

- **Knowledge about HIV transmission and prevention:** Awareness of HIV/AIDS is almost universal in Sri Lanka. Ninety-three percent of ever-married women aged 15-49 have heard about HIV/AIDS.
- **Comprehensive knowledge:** Only 33 percent of ever-married women aged 15-49 have comprehensive knowledge about HIV/AIDS prevention and transmission.
- **HIV among young adults:** Among young (15-24) ever-married women, comprehensive knowledge about HIV/AIDS is very low (24%). Among ever-married women aged 18-24, 32% reported having their first sexual intercourse before age 18.
- **Knowledge of mother-to-child transmission:** Over 70 percent of ever-married women aged 15-49, are aware that HIV can be transmitted through breastfeeding (73 percent) and another 63 percent know that mother-to-child transmission (MTCT) can take place during delivery.
- **Coverage of HIV tests:** Only 10 percent of all ever-married women, were tested for HIV during the last 12 months before the survey and of those tested, only 73 percent received the results from the test.

Acquired immune deficiency syndrome (AIDS) is caused by the human immune deficiency virus (HIV), which weakens the immune system and makes the body susceptible to and unable to recover from other opportunistic diseases that can lead to death. The predominant modes of HIV transmission are through sexual contact; mother-to-child transmission, in which the mother passes the virus to her child during pregnancy, delivery, or breastfeeding; use of contaminated blood supplies for transfusions; and injections using contaminated needles or syringes.

Since the identification of the first HIV infected Sri Lankan in 1987, a cumulative total of 2,308 HIV positive persons have been reported up to the end of 2015. In 2015, 235 HIV cases had been reported to the National STD/AIDS control program (NSACP) which is responsible for coordinating, planning and implementing the HIV National Strategic Plan and the AIDS Policy in the country. However, the reported numbers represent only a fraction of HIV infected people in the country, as many infected persons may perhaps not be aware of their HIV status and in addition, stigma and discrimination towards HIV infected people adversely affect voluntary testing for HIV (2015, Annual Report NSACP).

HIV infection is not a notifiable condition in Sri Lanka. Therefore, HIV case reporting is not a robust method of knowing the HIV situation in the country. However, NSACP is one of the main sources of data available in the country. Since Western-Blot, the confirmatory test for HIV, is available only at the National reference laboratory of the NSACP, all confirmed HIV positive cases get reported. However, it is not uncommon to find incomplete basic epidemiological information about the infected persons. Further, another concern is ‘double counting’ as some persons get tested more than once after the initial test results reveal that they are HIV positive, in order to recheck their HIV status. However, NSACP has taken all possible efforts to avoid these errors by rechecking laboratory data.

The 2016 SLDHS questionnaire included a series of questions that ask about respondents’ knowledge of HIV prevention, misconceptions about HIV transmission, and knowledge of mother to child transmission (MTCT) of HIV and means to prevent it. The survey also included questions relating to HIV testing such as whether the respondent had ever been tested for HIV and received results. Respondents were also asked their experiences with regard to symptoms of sexually transmitted infections (STIs) and their health seeking behaviors relating to STIs. The chapter also highlights HIV/AIDS knowledge and patterns of sexual behav-



ior among young people, since young adults are more likely to be in the process of establishing patterns of sexual behaviors and hence are the primary target of many prevention strategies.

In the survey, information was collected from ever-married women aged 15-49, about knowledge, attitudes and behaviors towards HIV/AIDS; and testing. Data are presented at the national level as well as within different subgroups according to background characteristics. Information provided in this chapter will be useful for service providers in identifying various socio-economic as well as geographic subgroups who are lacking knowledge on HIV/AIDS and hence are at risk of being infected.

12.1 HIV/AIDS KNOWLEDGE, TRANSMISSION, AND PREVENTION METHODS

12.1.1. AWARENESS OF HIV/AIDS

The 2016 SLDHS asked respondents whether they have heard of an illness called AIDS. Table 12.1 shows the percentage of ever-married women aged 15-49 who have heard of AIDS, by background characteristics. In Sri Lanka, knowledge of AIDS is virtually universal. There is no noticeable variation in awareness by respondents' background characteristics. This is consistent with the 2006-07 SLDHS. In the absence of a cure or a vaccine for HIV/AIDS, preventive measures contribute immensely to reducing the spread of the infection. This can be achieved only if individuals have accurate knowledge about the infection.

Although ever-married women from urban and rural areas have a very high awareness about HIV/AIDS (94 percent for both groups), only 60 percent of their counterparts living in the estate areas are aware of HIV/AIDS. Only 72 percent of ever-married women in Nuwaraeliya district—which predominantly consists of estates—have heard of the disease, compared with well over 90 percent of women in all the other districts (except Vavuniya, Killinochchi, and Batticaloa). Among ever-married women age 15-24, 90 percent have heard about HIV/AIDS, a very positive step toward progress in the prevention of HIV/AIDS.

