An ethnography of concurrent partnerships among young people in rural Tanzania, with implications for HIV prevention

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Background: HIV prevention programs in Africa promote the “ABC” behaviors - Abstinence, Being faithful, and/or Condom use. The value of “Being faithful” has been reinforced by recent evidence of the importance of concurrent sexual relationships in the epidemic’s dynamics.

Methods: This paper draws on 158 weeks of participant observation in nine Tanzanian villages to consider patterns of young people’s sexual relationships, and particularly concurrent relationships.

Results: The majority of youth were sexually active by the age of 15, and most believed that, once sexually active, it was extremely difficult to become abstinent. Condoms were perceived very negatively, and condom use was rare. Social norms of student abstinence and female sexual respectability meant sexually active youth might be severely punished if caught. Consequently they usually carefully concealed all sexual relationships, or all but a primary one that might have some social recognition, e.g. amongst peers. This meant couples had little opportunity to develop emotional intimacy through nonsexual contact, while the lack of social recognition of relationships meant little social reinforcement of primary relationships, or discouragement of secondary ones. Young men’s main motivation to have multiple partners was sexual desire (e.g. attraction to different partners, or satisfying a sexual urge in a primary partner’s absence), whereas young women were mainly motivated by money and gifts they received in exchange for sex. Both were opportunistic in developing relationships and engaging in encounters that were logistically feasible within the constraints of gender-segregated village life. Concurrent relationships thus were common, despite a norm of monogamy, particularly amongst women. People were generally unaware of being concurrent partners, and discovery of infidelity usually led to break-up.

Conclusions: Concurrent relationships may play a central role in the HIV epidemic in sub-Saharan Africa. Reduction of concurrent partnerships may be a feasible risk reduction goal and deserves closer attention within intervention efforts.

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