC	13.6	353	18.3	396
Non-OVC	8.9	1,011	17.2	904
Ratio OVC/non-OVC	1.53	na	1.06	na
Total 15-17	10.1	1,364	17.5	1,300

OVC = orphans and vulnerable children, i.e., children aged 0-17 whose mother or father has died or who are living in a household in which a person aged 18-59 has been very sick for at least three months during the 12 months preceding the survey or in which a person aged 18-59 has died in the preceding 12 months. This definition differs slightly from the standard because it omits children whose parents have been very ill in the past 12 months but who do not live in the same household, since such questions were not included in the UHSBS.
na = Not applicable

7.7 CONDOM USE AT FIRST SEX

Another way to reduce risk of exposure of young people to HIV is early and consistent condom use. Condom use at first sex serves as an indicator of reduced risk of exposure at the beginning of sexual activity.

Among respondents aged 15-24 who ever had sex, 29 percent of young women and 33 percent of young men said they used a condom the first time they had sex (Table 7.7). Younger women are more likely to have used a condom at first sex. More than half of young women aged 15-17 used a condom at first sex compared with 17 percent of women aged 23-24. Among men, the relationship between age and condom use is less clear. It can be noted, however, that young men aged 15-17 were less likely than all other age groups to have used a condom at first sex. Never-married young women and men were more likely to have used a condom at first sex than those who have ever been married.

Urban youth are more likely to use condoms at first sex. Kampala is the region with highest use of condom at first sex (64 percent of young women and 57 percent of young men). The Southwest region has the lowest percentage of youth who used a condom at first sex, with only 7 percent of young women and 12 percent of young men reporting that they used a condom at first sex. Education is strongly associated with condom use at first sex. Women with some secondary education or higher were almost 10 times as likely as women with no education to use a condom at first sex. For men, those with some secondary education were more than twice as likely as those with no education to use a condom at first sex. Knowing a place to get condoms is strongly related to use of them at first sex. However, the relationship may be circular because those who do not know a source cannot obtain condoms.

Table 7.7

Condom use at first sex among young women and men, Uganda 2004-05

Background characteristic	Women 15-24 who ever had sex		Men 15-24 who ever had sex	
	Percentage who used a condom at first sex	Number of women 15-24 who ever had sex	Percentage who used a condom at first sex	Number of men 15-24 who ever had sex
Age				
15-19	42.1	996	31.0	873
15-17	50.9	403	26.0	418
18-19	36.2	593	35.6	456
20-24	21.8	1,807	34.0	1,073
20-22	24.3	1,158	35.6	675
23-24	17.4	649	31.1	398
Marital status				
Never married	58.5	733	36.9	1,391
Ever married	18.6	2,070	22.0	556
Residence				
Urban	57.9	500	46.5	350
Rural	22.8	2,303	29.6	1,597
Region				
Central	42.4	511	43.9	402
Kampala	63.8	240	56.6	154
East Central	42.3	478	38.4	295
Eastern	25.4	243	22.3	235
Northeast	17.9	211	25.8	124
North Central	12.5	278	22.3	192
West Nile	12.1	233	30.9	174
Western	18.9	317	29.9	186
Southwest	6.6	292	11.9	184
Education				
No education	6.0	383	18.7	72
Primary incomplete	18.9	1,359	23.1	877
Primary complete	34.9	360	24.8	261
Secondary+	58.5	697	48.3	734
Knows source of condoms[1]				
Yes	40.4	1,649	36.9	1,696
No	12.7	1,153	3.8	251
Total 15-24	29.0	2,803	32.6	1,947

[1] Friends, family members, and home are not considered sources for condoms.

7.8 ABSTINENCE AND PREMARITAL SEX

The time between initiation of sexual activity and marriage can bring risk of exposure to HIV. Table 7.8 shows the percentage of never-married youth who have never had sex, the percentage who had sex in the 12 months preceding the survey, and among those, the percentage who used a condom at most recent sex.

Half of never-married men aged 15-24 have never had sex, compared with 64 percent of young women. The percentage of never-married youths who report that they have never had sex drops substantially from the 15-19 age group to the 20-24 age group.

Table 7.8

Premarital sex and condom use during premarital sex among youth, Uganda 2004-05

	Never-married women 15-24					Never-married men 15-24				
Background characteristic	Percentage who never had sex	Percentage who had sex in past 12 months	Number of never-married women 15-24	Of those who had sex in the past 12 months, percentage who used a condom at last sex	Number of women 15-24 who had sex in past 12 months	Percentage who never had sex	Percentage who had sex in past 12 months	Number of never-married men 15-24	Of those who had sex in the past 12 months, percentage who used a condom at last sex	Number of men 15-24 who had sex in past 12 months
Age										
15-19	71.3	19.5	1,669	57.1	325	59.6	23.4	2,008	50.0	470
20-24	33.2	45.8	380	48.7	174	24.5	47.7	768	59.0	366
Residence										
Urban	49.8	33.1	454	67.9	150	40.9	33.7	481	70.8	162
Rural	68.3	21.9	1,595	48.3	349	51.8	29.4	2,295	49.9	674
Region										
Central	53.9	30.4	406	62.4	123	45.6	31.4	540	68.6	170
Kampala	44.9	36.4	221	66.7	80	46.4	33.6	226	81.4	76
East Central	55.0	31.7	323	63.8	102	45.0	34.2	406	57.6	139
Eastern	55.0	25.9	164	57.5	42	32.4	50.3	272	47.0	137
Northeast	74.9	21.2	131	25.8	28	55.8	21.3	156	38.2	33
North Central	60.2	28.0	119	13.9	33	38.5	38.6	211	40.1	81
West Nile	84.8	10.8	192	46.0	21	56.6	25.2	275	50.4	69
Western	73.7	22.8	205	40.8	47	59.9	23.9	283	51.5	68
Southwest	85.6	7.6	287	44.4	22	66.2	15.6	408	21.1	63
Education										
No education	71.7	18.7	96	23.9	18	57.4	31.3	74	43.4	23
Primary incomplete	73.4	18.9	880	39.9	166	55.2	28.7	1,285	42.5	369
Primary complete	62.4	23.9	245	49.7	58	45.3	33.6	329	54.7	111
Secondary+	54.2	30.9	827	66.5	256	44.6	30.6	1,083	67.5	331
Knows source of condoms [1]										
Yes	48.0	35.8	1,069	62.1	383	41.0	36.1	2,082	58.5	752
No	81.9	11.9	979	28.2	117	76.7	12.1	694	12.8	84
Total 15-24	64.2	24.4	2,049	54.2	499	49.9	30.1	2,776	53.9	836

[1] Friends, family members, and home are not considered sources for condoms.

Among never-married youths, 24 percent of women and 30 percent of men aged 15-24 had sex in the 12 months preceding the survey. The proportion of never-married young men and women who have been sexually active in the past 12 months doubles between the age groups 15-19 and 20-24. Premarital sexual activity is more common among youths in urban areas and among youths with higher levels of education.

More than half of young men and women (54 percent) who have had sex in the past year reported using a condom at last sex. As with premarital sex, condom use at last sex is higher among urban youth and those with higher levels of education.

7.9 Higher-risk Sex and Condom Use Among Youth

The most common way HIV is transmitted in Uganda is through unprotected sex with an infected partner. Sex with a nonmarital, noncohabitating partner is considered higher-risk sex. Sex with a nonmarital partner carries greater risk of infection, especially when youths have a high number of such sexual partners. Each new partner brings new risk of infection. Use of a condom with a nonmarital, noncohabiting partner reduces risk of HIV infection from these partners.

Table 7.9 shows the proportion of women and men aged 15-24 who engaged in higher-risk sex in the past 12 months and those who used a condom at last higher-risk sex. A little more than half of young women and men report using a condom at last higher-risk sex. While the younger women within the 15-24 age group are more likely to have used a condom than the older women, the opposite is true of young men. The percentage of young men who engaged in higher-risk sex in the past 12 months and who used a condom at last higher-risk sex increased steadily from 44 percent among 15- to 17-year-olds to 62 percent among 23- to 24-year-olds.

Looking at condom use by never-married and ever-married youth shows a similar trend. Never-married women are more likely to have used a condom at last higher-risk sex than ever-married women, whereas never-married men are slightly less likely to have used a condom at last higher-risk sex than ever-married men. Both young women and young men in urban areas were more likely to use a condom at last higher-risk sex than youths in rural areas. Higher education and knowing a source for condoms are also associated with increased probability of having used a condom at higher-risk sex.

Table 7.9

Higher-risk sex and condom use at last higher-risk sex among youth in the past 12 months, Uganda 2004-05

	Women 15-24				Men 15-24			
	Among those who had sex in the past 12 months:		Among those who had higher-risk sex in the past 12 months:		Among those who had sex in the past 12 months:		Among those who had higher-risk sex in the past 12 months:	
Background characteristic	Percentage engaging in higher-risk sex in the past 12 months[1]	Number of women who had sex in the past 12 months	Percentage who report using a condom at last higher-risk sex[1]	Number of women who had higher-risk intercourse in past 12 months[1]	Percentage engaging in higher-risk sex in the past 12 months[1]	Number of women who had sex in the past 12 months	Percentage who report using a condom at last higher-risk sex [1]	Number of men who had higher-risk intercourse in past 12 months[1]
Age								
15-19	45.4	816	55.6	371	92.3	528	50.5	487
15-17	66.7	316	56.5	211	96.1	214	43.6	206
18-19	32.0	500	54.5	160	89.7	314	55.5	281
20-24	16.2	1,639	49.1	266	63.0	840	59.4	529
20-22	16.9	1,049	50.3	177	71.2	514	58.1	366
23-24	15.0	589	46.7	88	49.9	325	62.3	162
Marital status								
Never married	94.8	499	56.8	473	98.3	836	54.7	822
Ever married	8.3	1,956	41.7	163	36.5	532	56.9	194
Residence								
Urban	42.9	405	66.9	174	89.2	225	70.5	201
Rural	22.6	2,050	47.7	462	71.3	1,143	51.3	815
Region								
Central	40.1	435	54.6	174	84.4	273	69.2	231
Kampala	50.2	190	64.3	95	88.1	107	79.3	94
East Central	32.1	425	63.3	137	77.8	206	60.1	160
Eastern	27.8	208	53.9	58	85.8	186	44.3	160
Northeast	14.2	191	31.5	27	48.0	86	44.6	41
North Central	17.1	251	17.5	43	65.9	143	41.5	94
West Nile	14.6	197	45.0	29	71.9	121	50.0	87
Western	16.6	305	47.4	51	60.5	138	50.7	84
Southwest	9.1	254	42.1	23	60.7	106	22.6	65
Education								
No education	8.7	354	35.8	31	40.7	61	43.0	25
Primary incomplete	20.9	1,223	38.6	256	71.6	656	43.9	470
Primary complete	23.6	312	50.4	74	72.3	188	52.5	136
Secondary+	49.0	562	68.7	276	83.3	460	70.8	384
Knows source of condoms[2]								
Yes	34.5	1,427	59.9	493	76.6	1,200	59.5	919
No	14.0	1,028	28.9	143	57.7	168	13.1	97
Wealth quintile								
Lowest	21.9	351	35.9	77	61.4	164	38.5	101
Second	18.8	453	43.9	85	68.4	261	48.5	178
Middle	18.9	455	40.3	86	71.7	247	48.2	177
Fourth	23.6	535	51.2	126	74.1	319	47.4	236
Highest	39.7	661	65.8	263	85.9	377	73.3	324
Total 15-24	25.9	2,455	52.9	636	74.3	1,368	55.1	1,016

[1] Sexual intercourse with a person who is neither married to nor living with the respondent

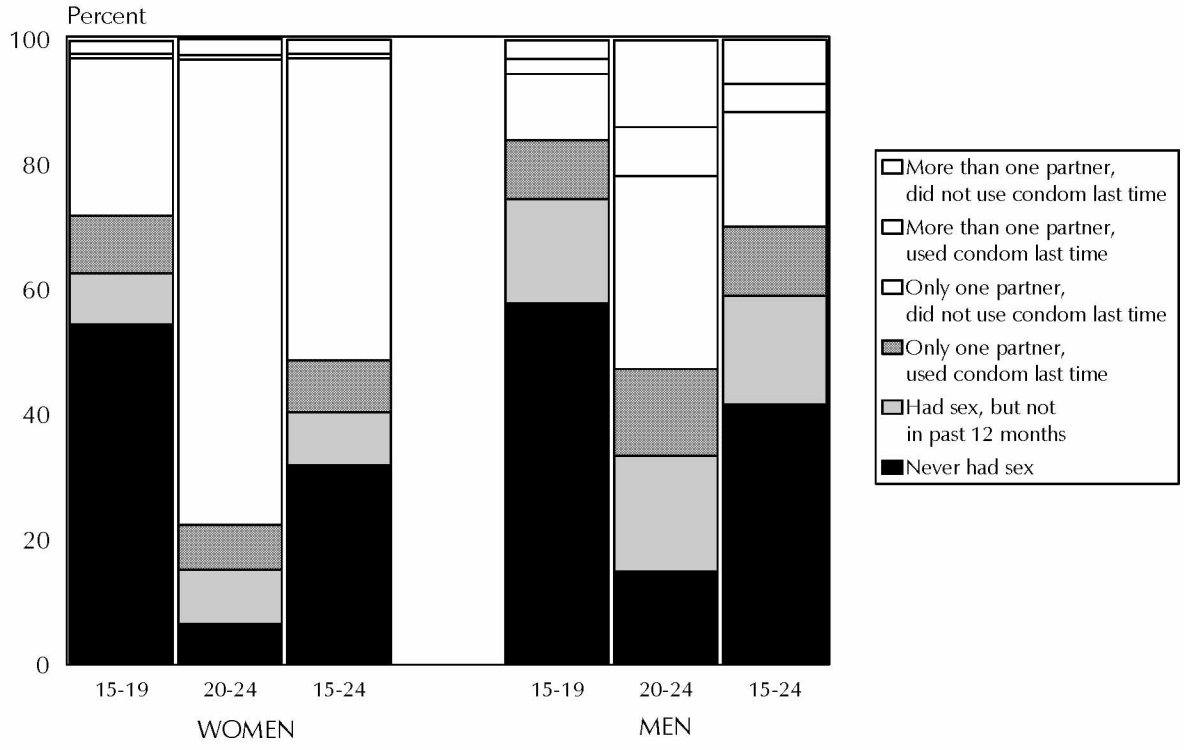
[2] Friends, family members, and home are not considered sources for condoms.

7.10 Abstinence, Being Faithful, and Condom Use among Youth

The acronym 'ABC' represents a prominent message to youth on behaviours to follow to prevent HIV infection: abstinence, be faithful, use condoms. Figure 7.2 presents data on the effectiveness of the ABC strategy. Among youth aged 15-24, 32 percent of young women and 42 percent of young men have been abstinent up to the time of the survey. As expected, the percentage of young women and men who have not had sex drops significantly between the 15-19 age group and the 20-24 age group.

Among all young women, 9 percent have had sex but had not in the past year, the majority (57 percent) were faithful to one sexual partner in the past year, and 3 percent had more than one partner. Among young men, 17 percent have had sex but not within the past year, 29 percent were faithful to one partner in the past year, and 12 percent had more than one partner. Among youth who were sexually active in the 12 months preceding the survey, most did not use a condom at last sex. A higher proportion of young men used a condom at last sex than young women.

Figure 7.2 **Abstinence, Being Faithful, and Using Condoms (ABC) among Young Women and Men**



Note: Data are for partners in the 12 months preceding the survey; condom use refers to most recent sexual encounter.

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7.11 AGE DIFFERENCES BETWEEN SEXUAL PARTNERS

Examining age differences between young women and their partners is important because young women may have less power to negotiate sex and condom use with older men. Older men are also more likely to be infected with HIV than younger men (WHO, 2004; Chapter 8). To assess age differences between sexual partners, women aged 15-19 who had sex in the 12 months preceding the survey were asked the ages of all partners in the past 12 months. If they did not know the ages of their partners, they were asked if their partners were older or younger than they, and if older, whether they were 10 or more years older than they were.

As shown in Table 7.10, 10 percent of women aged 15-19 who had higher-risk sex in the 12 months preceding the survey had sex with a partner who was 10 or more years older. Age groups 15-17 and 18-19 have roughly the same proportion of young women who had sex with a nonmarital, noncohabitating partner more than 10 years older. Marital status is important in age mixing in sexual relationships, however. Ever-married women were more than three times more likely than never-married women to have had higher-risk sex with a partner who was more than 10 years older.

Table 7.10
Age-mixing in higher-risk sexual relationships among young women 15-19, Uganda 2004-05

Background characteristic	Among women 15-19 who had higher-risk sex in the past 12 months, percentage who had sex with a man 10 or more years older	Number of women 15-19 having higher-risk sex in the past 12 months
Age		
15-17	9.4	211
18-19	9.9	160
Marital status		
Never married	7.3	318
Ever married	23.9	53
Residence		
Urban	10.3	92
Rural	9.4	278
Education		
No education	*	10
Primary incomplete	13.8	166
Primary complete	(5.9)	42
Secondary+	6.1	152
Total 15-19	9.6	371

Note: Numbers in parentheses are based on 25-49 unweighted cases; an asterisk denotes a figure based on fewer than 25 unweighted cases that has been suppressed.

Urban and rural women aged 15-19 were almost equally likely to have had higher-risk sex with a partner more than 10 years older (10 and 9 percent, respectively). Education also shows no strong relationship with age mixing in sexual relationships. Young women with incomplete primary education were most likely to have had higher-risk sex with a partner more than 10 years older than themselves (14 percent), while those with complete primary education and secondary education or higher were least likely (6 percent).

7.12 ALCOHOL USE DURING SEX AMONG YOUTH

Having sex under the influence of alcohol can impair judgment and increase risky sexual behaviour. Respondents who had sex in the 12 months preceding the survey were asked for each partner if they or their partner drank alcohol the last time they had sex. Fourteen percent of women and 5 percent of men aged 15-24 reported that they or their partners drank alcohol the last time they had sex with any partner in the 12 months preceding the survey. Results are shown in Table 7.11.

Table 7.11

Sex while drinking alcohol among youth, Uganda 2004-05

Background characteristic	Women 15-24		Men 15-24	
	Percentage who had sex in past 12 months when respondent and/or partner was drinking	Number of women	Percentage who had sex in past 12 months when respondent and/or partner was drinking	Number of men
Age				
15-19	6.0	2,186	1.9	2,070
15-17	3.0	1,364	0.9	1,300
18-19	11.1	821	3.6	770
20-24	23.2	1,933	11.1	1,262
20-22	21.0	1,267	9.2	823
23-24	27.2	666	14.6	438
Marital status				
Never married	2.5	2,049	2.4	2,776
Ever had sex	6.9	733	4.8	1,391
Never had sex	0.0	1,316	0.0	1,385
Currently married	26.0	1,799	18.8	449
Formerly married	22.6	271	25.7	107
Residence				
Urban	9.0	725	4.5	546
Rural	15.1	3,393	5.5	2,785
Region				
Central	7.3	730	2.4	649
Kampala	7.9	339	5.5	259
East Central	11.3	655	3.3	477
Eastern	17.6	333	9.3	323
Northeast	37.1	309	14.2	211
North Central	25.6	350	10.3	273
West Nile	9.0	396	4.9	329
Western	15.3	468	3.9	355
Southwest	10.2	538	3.3	454
Education				
No education	30.1	451	12.6	115
Primary incomplete	15.5	2,004	5.3	1,586
Primary complete	12.9	513	5.4	410
Secondary+	5.7	1,146	4.7	1,217
Wealth quintile				
Lowest	19.9	612	7.7	432
Second	14.5	802	5.3	669
Middle	19.1	700	4.9	592
Fourth	12.7	855	4.5	711
Highest	8.6	1,150	5.3	929
Total 15-24	14.1	4,119	5.4	3,332

Having sex after drinking was more common among youth in the 20-24 age group than the 15-19 age group, though it is important to remember that more youth in the older age group have had sex in the past 12 months. These data do not necessarily mean that a higher proportion of sexual acts involve alcohol at the older ages. Young women and men who have ever been married are more likely to drink alcohol in association with sex than sexually active youth who have never been married.

The practice of having sex in relation to drinking alcohol is more common in rural areas than in urban areas. Northeast and North Central regions had the highest proportion of young women and men

who reported that they or their partners drank alcohol at last sex. Youth with no education were much more likely than those with any education to combine sexual activity with drinking alcohol. Young men and women with incomplete primary education were about half as likely to do so as youth with no education. Lower wealth is also associated with a higher probability of having sex while drinking.

7.13 FORCED SEX AMONG YOUTH

Young women and young men aged 15-24 who have ever had sex were asked about use of force the first time they had sex. The question asked if they were forced to have sex, if both partners agreed, or if they forced their partner to have sex. It is important to note that the definition of 'force' is subjective and may have been interpreted differently by different respondents.

Nine percent of all women aged 15-24 reported that they were forced the first time they had sex (Table 7.12). The vast majority either have not had sex or reported no force at first sex. Young men were much less likely than women to have been forced the first time they had sex (1 percent), but slightly more likely to have forced their partner at first sex (1 percent).

The proportion of young women and young men who were forced the first time they had sex increases with age. It is important to remember, however, that the proportion of youth who have had sex also increases with age. Table 7.12 does not show the proportion of first sexual experiences that were forced. Ever-married young women and men are more likely to have been forced the first time they had sex than those who have never been married. The proportion of youth who live in rural areas who were forced at first sex is slightly higher than those who live in urban areas.

Table 7.12
Use of force at first sex among youth (percent distribution), Uganda 2004-05

	Women 15-24						Men 15-24					
Background characteristic	Forced	Both agreed	Respondent forced partner	Never had sex/ missing	Total	Number of women	Forced	Both agreed	Respondent forced partner	Never had sex/ missing	Total	Number of men
Age												
15-19	6.9	37.7	0.1	55.2	100.0	2,186	1.3	39.0	1.1	58.5	100.0	2,070
15-17	5.3	23.3	0.2	71.2	100.0	1,364	1.0	29.5	1.0	68.6	100.0	1,300
18-19	9.6	61.7	0.1	28.6	100.0	821	1.9	55.1	1.4	41.6	100.0	770
20-24	11.8	78.3	0.2	9.8	100.0	1,933	1.0	79.8	2.0	17.2	100.0	1,262
20-22	11.3	77.7	0.2	10.8	100.0	1,267	1.2	77.8	1.6	19.3	100.0	823
23-24	12.7	79.3	0.1	7.9	100.0	666	0.6	83.5	2.6	13.3	100.0	438
Marital status												
Never married	5.8	29.5	0.1	64.6	100.0	2,049	1.1	47.1	1.1	50.7	100.0	2,776
Ever married	12.5	83.7	0.3	3.5	100.0	2,070	1.8	91.2	3.0	4.0	100.0	556
Residence												
Urban	8.2	59.1	0.3	32.5	100.0	725	1.2	60.3	1.4	37.1	100.0	546
Rural	9.4	56.2	0.1	34.2	100.0	3,393	1.2	53.3	1.5	44.0	100.0	2,785
Total 15-24	9.2	56.8	0.2	33.9	100.0	4,119	1.2	54.4	1.4	42.9	100.0	3,332

7.14 VOLUNTARY HIV COUNSELLING AND TESTING AMONG YOUTH

Awareness of HIV status can motivate individuals to further protect themselves against infection or to protect their partners from acquiring the disease. It is particularly important to measure testing behaviour among youth. Not only are they especially vulnerable to infection, but they also may experience barriers to accessing testing services because of their young age.

Table 7.13 shows that women aged 15-24 are slightly more likely than men of the same age to have been tested for HIV. Fourteen percent of young women and 11 percent of young men who had sex in the 12 months preceding the survey were tested in the past 12 months and know their results. Young women and men in the 20-24 age group were more likely to have been tested for HIV than those in the 15-19 age group. While 15 percent of women and 13 percent of men aged 20-24 have been tested, only 13 percent of women and 7 percent of men aged 15-19 have been so.

Differences in testing by marital status are very small. Urban youth are more likely to be tested than rural youth. Testing behaviour is more common among youth with higher education. Four percent women and none of the men aged 15-24 with no education have been tested for HIV compared with 25 percent of young women and 19 percent of young men with at least some secondary schooling.

Table 7.13
Voluntary HIV testing among youth, Uganda 2004-05

Background characteristic	Among women 15-24 who had sex in the past 12 months: Percentage who were tested and received results in the past 12 months	Among women 15-24 who had sex in the past 12 months: Number of respondents aged 15-24 who had sex in the past 12 months	Among men 15-24 who had sex in the past 12 months: Percentage who were tested and received results in the past 12 months	Among men 15-24 who had sex in the past 12 months: Number of respondents aged 15-24 who had sex in the past 12 months
Age				
15-19	12.6	816	7.0	528
15-17	7.6	316	6.0	214
18-19	15.8	500	7.6	314
20-24	15.0	1,639	13.2	840
20-22	14.5	1,049	10.8	514
23-24	15.9	589	16.9	325
Marital status				
Never married	15.4	499	10.2	836
Ever married	13.9	1,956	11.7	532
Residence				
Urban	33.4	405	18.4	225
Rural	10.4	2,050	9.3	1,143
Education				
No education	4.2	354	0.0	61
Primary incomplete	10.7	1,223	6.5	656
Primary complete	19.0	312	10.2	188
Secondary+	25.4	562	18.5	460
Total 15-24	14.2	2,455	10.8	1,368

HIV PREVALENCE 8

8.1 KEY FINDINGS

- Six percent of Ugandan adults aged 15-49 are infected with HIV and prevalence among women is higher (8 percent) than among men (5 percent).
- Regions with the highest HIV prevalence are Central region and Kampala (9 percent) and North Central region (8 percent).
- HIV prevalence increases with wealth.
- Five percent of cohabiting couples in Uganda are discordant, i.e., one partner is HIV positive and the other is HIV negative.
- Eighty-six percent of women and men aged 15-49 agreed to provide blood samples for HIV testing. Response rates were 89 percent among eligible women and 83 percent among eligible men.

8.2 INTRODUCTION

Understanding the distribution of HIV infection within a population and analysis of the social, biological, and behavioural factors associated with HIV infection offer new insights about the HIV epidemic in Uganda that will help shape future interventions.

In Uganda, national HIV prevalence estimates have been derived primarily from sentinel surveillance among pregnant women. The HIV sentinel surveillance system was established in 1989 to provide information on the magnitude and trends of HIV infection in the country to inform programme strategic planning, monitoring, and evaluation. The system was initially set up in six sites mainly located in urban areas. The number of sites was gradually expanded to the current 25 sentinel sites. Twenty-four of the sites are based in antenatal clinics (ANC) while one site is located in an STI referral clinic in Kampala. These sentinel sites are widely distributed in the country, taking into consideration rural-urban representation. In 2005, antenatal HIV sentinel surveillance was conducted in all 25 sites.

There are a number of recognised limitations in estimating HIV rates in the general adult populations from data derived exclusively from pregnant women attending selected sentinel clinics. Perhaps the most important limitation is that ANC data omit men altogether. Although the rate of HIV infection in pregnant women has been shown to be a reasonable proxy for the level in the combined male and female adult population in a number of settings, it has also been shown to be very different in other settings, which makes it risky to make assumptions about the male infection rate. The system also does not capture any information on HIV prevalence in nonpregnant women, nor in women who either do not attend clinics for pregnancy care or who receive ANC at facilities not represented in the surveillance system. Pregnant women are also more at risk for HIV infection than women who may be avoiding both HIV and pregnancy through the use of condoms or women who are less sexually active and therefore less likely to become pregnant or expose themselves to HIV. There may also be biases in the ANC surveillance data because HIV infection reduces fertility and because knowledge of HIV status may influence fertility choice. Moreover, ANC data do not include socioeconomic characteristics of those tested, which are useful in exploring the nature of the epidemic. Finally, although the ANC system covers

a minimum of 250 pregnant women in each site, which results in a sizeable overall sample, the women are identified from a small number (25) of sites, which limits the representativeness of the results. On the other hand, results from the UHSBS are pulled from the 417 sample points throughout the country.

Thus, although the information from the ANC surveillance system has been very useful for monitoring trends of HIV in Uganda, the inclusion of HIV testing in the 2004-05 UHSBS offers the opportunity to better understand the magnitude and pattern of the infection in the general reproductive-age population in Uganda. The UHSBS results are in turn expected to improve the calibration of annual sentinel surveillance data, so that trends in HIV infection can be more accurately measured in the intervals between household surveys.

8.3 Coverage of HIV Testing

Tables 8.1 and 8.2 present coverage rates for HIV testing for eligible women, men and both sexes combined. The response rates are presented by urban-rural residence and by region. For these tables, respondents are divided into several categories, namely:

1. Those who were interviewed, consented to the blood draw, and were tested with a valid HIV result
2. Those who were not interviewed individually, but were tested (including those who may have been interviewed but the questionnaire was lost)
3. Those who were interviewed and refused the testing when asked for informed consent
4. Those who were absent, including those who were interviewed but absent for testing and those who were absent for the interview
5. Those for whom there is no HIV test result for some other reason, such as a mismatch between the questionnaires and the blood samples or a technical problem in taking or testing the blood

As shown in Table 8.1, 86 percent of eligible women and men aged 15-49 agreed to provide blood samples for HIV testing. Response rates were 89 percent among eligible women and 83 percent among eligible men. Five percent of eligible respondents refused the HIV testing, while 6 percent were absent. Two percent of eligible respondents fall in the 'other' category, meaning that the HIV test result is either missing or not able to be matched to the respondent, or that the respondent consented to being tested but for some technical reason, was not able to give a blood sample (inadequate supplies or sample damage) or the sample could not be tested.

Response rates are higher for women than men, with men more likely to be absent (9 percent) than women (4 percent). Coverage rates for HIV testing are higher in rural than urban areas. Eighty-nine percent of eligible respondents in rural areas were tested, compared with 76 percent of those in urban areas. Both absence and refusals were lower in rural than urban areas. By region, coverage is highest in East Central region (93 percent) and lowest in Kampala (72 percent).

