

ABSTRACT

Background:

Individuals under ART are advised to engage in safe sexual practices because the purpose of ART is to control HIV, not only in terms of treatment but also of the infection rate.

Failure to adhere to safe sexual practices is of public concern because of the potential of increasing the HIV infection rate especially in sub-Saharan Africa where major HIV transmission mode is heterosexual intercourse. Adolescents living with HIV are a growing cohort, as a result of many children who were vertically infected reaching adolescence in addition to large numbers of new HIV infections that are mainly take place among young people.

The sexual practices of HIV-positive adolescents have implications for onward transmission of HIV, risk behavior, health and well-being of the adolescents. This study explored factors influencing adherence to safe sexual practices among HIV positive adolescents as recommended by the Uganda National Antiretroviral Treatment and Care Guidelines for adults, adolescents and children.

Objective:

The study aimed at assessing the factors influencing adherence to safe sexual practices among HIV positive adolescents attending TASO- Jinja and St. Francis Health Care Services centers during the period of 3 months.

Methodology:

This was descriptive cross-sectional study combining quantitative and qualitative methods. This study enrolled a total of 276 HIV- positive adolescents of ages 9 to 24 between July 2013 to October 2013 from two health facilities in Jinja town that offer adolescence HIV services. Information concerning level of adoption of safe sexual practices, degree of perception towards adherence to safe sexual practices, socio-economic and health facility factors influencing adherence to safe sexual practices was collected. Information was collected using a semi-structured questionnaire and a Focus Group Discussion (FDG). Data was entered using into EPIDATA and analyzed using STATA version 12.

Both Descriptive and inferential statistics were used based on the stated objectives.

Results:

The findings of the study showed that majority (61.09%) of the respondents had not had sex (abstinence), while 38.9% of respondents had had sex. Among those who had had sex; 73.83% had 1 sexual partner (practiced faithfulness) while only 33.64% practiced correct and consistent condom use. The results of regression analysis further showed that; respondents who were not involved in transactional sex were 494.90 times more likely to adhere to safe sexual practices ($P= 0.043$, 95% C.I = 1.19- 204291). Peer pressure was also statistically significant. Respondents who did not have friends who were pregnant or had impregnated someone were 0.002 times less likely to adhere to safe sexual practices ($P= 0.046$, 95% C.I= <0.000- 0.89). Adolescents who used more than 10,000 shillings to obtain health services were 0.0001 less likely to adhere to safe sexual practices ($P=0.034$, 95% C.I= <0.000- 0.49).

Conclusion and recommendation:

Other than behavior change; interventions to promote adherence to safe sexual practices among HIV-positive adolescents require a broad focus that should include social and economic development strategies that; discourage adolescents from engaging in transactional sex, provide for reduced costs for obtaining health services which may be coupled with provision of skills and capital for income generation to meet these costs. These aspects should be well integrated into the existing ART programs.