IMPACT ASSESSMENT OF HIV AND AIDS EDUCATION ON ONLINE PARTNERS AND SPOUSE SEEKERS IN KENYA

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DECLARATION

I understand that plagiarism is an offence and I therefore declare that this thesis is my own original work and has not been presented to any other institution for any other award.

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DEDICATION

I dedicate this Thesis to my family, and my dear friends, who have all been and continue to be a source of encouragement in my life.

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ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
HIV	Human Immunodeficiency Virus
KDHS	Kenya Demographic Health Survey
KAIS	Kenya AIDS Indicators Survey
KNASP	Kenya National HIV AND AIDS Strategic Plan
NACC	National AIDS Control Council
NASCOP	National AIDS and STI Control Programme
UNAIDS	United Nations Programme for HIV and AIDS
UNICEF	United Nations Children Fund
WFP	World Food Programme
WHO	World Health Organization

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ABSTRACT

About 1.6 million Kenyans are living with HIV and AIDS while an estimated 1.5 million have already died of the virus. Marrying or looking for a lifetime soul mate or partner in the era of HIV and AIDS pandemic is therefore problematic, worrying and a nightmare. Due to changing lifestyles and limited time for interaction amongst age groups in any one given population, dating has been elevated to media platform amongst sexually active men and women.

However, HIV and AIDS is a reality amongst partners and spouse seekers on media platform but little research has been undertaken to understand the underlying behaviour of online spouse/partner seeking in the era of this pandemic and in the wake of its massive campaign, awareness, education, prevention, control and management strategies being put in place. The current study was therefore carried out to assess the impact of HIV and AIDS education on online partners and spouse seekers in Kenya.

Advertisements of Soul mate data published both online and in Saturday Magazine of Nation Media Group Limited by sexually active persons seeking sexual partners of all categories and levels were utilized as the main source of information for the study. The Pearson Chi-Square and Fisher's exact tests were used to analyze data.

Data obtained from 820 persons with different subgroups including educational level, age, and economic backgrounds were analyzed. Study results showed a significantly higher proportion of the persons involved having perception, awareness, knowledge, attitude and practice (PAKAP) of HIV and AIDS ($p < 0.05$). Perception and awareness of HIV and AIDS were significant by level of education and economic status and not by gender, age, marital status, possession of children and type of relationship sought. Knowledge of HIV and AIDS was significant by level of education, economic status and not by gender, age, marital status, possession of children and by type of relationship sought. Attitude towards HIV and AIDS was significant by level of education ($p < 0.05$) and not by gender, age, economic status, marital status, possession of children and type of relationship sought Practices exhibited significant difference by gender ($p = 0.01$) and no significant difference by age, level of education, economic status, marital status possession of children and type of relationship sought. Results also showed that a significantly higher proportion of the persons involved practiced preventive, control and management measures ($p < 0.05$).The HIV and AIDS status and level of education were the major factors influencing the choice of partners and/or spouses.

Since the results indicated that PAKAP was significant efforts should be made by all stakeholders in HIV and AIDS prevention programmes to equally target persons dating through media in order to have a wider coverage for this kind of dating is becoming a common practice amongst the sexually active group.

CHAPTER ONE

1.0 INTRODUCTION

1.1 Background of the Study

Acquired Immunodeficiency Syndrome (AIDS) is one of the most complex health problems of the 21st century in its third decade and has become a pandemic that threatens the world population (UNAIDS, 2016; WHO, 2016). Moreover, with no vaccine and/or treatment or cure the disease may continue spreading at an alarming rate (WHO, 2016). Globally, an estimated 36.9 million people live with HIV (UNAIDS, 2016). Over 90% of these individuals are concentrated in the developing countries, mostly in countries least able to sustainably afford to care for infected people. Sub-Saharan Africa remains the region most heavily affected by HIV worldwide, accounting for over two thirds (67%) of all people living with HIV and for nearly three quarters (72%) of AIDS-related deaths by 2010 (WHO, 2016).

The number of people living with HIV in Kenya includes about 1.1 million adults between 15 and 49 years, another 60,000 persons from 50 years of age and over, and approximately 120, 000 children (NACC, 2016). Urban populations have higher adult HIV prevalence (10%) compared with rural populations (NACC, 2016). Since HIV weakens the host's immune system, associated opportunistic diseases such as tuberculosis and malaria have had to put a strain on health sector in terms of their treatment and management (KDHS, 2016). The Kenya government has employed among strategies, public education to prevent new HIV infections and provision of Antiretroviral to ensure that less damage is inflicted on the immune system and delay the onset of AIDS. Antiretroviral also reduce the impact of HIV transmission in the community (epidemiological goal) and improve the quality of lives (Jukes *et al*., 2008). The government has

also increased access through provision of free basic education, increase in academic institutions among others. Education in itself is therefore an important tool in combating HIV and AIDS.

The use of online dating sites and mobile dating applications is on the rise, with 15% of adults having reported use of at least one of these in 2015 (Smith, 2016). Two thirds of those who participate in online dating report going on a date with someone that they had met through online dating platforms in 2015, up from 43% in 2005 (Smith & Anderson, 2016). The Internet now affords access to a vastly wider network of potential partners who would have been unknown or inaccessible in former eras. Recognizing the unique possibilities afforded by the internet, numerous commercial web sites have arisen to provide these services to users seeking romantic relationships.

Although, a number of studies have explored various aspects of HIV and AIDS, there is no systematic study carried out to evaluate the level of HIV and AIDS knowledge, awareness, attitudes and perception or practices of men and women seeking partners or spouses in Kenya through online or media platforms. One pertinent question is whether teachers and advocates of awareness are achieving the intended goals or objectives. The present study sought to assess the impact of HIV and AIDS education on partner/spouse seekers in Kenya

1.2 Problem Statement

In Kenya, HIV and AIDS prevalence rates in the national population reached a peak of 10.5% in 1995-96, after which it declined by about 40% to reach approximately 6.7% in 2003. Since then, the epidemic has remained relatively stable, with the prevalence ranging from 6.7% in 2003 to5.6% in 2016 (KAIS, 2016. The factors causing this stability in the prevalence rate of HIV and AIDS for about 10 years largely remain unknown to key stakeholders. It is indeed surprising that this happens in spite of the various prevention, control and management measures that the

Government of Kenya has put in place to check the spread of HIV and AIDS in the country. Education in all formats and at all levels in the society remains the social vaccine and probably the only viable curative measure, hence the most effective and efficient strategy for combating HIV and AIDS. The provision and growth of quality education is directly linked to positive economic development, emancipation and health dividends (NACC, 2016). It is important therefore that education be accorded the priority it deserves in combating HIV and AIDS on the basis of the fact that it is controllable, manageable and preventable. However, there is currently limited information on how education has translated into safe sexual partner/ spouse seeking behaviour. This is critical especially in the era where dating has been elevated to another level where partners date online or through other media. Online /media dating is genuine ground without commensurate information on how it is likely to impact HIV and AIDS transmission.

1.3 Objectives

1.3.1 General Objective

To assess the impact of HIV and AIDS education on online partners and spouse seekers in Kenya

1.3.2 Specific Objectives

(a) To evaluate the level of perception, awareness, knowledge, attitude and practice (PAKAP) towards HIV and AIDS amongst men and women looking for partners and/or spouses in Kenya.

(b) To assess the level of preventive, control and management measures practiced against HIV and AIDS amongst men and women looking for partners and/or spouses in Kenya.

(c) To determine factors influencing the choices of partners and/or spouses in Kenya in the era of HIV and AIDS pandemic.

1.4 Research Hypotheses

(a) There is enough knowledge and awareness amongst men and women looking for partners and spouses in Kenya.

(b) Perception, awareness, knowledge, attitude & practice towards HIV and AIDS influence choices of partners and spouses.

(c) There is practice of preventive, control and management measures against HIV and AIDS amongst partners and/or spouses seekers in Kenya.

1.5 Justification

About 1.6 million Kenyans are living with HIV and AIDS while an estimated 1.5 million have already died of the virus (KDHS, 2016). HIV and AIDS preventive, control and management interventions have been implemented in the recent past and intensified as an effort to attain the resolutions of the World Health Assembly. In spite of integrated management approaches including condom use, post-exposure prophylaxis and abstinence from sex, HIV prevention and control is yet to attain a break through status (UNAIDS, 2016). With HIV and AIDS incidence and mortality on the rise, novel innovations are needed to defeat the disease (WHO, 2010). Investigating perception, awareness, knowledge, attitude and practice among online partner and /or spouse seekers will generate crucial information that can be used for planning, implementation, monitoring and evaluation of HIV and AIDS control activities. Additionally, the knowledge generated will be invaluable in more understanding HIV and AIDS.

CHAPTER TWO

2.0 LITERATURE REVIEW

Human Immunodeficiency Virus (HIV) is an infectious agent that causes Acquired Immune Deficiency Syndrome (AIDS); a disease that impairs the immune system leaving a person vulnerable to life-threatening opportunistic infections (Hankins *et al.*, 2013). There are two types of HIV: HIV type 1 which is the primary cause of AIDS worldwide and HIV type 2 that is common in West Africa (Emlet *et al.*, 2014). HIV is transmitted primarily through the following modes: contact sex with an infected person, sharing hypodermic needles contaminated with HIV infected blood or fluid and transfer of the HIV from an infected mother to her baby during pregnancy, childbirth, or breast-feeding (Reddy *et al.*, 2011).

An estimated 36.7 million people were living with HIV and AIDS worldwide with about 1.8 million new infection cases recorded in 2016 alone (WHO, 2016) (Table 1.1). The pandemic killed an estimated 1.2 million people in 2016 of which 330,000 were children (UNAIDS, 2016).Sub-Saharan Africa is the worst-affected region where an estimated 25.8million people infected which is 68% of the global total compared to South and Eastern Asia who has 12% (UNAIDS, 2016)

Table 2.1: World HIV and AIDS Statistics (UNAIDS, 2016 AIDS Epidemic Update).

World region	People living with HIV and AIDS in 2016	New HIV and AIDS cases in 2016	HIV and AIDS - related death in 2016
Worldwide	36.9 million	2.0 million	1.2 million
Sub-Saharan Africa	25.8 million	1.4 million	790,000
Asia	5 million	340,000	24,000
America	1.7 million	87,000	41,000
Europe	1.5 million	140,000	62,000

The total number of orphaned children in the region at the time was estimated to be 11 million. The bulk of new AIDS cases are among young people of school going age, 15-25, (KDHS, 2016). Projections under conservative assumptions suggests that the toll of HIV and AIDS in sub-Saharan Africa will reach five million by 2030 (UNAIDS, 2016).

HIV and AIDS impacts negatively on the following aspects of education: (i) The demand for education, (ii) the supply of education and, (iii) the quality and management of education (Baker *et al*., 2011). The supply of education can also be hampered by declining productivity of teachers due to frequent absenteeism because of illness, care of the ill family members or in funeral attendances leading to severe decline in learner/teacher ratio and reduced teaching due to slow or non-replacement of teachers who have died from HIV and AIDS (KDHS, 2016). Education budget has also been adversely affected by training of additional teachers, reduced availability of family resources and by double payments of off-duty teachers and their replacements (Inungu *et al*., 2009).

Emotional stress of teachers and learners is also high through increased incidence of HIV and death due to HIV and AIDS among colleagues and relatives (Cacodcar *et al*, 2015). This significantly affects the quality of learning. Other factors that must be considered include devalued standing status of teachers in the community through community perception of teachers as contributors to the spread of HIV and AIDS, perception of educational institutions as risky environment for sexual relationship between learners, and between learners and teachers (Dupas, 2011), and decline in standards of management, administration and financial control of educational institutions due to loss of human resources (Emlet *et al*., 2014).