Table 8.1

Coverage of HIV testing among eligible women and men aged 15-49 by residence and region, Uganda 2004-05 (unweighted percent distribution)

	Residence		Region									
Testing status	Urban	Rural	Central	Kampala	East Central	Eastern	Northeast	North Central	West Nile	Western	South-west	Total
						WOMEN						
Tested	82.5	90.8	90.1	78.1	94.9	90.2	91.9	85.1	91.0	92.2	89.5	89.2
Interviewed	82.2	90.3	90.1	78.0	94.7	89.7	91.1	84.2	90.5	92.0	88.8	88.8
Not interviewed	0.2	0.5	0.0	0.1	0.2	0.5	0.8	0.9	0.5	0.2	0.6	0.4
Refused	8.1	4.1	5.7	10.4	2.0	5.9	3.6	6.2	1.2	4.7	6.0	4.9
Absent for testing	7.1	3.2	2.6	8.5	2.7	2.7	3.2	6.8	4.7	1.6	1.8	4.0
Interviewed	0.2	0.4	0.5	0.2	0.4	0.4	0.9	0.7	0.3	0.0	0.1	0.4
Not interviewed	6.9	2.8	2.1	8.3	2.2	2.3	2.3	6.1	4.4	1.6	1.7	3.6
Missing/tech.problem	2.3	1.8	1.6	3.0	0.4	1.2	1.2	1.9	3.1	1.6	2.8	1.9
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	2,021	8,540	972	1,241	1,203	950	1,297	1,126	1,560	1,093	1,119	10,561
						MEN						
Tested	69.5	86.5	84.4	65.2	90.0	85.5	85.3	79.0	87.0	88.7	84.9	83.2
Interviewed	69.4	86.0	83.9	65.2	89.5	85.4	84.4	78.5	86.6	88.5	84.2	82.8
Not interviewed	0.1	0.5	0.4	0.0	0.5	0.1	0.9	0.5	0.4	0.2	0.6	0.4
Refused	9.6	4.5	7.4	10.5	2.5	5.7	4.6	9.1	1.3	3.9	5.0	5.5
Absent for testing	16.7	6.9	6.1	19.6	6.2	7.2	8.8	10.2	8.1	5.4	5.8	8.8
Interviewed	0.4	0.7	0.7	0.2	0.5	0.9	1.5	0.9	0.5	0.4	0.2	0.6
Not interviewed	16.3	6.2	5.5	19.4	5.7	6.3	7.4	9.3	7.6	4.9	5.6	8.1
Missing/tech.problem	4.3	2.2	2.1	4.7	1.3	1.6	1.3	1.7	3.7	2.1	4.3	2.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	1,763	7,270	915	1,087	952	899	1,019	989	1,275	971	926	9,033
						TOTAL						
Tested	76.4	88.8	87.3	72.1	92.8	87.9	89.0	82.2	89.2	90.6	87.4	86.4
Interviewed	76.3	88.3	87.1	72.0	92.4	87.6	88.1	81.5	88.7	90.4	86.7	86.0
Not interviewed	0.2	0.5	0.2	0.0	0.4	0.3	0.9	0.7	0.5	0.2	0.6	0.4
Refused	8.8	4.3	6.5	10.4	2.2	5.8	4.1	7.6	1.2	4.3	5.5	5.2
Absent for testing	11.6	4.9	4.3	13.7	4.2	4.9	5.7	8.4	6.2	3.3	3.6	6.2
Interviewed	0.3	0.6	0.6	0.2	0.5	0.6	1.2	0.8	0.4	0.2	0.1	0.5
Not interviewed	11.3	4.3	3.7	13.5	3.8	4.3	4.5	7.6	5.9	3.1	3.5	5.7
Missing/tech.problem	3.2	2.0	1.9	3.8	0.8	1.4	1.3	1.8	3.4	1.8	3.5	2.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	3,784	15,810	1,887	2,328	2,155	1,849	2,316	2,115	2,835	2,064	2,045	19,594

Table 8.2 shows coverage of HIV testing by background characteristics. The response rates are consistent across age groups, showing a slight tendency to rise with age. Coverage is slightly lower than average among women with some secondary education and among men with no education and those with some secondary education. Similarly both women and men in the highest quintile of the wealth index were the least likely to be tested, both because of higher levels of refusal and absence.

In almost every category of background characteristics, women were more likely to be tested than men. It is important to note, however, that the main reason for this is the higher percentage of eligible women who were interviewed in the survey. The rate of refusal for HIV testing is only marginally higher among men than among women (6 and 5 percent, respectively). As noted in Chapter 1, it is more difficult to find men at home to be interviewed.

Table 8.2

Coverage of HIV testing among eligible women and men aged 15-49, by background characteristics, Uganda 2004-05 (unweighted)

Background characteristic	Tested		Refused		Absent		Missing/technical problem		Total	Number
	Inter-viewed	Not inter-viewed	Inter-viewed	Not inter-viewed	Inter-viewed	Not inter-viewed	Inter-viewed	Not inter-viewed		
					WOMEN					
Age										
15-19	86.8	0.6	4.0	0.9	0.6	4.9	1.1	1.3	100.0	2,356
20-24	86.8	0.3	5.2	0.8	0.4	4.0	1.3	1.2	100.0	2,076
25-29	89.5	0.4	3.9	0.8	0.3	3.6	0.9	0.7	100.0	1,913
30-34	90.8	0.3	4.7	0.4	0.4	1.9	0.7	0.7	100.0	1,520
35-39	89.3	0.7	3.8	0.4	0.5	3.8	1.1	0.4	100.0	1,133
40-44	90.8	0.4	3.8	0.8	0.1	2.2	1.6	0.3	100.0	898
45-49	91.7	0.3	2.9	0.5	0.3	2.7	0.8	0.9	100.0	665
Education										
No education	89.7	1.1	3.6	0.6	0.5	2.5	1.3	0.7	100.0	2,623
Primary incomplete	90.3	0.3	3.6	0.8	0.4	3.2	0.9	0.7	100.0	4,721
Primary complete	90.6	0.3	4.0	0.4	0.0	3.1	0.8	0.8	100.0	1,092
Secondary+	83.5	0.1	6.5	0.7	0.4	5.9	1.3	1.5	100.0	2,101
Wealth quintile										
Lowest	89.7	1.0	2.5	0.6	0.7	3.4	1.3	0.9	100.0	1,997
Second	90.4	0.3	4.0	0.6	0.5	3.0	0.8	0.4	100.0	2,143
Middle	90.9	0.4	3.4	0.7	0.2	3.0	0.9	0.5	100.0	1,829
Fourth	90.4	0.5	3.8	0.5	0.3	2.5	1.1	0.8	100.0	1,874
Highest	84.3	0.1	6.4	0.9	0.3	5.3	1.1	1.5	100.0	2,718
Total 15-49	88.8	0.4	4.2	0.7	0.4	3.6	1.1	0.9	100.0	10,561
Total 15-59	88.9	0.4	4.2	0.7	0.4	3.5	1.1	0.9	100.0	11,454
					MEN					
Age										
15-19	80.9	0.5	3.8	1.7	0.9	8.9	1.1	2.3	100.0	2,354
20-24	80.1	0.7	4.9	0.8	0.8	9.8	0.8	2.1	100.0	1,456
25-29	81.3	0.2	5.6	0.9	0.4	9.0	1.3	1.2	100.0	1,385
30-34	83.9	0.3	3.7	1.2	0.5	7.9	0.7	1.8	100.0	1,361
35-39	84.9	0.5	3.9	0.8	0.3	7.2	1.1	1.4	100.0	1,017
40-44	87.4	0.2	4.1	0.9	0.5	5.1	0.8	1.0	100.0	863
45-49	87.1	0.3	4.5	0.7	0.5	6.0	0.3	0.5	100.0	597
Education										
No education	80.0	2.0	4.2	2.5	2.2	6.6	1.1	1.5	100.0	815
Primary incomplete	85.5	0.4	3.7	0.8	0.6	6.8	0.8	1.3	100.0	4,010
Primary complete	83.4	0.0	4.6	1.4	0.4	7.6	0.9	1.7	100.0	1,284
Secondary+	79.6	0.2	5.2	1.0	0.3	10.6	1.0	2.1	100.0	2,907
Wealth quintile										
Lowest	84.6	0.8	2.6	1.4	0.9	7.1	1.1	1.6	100.0	1,596
Second	86.5	0.5	3.5	0.8	0.6	6.2	0.7	1.2	100.0	1,848
Middle	86.8	0.5	3.8	0.8	0.6	5.7	0.8	1.0	100.0	1,551
Fourth	86.5	0.2	4.0	1.0	0.9	5.2	1.2	0.9	100.0	1,625
Highest	73.5	0.2	6.7	1.5	0.3	14.0	0.8	3.0	100.0	2,413
Total 15-49	82.8	0.4	4.4	1.1	0.6	8.1	0.9	1.7	100.0	9,033
Total 15-59	83.4	0.4	4.3	1.1	0.6	7.8	0.9	1.6	100.0	9,905

Note: Totals include some cases for which education is missing.

8.4 HIV PREVALENCE BY AGE AND SEX

Results from the 2004-05 UHSBS indicate that just over 6 percent of Ugandan adults are infected with HIV.[1] Table 8.3 shows that HIV prevalence among women is higher than among men (8 and 5 percent, respectively).

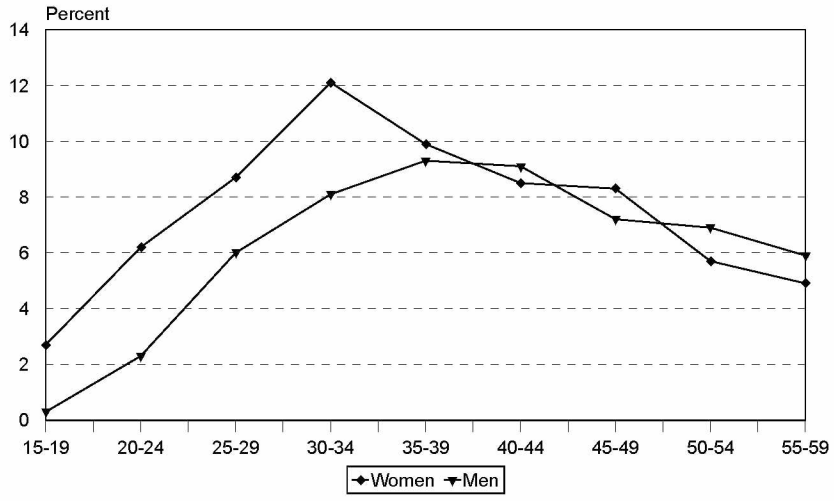
Table 8.3

HIV prevalence by age, Uganda 2004-05

Age	Women		Men		Total	
	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested
15-19	2.6	2,062	0.3	1,932	1.5	3,994
20-24	6.3	1,803	2.4	1,184	4.7	2,987
25-29	8.7	1,679	5.9	1,123	7.6	2,802
30-34	12.1	1,374	8.1	1,139	10.3	2,513
35-39	9.9	1,029	9.2	868	9.6	1,897
40-44	8.4	823	9.3	745	8.8	1,568
45-49	8.2	621	6.9	524	7.6	1,145
50-54	5.4	513	6.9	452	6.1	965
55-59	4.9	322	5.8	332	5.4	654
Total 15-49	7.5	9,391	5.0	7,515	6.4	16,906
Total 15-59	7.3	10,227	5.2	8,298	6.3	18,525

Age- and sex-specific prevalence of HIV shows that prevalence for both women and men increases with age until it reaches a peak, which for women is attained at ages 30-34 (12 percent) and for men at ages 35-44 (9 percent). Women are more highly affected at younger ages compared with men. Prevalence for women is generally higher than for men at ages 15-49 (Figure 8.1), though at ages 40-44, the male rate is marginally higher than the female rate. At ages 50-59, the pattern reverses and prevalence is slightly higher among men than women.

Figure 8.1 HIV Prevalence by Sex and Age



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[1] This is somewhat lower than the rate of 7.1 percent positive for women and men aged 15-49 that was included in the UHSBS preliminary report. Some of the difference reflects changes that occurred during external quality control.

While the monitoring of the magnitude and trends of HIV prevalence in Uganda is based on the corroboration of data from different sources, the main source of the data has largely been the antenatal clinic (ANC) HIV sentinel surveillance system. Since the late 1980s, this ANC sentinel surveillance system has provided useful information on the annual trends of site specific HIV sero-prevalence. In line with this, a special round of ANC sentinel HIV surveillance was conducted in the first quarter of 2005 involving 24 sentinel sites. The results of this survey indicate that amongst the sentinel sites located in the major urban areas (cities and municipalities), site-specific antenatal HIV sero-prevalence ranged from 5.4 to 12.5 percent, and the median was around 7.2 percent. Amongst sites located in the semi-urban and rural areas, the antenatal HIV sero-prevalence ranged from 1.3 to 7.9 percent, with a median of about 5 percent. When comparisons were made, the results seem to suggest that the regional distribution of the magnitude of antenatal HIV sero-prevalence from the sentinel surveillance system is similar to that observed in the population-based UHSBS.

8.5 HIV Prevalence by Other Background Characteristics

As Table 8.4 shows, urban residents have a significantly higher risk of HIV infection (10 percent) than rural residents (6 percent). This is true for both sexes, though the urban-rural difference is much stronger for women than for men. Prevalence among urban women is 13 percent compared with 7 percent for rural women, and prevalence among urban men is 7 percent compared with 5 percent for rural men.

Table 8.4

HIV prevalence by background characteristics, Uganda 2004-05

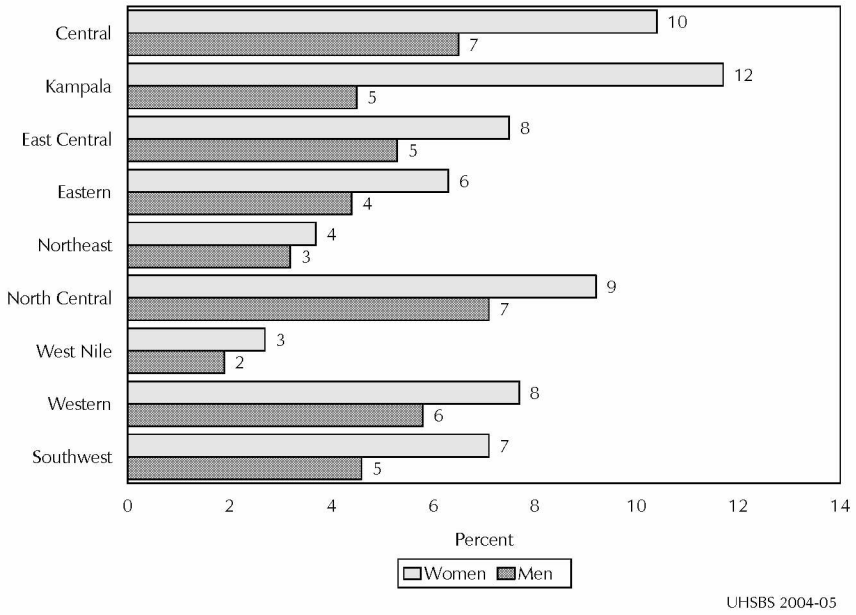
Background characteristic	Women 15-49		Men 15-49		Total	
	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested
Residence						
Urban	12.8	1,435	6.7	1,096	10.1	2,531
Rural	6.5	7,956	4.7	6,419	5.7	14,375
Region						
Central	10.2	1,565	6.6	1,357	8.5	2,921
Kampala	11.8	634	4.5	515	8.5	1,149
East Central	7.5	1,467	5.2	1,079	6.5	2,546
Eastern	6.2	813	4.4	724	5.3	1,538
Northeast	3.6	779	3.2	571	3.5	1,350
North Central	9.0	918	7.1	743	8.2	1,661
West Nile	2.7	906	1.9	690	2.3	1,597
Western	7.8	1,076	5.7	884	6.9	1,961
Southwest	7.1	1,232	4.4	952	5.9	2,183
Education						
No education	5.8	2,129	7.5	624	6.2	2,753
Primary incomplete	7.7	4,355	4.5	3,515	6.3	7,870
Primary complete	9.8	1,064	6.5	1,058	8.2	2,122
Secondary+	7.6	1,826	4.4	2,310	5.8	4,136
Employment						
Currently working	8.4	5,758	6.1	5,195	7.3	10,953
Not working	6.1	3,560	2.5	2,238	4.7	5,798
Wealth quintile						
Lowest	4.8	1,532	4.0	1,147	4.4	2,679
Second	6.6	1,911	4.2	1,541	5.5	3,453
Middle	6.7	1,760	5.1	1,418	6.0	3,177
Fourth	7.0	1,895	5.9	1,552	6.5	3,446
Highest	11.0	2,294	5.5	1,857	8.6	4,151
Ethnicity						
Baganda	10.1	1,672	5.8	1,304	8.2	2,976
Banyankore	7.6	966	5.9	776	6.9	1,742
Iteso	5.1	607	4.7	495	4.9	1,101
Lugbara/Madi	3.2	742	2.2	562	2.8	1,304
Basoga	5.6	893	5.6	685	5.6	1,577
Langi	11.3	478	7.3	432	9.4	910
Bakiga	8.5	634	4.1	538	6.5	1,172
Karimojong	2.1	284	1.1	188	1.7	472
Acholi	7.1	468	6.7	343	6.9	810
Bagisu/Sabiny	7.5	426	3.5	450	5.4	876
Alur/Jopadhola	8.0	484	4.3	414	6.3	899
Banyara	7.4	304	6.8	247	7.1	551
Batoro	16.4	230	12.8	198	14.8	428
All others	6.5	1,156	3.2	835	5.1	1,992
Religion						
Catholic	7.1	3,922	5.4	3,145	6.3	7,067
Anglican/Protestant	8.4	3,178	5.5	2,754	7.1	5,933
Other Christian	7.4	820	4.5	507	6.3	1,327
Muslim	6.5	1,294	3.0	974	5.0	2,268
Other	7.8	103	2.4	76	5.5	180
Total 15-49	7.5	9,391	5.0	7,515	6.4	16,906
Total 15-59	7.3	10,227	5.2	8,298	6.3	18,525

Note: Totals include some cases with missing information

The HIV epidemic shows regional variations (Figure 8.2). Central, Kampala, and North Central regions all have rates of infection above 8 percent. Regions with low HIV prevalence are West Nile (2 percent) and Northeast (4 percent). In all regions, women have a higher prevalence of HIV infection than men.

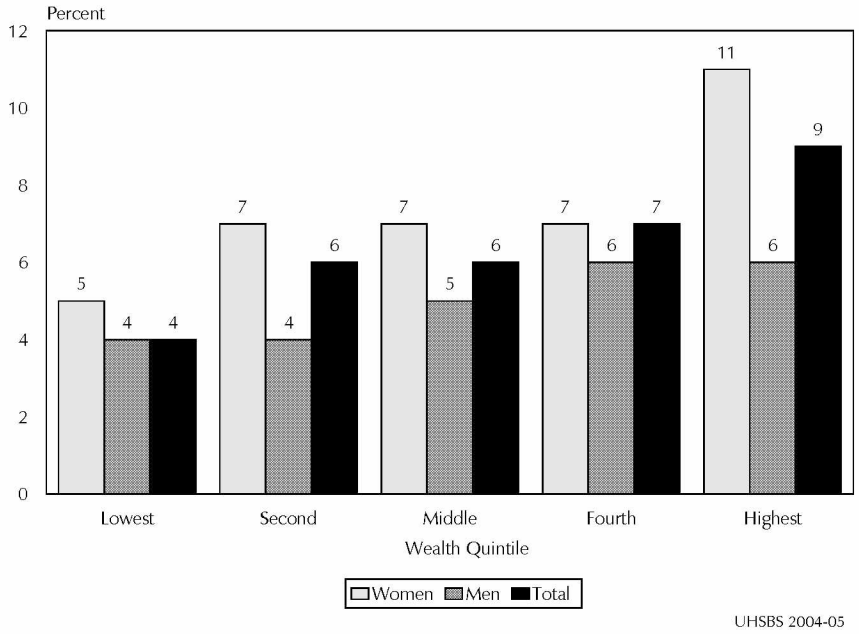
HIV prevalence shows an inconsistent relationship with the level of education. It is identical for those with no education and those with incomplete primary education, then it rises among those who completed primary only and then falls among those with at least some secondary education (Table 8.4). Moreover, the pattern for women and men differs. For men, prevalence is highest among those with no education, while women with no education are the least likely to be infected.

Figure 8.2 HIV Prevalence by Region



HIV prevalence is higher among those who are working (7 percent) than those who are not (5 percent). This is true for women and men. The data also show a gradual increase in HIV infection with wealth quintile (Figure 8.3). The rates rise from 4 percent among those in the lowest quintile to 9 percent among the wealthiest quintile. The increase occurs for both sexes, although among men, the infection rate falls slightly among those in the highest quintile.

Figure 8.3 **HIV Prevalence by Wealth Quintile**



There are large differentials in HIV infection by ethnic group. Survey data indicate that the Batoro are the most affected by the HIV epidemic, with 15 percent of adults infected. Rates are also high among the Langi (9 percent) and the Baganda (8 percent). Those with relatively low infection levels are the Karimojong (2 percent) and the Lugbara/Madi (3 percent). Differences in HIV infection by religion are minimal, with only slightly lower rates among Muslims than Christians.

8.6 HIV Prevalence by Sociodemographic Characteristics

HIV prevalence is related to marital status. Table 8.5 and Figure 8.4 show that those who are widowed are by far the most likely to be HIV infected. Almost one-third of women and men who have been widowed are HIV positive, compared with around 6 percent of those who are currently married. Those who are divorced or separated have an intermediate level of HIV infection (14 percent), while those who have never been in a marital union have a relatively low prevalence (2 percent).

A tiny fraction (less than 1 percent) of individuals who report never having been in union and never having had sex are HIV infected, suggesting either errors in reporting on sexual behaviour or non-sexual transmission of HIV infection, such as through blood transfusion or unsterile injections.

There is almost no difference in HIV prevalence for those in polygynous or monogamous marriages. Women who are not in a marital union (which includes those who are widowed, divorced, separated, or never married) are more likely to be HIV infected, while men who are not in a union are less likely to be infected.

Women who are not pregnant have a slightly higher prevalence of infection (8 percent) than those who are pregnant (7 percent). The HIV prevalence among women who are currently pregnant provides a useful benchmark for comparison with rates among pregnant women who are tested as part of the ANC sentinel surveillance system.

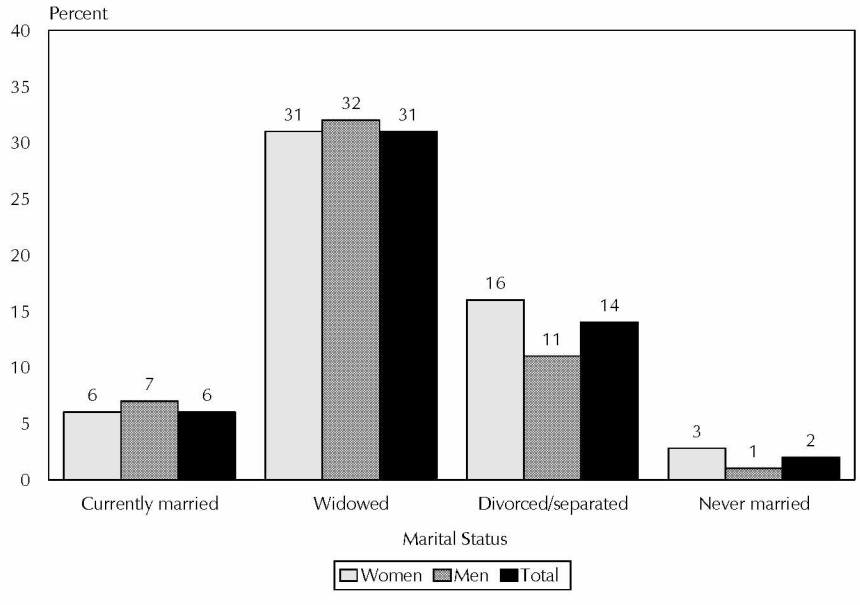
Table 8.5

HIV prevalence by sociodemographic characteristics, Uganda 2004-05

Sociodemographic characteristic	Women 15-49		Men 15-49		Total 15-49	
	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested	Percentage HIV positive	Number tested
Marital status						
Currently in union	5.9	5,977	6.8	3,973	6.3	9,950
Widowed[1]	31.2	557	32.2	94	31.4	651
Divorced/separated	16.0	742	10.8	500	13.9	1,241
Never in union	2.7	2,075	0.8	2,910	1.6	4,985
Ever had sex	5.6	816	1.2	1,584	2.7	2,400
Never had sex	0.8	1,259	0.2	1,327	0.5	2,585
Type of union						
In polygynous union	5.7	1,959	7.5	858	6.2	2,818
Not in polygynous union	6.0	4,018	6.6	3,115	6.3	7,133
Not currently in union	10.3	3,373	3.0	3,504	6.6	6,877
Currently pregnant						
Pregnant	6.5	1,068	na	na	na	na
Not pregnant/not sure	7.7	8,250	na	na	na	na
Birth in past 3 years						
None	8.5	4,854	na	na	na	na
Birth and ANC	6.0	3,866	na	na	na	na
Birth and no ANC	8.4	630	na	na	na	na
Total 15-49	7.5	9,391	5.0	7,515	6.4	16,906
Total 15-59	7.3	10,227	5.2	8,298	6.3	18,525

Note: Totals include a small number of cases with missing information.
ANC = antenatal care
na = Not applicable
[1] The category 'widowed' consists of those who are not currently married and who had a previous spouse who died. It may be slightly overestimated to the extent that respondents who are currently divorced but previously widowed are considered widowed instead of divorced.

Figure 8.4 HIV Prevalence by Marital Status



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The comparison is also made for women who gave birth in the three years before the survey and received ANC as opposed to those who did not or those who did not give birth during the time period. The data show that those who had ANC for a recent birth are slightly less likely to be HIV positive (6 percent) than those who either had a birth but did not receive ANC (8 percent) or did not have a birth (9 percent).

8.7 HIV Prevalence and Male Circumcision

Some research has shown a protective effect of male circumcision on the transmission of HIV. Lack of circumcision is considered a risk factor for HIV infection, in part because of physiological differences that increase the susceptibility to HIV infection among uncircumcised men (Agot et al., 2004; Auvert et al., 2001). In the UHSBS, men were asked whether they were circumcised. The data can be examined in relationship to HIV status.

As shown in Table 8.6, men who have been circumcised are slightly less likely to be HIV positive than those who are not circumcised (4 and 6 percent, respectively). The fact that this holds true for almost every sub-category of background characteristic implies that the pattern might be a result of the circumcision and not of the fact that circumcised men belong to a community or region that has a lower HIV prevalence for some reason that is unrelated to circumcision practices. For example, for most of the larger ethnic groups, HIV prevalence is lower among circumcised than uncircumcised men. Exceptions are the Lugbara/Madi, Bagisu/Sabiny, and Alur/Jopadhola, where rates are higher among circumcised men. More sophisticated analysis is needed before being able to determine conclusively that circumcision reduces the risk of HIV transmission.

Table 8.6

HIV prevalence among circumcised and uncircumcised men, according to background characteristics, Uganda 2004-05

Background characteristic	Circumcised men 15-49		Uncircumcised men 15-49	
	Percentage HIV positive	Number	Percentage HIV positive	Number
Age				
15-19	0.3	418	0.3	1,500
20-24	1.5	318	2.7	856
25-29	2.8	256	6.9	864
30-34	5.2	299	9.2	834
35-39	5.5	222	10.6	641
40-44	8.9	213	9.3	528
45-49	7.3	131	6.8	391
Residence				
Urban	6.2	392	7.0	703
Rural	3.1	1,467	5.2	4,910
Region				
Central	6.2	311	6.7	1,038
Kampala	2.2	195	5.9	320
East Central	3.1	367	6.4	705
Eastern	5.1	393	3.6	330
Northeast	(2.6)	27	3.3	537
North Central	*	19	7.0	720
West Nile	2.4	206	1.6	480
Western	2.3	267	7.1	612
Southwest	0.0	73	4.8	872
Education				
No education	2.9	142	9.1	466
Primary incomplete	3.2	841	4.9	2,653
Primary complete	5.5	235	6.8	822
Secondary+	3.9	638	4.6	1,666
Wealth quintile				
Lowest	0.9	213	4.7	922
Second	4.7	294	4.1	1,237
Middle	1.4	352	6.4	1,057
Fourth	5.2	383	6.1	1,162
Highest	4.7	616	6.0	1,235
Ethnicity				
Baganda	3.6	402	6.7	903
Banyankore	2.6	68	6.1	707
Iteso	(6.8)	35	4.5	458
Lugbara/Madi	2.8	213	1.9	349
Basoga	2.7	236	7.2	449
Langi	*	8	7.2	424
Bakiga	(10.4)	42	3.6	495
Karimojong	*	11	1.2	177
Acholi	*	18	6.5	325
Bagisu/Sabiny	4.3	359	0.0	91
Alur/Jopadhola	6.0	73	3.9	339
Banyara	(7.0)	38	6.8	209
Batoro	(7.8)	44	14.3	153
All others	1.8	308	4.0	526
Religion				
Catholic	7.3	303	5.1	2,837
Anglican/ rotestant	3.4	475	6.0	2,279
Other Christian	1.9	111	5.2	396
Muslim	3.1	950	*	24
Other	*	15	2.9	61
Total 15-49	3.7	1,858	5.5	5,613
Total 15-59	3.8	2,047	5.6	6,200

Note: Totals include some cases with missing information. Numbers in parentheses are based on 25-49 unweighted cases; an asterisk refers to a figure based on fewer than 25 cases that has been suppressed.

8.8 HIV Prevalence by Sexual Risk Behaviours

Table 8.7 examines the prevalence of HIV infection according to several sexual behaviours among respondents who have ever had sexual intercourse. In reviewing these results, it is important to remember that responses about sexual risk behaviours may be subject to reporting bias. Also, sexual behaviour in the past 12 months may not adequately reflect lifetime sexual risk. Nor is it possible from the data to know the sequence of events, e.g., whether condom use predates or postdates HIV transmission.

The data show a slight tendency for HIV risk to be lower for those who initiate sex at a later age, though the relationship is only evident among women. For example, HIV prevalence is higher among women who first had sex before reaching age 15 (11 percent) and steadily declines to only 6 percent among women who delayed first sex until age 20 or older. Among men, the opposite pattern prevails, although the relationship is muted.

Table 8.7
HIV prevalence by sexual behaviour characteristics, Uganda 2004-05

Sexual behaviour characteristic	Women 15-49 who ever had sex		Men 15-49 who ever had sex		Total 15-49 who ever had sex	
	Percentage HIV positive	Number	Percentage HIV positive	Number	Percentage HIV positive	Number
Age at first sex						
<15	11.4	1,417	4.3	905	8.6	2,322
15-17	9.1	3,652	6.4	2,193	8.1	5,845
18-19	7.5	1,473	6.2	1,442	6.9	2,915
20+	5.6	1,549	6.6	1,611	6.1	3,160
Higher-risk sex in past 12 months						
Had higher-risk sex	15.4	1,068	6.3	1,947	9.6	3,015
Had sex, not higher risk	6.1	5,871	6.2	3,331	6.2	9,202
No sex in past 12 months	14.4	1,152	4.9	873	10.3	2,025
Number of partners in past 12 months						
0	14.5	1,149	4.7	867	10.3	2,015
1	7.3	6,673	5.5	3,709	6.7	10,382
2	14.0	249	7.8	1,198	8.9	1,447
3+	*	21	9.2	377	9.1	398
Number of higher-risk partners in past 12 months						
0	7.5	7,024	6.0	4,187	6.9	11,211
1	15.1	966	6.3	1,478	9.7	2,443
2	20.8	87	5.5	326	8.7	413
3+	*	14	8.8	160	8.5	174
Any condom use ever						
Used condom	12.2	2,454	6.9	3,081	9.3	5,535
Never used condom	6.9	5,638	5.3	3,070	6.4	8,707
Condom use at last sex in past 12 months[1]						
Used condom	14.7	631	5.9	841	9.7	1,472
Did not use condom	6.8	6,306	6.4	4,429	6.6	10,734
Condom use at last higher-risk sex in past 12 months[1]						
Used condom	15.0	494	5.0	1,034	8.3	1,527
Did not use condom	15.8	572	7.9	905	11.0	1,477
No higher-risk sex	6.1	5,871	6.2	3,331	6.2	9,202
Total 15-49	8.5	8,091	6.1	6,151	7.5	14,242
Total 15-59	8.2	8,924	6.1	6,928	7.3	15,851

Note: Higher-risk sex refers to sex with a nonmarital, noncohabiting partner. An asterisk refers to a figure based on fewer than 25 unweighted cases that has been suppressed.
[1] Refers to those who had sex in the past 12 months.

Women who said they had higher-risk sex (i.e., sex with a nonmarital, noncohabiting partner) in the year preceding the survey have a higher prevalence of HIV infection (15 percent) than those who said they had sex but not higher-risk sex (6 percent). Interestingly, women who had ever had sex but who said they had not had sex during the 12 months preceding the survey had almost as high prevalence of HIV infection (14 percent) as those who had higher-risk sex. This might be a result of the fact that those who have ever had sex but not during the past 12 months are less likely to be in a marital union, which as seen in Table 8.5, is associated with higher HIV prevalence for women. For men, there is almost no difference by higher-risk sex categories. Prevalence of HIV infection is 6 percent among men who reported having higher-risk sex in the past 12 months, as well as for those who had sex but not higher-risk sex, and it is 5 percent for those did not have sex in the past year.

The number of sexual partners in the 12 months before the survey shows the expected positive relationship with HIV prevalence for men, but not for women. Among men, HIV prevalence increases gradually as the number of partners increases, from 5 percent among those who did not have sex in the past 12 months to 9 percent among men who had three or more partners in the past year. For women, those who did not have sex in the past year were as likely to be HIV-positive as those who had two sexual partners in the past 12 months.

