

COMMUNICATION IMPLICATIONS OF WORKERS' PERCEPTIONS IN THE MANUFACTURING INDUSTRY REGARDING CONDOM USE

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ABSTRACT

The regular use of condoms is one of the most effective ways to prevent infection with HIV. The efficacy of the condom as instrument to combat infection is, however, negatively impacted upon by popular (mis)perceptions. This leads to incorrect use of, or the refusal to use, condoms. Agencies seeking to promote condom use should therefore utilise these perceptions in their communication strategy designs. This article explores perceptions on condom use in a sample group of 20 persons who attended a three-day training workshop on HIV/AIDS prevention in Johannesburg from 29 September to 1 October 2003. The group was constituted of workers in the manufacturing industry who had been selected by their management and peers because they were deemed to have the potential to be trained as peer educators in HIV/AIDS prevention.

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INTRODUCTION

The New Partnership for Africa's Development (NEPAD) policy document on Human Resource Development identifies four interrelated priority areas (2002). Two of these are of particular relevance to this article, namely Bridging the Education Gap, and Health.

Health issues, in particular the HIV/AIDS pandemic, is clearly identified as a priority in Education: "Education for All (...) will not easily be achieved without addressing several critical impediments. One is to stem the impact of the HIV/AIDS pandemic on the education system, in part by turning the education system into an effective vehicle for combating the spread of AIDS" (NEPAD 2002:4).

A key factor identified in the NEPAD vision for Education is that the education and training provided by education systems should be relevant and applicable to the social contexts in which African people live: African educational experts need to think locally, taking into account indigenous knowledge systems, identities and needs while creating a balance between the demands of the global and local contexts" (2002:ibid.).

The policy document identifies the HIV/AIDS pandemic, gender inequality and malnutrition as barriers to education and social development, and sets as goals the design and implementation of education initiatives to promote behavioural change among students and teachers through increased knowledge and awareness (2002:8). The importance of appropriate, socially contextualised communication strategies and campaigns in order to realise these goals is also recognised (2002:9).

Authentic education is dependent on effective communication, which in turn is powerfully influenced by the assumptions and perceptions of all parties to the communication process. This is particularly important within the context of poster and billboard campaigns which are predominantly based on linear communication models. It is therefore essential that perceptions amongst target audiences regarding condom use be researched in order to inform communication strategy design.

RATIONALE FOR THE STUDY

The regular use of condoms is one of the most effective ways to prevent infection with HIV. The efficacy of the condom as instrument to combat infection is, however, negatively impacted upon by popular (mis)perceptions. This leads to the incorrect use of, or the refusal to use condoms. Although some media campaigns aimed at promoting condom use have touched on some misperceptions regarding condoms, much more needs to be done to change negative attitudes towards condom use.

A study of perceptions regarding condom use is therefore closely linked to the preceding NEPAD priorities regarding Education and Health at the micro level, and will provide information essential for the design of effective communication strategies.

DELIMITATION OF THE STUDY

This study is exploratory and analyses the beliefs and attitudes of a sample group of 20 adult persons who attended a three-day training workshop on HIV/AIDS prevention in Johannesburg from 29 September to 1 October 2003. The group was constituted of workers in the manufacturing industry who had been selected by their management and

peers because they were deemed to have the potential to be trained as peer educators in HIV/AIDS.

CONDOM USE IN THE SOUTHERN AFRICAN CONTEXT

In spite of the relatively good availability of condoms in South Africa, research surveys reveal disconcerting statistics on condom use.

Statistics from *The 2001 National Survey of South African Youth* conducted among a nationally representative random sample of 2204 youths, aged 12-17, by Africa Strategic Research Corporation and the Kaiser Family Foundation reveal an alarmingly high occurrence of sexually risky behaviour amongst teenagers (www.lovelife.org.za/corporate/index.html).

More than half (53%) of sexually experienced youths said that they had used a condom only "some of the time" or "never" when they had had sex in the past year.

Only three in ten reported they that had used one "always" in the past year.

Similarly, over one-third of sexually experienced youths (35%) say they did not use a condom the last time they had sex compared to six in ten who said they did.

