

DETERMINANTS OF CONDOM USE IN PAKISTAN

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Introduction

In the 1980s, a major social marketing program was started in Pakistan to supplement the government family planning program and to stimulate demand for contraceptives. Condom social marketing has since become an important component of efforts to reduce unplanned pregnancies. However, restrictions on mass media condom promotion have hampered behavior change communication campaigns. These restrictions are now being lifted, which creates unprecedented opportunities to implement behavior change communication campaigns that can help remove social, cultural, and other barriers to condom use.

Objectives

This study analyzes recent survey data to identify the determinants of condom use among married men in Pakistan, with the aim of contributing to the base of evidence that can be used to make programmatic decisions to strengthen the design of future condom behavior change communication campaigns.

Data and Methods

Data stem from the 2009 Advertising Impact Survey (AIS). The AIS covers Pakistan's four provinces, but not the Tribal Areas; it is restricted to men whose wives are of reproductive age (15-49). Data collection was conducted by AC Nielsen from March 15 - April 7, 2009. Sample size is 1,606. Logistic regression was used to estimate the effect of various predictor variables on the likelihood that the respondent and his spouse(s) currently use condoms for family planning, and on the likelihood that they consistently use condoms. 68% of interviewed men are rural, 31% are uneducated, and 60% are in a cousin marriage. The average number of children is 3.8.

Fig. 1: % of Men Who Currently Use Condoms for Family Planning

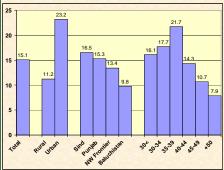


Fig. 2: % of Men Who Consistently Use Condoms for Family Planning

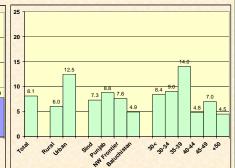


Table 1: Determinants of Current Condom Use and Consistent Condom Use for Family Planning Among Married Men

	Odds of Current Condom Use for FP	Odds of Consistent Condom Use for FP
Urban Residence	1.74**	1.64
Education		
None	1.00	1.00
Any Primary	1.79	1.96
Middle	1.71	2.71*
Matriculate-Intermed.	1.87*	2.35*
Graduate or higher	2.84**	3.42**
Age		
<30	1.00	1.00
30-34	0.81	0.74
35-39	0.95	1.19
40-44	0.50*	0.28**
45-49	0.41**	0.64
50+	0.24***	0.31*
In Good Health	1.24*	1.37**
(self-report)		
Cousin Marriage	0.66*	0.83

	Odds of Current	Odds of Consistent
(continued)	Condom	Condom Use
<u> </u>	Use for FP	for FP
Wants no more kids	3.32***	3.59***
Approves of FP	2.18**	3.60**
Discussed FP	1.86*	1.48
(past 3 months)		
FP worker/LHW visit	0.60*	0.63
(past year)		
Believes condoms are	1.18***	1.16***
effective for FP		
Believes condoms	0.93**	0.91***
reduce sexual pleasure		
Embarrassed to	0.97	0.95*
negotiate condom use		
Marie Jack Marie		
Pseudo R ²	25.5%	28.0%
N of Cases	1,606	1,606
*p<0.05 **p<0.01 ***p<0.0	001	

Note: Number of children, wealth, province, knowledge of condom sources, TV viewership and radio listenership had no significant effect.

Results

Figure 1 shows that 15% of men currently use condoms for family planning. Current condom use is higher in urban than rural areas (23% vs. 11%). It is also high among men aged 35-39. Current condom use is low in Baluchistan province (10%). Although condoms are used for family planning, use is often inconsistent (Figure 2). Only 8% of men consistently use condoms for family planning. Urban men and men aged 35-39 have exhibit higher levels of consistent use.

Table 1 confirms that being urban, highly educated and healthy has a positive effect on current condom use, while being 40 or older and being in a cousin marriage have a negative effect. The desire to stop childbearing, approval and discussion of family planning have positive effects on current condom use, but visits by family planning workers has a negative effect. Perceptions that condoms are effective for family planning has a positive effect, while perceptions that they reduce sexual pleasure have a negative effect. The predictors of consistent condom use for family planning are fairly similar, except that urban residence, cousin marriage, discussion of family planning and visits by family planning workers have no effect.

Conclusions

Behavior change communication campaigns to promote condom use for family planning are most likely to resonate with younger men with post-primary education who approve of family planning. Campaigns that encourage spousal communication about family planning, promote the effectiveness of condoms for family planning, particularly for limiting family size, are likely to be most effective.