UNIVERSITY OF MALAWI

KAMUZU COLLEGE OF NURSING

THE IMPACT OF LEVEL OF EDUCATION ,RELIGIOSITY,RELIGION AND CHURCH ATTENDANCE ON NUMBER OF WOMAN'S SEXUAL PARTNERS

SUBMITTED BY

MARGRET KALIMBAUSOYO MUNTHALI

FOURTH YEAR GENERIC

SUPERVISED BY

MRS KAFULAFULA

A DISSERTATION SUBMITTED TO THE FACULTY OF NURSING IN PARTIAL FULFILMENT FOR THE AWARD OF BACHELOR OF SCIENCE DEGREE IN NURSING

DATE 12TH APRIL 2001

Dedication

I dedicate this dissertation to my son Atusaye and to my husband Richard who has shown me real love and care. May Almighty God bless you abundantly.

Acknowledgement

I would like to thank my supervisors Mrs. Kafulafula and Mrs. Kazembe for their untiresome support and guidance rendered during the write up.

I would also like to thank my lecture Professor Norr for her support she rendered during the classwork and also for seeking clearance in places where this study was conducted.

I also express my heartfelt thanks to K.C.N.students, student teachers of Lilongwe and Blantyre T.T.C and the workers in banks for allowing me to conduct a study at their places.

Another vote of thanks should go to my roommate Ms.E.Sakala and all my friends for their assistance they rendered during the write up of this dissertation.

My sincere thanks should go to my husband ,Richard who has been a source of inspiration psychologically,spirituaaly ,and financially during the four years of study.

Finally many thanks to my mum and dad, my grandparents, Mabvuto and my aunt Mrs. Baloyi who have helped in each and everyway to become whom I am today.

Declaration

I declare that this work is a result of my own and it has never been presented or submitted in candidature for any other degree.

Candidate: .....Margret Kalimbausoyo Munthali ..... Date.....

Signature ..... Date.....

Supervisor.....Mrs.....Kafulafula.....Date.....

Signature..... Date.....

Supervisor ..... Date.....

Signature .....Date.....

University of Malawi
Kamuzu College of Nursing
31050000521579

TABLE OF CONTENTS

Content	Page number
Declaration	i
Dedication	ii
Acknowledgement	iii
Table of contents	iv-vi
List of Tables and figures	vii
Glossary of terms	viii
Abstract	ix-x
CHAPTER ONE	
Introduction	1
Background Information	1-2
Problem Statement	3-4
Purpose of the study	4
Significant of the study	4
Objectives of the study	5
CHAPTER TWO	
Literature Review	6
Studies on level of education and number of sexual partners	6-11
Studies on religion, religiosity, religious attendance and number of partners	12-14

Summary 14-15-

CHAPTER THREE

Conceptual Framework 16-17

Operational Definition 17-19'

CHAPTER FOUR

Methodology 20

Design 20

Sample and Setting 20-21

Data collection 21

Data analysis 21-22

Ethical consideration 22

Limitations of the study 22

Weakness 22-23

Strengths 23

CHAPTER FIVE

Findings or Results 24

Description of Demographic data 25

Level of education and number of sexual partners 26-28

Religiosity and number of sexual partners 28-30

Church or religious attendance and number of sexual partners 20-32

Denomination or religion and number of sexual partners 32-34

CHAPTER SIX

Discussion of the Findings 35

Level of education and number of partners 35-38

Religiosity and number of partners 38-39

Religious attendance and number of partners 39-40

Denomination /Religion and number of partners 40-42

Conclusion 42-44

Recommendations 45

Issues on further studies 46

CHAPTER SEVEN

REFERENCES 47-50

CHAPTER EIGHT

APPENDICES 51

Appendix A Questionnaire 52-53

Appendix B Letters 54-60

Appendix C Consent Forms 61

Appendix D Time Line 62

LIST OF TABLES AND FIGURES

Title		Figure	Tables
Conceptual framework		1	
Characteristic of study sample			1
Level of education and number of partners			
	2 months		2
	12 months	2	
	Lifetime	3	
Religiosity and partner	2 months		3
	12 months	4	
	Lifetime		4
Religious attendance and partners			
	2 months	4	
	12 months		5
	Lifetime		6
Denomination /religion and partners			
	2 months		7
	12 months	5	
	Lifetime	6	

GLOSSARY OF TERMS

AIDS	Acquired Immunodeficiency Syndrome
HIV	Human Immunodeficiency Virus
CIHI	Center for International Health Information
UNAIDS	United Nation Agency for International Development
MKAPHS	Malawi Knowledge AIDS Practice Health Survey
WHO	World Health Organisation
NACP	National AIDS Control Programme
MAAS	Malawi AIDS Assessment Series
ARB	AIDS Risk Behaviors
M.S.C.E.	Malawi School Certificate of Education
J.C.E.	Junior Certificate of Examination
T.T.C	Teachers Training College

Abstract

A correlation type of design used to examine if level of education, religion, religiosity and frequency of attending religious service influence or determine a woman's number of sexual partners. HIV/AIDS is becoming pandemic all over the world including Malawi . As of now many women are becoming infected with the virus at higher rates than men. This research is very important because it will help to identify which groups of women need more intervention so as to reduce women's number of partners as one way of AIDS prevention and control in Malawi This research was conducted in two cities -Lilongwe and Blantyre. 263 women were recruited as subjects ; students from Kamuzu college of Nursing , student teachers from Teachers Training College [TTC], clerical women from banks were selected . The variables of the study were level of education , church attendance religiosity, religion and number of partners. Independent variables were level of education religion religiosity and frequency in attending religious services while dependent variable was number of sexual partners .

Data was be collected using a questionnaire. This questionnaire was distributed to every participant in this research. Data was analysed through tables, means percentages and chi- square. On correlation design, it was very difficult to establish the causal inference and it was also difficult to establish generalisability to all women of Malawi since this study only included Blantyre and Lilongwe. However , potential threats of attrition maturation did not affect the study .This is so because all the subjects were studied only at once and in addition retention of subjects was be high because everybody was given a chance to join or not these

subjects were found in their own environment. The other strength was that this larger sample of five hundred women helped to establish the relationship.

The overall results have shown that there is a statistical significance between level of education and number of sexual partners being those who are educated most are having many sexual partners . Church attendance have also shown that there is a relationship since those who are attending weekly or twice a week have no multiple partners.

However ,there is no any statistical significance between religiosity between religion ,religiosity and number of sexual partners.

Chapter One

Introduction

Background Information

HIV/AIDS pandemic is a major health problem that has erroneously affected each nation's future. Heterosexual transmission has been extensively documented as a major mode of HIV/AIDS transmission (Schopper & Orale 1993). Current estimates on HIV infection show that AIDS is becoming increasingly common in globe as previously thought. According to World Health Organization [WHO] and United Nations AIDS (UNAIDS 1998) estimated that roughly 33.5 million people were affected with HIV as of December 31, 1998 worldwide. In Sub-Saharan Africa region especially in the south of Equator AIDS cases occurring through heterosexual contact were over 80% of all infections. Four fifth 4/5 of the deaths were attributed to AIDS as of December 1998 (NACP, 1998). Whilst HIV/AIDS has hit the world particularly hard, Malawi has not been exempted. HIV/AIDS was first identified in Malawi in 1985 at Kamuzu Central Hospital (Malawi AIDS Assessment, 1997) It was estimated that 84000 died of AIDS and further more the research projected a toll of 114000 estimated in 1994. AIDS cases Indicate quite clearly that AIDS is a major cause of death among those children and those aged between 15-45. CIHI (I997) revealed that there is high death rate among the children. They estimated that between 1995-2010 the mortality rate of underfive will be 200 per 1000 and infant mortality rate will be of over 115 per 1000. This represent respective increase 50% and 28% over the rates projected without HIV/AIDS. It has been reported that in many districts, patients with HIV/AIDS occupy half of the hospital beds. Due to this devastating impact of HIV, the health care delivery system is also

affected. This has put more demands on health care delivery system since it will need to increase resources in terms of money and human resource. CIHI (1997). Due to this impact of the disease new strategies have to be found. This will help to reduce strain on health care delivery system.

Statement of the General Problem

AIDS risk behavior (A.R.B) refers to the participation in casual sex and resistance to changing casual sex behavior (Jadack, 1991). Understanding the nature of risky behavior or casual sex that contribute to the spread of HIV/AIDS is very important in planning health education and preventive programs. {Boyer &Kellegel, 1991 cited in Jadack, Shibley &Keller 1995}. Planning health education need to be directed at change of risky sexual behaviours. Behaviors which are considered to be risky and can lead to contracting HIV/AIDS include having many sexual partners at a time, frequency of sexual partner change, failure to use condom, lack of abstinence and sex with individuals with multiple partners (Betrand, Makani & Djunghu, 1991).