Research conducted amongst sex workers and truck drivers at the Ladysmith, Tugela Ferry, Newcastle, Reitz and Warden truck stops in Kwa-Zulu Natal revealed a similarly bleak picture (Ramjee and Gouws 2001).

The research, conducted on behalf of the Medical Research Council (MRC) of South Africa, reported the following results:

The mean age of the 194 sex workers screened, was 25 and their average education was six years. HIV prevalence among them was 56%. Condom use was restricted to less than 15% of their total number of sex acts and some workers serviced up to 15 clients per day.

The MRC research screened 320 truck drivers, yielding the following results:

The average age of the drivers was 37 years and 56% of the sample tested HIV positive, while 66% had another sexually transmitted disease during the preceding six months. 34% of the drivers indicated that they always stopped for sex during journeys; 42% preferred anal sex; 77% never used condoms while practicing anal sex with prostitutes, and 87% never used condoms with their regular partners.

Reporting in the popular press on this research, Copeland (2002:38-43) quotes some of the sex workers as explaining that many of the truck drivers prefer anal sex, or, alternatively, so-called "dry" sex. Dry leaves and powder, usually obtained from an herbalist, is inserted into the vagina, causing the vagina to shrink and making it feel hot and dry. This practice increases the risk of causing ulceration of the vagina, which increases susceptibility to HIV infection. In cases where condoms are used, dry sex also increases the risk that the condom may tear.

These women put their health at greater risk, because of the reluctance of males to use condoms. The sex workers are aware of the danger of HIV infection, and one of the women is quoted as saying, "We use a cloth dipped in *muti* and clean ourselves inside

as best we can, but it's no good these days because of AIDS. We've changed to diluted Jeyes Fluid, Jik, or both, because it's stronger. We also use it as an enema because anal sex is often preferred by these truck stop tigers" (Copeland 2002:41).

RESEARCH ON PERCEPTIONS REGARDING CONDOM USE: BENONI, SOUTH AFRICA

Given the context of low incidences of condom use in South Africa, in spite of the high availability of condoms, the following research problems were formulated:

- What are the perceptions/misperceptions amongst adults regarding condom use?
- How can these perceptions be addressed most effectively?

The following research aims were derived from the research problems:

- Explore and describe the common mis/perceptions on condom use; and
- Make recommendations to address these mis/perceptions.

RESEARCH DESIGN

The broad objective of the research was to understand the various perceptions that adults have regarding the regular use of condoms. This specific perspective of the research tries to offer an educational / communication approach to the correct and regular use of condoms to combat the HIV pandemic that threatens the population of South Africa and many other African countries.

A qualitative, subjective and contextual research design was used for this research (Mouton 1996). An inductive approach was followed, gaining information from the group of respondents. The research was open and not directed by a prescriptive framework, preconceived ideas or any hypotheses. A holistic approach was followed where the respondents were met on their level and the research conducted as part of addressing the whole aspect of sexuality. This research design was chosen to determine the mis/perceptions of potential sexually active adults.

RESEARCH METHOD

The research sample consisted of a diverse, heterogeneous, multi-cultural group of adults from various manufacturing industries in the Gauteng province. The respondents were participants in a training workshop on HIV/AIDS prevention, and were selected by their employers for the training because they were deemed to have the potential to become peer educators in their places of work. During the workshop, the following survey question was posed:

"The regular use of condoms is one of the most effective ways to prevent infection with HIV. In spite of this, many people do not use condoms. Write down 5 reasons common amongst your peer group for not using condoms."