Moreover, there is a positive association between the level of knowledge and both education level and household wealth.

Table 12.1 Knowledge of HIV or AIDS

Percentage of ever-married women age 15-49 who have heard of AIDS, by background characteristics, Sri Lanka 2016

Background characteristic	Women	
	Have heard of AIDS	Number of respondents
Age		
15-24	90.2	1,639
15-19	83.3	229
20-24	91.4	1,410
25-29	93.9	2,620
30-39	93.9	7,560
40-49	91.7	6,483
Marital status		
Married/Living together	93.1	17,257
Divorced/Separated/Widowed	87.7	1,045
Residence		
Urban	95.5	2,855
Rural	93.8	14,737
Estate	60.4	710
District		
Colombo	97.6	1,731
Gampaha	97.3	1,845
Kalutara	94.9	1,104
Kandy	90.6	1,223
Matale	98.0	490
Nuwaraeliya	71.7	572
Galle	94.1	935
Matara	90.2	718
Hambantota	93.9	556
Jaffna	97.4	471
Mannar	93.2	81
Vavuniya	81.3	136
Mullaitivu	93.0	81
Killinochchi	77.2	94
Batticaloa	84.0	531
Ampara	93.2	731
Trincomalee	94.3	362
Kurunegala	93.7	1,592
Puttalam	94.7	664
Anuradhapura	93.0	984
Polonnaruwa	93.4	399
Badulla	80.6	735
Monaragala	93.8	485
Ratnapura	91.9	1,084
Kegalle	98.5	698
Education		
No education	52.9	285
Passed Grade 1-5	71.8	1,257
Passed Grade 6-10	91.7	8,130
Passed G.C.E.(O/L) or equivalent	96.9	4,044
Passed G.C.E.(A/L) or equivalent	99.3	3,731
Degree and above	99.6	856
Wealth quintile		
Lowest	80.4	3,390
Second	91.7	3,694
Middle	95.4	3,840
Fourth	97.1	3,817
Highest	98.4	3,561
Total 15-49	92.8	18,302

Knowledge of HIV/AIDS among women with higher education is almost universal, whereas only 53 percent of women who have no education have heard of HIV/AIDS. Although, this percentage has not changed since the 2006-07 SLDHS, the size of the “no education” category in the sample has substantially declined.

12.1.2 KNOWLEDGE OF HIV PREVENTION

Among adults, HIV is mainly transmitted through sexual contact between an infected partner and an uninfected partner. Most HIV/AIDS programs have been promoting mutual monogamy and using condoms as the primary ways of avoiding HIV infection. Understanding and effectively promoting these behaviors are crucially important in combating the spread of HIV/AIDS. In the 2016 SLDHS, if a respondent reported that she had heard of HIV/AIDS, she was asked questions on whether limiting sexual intercourse to one uninfected partner (being faithful), and correct and consistent use of condoms can reduce the chances of getting HIV/AIDS.

Table 12.2 shows that knowledge about condom use and limiting sexual partners as methods of avoiding HIV transmission is generally high and widespread. Almost 68 percent of ever-married women know that the risk of getting HIV can be reduced by using condoms. Seventy-nine percent of ever-married women know that limiting sexual intercourse to one uninfected partner can reduce the chances of contracting HIV. Sixty-three percent of ever-married women are aware of both of these prevention methods. Young ever-married women aged 15-19 are least likely among all age groups to be aware of both prevention methods (46 percent), an important finding for policy and program development.

Knowledge of HIV prevention is higher among women who are currently married than among those who are divorced, separated, or widowed. Compared with other sectors, knowledge is really low among ever-married women in the estate sector, less than 35 percent of whom know that the risk of getting HIV transmission can be reduced by using condoms, and only 40 percent of whom know it can be reduced by limiting sexual intercourse to one partner. Similarly, the lowest level of knowledge is observed in Trincomalee, Nuwaraeliya, Batticaloa and Badulla districts.