More than 90% of women who are sexually active in Malawi are aware of these risky behaviors but they continue to practice sexual risky behaviors; especially in having multiple partners (M.K.A.P.H.S, 1998). The women who have multiple sex partners are considered to be at great risk of contracting HIV/AIDS. This is because the probability of encountering an infected partner increases as the number of partners increase (Catania, Coates &Kegelles, 1992). Behavior change in terms of having longlasting relationship and abstinence are currently the most useful prevention tool in the effort to prevent infection with HIV (Schnell, Gallotti & O`Reilly, 1993)

Level of educational and other factors might influence women indulging in risky behaviors in Malawi. In Malawi, For example, women who can read was 60% by 1998 [Guttmacher institute, 1998). This might lead to spread of the virus since the overall results show that current HIV prevention has to a very limited extent reached those women with multiple sex partners and with low education (Evian, 1992)

So there is need to educate those women who have multiple sexual partners and those women of low education. This is because their poor educational experiences and illiteracy make it difficult to understand and appreciate the seriousness and silent nature of HIV infection. Furthermore, they fail to understand the complexities and transmission of HIV /AIDS and the relevance of information to their lives. Therefore education and health authorities should prepare themselves adequately so that they transmit information clearly to these risky people hence trying to reduce number of cases (Evian, 1992). Since there is no vaccine, the information that must be transmitted should focus on changing sexual behaviors hence prevent further spread of HIV/AIDS (Schopper et al ,1993).

Purpose of the Study

The purpose of the study is to examine if the level of education, religion religiosity and church attendance have an impact on woman's sexual partners.

Significance of the Study

Women are becoming the most vulnerable group of contracting HIV/AIDS and the number of women with HIV/AIDS is increasing at an alarming rate worldwide including Malawi. But here in Malawi ,researches that are done have not specifically tackled AIDS prevention behaviors among women.

Therefore, this study helped to identify which group of women needed more intervention than the others. This study will help to find new strategies in tackling the prevention of the disease. This will help them to be aware of risky behaviors that are having many sexual partners hence preventing themselves from HIV/AIDS by changing the behaviors. This will later on control HIV/AIDS as a whole.

The results of the study will contribute to the development of appropriate strategies to achieve the behavior change of the identified groups.

Objectives of the Study

General Objective

The general objective of the study is to determine the relationship between religious attendance, religiosity, religion and level of education on number of sexual partners.

Specific Objectives

The specific objectives are;

-To find the level of education in relation to number of sexual partners

-To determine if church attendance ,religion, religiosity has an impact on number of sexual partners.

Hypothesis

-Women with higher educational level has fewer sexual partners than those of less or no education at all.

-Women who belong to a religion, consider them as more religious, and attend church services frequently will have fewer partners than those who do not.

Chapter Two

Literature Review

The literature review will focus if there is any effects on level of education, religion, religiosity and church attendance in relation to number of partners.

Research shows that women represent the most rapidly increasing category of person with AIDS (Bowd & Loos, 1995). In South Africa, Bowd et al (1995) found that women in Kwazulu-Natal are infected with HIV more than men.

In Uganda, survey was done on 177 patients between 1987-1991.It showed that the increase of HIV/AIDS status among women increased from 1.31%-1.56%.

(Baingana & Choi, 1991) This increment of HIV status can be due to large pool of infected men in Uganda as well as South Africa who may act as high frequency transmitters of HIV to multiple female partners. Their customary beliefs might be the same where marriages are often polygamous. Both of these surveys had few participants and research was only done at one place hence they are not very reliable In Malawi ,women of between ages 15-29 who are HIV positive outnumber males thus 671 women versus 407 men. .

Due to this increase of HIV in Malawi and women being the most affected people ,Jadack&Hyde, [1997] say that the only way to prevent it , is by the use of condom , education , reduce number of sexual partners and have monogamous relationship.

Level of Education and Number of Partners

Level of education is mostly associated with AIDS with AIDS knowledge.

Kelley & Jeffrey,(1995) reported that lower level of education is one of the factors that has shown to predict to continued high risks of sexual behaviors. This is because low education status is an indice of disorganization and stress.

Kapiga & Lwihula (1996), found that out of 2271 participants in Dar-es-Salaam 17.5% of no adult education had more than one partner as compared to 6.3% of secondary education. With these results they concluded that the tendency to have sex with other sexual partners significantly decreased with high level of education.

Somse, Chapko &Hawkins (1993) did a research in which they were looking at multiple sexual partners in the Central African Republic. They found that out of 2589 participants 17.4% reported to have multiple sexual partners compared to 27.7% and 19.4% of secondary and tertiary respectively.

In Zaire 5,494 women participated as subjects in rural and urban sites of Zaire.The three sites which were chosen, one had highly educated women of 63% followed by 51% and 44%.The population of subjects were not similar being one as the lowest. The results showed that 70% of the participants of the highly educated group believed that having more than one partner is risky and reduced the number of sexual partners (Bertrand, Brown, Kinzonzi & Mansilu 1992).

This sample is large and can be reliable. This is because it represented the rural and urban and also covering the three sites of Zaire. This may reflect that other factors like cultural and economic differences were looked into.

Catania (1992) in his research among Hispanic group included 13786 participants of ages between 18-75 years. Data was collected by phone on extramarital sex - which was defined as having more than one partner per year.It was revealed that level of education was an important correlate of extramarital sex. Twenty two percent of high educational status engaged in extramarital affairs as compared to 28% secondary education .

The results of. this research can be reliable since it has a good number of subjects. But data collected through phone can be distorting since everybody may answer what one wants due to lack of privacy.

In Uganda 12004 clients were tested for HIV/AIDS revealed that most of the participants with lower level of education had been found to be HIV positive. Out of the interviewed 100 people of primary education were found to be positive compared to 19% secondary education (Muller, Schwartlader & Magachere,1996)

Though this is a reliable sample , some of the clients may have been on window period hence limiting number of cases hence distorting the results. These results can be reliable because it was a large sample hence generasability can be acceptable to all Ugandans.

In Zambia a study was conducted among students at Natural Resources College which looked into their knowledge and behavior towards AIDS prevention . The students were asked to answer a questionnaire at the beginning of the term and 195 responded. Ninety five percent knew about HIV/AIDS and its transmission, 35% revealed that they had a regular partner while as 29.9%responded that they had more than one partner.

This sample was too small to represent the whole students in the colleges of Zambia hence results might not be generalized.

Similarly, Weger,Greeberg, & Hilborne (1992) did a research Antibody testing and AIDS Education in which they included 435 student. Ninety subjects were the control and 144 received education and they were followed in 6 months They found that 10% had 2 or more during 2 months, 21% in 3 months and 24% reported 10 or more during lifetime but the mean average was 4.

So it can be concluded that higher level of education influences someone's behavior.

Research done in Malawi revealed that higher level of education is predeterminant of HIV/AIDS knowledge. About 53% of secondary and university education reported that reducing the number of sexual partners is one way of preventing HIV as compared to 8% of primary or no education at all. (M.K.A.P.H.S,1996).

These findings might over or underestimate the results. This is because there are few universities in Malawi and the sample might not be adequate hence results may not be generalised.

Malawi the statistical office (1997) revealed that when a woman is educated ,she is likely to avoid risky behavior i.e having more than one partner .Their statistics revealed that women who had no education were less likely to readily reduce number of partners than those of higher education. Those with secondary education who reduced their number of sexual partners were 7.8% as compared to 1.1% of those with no education at all .

High level of education might influence number of partners due to high mobility, socio-economic status and also exposure to different media for information e.g magazines , radios and newspapers.

Despite that higher level of education is associated with higher knowledge, Sikkema, Winnet & Lombard (1995) found the opposite . In their study 575 female students were recruited at Medical College of Winconsin.The results were that over 70% of these students engaged in high rates of sexual behavioral risk for HIV infection though these students exhibited a high knowledge of HIV related knowledge.

In support of the above finding ,another research was done to 1500 students of Latina /Chicana high school and university in U.S.A .The results also showed that 64% of the students interviewed were sexually active with more than one sexual partner per year(Davis & Carol 1992)

Mkumba & Edwards,(1992)in their study among the students of higher institution of learning at the Natural Resources in Zambia in which they were looking into attitudes,knowledge and behavior ,they found that 90%(n=195) of students had knowledge and 29.3% had more than one partner as compared to 23.9% who had regular partner.So they concluded that behavior did not appear to be significantly affected by knowledge.

Another study was conducted among university students at the University of Zambia where they looked at knowledge and sexual practices in relation to HIV/AIDS .An anonymous self administered ,pre-tested questionnaire was distributed and students were asked to fill them. Nine hundred and forty six students out of 2000

filled the questionnaire and 92% knew about HIV /AIDS and its transmission, 11% had only one sexual partner while as 71% had more than one sexual partner (Baggaley & Phiri,1994) .

Odebiyi (1992) did a study examining AIDS awareness, knowledge of transmission and prevention and interviewed 120 students at Nigerian University. He found that the majority of student still indulged in unhealthy or risky sexual behavior and failed to change because of their personal satisfaction and not ignorance.

The overall results of AIDS prevention among students is low . Despite that these students have higher knowledge, they still engage themselves in unhealthy and risky behavior.

The reasons might be that they consider themselves as low risk group who might not be able to contract the virus. The results might also be affected since the sample size of these researches were very small as compared to the whole nation hence reliability might also be affected.

Research conducted by Schopper (1995) in the rural district of Northern Uganda, included 1486 of which 753 participants were women. Results revealed that women of higher education , 68% engaged themselves in premarital sex than 43% of lower education.

Legard ,Guilles, Pison,& Catherine(1996) concluded that casual sex was not associated with level of education in a research done in rural Senegal. Out of 482 people aged between 15-29, 76% of higher education who had higher knowledge engaged themselves in casual sex.

The results might be reliable since it had more participants. But they can not be generalized to the whole country since these researches were done only in the rural areas.Furthermore results might be affected due to the influences of socioeconomic status, cultural beliefs as well as occupation on prevention behaviors.