RESULTS

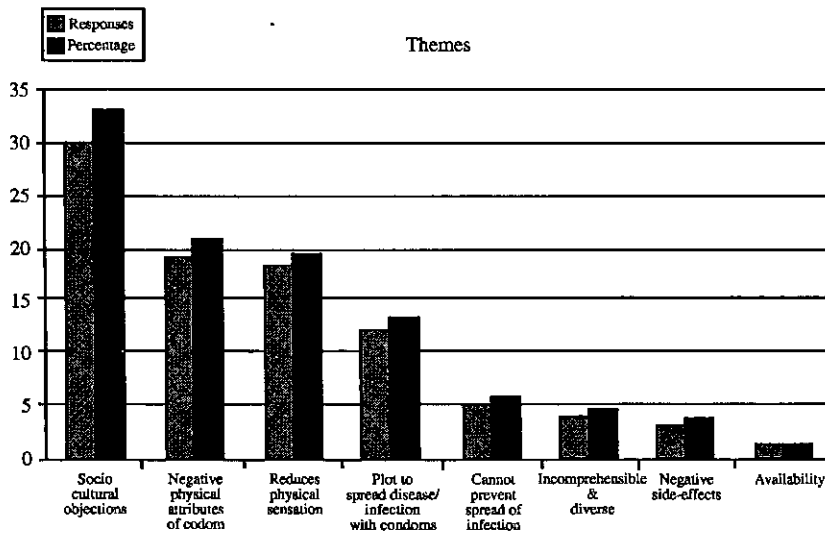
The question yielded 92 responses from the survey group of 20. These responses were

analysed and consolidated into 16 sub-themes. (The raw data on which the analysis is based, is contained in Addendum A.)

Sub-theme	Responses	Percentage
Use of condom reduces sexual enjoyment due to lessened sensitivity	18	19.6
Lubricants contain HIV / other diseases	8	8.7
Fitting condom disrupts the sexual act	7	7.6
Condoms are not safe and cannot prevent the spread of disease	5	5.4
Tears / bursts easily	5	5.4
Destroys trust in a relationship	4	4.3
Condoms contain too much lubricant	3	3.3
Condoms are too small	3	3.3
Condoms are too big	3	3.3
Do not use condoms because have never used it before	3	3.3
Condoms have a bad smell	3	3.3
Against culture to use it	3	3.3
HIV positive persons want to spread disease out of revenge and therefore do not use condoms	3	3.3
Using a condom is like eating a sweet with the wrapper on	3	3.3
Condoms cause side effects	3	3.3
Condoms contain worms if you fill it with water	2	2.2
There is not a good enough reason for using a condom	2	2.2
Do not use condoms because of drug / alcohol use	2	2.2
Incomprehensible reason	2	2.2
Condom does not fit	1	1.1
Freely distributed condoms arouse suspicion regarding safety	1	1.1
Cannot have children if you use a condom	1	1.1
Sometimes the condom slips off in the vagina	1	1.1
Too lazy to use condom	1	1.1
HIV does not exist	1	1.1
Condoms is a plot of the previous regime	1	1.1

Knows partners well and therefore does not need condom	1	1.1
Flesh colour of condoms	1	1.1
Condoms not always available	1	1.1
	92	100

These themes were further consolidated into 8 themes, represented in the following chart



ANALYSES AND INTERPRETATIONS OF THEMES

Theme 1: *Socio-cultural objections*

Based on the number of responses, socio-cultural objections to the use of condoms is indicated as the biggest reason for not using condoms. It yielded a response percentage of 32,6%, and the following “reasons” typify the theme: it is against the respondent’s culture to use condoms, the use of condom destroys trust between partners, and it disrupts the sex act.

Theme 2: *Negative physical attributes of condom*

This theme is closely linked to the third theme and scored the second highest number of responses (20,7%). It is interesting to note that the perception that Africans find standard condoms too small (see response reported in the MRC research reported above) is not validated, rating condoms too large / too small in an equal ratio. Also significant is the reference to the unpleasant smell of the condom. The complaint that condoms tear too easily relates to the third theme, namely the cause of reduced physical sensation. Although there is a direct correlation between the thickness of the latex and

/ the strength of the condom, further research needs to be done regarding the correlation between condom failure and sexual practice (for example, the practice of “dry sex” referred to earlier in this article).