2.1 HIV and AIDS Pandemic in Kenya

The most recent estimates state that about 1.6 million people are living with HIV and AIDS in Kenya at the end of 2016. This estimate comprises 1.1 million adults aged 15-49, almost 60, 000 persons aged over 49 years, and 120,000 children (NACC, 2016). Broad categorization shows that the HIV prevalence is higher for women, 8.3%, when compared with the men, whose prevalence is 4.3%. Prevalence was also higher in the urban residents, 9.7%, compared with the rural 5.2%. The presence of HIV was confirmed in Kenya with the first AIDS case diagnosis in 1984, in Nairobi. A study soon after established that the AIDS causing virus had extensively spread in the prostitute population in Nairobi. Reported AIDS cases rose dramatically, reaching a peak high of over 80,000 by 1998 (Seeley *et al*., 2010). The exponential increase in the reported cases of AIDS depicted an epidemic that had, or was fast penetrating the population.

Variation in population density, ethnic composition and cultural practices, urbanization levels, migration, are among the various factors which are attributed in the transmission of HIV in Kenya. Though the role of various factors has been a subject of interest in specific case studies, their contribution in the spatial patterns of the HIV and AIDS epidemic in Kenya is not yet explored (Shahid *et al*., 2012).

In recent years, Kenya has made huge strides in tackling its HIV epidemic and has been pioneering in the provision of HIV prevention, particularly the implementation of Voluntary medical male circumcision (KDHS, 2016). However; current efforts are not reaching all of those who need these services. As a result, concentrated epidemics are emerging among vulnerable groups (Maimaiti *et al*., 2010). Prevention initiatives need to target these groups as part of wider efforts

Table 2.2 HIV Prevalence and Incidence rate in Kenya 2016

County	Prevalence rate	Incidence rate (%)	County	Prevalence rate	Incidence rate (%)	County	Prevalence rate	Incidence rate (%)
Homabay	26.0	2.00	**Samburu**	2.2	0.04	**Garissa**	0.9	0.02
Kisumu	19.9	1.62	**Kajiado**	4.7	0.07	**West pokot**	1.5	0.03
Siaya	24.8	1.68	**Uasin Gishu**	4.7	0.07	**Tana river**	1.9	0.07
Migori	14.3	1.00	**Narok**	3.1	0.05	**Manderaa**	0.8	0.02
Mombasa	7.5	0.31	**Nandi**	2.4	0.04	**Lamu**	3.5	0.13
Turkana	4.0	0.07	**Kitui**	4.4	0.27	**Marsabit**	1.4	0.09
Kisii	4.7	0.27	**Machakos**	4.5	0.25	**Wajir**	0.4	0.01
Nairobi	6.1	0.15	**Nyeri**	3.4	0.21	**Marsabit**	1.4	0.09
Trans nzoia	5.2	0.09	**Kiambu**	5.6	0.36	**Baringo**	1.6	0.03
Busia	6.7	0.34	**Kericho**	3.5	0.06	**Samburu**	2.2	0.04
Nyamira	6.4	0.38	**Nyandarua**	3.0	0.19	**Nyamira**	6.4	0.38
Taita Taveta	6.3	0.23	**Isiolo**	3.8	0.23	**Muranga**	4.2	0.24
Kwale	5.9	0.23	**Elgeyo**	1.9	0.03	**Tharaka Nithi**	3.9	0.20
Vihiga	4.7	0.21	**Kilifi**	4.5	0.18	**Meru**	2.9	0.16
Nakuru	4.1	0.06	**Embu**	3.3	0.17			
Makueni	5.1	0.30	**Bungoma**	2.8	0.14			
Kakamega	4.0	0.19	**Bomet**	2.5	0.04			

2.2 Impact of HIV and AIDS on Education in Africa

HIV and AIDS have significantly affected the ability of educational systems in sub-Saharan Africa to supply and manage quality education (Baker *et al.,* 2011). This has been mainly through affecting the management and supply of education by diminished supply of teachers due to mortality. In Zambia, the number of teachers dying from AIDS is greater than the output from the teachers training colleges (Gay *et al.,*2011), while in Kenya, it has been reported that 20-30 teachers die monthly, in one of the districts, from AIDS, with 200 dying monthly in the whole country from AIDS (UNAIDS, 2016).

The great majority of Kenyan children attend at least some primary school, standard1-8, but most do not attend secondary school (NACC, 2016). In 1999, the Kenyan government established a national curriculum on HIV and AIDS education to reach children in primary school (WHO, 2014). The national curriculum was developed with the assistance of UNICEF, and was the outcome of an extensive consultation process within Kenyan society that included many stakeholders, including religious groups. The Ministry has sent books covering the curriculum to all schools.

The primary school HIV and AIDS curriculum teaches basic medical facts about AIDS, HIV transmission, prevention, and care for people living with AIDS. It stresses abstinence as the most effective way to prevent pregnancies and infection with sexually transmitted diseases (Mwamwenda *at el.,* 2014).

2.3 Role of Education in HIV and AIDS Awareness, Prevention and Control

In Sub-Saharan Africa, it was reported that education remains the only hope that can immeasurably contribute to prevention of HIV and AIDS transmission to children falling under

the age of 5 to 14 years (WFP, 2013) against the background of AIDS being incurable, education may well be the alternate vaccine available to mankind.

In Botswana, a study of 1, 294 primary to university students was made on their knowledge about HIV and AIDS, driven by the motivation that education is one of the factors predicting one's knowledge of HIV and AIDS (Fako *et al.,* 2010). Those with higher level of education were more knowledgeable than those who had lower level of education with university students outperforming secondary school students. Quality of education also served as a predictor of one's knowledge of HIV and AIDS. Those who attended better schools were more knowledgeable than those who attended not so schools. Moreover, children whose parents were more educated than others performed better than children whose parents had attained a lower level of education (Baker *et al*., 2011).

Goni *et al*. (2012) in Bangladesh investigated adolescents' knowledge and awareness about HIV and AIDS, and noted that the number of years of schooling correlated to their HIV and AIDS knowledge. There is a correlation between educational attainment and the chances of contracting HIV and AIDS, in such a way that, the higher the education level attained, the lower the chance of being HIV and AIDS infected (Baker *et al.,* 2011). In an extensive investigation of 19,000 adults' education effect on the use of condom, it was observed that for every additional year in their education, there was a linear correlation increase in their use of condom (Flack *et al.*, 2011). It was further argued that schooling enhances higher level of cognitive skills, in terms of both planning and reasoning (Jukes *et al*., 2009). Such abilities contribute to better decision making regarding the use of HIV and AIDS preventive measures.

Representative surveys in 53 countries have shown that education, particularly geared at girls has the potential to equip young people with the necessary HIV and AIDS knowledge, which

facilitates them in the prevention of transmission of HIV and AIDS infection (UNICEF, 2004). Comparative analyses of countries and regions have shown concrete evidence that, both young men and women with higher levels of education command higher levels of HIV and AIDS knowledge; better understanding of prevention of infection and undergoing change of behaviour that is likely to predispose them to contracting HIV and AIDS (Mondal *et al.,* 2014). According to WFP 2013, "Education is crucial to success against the pandemic. In fact, UNICEF remains convinced that until an effective remedy is found, education is one of the most effective tools for curbing HIV and AIDS.

A nationwide survey of 2,057 respondents in Afghanistan was carried out aimed at investigating their level of HIV and AIDS knowledge/awareness (Mooley, 2008). The results showed 60% of them were not that well informed about HIV and AIDS. 40% that did well in their response to the survey, education and access to media played a significant role in heightening their HIV and AIDS knowledge and awareness. The level of education for the participants contributed immensely to their knowledge and awareness of HIV and AIDS. Moreover, education served as a bridge for gender divide, as the gap was increasingly narrowed between men and women, leading women who had a high level of education being as good as men with comparable education (Reza-Paul *et al*., 2008).

Mondal *et al*., (2012) assessed ever married women's knowledge and awareness regarding HIV and AIDS and some of the factors associated with such knowledge in terms of both control and prevention. The sample consisted of 10,996 women whose age ranged between 15 to 49 years. The results showed that, among other factors, participants' education and that of their husbands had statistically significant correlation with their level of HIV and AIDS knowledge/awareness. In a related investigation, (Walque, 2007) studied the effect of education campaign on

knowledgeability about HIV and AIDS over a period of 12 years in Uganda. This was followed by what the author refers to as "substantial revolution" in the HIV education. The campaign resulted in less and less women contracting HIV and AIDS in the rural areas, which were the focus of the study.

School children are referred to as the "window of Hope'' (Mwamwenda *et al*., 2014). They are referred so because school-age children are known as HIV and AIDS free generation between the ages of 5-14 years. This holds true even in countries where HIV and AIDS has hit the hardest.

In terms of use of condom, it was correlated to the level of schooling participants had attained (Walque, 2007).

In comparison between age/education and knowledge, attitudes and practices, statistically significant correlations were observed (Sann *et al.,* 2010). Those who were older and had higher level of education in terms of grades scored at the highest level of HIV and AIDS knowledge, respondents whose parents had higher education attainment ranked highest in their knowledge of HIV and AIDS.

In Kenya, knowledge and awareness of HIV and AIDS is virtually universal (above 99 percent among both women and men). However, only 56 percent of women and 66 percent of men have comprehensive knowledge about HIV and AIDS prevention and transmission (KDHS, 2016).

From a rational perspective, the most effective way of coping with the HIV and AIDS pandemic is to change sexual behavior (KAIS, 2014). In this respect prevention is prime key to combat the spread of HIV and AIDS. Here multilayered social, political and economic efforts are needed to reduce the HIV risks (Reddy *et al.,* 2011). Influence in attitudes, knowledge and behaviors are important. This involves sexual-health education, promotion of condom use, and also to avoid possible sources of contamination such as infected hypodermic syringes or implements used in

ritual scarification (KDHS, 2014). In order to do this, it is necessary to have an accurate explanation of how the pandemic is transmitted. Information has to be translated into knowledge and then into action (Jukes *et al.,* 2009).

The World Bank refers to education as the "social vaccine" against HIV and AIDS. Research has shown that, for girls remaining in school and completing their basic education, their chances of being HIV and AIDS positive is reduced by 50% (Williams, 2010)

2.4 History of Online Dating

In time and space, the idea of 'dating' has revolutionarily changed in modern societies in terms of its action a great deal (Abiodun *et al*., 2014). Dating was initially considered to be a series of harmonious meetings that culminated into either marriage proposals between individuals or families striking amicable marriage arrangements between their children (Moodley *et al*., 2011). In all these undertakings, the process used to take a short period of time before the deal is realized. Over the years, this situation has ever changed and dating is becoming a negotiation process that is taking too long to realize its intended purpose, and even in certain circumstances, losing it. This is partly contributed by the invention of online dating; an electronic tool that has replaced the traditional, face-to-face meeting dates (Kerr *et al*., 2011).

As generations revolutionize, so does the framework design of dating to find a suitable partner for a short period of time and/or lifetime. Initially, people subtly connected, communicated and negotiated for friendship, love, sex and luck through printed magazines, books, monographs, articles and national and international newspapers worldwide (Spasojevic *et al.,* 2010). This situation has ever changed too in the digital era when Internet dating service was born and became the main tool to find friendship, love, sex and luck. In fact, online dating has become the second most popular opportunity of meeting amongst couples other than through friends (Spasojevic *et al.,* 2010).

2.5 Trend in the use of media for dating and seeking sexual partners

The trend of online dating is steadily growing and each day, it is becoming normal as people find friendship, love, sex and luck. The successful experiences have inspired many others to try their rare and risk-finding mission of luck based on trial and error method of looking for friendship, love and sex (Mkumbo, 2013).