Table 8.7 also shows data on HIV infection levels by the number of higher-risk partners in the past 12 months. For women, HIV prevalence increases as the number of recent higher-risk sexual partners increases, while for men, there is only a weak positive association. Sexually experienced women who report having no higher-risk sex partners in the past 12 months have a prevalence of 8 percent, while prevalence is 15 and 21 percent, respectively, for those who had one or two or more higher-risk sex partners in the past 12 months. For men, prevalence of HIV infection is 6 percent among those with 0, 1, or 2 sexual partners in the past 12 months, and increases to 9 percent among those who report having three or more higher-risk sexual partners.

When used consistently and correctly, condoms are a very effective way of preventing HIV infection, sexually transmitted infections, and unwanted pregnancy. Results from the UHSBS do not show any consistent pattern of HIV infection levels by condom use behaviour. Among women, HIV prevalence is higher among those who have ever used a condom (12 percent) than among those who have not (7 percent), and is also higher among those who used a condom at last sex (15 percent) than among those who did not (7 percent). It is about equally as high among those who used a condom at last higher-risk sex as among those who did not (15 and 16 percent, respectively). Among men, differences are much smaller, though HIV prevalence is somewhat lower among men who used a condom at the last higher-risk sex (5 percent) than among those who did not (8 percent). It is difficult to sort out the direction of the relationship between condom use and HIV infection. Condoms can be used to protect HIV-negative users from becoming infected, but they can also be used to by HIV-positive individuals to protect their partners. Low prevalence of HIV infection among those reported to have not used a condom at last sex may be associated with the type of relationship; a majority of those who did not use a condom at last sex could be having sex with a husband or wife.

8.9 HIV Prevalence by Other Characteristics Related to HIV Risk

Table 8.8 presents variation in HIV prevalence by a number of other characteristics related to HIV risk behaviours among men and women who have ever had sex. As expected, women and men with a recent history of a sexually transmitted infection (STI) or STI symptoms in the 12 months preceding the survey have higher rates of HIV infection than those with none (13 and 5 percent, respectively). The same pattern holds for women and men.

Both women and men who have been tested for HIV in the past are more likely to be HIV positive than those who have never been tested. Among those who have ever had sex, the prevalence of HIV infection among women and men who have ever had an HIV test is 11 percent, compared with 7 percent for those who have never been tested for HIV. Among women who have ever had sex, the level of HIV infection is 14 percent among those who have ever been tested for HIV, compared with 8 percent among those who have never been tested. Among men, 8 percent of those previously tested are HIV positive, compared with 6 percent of those who have never been tested (Table 8.8).

Table 8.8
HIV prevalence by other characteristics related to risk, Uganda 2004-05

Characteristic	Women 15-49 who ever had sex		Men 15-49 who ever had sex		Total 15-49 who ever had sex	
	Percentage HIV positive	Number of women	Percentage HIV positive	Number of men	Percentage HIV positive	Number
Had STI in past 12 months						
Had STI or STI symptoms	13.4	2,716	12.9	1,310	13.3	4,026
No STI, no symptoms	6.1	5,375	4.2	4,841	5.2	10,216
Prior HIV testing status						
Ever tested	13.8	1,300	7.5	857	11.3	2,157
Never tested	7.5	6,792	5.9	5,293	6.8	12,085
Total	8.5	8,091	6.1	6,151	7.5	14,242

STI = Sexually transmitted infection

Table 8.9 provides further information about the relationship between prior HIV testing and the actual HIV status of respondents. The results show that many individuals who are HIV positive have not been tested and do not know their status. Eighty percent of infected respondents (77 percent of infected women and 85 percent of infected men) do not know their HIV status, either because they never got tested or because they were tested and did not receive their HIV test results.

Table 8.9
HIV prevalence by prior HIV testing status, Uganda 2004-05

Prior HIV testing status	Women 15-49		Men 15-49		Total	
	Percentage HIV positive	Percentage HIV negative	Percentage HIV positive	Percentage HIV negative	Percentage HIV positive	Percentage HIV negative
Ever tested, knows results of last test	23.5	11.8	15.0	10.3	20.5	11.1
Ever tested, does not know results	2.2	2.0	2.0	1.6	2.1	1.8
Never tested	74.4	86.2	83.0	88.1	77.4	87.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number	701	8,634	377	7,084	1,079	15,718

8.10 PREVALENCE OF HIV AMONG YOUTH

Generally, cases of HIV infection among youth aged 15-24 represent more recent infections and serve as an important indicator for detecting trends in both prevalence and incidence. An attempt was made to estimate incidence by subjecting all HIV-positive samples to the BED-assay. However, recent evidence suggests that this test overestimates incidence (UNAIDS, 2005). Consequently, the results are not shown here and will instead be subjected to further analysis. Table 8.10 shows HIV prevalence levels among youth according to several indicators of sexual behaviour. Prevalence of HIV for the 15-24 age group is 3 percent. However, there is a sizeable gender gap. Prevalence among women age 15-24 years is 4 percent, while among men, it is only 1 percent. Prevalence rises rapidly with age, especially among women.

Urban youth—both female and male—are more likely to be infected than those in rural areas (5 percent versus 3 percent). Young women and men in Kampala, Western, and North Central regions are more likely to be HIV positive than those living elsewhere, especially those in West Nile and Northeast regions.

Table 8.10
HIV prevalence among youth aged 15-24, Uganda 2004-05

Background characteristic	Women 15-24		Men 15-24		Total 15-24	
	Percent HIV positive	Number of women	Percent HIV positive	Number of men	Percent HIV positive	Number
Age						
15-17	1.9	1,293	0.3	1,214	1.1	2,508
18-19	3.9	757	0.2	707	2.1	1,465
20-22	5.5	1,174	2.3	762	4.3	1,935
23-24	7.7	623	2.5	414	5.7	1,036
Residence						
Urban	6.9	694	1.8	506	4.8	1,200
Rural	3.8	3,153	0.9	2,591	2.5	5,744
Region						
Central	4.8	681	1.7	602	3.4	1,284
Kampala	6.3	324	0.6	248	3.8	572
East Central	5.0	620	0.8	445	3.3	1,064
Eastern	2.9	314	1.3	304	2.1	618
Northeast	2.8	286	0.4	198	1.8	484
North Central	5.1	323	1.9	244	3.7	566
West Nile	1.3	369	0.4	306	0.9	676
Western	5.5	442	1.5	333	3.8	774
Southwest	4.2	488	0.6	417	2.5	906
Marital status						
Currently in union	5.7	1,673	3.9	415	5.3	2,088
Widowed	(38.2)	25	*	1	(39.7)	26
Divorced/separated	10.7	227	7.5	99	9.7	327
Never in union	2.0	1,922	0.4	2,582	1.1	4,504
Ever had sex	4.1	687	0.5	1,302	1.7	1,989
Never had sex	0.9	1,235	0.2	1,281	0.5	2,515
Higher-risk sex in past 12 months						
Had higher-risk sex	6.8	598	1.4	951	3.5	1,549
Had sex, not higher risk	5.7	1,690	4.2	328	5.5	2,018
No sex in past 12 months	5.7	325	0.6	538	2.5	862
Number of partners in past 12 months [1]						
0	5.8	324	0.6	537	2.6	860
1	5.9	4,337	1.6	1,827	4.6	6,165
2+	8.7	237	3.5	726	4.8	963
Number of higher-risk partners in past 12 months [1]						
0	5.7	3,705	2.6	1,191	5.0	4,895
1	6.5	1,088	0.9	1,395	3.3	2,483
2+	10.9	105	2.7	504	4.1	609
Any condom use ever						
Used condom	6.9	1,243	1.9	1,105	4.5	2,348
Never used condom	5.2	1,369	1.3	711	3.9	2,081
Condom use at last sex in past 12 months [2]						
Used condom	6.4	350	0.6	491	3.0	841
Did not use condom	6.0	1,936	3.1	782	5.2	2,717
Condom use at first sex [1]						
Used condom	5.9	761	1.7	586	4.1	1,348
Did not use condom	6.0	1,851	1.7	1,230	4.3	3,082
Total	4.3	3,847	1.1	3,097	2.9	6,944

Note: Higher-risk sex refers to sex with a nonmarital, noncohabiting partner. Numbers in parentheses are based on 25-49 unweighted cases; an asterisk refers to a figure based on fewer than 25 unweighted cases that has been suppressed.
[1] Refers to those who have ever had sex.
[2] Refers to those who had sex in the past 12 months.

HIV infection is greatest among the small number of youth who are widowed, divorced, or separated, followed by those who are currently married. The lowest levels of infection are found among young people who have never married. Differences in HIV prevalence by whether or not the respondent had higher-risk sex in the past 12 months are difficult to interpret. Among young women, those who had higher-risk sex are slightly more likely to be HIV positive than those who had non-higher-risk sex. The opposite is true for young men. Similarly, there is some evidence that having more sexual partners and more higher-risk sexual partners is related to higher infection rates. However, this is not uniformly true, especially among young men. Condom use also has an inconsistent relationship with HIV prevalence.

8.11 HIV Prevalence among Cohabiting Couples

As part of the 2004-05 UHSBS, almost 4,000 cohabiting couples were both tested for HIV. Results show that for 91 percent of cohabiting couples, both partners are HIV negative, while for 3 percent, both partners are HIV positive (Table 8.11). Data also show that 5 percent of cohabiting couples are discordant, that is one partner is infected and the other is not. In 3 percent of couples, the male partner is infected and the woman is not, while in another 2 percent of couples, the woman is infected and the man is not. Discordance is more common among urban couples than rural couples and is especially high among couples who disagree as to whether their union is monogamous or polygynous. There is a much higher level of discordant couples in Kampala than in other regions. Differences by other background characteristics are not large.

The fact that there are more cohabiting couples who are discordant for HIV than there are cohabiting couples who are both infected, represents an unmet HIV prevention need for the country. This is because the vast majority of these cohabiting couples do not mutually know their HIV status and therefore are not empowered to take action to prevent further spread of the disease.

Table 8.11

HIV prevalence among cohabiting couples, Uganda 2004-05

Background characteristic	Both partners HIV positive	Man positive, woman negative	Woman positive, man negative	Both partners HIV negative	Other	Total	Number
Woman's age							
15-19	4.1	3.2	2.1	90.7	0.0	100.0	232
20-29	3.4	2.9	1.8	91.0	0.9	100.0	1,731
30-39	3.7	2.8	2.2	91.0	0.3	100.0	1,209
40-59	2.7	2.4	1.2	93.4	0.3	100.0	725
Man's age							
15-19	*	*	*	*	*	100.0	21
20-29	3.0	2.0	2.6	91.6	0.8	100.0	923
30-39	3.4	3.2	1.7	91.1	0.5	100.0	1,452
40-59	3.7	2.9	1.4	91.6	0.4	100.0	1,500
Type of union							
Monogamous	3.7	2.5	1.4	91.9	0.5	100.0	2,742
Polygynous	2.4	3.3	2.0	91.9	0.4	100.0	859
Couple disagrees on status	3.9	4.1	5.1	86.0	0.9	100.0	296
Residence							
Urban	6.5	3.9	4.0	85.3	0.3	100.0	342
Rural	3.1	2.7	1.6	92.0	0.6	100.0	3,555
Region							
Central	4.5	4.4	1.8	88.1	1.2	100.0	575
Kampala	6.3	2.3	5.1	86.4	0.0	100.0	119
East Central	2.5	3.2	2.5	91.3	0.5	100.0	576
Eastern	3.7	2.4	1.7	91.8	0.5	100.0	422
Northeast	1.3	2.1	2.2	94.4	0.1	100.0	393
North Central	3.2	4.0	0.8	91.2	0.8	100.0	452
West Nile	1.0	0.7	0.7	97.4	0.2	100.0	368
Western	4.0	2.7	2.7	90.5	0.2	100.0	509
Southwest	5.3	2.1	1.0	90.8	0.8	100.0	482
Woman's education							
No education	2.7	2.0	1.5	93.4	0.5	100.0	1,141
Primary incomplete	3.6	3.4	1.5	90.9	0.5	100.0	1,897
Primary complete	3.8	1.1	2.9	90.6	1.5	100.0	407
Secondary+	4.0	3.8	2.7	89.5	0.0	100.0	444
Man's education							
No education	3.3	1.7	1.0	93.4	0.7	100.0	471
Primary incomplete	3.2	2.7	2.0	91.6	0.5	100.0	1,859
Primary complete	3.5	3.4	1.4	90.5	1.2	100.0	659
Secondary+	3.8	3.0	2.3	90.9	0.0	100.0	897
Wealth quintile							
Lowest	2.2	1.9	0.8	94.8	0.3	100.0	688
Second	2.0	3.0	1.6	92.7	0.6	100.0	847
Middle	3.9	2.8	1.7	90.9	0.8	100.0	853
Fourth	3.9	3.5	2.0	90.4	0.2	100.0	843
Highest	5.2	2.6	3.1	88.3	0.8	100.0	665
Total	3.4	2.8	1.8	91.4	0.5	100.0	3,896

Note: Data refer to only those couples in which both partners were tested. An asterisk indicates a figure that is based on fewer than 25 cases that has been suppressed.

8.12 HIV Prevalence among Children Under Five

One of the objectives of the UHSBS was to ascertain the HIV prevalence among children under five. As mentioned in Chapter 1, this involves more detailed testing, because children under 18 months whose mothers are HIV positive are likely to test positive on standard ELISA HIV tests even if they are not themselves carrying the virus. To get accurate data for these young children, it is necessary to do a confirmatory test on all positive cases using a polymerase chain reaction test.

Table 8.12 shows that of all the eligible children under age five, a valid HIV test result was obtained for 88 percent. Six percent of children were not tested because their parent or guardian refused the test, while 4 percent were not available for testing. For 3 percent of eligible children, a test was not done because of technical problems or because the sample was lost.

Differences in coverage levels for children are not large, although the response rates in North Central and Kampala were particularly low (76-77 percent). Coverage is also lower among children whose mothers were not tested and those whose mothers had died.

Table 8.13 shows that only a tiny fraction of children are HIV positive—less than 1 percent. Moreover, there are few differentials by background characteristics of the child or the mother. Prevalence is slightly higher among children in urban areas, and specifically Kampala, than in other areas. Prevalence is also higher among children whose mothers are widowed, divorced, or separated, because as shown in previous tables, HIV infection is also higher among these mothers. In fact, the most striking figure in Table 8.13 is that HIV prevalence is very high (10 percent) among children whose mothers are also HIV positive. Because mother-to-child transmission is by far the most likely means of transmission of HIV infection among children, this is hardly surprising. Only a tiny fraction (one-tenth of 1 percent) of children whose mothers are HIV negative are themselves HIV positive. HIV prevalence is also relatively high (4 percent) among children whose mothers have died.

Table 8.12

Coverage of HIV testing among eligible children under age five, Uganda 2004-05

Background characteristic	HIV testing status: Tested with valid result	Refused	Absent/ other	Missing/ technical problem	Total	Number of children
Age						
<18 months	87.4	6.9	3.1	2.5	100.0	3,099
18-59 months	88.0	5.3	4.2	2.5	100.0	6,418
Sex						
Male	87.8	5.5	4.0	2.6	100.0	4,745
Female	87.7	6.1	3.7	2.4	100.0	4,795
Residence						
Urban	82.5	8.8	5.6	3.1	100.0	1,117
Rural	88.5	5.4	3.6	2.4	100.0	8,423
Region						
Central	89.6	6.7	1.7	2.0	100.0	940
Kampala	77.1	11.3	7.5	4.1	100.0	603
East Central	97.2	1.0	1.6	0.2	100.0	1,206
Eastern	89.2	7.3	2.3	1.3	100.0	1,014
Northeast	84.4	9.3	4.6	1.8	100.0	1,291
North Central	75.8	8.7	11.8	3.7	100.0	1,138
West Nile	89.1	2.8	3.0	5.0	100.0	1,314
Western	92.2	4.1	2.0	1.7	100.0	1,068
Southwest	91.4	4.0	1.2	3.3	100.0	966
Wealth quintile						
Lowest	86.5	6.3	4.7	2.5	100.0	1,980
Second	87.7	6.1	4.1	2.1	100.0	2,196
Middle	88.7	5.0	3.7	2.6	100.0	1,957
Fourth	90.4	4.9	2.4	2.4	100.0	1,693
Highest	85.8	6.8	4.3	3.2	100.0	1,714
Mother's HIV status						
Positive	94.2	3.3	1.4	1.1	100.0	361
Negative	93.0	2.9	2.3	1.8	100.0	7,271
Missing/Not interviewed	66.8	17.6	10.2	5.5	100.0	1,908
Mother's survival						
Alive, not sick	88.0	6.0	3.7	2.4	100.0	8,017
Alive, sick	86.6	7.4	4.5	1.5	100.0	202
Alive, illness status missing/ not in household	87.6	4.5	4.7	3.3	100.0	1,136
Dead	78.4	5.9	10.8	4.9	100.0	102
Missing	84.3	7.2	2.4	6.0	100.0	83
Total	87.8	5.8	3.9	2.5	100.0	9,540

Table 8.13

HIV prevalence among children under age five, Uganda 2004-05

Background characteristic	Percentage HIV positive	Number of children
Age		
<18 months	1.0	2,666
18-59 months	0.5	5,689
Sex		
Male	0.7	4,148
Female	0.7	4,226
Residence		
Urban	1.5	814
Rural	0.6	7,560
Region		
Central	0.8	1,444
Kampala	2.2	292
East Central	1.0	1,398
Eastern	0.6	827
Northeast	0.4	758
North Central	0.8	889
West Nile	0.1	732
Western	0.5	1,008
Southwest	0.5	1,026
Mother's education		
No education	0.5	1,866
Primary incomplete	0.6	3,688
Primary complete	1.1	815
Secondary+	0.9	838
Missing/not interviewed	0.7	1,166
Mother's marital status		
Never married	0.6	185
Married	0.5	6,284
Widowed	2.5	255
Divorced/separated	2.1	407
Missing/not interviewed	0.6	1,244
Wealth quintile		
Lowest	0.4	1,481
Second	0.4	1,891
Middle	0.4	1,802
Fourth	1.0	1,683
Highest	1.2	1,517
Mother's HIV status		
Positive	10.2	364
Negative	0.1	6,671
Missing/not interviewed	0.8	1,339
Mother's survival		
Alive, not sick	0.7	6,979
Alive, sick	0.7	179
Alive, illness status missing/ not in household	0.4	1,069
Dead	4.4	80
Don't know/missing	0.0	67
Total	0.7	8,374

SYPHILIS PREVALENCE 9

9.1 KEY FINDINGS

- Three percent of Ugandan adults aged 15-49 have syphilis, with equal prevalence among women and men.
- There is virtually no urban-rural difference in syphilis prevalence.
- Syphilis is most common in Northeast and North Central regions (5 percent) and least common in West Nile region (1 percent).
- Unlike HIV prevalence, syphilis infection declines slightly with increasing education and wealth.
- Seven percent of cohabiting couples in Uganda are discordant, i.e., one partner is syphilis positive and the other is negative.

9.2 INTRODUCTION

Obtaining a reliable estimate of the level of syphilis infection among the adult population in Uganda was one of the main objectives of the UHSBS. Syphilis has been demonstrated to greatly enhance HIV transmission, most likely because the presence of genital ulcers provides an easy path for the entry of the HIV virus.

As part of the informed consent statement used in the UHSBS, respondents were asked if they would agree to provide a venous blood sample for testing for HIV, syphilis, herpes, and hepatitis. They were also told that they could receive the results of their syphilis test the following day and be provided with free treatment at home if they tested positive. Syphilis is widely viewed as being a common illness. It also is generally not regarded with the stigma that it often carries in other settings (Yoder et al., 2006). A qualitative study that was linked to the home-based follow-on survey after the UHSBS found that survey respondents were generally pleased at being offered free testing and treatment for syphilis; this was perceived by respondents as an incentive to participate (Yoder et al., 2006).

9.3 COVERAGE OF SYPHILIS TESTING

Unlike HIV, syphilis testing requires a venous blood sample and cannot be implemented using dried blood spot samples. As shown in Table 9.1, 97 percent of adults who gave blood provided a venous sample and 3 percent gave a dried blood spot. Differences by gender were minimal, but respondents in urban areas and in Kampala who agreed to provide blood for testing were more likely than others to agree to provide only a blood spot (7 and 9 percent, respectively).

Table 9.1

Type of blood sample provided by women and men aged 15-49 by residence and region, Uganda 2004-05 (unweighted percent distribution)

Type of blood sample	Residence		Region									Total
	Urban	Rural	Central	Kampala	East Central	Eastern	North-east	North Central	West Nile	Western	South-west	
						WOMEN						
Venous	91.5	97.3	96.3	89.3	98.8	96.5	96.7	95.1	97.2	97.0	98.4	96.3
Blood spot	8.0	2.3	3.2	10.4	0.9	2.9	2.9	4.6	2.3	2.5	1.1	3.3
Other, missing	0.5	0.4	0.5	0.3	0.4	0.6	0.3	0.3	0.6	0.5	0.5	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number giving blood	1,667	7,756	876	969	1,142	857	1,192	958	1,420	1,008	1,001	9,423
						MEN						
Venous	94.7	97.7	97.2	92.9	98.8	96.6	96.7	95.3	98.3	99.3	98.9	97.2
Blood spot	5.1	1.7	2.2	6.9	1.1	2.6	3.0	4.1	1.2	0.2	0.6	2.3
Other, missing	0.2	0.5	0.6	0.1	0.1	0.8	0.3	0.6	0.5	0.5	0.5	0.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number giving blood	1,225	6,288	772	709	857	769	869	781	1,109	861	786	7,513
						TOTAL						
Venous	92.9	97.5	96.7	90.8	98.8	96.6	96.7	95.2	97.7	98.1	98.6	96.7
Blood spot	6.8	2.1	2.7	8.9	1.0	2.8	3.0	4.4	1.8	1.4	0.9	2.9
Other, missing	0.3	0.5	0.5	0.2	0.3	0.7	0.3	0.5	0.6	0.5	0.5	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number giving blood	2,892	14,044	1,648	1,678	1,999	1,626	2,061	1,739	2,529	1,869	1,787	16,936

9.4 SYPHILIS PREVALENCE BY AGE AND SEX

Survey results indicate that 3 percent of Ugandan adults are currently infected with syphilis (Table 9.2 and Figure 9.1), with the same level among women and men aged 15-49. Syphilis is slightly more common among younger women than men, but among those aged 30 and over, the disease is more prevalent among men than women.

Prevalence for both women and men generally increases with age. Among women, the highest level occurs at ages 50-54 (6 percent), while among men, the highest rate is at ages 45-49 (9 percent).

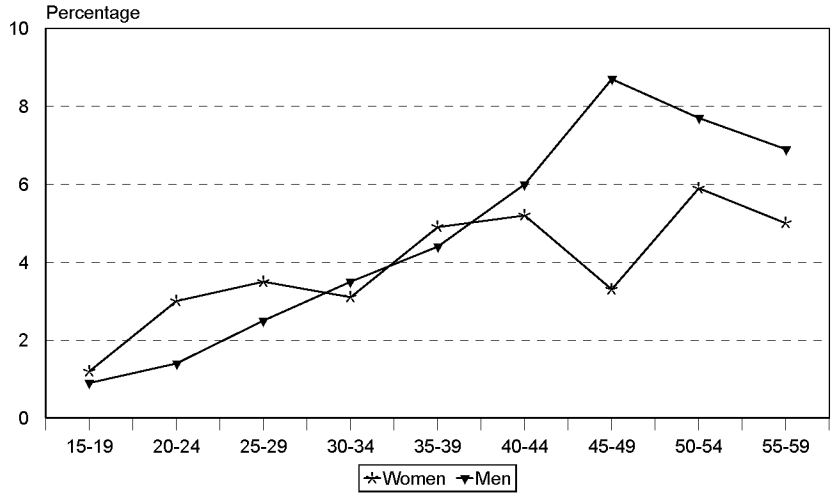
Table 9.2

Syphilis prevalence by age, Uganda 2004-05

Age	Women		Men		Total	
	Percentage positive for syphilis	Number tested	Percentage positive for syphilis	Number tested	Percentage positive for syphilis	Number tested
15-19	1.3	1,979	0.9	1,890	1.1	3,869
20-24	3.0	1,752	1.4	1,147	2.4	2,899
25-29	3.4	1,615	2.5	1,091	3.0	2,707
30-34	3.0	1,339	3.5	1,110	3.3	2,450
35-39	4.9	1,001	4.4	842	4.7	1,843
40-44	5.1	789	6.0	731	5.5	1,520
45-49	3.4	604	8.9	510	5.9	1,114
50-54	5.8	496	7.8	442	6.7	938
55-59	4.9	310	6.8	313	5.9	623
Total 15-49	3.1	9,079	3.1	7,323	3.1	16,401
Total 15-59	3.3	9,885	3.5	8,078	3.4	17,963

The prevalence of current syphilis infection as measured in the survey is substantially lower than that found in a study of 12,800 rural residents aged 15-59 in Rakai, Uganda; that study found that 10 percent of adults were positive for syphilis (Paxton et al., 1998).

Figure 9.1 Syphilis Prevalence by Sex and Age



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9.5 Prevalence of Syphilis by Background Characteristics

Unlike HIV infection—which is more common among urban than rural residents—there is virtually no urban-rural difference in the level of infection with syphilis (Table 9.3). Regional variations also differ from those for HIV infection. Whereas Northeast has one of the lowest levels of HIV infection, it shows the highest level of syphilis infection (5 percent), followed by North Central region (5 percent). West Nile has the lowest level of both HIV and syphilis infection. However, Kampala has one of the highest levels of HIV infection and one of the lowest levels of syphilis infection (2 percent). It should be noted that the regional differences for syphilis infection are small. It is also worth noting that although syphilis facilitates HIV infection and thus might be expected to be highly correlated with HIV infection, unlike HIV, it is highly treatable. Therefore, differentials in syphilis infection might be expected to be different from HIV infection, since those who have better access to health care can easily be treated for syphilis.

Syphilis prevalence declines with the level of education for both women and men. It is slightly higher among those who are working (4 percent) than those who are not (2 percent). The data also show a steady decline in syphilis infection with wealth quintile.

Differences in syphilis infection by ethnic group show that the Karimojong are the most affected, with 9 percent testing positive. Again, this is the opposite of the results for HIV, which show the Karimojong with the lowest level of HIV infection. The Lugbara/Madi are the least likely to have syphilis (1 percent), followed by the Basoga and Baganda (2 percent). Differences in syphilis infection by religion are minimal.

Table 9.3

Syphilis prevalence by background characteristics, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49		Total	
	Percent positive for syphilis	Number tested	Percent positive for syphilis	Number tested	Percent positive for syphilis	Number tested
Residence						
Urban	2.3	1,326	2.8	1,043	2.5	2,369
Rural	3.2	7,753	3.1	6,280	3.2	14,033
Region						
Central	4.0	1,513	2.9	1,318	3.5	2,831
Kampala	1.9	566	2.3	480	2.0	1,046
East Central	2.3	1,455	1.8	1,066	2.1	2,521
Eastern	2.8	785	3.1	706	3.0	1,491
Northeast	5.0	754	4.8	549	4.9	1,303
North Central	3.4	874	5.9	711	4.5	1,586
West Nile	1.2	877	1.6	678	1.4	1,554
Western	4.4	1,040	3.8	870	4.2	1,910
Southwest	2.6	1,215	2.5	944	2.6	2,159
Education						
No education	4.5	2,068	5.5	605	4.7	2,673
Primary incomplete	3.0	4,236	3.6	3,445	3.3	7,681
Primary complete	2.7	1,029	2.2	1,032	2.4	2,062
Secondary+	1.9	1,731	2.0	2,231	1.9	3,962
Employment						
Currently working	3.7	5,567	3.8	5,052	3.7	10,620
Not working	2.2	3,442	1.4	2,190	1.9	5,632
Wealth quintile						
Lowest	4.6	1,480	4.1	1,117	4.4	2,597
Second	3.5	1,872	3.1	1,515	3.3	3,386
Middle	3.3	1,725	3.4	1,386	3.4	3,111
Fourth	2.8	1,846	2.9	1,522	2.9	3,368
Highest	1.9	2,157	2.3	1,783	2.1	3,939
Ethnicity						
Baganda	2.2	1,598	2.7	1,260	2.4	2,859
Banyankore	3.0	941	2.2	756	2.7	1,696
Iteso	2.7	593	2.9	480	2.8	1,074
Lugbara/Madi	0.6	721	1.3	554	0.9	1,275
Basoga	1.6	881	1.9	674	1.8	1,555
Langi	3.3	466	5.0	416	4.1	882
Bakiga	4.0	613	2.9	530	3.5	1,142
Karimojong	9.6	269	7.2	175	8.6	444
Acholi	4.2	441	6.9	326	5.3	767
Bagisu/Sabiny	3.3	412	3.0	445	3.1	857
Alur/Jopadhola	4.4	467	3.5	403	4.0	870
Banyara	2.5	291	2.8	240	2.6	531
Batoro	4.7	221	5.5	196	5.1	417
All others	4.4	1,121	3.0	819	3.8	1,940
Religion						
Catholic	3.8	3,773	3.6	3,073	3.7	6,846
Anglican/Protestant	2.5	3,083	2.5	2,672	2.5	5,756
Other Christian	3.3	802	3.7	499	3.5	1,301
Muslim	2.2	1,251	2.6	947	2.4	2,199
Other	7.6	100	6.6	74	7.2	175
Total 15-49	3.1	9,079	3.1	7,323	3.1	16,401
Total 15-59	3.3	9,885	3.5	8,078	3.4	17,963

Note: Totals include some cases with missing information

9.6 SYPHILIS PREVALENCE BY SOCIODEMOGRAPHIC CHARACTERISTICS

Syphilis prevalence varies by marital status. Table 9.4 shows that those who are widowed are the most likely have syphilis (5 percent), while those who have never been in union are the least likely (1 percent). The fact that those who say they have never had sex are equally as likely to have syphilis as those who have never married but have had sex (1 percent for both) is disturbing and may reflect underreporting of sexual experience, nonsexual transmission of the disease, and/or testing errors.

There are no significant differences in syphilis prevalence by type of union (polygynous or not), or for women, by whether they are pregnant or not, or whether they received antenatal care for a birth in the three years preceding the survey or not. Similarly, there is no significant difference in syphilis prevalence among men who are circumcised and those who are not.

Table 9.4
Syphilis prevalence by sociodemographic characteristics, Uganda 2004-05

Sociodemographic characteristic	Women 15-49		Men 15-49		Total 15-49	
	Percentage positive for syphilis	Number tested	Percentage positive for syphilis	Number tested	Percentage positive for syphilis	Number tested
Marital status						
Currently in union	3.5	5,798	4.3	3,876	3.8	9,674
Widowed[1]	5.5	540	4.4	93	5.4	634
Divorced/separated	3.3	714	4.4	480	3.8	1,194
Never in union	1.2	1,988	1.2	2,836	1.2	4,824
Ever had sex	0.9	774	1.4	1,544	1.2	2,318
Never had sex	1.4	1,214	1.0	1,292	1.2	2,506
Type of union						
In polygynous union	3.6	1,902	5.2	837	4.1	2,739
Not in polygynous union	3.5	3,896	4.0	3,039	3.7	6,935
Not currently in union	2.4	3,242	1.8	3,409	2.1	6,651
Currently pregnant						
Pregnant	2.9	1,034	na	na	2.9	1,034
Not pregnant/ not sure	3.1	7,974	na	na	3.1	7,974
Births in past 3 years						
None	3.1	4,672	na	na	3.1	4,672
Birth and ANC	3.0	3,760	na	na	3.0	3,760
Birth and no ANC	4.3	608	na	na	4.3	608
Male circumcision status						
Circumcised	na	na	2.7	1,821	2.7	1,821
Not circumcised	na	na	3.2	5,458	3.2	5,458
Total 15-49	3.1	9,079	3.1	7,323	3.1	16,401
Total 15-59	3.3	9,885	3.5	8,078	3.4	17,963

Note: Totals include a small number of cases with missing information.
[1] The category 'widowed' consists of those who are not currently married and who had a previous spouse who died. It may be slightly overestimated to the extent that respondents who are currently divorced but previously widowed are considered widowed instead of divorced.
ANC = antenatal care
na = Not applicable

9.7 SYPHILIS PREVALENCE BY SEXUAL RISK BEHAVIOURS

Table 9.5 examines the prevalence of syphilis infection according to several sexual behaviours among respondents who have ever had sexual intercourse. There are no strong differences for any of the variables examined. There is a slight tendency for syphilis prevalence to increase with the number of sexual partners in the previous 12 months. However, the relationship with the number of higher-risk sexual partners in the previous 12 months is erratic. Differences by condom use variables are also very small.