Theme 3: *Reduction of physical sensation*

Although this theme registered the third highest response, it is significant that socio-cultural reasons and physical characteristics of the condom outweigh it in importance. This means that considerable scope exists for modifying attitudes to condom use (little can be done regarding the loss of tactile sense due to condom use.) It should also be noted that the signalling of loss of physical sensation is compounded by “urban wisdom” contained in popular expressions such as “You don’t eat a sweet with its wrapper on” / “You don’t eat a banana with its peel”. Attempts have already been made to modify this attitude through the use of mass communication, such as the PSA TV advertisements which specifically targeted this matter during 2003.

Theme 4: *Plot to spread disease and getting infected from the condom*

The relatively high response rate in this category (13%) is alarming, but provides significant scope for the changing of attitude / perception through education and communication. Up to date I am, however, not aware of a single campaign to combat the widespread urban legends that (a) condom lubricants contain the HI virus, (b) condoms are provided free of charge because it is a plot to spread HIV/AIDS amongst the poor (the argument being that rich (white) people are able to buy safe condom, whereas poor people have to use “infected” free condoms).

Theme 5: *Condoms cannot prevent the spread of the infection*

Although not a particularly high response, it is a reason for concern since some public statements to the effect that the HI virus is so small that it can pass between the substantially bigger latex molecules have been made by medical practitioners. This remains part of the medical *hocus pocus* that jeopardises efforts to curb the spread of HIV/AIDS in South Africa. Unfortunately individual campaigns to combat the many fallacies surrounding the pandemic cannot hope to succeed until a clear and unambiguous official policy statement regarding the combating of the pandemic holistic is issued by the Minister of Health.

Theme 6: *Negative side-effects of condom use*

The 3.3% responses that constitute this theme provided for some of the lighter moments of the research, in particular the statement that the use of condoms causes flatulence in males. Again, this theme illustrates the fact that much can be done to modify attitudes towards condom use, since so much of it is founded on rumour and fallacies. These include: condoms cause rash on the genitals; condoms trap the sperm in the male’s body, leading to disease or madness; condoms can slip off and remain in the vagina, causing disease and infertility.

Data not interpreted

Due to the low response numbers registered in themes 7 and 8, these themes are not discussed in this article. A further 4.3% of the responses were either incomprehensible

or constituted single responses that did not fit any of the identified themes, and these are consequently also discounted.

CONCLUSION

Condom use among the sample is strongly determined by socio-cultural beliefs, whether based on fact or fallacy. This research confirms the results of several other studies conducted in Africa and South America, and confirms that "condoms suffer from an image problem" due to "bad reputation, false rumours and myth" (Gardner, Blackburn & Upadhyay 1999: 19, 31).

The perceptions regarding condom use in this study are based on personal experience, hearsay, misrepresentations and urban legend. Although little can be done regarding those negative physical attributes of condoms highlighted by the responses that constitute theme 3, considerable scope exists for changing negative attitudes clustered in the other 5 themes.

Since socio-cultural reasons for negative perceptions on condom use was the single most dominant theme identified by this study, and many of these "reasons" are (partly) based on *popular myth* or urban legend, communication strategies should be developed to address these issues. Coupled with this, formal life skills education syllabi should also be informed by communication theory in order to develop appropriate materials and methodologies. This should form an important component of formal education and training through the introduction of the compulsory Life Orientation learning area, which is to be expanded nationally from the Senior Secondary School phase to the FET band as from January 2006. It needs to be stressed that a "blanket strategy" in this regard should be avoided, and that regional and national education, coupled with communication campaigns, should address the issue in appropriate socially contextualised ways.

Some headway has been made in South Africa in this regard, for example through the media campaigns of *Love Life*. Unfortunately the *Love Life* campaigns are not adequately contextualised for the multi-cultural South African population (Jordaan 2003; Bechan 2003). In order for the negative perceptions regarding condom use highlighted in this study to be turned around, it is essential that efforts to change attitude and behaviour should take local beliefs, values and identities into account. Up to now, this has not been done on a sufficiently large scale.

Addendum A

Research Data

Total number of participants: 20

Gender: 17 male
3 female

Age: 25 – 46 years

Demographics: 2 whites
1 coloured
17 black

Home language: 3 English
4 Northern Sotho
3 Zulu
3 Xhosa
2 Ndebele
1 Tswana
1 Venda
1 Tsonga
1 Setswana
1 Swazi

Home residence: 11 Urban
9 Rural

Verbatim responses to the research question (no alterations in spelling/grammar):

“Because they say when you use condom it is not nice.”