In summary the results clearly shows that increase in knowledge about HIV infection has not been strongly linked with safer sex Behaviors (Jadack, Hyde, Kellen, 1995)

Religion, Religiosity ,religious Attendance and Number of Partners

Religion was another important aspect which will helped to examine the relationship of the above variables. Religion may affect ones behavior or not, according to the belief that one has.|

Somse et al (1993) reported that out of 2589 participants in Central African Republic 16.7% of those people who regarded religion as very important had decreased percentage in number of sexual partners unlike 30.8% of those who were not religious at all. They also found out that 20% of the Catholics had multiple partners as compared to 14.8% of Protestants and 5.5% of Moslems.

However Catania et al, (1994), who did a research among the African, American Hispanics in which it included 13786 participants found churches were a source of spiritual inspiration and Catholic church was an important source of influence and support for its members hence discouraging multiple partners.

In support of this Catania ,Choi, Dolcini (1994) reported that church attendance was an important correlate for both America and Hispanics .They further reported that infrequent church goers who were Americans and Hispanics had higher extramarital sex than those who frequently go to church .

On the other hand, Catania, Coates & Kegelles (1994) noticed that in whites, religion was not an important correlate in relation to number of sexual partners. They found that most white people did not go to church but they had one only one sexual partner at the time of interview.

According to Noormohammed (1996) who revealed that in most of the Islamic world, AIDS 26.30% has become pandemic due to lack of education hence lack of knowledge. This is evident in Turkey and Pakistan where literacy level is very low. He found that HIV mode of transmission is forbidden in Islam and highly stigmatised. People deny the existence of HIV and leaders who are religious but deny its existence further worsen the situation.

Preventive behavioral practices might not be introduced in these countries since there is be no effective strategies to overcome the disease because leaders are the ones who influence the people through the rules and regulations that they set. Leaders are law enforcers but they are reluctant to enforce, the people do whatever they can please them.

This is supported by Orabuloye (1993) who found that the majority of people in South West Nigeria believed that the government health campaigns are more likely to change behavior than the teachings of religious leaders . This is related to the fact that even if religious leaders know about AIDS, they believe that it is a measure of God's disapproval of sexual relationship outside marriage.

Furthermore in a few places in Islamic world, the custom of temporary wives has been adopted which allows men to marry for sex and divorce immediately afterwards. This sexual intercourse takes place within a context of that is sanctioned by law ,religious and culture.

This might be deduced that even if these people can went to church or mosque frequently or not, there would be no impact on AIDS prevention behavior. This is due to the fact that they deny the existence of HIV for fear of stigmatisation, and its according to their belief that whether one marries as many wives as possible, it is not a sin before God.

This will thereafter increase the HIV epidemic because people will still engage in risky behavior.

However in Malawi, no data has been found on religion religiosity, church attendance in relation to number of sexual partners.

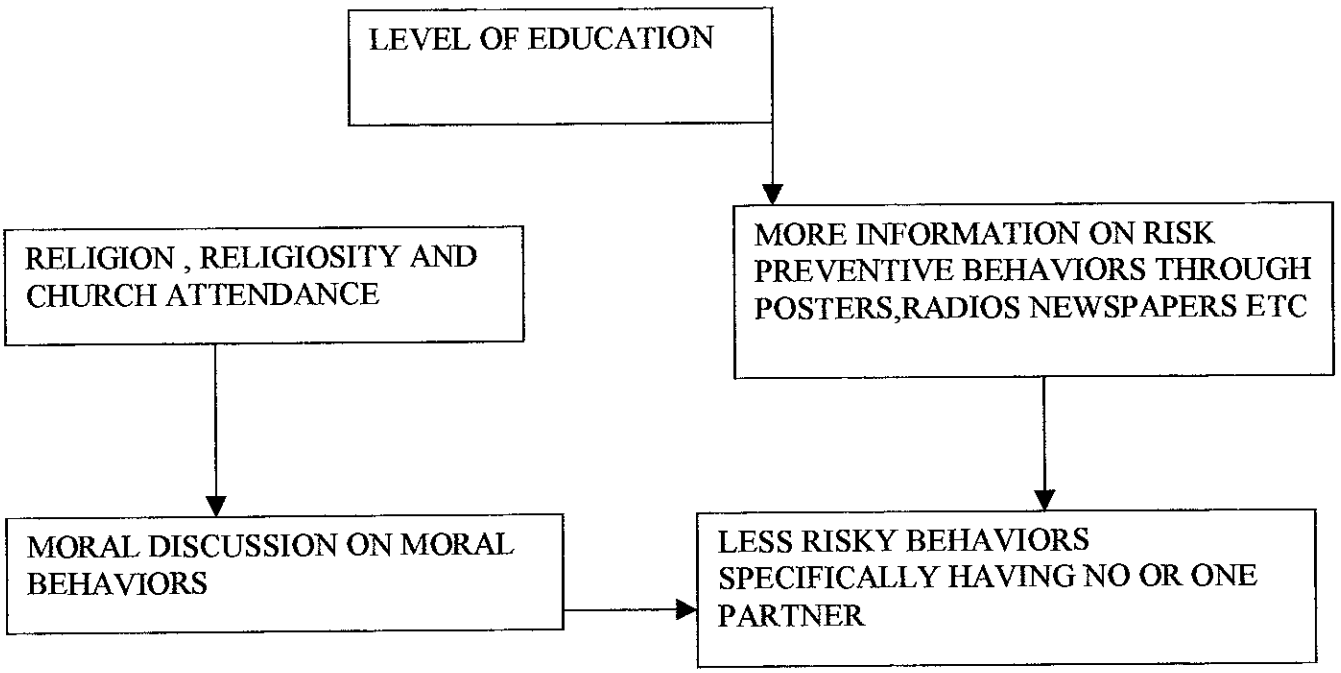
Summary

From the literature review, it has been shown that level of education might or might not influence an individual's behavior and whether an individual belongs to a religion or not can not predict his or her behavior. Unfortunately, little is known about the current AIDS knowledge and AIDS prevention behaviors among women in terms of number of sexual partners. So there is health behavioral gap which is discordance between knowledge about health promoting behavior and adherence to preventing practices. So gaining behavioral knowledge can be used for shaping intervention that will aim at encouraging safe sexual behaviors.

Therefore, it can be concluded that at the mean time, safe sexual behavior in particular, having one long-lasting relationship or no sexual partner, can be the only way of preventing HIV/AIDS since the hopes of vaccines or cure are at a distant.

Chapter Three

Conceptual Framework



This conceptual framework is based on the following;

The higher the level of education, the more information on health issues the less the risky behavior specifically having one partner.

This theory is supported by Kapiga et al [1995] that the women's level of education has an impact in the number of partners .In their research they found out that more educated women had at least one or no sexual partner than those with no education. This is so because those who are educated have different sources of information i.e. newspapers, books mass rallies and radios. These educated women are able to interpret the messages comprehensively unlike those who are not educated because they are not exposed to such things.

The more one attends church services and consider herself or himself as more religious, the more the discussions on moral behaviors, more information on health issues, leading to increase in knowledge of HIV/AIDS hence less risky behaviors (having one partner). Those women who are frequently attending churches are able to hear good moral behaviors and are able to share with their friends in the churches.

Concepts and Operational Measures

Level Of Education

Education in defined as systematic training and instruction designed to impart knowledge and develop skills (Horny,1997)

Level of education was categorised according to Malawian standards .

The measure has high content validity because it has been greatly used and experts agree that it is a good measure of education This scale has got high reliability because these are the standard levels used in Malawi.

On level of education, those with junior certificates were regarded as less educated and those with M.S.C.E. and over were regarded as more educated.

Religion Religiosity and Church Attendance

These are another independent variables in the study .

Religion is defined as a particular system of faith and worship based on religious belief or can be defined as the belief of supernatural ruling power,the creator and universe who has given to man spiritual nature which continues after death of the body (Horny 1997).

Religiosity

This can be defined as believing and practicing a religion and being devoted or committed to God (Horny,1997)

Church Attendance

This is defined as an act of being present and the frequency of being present at a church.

Number of Sexual Partners

This was another variable which was dependent .This was defined as number of male sexual partners that the respondents had with during the given period of time.

Reliability and Validity measured during 2 Months and 12 Months

This was a recommendable period of time because in Malawi the statistics show that 1 in every 3 persons is HIV positive. The time frame for two months was used to elicit reliable report on sexual behaviors The women who did not answer in 2 months would under this category.

Reliability and Validity during Lifetime

On number of sexual partners, those women who said that they had three or more partners were categorised as having multiple sex partners . On time factor and number of sexual partners ,these were chosen because it could be short enough to minimise recall errors and long enough to be a meaningful measure of sexual

behavior. Three numbers of partners were chosen because the time frame is long enough hence 3 above can be considered to be risky.

Chapter Four

Methodology

Design

This study adopted the correlation research design whereby it looked at relationship between two or more variables. In this design, the researcher tried to find out whether if one variable changes, the related change occur in another variable(Wood , 1988)

All the variables were measured at the same time .

Sample and Setting

The study was conducted in the cities of Lilongwe and Blantyre. These cities were chosen for easy accessibility since they were closer to the researchers.

Three different groups of women which included students of the Kamuzu College of Nursing ,teachers in Teachers Training Colleges [T.T.C.], clerical workers in banks at their workplace were recruited. These three groups provided a diversity in terms of level of education. Sites were selected as matched pairs,according to location and type of participants. This study used the convinient sample estimated to include approximately 263 women. The 263 women was a larger sample which represented a lot of women in the country but it was difficult to generalize the results to the whole nation since the study was only conducted in two urban areas. The researcher used randomised sampling criteria in which everybody had a chance to be selected .These women had a chance to choose whether to be part of the study or not.