One in ten Americans have used an online dating site or mobile dating application themselves (Slater, 2013). General public attitudes towards online dating have become much more positive in recent years, and social networking sites are now playing a prominent role when it comes to navigating and documenting romantic relationships (Smith and Anderson, 2016). Online dating is most common among Americans in their mid 20's through mid40's (Moodley *et al*., 2011). Some 22% of 25-34 year olds and 17% of 35-44 year olds are online daters. Online dating is also relatively popular among the college-educated, as well as among urban and suburban residents (Williams, 2010). About 38% of Americans who are single and actively looking for a partner have used online dating at one point or another (Finkel *et al*., 2012).

Compared with years before, online daters in 2013 were more likely to actually go out on dates with the people they meet on these sites. Some 66% of online daters have gone on a date with someone they met through an online dating site or application, 23% say that they themselves have entered into a marriage or long-term relationship with someone they met through a dating site or application (Slater, 2013).

Research into whether online dating actually produces more successful relationships or romantic outcomes than conventional (offline) dating is generally inconclusive, although these sites clearly offer a qualitatively different experience compared with traditional dating (Arogundade *et al*., 2012). Some of these differences include: the ability to search from a deep pool of potential partners outside of one's existing social networks; the ability to communicate online or via email prior to arranging for a face-to-face interaction; and matching algorithms that allow users to filter potential partners based on pre-existing criteria. Other research has indicated that the efficiency of online dating and the size of the potential dating pool compared with traditional methods make the process especially useful for people (such as gays and lesbians, or middle aged

heterosexuals) who may have limited options for meeting people within their immediate geographic area or social circle (Smith and Anderson,2016).

2. 6 Differences between Traditional and Media Dating

2.6.1 Choice of Dating Partners

Traditional dating limits choice to circle of friends; people meet by chance during daily life. While there are always many potential candidates around odds for dating partners remain fewer than when using a matchmaking agency (Smith *et al.,* 2013). Online agencies have brought a whole new life to dating: right after registration one gets access to thousands of profiles, from which a selection is made without stress and awkward conversations in the street (Slater, 2013).

2.6.2 Time and Expenses involved in Dating

Traditional dating implies meeting a partner in person (eating out, walking.). And this can be very time-consuming, especially in a short of time. At first it may seem that dating agencies are a bit pricey. But in fact, they are much cheaper compared to the traditional dating (restaurants, cinema, theatre, flowers, gifts, taxi). It's obvious that online dating is less expensive and helps save precious time (Slater, 2013).

2.6.3 Misrepresentation and Safety involved in Dating

There are safety concerns with both online and traditional dating. However, traditional dating is considered to be safer. This type of dating helps one to the potential match 'live' without the Photoshop effects. Online dating wins when it comes to conversations. When communicating via the internet people are less shy and sincerer (Finkel *et al*., 2012).

CHAPTER THREE

3.0 RESEARCH METHODOLOGY

3.1. Nature of the Survey Study, Considerations made and the Choice of Study Method

This study survey was designed to use secondary data and not primary data due to the nature of the sensitivity of the study and henceforth the anticipated unreliability of the data were they to be obtained directly from the target human subjects. By considering the target areas of survey study, the choice of sexual partners and HIV and AIDS, which is associated with traumatic events, mental illness (depression, anxiety, and posttraumatic stress disorder), lack of trust in the healthcare system and government; and experiences of stigma among individuals with HIV disease (Breet *et al*., 2014; Whetten *et al*., 2008) as sensitive issues in the society, an indirect method of survey using secondary information was innovatively and intelligently sought and adopted as the most appropriate and worthwhile. The soul mate information of advertisements published and made available for public use online and in the Saturday Magazine, Life and Styles, Soul mate column of Nation Media Group Limited by sexually active persons seeking sexual partners of all categories and levels were utilized as the main sources of information for the survey. The secondary information obtained was converted into secondary data sets for analysis. The following research questions existed and formed the basis of the research study.

1 Given that HIV is currently known to be significantly transmitted by sexual contacts (Breet *et al*., 2014), is this particular sexually active cohort population taking any precautions and other relevant preventive measures against the pandemic as its members make corresponding choices of their sexual partners and as the world spends a lot of

monetary resources on perception, awareness, knowledge, attitude and practice (PAKAP) of control, prevention and management of HIV and AIDS?

2 What is the cohort population of sexually active persons seeking sexual partners doing in this era of HIV and AIDS pandemic albeit heavy investments in massive education campaigns on PAKAP of control, prevention and management of HIV and AIDS?

3 Do these pieces of information on advertisements indicate information on **PAKAP** of control, prevention and management of HIV and AIDS?

4 Have the heavy investments in education campaigns on **PAKAP** of control, prevention and management of HIV and AIDS made any impacts on sexually active cohort population looking for sexual partners?

Getting answers to these questions in the society is truly an uphill task and the answers to these questions are indeed complex and not just easily answered by normal direct surveys of human subjects involved. The current study innovatively sought answers to these questions, and by considering human behaviour and associated stigma of victims of HIV and AIDS, possible answers probably would not have been objectively obtained to help policy makers in this field were it not to design a survey study that targets to get information from the target human subjects indirectly. In this study therefore, a single advertisement of an individual represented a response equivalent to a response obtained from normal primary survey studies where a well structured questionnaire is made and administered, either randomly and/or to a few selected individuals depending on the nature of the survey study. In this particular study, a questionnaire was not administered as the required information was already available in the form of advertisements, which validly represented respondents.

The Soul mate information of advertisements published in Saturday magazine of Nation Media Group was considered valid, genuine, reliable, unbiased and truthful to the research questions for the following reasons1 Individuals involved were considered serious, henceforth the information given out so as to have it published in soul mate section as one pays KShs. 1,000 for any individual advertisement and KShs. 2,000 for any agency advertisement at the advertising centre of Nation Media Group Limited. The monetary value associated with the advertisements further explained the seriousness of the person and the authenticity of information, hence worthwhile human subjects of the survey study, 2. Individuals involved were not forced in any ways neither under any external influence and pressure of any kinds whatsoever other than their own personal drive and inner influence to carefully draft an advert with certain specifications and attributes of a partner being sought, and

3 the confidentiality associated with the information in the advert and the security warnings, safety measures and precautions made by the Nation Media Group Limited, is a reflection of the determination of the individuals involved to get the really described sexual partners, hence the authenticity of the advertisement of the Soul mate information in the Saturday Magazine of Nation Media Group Limited (Nation Media Group, 2009).

3.2 Study Design

The data were collected for a period of one year and eight months. Every Saturday of the week a Daily Nation Newspaper was obtained and information advertised at Soul mate section of Life and Style Magazine. Every piece of information on one person advertisement was considered as one entry equivalent to a response from an interviewee in the field. The information on the advertisement was translated and transcribed where possible and fed into an excel spread sheet putting into consideration the interviewee's description and that of his/her intended spouse

and/or partner regarding: sex, age, height, colour, social life, ethnicity, education, economic status, marital status, societal status, social welfare status, health status, HIV and AIDS status, sexual orientation, geographical location, professionalism, moral values, religion, type of sexual relationship, sensitivity levels towards HIV and AIDS, fertility status, type of advert: through an individual or an agency and method of contacting the candidate spouse and/or partner. Data entered in MS Excel was then imported into a Statistical Products and Service Solutions (SPSS version 21 for Windows) database for analysis sheet. The information available in public domain therefore partly authentic, reliable, truthful and unbiased. Data obtained as key indicators was at the following three levels.

A. Identification of perception, awareness, knowledge, attitude and practice (PAKAP) from the information given out by clients of Nation Media Group Limited in particular and/or social companies/organizations to help look for partners, friends and/or spouses for the following types of sexual relationship: -

   i. Relationships built towards marriage,
   ii. Long term relationship with no strings attached to marriage,
   iii. Short-term relationship
   iv. Holiday partners/friends,
   v. Weekend partners/friends,
   vi. One day relationships,
   vii. Overnight partners/friends and
   viii. Lunch time sexual relationship

B. Identification of preventive, control and management measures practiced against HIV and AIDS scourge amongst men and women looking for partners and/or spouses in Kenya from

the information given out by clients of Nation Media Group Limited to help look for partners, and/or spouses will be constructed.

C. Identification of factors influencing the choices of partners and/or spouses in Kenya in the era of HIV and AIDS scourge from the information given out by clients of Nation Media Group Limited in particular will be constructed and/ etc to help look for partners, and/or spouses.

3.3. Sampling Technique

No normal random sampling was able to fit this particular survey study other than purposive sampling (judgmental, selective, or subjective sampling) because not every advertisement made had the relevant information needed in the survey study, that is, information addressing perception, awareness, knowledge, attitude and practice of control, prevention and management on HIV and AIDS as one seeks appropriate sexual partner(s). A purposive sample is a non-probability sample that is selected based on only quality characteristics under consideration of a target population and in line with the objective of the study. This type of sampling was very useful in this situation where a targeted sample was quickly reached and sampling for proportionality was not the main concern.

The type of purposive sampling therefore considered for this particular survey study was heterogeneous for its diverse nature in time and space. A diverse range of sexually active human subjects with relevant information addressing PAKAP of control, prevention and management of HIV and AIDS in their advertisements were considered so as to provide as much insight as possible into the survey study of assessing the impact education about HIV and AIDS on a sexually active cohort and construct a robust and useful view of on this issue.

3.4. Sample Size Determination

In a year, there are different seasons with different dating needs and demands, which keep on repeating, either within a year or in the following year. For instance, the current Kenyan education system provides for three major holidays (Republic of Kenya, 2010) in a year for a considerably large sexually active population and a time where promises and fulfilment of dating takes place. The implication of this therefore is that dating as a process peaks during these holidays and subsides during the end of the holidays. Nevertheless, the advertisements for online and media house dating takes place throughout the year with considerable fluctuations punctuated by these holidays (Whetten *et al*., 2008; Nation Media Group, 2009; Thottam, 2014; Breet *et al*., 2014).

In any one given Saturday Magazine of Nation Media Group Limited of any week, the number of advertisements made ranged from 12 to 20. Worth noting and considering was the fact that not every advertisement made in the Saturday Magazine as a response was useful and henceforth utilized in the survey study. Only those advertisements with the most relevant information to address perception, awareness, knowledge, attitude and practice of control, prevention and management of HIV and AIDS were considered worthwhile for incorporation in to the survey study. On average therefore, only 10 advertisements were considered per week so that this number of advertisements was to allow a long period of time to be considered for coverage with a view to collecting data, which must be sufficient to allow evaluation of trends of sexual behaviours if any in the use of social media for online dating with ultimate objective of obtaining information that can be useful to policy makers. It therefore followed with logical necessity that the research study covered one year with 52 weeks and different seasons that allowed dating and fulfillment of sexual promises in order to evaluate any trends of sexual behaviour amongst the

online and media partner and/or spouse seekers. To further understand these trends, data collection of the survey study extended into the following year, thus covering an extra 30 weeks, totaling to 82 weeks for the entire research period for data collection. The sample size therefore became 10 x 82 = 820 advertisements (respondents).

3.5 Data Management and Analysis

Data were entered in MS Excel spreadsheets and thereafter exported to SPSS statistical spread sheet for analysis. Descriptive statistics in form of tables and graphs were used to show the nature of the population under study and relationships between different variables. Inferential statistics involved data analysis using Pearson Chi-square and Fisher's exact tests. All analyses were done at $\alpha = 0.05$ significance level.

CHAPTER FOUR

4.0 RESULTS

4.1 Profiles of the respondents

Among the 820 sexually active respondents (equivalent to the owners of the advertisements made in Saturday Magazine of Nation Media Group Limited) were heterogeneously selected comprising 53% (434 respondents) females and 47% (386 respondents) males (Table 4.1). Further, the Table 4.1 provides detailed information on the nature of the respondents regarding their age, economic status, level of education, marital status, child factor in one's life and finally, the type of relationship sought. Most of the respondents were unmarried non-graduates within the age brackets of 36-45 with unstable economy, henceforth, looking forward to develop a relationship that can lead to marriage.