Table 9.5
Syphilis prevalence by sexual behaviour characteristics, Uganda 2004-05

Sexual behaviour characteristic	Women 15-49 who ever had sex		Men 15-49 who ever had sex		Total 15-49 who ever had sex	
	Percentage positive for syphilis	Number	Percentage positive for syphilis	Number	Percentage positive for syphilis	Number
Age at first sex						
<15	3.9	1,379	2.2	881	3.3	2,260
15-17	2.8	3,516	3.9	2,139	3.2	5,655
18-19	4.1	1,431	3.9	1,405	4.0	2,836
20+	3.5	1,500	3.5	1,568	3.5	3,068
Higher-risk sex in past 12 months						
Had higher-risk sex	3.2	1,027	3.1	1,897	3.1	2,923
Had sex, not higher risk	3.4	5,696	4.1	3,250	3.7	8,946
No sex in past 12 months	3.4	1,104	2.7	846	3.1	1,950
Number of partners in past 12 months						
0	3.4	1,100	2.6	840	3.0	1,940
1	3.2	6,467	3.6	3,626	3.4	10,093
2	7.4	240	4.3	1,164	4.8	1,403
3+	*	20	3.0	363	2.8	383
Number of higher-risk partners in past 12 months						
0	3.4	6,801	3.8	4,081	3.6	10,881
1	2.3	931	3.5	1,448	3.0	2,379
2	13.8	82	1.4	313	4.0	395
3+	*	13	2.5	152	2.3	165
Any condom use ever						
Used condom	2.8	2,352	2.7	2,994	2.8	5,347
Never used condom	3.6	5,474	4.4	2,998	3.9	8,473
Condom use at last sex in past 12 months[1]						
Used condom	2.6	605	1.6	810	2.0	1,416
Did not use condom	3.5	6,115	4.1	4,328	3.7	10,443
Condom use at last higher-risk sex in past 12 months [1]						
Used condom	2.9	478	2.6	1,002	2.7	1,480
Did not use condom	3.4	546	3.6	886	3.5	1,432
No higher-risk sex	3.4	5,696	4.1	3,250	3.7	8,946
Total 15-49	3.4	7,827	3.5	5,993	3.5	13,820
Total 15-59	3.6	8,630	4.0	6,743	3.8	15,374

Note: Higher-risk sex refers to sex with a nonmarital, noncohabiting partner. An asterisk refers to a figure based on fewer than 25 unweighted cases that has been suppressed.
[1] Refers to those who had sex in the past 12 months.

9.8 Syphilis Prevalence by STI Reporting

Table 9.6 shows that respondents who reported that they did not have a sexually transmitted infection (STI) or an STI symptom in the past 12 months were slightly more likely to be infected with syphilis than those who reported having had an STI or an STI symptom. This is contrary to expectation and implies that many people who have syphilis do not have symptoms.

Table 9.6
Syphilis prevalence by reporting of sexually transmitted infection (STI) or STI symptom in past 12 months, Uganda 2004-05

	Women 15-49 who ever had sex		Men 15-49 who ever had sex		Total 15-49 who ever had sex	
STI status	Percentage positive for syphilis	Number of women	Percentage positive for syphilis	Number of men	Percentage positive for syphilis	Number
Had STI or STI symptoms	3.5	2,653	2.6	1,288	3.2	3,940
No STI, no symptoms	3.4	5,174	3.8	4,705	3.6	9,879
Total	3.4	7,827	3.5	5,993	3.5	13,820

STI = Sexually transmitted infection

9.9 Syphilis Prevalence among Cohabiting Couples

Table 9.7 shows that there is a relatively high level of 'discordance' for syphilis infection among cohabiting couples in Uganda, that is, cases in which only one partner is infected. In 4 percent of couples, the man has syphilis and the woman does not, while in 3 percent of couples, the woman has syphilis and the man does not, for a total of 7 percent of couples being discordant. For a small fraction (less than 1 percent) of cohabiting couples both partners have syphilis. Differences by background characteristics are small.

Table 9.7

Syphilis prevalence among cohabiting couples, Uganda 2004-05

Background characteristic	Both partners have syphilis	Man positive, woman negative	Woman positive, man negative	Both partners do not have syphilis	Total	Number
Woman's age						
15-19	0.0	1.7	1.3	97.0	100.0	214
20-29	0.4	2.8	2.6	94.2	100.0	1,655
30-39	1.0	5.5	3.5	90.0	100.0	1,157
40-59	1.1	6.1	2.4	90.4	100.0	686
Man's age						
15-19	*	*	*	*	100.0	21
20-29	0.3	2.0	2.6	95.1	100.0	879
30-39	0.7	3.8	2.8	92.7	100.0	1,382
40-59	1.0	6.0	2.9	90.1	100.0	1,429
Type of union						
Monogamous	0.8	4.0	2.7	92.5	100.0	2,612
Polygynous	0.6	5.2	2.7	91.5	100.0	820
Couple disagrees on status	0.2	3.4	3.4	93.0	100.0	279
Residence						
Urban	0.3	4.1	2.3	93.4	100.0	311
Rural	0.7	4.2	2.8	92.2	100.0	3,401
Region						
Central	0.6	4.0	3.6	91.8	100.0	557
Kampala	0.0	3.4	1.4	95.2	100.0	98
East Central	0.2	2.7	3.0	94.0	100.0	565
Eastern	0.8	5.2	2.8	91.3	100.0	401
Northeast	0.9	4.6	3.0	91.4	100.0	372
North Central	1.3	8.4	2.9	87.4	100.0	415
West Nile	0.5	2.0	0.9	96.6	100.0	347
Western	1.1	3.6	3.5	91.8	100.0	486
Southwest	0.5	3.6	2.1	93.7	100.0	471
Woman's education						
No education	1.1	4.7	3.1	91.0	100.0	1,089
Primary incomplete	0.7	4.3	2.7	92.3	100.0	1,829
Primary complete	0.3	3.2	2.8	93.6	100.0	383
Secondary+	0.0	3.5	1.9	94.6	100.0	405
Man's education						
No education	1.5	4.2	5.8	88.5	100.0	450
Primary incomplete	0.9	4.6	2.3	92.2	100.0	1,790
Primary complete	0.5	3.4	2.9	93.2	100.0	631
Secondary+	0.1	4.0	2.0	93.8	100.0	831
Wealth quintile						
Lowest	1.3	4.2	2.6	91.9	100.0	651
Second	0.8	4.7	3.7	90.9	100.0	812
Middle	0.6	4.2	2.3	92.9	100.0	826
Fourth	0.6	4.0	3.1	92.2	100.0	812
Highest	0.2	3.8	2.0	94.1	100.0	611
Total	0.7	4.2	2.8	92.3	100.0	3,711

Note: Data refer to only those couples in which both partners were tested. An asterisk indicates a figure that is based on fewer than 25 cases that has been suppressed. Totals include some cases with missing values.

PREVALENCE OF HERPES AND HEPATITIS B 10

10.1 KEY FINDINGS

- Herpes simplex type 2 is widespread, with 44 percent of Ugandan adults aged 15-49 infected.
- Women (49 percent) are more likely to be infected with herpes than men (38 percent).
- Herpes infection rises rapidly with age; more than two-thirds of those in their 40s are infected.
- Of all couples in which at least one partner is infected with HSV-2, almost half (45 percent) are discordant.
- One in ten Ugandan adults is infected with hepatitis B; residents of Northeast and North Central regions are particularly affected.
- The likelihood of being infected with hepatitis B declines steadily with increasing education level and wealth quintile.

10.2 INTRODUCTION

Venous blood samples from adults were also tested for the herpes simplex type 2 virus (HSV-2) and for hepatitis B. Hepatitis B testing was done on only one-third of the adults for whom blood samples were obtained.

Although both herpes simplex type 1 and type 2 can cause oral or genital infections, HSV-1 is most commonly associated with oral infection, while HSV-2 causes predominantly genital infections. Since HSV-2 is almost exclusively sexually transmitted, its seroprevalence can be used as a marker of genital herpes (Stanberry and Rosenthal, 1999). Because it can cause genital ulcers, HSV-2 is also linked to increased risk of HIV transmission (Laeyendecker et al., 2004).

Because HSV-2 testing required a venous blood sample, the response rates were similar to those for syphilis.

10.3 HERPES PREVALENCE BY AGE AND SEX

Survey results indicate that herpes infection is widespread with close to half of Ugandan adults infected with herpes simplex type 2 (HSV-2). As shown in Table 10.1, 49 percent of women and 38 percent of men aged 15-49 are infected.

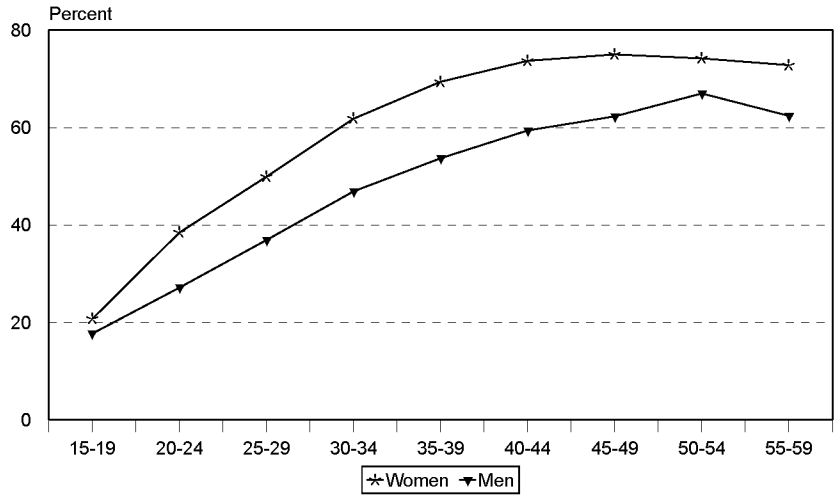
Table 10.1
Prevalence of herpes simplex type 2 by age and sex, Uganda 2004-05

	Women		Men		Total	
Age	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested
15-19	20.6	1,963	17.8	1,879	19.2	3,841
20-24	38.4	1,757	27.2	1,146	34.0	2,903
25-29	49.6	1,612	36.9	1,092	44.5	2,704
30-34	61.5	1,344	46.5	1,111	54.7	2,455
35-39	68.9	998	53.4	847	61.8	1,846
40-44	73.2	788	59.5	730	66.6	1,518
45-49	75.1	608	62.2	516	69.2	1,124
50-54	73.9	494	67.1	442	70.7	936
55-59	72.6	310	62.5	317	67.5	627
Total 15-49	48.8	9,070	37.9	7,321	43.9	16,391
Total 15-59	50.8	9,874	40.4	8,079	46.1	17,953

Prevalence of HSV-2 increases rapidly with age (Figure 10.1), from about 20 percent of those aged 15-19 to around two-thirds of those aged 40 and over.

Prevalence among women is higher than among men for every age group. By the time women reach their forties, three-fourths of them are infected with HSV-2.

Figure 10.1 Herpes Prevalence by Sex and Age



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10.4 Prevalence of Herpes by Background Characteristics

As with syphilis infection, there is virtually no urban-rural difference in the level of infection with HSV-2. Central, East Central, and North Central regions all show levels of HSV-2 infection of about 50 percent. As with HIV and syphilis infection, West Nile region has the lowest level of HSV-2 infection, with only 29 percent of adults 15-49 infected.

HSV-2 prevalence declines with the level of education for both women and men, especially among those with at least some secondary education. It is also higher among those who are working (50 percent) than those who are not (34 percent). Infection with HSV-2 shows an inverted U shape with respect to wealth, with higher rates at the middle wealth quintiles.

Differences in HSV-2 infection by ethnic group show that the Batoro, Banyara, Langi, and Basoga ethnic groups are most affected, with 50 percent or more infected. The Lugbara/Madi are the least likely to have HSV-2 (29 percent), followed by the Karimojong (31 percent). Differences in infection by religion are minimal.

Table 10.2

Prevalence of herpes simplex type 2 by background characteristics, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49		Total	
	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested
Residence						
Urban	49.7	1,322	34.8	1,042	43.1	2,364
Rural	48.7	7,748	38.4	6,279	44.1	14,027
Region						
Central	59.2	1,508	43.4	1,318	51.8	2,826
Kampala	46.2	566	31.4	479	39.4	1,045
East Central	53.9	1,448	41.2	1,066	48.5	2,515
Eastern	51.5	784	40.7	700	46.4	1,484
Northeast	45.5	754	38.5	553	42.5	1,307
North Central	52.6	873	41.8	708	47.8	1,582
West Nile	31.7	880	25.6	678	29.0	1,558
Western	49.5	1,045	41.8	878	46.0	1,922
Southwest	40.5	1,212	29.5	941	35.7	2,152
Education						
No education	53.6	2,068	42.6	613	51.1	2,680
Primary incomplete	50.5	4,229	39.1	3,439	45.4	7,669
Primary complete	48.2	1,030	40.5	1,031	44.3	2,061
Secondary+	39.3	1,727	33.5	2,230	36.0	3,956
Employment						
Currently working	54.7	5,567	43.8	5,067	49.5	10,634
Not working	39.7	3,434	24.6	2,176	33.8	5,610
Wealth quintile						
Lowest	45.6	1,483	36.4	1,124	41.6	2,607
Second	47.2	1,862	38.0	1,510	43.1	3,372
Middle	51.9	1,729	40.0	1,385	46.6	3,114
Fourth	50.3	1,845	42.4	1,521	46.7	3,367
Highest	48.7	2,150	33.2	1,780	41.7	3,930
Ethnicity						
Baganda	54.5	1,596	39.2	1,262	47.7	2,858
Banyankore	48.7	938	36.3	758	43.2	1,696
Iteso	50.9	592	42.8	482	47.3	1,074
Lugbara/Madi	30.7	722	26.2	553	28.7	1,275
Basoga	55.9	876	42.4	672	50.0	1,548
Langi	56.5	466	44.8	416	51.0	882
Bakiga	41.9	617	33.9	528	38.2	1,145
Karimojong	31.5	269	30.9	177	31.2	446
Acholi	49.0	439	38.1	323	44.4	762
Bagisu/Sabiny	51.7	409	39.8	441	45.5	850
Alur/Jopadhola	48.0	469	34.8	404	41.9	874
Banyara	56.6	295	49.6	243	53.4	538
Batoro	60.9	223	46.9	195	54.4	418
All others	46.9	1,113	36.0	819	42.3	1,932
Religion						
Catholic	47.8	3,784	38.9	3,074	43.8	6,857
Anglican/Protestant	51.7	3,076	38.5	2,673	45.6	5,750
Other Christian	49.4	798	36.4	496	44.4	1,294
Muslim	46.6	1,243	35.3	947	41.7	2,190
Other	44.6	100	31.9	74	39.2	174
Total 15-49	48.8	9,070	37.9	7,321	43.9	16,391
Total 15-59	50.8	9,874	40.4	8,079	46.1	17,953

Note: Totals include some cases with missing information.

10.5 PREVALENCE OF HERPES BY SOCIODEMOGRAPHIC CHARACTERISTICS

Table 10.3 shows that those who are widowed are the most likely to test positive for HSV-2 (78 percent), while those who have never been in union are the least likely (20 percent). Those who are currently in union (52 percent) and those who are divorced or separated (58 percent) have intermediate levels of HSV-2 infection. Because HSV-2 infection rises rapidly with age, some of the relationship with marital status may reflect this age pattern.

A significant finding is that 16 percent of those who have never had sex tested positive for HSV-2. Although some of these respondents might be underreporting their sexual experience, some may have been infected through means other than sexual intercourse. The possibility of testing errors needs to also be investigated.

Those who are in a polygynous union are more likely to be infected with herpes than those who are in a monogamous union (60 and 49 percent, respectively). It is disturbing to see that 44 percent of pregnant women have HSV-2, because the virus can cause severe problems at birth. There is little difference in HSV-2 infection levels by whether women received antenatal care for a birth in the three years preceding the survey or not or by whether men are circumcised or not.

Table 10.3
Prevalence of herpes simplex type 2 by socio-emographic characteristics, Uganda 2004-05

Sociodemographic characteristic	Women 15-49		Men 15-49		Total 15-49	
	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested	Percentage positive for herpes	Number tested
Marital status						
Currently in union	54.0	5,803	48.9	3,887	51.9	9,691
Widowed[1]	79.1	543	69.0	94	77.6	637
Divorced/separated	64.0	716	50.3	484	58.4	1,200
Never in union	20.6	1,968	20.0	2,818	20.3	4,786
Ever had sex	29.5	770	22.6	1,541	24.9	2,311
Never had sex	14.9	1,198	16.9	1,278	16.0	2,475
Type of union						
In polygynous union	61.0	1,910	56.4	835	59.6	2,745
Not in polygynous union	50.6	3,894	46.8	3,052	48.9	6,945
Not currently in union	40.1	3,228	25.7	3,396	32.7	6,624
Currently pregnant						
Pregnant	43.9	1,038	na	na	na	na
Not pregnant/not sure	49.6	7,960	na	na	na	na
Birth in last 3 years						
None	48.3	4,657	na	na	na	na
Birth and ANC	49.4	3,767	na	na	na	na
Birth and no ANC	52.0	606	na	na	na	na
Male circumcision status						
Circumcised	na	na	37.3	1,819	37.3	1,819
Not circumcised	na	na	38.4	5,459	38.4	5,459
Total 15-49	48.8	9,070	37.9	7,321	43.9	16,391
Total 15-59	50.8	9,874	40.4	8,079	46.1	17,953

Note: Totals include a small number of cases with missing information.
ANC = antenatal care
na = Not applicable
[1] The category 'widowed''consists of those who are not currently married and who had a previous spouse who died. It may be slightly overestimated to the extent that respondents who are currently divorced but previously widowed are considered widowed instead of divorced.

10.6 Prevalence of Herpes by STI Reporting

Table 10.4 shows that respondents who reported that they had a sexually transmitted infection (STI) or an STI symptom in the past 12 months were more likely to test positive for HSV-2 (61 percent) than those who reported having had no STI and no STI symptoms (45 percent). Nevertheless, the data show that many of those who have HSV-2 do not have any symptoms, a finding reflected in other studies (Stanberry and Rosenthal, 1999).

Table 10.4

Prevalence of herpes simplex type 2 by reporting of sexually transmitted infection (STI) or STI symptom in the past 12 months, Uganda 2004-05

	Women 15-49 who ever had sex		Men 15-49 who ever had sex		Total 15-49 who ever had sex	
STI status	Percentage positive for herpes	Number of women	Percentage positive for herpes	Number of men	Percentage positive for herpes	Number
Had STI or STI symptoms	63.7	2,648	53.8	1,288	60.5	3,936
No STI, no symptoms	49.4	5,186	39.5	4,718	44.7	9,903
Total	54.2	7,833	42.6	6,006	49.2	13,839

STI = Sexually transmitted infection

10.7 Prevalence of Herpes among Cohabiting Couples

Table 10.5 shows that among cohabiting couples in Uganda, for approximately one-third, neither partner has herpes, for another 40 percent, both partners have herpes, while the remaining 26 percent of couples are discordant, i.e., one partner is infected and the other is not. Looked at another way, of all couples in which one or both partners are infected with HSV-2, 40 percent are discordant. Discordance is about equally a result of the woman or the man being infected. For example, in 14 percent of couples, the woman is HSV-2-positive and the man is negative, while in 12 percent of couples, the man has HSV-2 and the woman does not.

Differences by background characteristics reflect those for HSV-2 prevalence discussed above. However, although HSV-2 infection does not differ by urban-rural residence, rural couples show a somewhat higher level of discordance than urban couples.

Table 10.5

Prevalence of herpes simplex type 2 among cohabiting couples, Uganda 2004-05

Background characteristic	Both partners have herpes	Man positive, woman negative	Woman positive, man negative	Neither partner has herpes	Total	Number
Woman's age						
15-19	22.8	17.3	11.1	48.8	100.0	212
20-29	30.5	15.1	13.6	40.8	100.0	1,628
30-39	47.9	9.1	13.6	29.3	100.0	1,144
40-59	55.4	8.4	14.8	21.4	100.0	681
Man's age						
15-19	*	*	*	*	100.0	21
20-29	21.7	15.6	14.9	47.8	100.0	862
30-39	36.9	13.0	13.5	36.6	100.0	1,365
40-59	54.7	9.1	13.2	23.1	100.0	1,417
Type of union						
Monogamous	37.6	12.4	13.3	36.7	100.0	2,581
Polygynous	46.0	11.1	15.0	27.9	100.0	809
Couple disagrees on status	46.1	12.4	13.6	27.8	100.0	274
Residence						
Urban	45.7	6.6	16.6	31.2	100.0	308
Rural	39.6	12.6	13.4	34.3	100.0	3,357
Region						
Central	49.7	11.5	14.6	24.2	100.0	552
Kampala	44.8	6.9	15.9	32.4	100.0	98
East Central	42.7	12.6	16.9	27.8	100.0	559
Eastern	47.3	9.5	13.9	29.4	100.0	398
Northeast	34.9	13.3	15.6	36.3	100.0	367
North Central	42.1	13.2	13.1	31.6	100.0	399
West Nile	21.0	15.1	13.3	50.6	100.0	340
Western	42.7	12.6	12.9	31.8	100.0	481
Southwest	32.3	11.2	8.4	48.1	100.0	470
Woman's education						
No education	38.0	11.3	14.2	36.4	100.0	1,069
Primary incomplete	41.8	13.0	13.6	31.6	100.0	1,814
Primary complete	42.5	10.6	11.1	35.8	100.0	376
Secondary+	35.8	11.7	15.4	37.0	100.0	401
Man's education						
No education	38.1	12.2	15.1	34.6	100.0	444
Primary incomplete	40.9	12.6	12.7	33.8	100.0	1,766
Primary complete	40.9	10.8	13.2	35.0	100.0	624
Secondary+	38.8	12.0	15.5	33.7	100.0	820
Wealth quintile						
Lowest	35.0	12.9	15.5	36.6	100.0	637
Second	38.6	12.5	10.4	38.6	100.0	799
Middle	42.0	9.3	13.9	34.8	100.0	818
Fourth	42.9	14.7	13.4	28.9	100.0	803
Highest	41.3	11.2	16.3	31.3	100.0	608
Total	40.1	12.1	13.7	34.1	100.0	3,665

Note: Data refer to only those couples in which both partners were tested. An asterisk indicates a figure that is based on fewer than 25 cases that has been suppressed.

10.8 HEPATITIS B INFECTION

A random sample of roughly one-third of adults who provided venous blood samples were tested. This sample provided data for almost 6,000 respondents aged 15-59.

As shown in Table 10.6, 1 in 10 adults in Uganda is infected with hepatitis B. Overall rates are slightly higher for men than women (12 and 9 percent, respectively). There is surprisingly little variation in infection by age group.

Table 10.6

Prevalence of infection with hepatitis B by age and sex, Uganda 2004-05

	Women		Men		Total	
Age	Percentage positive for hepatitis B	Number tested	Percentage positive for hepatitis B	Number tested	Percentage positive for hepatitis B	Number tested
15-19	9.4	622	8.2	616	8.8	1,237
20-24	8.7	555	13.9	373	10.8	928
25-29	8.5	554	11.6	373	9.7	926
30-34	8.0	457	15.0	373	11.2	830
35-39	9.3	331	13.7	264	11.3	595
40-44	11.0	253	9.8	245	10.4	498
45-49	8.9	191	13.5	170	11.1	361
50-54	10.5	163	14.6	146	12.4	308
55-59	8.6	95	6.8	97	7.7	192
Total 15-49	9.0	2,961	11.8	2,413	10.2	5,375
Total 15-59	9.1	3,219	11.8	2,656	10.3	5,875

Table 10.7 shows that rural respondents have slightly higher levels of hepatitis B infection (11 percent) than urban residents (8 percent). With regard to regional differences, respondents in Northeast, North Central, and West Nile regions have considerably higher levels of infection than other respondents (24, 21, and 18 percent, respectively). Residents in Southwest region have the lowest infection rate of 4 percent. Kampala, East Central, Central, and Eastern regions all have lower than average levels of infection.

The likelihood of being infected with hepatitis B declines steadily with increasing education level and wealth quintile. For example, 16 percent of those in the lowest wealth quintile test positive for hepatitis B, compared with only 7 percent of those in the highest wealth quintile. The Karimojong, Langi, and Acholi are the most affected by hepatitis B, all having infection levels of more than 20 percent. The Lugbara/Madi and Iteso also have high levels of infection. Differences by religion are not large.

Table 10.7

Prevalence of infection with hepatitis B by background characteristics, Uganda 2004-05

Background characteristic	Women 15-49		Men 15-49		Total	
	Percentage positive for hepatitis B	Number tested	Percentage positive for hepatitis B	Number tested	Percentage positive for hepatitis B	Number tested
Residence						
Urban	7.1	438	9.1	347	8.0	785
Rural	9.3	2,523	12.2	2,066	10.6	4,590
Region						
Central	5.5	485	6.2	449	5.8	935
Kampala	5.8	192	5.0	158	5.5	350
East Central	3.4	477	8.5	330	5.5	807
Eastern	4.8	264	8.8	233	6.7	497
Northeast	21.7	261	28.4	170	24.3	430
North Central	19.4	279	23.4	241	21.2	520
West Nile	18.7	272	18.1	228	18.4	500
Western	7.8	344	13.1	281	10.2	625
Southwest	2.9	388	5.3	321	4.0	710
Education						
No education	12.9	659	16.5	212	13.8	871
Primary incomplete	8.4	1,416	12.4	1,124	10.2	2,540
Primary complete	8.3	327	10.3	344	9.3	671
Secondary+	6.3	552	10.1	729	8.5	1,281
Employment						
Currently working	9.3	1,825	11.7	1,667	10.5	3,492
Not working	8.4	1,125	11.6	730	9.6	1,855
Wealth quintile						
Lowest	14.5	485	17.6	360	15.8	845
Second	12.1	606	13.9	494	12.9	1,100
Middle	7.9	560	12.9	476	10.2	1,035
Fourth	6.1	619	9.5	485	7.6	1,104
Highest	5.9	692	7.5	598	6.6	1,289
Ethnicity						
Baganda	4.2	512	4.5	430	4.4	942
Banyankore	5.2	310	7.5	268	6.3	578
Iteso	15.0	198	23.8	143	18.7	341
Lugbara/Madi	18.4	231	19.8	180	19.0	411
Basoga	2.4	295	6.5	202	4.1	497
Langi	20.5	149	23.0	147	21.8	296
Bakiga	3.9	197	8.1	179	5.9	376
Karimojong	29.3	89	28.3	59	28.9	148
Acholi	18.5	150	25.0	112	21.3	262
Bagisu/Sabiny	3.1	131	8.5	147	5.9	279
Alur/Jopadhola	8.5	169	15.3	126	11.4	295
Banyara	5.6	101	12.0	81	8.5	182
Batoro	5.9	71	5.3	57	5.7	128
All others	8.0	359	8.7	279	8.3	638
Religion						
Catholic	11.1	1,228	12.4	1,028	11.7	2,257
Anglican/Protestant	7.5	1,062	11.1	866	9.2	1,928
Other Christian	7.3	251	15.0	173	10.4	424
Muslim	5.9	384	8.3	308	6.9	692
Other	(29.1)	29	25.6	30	27.4	59
Total 15-49	9.0	2,961	11.8	2,413	10.2	5,375
Total 15-59	9.1	3,219	11.8	2,656	10.3	5,875

Note: Totals include some cases with missing information. Numbers in parentheses are based on 25-49 cases.

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PERSONS INVOLVED IN THE 2004-05 UGANDA HIV/AIDS SERO-BEHAVIOURAL SURVEY

Appendix A

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Mbabazi Peter
Mukasa Charles
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Mumbe Lawrence
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ESTIMATES OF SAMPLING ERRORS

Appendix B

The estimates from a sample survey are affected by two types of errors: 1) nonsampling errors, and 2) sampling errors. Nonsampling errors are the results of mistakes made in implementing data collection and data processing, such as failure to locate and interview the correct household, misunderstanding of the questions on the part of either the interviewer or the respondent, and data entry errors. Although numerous efforts were made during the implementation of the 2004-05 Uganda HIV/AIDS Sero-Behavioural Survey (UHSBS) to minimise this type of error, nonsampling errors are impossible to avoid completely and difficult to evaluate statistically.

Sampling errors, on the other hand, can be evaluated statistically. The sample of respondents selected in the 2004-05 UHSBS is only one of many samples that could have been selected from the same population, using the same design and expected size. Each of these samples would yield results that differ somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. Although the degree of variability is not known exactly, it can be estimated from the survey results.

A sampling error is usually measured in terms of the *standard error* for a particular statistic (mean, percentage, etc.), which is the square root of the variance. The standard error can be used to calculate confidence intervals within which the true value for the population can reasonably be assumed to fall. For example, for any given statistic calculated from a sample survey, the value of that statistic will fall within a range of plus or minus two times the standard error of that statistic in 95 percent of all possible samples of identical size and design.

If the sample of respondents had been selected as a simple random sample, it would have been possible to use straightforward formulas for calculating sampling errors. However, the 2004-05 UHSBS sample is the result of a multi-stage stratified design, and, consequently, it was necessary to use more complex formulas. The computer software used to calculate sampling errors for the 2004-05 UHSBS is the ISSA Sampling Error Module. This module used the Taylor linearisation method of variance estimation for survey estimates that are means or proportions.

The Taylor linearisation method treats any percentage or average as a ratio estimate, $r = y/x$, where y represents the total sample value for variable y, and x represents the total number of cases in the group or subgroup under consideration. The variance of r is computed using the formula given below, with the standard error being the square root of the variance:

$$SE^2(r) = var(r) = \frac{1-f}{x^2}\sum_{h=1}^{H}\left[\frac{m_h}{m_{h-1}}\left(\sum_{i=1}^{m_h} z_{hi}^2 - \frac{z_h^2}{m_h}\right)\right]$$

in which

$$z_{hi} = y_{hi} - rx_{hi}\text{, and } z_h = y_h - rx_h$$

where h represents the stratum which varies from 1 to H,
m_h is the total number of clusters selected in the h^{th} stratum,

y_{hi} is the sum of the weighted values of variable y in the i^{th} cluster in the h^{th} stratum,
x_{hi} is the sum of the weighted number of cases in the i^{th} cluster in the h^{th} stratum, and
f is the overall sampling fraction, which is so small that it is ignored.

In addition to the standard error, ISSA computes the design effect (DEFT) for each estimate, which is defined as the ratio between the standard error using the given sample design and the standard error that would result if a simple random sample had been used. A DEFT value of 1.0 indicates that the sample design is as efficient as a simple random sample, while a value greater than 1.0 indicates the increase in the sampling error because of the use of a more complex and less statistically efficient design. ISSA also computes the relative error and confidence limits for the estimates.

