

The HIV and AIDS Status report of 2005 has shown that there is a significant increase in percentage of the new HIV infection in discordant relationships, where 124,261 new infections were seen in 2009 and among which 88% of new infections occurred in stable marriage relations (MoH Uganda, 2010).

Cross-sectional study design was used and questionnaires administered to 173 individuals in HIV discordant relationships accessing services at TASO Mulago clinic.

The specific objectives of the study were: to determine the level of adherence for safe sex practices; to identify the socio-demographic factors influencing adherence to safe sex practices among discordant couples visiting TASO Mulago Clinic; to establish the health systems factors influencing adherence to safe sex practices among discordant couples attending TASO Mulago clinic; to identify the individual factors influencing adherence to safe sex practices among discordant couples visiting TASO Mulago Clinic.

The study found out that the adherence of safe sex practices was poor with 82.7% not adhering; the demographic factors associated with adherence to safe sex practices were Marital status of discordant couples was very significant (P-value=0.038, $X^2=6.534$; also the years spent in marriage had a strong association with the level of adherence ($X^2=46.654$, P-value=0.001); it also found that there was no association between adherence to safe sex practices and health system factors. The individual factors had an influence on adherence to safe sex practices and these included the desire to have children, having concurrent partners in the past 12 months, alcohol taking, discussion with sexual partner about of fears of HIV transmission and the frequency of negotiating for safer sex with partner.

The level of adherence to safe sex practices is still poor among the discordant couples

The marital status and duration in marriage has a strong association with adherence to safe sex practices.

There is no association between health system factors and adherence to safe sex practices.

Individual factors play a big role in the adherence to safe sex practices.

The study therefore recommends that besides health care practitioners designing and implementing safe sex adherence strategies that are sensitive to age, marital status and years spent in marriage,; government through its line ministry of health should construct more health facilities that are at a shorter distance to the general population for ease of accessibility.