Consent forms which were in writing were given to the director of each participant group for approval to study in their work places.

Data Collection

Data was collected using a questionnaires which were distributed to all the participants .Questionnaires were checked for completeness and accuracy to ensure quality before distribution. Content of the questionnaire was adapted from the larger research done by Dr Norr and it was devised in English. Clarifications were done in groups to avoid anomalies. Each woman anonymously recorded her responses on the printed questionnaire to ensure reliability because this is a sensitive issue hence many people might not be willing to reveal their sexual behavior.

The principal investigators of larger study obtained all the required research clearances and permission from directors at each site where participants were recruited.

Data Analysis

Data collected was coded in the computer in the special package of social sciences (S.P.S.S.) and it used both descriptive and inferential statistics which includes averages ,tables and percentages and chi-square. These were used to test the hypothesis on the correlation between level of education religion religiosity ,church attendance and number of partners that exists between the targeted group. Chi-square was also used to study the relationships between variables measured (Wood 1986).This is so because ordinal level of measurement were used in measuring religion and number of partners ,and since scales were used on education ,inferential statistics were used.

On religiosity, the questions were recoded such that those who were much more religious and more religious were categories into one and those who were average and less religious were also categorized into one.

On attendance, those who attended a few times a year, once a year, less than weekly and a few times a month were recoded as those who attend less than weekly.

Ethical Consideration

Before conducting this research, the researchers obtained permission or consent from board of the Research Publication Committee which deals with research ethics .When this was done the researchers were intensively trained so that they knew research ethics before conducting it. The researchers then obtained all required clearances and permission from directors at each site where the participants were recruited .The project was explained and the participants who wished to join did not sign up their names so that they remain anonymous .Numbers were used instead of names to avoid psychological harm.This was so because if a participant had written his or her name ,the participant could feel that her secrets have been known to everybody in revealing the number of partners.

Limitations of the Study

Weaknesses

The major weakness of the study was that it was difficult to establish causal inference .This was because the researcher did not know what variable caused the other to behave in such a way since all the variables were measured at the same time .The major thing was that as much as there were 263 subjects which was

considered as larger sample on its own, this sample only represented Blantyre and Lilongwe. This made generalisation difficult because it did not represent the northern region as well as the large number of women who live in the rural areas where this study was not conducted

Strengths

The study on the other hand, had strengths in the sense that 263 women were recruited as subjects. This large sample helped to establish relationship between variables and hence reducing the possibility of type 11 error .The potential threats of maturation, attrition and history did not affect the study because data was only collected at one point in time .

Chapter Five

Findings /Results

This study represents the results that were found. Tables ,percentages, chi-square were used.

Demographic Data

The numbers of participants were 263 women. Their ages ranged 18-60. The majority of the participants were aged between 26-30 thus representing 31.9% (n=84), those aged 19-25 were 22.% (n=58)31-35 were 15.6% (n=41) and 36-60 were 28.5% (n=75).These participants were drawn in the cities of Lilongwe and Blantyre but they came from different ethnic background.such that the majority were the Tumbukas and the least participants were the Yaos These participants comprised of women with different marital status such that 58.3% (n=153) were married and 41.7% (n=110) were either not married, divorced, separated or widowed. Some of the participants were students from K.C.N. and others were teachers from T.T.C.and also clerks from different banks. These women had different educational background such that it involved 17.5% (n=46) who had J.C.E. certificate, 48.3% (n=127) who had M.S.C.E. and 31.9% (n=84) of those who attended college. Further still, they belonged to different religious affiliation being 1.9%(n=5) of Islam as the least participants, 25.9%(n=66)of Catholics,41.5%(n=108) of C.C.A.P as the majority and 26.9% (n=70) as other protestants .

Table 1 Demographic Characteristics of the Respondents

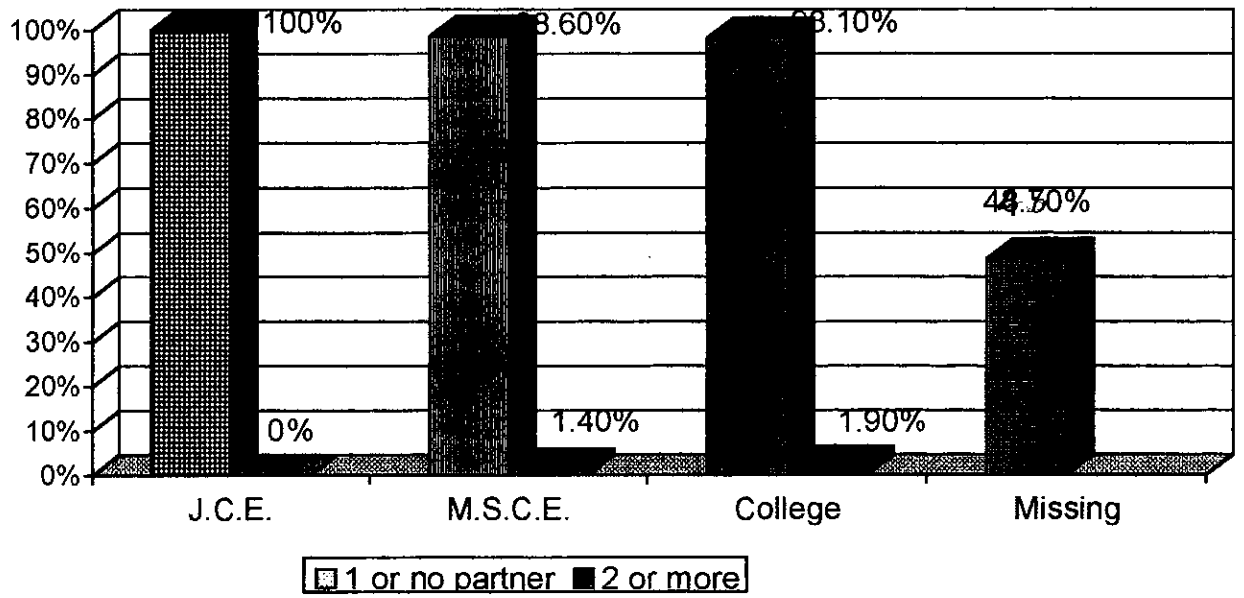
Characteristics	Category	Frequency	Percentage
Age	19-25	58	22.1
	26-30	84	31.9
	31-35	41	15.6
	36-60	75	28.5
Level of Education	J.C.E.	46	17.5
	M.S.C.E.	127	48.3
	1 or more years of college	84	31.9
Marital status	Married	153	58.3
	not married ,divorced or widowed	110	41.7
Occupation	Teachers	73	28.1
	Bankers	175	67.3
	K.C.N students	10	3.9
Religion	Catholics	66	25.9
	Moslems	5	1.9
	C.C.A.P.	108	41.5
	Protestants	70	26.9
Ethnicity	Chewa	45	17.1
	Ngoni	53	20.2
	Lomwe	44	16.7
	Tumbuka	47	17.9
	Yao	24	9.1
	Others	47	17.9

Table 2 Number of Partners in Two Months in relation to Level of Education

Number of partners	J.C.E.	M.S.C.E	COLLEGE	TOTAL
One or no partner	19(100.00%)	75 (98.7%)	51 (98.1%)	145 (55.1%)
Two or more	None (0%)	1 (1.3%)	1 (1.9%)	2 (0.8%)
Total	19(100%)	76 (100%)	52 (100%)	
Missing	116 (44.1%)			263 (100%)

Table 2 above shows that the women who had J.C.E. certificate had no multiple partners in 2 months while as 1.3%(n=76) of M.S.C.E. and 1.9% (n=52) of college had 2 or more sexual partners in 2 months .The missing data is 44.1% (n=116) which can be deduced that the majority did not answer the question. The results show that there is no relationship between level of education and number of sexual partners hence the results are not statistically significant since x^2 =0.412 p >.0.05.

Figure 2 Number of Sexual Partners in 12 Months in Relation to Level of Education



This figure 2 above shows that 1.4% (n=73) of M.S.C.E. and 1.9% (n=52) of college had 2 or more partners and none with J.C.E. Certificate had no multiple partners in 12 months. The overall results show that the majority had no or 1 sexual partner within this period of time. There also other participants who are assumed that they did not answer and is recorded as missing data which represents 44.5% (n=117). The results above shows that they are not statistically significant since the x^2=0.412 p>0.05 hence no relationship exists between the results.