Sampling errors for the 2004-05 UHSBS are calculated for selected variables considered to be of primary interest. The results are presented in this appendix for the country as a whole, for urban and rural areas, and for each of the 9 regions. For each variable, the type of statistic (mean, proportion, or rate) and the base population are given in Table B.1. Tables B.2 to B.13 present the value of the statistic (R), its standard error (SE), the number of unweighted (N-UNWE) and weighted (N-WEIG) cases, the design effect (DEFT), the relative standard error (SE/R), and the 95 percent confidence limits (R±2SE), for each variable. The DEFT is considered undefined when the standard error considering simple random sample is zero (when the estimate is close to 0 or 1).

The confidence interval (e.g., as calculated for *condom use at last higher-risk sex*) can be interpreted as follows: the overall proportion from the national sample for women 15-49 who reported using a condom at last high-risk sex is 0.467 and its standard error is 0.017. Therefore, to obtain the 95 percent confidence limits, one adds and subtracts twice the standard error to the sample estimate, i.e., $0.467 \pm 2 \times 0.017$. There is a high probability (95 percent) that the *true* proportion of women who had used a condom at last higher-risk sex is between 0.433 and 0.502.

Sampling errors are analysed for the national sample of women and men. The relative standard errors (SE/R) at the national level range between 1 percent and 38.5 percent. The highest relative standard errors are for estimates of very low values (e.g., *care and support for orphans and vulnerable children*). If estimates of very low values (less than 10 percent) were removed, then the average drops to 3 percent. So in general, the relative standard error for most estimates for the country as a whole is small, except for estimates of very small proportions.

For the total sample, the value of the design effect (DEFT), averaged over all variables, is 1.33 which means that, because of multi-stage clustering of the sample, the average standard error is increased by a factor of 1.33 over that in an equivalent simple random sample.

Table B.1 List of selected variables for sampling errors, Uganda 2004-05

Variable	Estimate	Base population
Urban residence	Proportion	All women/men 15-49
No education	Proportion	All women/men 15-49
Secondary or higher education	Proportion	All women/men 15-49
Never married (in union)	Proportion	All women/men 15-49
Currently married (in union)	Proportion	All women/men 15-49
Using any contraceptive method	Proportion	Currently married women 15-49
Using a modern method	Proportion	Currently married women 15-49
Comprehensive knowledge[1] of HIV transmission - all	Proportion	Women/men 15-49
Comprehensive knowledge[1] of HIV transmission - youth	Proportion	Women/men 15-24
Had sex before age 18	Proportion	All women/men 18-24
Had two or more sexual partners in past 12 months	Proportion	Women/men 15-49 who had sex in the past 12 months
Had higher-risk sex (with a nonmarital, noncohabiting partner) in the past 12 months	Proportion	Women/men 15-49 who had sex in the past 12 months
Condom use at last higher-risk sex - all	Proportion	Women/men 15-49 who had higher-risk sex in past 12 months
Condom use at last higher-risk sex - youth	Proportion	All women/men 15-24 who had higher-risk sex in past 12 months
Abstinence among youth (never had sex)	Proportion	Never-married women/men 15-24
Sexual activity in past 12 months among never-married youth	Proportion	Never-married women/men 15-24
Had medical injections in past 12 months	Proportion	All women/men 15-49
Had HIV test in past 12 months and received results last time	Proportion	All women/men 15-49
Accepting attitudes[2] towards people with HIV	Proportion	All women/men 15-49 who have heard of HIV/AIDS
Care and support for adults (received all types of free, basic external support)	Proportion	Adults age 18-59 who were ill for 3 or more months in the past 12 months and adults 18-59 who died in the past 12 months and were ill for 3 or more months before death
Care and support for orphans and vulnerable children (received all types[3] of free, basic external support)	Proportion	Children 0-17 whose mother or father died or who live in a household in which a person age 18-59 was ill for 3 or more months in the past 12 months or in which a person age 18-59 died in the past 12 months
HIV prevalence	Proportion	All women/men 15-49 who were tested for HIV
Syphilis prevalence	Proportion	All women/men 15-49 who were tested for syphilis

[1] Percentage who say that people can reduce the risk of getting the AIDS virus by using a condom every time they have sex and by having sex with just one partner who is not infected and who has no other partners, and who say that people cannot get the AIDS virus from mosquito bites or from sharing food with a person who has AIDS, and who say that a healthy-looking person can have the AIDS virus

[2] Percentage who say they would be willing to care for a relative sick with AIDS in their own households and would be willing to buy sugar, fresh vegetables, or other food from a market vendor who had the AIDS virus and they think that a female teacher who has the AIDS virus but is not sick should be allowed to continue teaching, and that if a member of their family got infected with the virus that causes AIDS, they would not necessarily want it to remain secret

[3] Refers to all five types of support for those age 5-17, four types of support (excluding school) for those age 0-4

Table B.2 Sampling errors for national sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.152	0.005	9973	9941	1.266	0.030	0.143	0.161
No education	0.227	0.009	9973	9941	2.097	0.039	0.209	0.244
With secondary education or higher	0.197	0.007	9973	9941	1.781	0.036	0.183	0.211
Never married (in union)	0.223	0.006	9973	9941	1.403	0.026	0.212	0.235
Currently married (in union)	0.640	0.007	9973	9941	1.363	0.010	0.626	0.653
Currently using any contraceptive method	0.197	0.007	6406	6358	1.466	0.037	0.183	0.212
Currently using a modern method	0.187	0.007	6406	6358	1.467	0.038	0.173	0.201
Had first sex before age 18	0.627	0.010	2792	2754	1.118	0.016	0.606	0.647
Had two or more sexual partners in past 12 months	0.038	0.003	7345	7376	1.291	0.076	0.032	0.044
Had higher risk sex in the past 12 months	0.153	0.005	7346	7376	1.235	0.034	0.143	0.163
Condom use at last high risk sex - all	0.467	0.017	1061	1128	1.127	0.037	0.433	0.502
Condom use at last high risk sex (15-24)	0.529	0.021	610	636	1.035	0.040	0.487	0.571
Comprehensive knowledge of HIV transmission - all	0.283	0.007	9973	9941	1.493	0.024	0.269	0.296
Comprehensive knowledge of HIV transmission - youth	0.295	0.009	4121	4119	1.320	0.032	0.276	0.314
Abstinence among youth (never had sex)	0.642	0.012	2057	2049	1.179	0.019	0.617	0.667
Sexual activity in past 12 months (never-married youth)	0.244	0.011	2057	2049	1.201	0.047	0.221	0.266
Had medical injections in past 12 months	0.513	0.008	9973	9941	1.648	0.016	0.496	0.529
Had HIV test and received results last time	0.040	0.002	9973	9941	1.269	0.062	0.035	0.045
Accepting attitudes towards people with HIV	0.187	0.007	9787	9801	1.815	0.038	0.173	0.201
HIV prevalence	0.075	0.004	9365	9328	1.318	0.050	0.068	0.083
Syphilis prevalence	0.031	0.002	9025	8992	1.086	0.065	0.027	0.036
MEN								
Urban residence	0.150	0.005	8009	8010	1.138	0.030	0.141	0.159
No education	0.083	0.005	8009	8010	1.694	0.063	0.073	0.094
With secondary education or higher	0.309	0.009	8009	8010	1.749	0.029	0.291	0.327
Never married (in union)	0.392	0.007	8009	8010	1.225	0.017	0.379	0.405
Currently married (in union)	0.529	0.007	8009	8010	1.281	0.014	0.515	0.543
Had first sex before age 18	0.467	0.014	2027	2032	1.230	0.029	0.440	0.495
Had two or more sexual partners in last 12 months	0.293	0.007	5639	5623	1.209	0.025	0.279	0.308
Had higher risk sex in the past 12 months	0.366	0.008	5644	5628	1.277	0.022	0.350	0.383
Condom use at last high risk sex - all	0.534	0.013	1988	2062	1.178	0.025	0.507	0.560
Condom use at last high risk sex (15-24)	0.551	0.019	990	1016	1.190	0.034	0.513	0.589
Comprehensive knowledge of HIV transmission - all	0.358	0.007	8009	8010	1.357	0.020	0.344	0.373
Comprehensive knowledge of HIV transmission - youth	0.353	0.010	3303	3332	1.224	0.029	0.333	0.374
Abstinence among youth (never had sex)	0.499	0.013	2744	2776	1.356	0.026	0.473	0.525
Sexual activity in past 12 months (never-married youth)	0.301	0.011	2744	2776	1.269	0.037	0.279	0.323
Had medical injections in past 12 months	0.379	0.007	8009	8010	1.381	0.020	0.364	0.394
Had HIV test and received results last time	0.038	0.003	8009	8010	1.278	0.072	0.032	0.043
Accepting attitudes towards people with HIV	0.282	0.007	7904	7939	1.347	0.024	0.268	0.295
HIV prevalence	0.050	0.003	7433	7436	1.307	0.067	0.043	0.057
Syphilis prevalence	0.031	0.002	7215	7217	1.003	0.067	0.027	0.035
WOMEN AND MEN								
Care and support for adults	0.008	0.003	1009	992	0.956	0.361	0.002	0.014
Care and support for orphans and vulnerable children	0.002	0.001	5011	4954	1.176	0.385	0.000	0.004

Table B.3 Sampling errors for urban sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	1.000	0.000	1827	1508	na	0.000	1.000	1.000
No education	0.064	0.006	1827	1508	1.111	0.100	0.051	0.076
With secondary education or higher	0.512	0.019	1827	1508	1.618	0.037	0.474	0.550
Never married (in union)	0.348	0.015	1827	1508	1.357	0.043	0.318	0.378
Currently married (in union)	0.485	0.016	1827	1508	1.337	0.032	0.454	0.517
Currently using any contraceptive method	0.413	0.021	869	732	1.235	0.050	0.372	0.455
Currently using a modern method	0.397	0.021	869	732	1.266	0.053	0.354	0.439
Had first sex before age 18	0.621	0.020	622	494	1.028	0.032	0.581	0.661
Had two or more sexual partners in past 12 months	0.058	0.007	1231	1024	0.995	0.115	0.045	0.071
Had higher risk sex in the past 12 months	0.290	0.014	1231	1024	1.070	0.048	0.262	0.317
Condom use at last high risk sex - all	0.647	0.033	374	297	1.333	0.051	0.581	0.713
Condom use at last high risk sex (15-24)	0.669	0.033	223	174	1.043	0.049	0.603	0.734
Comprehensive knowledge of HIV transmission - all	0.463	0.012	1827	1508	1.041	0.026	0.439	0.488
Comprehensive knowledge of HIV transmission - youth	0.460	0.021	892	725	1.268	0.046	0.418	0.503
Abstinence among youth (never had sex)	0.498	0.022	561	454	1.028	0.044	0.454	0.541
Sexual activity in past 12 months (never-married youth)	0.331	0.022	561	454	1.085	0.065	0.288	0.374
Had medical injections in past 12 months	0.540	0.017	1827	1508	1.455	0.031	0.506	0.574
Had HIV test and received results last time	0.089	0.008	1827	1508	1.127	0.084	0.074	0.104
Accepting attitudes towards people with HIV	0.248	0.016	1822	1505	1.583	0.065	0.216	0.280
HIV prevalence	0.128	0.008	1650	1423	0.936	0.061	0.113	0.144
Syphilis prevalence	0.023	0.007	1513	1345	1.728	0.284	0.010	0.037
MEN								
Urban residence	1.000	0.000	1387	1200	na	0.000	1.000	1.000
No education	0.014	0.003	1387	1200	0.840	0.189	0.009	0.019
With secondary education or higher	0.625	0.030	1387	1200	2.304	0.048	0.565	0.685
Never married (in union)	0.491	0.018	1387	1200	1.346	0.037	0.455	0.527
Currently married (in union)	0.424	0.016	1387	1200	1.173	0.037	0.393	0.455
Had first sex before age 18	0.448	0.025	443	374	1.043	0.055	0.399	0.497
Had two or more sexual partners in past 12 months	0.344	0.020	918	804	1.275	0.058	0.304	0.384
Had higher risk sex in the past 12 months	0.526	0.015	919	806	0.926	0.029	0.496	0.557
Condom use at last high risk sex - all	0.737	0.020	495	424	0.994	0.027	0.698	0.777
Condom use at last high risk sex (15-24)	0.705	0.029	231	201	0.961	0.041	0.648	0.763
Comprehensive knowledge of HIV transmission - all	0.521	0.018	1387	1200	1.327	0.034	0.485	0.557
Comprehensive knowledge of HIV transmission - youth	0.478	0.022	645	546	1.093	0.045	0.435	0.521
Abstinence among youth (never had sex)	0.409	0.030	567	481	1.458	0.074	0.349	0.469
Sexual activity in past 12 months (never-married youth)	0.337	0.025	567	481	1.264	0.074	0.287	0.388
Had medical injections in past 12 months	0.380	0.018	1387	1200	1.384	0.048	0.344	0.416
Had HIV test and received results last time	0.085	0.010	1387	1200	1.343	0.119	0.065	0.105
Accepting attitudes towards people with HIV	0.355	0.015	1385	1199	1.158	0.042	0.325	0.384
HIV prevalence	0.067	0.008	1214	1084	1.151	0.128	0.049	0.083
Syphilis prevalence	0.029	0.006	1148	1045	1.191	0.203	0.017	0.041
WOMEN AND MEN								
Care and support for adults	0.037	0.019	123	102	1.003	0.506	0.000	0.075
Care and support for orphans and vulnerable children	0.000	0.000	772	640	na	na	0.000	0.000

na = Not applicable

Table B.4 Sampling errors for rural sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.000	0.000	8146	8433	na	na	0.000	0.000
No education	0.256	0.010	8146	8433	2.130	0.040	0.235	0.277
With secondary education or higher	0.140	0.007	8146	8433	1.942	0.053	0.125	0.155
Never married (in union)	0.201	0.006	8146	8433	1.407	0.031	0.189	0.214
Currently married (in union)	0.667	0.007	8146	8433	1.363	0.011	0.653	0.681
Currently using any contraceptive method	0.169	0.008	5537	5626	1.498	0.045	0.154	0.184
Currently using a modern method	0.160	0.007	5537	5626	1.498	0.046	0.145	0.175
Had first sex before age 18	0.628	0.012	2170	2260	1.124	0.019	0.604	0.651
Had two or more sexual partners in past 12 months	0.035	0.003	6114	6352	1.353	0.091	0.028	0.041
Had higher risk sex in the past 12 months	0.131	0.006	6115	6353	1.298	0.043	0.120	0.142
Condom use at last high risk sex - all	0.403	0.021	687	832	1.103	0.051	0.362	0.445
Condom use at last high risk sex (15-24)	0.477	0.027	387	462	1.054	0.056	0.423	0.530
Comprehensive knowledge of HIV transmission - all	0.250	0.008	8146	8433	1.610	0.031	0.235	0.266
Comprehensive knowledge of HIV transmission - youth	0.260	0.011	3229	3393	1.387	0.041	0.238	0.281
Abstinence among youth (never had sex)	0.683	0.015	1496	1595	1.216	0.021	0.654	0.713
Sexual activity in past 12 months (never-married youth)	0.219	0.013	1496	1595	1.250	0.061	0.192	0.245
Had medical injections in past 12 months	0.508	0.009	8146	8433	1.668	0.018	0.489	0.526
Had HIV test and received results last time	0.032	0.003	8146	8433	1.362	0.084	0.026	0.037
Accepting attitudes towards people with HIV	0.176	0.008	7965	8296	1.853	0.045	0.160	0.192
HIV prevalence	0.065	0.004	7715	7905	1.418	0.063	0.058	0.074
Syphilis prevalence	0.033	0.002	7512	7646	0.992	0.064	0.029	0.037
MEN								
Urban residence	0.000	0.000	6622	6809	na	na	0.000	0.000
No education	0.096	0.006	6622	6809	1.706	0.064	0.083	0.108
With secondary education or higher	0.254	0.009	6622	6809	1.696	0.036	0.235	0.272
Never married (in union)	0.375	0.007	6622	6809	1.224	0.019	0.360	0.389
Currently married (in union)	0.548	0.008	6622	6809	1.317	0.015	0.531	0.564
Had first sex before age 18	0.472	0.016	1584	1658	1.253	0.033	0.440	0.503
Had two or more sexual partners in past 12 months	0.285	0.008	4721	4819	1.198	0.028	0.269	0.301
Had higher risk sex in the past 12 months	0.340	0.009	4725	4822	1.346	0.027	0.321	0.358
Condom use at last high risk sex - all	0.481	0.016	1493	1638	1.212	0.033	0.449	0.512
Condom use at last high risk sex (15-24)	0.513	0.022	759	815	1.237	0.044	0.468	0.558
Comprehensive knowledge of HIV transmission - all	0.330	0.008	6622	6809	1.376	0.024	0.314	0.346
Comprehensive knowledge of HIV transmission - youth	0.329	0.011	2658	2785	1.247	0.035	0.306	0.351
Abstinence among youth (never had sex)	0.518	0.014	2177	2295	1.337	0.028	0.489	0.547
Sexual activity in past 12 months (never-married youth)	0.294	0.012	2177	2295	1.268	0.042	0.269	0.318
Had medical injections in past 12 months	0.379	0.008	6622	6809	1.377	0.022	0.363	0.396
Had HIV test and received results llast time	0.030	0.003	6622	6809	1.272	0.089	0.024	0.035
Accepting attitudes towards people with HIV	0.269	0.008	6519	6740	1.380	0.028	0.254	0.284
HIV prevalence	0.048	0.004	6219	6352	1.334	0.076	0.040	0.055
Syphilis prevalence	0.031	0.002	6067	6172	0.972	0.071	0.027	0.036
WOMEN AND MEN								
Care and support for adults	0.005	0.002	886	890	1.005	0.506	0.000	0.009
Care and support for orphans and vulnerable children	0.002	0.001	4239	4314	1.150	0.385	0.001	0.004

na = Not applicable

Table B.5 Sampling errors for Central sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.150	0.015	942	1656	1.306	0.102	0.119	0.180
No education	0.103	0.019	942	1656	1.930	0.186	0.065	0.141
With secondary education or higher	0.286	0.023	942	1656	1.548	0.080	0.241	0.332
Never married (in union)	0.267	0.016	942	1656	1.111	0.060	0.235	0.299
Currently married (in union)	0.566	0.018	942	1656	1.135	0.032	0.529	0.603
Currently using any contraceptive method	0.286	0.022	537	937	1.108	0.076	0.242	0.329
Currently using a modern method	0.267	0.021	537	937	1.112	0.080	0.225	0.310
Had first sex before age 18	0.741	0.031	255	449	1.133	0.042	0.679	0.804
Had two or more sexual partners in past 12 months	0.067	0.011	705	1235	1.209	0.169	0.045	0.090
Had higher risk sex in the past 12 months	0.266	0.018	705	1235	1.053	0.066	0.231	0.301
Condom use at last high risk sex - all	0.506	0.038	185	329	1.033	0.075	0.430	0.582
Condom use at last high risk sex (15-24)	0.546	0.044	98	174	0.868	0.080	0.458	0.634
Comprehensive knowledge of HIV transmission - all	0.456	0.023	942	1656	1.389	0.049	0.410	0.501
Comprehensive knowledge of HIV transmission - youth	0.459	0.031	414	730	1.259	0.067	0.397	0.520
Abstinence among youth (never had sex)	0.539	0.030	230	406	0.907	0.055	0.479	0.599
Sexual activity in past 12 months (never-married youth)	0.304	0.030	230	406	0.975	0.097	0.245	0.363
Had medical injections in past 12 months	0.515	0.024	942	1656	1.467	0.046	0.467	0.563
Had HIV test and received results last time	0.046	0.007	942	1656	1.009	0.150	0.032	0.060
Accepting attitudes towards people with HIV	0.200	0.017	939	1650	1.299	0.085	0.166	0.234
HIV prevalence	0.104	0.011	856	1543	0.991	0.102	0.083	0.126
Syphilis prevalence	0.041	0.007	837	1489	1.070	0.181	0.026	0.055
MEN								
Urban residence	0.147	0.011	844	1451	0.933	0.077	0.124	0.170
No education	0.083	0.012	844	1451	1.294	0.148	0.058	0.107
With secondary education or higher	0.322	0.031	844	1451	1.920	0.096	0.260	0.384
Never married (in union)	0.448	0.015	844	1451	0.897	0.034	0.417	0.479
Currently married (in union)	0.457	0.017	844	1451	1.002	0.038	0.422	0.491
Had first sex before age 18	0.453	0.031	242	418	0.958	0.068	0.391	0.514
Had two or more sexual partners in past 12 months	0.380	0.023	569	980	1.115	0.060	0.335	0.426
Had higher risk sex in the past 12 months	0.501	0.026	569	980	1.247	0.052	0.449	0.553
Condom use at last high risk sex - all	0.681	0.032	283	491	1.138	0.046	0.618	0.744
Condom use at last high risk sex (15-24)	0.692	0.051	132	231	1.253	0.073	0.591	0.793
Comprehensive knowledge of HIV transmission - all	0.442	0.020	844	1451	1.142	0.044	0.403	0.481
Comprehensive knowledge of HIV transmission - youth	0.406	0.030	376	649	1.191	0.074	0.345	0.466
Abstinence among youth (never had sex)	0.456	0.029	314	540	1.017	0.063	0.399	0.514
Sexual activity in past 12 months (never-married youth)	0.314	0.029	314	540	1.104	0.092	0.256	0.372
Had medical injections in past 12 months	0.394	0.020	844	1451	1.179	0.050	0.354	0.434
Had HIV test and received results last time	0.033	0.006	844	1451	0.960	0.179	0.021	0.045
Accepting attitudes towards people with HIV	0.241	0.019	844	1451	1.258	0.077	0.204	0.278
HIV prevalence	0.064	0.009	762	1350	0.974	0.137	0.046	0.081
Syphilis prevalence	0.029	0.005	743	1309	0.860	0.186	0.018	0.040
WOMEN AND MEN								
Care and support for adults	0.000	0.000	92	159	na	na	0.000	0.000
Care and support for orphans and vulnerable children	0.004	0.003	508	891	0.966	0.696	0.000	0.009

na = Not applicable

Table B.6 Sampling errors for Kampala sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	1.000	0.000	1099	668	na	0.000	1.000	1.000
No education	0.044	0.005	1099	668	0.810	0.114	0.034	0.054
With secondary education or higher	0.591	0.022	1099	668	1.511	0.038	0.546	0.635
Never married (in union)	0.394	0.025	1099	668	1.706	0.064	0.344	0.444
Currently married (in union)	0.448	0.025	1099	668	1.640	0.055	0.398	0.497
Currently using any contraceptive method	0.429	0.025	492	299	1.122	0.058	0.379	0.479
Currently using a modern method	0.417	0.026	492	299	1.175	0.063	0.364	0.469
Had first sex before age 18	0.606	0.030	401	244	1.237	0.050	0.546	0.666
Had two or more sexual partners in past 12 months	0.073	0.012	736	448	1.300	0.170	0.048	0.098
Had higher risk sex in the past 12 months	0.346	0.022	736	448	1.249	0.063	0.303	0.390
Condom use at last high risk sex - all	0.663	0.025	255	155	0.848	0.038	0.612	0.713
Condom use at last high risk sex (15-24)	0.643	0.032	157	95	0.827	0.049	0.580	0.707
Comprehensive knowledge of HIV transmission - all	0.525	0.016	1099	668	1.041	0.030	0.494	0.556
Comprehensive knowledge of HIV transmission - youth	0.516	0.020	558	339	0.955	0.039	0.476	0.557
Abstinence among youth (never had sex)	0.449	0.025	363	221	0.972	0.057	0.398	0.500
Sexual activity in past 12 months (never-married youth)	0.364	0.031	363	221	1.218	0.085	0.302	0.425
Had medical injections in past 12 months	0.488	0.016	1099	668	1.063	0.033	0.456	0.520
Had HIV test and received results last time	0.094	0.010	1099	668	1.140	0.107	0.074	0.114
Accepting attitudes towards people with HIV	0.203	0.015	1096	666	1.226	0.074	0.173	0.232
HIV prevalence	0.117	0.014	959	630	1.281	0.119	0.090	0.146
Syphilis prevalence	0.019	0.004	862	611	0.779	0.194	0.011	0.026
MEN								
Urban residence	1.000	0.000	811	547	na	0.000	1.000	1.000
No education	0.016	0.004	811	547	0.933	0.257	0.008	0.024
With secondary education or higher	0.670	0.024	811	547	1.476	0.036	0.621	0.718
Never married (in union)	0.527	0.027	811	547	1.533	0.051	0.473	0.580
Currently married (in union)	0.372	0.025	811	547	1.456	0.066	0.323	0.422
Had first sex before age 18	0.433	0.034	270	182	1.138	0.079	0.365	0.502
Had two or more sexual partners in past 12 months	0.346	0.020	537	362	0.993	0.059	0.306	0.387
Had higher risk sex in the past 12 months	0.607	0.025	537	362	1.199	0.042	0.557	0.658
Condom use at last high risk sex - all	0.785	0.023	326	220	1.016	0.029	0.739	0.832
Condom use at last high risk sex (15-24)	0.793	0.037	140	94	1.089	0.047	0.718	0.868
Comprehensive knowledge of HIV transmission - all	0.554	0.023	811	547	1.318	0.042	0.508	0.600
Comprehensive knowledge of HIV transmission - youth	0.529	0.029	384	259	1.119	0.054	0.472	0.586
Abstinence among youth (never had sex)	0.464	0.037	336	226	1.343	0.079	0.391	0.537
Sexual activity in past 12 months (never-married youth)	0.336	0.037	336	226	1.420	0.109	0.263	0.410
Had medical injections in past 12 months	0.348	0.018	811	547	1.066	0.051	0.312	0.383
Had HIV test and received results last time	0.086	0.012	811	547	1.184	0.135	0.063	0.110
Accepting attitudes towards people with HIV	0.356	0.020	810	546	1.217	0.058	0.315	0.397
HIV prevalence	0.045	0.008	707	510	1.062	0.186	0.028	0.062
Syphilis prevalence	0.023	0.006	658	495	1.059	0.274	0.010	0.035
WOMEN AND MEN								
Care and support for adults	0.038	0.037	52	29	1.001	0.975	0.000	0.113
Care and support for orphans and vulnerable children	0.000	0.000	362	200	na	na	0.000	0.000

na = Not applicable

Table B.7 Sampling errors for East Central sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.132	0.014	1169	1555	1.403	0.105	0.104	0.160
No education	0.178	0.020	1169	1555	1.821	0.114	0.138	0.219
With secondary education or higher	0.263	0.021	1169	1555	1.650	0.081	0.220	0.305
Never married (in union)	0.218	0.018	1169	1555	1.495	0.083	0.182	0.254
Currently married (in union)	0.637	0.018	1169	1555	1.302	0.029	0.600	0.674
Currently using any contraceptive method	0.215	0.020	749	990	1.320	0.092	0.176	0.255
Currently using a modern method	0.203	0.019	749	990	1.275	0.092	0.166	0.241
Had first sex before age 18	0.772	0.025	317	423	1.039	0.032	0.723	0.821
Had two or more sexual partners in past 12 months	0.058	0.008	891	1181	0.983	0.133	0.042	0.073
Had higher risk sex in the past 12 months	0.189	0.014	891	1181	1.031	0.072	0.162	0.216
Condom use at last high risk sex - all	0.559	0.047	167	223	1.228	0.085	0.464	0.653
Condom use at last high risk sex (15-24)	0.633	0.054	102	137	1.123	0.085	0.525	0.741
Comprehensive knowledge of HIV transmission - all	0.387	0.021	1169	1555	1.487	0.055	0.345	0.429
Comprehensive knowledge of HIV transmission - youth	0.388	0.027	490	655	1.226	0.070	0.334	0.442
Abstinence among youth (never had sex)	0.550	0.037	240	323	1.148	0.067	0.476	0.624
Sexual activity in past 12 months (never-married youth)	0.317	0.034	240	323	1.144	0.109	0.248	0.385
Had medical injections in past 12 months	0.597	0.022	1169	1555	1.563	0.038	0.552	0.642
Had HIV test and received results last time	0.034	0.006	1169	1555	1.185	0.184	0.022	0.047
Accepting attitudes towards people with HIV	0.153	0.026	1169	1555	2.425	0.167	0.102	0.204
HIV prevalence	0.074	0.011	1138	1462	1.343	0.143	0.053	0.095
Syphilis prevalence	0.024	0.005	1135	1408	1.117	0.211	0.014	0.034
MEN								
Urban residence	0.103	0.014	877	1146	1.363	0.136	0.075	0.131
No education	0.082	0.010	877	1146	1.107	0.125	0.062	0.103
With secondary education or higher	0.368	0.026	877	1146	1.581	0.070	0.317	0.420
Never married (in union)	0.378	0.021	877	1146	1.255	0.054	0.337	0.419
Currently married (in union)	0.553	0.018	877	1146	1.089	0.033	0.516	0.589
Had first sex before age 18	0.558	0.044	204	268	1.271	0.079	0.470	0.647
Had two or more sexual partners in past 12 months	0.394	0.019	635	827	0.957	0.047	0.357	0.432
Had higher risk sex in the past 12 months	0.387	0.020	635	827	1.057	0.053	0.346	0.428
Condom use at last high risk sex - all	0.558	0.035	245	320	1.085	0.062	0.489	0.627
Condom use at last high risk sex (15-24)	0.601	0.041	123	160	0.917	0.068	0.520	0.683
Comprehensive knowledge of HIV transmission - all	0.436	0.020	877	1146	1.188	0.046	0.396	0.476
Comprehensive knowledge of HIV transmission - youth	0.406	0.024	364	477	0.918	0.058	0.358	0.453
Abstinence among youth (never had sex)	0.450	0.040	309	406	1.417	0.089	0.370	0.530
Sexual activity in past 12 months (never-married youth)	0.342	0.034	309	406	1.271	0.101	0.273	0.410
Had medical injections in past 12 months	0.413	0.020	877	1146	1.227	0.049	0.373	0.454
Had HIV test and received results last time	0.031	0.008	877	1146	1.367	0.256	0.015	0.048
Accepting attitudes towards people with HIV	0.186	0.013	877	1146	0.978	0.069	0.161	0.212
HIV prevalence	0.053	0.010	851	1070	1.333	0.194	0.032	0.073
Syphilis prevalence	0.019	0.004	845	1036	0.833	0.208	0.011	0.027
WOMEN AND MEN								
Care and support for adults	0.009	0.009	108	142	0.967	0.973	0.000	0.027
Care and support for orphans and vulnerable children	0.002	0.002	533	707	1.037	0.995	0.000	0.006

