

Health Systems Research Unit:  
Research Briefs

# The HERStory Series

## Relationship Dynamics, Gendered Power, and Motivations for Condomless Sex Amongst Adolescents and Young People in South Africa

### SUMMARY

- South Africa has high rates of HIV and teenage pregnancy amongst adolescent girls and young women (AGYW).
- Condom use amongst adolescents and young people in South Africa is sub-optimal; only half of sexually active AGYW 15-24 years old who participated in the survey reported using a condom at last sex.
- Amongst South African adolescents and young people motivations for the use or non-use of condoms are gendered; sexual norms and masculinities influence condom use.
  - AGYW's motivations for non-condom use include relationship security, the desire to demonstrate love, trust, intimacy and commitment, and fear of violent reactions from male partners.
  - For young men, motivations for condomless sex include increased sexual pleasure, proof of masculinity and power, and prestige amongst peers. Young men's desire to attain sexual prowess, respect, and masculine sexual maturity, enhances their resistance to condom use.

### Authors

Zoe Duby, Kim Jonas, Tracy McClinton Appollis, Kealeboga Maruping, Janan Dietrich and Catherine Mathews

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**These research briefs were developed by scientists at the South African Medical Research Council's Health Systems Research Unit to share findings from studies conducted by the organisation.**

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- Many AGYW agree to have condomless sex for the purposes of relationship maintenance, or to avoid negative reactions from boyfriends, suggesting that power and agency in condom use decision-making in heterosexual relationships amongst young South Africans is weighted in young men's favour.
- Some AGYW do wield some power in dyadic condom interactions, sometimes insisting on condomless sex themselves, or demanding 'branded' condoms instead of government-issue free condoms.
- However despite this agency, there is a power disparity in condom use negotiation amongst young heterosexuals in South Africa.
- Condoms remain an important HIV prevention method, in addition to an important tool for preventing the spread of STIs and unintentional pregnancies. In order to improve condom use amongst adolescents and young people in South Africa, the complex multi-level barriers to their use need to be addressed through innovative interventions inclusive of individual level, interpersonal relationship/dyadic level, and socio-cultural level components.

### THE ISSUE

#### Condom Use and Sexual and Reproductive Health of AGYW in South Africa

- Adolescent girls and young women (AGYW) aged 15–24 years comprise 10% of the population in sub-Saharan Africa, however they account for 20% of HIV infections.
- South Africa has the largest HIV epidemic in the world and a quarter of all new infections occur amongst AGYW aged 15–24 years.
- The disproportionate HIV risk faced by AGYW is due to various structural, contextual, and socio-cultural factors including gender inequality, gender-based violence, and gender norms, which combine to negatively impact the ability of AGYW to protect themselves from HIV and other STIs, prevent unintended pregnancy, seek health services, and make informed decisions about their sexual and reproductive health and lives.
- Evidence shows sub-optimal use of condoms amongst adolescents and young people in South Africa, with data



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suggesting that only half of AGYW aged 15–24 years used a condom in their last sexual encounter.

- Rates of condom use amongst adolescents and young people in South Africa are declining, with each year showing progressively lower use of condoms.
- Whilst the development of new biomedical HIV prevention products means that condoms are not the only option, new products such as PrEP and microbicides are yet to be widely available, and condoms remain the most cost-effective HIV preventative method.
- Condoms are the only free and available technology to provide triple protection against HIV, unintended pregnancy, and other sexually transmitted infections.
- Despite the South African government's policy of distributing free condoms, one of the largest condom distribution programmes in the world, and efforts to rebrand government-issue condoms, condom use is on the decline.