Figure 3 Number of Sexual Partners during Lifetime in Relation to Level of Education

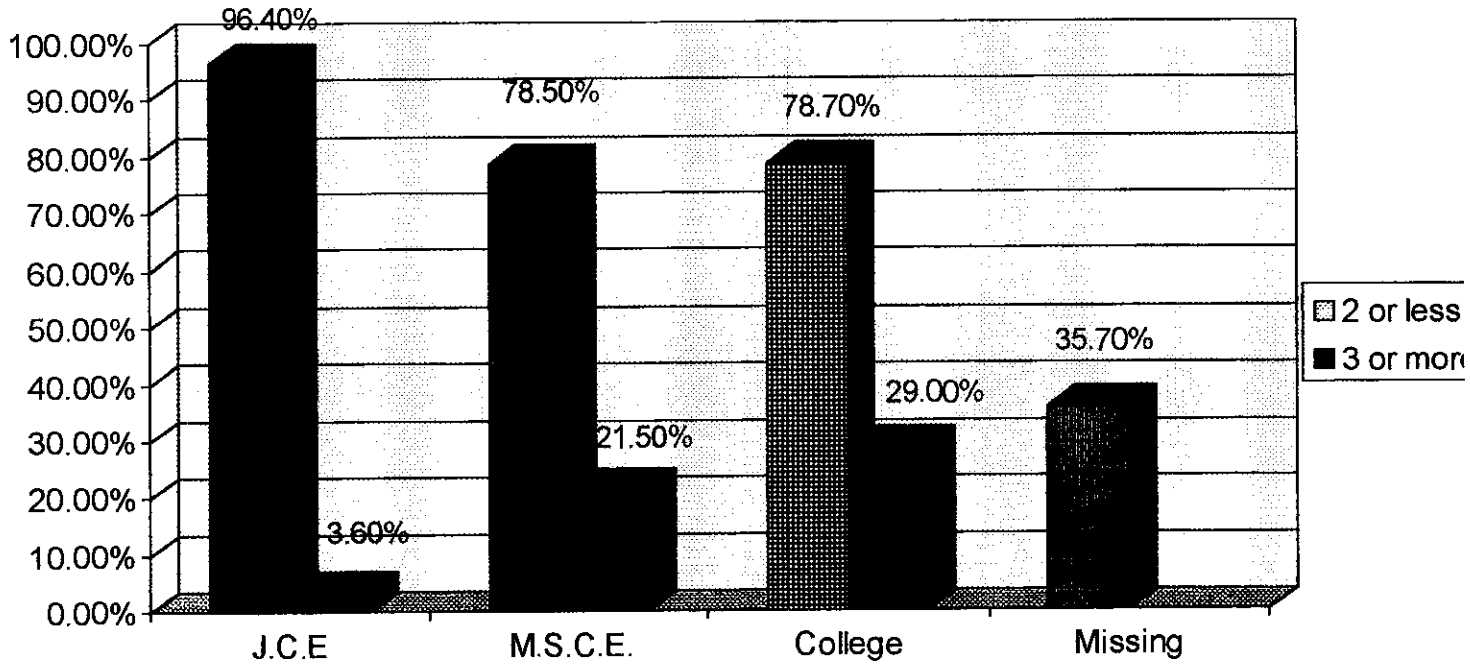


Figure 3 shows that 21.5% (n=79) of M.S.C.E. and 29% (n=62) of college had 3 or more partners during their lifetime and only 3.6% (n=28) of J.C.E. had also 3 or more. However the majority of participants show that they had 2 or less during their lifetime. This shows that the results are statistically significant and there is a relationship between higher level of education and multiple partners since the $x^2=0.012$ $p> 0.05$.

Table 3 Number of Sexual Partners in 2 Months in relation to Religiosity

Number of partners	Average or less	More religious	Total
1 or less partner	71 (98.6%)	63 (98.4%)	134 (98.5%)
2 or more partners	1(1.4%)	1(1.6%)	2 (1.5%)

Total	72 (100%)	64 (100%)	136 (100%)
Missing	127 (48.3%)		263 (100%)

Results on Table3 above shows that in 2 months 1.6% (n=64) of women who consider themselves as more religious had more than one partner and the same applied to 1.4% (n=72) of women who considered themselves to be less religious.. The data of most of the participants is missing thus about 48.3% (n=127) and these are assumed that they did not answer. These results are not statistically significant since x^2=0.993 p>0.05 hence there is no relationship between the variables above.

Table 4 Number of Sexual Partner in 12 Months in relation to Religiosity

Number of partner	Average or less	More religious	Total
1 or less partner	74(98.7%)	59(98.3%)	133(98.5%)
2 or more partners	1(1.3%)	1(1.7%)	2(1.5%)
Total	75 (100%)	60(100%)	135(100%)
missing	128(44.5%)		263(100%)

Table 4 shows that in 12 months women who had more than one partner but considered themselves as more religious had the percentage of 1.7% (n=60) while those who considered themselves to be average or less religious had the percentage of 1.3% (n=75) The missing data is 44.5%(n=128). This gives x^2 of 0.873 p>0.05 hence there is no relationship and no statistically significance that exists between the results.

Figure 4 Number Of Sexual Partners During Lifetime In Relation To Religiosity

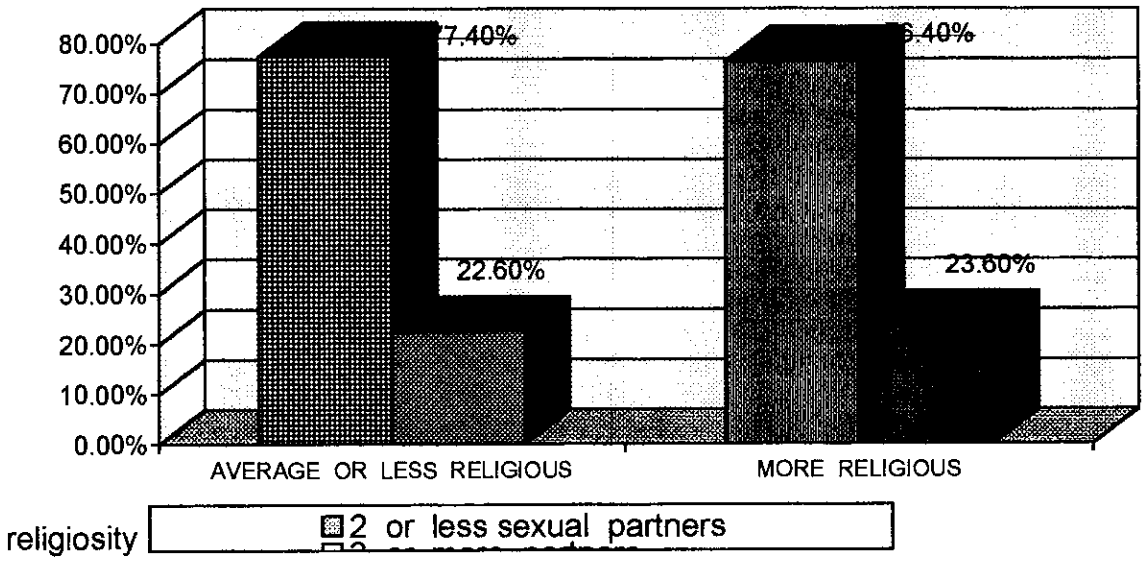


Figure 4 shows that during lifetime 22.6% (n=84) of women with less religiosity had 3 more number of partners as compared to 23.6% (n=72) of women who considered themselves to be more religious. These results above show that there is no relationship since x^2 =0.883,p>0.05 and denotes that there is no statistically significance.

Table 4 Number of Sexual Partners in 2 Months in relation to Religious Attendance

Number of partners	Less than weekly	Weekly	More than weekly	Total
1 or less partners	27 (93.1%)	72 (100%)	43 (98.6%)	142
2 or more partners	2 (6.9%)	none	none	2 (1%)
Total	29(100%)	72 (100%)	43 (100%)	144 (54.3%)

Missing	119(46.4%)			263(100%)

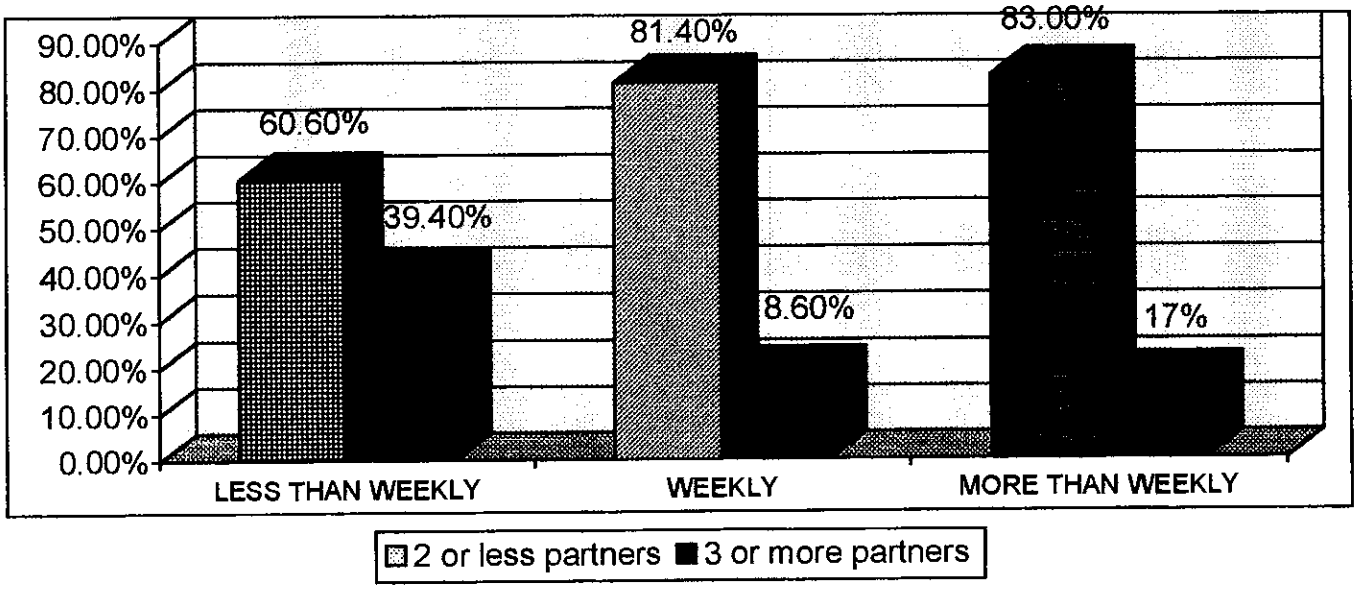
Table 4 shows that 6.9% (n=29) of women who attend church less than weekly had 2 or more number of partners while no one who attend weekly or more had more number of sexual partners. The missing data was 45.7% (n=119).The results are statistically significant and there is a relationship between church attendance and number of sexual partners . $x^2 = 0.009$, $p<0.05$