Table B.8 Sampling errors for Eastern sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.075	0.010	915	857	1.147	0.133	0.055	0.095
No education	0.186	0.019	915	857	1.499	0.104	0.148	0.225
With secondary education or higher	0.168	0.016	915	857	1.286	0.095	0.136	0.200
Never married (in union)	0.196	0.015	915	857	1.134	0.076	0.166	0.226
Currently married (in union)	0.718	0.020	915	857	1.342	0.028	0.678	0.758
Currently using any contraceptive method	0.227	0.022	659	615	1.326	0.095	0.184	0.271
Currently using a modern method	0.223	0.021	659	615	1.316	0.096	0.180	0.265
Had first sex before age 18	0.708	0.035	230	214	1.181	0.050	0.637	0.779
Had two or more sexual partners in past 12 months	0.047	0.010	738	691	1.255	0.209	0.027	0.066
Had higher risk sex in the past 12 months	0.154	0.021	738	691	1.564	0.135	0.113	0.196
Condom use at last high risk sex - all	0.367	0.042	110	107	0.906	0.114	0.283	0.450
Condom use at last high risk sex (15-24)	0.539	0.060	60	58	0.926	0.112	0.418	0.659
Comprehensive knowledge of HIV transmission - all	0.316	0.024	915	857	1.529	0.074	0.269	0.363
Comprehensive knowledge of HIV transmission - youth	0.338	0.038	356	333	1.530	0.114	0.261	0.415
Abstinence among youth (never had sex)	0.550	0.047	175	164	1.234	0.085	0.457	0.643
Sexual activity in past 12 months (never-married youth)	0.259	0.040	175	164	1.201	0.154	0.179	0.339
Had medical injections in past 12 months	0.557	0.017	915	857	1.037	0.031	0.523	0.591
Had HIV test and received results last time	0.046	0.013	915	857	1.939	0.291	0.019	0.073
Accepting attitudes towards people with HIV	0.165	0.023	905	848	1.840	0.138	0.119	0.210
HIV prevalence	0.063	0.011	851	811	1.286	0.175	0.041	0.084
Syphilis prevalence	0.028	0.006	828	781	1.049	0.215	0.016	0.040
MEN								
Urban residence	0.076	0.011	822	770	1.168	0.142	0.054	0.097
No education	0.071	0.012	822	770	1.342	0.169	0.047	0.096
With secondary education or higher	0.315	0.023	822	770	1.393	0.072	0.270	0.361
Never married (in union)	0.389	0.021	822	770	1.232	0.054	0.347	0.431
Currently married (in union)	0.524	0.024	822	770	1.376	0.046	0.476	0.572
Had first sex before age 18	0.722	0.042	210	197	1.371	0.059	0.637	0.807
Had two or more sexual partners in past 12 months	0.365	0.023	641	599	1.191	0.062	0.320	0.410
Had higher risk sex in the past 12 months	0.480	0.027	641	599	1.360	0.056	0.427	0.534
Condom use at last high risk sex - all	0.427	0.026	303	288	0.919	0.061	0.375	0.479
Condom use at last high risk sex (15-24)	0.443	0.042	169	160	1.108	0.096	0.358	0.528
Comprehensive knowledge of HIV transmission - all	0.381	0.024	822	770	1.444	0.064	0.332	0.430
Comprehensive knowledge of HIV transmission - youth	0.389	0.035	345	323	1.339	0.090	0.319	0.460
Abstinence among youth (never had sex)	0.324	0.035	289	272	1.265	0.108	0.254	0.394
Sexual activity in past 12 months (never-married youth)	0.503	0.027	289	272	0.915	0.054	0.449	0.557
Had medical injections in past 12 months	0.405	0.022	822	770	1.311	0.055	0.360	0.450
Had HIV test and received results last time	0.039	0.012	822	770	1.815	0.315	0.014	0.063
Accepting attitudes towards people with HIV	0.265	0.018	822	770	1.158	0.067	0.229	0.300
HIV prevalence	0.044	0.009	759	716	1.241	0.207	0.026	0.063
Syphilis prevalence	0.032	0.006	738	695	0.969	0.195	0.019	0.044
WOMEN AND MEN								
Care and support for adults	0.013	0.013	81	75	1.002	0.957	0.000	0.039
Care and support for orphans and vulnerable children	0.003	0.003	319	309	1.054	1.013	0.000	0.010

Table B.9 Sampling errors for Northeast sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.047	0.002	1246	829	0.374	0.048	0.042	0.051
No education	0.473	0.055	1246	829	3.867	0.116	0.364	0.582
With secondary education or higher	0.073	0.010	1246	829	1.368	0.138	0.053	0.094
Never married (in union)	0.172	0.014	1246	829	1.349	0.084	0.143	0.201
Currently married (in union)	0.750	0.016	1246	829	1.322	0.022	0.718	0.783
Currently using any contraceptive method	0.156	0.018	930	622	1.525	0.116	0.120	0.192
Currently using a modern method	0.153	0.018	930	622	1.528	0.118	0.117	0.189
Had first sex before age 18	0.468	0.035	340	230	1.286	0.074	0.398	0.538
Had two or more sexual partners in past 12 months	0.018	0.006	953	633	1.315	0.314	0.007	0.029
Had higher risk sex in the past 12 months	0.086	0.010	954	634	1.074	0.114	0.066	0.105
Condom use at last high risk sex - all	0.280	0.038	78	54	0.740	0.135	0.204	0.356
Condom use at last high risk sex (15-24)	0.315	0.061	40	27	0.817	0.193	0.193	0.436
Comprehensive knowledge of HIV transmission - all	0.132	0.015	1246	829	1.544	0.112	0.103	0.162
Comprehensive knowledge of HIV transmission - youth	0.166	0.023	459	309	1.308	0.137	0.121	0.212
Abstinence among youth (never had sex)	0.749	0.039	201	131	1.256	0.051	0.671	0.826
Sexual activity in past 12 months (never-married youth)	0.212	0.037	201	131	1.281	0.175	0.138	0.286
Had medical injections in past 12 months	0.440	0.030	1246	829	2.164	0.069	0.379	0.500
Had HIV test and received results last time	0.019	0.005	1246	829	1.254	0.255	0.009	0.029
Accepting attitudes towards people with HIV	0.154	0.015	1139	760	1.402	0.097	0.124	0.184
HIV prevalence	0.037	0.006	1192	775	1.126	0.165	0.025	0.050
Syphilis prevalence	0.052	0.008	1149	749	1.247	0.160	0.036	0.069
MEN								
Urban residence	0.056	0.012	913	610	1.552	0.211	0.032	0.080
No education	0.264	0.052	913	610	3.588	0.198	0.159	0.369
With secondary education or higher	0.200	0.021	913	610	1.562	0.103	0.158	0.241
Never married (in union)	0.286	0.019	913	610	1.254	0.066	0.249	0.324
Currently married (in union)	0.684	0.019	913	610	1.237	0.028	0.645	0.722
Had first sex before age 18	0.393	0.027	190	132	0.756	0.068	0.339	0.447
Had two or more sexual partners in past 12 months	0.138	0.020	678	450	1.500	0.144	0.099	0.178
Had higher risk sex in the past 12 months	0.185	0.026	679	450	1.725	0.139	0.134	0.237
Condom use at last high risk sex - all	0.359	0.058	120	83	1.317	0.161	0.243	0.475
Condom use at last high risk sex (15-24)	0.446	0.086	59	41	1.311	0.192	0.275	0.617
Comprehensive knowledge of HIV transmission - all	0.284	0.027	913	610	1.792	0.094	0.230	0.337
Comprehensive knowledge of HIV transmission - youth	0.328	0.035	308	211	1.289	0.105	0.259	0.397
Abstinence among youth (never had sex)	0.558	0.034	230	156	1.039	0.061	0.490	0.626
Sexual activity in past 12 months (never-married youth)	0.213	0.029	230	156	1.056	0.134	0.156	0.270
Had medical injections in past 12 months	0.334	0.032	913	610	2.046	0.096	0.270	0.398
Had HIV test and received results last time	0.034	0.009	913	610	1.458	0.256	0.017	0.052
Accepting attitudes towards people with HIV	0.314	0.032	839	568	2.015	0.103	0.249	0.379
HIV prevalence	0.032	0.006	861	565	0.980	0.184	0.021	0.044
Syphilis prevalence	0.047	0.008	826	550	1.053	0.170	0.031	0.063
WOMEN AND MEN								
Care and support for adults	0.000	0.000	85	58	na	na	0.000	0.000
Care and support for orphans and vulnerable children	0.000	0.000	556	364	na	na	0.000	0.000

na = Not applicable

Table B.10 Sampling errors for North Central sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.100	0.005	1034	970	0.588	0.055	0.089	0.111
No education	0.272	0.021	1034	970	1.501	0.076	0.230	0.313
With secondary education or higher	0.090	0.015	1034	970	1.666	0.165	0.061	0.120
Never married (in union)	0.133	0.010	1034	970	0.992	0.079	0.112	0.154
Currently married (in union)	0.726	0.018	1034	970	1.334	0.025	0.689	0.763
Currently using any contraceptive method	0.120	0.018	750	705	1.510	0.149	0.085	0.156
Currently using a modern method	0.118	0.017	750	705	1.471	0.147	0.083	0.152
Had first sex before age 18	0.749	0.027	275	259	1.016	0.036	0.696	0.802
Had two or more sexual partners in past 12 months	0.015	0.005	828	777	1.206	0.344	0.005	0.025
Had higher risk sex in the past 12 months	0.112	0.013	828	777	1.200	0.118	0.085	0.138
Condom use at last high risk sex - all	0.172	0.046	93	87	1.171	0.268	0.080	0.265
Condom use at last high risk sex (15-24)	0.175	0.055	46	43	0.974	0.315	0.065	0.285
Comprehensive knowledge of HIV transmission - all	0.161	0.016	1034	970	1.373	0.097	0.130	0.193
Comprehensive knowledge of HIV transmission - youth	0.171	0.023	373	350	1.155	0.132	0.126	0.216
Abstinence among youth (never had sex)	0.602	0.056	128	119	1.288	0.093	0.490	0.713
Sexual activity in past 12 months (never-married youth)	0.280	0.036	128	119	0.899	0.128	0.208	0.352
Had medical injections in past 12 months	0.508	0.017	1034	970	1.119	0.034	0.473	0.543
Had HIV test and received results last time	0.043	0.009	1034	970	1.416	0.208	0.025	0.061
Accepting attitudes towards people with HIV	0.282	0.025	1026	962	1.749	0.087	0.233	0.331
HIV prevalence	0.092	0.012	961	918	1.304	0.132	0.068	0.117
Syphilis prevalence	0.035	0.007	914	886	1.137	0.197	0.021	0.049
MEN								
Urban residence	0.090	0.010	868	795	1.056	0.114	0.069	0.110
No education	0.035	0.005	868	795	0.883	0.158	0.024	0.046
With secondary education or higher	0.271	0.018	868	795	1.179	0.066	0.235	0.307
Never married (in union)	0.295	0.021	868	795	1.344	0.071	0.253	0.336
Currently married (in union)	0.654	0.026	868	795	1.587	0.039	0.603	0.705
Had first sex before age 18	0.517	0.049	203	186	1.401	0.095	0.419	0.616
Had two or more sexual partners in past 12 months	0.243	0.016	690	633	0.965	0.065	0.211	0.275
Had higher risk sex in the past 12 months	0.281	0.020	690	633	1.166	0.071	0.241	0.321
Condom use at last high risk sex - all	0.344	0.046	194	178	1.338	0.133	0.253	0.436
Condom use at last high risk sex (15-24)	0.415	0.057	103	94	1.163	0.137	0.302	0.529
Comprehensive knowledge of HIV transmission - all	0.290	0.015	868	795	0.999	0.053	0.259	0.321
Comprehensive knowledge of HIV transmission - youth	0.317	0.031	299	273	1.162	0.099	0.254	0.380
Abstinence among youth (never had sex)	0.385	0.044	231	211	1.368	0.114	0.297	0.473
Sexual activity in past 12 months (never-married youth)	0.386	0.041	231	211	1.277	0.106	0.304	0.468
Had medical injections in past 12 months	0.390	0.016	868	795	0.970	0.041	0.358	0.422
Had HIV test and received results last time	0.053	0.009	868	795	1.226	0.176	0.035	0.072
Accepting attitudes towards people with HIV	0.437	0.019	865	792	1.113	0.043	0.399	0.474
HIV prevalence	0.071	0.012	772	732	1.323	0.170	0.048	0.097
Syphilis prevalence	0.060	0.008	727	712	0.950	0.140	0.043	0.076
WOMEN AND MEN								
Care and support for adults	0.011	0.007	274	244	1.064	0.610	0.000	0.024
Care and support for orphans and vulnerable children	0.005	0.003	918	817	1.234	0.659	0.000	0.012

Table B.11 Sampling errors for West Nile sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.077	0.007	1451	958	0.944	0.086	0.063	0.090
No education	0.340	0.028	1451	958	2.239	0.082	0.284	0.396
With secondary education or higher	0.065	0.010	1451	958	1.533	0.152	0.046	0.085
Never married (in union)	0.205	0.014	1451	958	1.329	0.069	0.177	0.234
Currently married (in union)	0.634	0.014	1451	958	1.128	0.023	0.605	0.662
Currently using any contraceptive method	0.083	0.010	920	607	1.062	0.116	0.064	0.103
Currently using a modern method	0.078	0.010	920	607	1.141	0.129	0.058	0.098
Had first sex before age 18	0.475	0.033	385	255	1.308	0.070	0.409	0.542
Had two or more sexual partners in past 12 months	0.016	0.005	949	630	1.139	0.293	0.007	0.025
Had higher risk sex in the past 12 months	0.055	0.010	949	630	1.331	0.179	0.035	0.075
Condom use at last high risk sex - all	0.432	0.077	50	35	1.084	0.178	0.278	0.585
Condom use at last high risk sex (15-24)	0.450	0.086	41	29	1.099	0.192	0.277	0.623
Comprehensive knowledge of HIV transmission - all	0.116	0.014	1451	958	1.676	0.122	0.087	0.144
Comprehensive knowledge of HIV transmission - youth	0.133	0.018	600	396	1.292	0.135	0.097	0.169
Abstinence among youth (never had sex)	0.848	0.037	293	192	1.761	0.044	0.774	0.922
Sexual activity in past 12 months (never-married youth)	0.108	0.029	293	192	1.588	0.267	0.050	0.166
Had medical injections in past 12 months	0.626	0.041	1451	958	3.198	0.065	0.544	0.707
Had HIV test and received results last time	0.044	0.007	1451	958	1.386	0.170	0.029	0.059
Accepting attitudes towards people with HIV	0.185	0.023	1420	938	2.202	0.123	0.139	0.230
HIV prevalence	0.027	0.005	1415	899	1.157	0.198	0.016	0.037
Syphilis prevalence	0.012	0.003	1364	866	1.008	0.249	0.006	0.018
MEN								
Urban residence	0.068	0.007	1148	735	0.975	0.107	0.053	0.082
No education	0.042	0.007	1148	735	1.120	0.157	0.029	0.056
With secondary education or higher	0.273	0.021	1148	735	1.605	0.077	0.230	0.315
Never married (in union)	0.404	0.020	1148	735	1.378	0.049	0.364	0.444
Currently married (in union)	0.522	0.019	1148	735	1.269	0.036	0.485	0.560
Had first sex before age 18	0.409	0.038	313	201	1.378	0.094	0.332	0.485
Had two or more sexual partners in past 12 months	0.277	0.023	745	481	1.408	0.083	0.231	0.323
Had higher risk sex in the past 12 months	0.290	0.026	746	482	1.580	0.091	0.237	0.342
Condom use at last high risk sex - all	0.458	0.029	210	139	0.850	0.064	0.399	0.517
Condom use at last high risk sex (15-24)	0.500	0.041	131	87	0.933	0.082	0.419	0.582
Comprehensive knowledge of HIV transmission - all	0.376	0.024	1148	735	1.689	0.064	0.327	0.424
Comprehensive knowledge of HIV transmission - youth	0.395	0.029	515	329	1.355	0.074	0.336	0.453
Abstinence among youth (never had sex)	0.566	0.035	430	275	1.447	0.061	0.497	0.635
Sexual activity in past 12 months (never-married youth)	0.252	0.033	430	275	1.576	0.131	0.186	0.318
Had medical injections in past 12 months	0.430	0.024	1148	735	1.657	0.056	0.381	0.478
Had HIV test and received results last time	0.041	0.006	1148	735	1.073	0.153	0.028	0.053
Accepting attitudes towards people with HIV	0.352	0.023	1138	728	1.594	0.064	0.307	0.398
HIV prevalence	0.019	0.003	1104	685	0.874	0.196	0.011	0.025
Syphilis prevalence	0.016	0.004	1086	664	1.059	0.257	0.008	0.024
WOMEN AND MEN								
Care and support for adults	0.006	0.006	159	103	0.986	1.008	0.000	0.018
Care and support for orphans and vulnerable children	0.001	0.001	787	492	1.009	0.999	0.000	0.004

Table B.12 Sampling errors for Western sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.031	0.003	1058	1140	0.536	0.093	0.025	0.036
No education	0.254	0.027	1058	1140	1.986	0.105	0.201	0.307
With secondary education or higher	0.136	0.024	1058	1140	2.240	0.174	0.089	0.183
Never married (in union)	0.195	0.017	1058	1140	1.355	0.085	0.162	0.228
Currently married (in union)	0.684	0.017	1058	1140	1.218	0.025	0.649	0.719
Currently using any contraceptive method	0.164	0.024	721	780	1.719	0.145	0.117	0.212
Currently using a modern method	0.158	0.023	721	780	1.711	0.147	0.112	0.205
Had first sex before age 18	0.606	0.031	304	328	1.119	0.052	0.543	0.668
Had two or more sexual partners in past 12 months	0.018	0.006	829	897	1.329	0.345	0.005	0.030
Had higher risk sex in the past 12 months	0.099	0.011	829	897	1.020	0.107	0.078	0.121
Condom use at last high risk sex - all	0.390	0.044	82	89	0.816	0.113	0.302	0.479
Condom use at last high risk sex (15-24)	0.474	0.049	47	51	0.670	0.104	0.375	0.572
Comprehensive knowledge of HIV transmission - all	0.204	0.015	1058	1140	1.226	0.075	0.173	0.234
Comprehensive knowledge of HIV transmission - youth	0.175	0.022	435	468	1.221	0.127	0.130	0.219
Abstinence among youth (never had sex)	0.737	0.037	194	205	1.167	0.050	0.663	0.811
Sexual activity in past 12 months (never-married youth)	0.228	0.038	194	205	1.256	0.166	0.152	0.304
Had medical injections in past 12 months	0.501	0.018	1058	1140	1.164	0.036	0.465	0.537
Had HIV test and received results last time	0.031	0.005	1058	1140	0.864	0.147	0.022	0.041
Accepting attitudes towards people with HIV	0.242	0.022	1043	1124	1.650	0.090	0.199	0.286
HIV prevalence	0.077	0.015	1006	1071	1.696	0.186	0.050	0.108
Syphilis prevalence	0.043	0.005	954	1030	0.744	0.115	0.033	0.053
MEN								
Urban residence	0.039	0.002	906	945	0.372	0.061	0.034	0.044
No education	0.101	0.012	906	945	1.176	0.117	0.078	0.125
With secondary education or higher	0.234	0.025	906	945	1.766	0.106	0.185	0.284
Never married (in union)	0.353	0.017	906	945	1.088	0.049	0.318	0.387
Currently married (in union)	0.540	0.022	906	945	1.345	0.041	0.496	0.585
Had first sex before age 18	0.425	0.041	198	206	1.176	0.097	0.342	0.508
Had two or more sexual partners in past 12 months	0.217	0.018	642	672	1.103	0.083	0.181	0.253
Had higher risk sex in the past 12 months	0.294	0.017	643	673	0.947	0.058	0.260	0.329
Condom use at last high risk sex - all	0.500	0.045	189	198	1.239	0.090	0.409	0.590
Condom use at last high risk sex (15-24)	0.507	0.064	80	84	1.144	0.127	0.378	0.636
Comprehensive knowledge of HIV transmission - all	0.247	0.017	906	945	1.201	0.070	0.213	0.282
Comprehensive knowledge of HIV transmission - youth	0.231	0.022	343	355	0.944	0.093	0.188	0.274
Abstinence among youth (never had sex)	0.599	0.029	274	283	0.961	0.048	0.542	0.656
Sexual activity in past 12 months (never-married youth)	0.239	0.024	274	283	0.920	0.099	0.192	0.287
Had medical injections in past 12 months	0.304	0.022	906	945	1.430	0.072	0.260	0.348
Had HIV test and received results last time	0.026	0.005	906	945	0.975	0.198	0.016	0.036
Accepting attitudes towards people with HIV	0.290	0.020	893	932	1.345	0.070	0.249	0.331
HIV prevalence	0.058	0.012	844	871	1.561	0.216	0.033	0.082
Syphilis prevalence	0.037	0.007	823	847	1.136	0.202	0.022	0.051
WOMEN AND MEN								
Care and support for adults	0.000	0.000	75	81	na	na	0.000	0.000
Care and support for orphans and vulnerable children	0.000	0.000	475	512	na	na	0.000	0.000

na = Not applicable

Table B.13 Sampling errors for Southwest sample, Uganda 2004-05

Variable	Value (R)	Standard error (SE)	Number of cases: Unweighted (N)	Number of cases: Weighted (WN)	Design effect (DEFT)	Relative error (SE/R)	Confidence limits: R-2SE	Confidence limits: R+2SE
WOMEN								
Urban residence	0.060	0.017	1059	1309	2.305	0.281	0.026	0.093
No education	0.266	0.024	1059	1309	1.781	0.091	0.218	0.314
With secondary education or higher	0.130	0.017	1059	1309	1.680	0.134	0.095	0.164
Never married (in union)	0.242	0.017	1059	1309	1.279	0.069	0.209	0.276
Currently married (in union)	0.614	0.018	1059	1309	1.220	0.030	0.577	0.650
Currently using any contraceptive method	0.180	0.025	648	803	1.666	0.140	0.130	0.231
Currently using a modern method	0.158	0.025	648	803	1.749	0.159	0.108	0.208
Had first sex before age 18	0.413	0.025	285	353	0.839	0.059	0.364	0.462
Had two or more sexual partners in past 12 months	0.018	0.005	716	884	0.974	0.270	0.008	0.027
Had higher risk sex in the past 12 months	0.056	0.009	716	884	1.016	0.156	0.039	0.074
Condom use at last high risk sex - all	0.292	0.063	41	50	0.881	0.217	0.166	0.419
Condom use at last high risk sex (15-24)	0.421	0.137	19	23	1.182	0.327	0.146	0.696
Comprehensive knowledge of HIV transmission - all	0.171	0.014	1059	1309	1.172	0.079	0.144	0.198
Comprehensive knowledge of HIV transmission - youth	0.172	0.019	436	538	1.077	0.114	0.133	0.211
Abstinence among youth (never had sex)	0.856	0.033	233	287	1.418	0.038	0.791	0.922
Sexual activity in past 12 months (never-married youth)	0.076	0.024	233	287	1.381	0.315	0.028	0.125
Had medical injections in past 12 months	0.370	0.021	1059	1309	1.405	0.056	0.328	0.412
Had HIV test and received results last time	0.025	0.005	1059	1309	1.009	0.192	0.016	0.035
Accepting attitudes towards people with HIV	0.121	0.015	1050	1297	1.500	0.125	0.091	0.151
HIV prevalence	0.071	0.009	987	1218	1.082	0.127	0.054	0.091
Syphilis prevalence	0.026	0.005	982	1172	0.949	0.183	0.017	0.036
MEN								
Urban residence	0.071	0.009	820	1012	1.007	0.127	0.053	0.089
No education	0.074	0.008	820	1012	0.931	0.116	0.057	0.090
With secondary education or higher	0.218	0.023	820	1012	1.569	0.104	0.173	0.263
Never married (in union)	0.425	0.020	820	1012	1.184	0.048	0.384	0.466
Currently married (in union)	0.497	0.022	820	1012	1.244	0.044	0.454	0.541
Had first sex before age 18	0.297	0.036	197	242	1.106	0.122	0.225	0.369
Had two or more sexual partners in past 12 months	0.181	0.025	502	620	1.464	0.139	0.130	0.231
Had higher risk sex in the past 12 months	0.233	0.020	504	622	1.055	0.085	0.193	0.272
Condom use at last high risk sex - all	0.262	0.044	118	145	1.082	0.168	0.174	0.350
Condom use at last high risk sex (15-24)	0.226	0.060	53	65	1.041	0.267	0.105	0.347
Comprehensive knowledge of HIV transmission - all	0.219	0.018	820	1012	1.249	0.083	0.183	0.255
Comprehensive knowledge of HIV transmission - youth	0.196	0.019	369	454	0.897	0.095	0.159	0.234
Abstinence among youth (never had sex)	0.662	0.036	331	408	1.375	0.054	0.590	0.734
Sexual activity in past 12 months (never-married youth)	0.156	0.022	331	408	1.104	0.142	0.112	0.200
Had medical injections in past 12 months	0.370	0.023	820	1012	1.352	0.062	0.324	0.416
Had HIV test and received results last time	0.025	0.007	820	1012	1.368	0.302	0.010	0.039
Accepting attitudes towards people with HIV	0.223	0.019	816	1007	1.284	0.084	0.185	0.260
HIV prevalence	0.046	0.009	773	937	1.251	0.210	0.026	0.064
Syphilis prevalence	0.024	0.006	769	909	0.997	0.226	0.013	0.036
WOMEN AND MEN								
Care and support for adults	0.012	0.012	83	100	0.982	0.976	0.000	0.036
Care and support for orphans and vulnerable children	0.000	0.000	553	661	na	na	0.000	0.000

na = Not applicable

QUESTIONNAIRES

Appendix C

UGANDA HIV/AIDS SERO-BEHAVIORAL SURVEY **ENGLISH**
HOUSEHOLD QUESTIONNAIRE

IDENTIFICATION

DISTRICT _____

SUB-COUNTY/DIVISION _____

PARISH _____

LC1 _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER ..... | | | |

HOUSEHOLD NUMBER ..... | | | |

REGION ..... | |

DISTRICT ..... | | | |

URBAN/RURAL (URBAN=1, RURAL=2) ..... | |

KAMPALA/SMALL CITY/TOWN/RURAL ..... | |
(KAMPALA=1, SMALL CITY=2, TOWN=3, RURAL=4)

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY | | MONTH | | YEAR | | | |
INTERVIEWER'S NAME	_____	_____	_____	INTERVIEWER NUMBER | | |
RESULT*	_____	_____	_____	RESULT |
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS |
TIME	_____	_____		

*RESULT CODES:

1 COMPLETED
2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
4 POSTPONED
5 REFUSED
6 DWELLING VACANT OR ADDRESS NOT A DWELLING
7 DWELLING DESTROYED
8 DWELLING NOT FOUND
9 OTHER _____ (SPECIFY)

TOTAL PERSONS IN HOUSEHOLD | |

TOTAL ELIGIBLE WOMEN | |

TOTAL ELIGIBLE MEN | |

TOTAL ELIGIBLE CHILDREN | |

LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE | |

TEAM SUPERVISOR	DATA EDITOR	DATA ENTRY CLERK
NAME _____		
DATE _____ | | |	| | |	| | |

A. HOUSEHOLD SCHEDULE

Now we would like some information about the people who usually live in your household or who are staying with you no

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HH HEAD	SEX	AGE	RESIDENCE		ELIGIBILITY			ILL PERSONS	EDUCATION			PARENTAL SURVIVORSHIP AND RESIDENCE FOR PERSONS LESS THAN 18 YEARS OLD***				ELIGIBILITY (ORPHANS)
	Please give me the names or initials of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household.	What is the relationship of (NAME) to the head of the household?*	Is (NAME) male or female?	How old is (NAME)?	Does (NAME) usually live here?	Did (NAME) stay here last night?	CIRCLE LINE NO. OF ALL WOMEN AGE 15-59	CIRCLE LINE NO. OF ALL MEN AGE 15-59	CIRCLE LINE NO. OF ALL CHILD-REN AGE 0-4	IF AGE 18-59 YEARS	IF AGE 5 YRS OR OLDER		IF AGE 5-24 YEARS	Is (NAME)'s natural mother alive?	IF ALIVE	Is (NAME)'s natural father alive?	IF ALIVE	CIRCLE LINE NUMBER OF CHILDREN WITH ONE OR BOTH PARENTS DEAD ("NO" IN Q. 15 AND/ OR Q. 17)
										Has (NAME) been very sick for at least 3 mos. in the past 12 months? By very sick, I mean too sick to work or do nor-mal activities around the house.	Has (NAME) ever attended school?	What is the highest level of school (NAME) has attended?** What is the highest (class/ year) (NAME) completed at that level?**	Is (NAME) in school?		Does (NAME)'s natural mother live in this household? IF YES: What is her name/initials? RECORD MOTHER'S LINE NUMBER. IF NOT IN THE HOUSEHOLD, RECORD '00'		Does (NAME)'s natural father live in this household? IF YES: What is his name/initials? RECORD FATHER'S LINE NUMBER. IF NOT IN THE HOUSEHOLD, RECORD '00'	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
01			M F 1 2	IN YEARS	YES NO 1 2	YES NO 1 2	01	01	01	Y N DK 1 2 8	YES NO 1 2 Q. 15	LEVEL CLASS	YES NO 1 2	Y N DK 1 2 8		Y N DK 1 2 8		01
02			1 2		1 2	1 2	02	02	02	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		02
03			1 2		1 2	1 2	03	03	03	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		03
04			1 2		1 2	1 2	04	04	04	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		04
05			1 2		1 2	1 2	05	05	05	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		05
06			1 2		1 2	1 2	06	06	06	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		06
07			1 2		1 2	1 2	07	07	07	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		07
08			1 2		1 2	1 2	08	08	08	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		08
09			1 2		1 2	1 2	09	09	09	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		09
10			1 2		1 2	1 2	10	10	10	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		10

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HH HEAD	SEX	AGE	RESIDENCE		ELIGIBILITY			ILL PERSONS	EDUCATION			PARENTAL SURVIVORSHIP AND RESIDENCE FOR PERSONS LESS THAN 18 YEARS OLD***				ELIGIBILITY (ORPHANS)
	Please give me the names or initials of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household.	What is the relationship of (NAME) to the head of the household?*	Is (NAME) male or female?	How old is (NAME)?	Does (NAME) usually live here?	Did (NAME) stay here last night?	CIRCLE LINE NO. OF ALL WOMEN AGE 15-59	CIRCLE LINE NO. OF ALL MEN AGE 15-59	CIRCLE LINE NO. OF ALL CHILD-REN AGE 0-4	IF AGE 18-59 YEARS	IF AGE 5 YRS OR OLDER		IF AGE 5-24 YEARS	Is (NAME)'s natural mother alive?	IF ALIVE	Is (NAME)'s natural father alive?	IF ALIVE	CIRCLE LINE NUMBER OF CHILDREN WITH ONE OR BOTH PARENTS DEAD ("NO" IN Q. 15 AND/ OR Q. 17)
										Has (NAME) been very sick for at least 3 mos. in the past 12 months? By very sick, I mean too sick to work or do nor-mal activities around the house.	Has (NAME) ever attended school?	What is the highest level of school (NAME) has attended?** What is the highest (class/ year) (NAME) completed at that level?**	Is (NAME) in school?		Does (NAME)'s natural mother live in this household? IF YES: What is her name/initials? RECORD MOTHER'S LINE NUMBER. IF NOT IN THE HOUSEHOLD, RECORD '00'		Does (NAME)'s natural father live in this household? IF YES: What is his name/initials? RECORD FATHER'S LINE NUMBER. IF NOT IN THE HOUSEHOLD, RECORD '00'	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
			M F	IN YEARS	YES NO	YES NO				Y N DK	YES NO	LEVEL CLASS	YES NO	Y N DK		Y N DK		
11			1 2		1 2	1 2	11	11	11	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		11
12			1 2		1 2	1 2	12	12	12	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		12
13			1 2		1 2	1 2	13	13	13	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		13
14			1 2		1 2	1 2	14	14	14	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		14
15			1 2		1 2	1 2	15	15	15	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		15
16			1 2		1 2	1 2	16	16	16	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		16
17			1 2		1 2	1 2	17	17	17	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		17
18			1 2		1 2	1 2	18	18	18	1 2 8	1 2 Q. 15		1 2	1 2 8		1 2 8		18

*CODES FOR Q. 3 RELATIONSHIP TO HH HEAD:

01 = HEAD
02 = WIFE OR HUSBAND
03 = SON OR DAUGHTER
04 = SON-IN-LAW OR DAUGHTER-IN-LAW
05 = GRANDCHILD
06 = PARENT
07 = PARENT-IN-LAW
08 = BROTHER OR SISTER
09 = NIECE/NEPHEW BY BLOOD
10 = NIECE/NEPHEW BY MARRIAGE
11 = OTHER RELATIVE
12 = ADOPTED/FOSTER/ STEPCHILD
13 = NOT RELATED
98 = DON'T KNOW

**CODES FOR Q. 13 EDUCATION LEVEL:
1 = PRIMARY
2 = 'O' LEVEL
3 = 'A' LEVEL
4 = UNIVERSITY/ TERTIARY
8 = DON'T KNOW
EDUCATION CLASS:
00 = LESS THAN 1 YR COMPLETED
98 = DON'T KNOW

***Q.15 THROUGH Q.18 THESE QUESTIONS REFER TO THE BIOLOGICAL PARENTS OF THE CHILD.

IN Q.16 AND Q.18, RECORD '00' IF PARENT NOT LISTED IN HOUSEHOLD.