Table 4.1: A description of the profiles of the respondents from advertisements made by National Media Group Limited during the study period (N = 820).

Description of the categories of respondents		Number of respondents	Respondents (%)
Gender			
A	Male	386	47
B	Female	434	53
Age			
A	18-25	61	7.2
B	26-35	295	36.2
C	36-45	314	38.5
D	46-55	141	17.2
E	56-65	9	0.9
Economic status			
A	Stable	267	32.3
B	Unstable	553	67.7
Level of education			
A	Post graduate	86	10.3
B	Graduate	230	28.0
C	Non-graduate	503	61.7
Marital status			
A	Single	527	74.2
B	Widowed	125	17.3
C	Divorced	64	8.5
Child factor in life			
A	Without children	366	54.3
B	With or without children	153	22.7
C	With children	155	23.0
Type of relationship sought			
A	Marriage	572	77.3
B	Friendship	98	13.2
C	Companion	70	9.5

4.2 The Level of Awareness, Knowledge, Attitude and Practice of Prevention, Control and Management of HIV and AIDS amongst the Media/Online Seekers of Sexual Partners and Spouses in Kenya

4.2.1 Awareness of HIV and AIDS Pandemic

There was significant difference between the respondents who showed awareness of HIV and AIDS pandemic and respondents who did not amongst the media/online seekers of sexual partners and spouses in Kenya ($\chi^2 = 22.168$; df = 1; $p < 0.05$). Among the total respondents, 58.3% (472 respondents) were aware of HIV and AIDS pandemic, while 41.7% (338 respondents) were not aware of HIV and AIDS pandemic. Awareness of HIV and AIDS was significant by level of education and economic status ($p < 0.05$) and not by gender, age, marital status, possession of children and type of relationship sought ($p > 0.05$).

4.2.1.1 Awareness of HIV and AIDS by level of education

The level of education showed significant difference in HIV and AIDS awareness among the respondents seeking partner ($\chi^2 = 73.372$; df = 2; $p = 0.00$). Figure 4.3 shows the proportions of respondents aware and those not aware by level of education

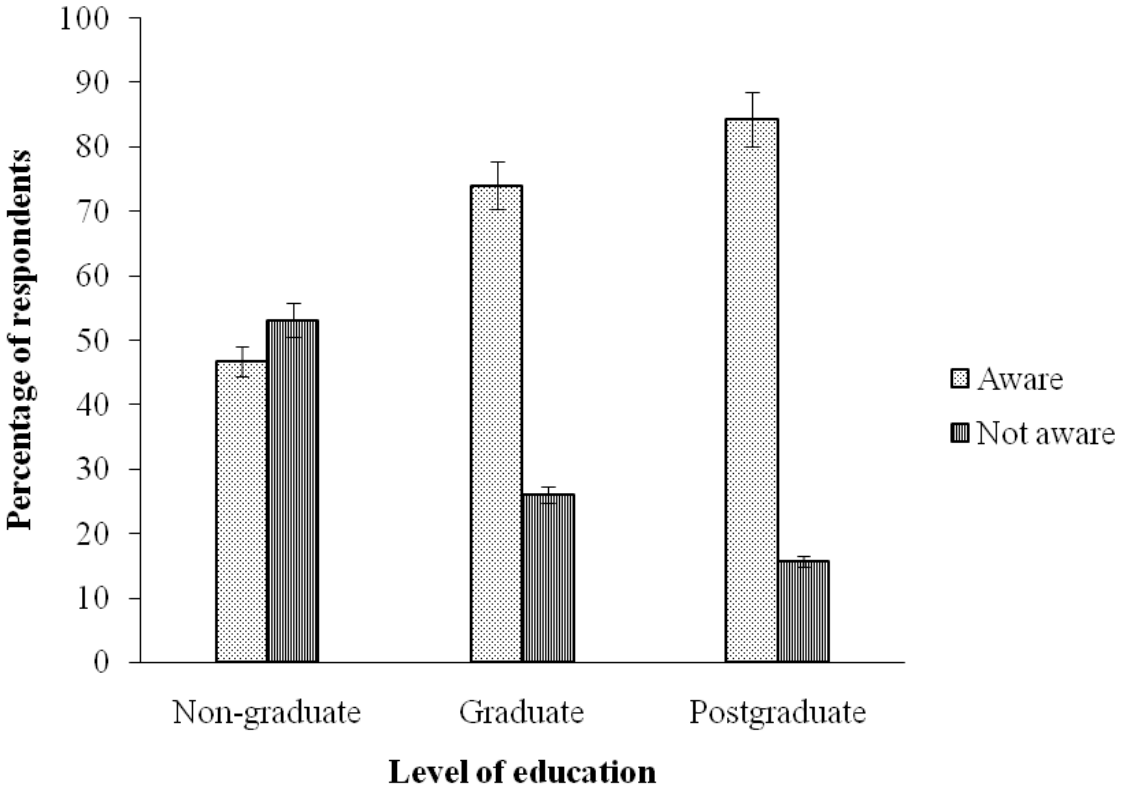

Figure 4.1 Awareness of HIV and AIDS by level of education amongst respondents seeking media/online partners

4.2.1.2 Awareness of HIV and AIDS by Economic status

The economic status of the respondents seeking partner demonstrated significant difference in HIV and AIDS awareness. (χ^2 = 4.122; df = 1; p = 0.04). Among the respondents who showed HIV and AIDS awareness, 35.2 % were economically stable, while 64.8% were economically unstable. Figure 4.4 displays the proportions of respondents aware and those not aware by economic status.

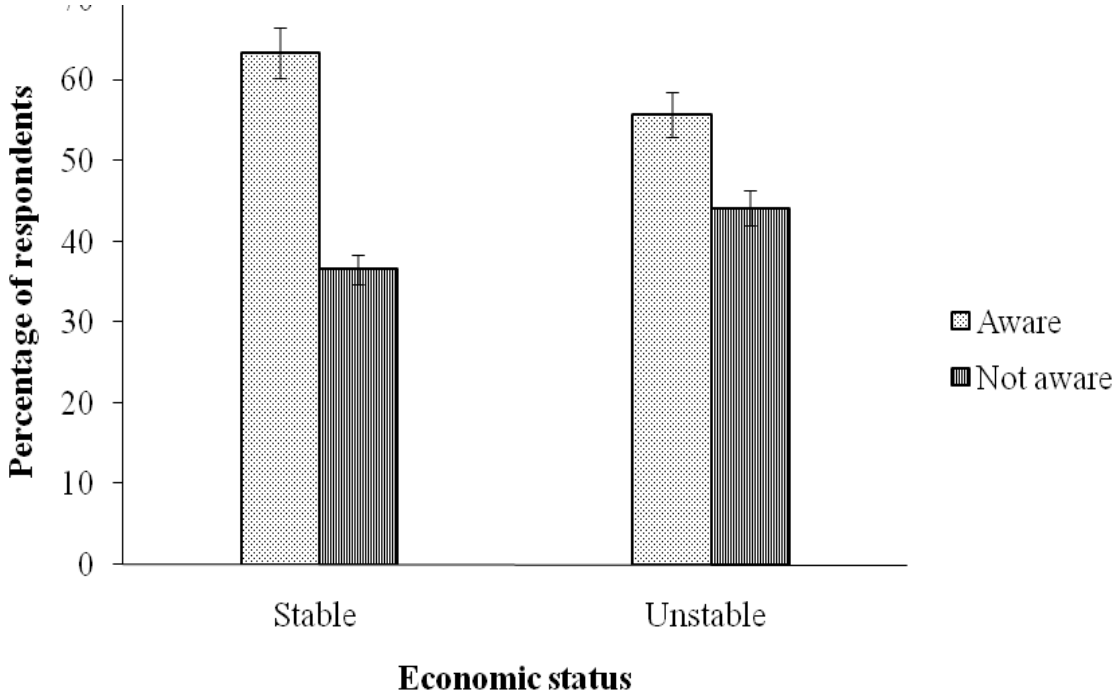

Figure 4.2 Awareness of HIV and AIDS by Economic status amongst respondents seeking media/online partners

4.3.1 Knowledge of HIV and AIDS

The respondents who had HIV and AIDS knowledge and those who did not have HIV and AIDS knowledge were significantly different when seeking a partner ($\chi^2 = 9.131$; df =1; $p = 0.00$). The respondents who had HIV and AIDS knowledge were at 55.3% (448 respondents), while 44.7% (362 respondents) of the respondents lacked HIV and AIDS knowledge. Knowledge of HIV and AIDS was significant by level of education, economic status and not by gender, age, marital status, possession of children and by type of relationship sought.

4.3.1.1 Knowledge of HIV and AIDS by Level of Education

The level of education showed significant association in terms of HIV and AIDS knowledge among the respondents seeking a partner (χ^2 = 41.069; df = 2; p = 0.00). Among the respondents who had HIV and AIDS knowledge, 54.2% were non-graduate, 29.9% graduate and 15.8% postgraduate. Figure 4.3 shows the proportions of respondents with knowledge and without knowledge by the level of education.

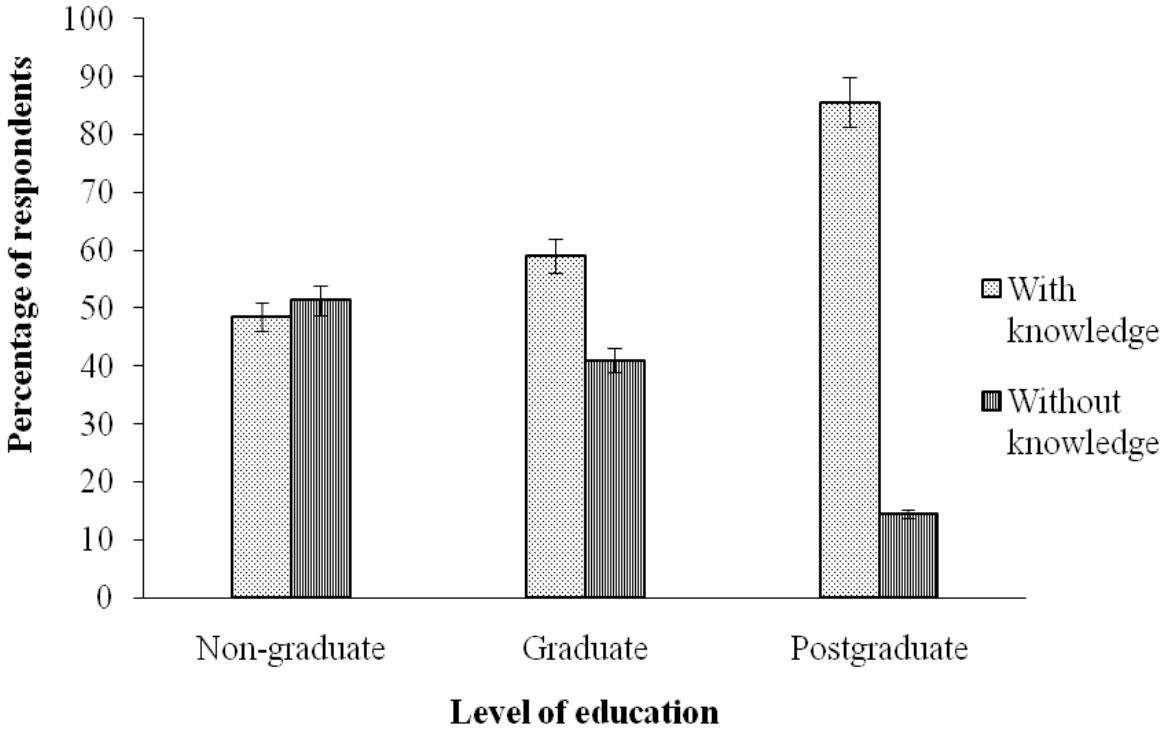

Figure 4.3 Knowledge of HIV and AIDS by level of education amongst respondents seeking media/online partners