Table 5 Number of Sexual Partners in 12 Months in relation to Religious Attendance

Number of partners	Less than weekly	Weekly	More than weekly	Total
1 or no partner	28(96.6%)	71(100%)	42(97.7%)	141(98.6%)
2 or more	1(3.4%)	None	1(2.3%)	2(1.4%)
Total	29(100%)	71(100%)	43(100%)	
Missing	119(45.7%)			263 (100%)

Table 5 above illustrates that 3.4% (n=29) of women of church attendance less than weekly had more than 2 sexual partner and also women who attend church more than weekly had 2 or more sexual partners hence there is no any statistically significance between the results.$x^2=0.170$ $p>0.05$

Figure 5 Number of Sexual Partners during Lifetime in relation to Religious Attendance



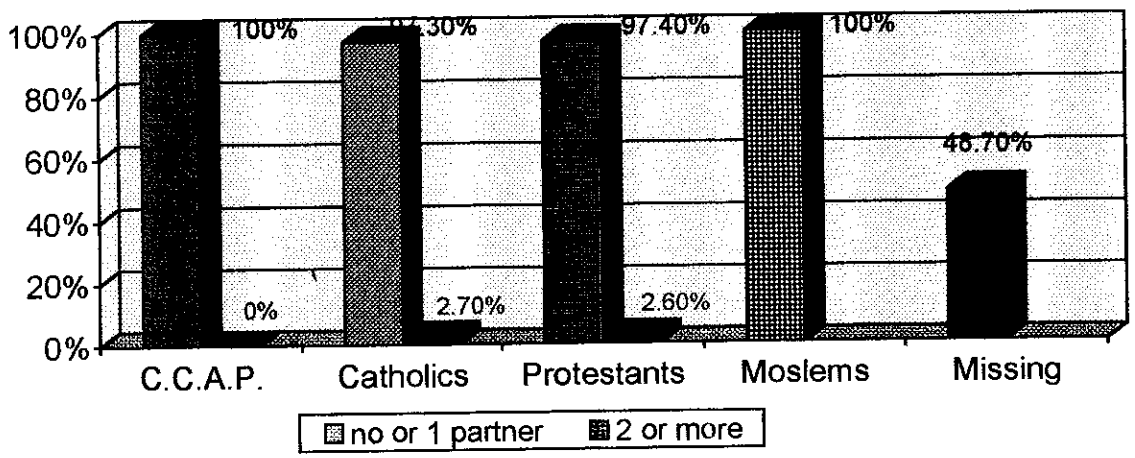
In this figure above 18.6 (n=86) of women who attend church weekly had more than 3 or more number of partners as compared to 17% (n=47) and 39.4% (n=33) of women who attend more than weekly and less than weekly respectively $.x^2$=0.015 p<0.05.

Table 6 Number of Sexual Partners in 2 Months in relation to Denomination/Religion

Number of partners	Moslems	C.C.A.P..	Catholic	Other	Total
1or no partner	4(100%)	66(98.5%)	35(97.2%)	37(100%)	142(53.7%)
2 or more	None0%	1(1.5%)	1(2.8%)	None(0%)	2
total	4(100%)	67(100%)	36(100%)	37(100%)	144(100%)

Data in figure 9 above shows that during two months 2.8% (n=36) of women belonging to Catholic church and 1.5% (n=67) of women of C.C.A.P. church had two or more number of sexual partners but no Moslems nor Protestants had multiple partners in two months. x^2=0.260 P> 0.05.

Figure 7 Number of Sexual Partners in 12 Months in relation to Denomination /Religion



In figure 7 above 2.7% (n=37) of Catholic women as well as 2.6% (n=38) of other Protestants had 2 or more ~~than 2~~ sexual partners in 12 months None of the Moslems nor C.C.A.P. had 2 OR more number partners. Furthermore the figure above illustrates that on average 98.7% of these participant had no or 1 partner during the this period. Most data is missing thus giving a percentage of 48.7%(n=120)The results are not statistically significant as evidenced by x^2 of 0.202 and p>0.05.

Figure 9 Number of Partner during Lifetime in relation to Denomination /Religion

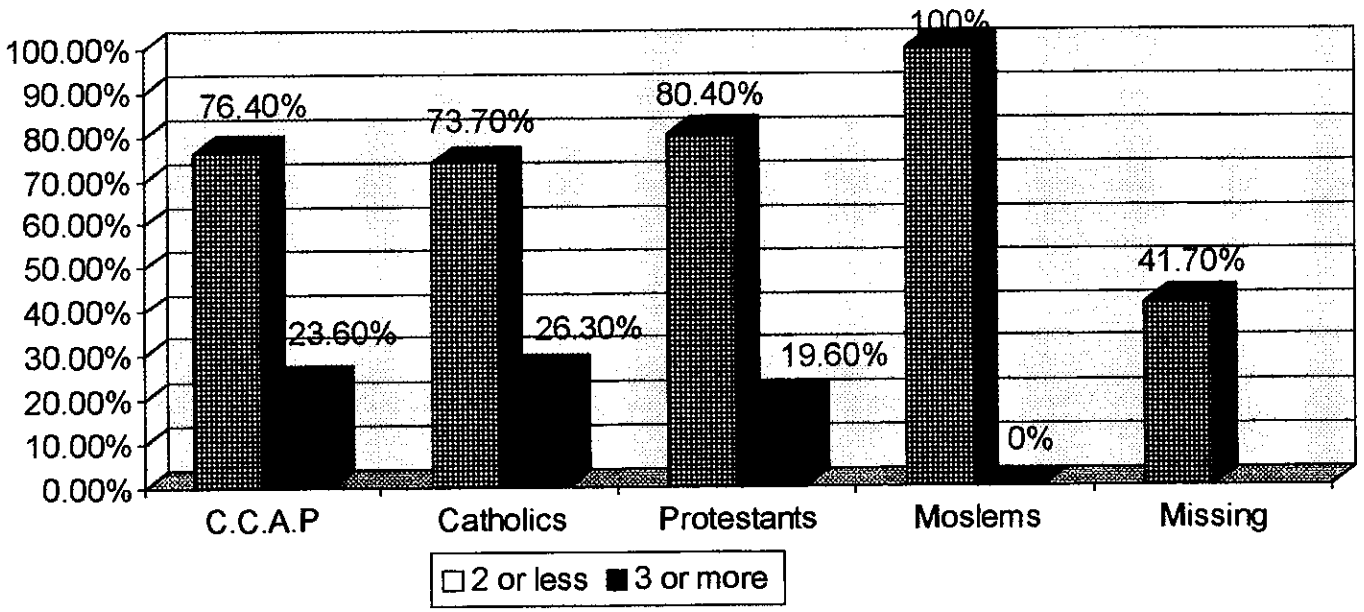


Figure 9 above illustrates that 23.6% (n=72) of C.C.A.P and 23.3% (n=38) of Catholics and 19.6% (n=51) of Protestants had 3 or more partners during their lifetime. None of the Moslems had three or more. The majority of the participants had two or less partners in their lifetime. The missing data is 41%. The results above shows that the results were not significant as evidenced by $x^2 = 0.2$ $p > 0.05$.

Chapter Six

Discussion

This study has revealed that there are certain aspects other than knowledge or religion that influences a person to engage in having multiple partners hence being risky of contracting HIV/AIDS.

This discussion therefore focusses on the impact of level of education ,religion, religiosity and church attendance on the woman`s number of sexual partners.

Recommendations and conclusion will also be included at the end of discussion.

Level of Education and Number of Sexual Partners in Two Months / Twelve Months and during Lifetime

The findings generally do not support the predictions of the study. It has been shown that the results are not statistically significant. It has been found that women in this sample were involved in moderately risk behavior such that relatively low proportion of women were not sexually active. Thus on average 98.8% of women had one or no sexual partner at all in 2 months or 12 months (see Table 2 and figure 2). There were few women who reported having 2 or more partners in 2 months and 12 months. Thus on average 1.4% (n=74) of M.S.C.E and 1.9% (n=52) of college. $x^2=0.4$ $p>0.05$

On the other hand, there is a relationship between high level of education and multiple partners. It has been found that high level of education does not improve risk level in preventing HIV. The women with high level of education had 3 or more partners during

their lifetime, thus representing 21.5% (n=79) of M.S.C.E and 29%(n=62) of college.x^2=0.012

Though .these educated women have knowledge on how to prevent contraction of HIV/AIDS ,they still engage themselves in multiple sexual partners as evidenced by the results above.

These few women who have multiple partners are at risk of contracting HIV/AIDS because of their involvement in sexual relationship with multiple partners since the probability of contracting the virus increases as the number of partners increase.

The relationship between high level of education and multiple partners could be attributed to the fact that these women had better education and having more money to spend on social activities that may lead to potential partners and travelling more frequently since the majority were workers.

The other thing is that these women might want to improve their socioeconomic status hence engage themselves in multiple partners.

