

Poor and rich Asia Oceania: An analysis of statistical differences for six sexual health indicators

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Background: The Durex Global Sex Survey was designed by SSL International in 1996 to better understand sexual behavior globally. In 2005, 41 countries participated in the survey (n=317,000), including 12 countries from Asia Oceania. The survey included 31 questions about sexuality profiles and behaviors.

Methods: In-depth statistical analysis of six sexual health indicators was carried-out for four country groups: Asia/Oceania High-Income (AOHI), Asia/Oceania Low-Middle-Income (AOLMI), Rest of the World High Income (RWHI), and Rest of the World Low-Middle-Income (RWLMI). The six variables were: rate of unprotected sex (RUS), rate of condom use (RCONDOM), rate of abstinence (RABSTINENCE), average number of sexual partners (ANSP), average age at first sex (AFIRSTSEX), average age when first sexual education received (ASEXEDU).

Results: AOHI has higher RCONDOM (58.8%) if compared to all other 3 regions; and lower RUS (46.9%) and RABSTINENCE (1.0%) and similar ANSP (9.5), AFIRSTSEX (17.5), and ASEXEDU (13.1) if compared to RWHI and RWLMI. In turn, AOLMI has lower RUS (37.4%) and ANSP (5.1) and higher AFIRSTSEX (19.0) and ASEXEDU (15.6) if compared to all other 3 regions; and higher RCONDOM (50.9%) if compared to RWHI and RWLMI. For RABSTINENCE (1.1%), it is higher in comparison to RWHI and lower compared to RWLMI. Statistical significant differences were found for ANSP, AFIRSTSEX, and ASEXEDU (p-value<0.05) between AOHI and AOLMI. These significant differences are also found for gender, relationship status, sex orientation, and age groups comparisons.

Conclusions: These results show that there are significant differences on key sexual health variables between Poor and Rich Asia Oceania countries. AOHI starts sex education 2.4 years earlier in comparison to AOLMI. Furthermore, AOLMI sex initiation starts 1.5 year later and average number of sexual partners is 4.4 lower than AOHI. The understanding of these differences may require distinct approaches to sex education and policies towards reduction of teen pregnancies and incidence of STIs in Asia Oceania. Condom social marketing (SM) project in low income communities of Rio de Janeiro, Brazil: a demand driven approach