### FACTORS INFLUENCING CONDOM USE

- In addition to an individual's beliefs, personal risk perception, self-efficacy, self-esteem, cost/benefit perceptions, and knowledge play a role in determining the ability of that individual to use a condom or not, their social environment and dyadic/relationship interactions with sexual partners play an important role in influencing condom use.
- Condom use is a dyadic behaviour, subject to the influence of both/all sexual partners, their intentions and relationship perceptions, and is necessarily enabled or constrained by gendered power dynamics, which occur within specific socio-cultural contexts, in which societal norms and collective social level scripts also exert a powerful influence on condom use.
- Over the past three decades of the HIV epidemic in Southern Africa, discourse relating to the gendered nature of power in heterosexual relationships, and gendered sexual scripts of condom negotiation, has centered on how socio-cultural factors such as gendered power inequity and hegemonic norms of masculinity impede the agency and ability of women to negotiate the use of penile condoms for sex. However socio-cultural norms shift, and respond to the evolving prevention technology landscape.

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### RESEARCH OVERVIEW: THE HERSTORY STUDY

The HERStory<sup>1</sup> study was an evaluation of combination HIV prevention programme for AGYW in South Africa. We undertook a mixed-methods study comprising in-depth qualitative interviews (IDIs) and focus group discussions (FGDs), combined with a cross-sectional survey. Data collection took place 2017-2019 across communities characterised by high rates of HIV and teenage pregnancy in 6 South African provinces: Western Cape, KwaZulu Natal, Mpumalanga, North West, Eastern Cape, and Gauteng. We analysed survey data on reported condom use among 3,009 sexually active adolescent AGYW aged 15-24 years, and qualitative data from interviews and focus group discussions with 237 AGYW aged 15-24 years and 38 male peers aged 18-23 years. Further information about the AGYW programme and the overall evaluation can be found at: <https://www.samrc.ac.za/intramural-research-units/HealthSystems-HERStory>

### WHAT WE FOUND

- Amongst sexually active AGYW aged 15-24 years in the survey, 51% reported condom use at last sex. Older AGYW (aged 20-24 years) were less likely to report condom use at last sex compared to the 15-19 year age group.
- Among AGYW aged 15-24 years who had ever had sex, just over half (59%) reported having used a condom in the past 3 months. Condom use in past 3 months was more likely among those who were using other contraceptives.
- Amongst sexually active AGYW aged 15-24 years, 8% reported that they failed to use a condom during sex over the past three months because of alcohol or drug use. Older AGYW were more likely to report failing to use a condom during sex due to alcohol or drug use compared with those in the younger group.
- Relationship maintenance is a key factor influencing AGYW's non-use of condoms. The decision to engage in condomless sex due to the fear of being "dumped" or rejected by boyfriends indicates a prioritization of romantic security and intimacy over sexual health.