4.3.1.2 Knowledge of HIV and AIDS by Economic Status

The economic status of the respondents exhibited significant difference in terms of HIV and AIDS knowledge among the respondents looking for a partner (χ^2 =3.912; df =1; p = 0.04). Among all respondents who had knowledge about HIV and AIDS, 35.3% were economically

stable while 64.7% were economically unstable. Figure 4.4 displays the proportions of respondents with knowledge and without knowledge by economic status

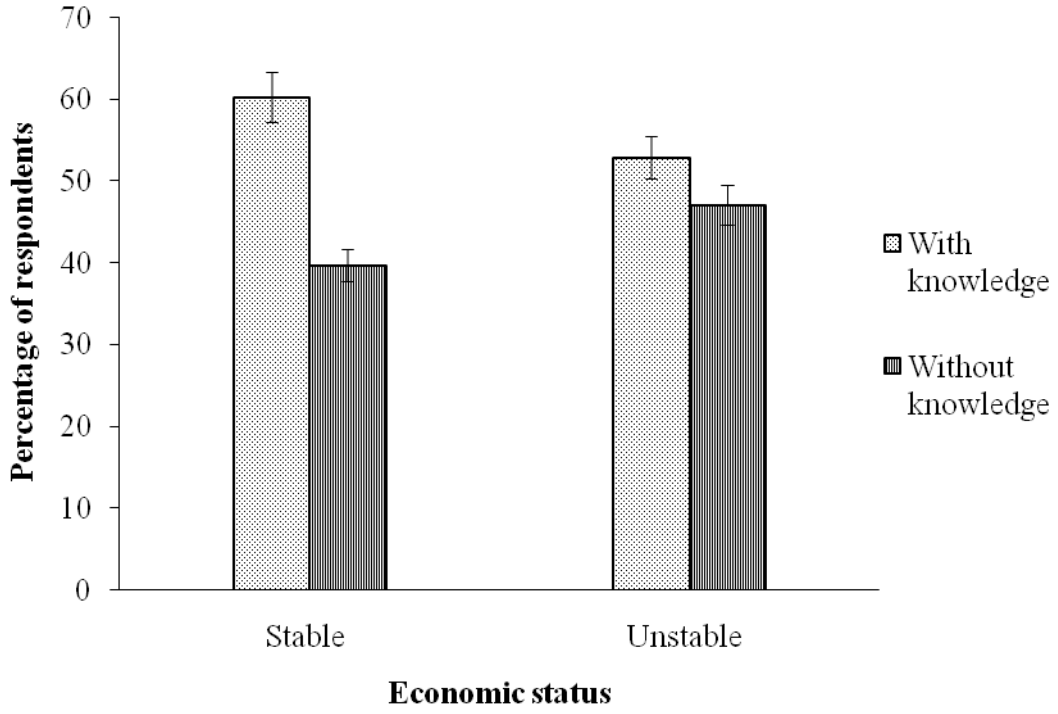

Figure 4.4 Knowledge of HIV and AIDS by Economic status amongst respondents seeking partners in Kenya

4.4.1 Attitude towards HIV and AIDS

There was significant difference among the respondents who had a positive attitude and respondents who had a negative attitude towards HIV and AIDS when seeking for a partner (χ^2= 17.190; df = 1; p = 0.00). The majority of the respondents had positive attitude towards HIV and AIDS at 57.3%, while 42.7% of the respondents had negative attitude towards HIV and AIDS. Attitude towards HIV and AIDS was significant by level of education and not by gender, age, economic status, marital status, possession of children and type of relationship sought.

4.4.1.1 Attitude towards HIV and AIDS by level of education

The level of education exhibited significant difference in attitude towards HIV and AIDS among the respondents seeking partner ($\chi^2 = 32.204$; df = 2; p = 0.00). Among the respondents who had positive attitude towards HIV and AIDS, 54.1% were non-graduate, 31.7% graduate and 14.2% postgraduate. Figure 4.5 displays the proportions of respondents with positive attitude and those with negative attitude by level of education.

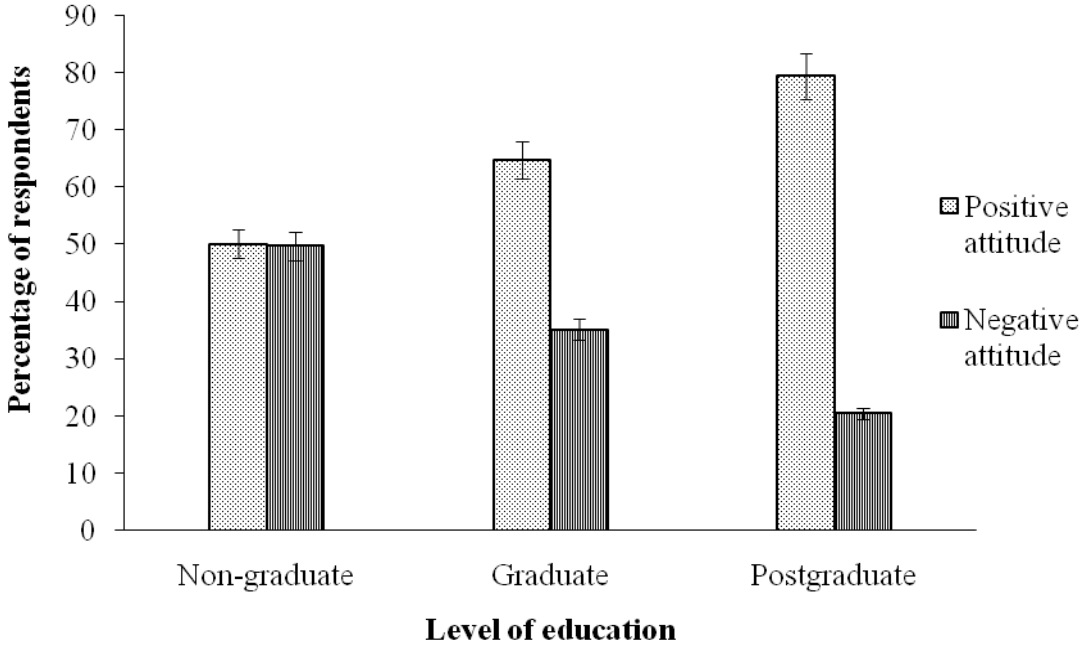

Figure 4.5 Attitude towards HIV and AIDS by level of education amongst respondents seeking partners.

4.5.1 Practice of Prevention, Control and Management of HIV and AIDS

The respondents who practiced and who did not practice prevention, control and management measures against HIV and AIDS were significantly different when looking for a partner ($\chi^2 = 50.375$; df = 1; p = 0.00). Many of the respondents practiced prevention, control and management against HIV and AIDS at 62.5%, while 37.5% of the respondents did not practice prevention, control and management measures toward HIV and AIDS. Practice prevention,

control and management measures exhibited significant difference by gender and not significantly different by age, level of education, economic status, marital status, possession of children and type of relationship sought.

4.5.1.1 Practice of Prevention, Control and Management of HIV and AIDS by Gender amongst Respondents Seeking Partners for Sexual Relationships in Kenya

There was significant difference in practice of prevention, control and management against HIV and AIDS by gender among the respondents who were looking for partners ($\chi^2 = 6.114$; df = 1; p = 0.01). Among the respondents who practiced prevention, control and management measures against HIV and AIDS, 43.7% were male, while 56.3% were female. Figure 4.6 displays the proportions of respondents with positive attitude and those with negative attitude by gender.

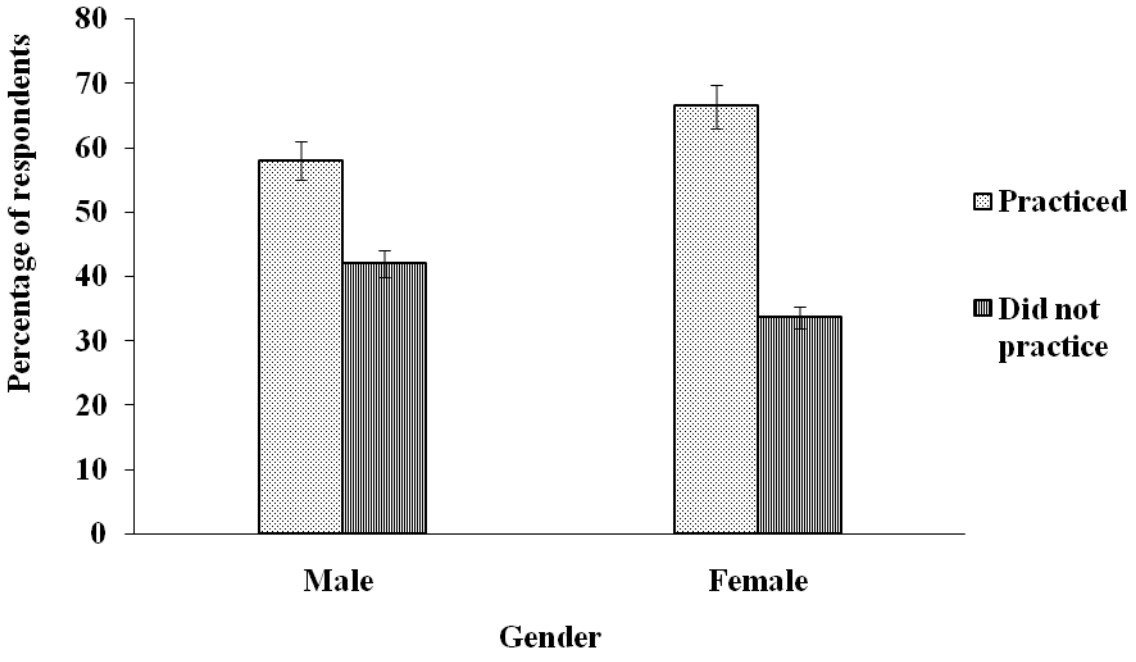

Figure 4.6 Practice of prevention, control and management of HIV and AIDS by gender amongst respondents seeking partners for sexual relationships in Kenya.

4.6 Preventive, Control and Management Measures Practiced against HIV and AIDS among Men and Women looking for Partners for Sexual Relationships in Kenya

Among 820 respondent, 53% (434 respondents) were female, while 47% (386 respondents) were male who at individual level and for their own reasons, practiced preventive, control and management measures against HIV and AIDS during the time of seeking partners for sexual relationships in Kenya.

4.6.1 Test of HIV Status

Test of HIV status was used as main preventive measure and was significant by level of education, economic status and marital status and not by gender, age, possession of children and the type of relationship sought. Respondents were willing to carry out HIV status test when seeking partners for sexual relationship (χ^2 = 120.178; df =1; P = 0.00). The majority of the respondents were willing to carry out HIV status test at 69.3% (561 respondents), while 30.7% (249 respondents) of the respondents were not interested in carrying out HIV status test.

4.6.1.1. Test of HIV Status by Level of Education

The level of education showed significance difference in terms of HIV status test among the respondents seeking for sexual relationship (χ^2 = 11.386; df = 2; P = 0.00). Figure 4.7 shows the proportions of respondents willing to have HIV status test and those not willing by the level of education.