Table 12.2 Knowledge of HIV prevention methods

Percentage of women age 15-49 who, in response to prompted questions, say that people can reduce the risk of getting HIV by using condoms every time they have sexual intercourse, and by having one sex partner who is not infected and has no other partners, by background characteristics, Sri Lanka 2016

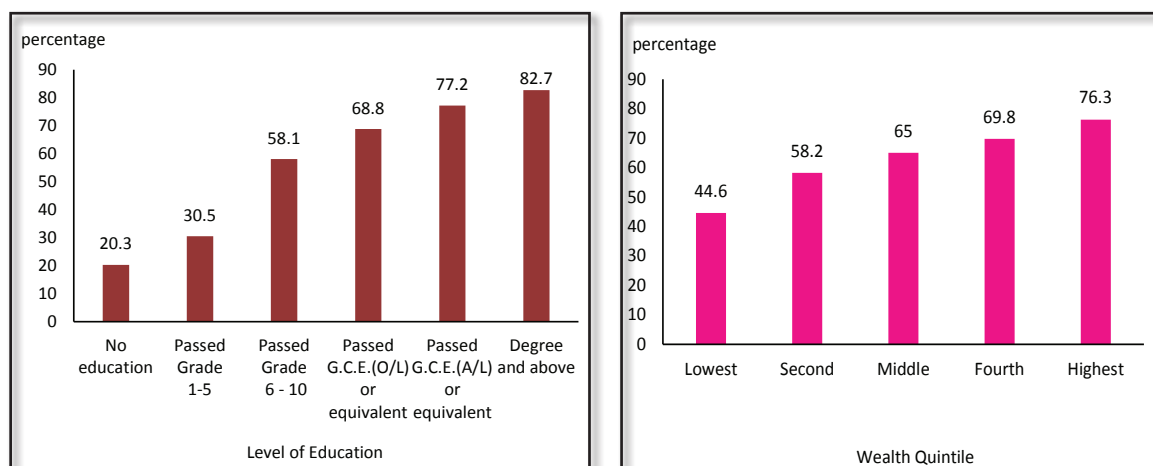
Background characteristic	Women			Number of women
	Using condoms ¹	Limiting sexual intercourse to one uninfected partner ²	Using condoms and limiting sexual intercourse to one uninfected partner ^{1,2}	
Age				
15-24	60.3	73.0	54.7	1,639
15-19	51.4	62.8	45.7	229
20-24	61.7	74.7	56.2	1,410
25-29	68.2	80.2	63.1	2,620
30-39	70.3	80.5	65.6	7,560
40-49	66.4	77.8	62.2	6,483
Marital status				
Married/Living together	68.2	79.4	63.6	17,257
Divorced/Separated/Widowed	60.1	70.3	54.8	1,045
Residence				
Urban	68.2	81.1	64.9	2,855
Rural	69.3	80.1	64.3	14,737
Estate	34.0	43.0	30.0	710
District				
Colombo	71.9	83.8	68.4	1,731
Gampaha	74.3	88.9	70.4	1,845
Kalutara	66.0	83.1	62.3	1,104
Kandy	60.7	73.7	54.7	1,223
Matale	68.7	80.7	62.7	490
Nuwaraeliya	44.5	56.4	41.6	572
Galle	77.5	86.2	73.7	935
Matara	75.7	84.9	74.8	718
Hambantota	65.6	78.0	61.4	556
Jaffna	67.1	77.6	61.7	471
Mannar	63.8	64.0	60.2	81
Vavuniya	61.9	69.3	58.4	136
Mullaitivu	68.0	80.3	62.3	81
Killinochchi	58.6	61.4	51.1	94
Batticaloa	46.0	61.7	42.7	531
Ampara	58.4	67.9	55.8	731
Trincomalee	47.4	62.3	39.6	362
Kurunegala	68.2	81.4	63.9	1,592
Puttalam	69.2	79.1	60.1	664
Anuradhapura	80.0	82.5	75.9	984
Polonnaruwa	67.5	79.3	62.1	399
Badulla	52.7	63.4	46.5	735
Monaragala	73.7	86.6	70.0	485
Ratnapura	70.6	82.5	65.6	1,084
Kegalle	81.0	77.3	70.1	698
Education				
No education	24.0	32.5	20.3	285
Passed Grade 1-5	35.3	46.4	30.5	1,257
Passed Grade 6-10	62.8	76.0	58.1	8,130
Passed G.C.E.(O/L) or equivalent	74.7	83.4	68.8	4,044
Passed G.C.E.(A/L) or equivalent	81.0	91.2	77.2	3,731
Degree and above	85.8	94.0	82.7	856
Wealth quintile				
Lowest	48.8	61.6	44.6	3,390
Second	63.3	74.6	58.2	3,695
Middle	70.4	81.3	65.0	3,838
Fourth	74.4	85.7	69.8	3,816
Highest	80.2	89.8	76.3	3,562
Total 15-49	67.7	78.8	63.1	18,302

¹ Using condoms every time they have sexual intercourse

² Partner who has no other partners

As shown in Figure 12.1, level of education has a strong positive association with the level of knowledge of the two separate HIV prevention methods, ranging from 15-35 percent for uneducated ever-married women up to 80-90 percent for ever-married women with some higher education. Similarly, ever-married women from the richest households have broader knowledge of HIV prevention methods compared with ever-married women in the lower wealth quintiles, although the differences are not as large as for education.