These results are supported by Jadack et al (1995) who reported that though high level of education is associated with increased knowledge ,it is not associated with safer sex behaviors.

Schopper (1995) who did a research in Northern Uganda also found out that 68% (n=1486) of higher education engaged themselves in premarital sex than 43% of lower education.

Furthestill Legard et al (1996) concluded that casual sex was not associated with level of education since out of 482 participants ,76% of higher level of education who had higher knowledge had engaged in casual sex.

Observers in Malawi and elsewhere do agree that level of education and knowledge are not enough to motivate individuals behaviors (M.K.A.P.H.S.,1998)

Contrary to the above findings especially on number of partners during lifetime, are not supporting the conceptual framework (see figure 1) that explains that women of higher level of education could have one or no sexual partner due to high level of knowledge since they are exposed to various information.

In addition, many researchers have found that higher level of education is not associated with behavior change.

Kapiga et al (1996) found that 17.5% of adult or no education had more than one sexual partner as compared to 6.3% of secondary education.

Catania et al (1992) in his research among Hispanics revealed that 22% (n=13786) of primary education engaged themselves in extramarital sex as compared to 28% of secondary education.

The difference on the above findings might be attributed to poor sampling technique because there were no variations on level of education. This sample did not include participants who had lower education than J.C. and furtherstill those who were holders of J.C.E. were regarded as low educated. But there might be other women who reached form four but failed to qualify and they still hold the J.C.E. certificate. This means that although they differ in qualification, they don`t differ in level of knowledge since exposure in terms of information is likely to be the same.

In addition, the results might also be affected by time factor. For example, data for 2 months and 12 months remains the same . This is because 2 months is a short period for someone to change sexual partners.

Further, the results do not show when exactly during which period in their life did these women engage themselves in multiple partners. Thus data do not show if these women had multiple partners when they were in primary, secondary or college.

Urbanization or location might also affect the results. Since this study was not conducted in rural areas on people with different level of education, the results can not show much difference because these participants are equally exposed to information such as posters radios, newspapers and other means hence knowledge can not vary much

Stillmore the results might also be affected by the number of participants because many subjects had M.S.C.E. or above. This means that the ones with J.C.E. were not adequately represented enough, the results are biased towards those with M.S.C.E, and those of college hence there is no true conclusions.

Religiosity and Number of Sexual Partners

The results of this study show that there is no relationship between religiosity and number of sexual partners.x^2 =0.9p>0.05 This is evidenced by the results on table where it shows that most of the participants who considered themselves as less religious or more had no or 1 sexual partners in 2 months and 12 months.

Furtherstill, most of the participants whether they were religious or not had 2 or less partners during their lifetime.

Previous studies have shown that religiosity is directly related to monogamous relationship.

Somse et al (1993) in his study among Hispanics found that religiosity is related to less number of sexual partners. Thus, 16.7% of participants who were more religious had fewer partners than 30.8% who did not regard at all.

The above findings in this research might be affected due to one's perception towards HIV/AIDS. If an individual fears to contract the disease, one is able to modify the behaviors. This might be deduced that these women might have perceived the risks of having multiple partners despite that they considered themselves religious.

In addition, the societal and cultural norms might play part because in Malawian setting every woman is supposed to have one sexual partner. Though these women on average were at least religious, as shown on the figure above that none was religious, these women might have followed the norms of Malawian culture.

Nevertheless, discrepancies in results on number of partners might be due to the missing data that can be due to non-response since sexual behavior is a secret issue. These women would not respond to the questionnaire to avoid embarrassment for fear of revealing the secrets and become a disgrace to the society.

Therefore, it can be concluded that behavior change is not linked to religiosity.

Religous Attendance and Number of Sexual Partners

The results somehow contradict on what was hypothesised before .The results have shown that there is no significant relationship between church attendance and number of sexual partners within the period of 2 and 12 months. This is evidenced by the results on

tables 4& 5 where it shows that whether the participant attends religious services weekly, less, or more than weekly, on average they had no or one sexual partners. $x^2=0.009$ $p>0.05$

Contrary to the above findings, the results show that there is a significant relationship between religious attendance and number of sexual partners.(see figure $x^2=0.012$)

The results show that 39.4% (n=33) of those women who attend less than weekly had 3 or more partners during their lifetime as compared to those who attend weekly or more than weekly.

Similar results were found by Catania et al (1994) who reported that among Hispanics, those who were attending the church frequently had less number of sexual partners than those who did not go at all.

This is a positive sign because behavior change may come about due to frequent church attendance. Women of Malawi need to be encouraged to attend religious services where they can acquire knowledge can learn moral behaviors.

On the other hand, in this case, church attendance alone cannot predict their behavior. This is because behavioral change is an innerthing that is perceived by a person alone and it is entangled with the issues of self image and personality hence these women might not be able to readily reveal their personality.

Peer pressure as well as society can make someone to attend religious activities to fit in different types of groups just for socialization and not a believer at all.

Denomination or Religion and Number of Sexual Partners

The results have shown that there is no relationship between religion and number of sexual partners as evidenced by results in figure7& 8 and table 6 x^2 =0.2 p>0.05

On average 98.3% who belonged to a religion had no partner or one partner in 2 months and 12 months. The minority of the participants thus on average 1.7% had 2 or more partners in 2 and 12 months.

On number of sexual partners during lifetime, it has also shown that on average 23% of the participants had 3 or more partners, however most of the participants had 2 or less during their lifetime.

This might correlate with the Conceptual framework in which it describes that women who belong to church are being influenced by the messages heard in the church hence making them restricting themselves to one partner. These results however reflects that whether being in different religious affiliation does not determine one's number of sexual partners since on average the results show that many women had no multiple partners within the stipulated time.

On the other hand, 26.3%(n=38) of the participants belonging to Catholics and 23.6%(n=72) of C.C.A.P had more sexual partners during their lifetime (see figure 8)

Somse et al (1993) did a research on Central African Republic and found that 20% of women belonging to Roman Catholic Church had multiple partners as compared to 5.5% of Moslems and 14.8% of C.C.A.P.

Another research done by Catania et al (1993) supports that there is no relationship between religion and number of sexual partners. They found that most whites despite

that they did not belong to religion had only one sexual partner within the period of 12 months.

These contrary results might be due to lack of variation in the sample. There were 1.9% (n=5) of Moslem participants as compared to Catholics and protestants. This means that the Moslems misrepresented hence concrete conclusion can not be made on the results found.

In addition, this sample included majority women of whom most of them were married. Since most of the churches or religion and even our social norms advocate a woman to be faithful to one partner, these married women might have affected the results since they might be following these religious teachings and cultural norms of having one partner.

Conclusion

The study has revealed that level of education is related to individual's number of sexual partners. This is evidenced by the fact that those women of high level of education who were assumed to have increased knowledge of HIV /AIDS had more than one sexual partner especially during lifetime. This study has also revealed that religion, religiosity do not determine woman's number of sexual partners. But to some extent, church attendance shows a significant relationship such that those who attended church less than weekly were those who had 2 or more sexual partner. This might be deduced that women who were attending church frequently were the ones who were practising preventing behaviors due to several moral messages that they hear during prayers.

On the other hand it can not be completely concluded that church attendance influences an individual's behavior to prevent from contracting HIV/AIDS since there were other results specifically on 12 months which show that there is no statistically significant hence no relationship exists. Their attendance might be due to peer pressure and for socialisation.

These results have also been affected because many respondents did not answer the questions pertaining to number of sexual partners .For example on average 149 out of 263 were not able to indicate their number of sexual partners. This is because sexual behavior is a secret thing of which most people are reluctant to reveal to avoid being disgraced in the society hence the results do not show the real relationship between the variables .

Therefore, it can be concluded that the variables in this study are not sufficient to achieve change in sexual behavior hence there is need to look at other factors like economic background, gender relations and other complex sociocultural factors.

Recommendations

The researcher recommends that ;

The curriculum must be developed in secondary school to supplement the already existing curriculum of HIV/AIDS so that behavior change should continue even if an individual has higher level of education.

The Ministry of Education should preach behavior change in consideration of culture and social norms that the Malawian community has since if there change within the cultural norms which are detrimental to health the behaviors will also change.

All nurses in all hospital including the health centres should put much emphasis on behavior change when teaching so that everybody should have knowledge of HIV/ AIDS. Churches should work hand in hand with the government to devise a way on how to teach the women in their communities. For example starting small-scale businesses, supporting them on home economics.

Government should advocate women empowerment even in families since this will help to increase their self esteem and feelings of deserving safety hence they will be able to change behavior.

Issues for further Research

This study can be replicated and participants should include women in rural areas,peri urban areas to show variations and true results. Men can also be included in the study since women`s behavior alone is not sufficient as both partners must respond to risk reduction messages.

Topics may include ;

The impact of level of education, perceived risk and culture, religion on safer sex behaviors.

Factors that has contributed to quick spread of HIV/AIDS pandemic in Malawi despite the preaching of preventive behaviors especially among women .

References

Alan Guttmacher Institute (1998) Into New World ,Young Women's Sexual and Reproductive Lives ,Mexico City ,Buenos Aires ,New York .

Baggaley R& Phiri M (1994) Knowledge and attitudes HIV AIDS AND Sexual Practices amongst University Students at the University of Zambia HIV/AIDS Bibliography Lusaka Zambia.

Baingana G & Choi K.H.(1991) Female Partners of AIDS Patient in Uganda, Reported knowledge and Perception and Plan Uganda.