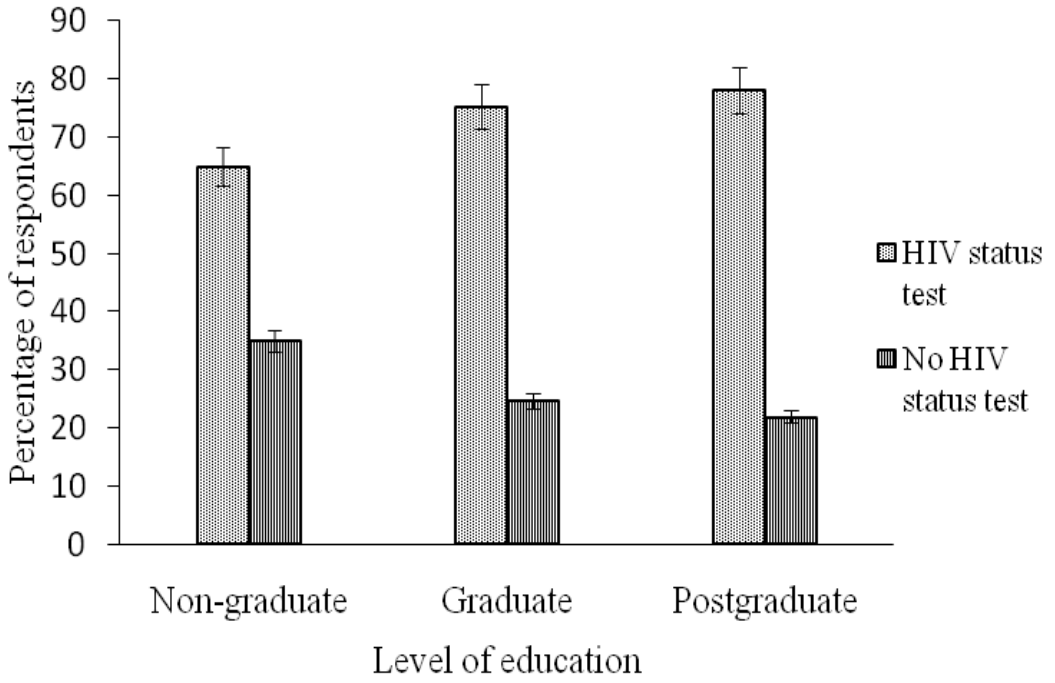

Figure 4.7 Test of HIV status by level of education amongst respondents seeking partners for sexual relationships in Kenya.

4.6.1.2 Test of HIV Status by Economic Status

The economic status of the respondents seeking for sexual relationship demonstrated significant difference in HIV status test ($\chi^2 = 4.167$; df = 1; P = 0.04). Figure 4.8 shows the proportions of respondents willing to have HIV status test and those not willing by economic status.

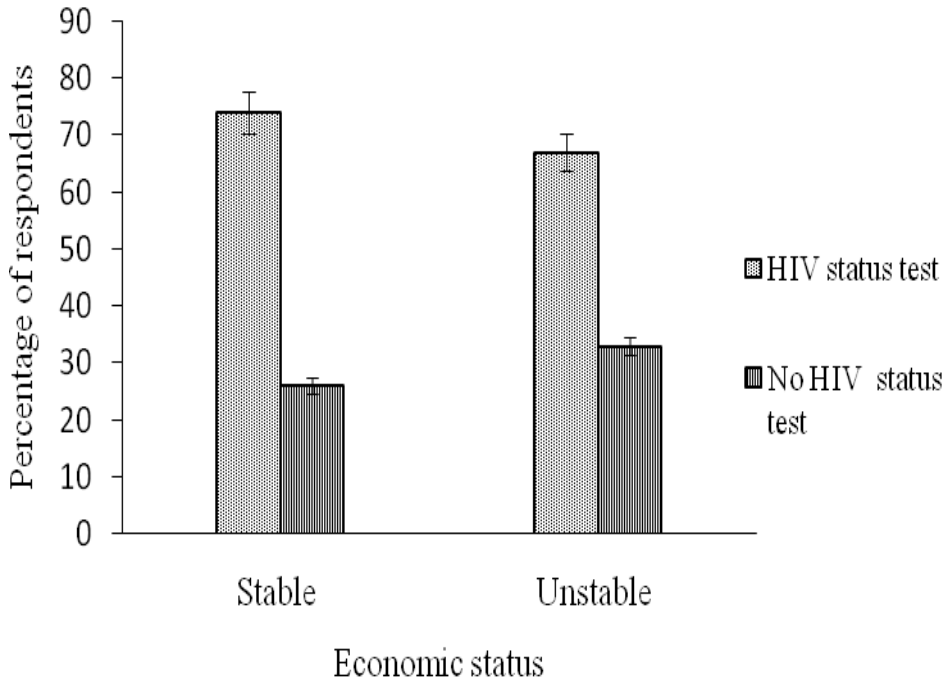

Figure 4.8 Test of HIV status by economic level amongst respondents seeking partners for sexual relationships in Kenya.

4.6.1.3 Test of HIV Status by Marital Status

The marital status of the respondents revealed significant difference in terms of HIV status test when seeking partners for sexual relationship (χ^2 = 6.362; df = 2; P = 0.04). Figure 4.9 displays the proportions of respondents willing to have HIV status test and those not willing by marital status.

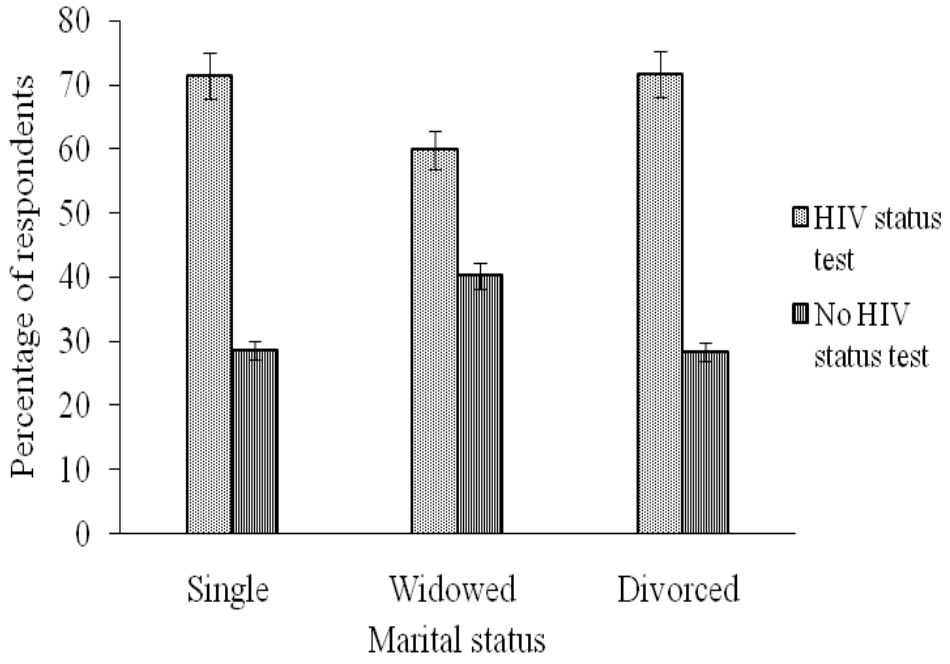

Figure 4.9 Test of HIV status by marital status amongst respondents seeking partners for sexual relationships in Kenya

4.6.2 Similar HIV Status

The respondents seeking a partner of similar HIV status demonstrated significant difference when seeking partners for sexual relationship (χ^2 = 341.575; df = 1; P = 0.26). The majority of the respondents were looking for partners of similar HIV status at 82.5%, while 17.5% were not interested in partners of similar HIV status.

4.6.3 Number of Partners sought

Number of partners sought was used as a management measure and was significant by gender, age and not by level of education, economic status, marital status, possession of children and the type of and relationship sought. The majority of the respondents were looking for one partner at 98.6% (799 respondents), while 1.4% (11 respondents) were seeking more than one partner when seeking partner for sexual relationship (χ^2 = 766.598; df = 1; P < 0.05).

4.6.3.1 Number of Partners Sought by Gender

The gender of the respondents revealed significant difference in terms of number of partners sought for sexual relationship ($\chi^2 = 12.556$; df =1; $P < 0.05$). Among the respondents looking for one partner, 46.3% were male, while 53.7% were female. All the respondents who were seeking for more than one partner were male. Figure 4.10 displays the proportions of respondents looking for one partner and those looking for more than one partner by gender.

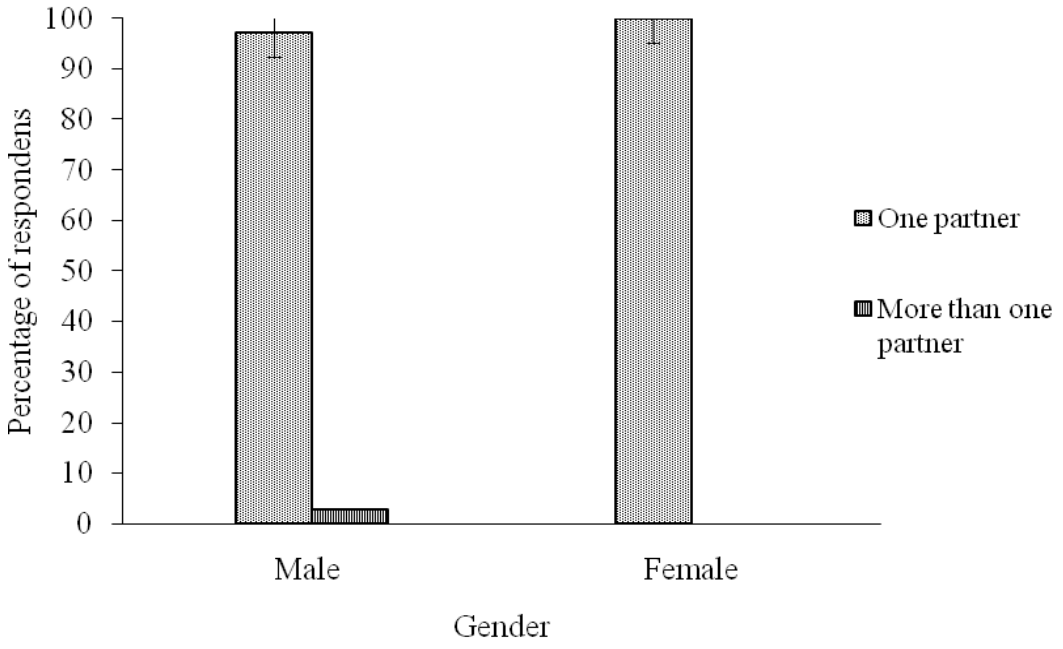

Figure 4.10 Number of partner sought by gender amongst respondents seeking partners for sexual relationship in Kenya.

4.6.3.2 Number of Partners Sought by Age

The age of the respondents exhibited significant difference in terms of the number of partners sought for sexual relationship ($\chi^2 = 13.491$; df = 4; $P = 0.01$). Of the respondents seeking one partner, 38.8% were between 36 to 45 years old. Among the respondents seeking more than one partner, 63.6% were between 26 to 35 years old. Figure 4.11 shows the proportions of respondents looking for one partner and those looking for more than one partner by Age.