MARK 'X' HERE IF CONTINUATION SHEET USED

Just to make sure that I have a complete listing:

1) Are there any other persons such as small children or infants that we have not listed?
YES ☐ → ENTER EACH IN TABLE NO ☐

2) In addition, are there any other people who may not be members of you family, such as domestic servants, lodgers or friends who usually live here?
YES ☐ → ENTER EACH IN TABLE NO ☐

3) Are there any guests or temporary visitors staying here, or anyone else who slept here last night, who have not been listed?
YES ☐ → ENTER EACH IN TABLE NO ☐

A1. HEPATITIS B IMMUNIZATIONS

LINE NUMBER	CHILD'S NAME	IMMUNIZATIONS							DATE OF BIRTH
RECORD LINE NO. OF CHILDREN AGE 0-4 YEARS FROM COLUMN 10 IN THE HOUSEHOLD SCHEDULE	RECORD NAME OR INITIALS OF CHILD	Has (NAME) ever received an immunization in the left thigh against hepatitis?	In all, how many doses of the hepatitis vaccine has (NAME) received? IF DON'T KNOW RECORD '8'	Do you have a health card for (NAME) on which his/her vaccinations are recorded? ASK TO SEE THE CARD. RECORD '1' IF CARD SEEN, '2' IF NOT SEEN.	RECORD NUMBER OF HEPATITIS B DOSES LISTED ON THE CARD. RECORD '0' IF NO DOSES ARE LISTED AND GO TO NEXT CHILD.	DAY, MONTH, AND YEAR OF VACCINATIONS			RECORD THE DAY, MONTH, AND YEAR OF BIRTH. IF THE DAY OR MONTH OF BIRTH IS NOT KNOWN, RECORD '98'. YOU MUST RECORD A YEAR OF BIRTH FOR EVERY CHILD WHOSE HEALTH CARD IS SEEN.
						FIRST	SECOND	THIRD	
(19A)	(19B)	(19C)	(19D)	(19E)	(19F)	(19G)	(19H)	(19I)	(19J)
☐☐		YES 1 NO/DK 2 → 19E	☐	SEEN 1 NOT SEEN 2 → NEXT	☐	DD/MM/YYYY / /	DD/MM/YYYY / /	DD/MM/YYYY / /	DD/MM/YYYY / /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /
☐☐		1 2 → 19E	☐	1 2 → NEXT	☐	/ /	/ /	/ /	/ /

IF MORE THAN 8 CHILDREN UNDER 5 CHILDREN USE CONTINUATION SHEET

B. HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
20	What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO DWELLING . . . . . 11 PIPED INTO YARD/COMPOUND . . . 12 PUBLIC TAP . . . . . 13 WATER FROM OPEN WELL OPEN WELL IN DWELLING . . . . . 21 OPEN WELL IN YARD/COMPOUND . 22 OPEN PUBLIC WELL . . . . . 23 WATER FROM COVERED WELL OR BOREHOLE PROTECTED WELL IN DWELLING . . . . . 31 PROTECTED WELL IN YARD/COMPOUND . . . . . 32 PROTECTED PUBLIC WELL . . . . . 33 SURFACE WATER PROTECTED SPRING . . . . . 41 UNPROTECTED SPRING . . . . . 42 RIVER/STREAM . . . . . 43 POND/LAKE . . . . . 44 DAM . . . . . 45 RAINWATER . . . . . 51 WATER TRUCK . . . . . 61 BOTTLED WATER . . . . . 71 GRAVITY FLOW SCHEME . . . . . 81 OTHER _____ 96 (SPECIFY)	
21	What kind of toilet facilities does your household have?	FLUSH TOILET . . . . . 11 PIT TOILET/LATRINE COVERED TRADITIONAL PIT LATRINE PRIVATE . . . . . 21 SHARED . . . . . 22 COVERED VENTILATED IMPROVED PIT LATRINE PRIVATE . . . . . 23 SHARED . . . . . 24 UNCOVERED PIT LATRINE . . . . . 25 NO FACILITY/BUSH/FIELD . . . . . 31 OTHER _____ 96 (SPECIFY)	
22	Does your household have: Electricity? A clock? A mattress? A black and white television? A colour television? A radio? A mobile phone? A land line? A refrigerator? A cooker?	YES NO ELECTRICITY . . . . . 1 2 CLOCK . . . . . 1 2 MATTRESS . . . . . 1 2 B/W TELEVISION . . . . . 1 2 COLOUR TELEVISION . . . . . 1 2 RADIO . . . . . 1 2 MOBILE PHONE . . . . . 1 2 LAND LINE . . . . . 1 2 REFRIGERATOR . . . . . 1 2 COOKER 1 2	
22A	Does your household have any mosquito nets that can be used while sleeping?	YES . . . . . 1 NO 2	→ 23
22B	How many mosquito nets does your household have? IF 7 OR MORE, RECORD '7'.	NUMBER OF NETS . . . . . ☐☐	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
23	MAIN MATERIAL OF THE FLOOR. RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND/RAMMED EARTH ... 11 DUNG ..... 12 RUDIMENTARY FLOOR WOOD PLANKS ..... 21 PAPYRUS/REED/PALM MATS ..... 22 FINISHED FLOOR POLISHED WOOD OR PARQUET ..... 31 CERAMIC TILES ..... 32 CEMENT ..... 33 CARPET ..... 34 BRICKS ..... 35 OTHER _____ 96 (SPECIFY)	
24	Does any member of your household own:	YES NO	
	A bicycle?	BICYCLE 1 2	
	A motorcycle or motor scooter?	MOTORCYCLE/SCOOTER 1 2	
	A car or a lorry?	CAR/LORRY 1 2	
	Any livestock?	LIVESTOCK 1 2	
	Any poultry?	POULTRY 1 2	

C. SUPPORT FOR VULNERABLE HOUSEHOLDS

C1. SUPPORT FOR CHRONICALLY ILL PERSONS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
25	CHECK COLUMN 11 IN THE HOUSEHOLD SCHEDULE: NUMBER OF SICK PERSONS AGE 18-59 ☐☐ AT LEAST ONE ☐↓	NONE ☐ →	36
26	You told me that in your household, (NUMBER) person/people has(ve) been very sick for at least three of the past 12 months. I would like some information about the help or support that your household may have received from anyone besides your relatives, friends or neighbours for [that/each of those] person(s).		
27	CHECK COLUMN 11 IN THE HOUSEHOLD SCHEDULE: FIRST SICK PERSON LINE NUMBER . . . . . ☐☐ NAME OR INITIALS _____		
28	In the last year, besides any help or support from your relatives, friends or neighbours, has your household received: a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay? b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay? c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay? d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	YES NO DK MATERIAL . . . . . 1 2 8 PRACTICAL . . . . . 1 2 8 MEDICAL . . . . . 1 2 8 PSYCHOSOCIAL 1 2 8	
29	CHECK Q.25: NUMBER OF SICK PERSONS MORE THAN ONE SICK PERSON ↓ ONE SICK PERSON ☐ →		36
30	CHECK COLUMN 11 IN THE HOUSEHOLD SCHEDULE: SECOND SICK PERSON LINE NUMBER . . . . . ☐☐ NAME OR INITIALS _____		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
31	In the last year, besides any help or support from your relatives, friends or neighbours, has your household received: a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay? b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay? c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay? d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?		YES	NO	DK	
		MATERIAL	1	2	8	
		PRACTICAL	1	2	8	
		MEDICAL	1	2	8	
		PSYCHOSOCIAL	1	2	8	
32	CHECK Q.25: NUMBER OF SICK PERSONS MORE THAN TWO SICK PERSONS ☐ ↓ TWO SICK PERSONS ☐ →					36
33	CHECK COLUMN 11 IN THE HOUSEHOLD SCHEDULE: THIRD SICK PERSON LINE NUMBER . . . . . ☐☐ NAME OR INITIALS _____					
34	In the last year, besides any help or support from your relatives, friends or neighbours, has your household received: a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay? b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay? c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay? d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?		YES	NO	DK	
		MATERIAL	1	2	8	
		PRACTICAL	1	2	8	
		MEDICAL	1	2	8	
		PSYCHOSOCIAL	1	2	8	
35	CHECK Q.25: NUMBER OF SICK PERSONS MORE THAN 3 SICK PERSONS ☐ ↓ THREE SICK PERSONS ☐ → FOR MORE THAN THREE SICK PERSONS USE ADDITIONAL QUESTIONNAIRES, STARTING WITH Q.27 FOR THE FOURTH SICK PERSON.					36

C2. SUPPORT FOR PERSONS WHO HAVE DIED

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
36	Now I would like to ask you a few more questions about your household. Think back over the past 12 months. Has anyone who lived in this household died in the last 12 months?	YES ..... 1 NO ..... 2 DON'T KNOW 8	→ 49 → 49
37	How many household members died in the last 12 months?	NO. OF PERSONS ..... ☐☐	

38 What was the name or initials of the person who died (most recently/ before him/her)?	38A Was (NAME/ INITIALS) male or female? M 1 F 2	38B How old was he/she when he/she died?	38C Was (NAME/INITIALS) very sick for at least 3 of the 12 months before he/she died? Y 1 N 2 DK 8	38D ELIGIBLE (AGE 18-59 & 'YES' ON 38C) Y 1 N 2
_____	1 2	☐☐	1 2 8	1 2
_____	1 2	☐☐	1 2 8	1 2
_____	1 2	☐☐	1 2 8	1 2

39	CHECK COLUMN 38D: PERSONS 18-59 WHO HAVE DIED AND WERE SICK AT LEAST ONE 'YES' ☐ ↓ NONE ☐ → 49	
40	CHECK COLUMN 38D: FIRST PERSON WHO DIED NAME OR INITIALS _____	

41	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received:		YES	NO	DK
	a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL	1	2	8
	b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay?	PRACTICAL	1	2	8
	c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL	1	2	8
	d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL	1	2	8

42	CHECK COLUMN 38D: NUMBER OF PERSONS 18-59 WHO HAVE DIED AND WERE SICK MORE THAN ONE PERSON ☐ ↓ ONE PERSON ☐ → 49	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
43	CHECK COLUMN 38D: SECOND PERSON WHO DIED NAME OR INITIALS _____		
44	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received: a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay? b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay? c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay? d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	YES NO DK MATERIAL . . . . . 1 2 8 PRACTICAL . . . . . 1 2 8 MEDICAL . . . . . 1 2 8 PSYCHOSOCIAL 1 2 8	
45	CHECK COLUMN 38D: NUMBER OF PERSONS 18-59 WHO HAVE DIED AND WERE SICK MORE THAN TWO PERSONS ☐ ↓ TWO PERSONS ☐ →		49
46	CHECK COLUMN 38D: THIRD PERSON WHO DIED NAME OR INITIALS _____		
47	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received: a) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay? b) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services, for which you did not have to pay? c) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay? d) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	YES NO DK MATERIAL . . . . . 1 2 8 PRACTICAL . . . . . 1 2 8 MEDICAL . . . . . 1 2 8 PSYCHOSOCIAL 1 2 8	
48	CHECK COLUMN 38D: NUMBER OF PERSONS 18-59 WHO HAVE DIED AND WERE SICK MORE THAN THREE PERSONS ☐ ↓ THREE PERSONS ☐ → FOR MORE THAN THREE PERSONS, USE ADDITIONAL QUESTIONNAIRES, STARTING WITH Q.40 FOR THE FOURTH PERSON WHO DIED.		49

C3. SUPPORT FOR ORPHANS AND VULNERABLE CHILDREN

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
49	CHECK Q. 38B: AT LEAST ONE PERSON AGE 18-59 WHO DIED	NO PERSON AGE 18-59 WHO DIED →	51
50	CHECK COLUMN 5 IN THE HOUSEHOLD SCHEDULE: RECORD TOTAL NUMBER OF PERSONS AGE 0-17 YEARS	NONE ..... 00 → NO. OF PERSONS	68 52A
51	CHECK COLUMN 19 IN THE HOUSEHOLD SCHEDULE: RECORD NUMBER OF CHILDREN WHOSE MOTHER, FATHER, OR BOTH ARE DEAD.	NONE ..... 00 → NO. OF ORPHANS	68 52B
52A/52B	52A: You told me that in your household, there is/are (NUMBER) child(ren) under 18 years old. 52B: You told me that in your household, there is/are (NUMBER) child(ren) whose (mother/father/mother and father) is/are not alive. I would like some information about the help or support that your household may have received from anyone besides your relatives, friends or neighbors for [that child/each of those children].		
53	CHECK HOUSEHOLD SCHEDULE: FIRST ORPHAN/VULNERABLE CHILD LINE NUMBER . ☐☐ AGE . ☐☐ NAME OR INITIALS _____		
54	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received	YES NO DK	
	a) IF AGE 5-17, ASK: Any kind of financial or material support for (NAME'S/INITIALS') schooling, such as an allowance, free admission, or free books?	SCHOOLING 1 2 8	
	b) IF AGE 13-17, ASK: Any financial or material support for (NAME/INITIALS) for vocational or technical training, such as an allowance or tools?	VOCATIONAL/TECH . 1 2 8	
	c) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL 1 2 8	
	d) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services for which you did not have to pay?	PRACTICAL 1 2 8	
	e) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL 1 2 8	
	f) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL 1 2 8	
55	CHECK Q.50 OR 51: NUMBER OF ORPHANS/VULNERABLE CHILDREN MORE THAN ONE CHILD	ONE CHILD →	68

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
56	CHECK HOUSEHOLD SCHEDULE: SECOND ORPHAN/VULNERABLE CHILD LINE NUMBER . ☐☐ AGE . ☐☐ NAME OR INITIALS _____		
57	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received:	YES NO DK	
	a) IF AGE 5-17, ASK: Any kind of financial or material support for (NAME'S/INITIALS') schooling, such as an allowance, free admission, or free books?	SCHOOLING 1 2 8	
	b) IF AGE 13-17, ASK: Any financial or material support for (NAME/INITIALS) for vocational or technical training, such as an allowance or tools?	VOCATIONAL/TECH . 1 2 8	
	c) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL 1 2 8	
	d) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services for which you did not have to pay?	PRACTICAL 1 2 8	
	e) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL 1 2 8	
	f) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL 1 2 8	
58	CHECK Q.50 OR 51: NUMBER OF ORPHANS/VULNERABLE CHILDREN MORE THAN TWO CHILDREN ☐ ↓ TWO CHILDREN ☐ → 68		
59	CHECK HOUSEHOLD SCHEDULE: THIRD ORPHAN/VULNERABLE CHILD LINE NUMBER . ☐☐ AGE . ☐☐ NAME OR INITIALS _____		
60	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received:	YES NO DK	
	a) IF AGE 5-17, ASK: Any kind of financial or material support for (NAME'S/INITIALS') schooling, such as an allowance, free admission, or free books?	SCHOOLING 1 2 8	
	b) IF AGE 13-17, ASK: Any financial or material support for (NAME/INITIALS) for vocational or technical training, such as an allowance or tools?	VOCATIONAL/TECH . 1 2 8	
	c) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL 1 2 8	
	d) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services for which you did not have to pay?	PRACTICAL 1 2 8	
	e) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL 1 2 8	
	f) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL 1 2 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
61	CHECK Q.50 OR 51: NUMBER OF ORPHANS/VULNERABLE CHILDREN MORE THAN THREE CHILDREN ☐ → THREE CHILDREN ☐ → 68		
62	CHECK HOUSEHOLD SCHEDULE: FOURTH ORPHAN/VULNERABLE CHILD LINE NUMBER . ☐☐ AGE . ☐☐ NAME OR INITIALS _____		
63	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received:	YES NO DK	
	a) IF AGE 5-17, ASK: Any kind of financial or material support for (NAME'S/INITIALS') schooling, such as an allowance, free admission, or free books?	SCHOOLING 1 2 8	
	b) IF AGE 13-17, ASK: Any financial or material support for (NAME/INITIALS) for vocational or technical training, such as an allowance or tools?	VOCATIONAL/TECH . 1 2 8	
	c) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL 1 2 8	
	d) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services for which you did not have to pay?	PRACTICAL 1 2 8	
	e) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL 1 2 8	
	f) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL 1 2 8	
64	CHECK Q.50 OR 51: NUMBER OF ORPHANS/VULNERABLE CHILDREN MORE THAN FOUR CHILDREN ☐ → FOUR CHILDREN ☐ → 68		
65	CHECK HOUSEHOLD SCHEDULE: FIFTH ORPHAN/VULNERABLE CHILD LINE NUMBER . ☐☐ AGE . ☐☐ NAME OR INITIALS _____		
66	In the last year, besides any help or support from your relatives, friends or neighbors, has your household received:	YES NO DK	
	a) IF AGE 5-17, ASK: Any kind of financial or material support for (NAME'S/INITIALS') schooling, such as an allowance, free admission, or free books?	SCHOOLING 1 2 8	
	b) IF AGE 13-17, ASK: Any financial or material support for (NAME/INITIALS) for vocational or technical training, such as an allowance or tools?	VOCATIONAL/TECH . 1 2 8	
	c) Any material support for (NAME/INITIALS), such as monetary support, clothes or food for which you did not have to pay?	MATERIAL 1 2 8	
	d) Any practical support for (NAME/INITIALS), such as help in household work, training for caregivers, or legal services for which you did not have to pay?	PRACTICAL 1 2 8	
	e) Any kind of medical support for (NAME/INITIALS), such as medical care or medicine, for which you did not have to pay?	MEDICAL 1 2 8	
	f) Any kind of social, spiritual, or emotional support for (NAME/INITIALS), such as companionship or advice from a counselor which you received at home and for which you did not have to pay?	PSYCHOSOCIAL 1 2 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
67	CHECK Q.50 OR 51: NUMBER OF ORPHANS/VULNERABLE CHILDREN MORE THAN FIVE CHILDREN → FIVE CHILDREN FOR MORE THAN FIVE CHILDREN, USE ADDITIONAL QUESTIONNAIRES, STARTING WITH Q.53 FOR THE SIXTH ORPHAN/VULNERABLE CHILD.		
68	In the last 12 months, has any member of your household received any support for income-generation activities?	YES . . . . . 1 NO 2	

4. BLOOD TESTING DECISIONS

CHECK COLUMNS (8) THROUGH (10): RECORD THE LINE NUMBER, NAME AND AGE OF ALL ELIGIBLE PERSONS

LINE NO. FROM COL. (8)-(10)	NAME OR INITIALS FROM COL. (2)	CHECK COL. (5) AGE	RECORD WHETHER AGE <18 MTHS OR ≥18 MTHS	LINE NO. OF PARENT OR OTHER RESPONSIBLE ADULT	READ CONSENT 2 OR CONSENT 3 (LABORATORY TECHNICIAN MUST SIGN)			SAMPLE COLLECTED?
					0-59 YEARS	15-59 YEARS	0-59 YEARS	
					BLOOD DRAW AND TESTING DECISION	SYPHILIS DECISION	STORAGE DECISION	
(69)	(70)	(71)	(72)	(73)	(74)	(75)	(76)	(77)
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
MARK HERE IF CONTINUATION PAGE USED ☐								

4. BLOOD TESTING DECISIONS (Continued)

CHECK COLUMNS (8) THROUGH (10): RECORD THE LINE NUMBER, NAME AND AGE OF ALL ELIGIBLE PERSONS

LINE NO. FROM COL. (8)-(10)	NAME OR INITIALS FROM COL. (2)	CHECK COL. (5) AGE	RECORD WHETHER AGE <18 MTHS OR ≥18 MTHS	LINE NO. OF PARENT OR OTHER RESPONSIBLE ADULT	READ CONSENT 2 OR CONSENT 3 (LABORATORY TECHNICIAN MUST SIGN)			SAMPLE COLLECTED?
					0-59 YEARS BLOOD DRAW AND TESTING DECISION	15-59 YEARS SYPHILIS DECISION	0-59 YEARS STORAGE DECISION	
(69)	(70)	(71)	(72)	(73)	(74)	(75)	(76)	(77)
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
☐☐	_____	00-17.....1 18-59.....2 GO TO 74	<18 MOS.....1 ≥18 MOS.....2	☐☐	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3 SIGN_____	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	AGREE.....1 REFUSE.....2 ABSENT/OTHER.....3	TEST TUBE.....1 FILTER PAPER...2 NO SAMPLE.....3
MARK HERE IF CONTINUATION SHEET USED ☐								

UGANDA HIV/AIDS SERO-BEHAVIORAL SURVEY **ENGLISH**
INDIVIDUAL QUESTIONNAIRE

IDENTIFICATION

DISTRICT _____

SUB-COUNTY/DIVISION _____

PARISH _____

LC1 _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . [ ][ ][ ]

HOUSEHOLD NUMBER . . . . . [ ][ ][ ]

REGION . . . . . [ ]

DISTRICT . . . . . [ ][ ][ ]

URBAN/RURAL (URBAN=1, RURAL=2) . . . . . [ ]

KAMPALA/SMALL CITY/TOWN/RURAL . . . . . [ ]
(KAMPALA=1, SMALL CITY=2, TOWN=3, RURAL=4)

NAME (OR INITIALS) AND LINE NUMBER OF RESPONDENT _____ [ ][ ]

SEX OF RESPONDENT (MALE=1, FEMALE=2) . . . . . [ ]

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY [ ][ ]
				MONTH [ ][ ]
				YEAR [ ][ ][ ][ ]
INTERVIEWER'S NAME	_____	_____	_____	INTERVIEWER NUMBER [ ][ ][ ]
RESULT*	_____	_____	_____	RESULT [ ]
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS [ ]
TIME	_____	_____		

*RESULT CODES:

1	COMPLETED	4	REFUSED		
2	NOT AT HOME	5	PARTLY COMPLETED	7	OTHER _____ (SPECIFY)
3	POSTPONED	6	INCAPACITATED		

LANGUAGE OF QUESTIONNAIRE **ENGLISH** Q LANGUAGE [0][7]

NATIVE LANGUAGE OF RESPONDENT _____ N LANGUAGE [ ][ ]

TRANSLATOR USED (NOT AT ALL=1; SOMETIMES=2; ALL THE TIME=3) TRANSLATOR USED? [ ]

LANGUAGE:

01	ATESO-KARAMOJONG	05	RUNYANKOLE-RUKIGA
02	LUGANDA	06	RUNYORO-RUTORO
03	LUGBARA	07	ENGLISH
04	LUO	08	OTHER

TEAM SUPERVISOR	DATA EDITOR	DATA ENTRY CLERK
NAME _____ [ ][ ][ ]	[ ][ ][ ]	[ ][ ][ ]
DATE _____		

SECTION 1. RESPONDENT'S BACKGROUND

INFORMED CONSENT [IF RESPONDENT IS 15-17 YEARS OLD, READ IN PRESENCE OF A PARENT OR GUARDIAN.]

Good morning/afternoon. My name is .... And I am from the Ministry of Health. The Ministry of Health is conducting a national HIV/AIDS sero-behavioral survey and we are asking people from all over the country if they can participate. This survey will help develop better health services for the people of Uganda. You have been selected at random from your community.

Participation in this survey is voluntary. If you agree to participate, I will ask you some questions about yourself (for example, your age and your education). Other questions will be about your thoughts and behavior related to your health. Some questions will be about your personal sexual behavior. This interview will take about 30 minutes. All of your answers will be kept strictly confidential.

Some questions may make you feel uncomfortable. You are free to refuse to answer any questions. Also, you can stop the interview at any time.

There are no direct benefits to you for choosing to participate in this interview. However, you will be helping MOH develop better programs to help Ugandans in the future.

At this time, do you want to ask me anything about the survey? If you have any questions at any time, we want you to tell us. You can speak to the head of the survey team or I can give you contact numbers for one of the leaders of the project or the Vice Chairman of the Ethics Committee.

[INTERVIEWER: IF CONTACT NUMBERS ARE REQUESTED, PROVIDE THE FOLLOWING NUMBERS:
Ministry of Health: Dr. Joshua Musinguzi at 041-257409 or Dr. Wilford Kirungi at 041-257409
Ethics Committee (UVRI): Dr. Pontiano Kaleebu at 041-320272]

[INTERVIEWER: RECORD DECISION ON HOUSEHOLD QUESTIONNAIRE FOR EACH ELIGIBLE PERSON AGE 15-59.]

May I begin the interview now?

Signature of interviewer: _____ Date: _____

RESPONDENT AGREES TO BE INTERVIEWED ..... 1 ↓ RESPONDENT DOES NOT AGREE TO BE INTERVIEWED ... 2→ END

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME. IF TIME IS 1:00 PM OR LATER, ADD 12 TO HOUR.	HOUR ..... ☐☐ MINUTES ..... ☐☐	
102	In what month and year were you born?	MONTH ..... ☐☐ DON'T KNOW MONTH ..... 98 YEAR ..... ☐☐☐☐ DON'T KNOW YEAR 9998	
103	How old were you at your last birthday? COMPARE AND CORRECT 102 AND/OR 103 IF INCONSISTENT.	AGE IN COMPLETED YEARS ☐☐	
104	Have you ever attended school?	YES ..... 1 NO 2	→107
105	What is the highest level of school you attended: primary, '0' level, 'A' level, or university or tertiary?	PRIMARY ..... 1 'O' LEVEL ..... 2 'A' LEVEL ..... 3 UNIVERSITY/TERTIARY 4	
106	What is the highest (class/year) you completed at that level?	CLASS/YEAR ..... ☐☐	
107	Do you read a newspaper or magazine almost every day, at least once a week, less than once a week or not at all?	ALMOST EVERY DAY ..... 1 AT LEAST ONCE A WEEK ..... 2 LESS THAN ONCE A WEEK ..... 3 NOT AT ALL ..... 4 CANNOT READ 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
108	Do you listen to the radio almost every day, at least once a week, less than once a week or not at all?	ALMOST EVERY DAY ..... 1 AT LEAST ONCE A WEEK ..... 2 LESS THAN ONCE A WEEK ..... 3 NOT AT ALL 4	
109	Do you watch television almost every day, at least once a week, less than once a week or not at all?	ALMOST EVERY DAY ..... 1 AT LEAST ONCE A WEEK ..... 2 LESS THAN ONCE A WEEK ..... 3 NOT AT ALL 4	
110	MALE ☐ Are you currently working? FEMALE ☐ As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business. Are you currently doing any of these things or any other work?	YES ..... 1 NO 2	→ 112
111	Have you done any work in the last 12 months?	YES ..... 1 NO 2	→ 113
112	What is your occupation, that is, what kind of work do you mainly do? INTERVIEWER: PROBE TO OBTAIN DETAILED INFORMATION ON THE KIND OF WORK RESPONDENT DOES.	_____ _____ _____ ☐☐☐	→ 114
113	What have you been doing for most of the time over the last 12 months?	GOING TO SCHOOL/STUDYING ..... 01 LOOKING FOR WORK ..... 02 RETIRED ..... 03 TOO ILL TO WORK ..... 04 HANDICAPPED, CANNOT WORK ... 05 HOUSEWORK/CHILD CARE ..... 06 OTHER _____ 96 (SPECIFY)	
114	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)? IF LESS THAN ONE YEAR, RECORD '00' YEARS.	YEARS ..... ☐☐ ALWAYS ..... 95 VISITOR 96	
115	What is your religion?	CATHOLIC ..... 01 ANGLICAN/PROTESTANT ..... 02 SDA ..... 03 ORTHODOX ..... 04 PENTECOSTAL ..... 05 OTHER CHRISTIAN ..... 06 MOSLEM ..... 07 BAHAI ..... 08 OTHER NON-CHRISTIAN ..... 09 TRADITIONAL ..... 10 NONE 11	
116	What is your ethnic group? _____	ETHNIC GROUP ..... ☐☐	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
117	Have you ever had a blood transfusion?	YES ..... 1 NO 2	→ 119
118	When was the **last** time you had a blood transfusion?	DAYS AGO ..... 1 WEEKS AGO ..... 2 MONTHS AGO ..... 3 YEARS AGO 4	
119	In the last 12 months, have you received any injections that were given to you by a doctor, a nurse, a pharmacist, or another health professional?	YES ..... 1 NO ..... 2 DON'T KNOW 8	→ 121
120	In the last 12 months, how many injections have you received from a doctor, a nurse, or another health professional?	NUMBER OF INJECTIONS	
121	Have you ever had an immunization against yellow fever?	YES ..... 1 NO ..... 2 DON'T KNOW 8	→ 123
122	When was the last time you had an immunization against yellow fever?	MONTHS AGO ..... 1 YEARS AGO 2	
123	In your work or at home, do you have any contact with the blood of other persons?	AT WORK ONLY ..... 1 AT HOME ONLY ..... 2 AT WORK AND AT HOME ..... 3 NO, NEITHER 4	
124	In the last three months, how many times did you seek health care outside of your home?	NONE ..... 00 NUMBER	→ 201
125	The last time you went for health care, where did you go? IF SOURCE IS HOSPITAL, HEALTH CENTER, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. _____ (NAME OF PLACE)	PUBLIC SECTOR GOVERNMENT HOSPITAL ..... 11 GOVT. HEALTH CENTER ..... 12 FAMILY PLANNING CLINIC ..... 13 MOBILE CLINIC ..... 14 FIELDWORKER ..... 15 OTHER PUBLIC _____ 16 (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/PRIVATE CLINIC/DOCTOR ..... 21 PHARMACY/DRUG SHOP ..... 22 MOBILE CLINIC ..... 23 FIELDWORKER ..... 24 OTHER PRIVATE MEDICAL _____ 25 (SPECIFY) OTHER SOURCE SHOP ..... 31 TRADITIONAL HEALER 32 OTHER _____ 96 (SPECIFY)	

SECTION 2. REPRODUCTION

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES	SKIP
201	MALE ☐ ↓ Now I would like to ask about all of the children you have had during your lifetime. I am interested only in the children that are biologically yours. Have you ever fathered any children with any woman?	FEMALE ☐ ↓ Now I would like to ask about all of the births you have had during your lifetime. Have you ever given birth?	YES . . . . . 1 NO 2	→206
202	Do you have any children whom you have fathered who are now living with you?	Do you have any children to whom you have given birth who are now living with you?	YES . . . . . 1 NO 2	→204
203	How many children whom you have fathered are living with you?	How many children to whom you have given birth are living with you?	CHILDREN AT HOME . . . . . ☐☐	
204	Do you have any children whom you have fathered who are alive but do not live with you?	Do you have any children to whom you have given birth who are alive but do not live with you?	YES . . . . . 1 NO 2	→206
205	How many children live elsewhere?		CHILDREN LIVING ELSEWHERE . . . . . ☐☐	
206	MALE ☐ ↓ Have you ever fathered a child who was born alive but later died? Any baby who cried or showed signs of life but did not survive?	FEMALE ☐ ↓ Have you ever given birth to a child who was born alive but later died? Any baby who cried or showed signs of life but did not survive?	YES . . . . . 1 NO 2	→208
207	How many children have died?		CHILDREN DEAD . . . . . ☐☐	
208	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL. IF NONE, RECORD '00'.		TOTAL . . . . . ☐☐	
209	MALE ☐ ↓ Just to make sure that I have this right: you have fathered _____ children in your lifetime. Is that correct?	FEMALE ☐ ↓ Just to make sure that I have this right: you have had _____ births in your lifetime. Is that correct?		
	YES ☐ ↓ NO ☐ → PROBE AND CORRECT 201-208 AS NECESSARY.			
210	MALE ☐ → FEMALE ☐ ↓			301