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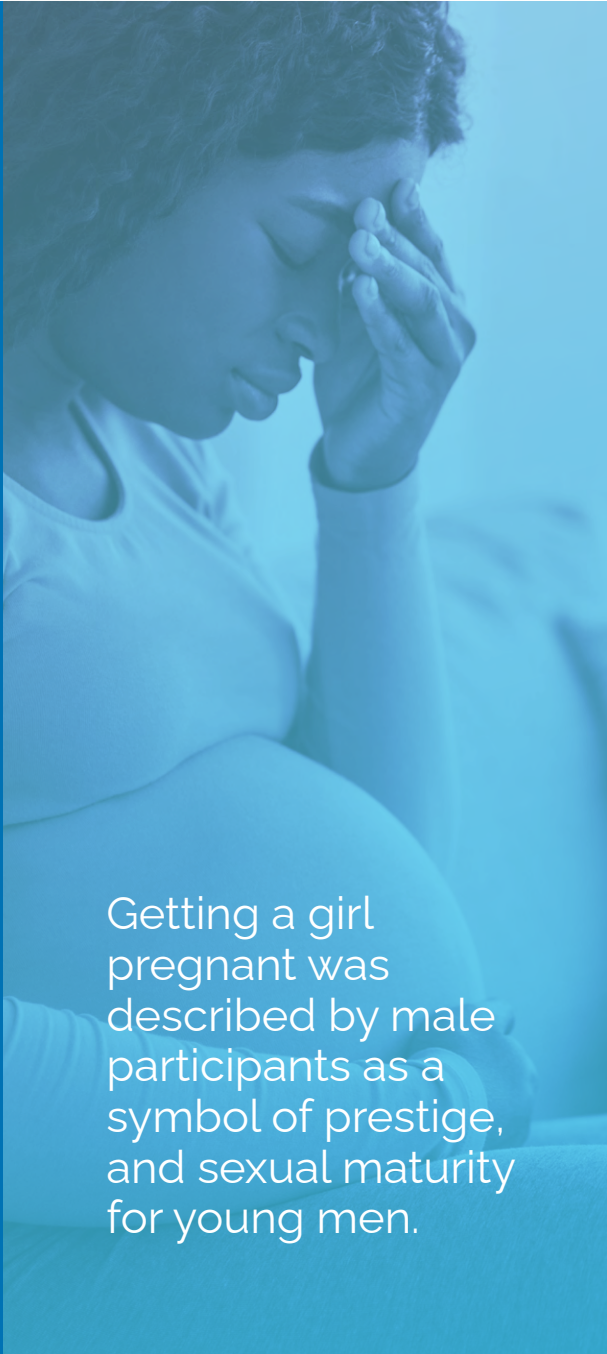
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- Due to the associations of trust with condomless sex, AGYW believe condoms are only needed for casual sex partners, and do not need to be used in established “long-term” relationships.
- Beliefs relating to negative side effects of condoms also serve as a barrier to their use.
- Getting a girl pregnant was described by male participants as a symbol of prestige, and sexual maturity for young men. Condomless sex was associated with concepts of manhood and masculinity. Notions of masculinity and machismo are interwoven with resisting condom use, operating alongside the narrative of male sexual pleasure being prioritized in heterosexual sex, and therefore the desirability of condomless sex in order to maximize male pleasure and enhance male sexual power.
- There are tensions and conflicting influences between retaining traditional gender roles while at the same time moving toward more progressive and more equal gendered power relations. Despite cultural shifts, the sexual agency of AGYW in South Africa remains constrained by inequitable gendered power dynamics.

### IMPLICATIONS FOR PRACTICE

- Interventions aiming to increase condom use need to engage young men and women in culturally sensitive and contextually appropriate dialogues about gender, in order to critique and deconstruct existing notions of manhood and womanhood, and reinforce positive forms of masculinity that enable more equal power in negotiations over condom use.
- Interventions need to address gender inequalities, promote women's rights and autonomy and challenge male privilege and power.
  - While efforts should still be made to empower young women in condom negotiation, interventions should also shift the focus of improved condom negotiation skills from AGYW to young men, engaging men and boys in programmes which work to foster gender-equitable beliefs, behaviours, and actions, through gender-targeted initiatives that address gender norms and attitudes.



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- Engaging men and boys in HIV prevention interventions, rather than leaving condom use negotiation to women, should be a key focus for future efforts. Men's engagement and involvement is critical in efforts to enable sustained and consistent use of condoms.
- "Gender-transformative interventions" should be used to shift harmful gender norms and roles through integrated community-based programming.
- Since condom use is influenced by both individual and interpersonal level factors, there is a need to target partner-level influences on condom use through interventions which include communication and negotiation skills training components, in order to empower AGYW to translate their safer-sex intentions into actual behaviour.
- Interventions need to recognize the bidirectional influence that sexual partners have on each other; couple-based HIV prevention interventions based on a model of healthy intimate relationships may be an effective means of addressing relationship level barriers to condom use.
- There is a need for contextually relevant education and messaging around relationship dynamics and gender, including exploration of the concepts of trust and construction of expectations within heterosexual relationships, socio-cultural norms around sexuality and pleasure (including female pleasure) and consent.
- **Given the suboptimal use of condoms, and relatively high prevalence of condomless sex among adolescents and young people in South Africa, and the powerful motivations for condomless sex, there is a need for strengthened HIV prevention programming inclusive of condoms as one option amongst other prevention technologies, and on-going education and messaging around the importance of dual-protection, encouraging AGYW who use hormonal contraceptives to also use an HIV prevention method.**



### Paper that this brief is based on:

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