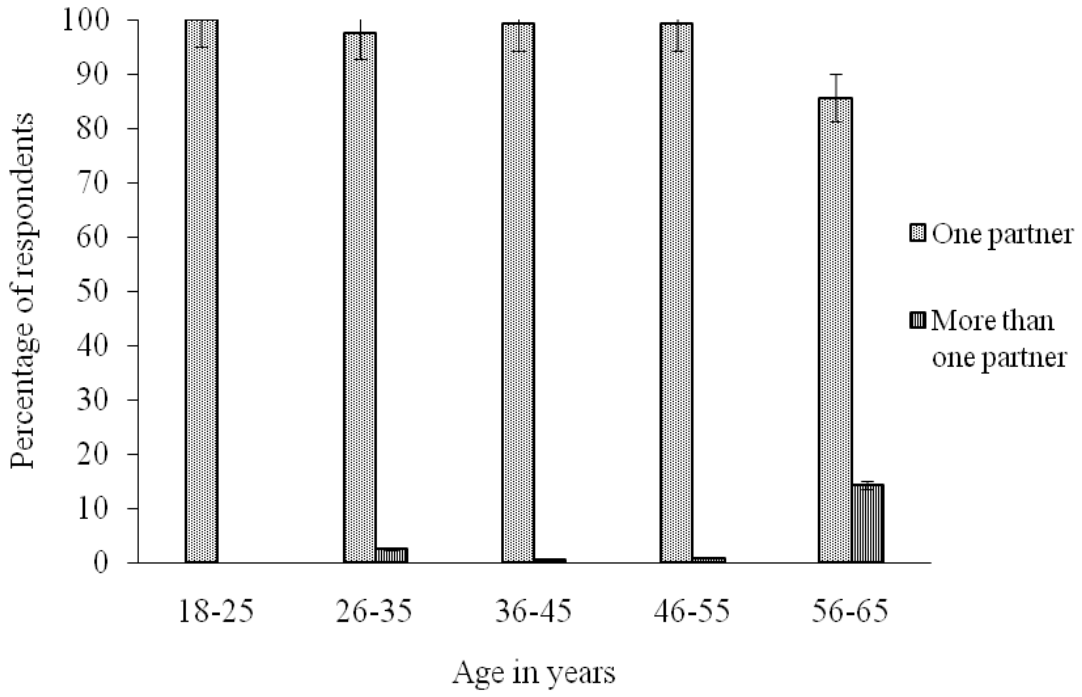

Figure 4.11 Number of partner sought by Age amongst respondents seeking partners for sexual relationships in Kenya.

4.7 Factors Influencing Choice of a Partner in Kenya in the Era of HIV and AIDS

4.7.1. HIV and AIDS Status

There was significant difference in the respondents who were willing to carry out HIV and AIDS test when seeking partner and respondents who were not interested to be tested ($\chi^2 = 161.78$; df = 1; p = 0.00). The majority of the respondents were looking for partners who were willing to carry out HIV and AIDS test at 72.3%. Among the respondents willing to go for partners who took HIV and AIDS test, 44.9% were male, while 55.1% were female. Of respondents who were not interested in HIV and AIDS test, 52.7% were male, while 47.3% were female. Among the male respondents, 65.7% were willing to know their partners HIV and AIDS status, while 34.3% were not interested. Of the female respondents, 75.3% were willing to have HIV and AIDS test, while 24.7% were not interested in HIV and AIDS test. There was significant difference (χ^2 =3.956; df

= 1; p = 0.05) among the men and women willing to have a HIV and AIDS test and those who were not interested in HIV and AIDS test.

4.7.2 Level of Education

There was significant different between the respondents looking for non-graduate, graduate and postgraduate partners (χ^2 = 215.314; df = 2; p < 0.05). The respondents who were looking for non-graduate partners were the majority with 65.7%, followed by graduate at 26.5% and postgraduate at 7.8%. Among the male respondents, 73.8% were looking for non-graduate partners, 21.4% were looking for graduate partners and 4.8% were looking for postgraduate partners. Among the female respondents, 58.9% were looking for none-graduate partners, followed by graduate partners at 30.8%, while 10.3% were looking for postgraduate partners. Among the respondents who were looking for non-graduate partners, 51.1% were male respondents, while 48.9% were female. In addition, among the respondents who were looking for graduate partners, 63.3% were female, while 36.7% were male. Of those looking for postgraduate partners 71.9% were female, while 28.1% male. There was significant difference between men and women looking for non-graduate, graduate or postgraduate partners (χ^2 = 10.704; df = 1; p < 0.05).

4.7.3 Economic Status

There was significant difference between respondents who were looking for an economically stable and unstable partners partner (χ^2 = 49.754; df = 1; p < 0.05). The respondents who were looking for the economically stable partners were at 67.4%, while 32.6% of the respondents were looking for the economically unstable partners. The female respondents looking for an economically unstable partner were at 73.3%, while the male respondents looking for the economically stable partner constituted 26.7%. Among all the female respondents, 62.5% were

looking for an economically stable partner, while 37.5% were looking for economically unstable partners. Of the respondents looking for an economically stable partner, 37.5% were male, while 62.7% were female. Among the respondents who were looking for economically unstable partner, 49.5% were female, while 50.5% were male. There was significant difference between men and woman looking for an economically stable partner ($\chi^2 = 5.359$; df = 1; p = 0.02).

4.7.4 Marital Status

There was significant difference between respondents who were looking for a single or a divorced/widowed partner ($\chi^2 = 88.020$; df = 1; $p < 0.05$). The majority of respondents were looking for a single partner at 82.8%, while 17.2% were looking for either a divorced or widowed partner. Among the male respondents, 97.6% were looking for single partners, while 2.4% were looking for either divorced or widowed partner. The female respondents were looking for a single partner at 72.3%, while 27.7% were looking for either divorced or widowed partner. Of the respondents looking for a single partner, 49.1% were male, while 50.9% were female. Among the respondents looking for a divorced or widowed partner, 94.3% were female, while 5.7% were male. There was significant difference in respondents who were looking for single partner and those looking for divorced/widowed partner in Kenya ($\chi^2 = 22.358$; df = 1; $p < 0.05$)

4.7.5 Possession of Children

There was significant difference between respondents looking for partners with or without children ($\chi^2 = 114.427$; df = 2; $p < 0.05$). The majority of the respondents (62.5%) were looking for partners without children, 27.3% with or without children, while 10.2% were looking for partners with children. Of the male respondents, 62.9% were looking for partner without children, 26.6% without or with children and 10.5% with children. Among the female respondents, 62.2% were looking partners without children, 28% with or without children and

partners with children at 9.8%. Among the respondents looking for partners without children, 53.3% were female, while 46.7% were male. Of the respondents looking for partners with or without children 54.8% were female, while 45.2% were male. Of the respondents looking for a partner with children, 51.9% were female, while 48.1% were male. There was no significant difference between men and women looking for partners with children, without children and with or without children (χ^2 =0.003; df = 1; p = 0.96)

4.7.6 Type of Relationship Sought

There was significant difference between the respondents looking for different types of relationships (χ^2 =49.754; df = 1; p < 0.05). The majority of the respondents at 91.5% were looking for partners to marry, followed by partners for companion at 5.0% and partners for long-term friendship at 3.5%. Of the male respondents, 91.8% were looking for a partner to marry, followed by partners for friendship at 4.4% and finally partners for companion at 3.8%. Of the female respondents, 91.3% were looking for partners to marry, followed by partners for companion at 6.0% and finally partners for friendship at 2.7%. Of those seeking for partners to marry, 53.7% were female, while 46.3% were male. Among the respondents looking for partners for long-term friendship, 58.3% were male, while 41.7% were female. Of the respondents looking for companion partner, 53.8% were female, while 46.2% were male. There was no significant difference in terms of the type of relationship between men and women who were looking for partner in the era of HIV and AIDS (χ^2 = 0.960; df = 1; p = 0.84).

CHAPTER FIVE

5.0 DISCUSSION

To achieve the objective of the study, the target cohort population comprised only sexually active persons determined to get the desired partners for sexual satisfaction in a non-threatening environment (Enock, 2016; Eugene *et al.,* 2014; Amos, 2013; Jacqueline *et al*., 2011; Caroline and Pamela, 2009; Irungu *et al*., 2008). More female (53%) than male (47%) respondents with ages ranging from 18 to 65 were willingly involved in intended engagement into various types of sexual relationships and behaviours, a situation that causes great concern in the society in the era of HIV and AIDS pandemic (Craven and Stewart, 2012; Alemayehu *et al.,* 2010; Muula, 2008). Most respondents were economically unstable (67.7%), none-graduates (61.7%), single (74.2%), without children (54.3%), and hence, sought a type of relationship that would eventually lead to marriage. There is, therefore, an implication that a wide range of complex and mostly, human-based behavioral factors might be involved in determining the epidemiology, incidence and prevalence of the HIV and AIDS pandemic (Lou *et al.,* 2014). Nevertheless, the severity of HIV and AIDS epidemic may be more pronounced in less-developed countries, where lower socioeconomic status might be well positioned in the society to determine the impact of the HIV and AIDS epidemic on the target population (Lou *et al.,* 2014; Mertens *et al.,* 1996).

The findings of the current study indicate that there is a significant level of HIV and AIDS awareness, knowledge, attitude and practices amongst men and women looking for partners and/or spouses in Kenya. Generally, most of the respondents (58.3%) were aware of HIV and AIDS while looking for partners and/or spouses of any assessed of the levels. This could be due to the current global mass campaign against HIV and AIDS amongst the sexually active

generation seeking partners to establish the desired relationships (Mwamwenda *at el.*, 2014). In Kenya, the mass campaign has been reinforced by the introduction of HIV and AIDS curriculum in Secondary schools, tertiary colleges and institutions of higher learning (from Ministry of Education, Ministry of Health and UNESCO on HIV and AIDS integrated curriculum development). HIV and AIDS integrated curriculum has addressed the psycho-social impacts associated with the disease such as stigma, fear, depression and shame and has educated communities so that they can accept and understand particularly the rights of those affected by HIV and AIDS (UNICEF, 2013). The efficiency and effectiveness of HIV and AIDS curriculum implementation programme that has contributed to the change of behavior amongst the youth delay their initiation into sexual activity and impart skills for self-protection from vulnerability to sex and HIV and AIDS infection (Cluver *et al.*, 2016).

The number of both male and female respondents was not significantly different in terms of HIV and AIDS awareness. The respondents with higher level of education showed significantly better awareness of HIV and AIDS than the respondents with low level of education. The respondents with post graduate education level were most highly aware of HIV and AIDS while looking for sexual partners, followed by graduate respondents and finally the non-graduate respondents in that order. Similar findings have been reported by Baker *et al*. (2011), which showed that respondents with higher level of education were better aware of HIV and AIDS than respondents with low level of education in sub-Saharan Africa. Durojaiye *et al.* (2014) also demonstrated that respondents of graduate level of education were more informed and aware of HIV and AIDS than respondents from secondary and primary schools in Kenya.

The majority of the respondents had significantly sufficient knowledge about HIV and AIDS while seeking sexual partners. There was significant association between higher level of education and good knowledge of HIV and AIDS in respondents looking for sexual partners. Majority of the postgraduate respondents had good knowledge of HIV and AIDS followed by graduate respondents and finally non-graduate respondents. Studies carried out in Botswana and Kenya similarly showed that students with higher level of education had better knowledge of HIV and AIDS than those with low level of education (Fako *et al*., 2010; Durojaiye *et al*., 2014). Similar study findings may have informed the World Bank and World Food Programme support for the supreme importance of education in the control and management of HIV and AIDS (Mupa *et al*., 2014).