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
211	CHECK 208: ONE OR MORE BIRTHS ☐ NO BIRTHS ☐ →		216
212	Now I would like to ask you about your last birth, whether the child is still alive or not. In what month and year did you have your last birth?	MONTH . . . . . ☐☐ DON'T KNOW MONTH . . . . . 98 YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	→ 214
213	About how many years ago was your last birth?	YEARS AGO . . . . . ☐☐	
214	Was this birth registered?	YES . . . . . 1 NO . . . . . 2 UNSURE 8	→ 216
215	Where was the birth registered?	LOCAL COUNCIL (LC I, II, III) . . . . . 1 DISTRICT . . . . . 2 PARISH/SUB-COUNTY . . . . . 3 HOSPITAL . . . . . 4 HEALTH CENTER . . . . . 5 REGISTRAR OF BIRTHS . . . . . 6 OTHER 7	
216	CHECK 103: AGE 15-49 ☐ AGE 50-59 ☐ →		301
217	Are you pregnant now?	YES . . . . . 1 NO . . . . . 2 UNSURE 8	→ 219
218	At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any (more) children at all?	THEN . . . . . 1 LATER . . . . . 2 NOT AT ALL 3	→ 301 → 301 → 301
219	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES . . . . . 1 NO 2	→ 301
220	Which method are you using? RECORD ALL MENTIONED.	FEMALE STERILIZATION . . . . . A MALE STERILIZATION . . . . . B PILL . . . . . C IUD/COIL . . . . . D INJECTIONS . . . . . E IMPLANTS . . . . . F CONDOM . . . . . G FEMALE CONDOM . . . . . H DIAPHRAGM . . . . . I FOAM/JELLY . . . . . J LACTATIONAL AMENORRHEA METHOD (LAM) . . . . . K PERIODIC ABSTINENCE/RHYTHM . L WITHDRAWAL . . . . . M OTHER _____ X (SPECIFY)	

SECTION 3. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES	SKIP
301	MALE ☐ Have you ever been married or lived together with a woman as if married?	FEMALE ☐ Have you ever been married or lived together with a man as if married?	YES . . . . . 1 NO 2	→ 312
302	Are you currently married or living together with a woman as if married?	Are you currently married or living together with a man as if married?	YES . . . . . 1 NO 2	→ 306
303	At this time, do you have more than one wife or woman with whom you are living as if married?	Besides yourself, does your husband/partner have other wives or does he live with any other women as if married?	YES . . . . . 1 NO 2	→ 305
304	Altogether, how many wives or live-in partners do you have now?	Including yourself, how many wives or live-in partners does your husband/partner have now?	NUMBER OF WIVES AND LIVE-IN PARTNERS . . . . . ☐☐	
305	WRITE NAME(S) OR INITIALS, AND THEN RECORD THE LINE NUMBER(S) FROM THE HOUSEHOLD QUESTIONNAIRE FOR SPOUSE(S) AND LIVE-IN PARTNER(S). IF THE PERSON IS NOT LISTED IN THE HOUSEHOLD, RECORD '00'. FEMALE ☐→ Please tell me the name or initials of your husband (the man you are now living together with as if married). **AFTER RECORDING, GO TO 306.** MALE ☐→ CHECK 303 AND 304: IF ONE WIFE/PARTNER: Please tell me the name or initials of your wife (the woman you are now living with as if married). **AFTER RECORDING, GO TO 306.** IF MORE THAN ONE WIFE/PARTNER: Please tell me the name or initials of each of your current wives (and/or of each woman you are now living with as if married). **AFTER RECORDING, SKIP TO 307B.**		LINE NO NAME/INITIALS _____ ☐☐ NAME/INITIALS _____ ☐☐ NAME/INITIALS _____ ☐☐ NAME/INITIALS _____ ☐☐ NAME/INITIALS _____ ☐☐	
306	MALE ☐ Have you been married or lived with a woman only once or more than once?	FEMALE ☐ Have you been married or lived with a man only once or more than once?	ONLY ONCE . . . . . 1 MORE THAN ONCE 2	→ 307B

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES	SKIP
	MALE ☐	FEMALE ☐		
307A	In what month and year did you start living with your wife/partner? (IF YEAR IS KNOWN, SKIP TO 309; ELSE, SKIP TO 308)	In what month and year did you start living with your husband/partner? (IF YEAR IS KNOWN, SKIP TO 309; ELSE, SKIP TO 308)	MONTH . . . . . ☐☐ DON'T KNOW MONTH 98	
307B	Now I would like to ask about when you married or began living with a woman as if married for the very first time. In what month and year did you first marry or start living with a woman as if married?	Now I would like to ask about about when you married or began living with a man as if married for the very first time. In what month and year did you first marry or start living with a man as if married?	YEAR . . . . . ☐☐☐☐ DON'T KNOW YEAR 9998	→ 309
308	How old were you when you started living with her?	How old were you when you started living with him?	AGE . . . . . ☐☐	
309	CHECK 302: CURRENTLY MARRIED OR LIVING TOGETHER? YES ☐	NO ☐		→ 311
310	CHECK 306: ONLY ONCE ☐ MORE THAN ONCE ☐			→ 312
311	Do you have a previous wife/husband who died?		YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
312	Now I need to ask you some questions about sexual activity in order to gain a better understanding of some family life issues. How old were you when you first had sexual intercourse (if ever)?		NEVER . . . . . 00 AGE IN YEARS . . . . . ☐☐ FIRST TIME WHEN STARTED LIVING WITH (FIRST) HUSBAND/WIFE/PARTNER 95	→ 343
313	CHECK 103: AGE 15-24 ☐	AGE 25-59 ☐		→ 316
314	The first time you had sexual intercourse, was a condom used?		YES . . . . . 1 NO . . . . . 2 DON'T KNOW/DON'T REMEMBER . . . 8	
315	The first time you had sexual intercourse, were you forced to have sex, did you both agree to it, or did you force your partner to have sex?		FORCED TO HAVE SEX . . . . . 1 BOTH AGREED TO IT . . . . . 2 FORCED PARTNER TO HAVE SEX . . . 3	
316	When was the last time you had sexual intercourse? RECORD 'YEARS AGO' ONLY IF LAST INTERCOURSE WAS ONE OR MORE YEARS AGO. IF 12 MONTHS OR MORE, ANSWER MUST BE RECORDED IN YEARS.		DAYS AGO . . . . . 1 ☐☐ WEEKS AGO . . . . . 2 ☐☐ MONTHS AGO . . . . . 3 ☐☐ YEARS AGO . . . . . 4 ☐☐	→ 342

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
317	The last time you had sexual intercourse, was a condom used?	YES . . . . . 1 NO 2	→ 319
318	Why wasn't a condom used the last time you had sexual intercourse? PROBE: Any other reasons? RECORD ALL MENTIONED.	NO KNOWLEDGE OF CONDOMS . . . A NO KNOWLEDGE OF SOURCE . . . . . B SOURCE NOT ACCESSIBLE . . . . . C DID NOT HAVE A CONDOM THEN . . . D COST TOO MUCH . . . . . E TOO MESSY/INCONVENIENT . . . . . F CONDOMS NOT EFFECTIVE . . . . . G DOESN'T LIKE CONDOMS . . . . . H RESPONDENT WANTED TO GET PREGNANT/WANTED PARTNER TO GET PREGNANT . . . . . I TRUST SPOUSE/PARTNER, SPOUSE /PARTNER DOES'NT HAVE DISEASE . J RESPONDENT DOESN'T HAVE A DISEASE . . . . . K PARTNER INSISTED ON NOT USING . L RELIGIOUS PROHIBITION . . . . . M OTHER _____ X (SPECIFY)	
319	What was your relationship to the person with whom you last had sex? IF BOYFRIEND/GIRLFRIEND: Were you living together as if married at that time?	HUSBAND/WIFE . . . . . 01 LIVE-IN PARTNER . . . . . 02 BOYFRIEND/GIRLFRIEND NOT LIVING WITH RESPONDENT . . . 03 CASUAL ACQUAINTANCE . . . . . 04 COMMERCIAL SEX WORKER . . . . . 05 OTHER _____ 96 (SPECIFY)	→ 323
320	CHECK 103: AGE 15-24 → AGE 25-59		→ 323
321	How old is this woman/man?	AGE OF PARTNER . . . . . ☐☐ DON'T KNOW 98	→ 323
322	Do you think that she/he is at least 10 years older than you?	YES, 10 OR MORE YEARS OLDER . . . . 1 NO, LESS THAN 10 YEARS OLDER . . . 2 OLDER, DON'T KNOW DIFFERENCE . . 3 SAME AGE . . . . . 4 YOUNGER . . . . . 5 DON'T KNOW 8	
323	The last time you had sexual intercourse, did you or your partner drink alcohol? IF YES: Who was drinking?	RESPONDENT ONLY . . . . . 1 PARTNER ONLY . . . . . 2 RESPONDENT AND PARTNER . . . . . 3 NEITHER 4	
324	Have you had sex with any other person in the last 12 months?	YES . . . . . 1 NO 2	→ 342
325	The last time you had sexual intercourse with another person, was a condom used?	YES . . . . . 1 NO 2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
326	What was your relationship to this person at that time? IF BOYFRIEND/GIRLFRIEND: Were you living together as if married?	HUSBAND/WIFE . . . . . 01 LIVE-IN PARTNER . . . . . 02 BOYFRIEND/GIRLFRIEND NOT LIVING WITH RESPONDENT . . . 03 CASUAL ACQUAINTANCE . . . . . 04 COMMERCIAL SEX WORKER . . . 05 OTHER _____ 96 (SPECIFY)	→ 330
327	CHECK 103: AGE 15-24 ☐ AGE 25-59 ☐		→ 330
328	How old is this woman/man?	AGE OF PARTNER . . . . . ☐☐ DON'T KNOW 98	→ 330
329	Do you think that she/he is at least 10 years older than you?	YES, 10 OR MORE YEARS OLDER . . . . 1 NO, LESS THAN 10 YEARS OLDER . . . 2 OLDER, DON'T KNOW DIFFERENCE . 3 SAME AGE . . . . . 4 YOUNGER . . . . . 5 DON'T KNOW 8	
330	The last time you had sexual intercourse with this partner, did you or your partner drink alcohol? IF YES: Who was drinking?	RESPONDENT ONLY . . . . . 1 PARTNER ONLY . . . . . 2 RESPONDENT AND PARTNER . . . . . 3 NEITHER 4	
331	Other than these two people, have you had sex with anyone else in the last 12 months?	YES . . . . . 1 NO 2	→ 342
332	The last time you had sexual intercourse with this third person, was a condom used?	YES . . . . . 1 NO 2	
333	What was your relationship to this person at that time? IF BOYFRIEND/GIRLFRIEND: Were you living together as if married at that time?	HUSBAND/WIFE . . . . . 01 LIVE-IN PARTNER . . . . . 02 BOYFRIEND/GIRLFRIEND NOT LIVING WITH RESPONDENT . . . 03 CASUAL ACQUAINTANCE . . . . . 04 COMMERCIAL SEX WORKER . . . 05 OTHER _____ 96 (SPECIFY)	→ 337
334	CHECK 103: AGE 15-24 ☐ AGE 25-59 ☐		→ 337
335	How old is this woman/man?	AGE OF PARTNER . . . . . ☐☐ DON'T KNOW 98	→ 337
336	Do you think that she/he is at least 10 years older than you?	YES, 10 OR MORE YEARS OLDER . . . 1 NO, LESS THAN 10 YEARS OLDER . . . 2 OLDER, DON'T KNOW DIFFERENCE . 3 SAME AGE . . . . . 4 YOUNGER . . . . . 5 DON'T KNOW 8	

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES	SKIP
337	The last time you had sexual intercourse with this partner, did you or your partner drink alcohol? IF YES: Who was drinking?		RESPONDENT ONLY . . . . . 1 PARTNER ONLY . . . . . 2 RESPONDENT AND PARTNER . . . . . 3 NEITHER 4	
338	In total, how many different people have you had sex with in the last 12 months?		NUMBER OF PARTNERS . . . ☐☐	
339	MALE ☐ In the last 12 months, did you pay anyone to have sex?	FEMALE ☐ In the last 12 months, did any man pay you to have sex?	YES . . . . . 1 NO 2	→ 342
340	The last time you paid someone to have sex, was a condom used?	The last time you were paid to have sex, was a condom used?	YES . . . . . 1 NO 2	→ 342
341	Do you use a condom all the time or only sometimes when you pay to have sex?	Is a condom used all the time or only sometimes when you are paid to have sex?	ALL THE TIME . . . . . 1 ONLY SOMETIMES 2	
342	In total, how many different people have you had sex with in your lifetime? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS GREATER THAN 95, WRITE '95.'		NUMBER OF PARTNERS . . . ☐☐ DON'T KNOW 98	
343	Do you know of a place where a person can get condoms?		YES . . . . . 1 NO 2	→ 345
344	Where is that? PROBE: Any other place? RECORD ALL PLACES MENTIONED.		PUBLIC SECTOR GOVERNMENT HOSPITAL . . . . . A GOVT. HEALTH CENTER . . . . . B FAMILY PLANNING CLINIC . . . . . C MOBILE CLINIC . . . . . D GOVT. COMMUNITY BASED DISTRIBUTOR . . . . . E OTHER PUBLIC _____ F (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/PRIVATE CLINIC/DOCTOR . . . . . G PHARMACY/DRUG STORE . . . . . H MOBILE CLINIC . . . . . I FIELDWORKER . . . . . J OTHER PRIVATE MEDICAL _____ K (SPECIFY) OTHER SOURCE SHOP . . . . . L TRADITIONAL HEALER . . . . . M RELIGIOUS INSTITUTION . . . . . N STREET VENDOR . . . . . O BAR . . . . . P FRIENDS/RELATIVES . . . . . Q LODGE . . . . . R OTHER _____ X (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
345	ANY 'YES' IN 314, 317, 325, 332, 340 OR NEVER IN Q312 OTHER		→ 400
346	Have you ever used a condom?	YES . . . . . 1 NO 2	

SECTION 4. HUSBAND'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
400	MALE ☐ → 501 FEMALE ☐ ↓		
401	CHECK 301 AND 302: CURRENTLY MARRIED/ LIVING WITH A MAN ☐ ↓ FORMERLY MARRIED/ LIVED WITH A MAN ☐ → 403 NEVER MARRIED AND NEVER LIVED WITH A MAN ☐ → 501		
402	How old was your husband/partner on his last birthday?	AGE IN COMPLETED YEARS ☐☐	
403	Did your (last) husband/partner ever attend school?	YES . . . . . 1 NO . . . . . 2 → 406	
404	What was the highest level of school he attended: primary, '0' level, 'A' level, or university or tertiary?	PRIMARY . . . . . 1 'O' LEVEL . . . . . 2 'A' LEVEL . . . . . 3 UNIVERSITY/TERTIARY . . . . . 4 DON'T KNOW . . . . . 8 → 406	
405	What was the highest (class/year) he completed at that level?	CLASS/YEAR . . . . . ☐☐ DON'T KNOW 98	
406	CHECK 401: CURRENTLY MARRIED/ LIVING WITH A MAN ☐ ↓ What is your husband's/ partner's occupation? That is, what kind of work does he mainly do? FORMERLY MARRIED/ LIVED WITH A MAN ☐ ↓ What was your (last) husband's/ partner's occupation? That is, what kind of work did he mainly do? INTERVIEWER: PROBE TO OBTAIN DETAILED INFORMATION ON THE KIND OF WORK HUSBAND/PARTNER DOES.	_____ _____ _____ ☐☐☐	

SECTION 5. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501	Now I would like to talk about something else. Have you ever heard of an illness called AIDS?	YES . . . . . 1 NO 2	→ 601
502	What are the main channels of communication from which you receive HIV/AIDS information and education? PROBE: Any other channels? RECORD ALL MENTIONED.	RADIO . . . . . 01 TELEVISION . . . . . 02 FILM . . . . . 03 DRAMA . . . . . 04 NEWSPAPERS/MAGAZINES . . . . . 05 BROCHURES . . . . . 06 POSTERS . . . . . 07 BILLBOARDS . . . . . 08 COMMUNITY NOTICES . . . . . 09 FAMILY . . . . . 10 FRIENDS . . . . . 11 PEERS . . . . . 12 HEALTH WORKERS . . . . . 13 TEACHERS . . . . . 14 POLITICAL LEADERS . . . . . 15 TRADITIONAL LEADERS . . . . . 16 RELIGIOUS LEADERS . . . . . 17 INTERNET . . . . . 18 OTHER _____ 96 (SPECIFY)	
503	CHECK 502: MORE THAN ONE RESPONSE CIRCLED ↓ ONLY ONE RESPONSE CIRCLED →		505
504	From which source have you learned most about HIV or AIDS?	RADIO . . . . . 01 TELEVISION . . . . . 02 FILM . . . . . 03 DRAMA . . . . . 04 NEWSPAPERS/MAGAZINES . . . . . 05 BROCHURES . . . . . 06 POSTERS . . . . . 07 BILLBOARDS . . . . . 08 COMMUNITY NOTICES . . . . . 09 FAMILY . . . . . 10 FRIENDS . . . . . 11 PEERS . . . . . 12 HEALTH WORKERS . . . . . 13 TEACHERS . . . . . 14 POLITICAL LEADERS . . . . . 15 TRADITIONAL LEADERS . . . . . 16 RELIGIOUS LEADERS . . . . . 17 INTERNET . . . . . 18 OTHER _____ 19 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
505	What is the most important message you have learned from this source?	ABSTAIN FROM SEX . . . . . 01 USE CONDOMS . . . . . 02 LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER . . . . . 03 LIMIT NUMBER OF SEXUAL PARTNERS . . . . . 04 FOLLOW THE ABC'S . . . . . 05 AVOID SEX WITH PROSTITUTES . . . 06 AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS . . . . . 07 AVOID SEX WITH HOMOSEXUALS . . . 08 AVOID SEX WITH PERSONS WHO INJECT DRUGS INTRAVENOUSLY . 09 AVOID BLOOD TRANSFUSIONS . . . . . 10 AVOID INJECTIONS . . . . . 11 ANTI-RETROVIRAL DRUGS AVAILABLE 12 PREVENT MOTHER TO CHILD TRANSMISSION . . . . . 13 AVOID DISCRIMINATION AGAINST PERSONS LIVING WITH AIDS . . . . . 14 ANYONE CAN GET AIDS . . . . . 15 GET TESTED FOR HIV . . . . . 16 AIDS IS A KILLER . . . . . 17 DON'T TAKE CHANGES . . . . . 18 OTHER _____ 96 (SPECIFY)	
506	Can people reduce their chances of getting the AIDS virus by having just one sex partner who is not infected and who has no other partners?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
507	Can people get the AIDS virus from mosquito bites?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
508	Can people reduce their chances of getting the AIDS virus by using a condom every time they have sex?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
509	Can people get the AIDS virus by sharing food with a person who has AIDS?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
510	Can people reduce their chance of getting the AIDS virus by not having sex at all?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
511	Can people get the AIDS virus because of witchcraft or other supernatural means?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
512	Is there anything (else) a person can do to avoid or reduce the chances of getting AIDS or the virus that causes AIDS?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 514

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
513	What can a person do? PROBE: Anything else? RECORD ALL WAYS MENTIONED.	ABSTAIN FROM SEX . . . . . A USE CONDOMS . . . . . B LIMIT SEX TO ONE PARTNER/STAY FAITHFUL TO ONE PARTNER . . . . . C LIMIT NUMBER OF SEXUAL PARTNERS . . . . . D AVOID SEX WITH PROSTITUTES . . . E AVOID SEX WITH PERSONS WHO HAVE MANY PARTNERS . . . . . F AVOID SEX WITH HOMOSEXUALS . . . G AVOID SEX WITH PERSONS WHO INJECT DRUGS INTRAVENOUSLY . H AVOID BLOOD TRANSFUSIONS . . . . . I AVOID INJECTIONS . . . . . J AVOID SHARING RAZORS/BLADES . K AVOID KISSING . . . . . L AVOID MOSQUITO BITES . . . . . M SEEK PROTECTION FROM TRADITIONAL HEALER . . . . . N AVOID MOSQUITO BITES . . . . . M ASK SPOUSE/PARTNER TO GET TESTED . . . . . O OTHER _____ X (SPECIFY) DON'T KNOW . . . . . Z	
514	Have you heard of any drugs that <u>can cure</u> a person who has the virus that causes AIDS?	YES . . . . . 1 NO 2	
515	Have you heard of any drugs that <u>can prolong the life</u> of a person who has the virus that causes AIDS?	YES . . . . . 1 NO 2	→ 519
516	What drugs do you know about? PROBE: Any other drugs? RECORD ALL MENTIONED.	ANTI-RETROVIRAL DRUGS (ARVs) . . . A HERBAL DRUGS . . . . . B OTHER DRUGS _____ X (SPECIFY) DON'T KNOW . . . . . Z	
517	CHECK 516: CODE 'A' CIRCLED ☐ ↓ CODE 'A' NOT CIRCLED ☐ →		519
518	For how long should a person with the AIDS virus take ARVs?	LESS THAN ONE YEAR . . . . . 1 ONE YEAR OR MORE . . . . . 2 REST OF LIFE . . . . . 3 OTHER _____ 6 (SPECIFY) DON'T KNOW 8	
519	If a <u>man</u> has the virus that causes AIDS, does his sexual partner always have the AIDS virus, almost always, or only sometimes?	ALWAYS . . . . . 1 ALMOST ALWAYS . . . . . 2 ONLY SOMETIMES . . . . . 3 DON'T KNOW 8	
520	If a <u>woman</u> has the virus that causes AIDS, does her sexual partner always have the AIDS virus, almost always, or only sometimes?	ALWAYS . . . . . 1 ALMOST ALWAYS . . . . . 2 ONLY SOMETIMES . . . . . 3 DON'T KNOW 8	
521	Is it possible for a healthy-looking person to have the AIDS virus?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
522	Can the virus that causes AIDS be transmitted from a mother to a child?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	→ 525
523	Can the virus that causes AIDS be transmitted from a mother to a child: During pregnancy? During delivery? By breastfeeding?	YES NO DK DURING PREGNANCY . 1 2 8 DURING DELIVERY . . . 1 2 8 BREASTFEEDING . . . 1 2 8	
524	Are there any special drugs that a doctor or nurse can give to a pregnant woman infected with the AIDS virus to reduce the risk of transmission to the baby?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
525	If you knew that a market vendor had the AIDS virus, would you buy sugar or fresh vegetables or other food from that person?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
526	If a member of your family got infected with the virus that causes AIDS, would you want it to remain a secret or not?	YES, REMAIN A SECRET . . . . . 1 NO . . . . . 2 DK/NOT SURE/DEPENDS 8	
527	If a relative of yours became sick with the virus that causes AIDS, would you be willing to care for her or him in your own household?	YES . . . . . 1 NO . . . . . 2 DK/NOT SURE/DEPENDS 8	
528	If a female teacher has the AIDS virus but is not sick, should she be allowed to continue teaching in the school?	CAN CONTINUE . . . . . 1 SHOULD NOT CONTINUE . . . . . 2 DK/NOT SURE/DEPENDS 8	
529	Should children age 12-14 be taught about using a condom to avoid AIDS?	YES . . . . . 1 NO . . . . . 2 DK/NOT SURE/DEPENDS 8	
530	What are the chances that you yourself might get the virus that causes AIDS -- would you say it is very likely, somewhat likely, not likely, or there is no chance at all?	VERY LIKELY . . . . . 1 SOMEWHAT LIKELY . . . . . 2 NOT LIKELY . . . . . 3 NO CHANCE AT ALL . . . . . 4 ALREADY HAVE HIV OR AIDS . . . . . 5 DK/NOT SURE/DEPENDS 8	
531	MALE → 541 FEMALE		
532	CHECK 212 AND 213: NO BIRTHS (212 BLANK) → 541 LAST BIRTH SINCE JANUARY 2002/ WITHIN PAST 2 YEARS LAST BIRTH BEFORE JANUARY 2002/ THREE YEARS OR MORE AGO → 541		
533	Now I would like to ask some questions about your last birth. Did you see anyone for antenatal care during that pregnancy?	YES . . . . . 1 NO . . . . . 2 → 541	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
534	During any of the antenatal visits for that pregnancy, did anyone talk to you about: Children getting the AIDS virus from their mother? Getting tested for the AIDS virus? Things that you can do to prevent getting the AIDS virus? Getting tested for syphilis? Using family planning?	YES NO DK AIDS FROM MOTHER 1 2 8 AIDS TEST . . . . . 1 2 8 PREVENT AIDS . . . 1 2 8 SYPHILIS TEST . . . 1 2 8 FAMILY PLANNING . 1 2 8	
535	I don't want to know the results, but were you tested for the AIDS virus during any of your antenatal care visits?	YES . . . . . 1 NO 2	→ 541
536	Did you yourself ask for the test, was it offered to you and you accepted, or was it required?	ASKED FOR THE TEST . . . . . 1 OFFERED AND ACCEPTED . . . . . 2 REQUIRED 3	
537	I don't want to know the results, but did you get the results of the test?	YES . . . . . 1 NO 2	→ 539
538	Did you tell your husband/(any of) your partner(s) your HIV status?	YES . . . . . 1 NO 2	
539	Where was the test done? IF SOURCE IS HOSPITAL, HEALTH CENTER, OR CLINIC, WRITE THE NAME OF THE PLACE. PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. _____ (NAME OF PLACE)	PUBLIC SECTOR GOVERNMENT HOSPITAL . . . . . 11 GOVT. HEALTH CENTER . . . . . 12 FAMILY PLANNING CLINIC . . . . . 13 MOBILE CLINIC . . . . . 14 FIELDWORKER . . . . . 15 OTHER PUBLIC _____ 16 (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/PRIVATE CLINIC/DOCTOR . . . . . 21 PHARMACY . . . . . 22 MOBILE CLINIC . . . . . 23 FIELDWORKER . . . . . 24 OTHER PRIVATE MEDICAL _____ 25 (SPECIFY) OTHER SOURCE SHOP . . . . . 31 HOME . . . . . 32 OTHER _____ 96 (SPECIFY)	
540	Have you been tested for the AIDS virus since that time you were tested during your pregnancy?	YES . . . . . 1 NO 2	→ 542 → 552
541	I don't want to know the results, but have you ever been tested to see if you have the AIDS virus?	YES . . . . . 1 NO 2	→ 549
542	When was the last time you were tested?	LESS THAN 12 MONTHS AGO . . . . . 1 12-23 MONTHS AGO . . . . . 2 2 YEARS AGO OR MORE 3	
543	The last time you had the test, did you yourself ask for the test, was it offered to you and you accepted, or was it required?	ASKED FOR THE TEST . . . . . 1 OFFERED AND ACCEPTED . . . . . 2 REQUIRED 3	
544	I don't want to know the results, but did you get the results of the test?	YES . . . . . 1 NO 2	→ 548

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
545	CHECK 302: CURRENTLY MARRIED OR LIVING TOGETHER? YES ☐ → 547 NO OR BLANK ☐ ↓		
546	CHECK 312: EVER HAD SEX? NEVER HAD SEX (CODE '00') ☐ → 548 OTHER ANSWER ☐ ↓		
547	Did you tell (any of) your spouse(s)/partner(s) your HIV status?	YES . . . . . 1 NO 2	
548	In your lifetime, how many times have you been tested to see if you have the AIDS virus?	TIMES . . . . . ☐☐	→ 550
549	Why have you never had a test for the AIDS virus? PROBE: Any other reason? RECORD ALL MENTIONED.	NO KNOWLEDGE ABOUT HIV TEST . A DON'T KNOW WHERE TO GET ONE . B TEST COSTS TOO MUCH . . . . . C DON'T NEED TEST/LOW RISK . . . . . D DON'T WANT TO KNOW IF I HAVE THE VIRUS . . . . . E CAN'T GET TREATMENT IF HAVE HIV . F OTHER _____ X (SPECIFY)	
550	CHECK 302: CURRENTLY MARRIED OR LIVING TOGETHER? YES ☐ → 552 NO OR BLANK ☐ ↓		
551	CHECK 312: EVER HAD SEX? NEVER HAD SEX (CODE '00') ☐ → 601 OTHER ANSWER ☐ ↓		
552	CHECK 538 AND 547: 'YES IN EITHER OR BOTH ☐ → 554 OTHER ☐ ↓		
553	Have you ever discussed AIDS or the virus that causes AIDS with your spouse(s)/(any of) your partner(s)?	YES (WITH ALL) . . . . . 1 DISCUSSED WITH SOME . . . . . 2 NO, NEVER DISCUSSED 3	
554	Do you know whether or not your spouse(s)/(any of) your partner(s) has the virus that causes AIDS?	YES, KNOW STATUS (FOR ALL) . . . . . 1 YES, KNOW STATUS FOR SOME . . . 2 NO, DON'T KNOW STATUS (FOR ANY) 3	

SECTION 6. OTHER REPRODUCTIVE HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	MALE ☐ FEMALE ☐ → 603		
602	Some men are circumcised. Are you circumcised?	YES . . . . . 1 NO 2	
603	Have you ever undergone any (other) traditional practices that involve tattooing or cutting of the skin?	YES . . . . . 1 NO 2	
604	Apart from AIDS, have you heard about other infections that can be transmitted through sexual contact?	YES . . . . . 1 NO 2	
605	CHECK 312: HAS HAD SEXUAL INTERCOURSE ☐ HAS NOT HAD SEXUAL INTERCOURSE ☐ → 613		
606	CHECK 604: HEARD ABOUT INFECTION TRANSMIITTED THROUGH SEXUAL CONTACT ☐ HAS NOT HEARD ABOUT INFECTION TRANSMITTED THROUGH SEXUAL CONTACT ☐ → 608		
607	Now I would like to ask you some questions about your health in the last 12 months. During the last 12 months, have you had a disease which you got through sexual contact?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8	
608	MALE ☐ Sometimes men experience an abnormal discharge from their penis. During the last 12 months, have you had an abnormal discharge from your penis?	FEMALE ☐ Sometimes women experience a bad smelling abnormal genital discharge. During the last 12 months, have you had a a bad smelling abnormal genital discharge?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8
609	Sometimes men have a sore or ulcer on or near their penis. During the last 12 months, have you had a sore or ulcer on or near your penis?	Sometimes women have a genital sore or ulcer. During the last 12 months, have you had a genital sore or ulcer?	YES . . . . . 1 NO . . . . . 2 DON'T KNOW 8
610	CHECK 607, 608, 609: HAS HAD AN INFECTION (ANY 'YES') ☐ HAS NOT HAD AN INFECTION OR DOES NOT KNOW ☐ → 613		
611	The last time you had (PROBLEM FROM 607/608/609), did you seek any kind of advice or treatment?	YES . . . . . 1 NO . . . . . 2 → 613	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
612	Where did you go? PROBE: Any other place? RECORD ALL MENTIONED.	PUBLIC SECTOR GOVERNMENT HOSPITAL ... A GOVT. HEALTH CENTER ..... B FAMILY PLANNING CLINIC ... C MOBILE CLINIC ..... D FIELDWORKER ..... E OTHER PUBLIC _____ F (SPECIFY) PRIVATE MEDICAL SECTOR PRIVATE HOSPITAL/PRIVATE CLINIC/DOCTOR ..... G PHARMACY/DRUG STORE ... H MOBILE CLINIC ..... I FIELDWORKER ..... J OTHER PRIVATE MEDICAL _____ K (SPECIFY) OTHER SOURCE SHOP ..... L TRADITIONAL HEALER ..... M OTHER _____ X (SPECIFY)	
613	Husbands and wives do not always agree on everything. Please tell me if you think a wife is justified in refusing to have sex with her husband when she knows he has a disease that can her be transmitted through sexual contact?	YES ..... 1 NO ..... 2 DON'T KNOW/DEPENDS 8	
614	When a wife knows her husband has a disease that can be transmitted through sexual contact, is she justified in asking that they use a condom when they have sex?	YES ..... 1 NO ..... 2 DON'T KNOW/DEPENDS 8	
615	RECORD THE TIME. IF TIME IS 1:00 PM OR LATER, ADD 12 TO HOUR.	HOUR ..... ☐☐ MINUTES ..... ☐☐	

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT RESPONDENT:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

NAME OF THE SUPERVISOR: _____ DATE: _____