Bertrand J.T, Makani B.W., Djunghu B, [1991] Sexual Behavior and Condom Use in 10 sites of Zaire ,Journal of Sex Research Volume Number 3 ,page 64

Bowd A.D, Loos H.C, (1995) Gender Differences in Adoption of AIDS Preventive Behaviors Implication for Women's AIDS Education Programme, Women`s Health Issues vol.5 The Jacobs Institute of Women's Health Ontario, Canada.

Catania J.A. ,Coates J.C ,Kegelles S ,{1992 }A Test of AIDS Risk Reduction Model, Psychological Correlates of Condom Use in America Cohort Study, Science Magazine America Association of Advancement of Science vol.258, USA .

Catania J.A, Kyung H.C, Dolcini M.M (1994) Extramarital Sex and HIV Risk Behavior among U.S Aldults, Results from the AIDS Behavior Survey , Center for AIDS prevention San Fransisco USA .

Damison H.J ,Zingani M.A (1998) National AIDS Control Program ,Malawi AIDS Cases Surveillance, Lilongwe Malawi page 1

Davis M.C, Carol S.L, Halteman W.A & Stickle M, (1991) Predictors of condom Use and Related Behaviors among first year College Students, Journal of Sex Research vol 30 number 30.

Evian C, [1992] The Socio-Economic Determinants in AIDS Epidemic in South Africa ,a Cycle of Poverty Community AIDS Information and Support Center, Johannesburg .

Horny (1997) Oxford Advanced Learners Dictionary of current English 7th edition,Oxford, University Press London.

Jadack A.R, Hyde S.J, Kellen M (1995)_Gender Knowledge about HIV Risky Sexual Behavior and Safe Sex Practices , Abstract in Nursing and Health, volume 18 [page 313-324]

Kapiga S & Lwihula G, (1996) Predictors of AIDS Knowledge ,Condom Use and High Risk Sexual Behavior among Women in Dar-es—Salaam International Journal of STD and AIDS, volume 5 902-1015

Legard E,Pison G & Llenel C (1996) Knowledge,Attitudes and Perception of AIDS in rural Senegal, Relationship to Sexual Behavior and Behavior Change Journal of Medicine Rapid Science Publishers, U.S.A.

Malawi Knowledge, Attitudes and Practices in Health Survey (MKAPHS, 1997) National Statistical Office, Zomba, Malawi; Macro Macro International Inc Claverton Maryland U.S.A.

Mkumba S Edwards J (1992) Study into the Attitudes, Knowledge and Behavior of students at higher institutions of Learning at Natural Resources Development College HIV/AIDS Bibliography Lusaka Zambia.

NoorMohammed S.E.(1996) AIDS Disaster in Muslim World Journal of Islamic Medical Assessment Vol 28 Number 2 North America.

Odebiyi J,(1992) Conception of AIDS Among Nigerian Students in a Nigerian University Journal Roy Social Health Ife Nigeria.

Schnell J.D, Galavotti C & O'Reily K.R (1993) An evaluation of Sexual Behavior change using statistical and cognitive models Statistics in Medicine volume 12 ,219-227 U.S.A.

Schopper D,Doussanjouse J.O,(1993) Sexual Behavior Relevant to Transmission in rural African Population, Social Science Medicine volume 37 Great Britain.

Sikkema K.J, Winnet R.A & Lombard D.N (1995) Students, AIDS Development and Evaluation of an HIV Risk Reduction Program for Female College Education and Prevention Public Health Reports, The Gullford Press U.S.A

Somse P, Chapko M.K, Hawkins R.V (1993) Multiple Sexual Partners, National HIV/AIDS Survey in the Central African Republic AIDS 7 57-58 Current Science Limited Department of Health Sciences , University of Washington USA

Wood G.L & Haber J (1986) Nursing Research Critical Approach and Utilisation 1st edition The Mosby Company U.S.A.

Wenger N.S.Greenberg J.M. & Hilborne L.H. (1992) Effect of HIV Antibody Testing and AIDS Education on Communication about HIV Risk and Sexual Behavior Animals of Internal Medicine Los Angels California.

Appendix I

Questionnaire

What is your date of birth? Day Month Year

Do you belong to a religion or church? Yes ( )

No ( )

What is your current marital status? 1 Married ( )

2 Not married (Never married, Separated or widowed ( )

What is your highest level of education you have completed?

1 1-8 years of primary ( )

2 J.C.E. ( )

3 M.S.C.E. ( )

4 1 or more years of college

What is your tribe or ethnic identification?

1 Chewa ( )

2 Tumbuka ( )

3 Lomwe ( )

4 Ngoni ( )

5 Yao ( )

6 Others Specify ( )

What religion or denomination do you belong to?

1 Moslem ( )

2 Catholic ( )

3 C.C.A.P ( )

4 Others specify ( )

How often do you usually attend religious services?

1 More than once a week ( )

2 Weekly ( )

3 Several times a month ( )

4 A few times a month ( )

5 A few times a year ( )

6 Once a year or less ( )

7 Never ( )

Compared to other people ,how religious do you consider yourself?

1 Much more religious than most ( )

2 more religious than most ( )

3 About average ( )

4 Less religious than most ( )

5 Not religious ( )

Besides your main partner, how many other partner did you had sex with

1 During the last 2 months? ( )

2 During the last 12 months? (

3 During your whole life ? ( )

--

APPENDIX. ii.

Letters

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The University Registrar

University Office

P.O.Box 278

Zomba

Dear Sir,

REQUEST TO CONDUCT A STUDY AT KAMUZU COLLEGE OF NURSING.

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.
In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask permission to conduct the study at Kamuzu College of Nursing. I intend to conduct a study on the impact of level of education, religion religiosity religious attendance on women's number of sexual partners.The subjects of the study will include students at Lilongwe campus only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Muthali K.N. Margret (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Principal

K.C.N.

P/Bag 1

Lilongwe.

Dear sir/madam,

REQUEST TO CONDUCT A STUDY AT KAMUZU COLLEGE OF NURSING.

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.

In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask permission to conduct the study at Kamuzu college of Nursing. I intend to conduct a study on effects of religion and marital status on attitudes of women towards condom use.

The subjects of the study will include female students at Lilongwe campus only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Margret (Miss)

Supervisor_____ Signature_____

University Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Principal

Blantyre Teacher's Training College

P.O.Box 505,

Blantyre.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COLLEGE

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.
In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your college. I intend to conduct a study on the impact of level of education, religion religiosity and religious attendance on number of sexual partners.

The subjects of the study will include female students only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Magret (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Principal

Lilongwe teacher's training college

Lilongwe.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COLLEGE.

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course degree in Nursing.

In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your college. I intend to conduct a study on the impact of level of education religion religiosity and religious attendance on number of sexual partners.

The subjects of the study will include only female students. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Margret (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Manager

Commercial Bank of Malawi

Blantyre Branch

Blantyre.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COMPANY

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.
In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your company. I intend to conduct a study on the impact of level of education religion religiosity religious attendance and number if sexual partners.

The subjects of the study will include female bank workers only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Magret (Miss)

Supervisor_____ Signature_____

--

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Manager

National Bank of Malawi

Lilongwe Branch

Lilongwe.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COMPANY

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.
In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your company. I intend to conduct a study on the impact of level of education religion religiosity and religious attendance on number of sexual partners. The subjects of the study will include female bank workers only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Margret (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Manager

New Building Society

Lilongwe Branch

Lilongwe.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COMPANY

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.
In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your company. I intend to conduct a study on the impact of level of education, religion, religiosity and religious attendance on women's number of sexual partners.

The subjects of the study will include female bank workers only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Munthali K.N. Margret (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

The Manager

New Building Society

Blantyre Branch

Blantyre.

Dear Sir,

REQUEST TO CONDUCT A STUDY AT YOUR COMPANY

I am a student at Kamuzu College of Nursing undergoing a Bachelor of Science course in Nursing.

In partial fulfillment of the course, I am required to conduct a research study. The purpose of this letter is therefore to ask for permission to conduct the study at your company. I intend to conduct a study on the impact of level of education religion religiosity and religious attendance on number of sexual partners.

The subjects of the study will include female bank workers only. The subjects will be required to complete a questionnaire.

I will be grateful if my request meets your favorable consideration.

Yours truly,

Margret K.N. Munthali (Miss)

Supervisor_____ Signature_____

University of Malawi

Kamuzu College of Nursing

Private Bag 1

Lilongwe.

Dear Sir,

CONSENT TO PARTICIPATE IN STUDY.

I am a student at Kamuzu College of Nursing currently studying a Bachelor of Science in Nursing. In partial fulfillment of this course, I am undertaking some research. I intend to conduct a study on the impact of level of education, religion and religious attendance on number of women's sexual partners.

I am therefore requesting you to participate in this study. You will be required to complete a questionnaire I designed. Please feel free to express any pertinent views and ideas that have not been covered by the questionnaire. Such additional information can be written at the back of the questionnaire.

I would like to assure you that all your contributions will be treated in strict confidence. You will not be required to indicate your name on the questionnaire.

Indicate your acceptance to participate in this research by signing below.

Thanks for your co-operation and good luck,

Participants signature .....

Yours faithfully,

Margret K. N. Munthali (Miss).....

.....

APPENDIX 3

Time Line

YEAR	2000							2001		
MONTHS	Jun e	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
ACTIVITY										
Writing Proposal										
Sampling										
Data Collection										
Data analysis										
Writing a Dissertation										
Dissemination of the results.										