A significantly high number of the respondents had positive attitude towards HIV and AIDS pandemic while seeking sexual partners in Kenya. Positive attitude was indicated by willingness to have a HIV test, and one sexual partner. HIV and AIDS attitudes and practices together with knowledge influences decision and choice making hence reducing the risk of infection, re-infection and transmission of HIV (Kasili *et al.,* 2016). Responses indicative of positive attitudes, practices and perception from spouse seekers were significant in a number of questions: whether a partner had undergone a HIV test, having one sexual partner and whether it was a good idea looking for a partner with similar HIV status. The differences were associated with having received formal HIV and AIDS education (Kasili *et al*, 2016). The current study findings were consistent with an Indian report which showed that senior secondary school children had better attitudes towards HIV and AIDS in Delhi (Lap *et al*., 2008). Al-Rabeei *et al*. (2012) also reported that majority of students in health institutes in Sana'a city had positive attitudes towards HIV and AIDS. However, gender of respondents showed no significant

different were in terms of attitude towards HIV and AIDS when looking for a sexual partner. The results of this study showed that as the level of education increases, the negative attitude towards the HIV and AIDS pandemic amongst those seeking sexual partners decreases. The respondents with postgraduate level of education significantly showed better positive attitude towards HIV and AIDS pandemic than those with graduate and non-graduate level of education amongst those seeking sexual partners. Gayle *et al*. (2012) also reported that teachers with higher education had a better attitude towards HIV and AIDS pandemic than those teachers with lower level of education in Belize.

A considerably high proportion of the respondents had positive control and management practices towards HIV and AIDS pandemic. The practices noted to exist amongst the respondents included: having only one sexual partner and taking a test for HIV. The practices were used to eliminate the chances of contracting HIV. The respondents with non-graduate, graduate and postgraduate levels of education insignificantly showed positive practices towards HIV and AIDS when seeking sexual partners. These findings were in agreement with the study carried out by Conroy *et al*. (2016), which reported that male high school students had positive practices towards HIV and AIDS in Lao People's Democratic Republic. The findings also conform to a previous study, which showed that condom use among university student though high, was not consistent (Kasili *et al*., 2016).

The present study also assessed the level of preventive, control and management measures practiced against HIV and AIDS amongst men and women looking for partners and/or spouses in Kenya. This was especially important because preventive measures practiced against HIV and AIDS help in ensuring that the spread of HIV and AIDS from one partner to another does not

occur. The preventive measure against HIV and AIDS observed were HIV and AIDS testing. The majority (69.3%) of the respondents were looking for partners who were willing to have HIV and AIDS counseling, test and post subsequent counseling. Test of HIV status by the level of education, economic status and marital status showed a significant difference among other factors. The choice of partner with the same HIV and AIDS status among the respondents seeking sexual partners was highly practiced as a control measure towards HIV and AIDS. Such gendered partnership dynamics, if genuine, might reinforce the imbalance in the sex ratio of infections because it implies that women will spend more time in unions with HIV positive men than vice versa(Mkumbo *et al.*, 2013). On the other hand, the drift of HIV positive men and women out of the marriage market could mitigate the spread of HIV at the population level because HIV positive individuals will spend less time in partnerships where they could transmit the virus to others (Reniers and Armbruster, 2012). The HIV status-based partnership mixing patterns described above could thus have advantageous public health effects, despite the individual hardship that is likely to accompany partnership dissolution. The level of education, age and others, however, showed no difference among the respondents looking for sexual partners of the same HIV and AIDS status or otherwise among respondents looking for partners. Respondents' looking for one sexual partner was practiced as a management measure. Ninety eight percent of the respondent was looking for one sexual partner. This could be due to a belief that having one sexual partner reduces the chances of contracting HIV. The belief is, however, not premised on the fact that both partners need to be faithful to each other for assurance of lack of infection, (Kasili *et al*., 2016).

Choice of partners or spouse through media channel in the era of HIV and AIDS in Kenya revealed some important factors taken into consideration by those seeking and those being

sought. The HIV and AIDS test was one such principal factor in choice of a sexual partner. HIV testing reduces chances of HIV and AIDS transmission through unprotected sex as only partners with the same HIV status will engage in a relationship (Allen *et al*., 2003). Given that the partners date through media, it becomes difficult for a single test to ensure no transmission occurs before encountering the next sexual partner in case of those who prefer multiple sexual partners (Slater, 2013).

The level of education was also another critical factor in the choice of a partner in Kenya. Quality of education served as a predictor of one's knowledge of HIV and AIDS (Fako *et al.*, 2010). Education improves one's knowledge about AIDS, changes individual attitude from traditional beliefs leading to misconceptions to the correct knowledge and increases the bargaining power of women with men over sexual matters, which gives women an edge over controlling their sexual behavior (Thanavanh *et al*., 2013). Education particularly geared at young men and women has the potential to equip young people with the necessary HIV and AIDS knowledge that facilitates them in the prevention of transmission of HIV and AIDS infection (UNICEF, 2014). Comparative analyses of countries and regions have shown concrete evidence that, both young men and women with higher levels of education command higher levels of HIV and AIDS knowledge; better understanding of prevention of infection, undergoing change of behavior that is likely to predispose them to contracting HIV and AIDS (WFP, 2013). In the current study however, the majority (65.7%) of the respondents were looking for non-graduate partners. This could be due to the higher number of non-graduate individuals compared to graduates and postgraduate individuals in Kenyan population. Respondents were, therefore, mainly seeking sexual partners of their level of education. It has been reported that graduates who marry partners of lower educational qualification find it difficult to introduce their

partners/spouses in public functions, thus resulting into marriage problems (Kalmijin, 2005). College graduates also prefer to marry college graduates like themselves (Maliki, 2009). The majority of female respondents were seeking graduate and postgraduate partners compared to male respondents. This is consistent with a study carried out by Buss and Schmitt (2008), which reported that women consistently express a preference for partners who have high status profession.

The economic status was a factor that influenced the choices of sexual partners. The reason as to why most of the respondents were seeking economically stable sexual partners could be the existing high inflation, high costs of living standards coupled with unemployment problems amongst the sexually active cohort of the population (Eastwick *et al.,* 2008). Female respondents had the highest proportion seeking economically stable partners compared to the male respondents. This can be explained by the tendency of most women to value men who are industrious, ambitious and who possess a promising career orientation (Guindo *et al.,* 2014). This is supported by a study of Eastwick *et al*., 2008, which revealed that women are significantly more likely to discontinue relationships with men who are economically unstable or unemployed. Partners who are economically stable may help in reduction of HIV and AIDS transmission as they can have a good access to HIV and AIDS control, preventive and management measures (Kalmijin, 2005).

Marital status of a partner was another factor of consideration when choosing a sexual partner in Kenya. The majority of the respondents were seeking single partners compared to widowed and/or divorced partner. This implies that many of the respondents avoid widowed and/or divorced partners because of chances that they could be HIV and AIDS victims compared to

single partners (Clark, 2004). A study carried out in Kisumu County, Kenya, reported that a tendency for young women to have old widowed and/or divorced partners both within and outside marriage was likely to increase their risk of contracting HIV (Glynn *et al*., 2001).

Possession of children was well related with choice of sexual partner. The majority (62.5%) of the respondents were seeking partners without children. This is probably because individuals with children may be perceived to have high HIV and AIDS prevalence compared with those partners without children due to obvious exposure to HIV through unprotected sex (Clark, 2004).

Type of a relationship also contributed to the choice of partner as majority of the respondents were seeking partners to marry. Marriage is a key institution in many, if not in all societies, and usually marks a transition from childhood to adulthood (Lawrence, 2005), and is therefore, taken seriously. Married individuals are less likely than single individuals to have multiple partners, which may reduce chances of HIV and AIDS exposure (Clark, 2004).

CHAPTER SIX

6. CONCLUSIONS AND RECOMMEDATIONS

The current study confirmed that partners/spouse seekers through the media platform had some knowledge, awareness, attitudes, perception and practices about HIV and AIDS when looking for a sexual partner. Level of awareness was significant by the level of education and economic status while insignificant by gender, age, marital status, possession of children and type of relationship sought. Knowledge was also significant by level of education and economic status and insignificant with the other factors. Attitude towards HIV and AIDS was significant by level of education and practices by gender. Test of HIV status was significantly applied and was significant by level of education and economic status and insignificant by gender, age, possession of children and type of relationship sought. Similar HIV status which was the only control measure was insignificant. Number of partners sought was used significant by gender and age and insignificant by level of education, economic status among others HIV and AIDS status, level of education were some of the factors influencing choice of partner among others. Factors influencing partner choice include: HIV status, level of education, economic status, possession of children and type of relationship sought among others. Since the data indicates that there is perception, awareness, knowledge, attitude and practice towards HIV and AIDS, effort should be made by stakeholders in HIV and AIDS prevention and control to equally target persons dating in media and online for even higher gains in tandem with conventional ones because this kind of dating is becoming more and common. Since the cure for HIV and AIDS is nowhere in sight, though the quest for it continues through research, It is recommended that education be accorded

the priority it deserves in combating HIV and AIDS on the understanding of the fact that it is controllable, manageable and preventable.

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APPENDIX

PUBLISHED PAPER

Research Article OMICS International

Factors Determining Media-based Partner/Spouse Seeking in the Era of HIV and AIDS Pandemic

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Abstract

Marrying or looking for a lifetime soul mate or partner in the era of HIV and AIDS pandemic is problematic, worrying and a nightmare. Dating has to a number of people been elevated media platform recently. HIV and AIDS is a reality among partners and spouse seekers but little research has been done to understand this spouse/partner seeking behavior. The present study evaluated factors influencing the choices of partners and/or spouses in Kenya dating through media. The study obtained data from the information provided by individuals seeking spouses and/or partners from the soul mate section of the Saturday Nation Newspaper. The data obtained from four hundred and eleven persons from different educational and social backgrounds was entered in Microsoft excel spreadsheet and thereafter analyzed by SPSS version 20. The Chi-squared test was performed to test for statistical differences among groups. Information obtained from this study is important as an advocacy tool for building commitment to HIV and AIDS prevention and control from multisectoral fronts.

Keywords: Human immunodeficiency virus; Acquired immunodeficiency syndrome; Spouse

Introduction

Acquired Immunodeficiency Syndrome (AIDS) is one of the most complex health problems of the 21st century that threatens the world population (UNAIDS 2014; WHO, 2014). With no treatment or cure in sight, the disease continues to spread. Globally, an estimated 36.9 million people are living with HIV (UNAIDS, 2014) [1,2]. Over 90% of these individuals are concentrated in the developing countries, mostly in countries least able to afford care for infected people. Sub-Saharan Africa remains the region most heavily affected by HIV worldwide, accounting for over two thirds of all people living with HIV and for nearly three quarters of AIDS-related deaths (WHO, 2013).

The number of people living with HIV in Kenya is about 1.5 million people (NACC, 2013). Urban populations have higher adult HIV prevalence (10%) compared with rural populations (NACC, 2013). Since HIV weakens the host's immune system, associated opportunistic diseases such as tuberculosis and malaria have had to put a strain on health sector in terms of their treatment and management (KDHS, 2014). The Kenya government has employed public education to prevent new HIV infections and provision of anti-retroviral (ARV) drugs to the infected persons to increase their lifespan and improve the quality of lives. The government has also increased access to education silent on HIV status. Data from media is purely a unique and indeed reliable primary data from human beings on a very sensitive private life. The person voluntarily makes a personal decision without pressure and or influence of any kinds to have a partner and indeed describes what kind of partner he/she will like to have and goes ahead to pay for this information to be advertised.

Although a number of studies have explored various aspects of HIV and AIDS, there is no systematic study carried out to evaluate factors influencing the choices of partners and/or spouses in Kenya in the era of HIV and AIDS pandemic [7-10]. This is the premise of the current study. Whether the preventive measures/policies are practiced or not, this demographic analysis is crucial, because the views, beliefs and practices of the 18-55 year-old population are the most appropriate guideline for directing the next course of action and planning the most suitable preventive and educational measures.

Materials and Methods

The present study obtained information provided by individuals seeking spouses and/or partners for all kinds of relationships from the soul mate section of Saturday Nation Newspaper from January to December. This was a very important source of data already paid for and put in public domain for consumption which reflects the authenticity, seriousness, reliability, truthfulness and unbiasedness of the information being sought. Data was obtained as key indicators for