“Lazy to put on condom”

“You don’t trust each other”

“Too small”

“It’s smell (Or I use my *muti*)”

“Reducing pleasure”

“Eating sweet with plastic”

“Condom bursting”

“Same like you are doing nothing”

“Takes time to put (delay)”

“Sometimes it falls to lady’s vagina”

“No proof of trusting one another”

"Because of it is not 100% save"

"Not enjoying sex when using condom"

"Because they never used them before"

"Because of condoms AIDS is popular"

"Because of sometimes they tear off when using them"

"Because of other condoms are free and others you buy them so you can no wich is the save one to use"

"Tearing of condoms"

"Some say it prevent some sperms to come out"

"Some say it has got worms"

"Some say it does not fit"

"Some say they can't eats rapped in plastic"

"Some say they do not enjoy sex with a condom"

"Some say there is no good reason to use condom"

"Not always available when needed"

"Not the same physical sensation"

"Delays natural process of events "

"It does not give pleasure"

"The lubricant inside the condom causes HIV/AIDS"

"Condoms are not 100% protective"

"Condoms have worms if you put water inside"

"Condoms are small, they are tight around the penis"

"People do not want to use condoms, because they said when:

1.They use condom they don't enjoy sex

2.Condom is got infection

3.They can't make babies through condom

4.Condoms are not safe it's just the same to use or not to use

5.They are not filling free with condoms"

"Due to failure to acknowledge that HIV is existing"

"Deleberatley don't want to use it use an excuse of the past Regem"

"Claim that they can not feel the real pleasure to the partner"

"Claim that God created to enjoy themselves not with other artificial"

"Because most of the people fighting use condoms – they the question is why now"

"Some say it minimise pleasure"

"Some say it's not safe – because it sometimes burst"

"Test is different when using a condom than skin to skin"

- "The believe that condoms lubricant is contaminated with certain viruses"
- "Culture raised us to believe that you can't use a condom with sleeping with your wife"
- "Your partner does not trust you if you tell him/her to use condoms"
- "When drunk not having no time to put on"
- "Knowing that they are HIV + then they want to spread it"
- "There is no pleasure when using condom"
- "Condom is minimising the climax"
- "A belief that free condoms distribution spread disease"
- "A sweet with a paper rolled on can't taste"
- "The condom are all made in one size which is small for others to use"
- "Because is can because flash colour"
- "Because it can cause erection"
- "Because some condoms has no quality/No original condoms"
- "Because condoms can dispite the style"
- "Because condoms have some oil"
- "Because if you use a condom is not fil orait"
- "Condoms distep the stale"
- "Condoms is note 100% sieve"
- "Condom soluteme is very big"
- "Because condoms new to me"
- "I do not use condom because itself is very dangerous eg If put hot place give you a disease"
- "Penis small to it"
- "Because of ignorance"
- "By thinking that they know their partners very well"
- "By having sex under the influence of alcohol and drugs"
- "Because of cultural belief"
- "By just undermining the whole HIV/AIDS pandemic"
- "Others say condoms aren't 100% save as protection"
- "Having sex with condom you don't have enough fun"
- "Making rush to other people's genital parts"
- "They don't belief in using condoms at all because they never used it before"
- "Funny smell of the condom"
- "Too much lubrication/oil"
- "It feels up stomach with air"
- "Tasteless"

"Takes time to wear and affect erection and you have to start again"

"It bursts sometimes"

"Too big (condom)"

"It can spy through smell in blankets"

"If you have it in your possession your partner can fight you or no more trusting you!!!!!"

"People do not want to use condoms because they think condom bring HIV to them"

"People they don't want to use condom because when they have sex they don't enjoy okay"

"People do not like condom because of too much oil"

"People they do not want to use condom because they scared"

"People they don't want to use condom because when they have sex they don't fill it like normal intercourse"

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