Figure 12.1 Knowledge of HIV/ AIDS among age 15-49 ever-married women by education and wealth quintile



12.1.3 REJECTION OF MISCONCEPTIONS ABOUT HIV/AIDS

Correct knowledge of HIV/AIDS not only requires a person to know about the methods of prevention, but also to know which commonly held beliefs are false. To investigate whether respondents have correct knowledge about methods of prevention of HIV/AIDS, the 2016 SLDHS included questions related to misconceptions about HIV transmission. Respondents were asked whether it is possible for a healthy-looking person to have HIV and whether HIV is transmitted through mosquito bites or sharing food with a person who has HIV/AIDS.

Seventy-one percent the ever-married women aged 15-49 agreed that a healthy-looking person can have HIV. About HIV transmission, 63 percent of women said that HIV cannot be transmitted by mosquito bites; and only 66 percent of women said that a person cannot become infected by sharing food with a person who has AIDS. Altogether, 42 percent indicated that a healthy-looking person can have HIV and rejected the two most common local misconceptions (HIV can be transmitted by mosquito bites and a person can become infected by sharing food with a person who has HIV).

The data collected in the 2016 SLDHS allow for the assessment of comprehensive knowledge about HIV/AIDS among respondents. Comprehensive knowledge is defined as knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about HIV transmission. According to the SLDHS in 2016, comprehensive knowledge of HIV/AIDS among women aged 15-49 is 33 percent in Sri Lanka.

Table 12.3 Comprehensive knowledge about HIV

Percentage of women age 15-49 who say that a healthy-looking person can have HIV and who, in response to prompted questions, correctly reject local misconceptions about transmission or prevention of HIV, and the percentage with a comprehensive knowledge about HIV, according to age, Sri Lanka 2016

HIV, according to age, Sri Lanka 2010						
	Percentage of respondents who say that:			Percentage who say that a healthy looking person can have HIV and who reject the two most common local miscon- ceptions ¹	Percentage with a compre- hensive knowledge about HIV ²	Number of respondents
Age	A healthy-looking person can have HIV	HIV cannot be transmitted by mosquito bites	A person cannot become infected by sharing food with a person who has HIV			
WOMEN						
Age						
15-24	65.7	59.2	59.5	34.2	24.0	1,639
15-19	57.3	47.3	49.7	25.8	16.4	229
20-24	67.1	61.2	61.0	35.5	25.2	1,410
25-29	73.1	62.1	68.5	42.5	33.0	2,620
30-39	72.7	64.9	69.4	43.9	34.8	7,560
40-49	69.3	61.5	62.5	40.2	32.6	6,483
Residence						
Urban	70.2	64.8	66.4	40.5	32.3	2,855
Rural	72.7	64.1	67.8	43.2	34.2	14,737
Estate	36.6	28.3	26.3	10.6	6.1	710
District						
Colombo	76.4	68.5	69.8	45.7	37.6	1,731
Gampaha	81.8	68.0	77.6	51.7	40.8	1,845
Kalutara	75.4	63.3	68.7	42.6	31.9	1,104
Kandy	68.4	60.1	64.2	37.3	27.2	1,223
Matale	81.7	61.1	64.9	40.5	30.8	490
Nuwaraeliya	51.2	37.1	38.0	20.2	13.9	572
Galle	81.3	63.8	73.3	46.7	40.8	935
Matara	79.1	76.6	78.2	62.3	54.9	718
Hambantota	73.7	61.0	71.5	45.9	33.3	556
Jaffna	45.8	57.2	43.5	13.5	10.9	471
Mannar	25.8	66.3	55.3	12.6	8.6	81
Vavuniya	43.1	59.5	52.8	24.1	17.6	136
Mullaitivu	53.4	57.6	40.3	21.9	17.9	81
Killinochchi	42.7	54.8	42.6	15.7	11.3	94
Batticaloa	24.6	55.1	43.5	6.0	02.6	531
Ampara	71.9	48.5	49.4	33.1	22.9	731
Trincomalee	45.2	60.1	54.1	22.6	15.8	362
Kurunegala	76.0	66.2	69.2	46.4	37.1	1,592
Puttalam	79.4	61.5	62.7	42.6	31.8	664
Anuradhapura	69.0	72.7	83.1	59.5	50.5	984
Polonnaruwa	75.6	59.8	63.1	38.4	29.4	399
Badulla	65.5	45.3	45.4	27.1	19.6	735
Monaragala	68.6	72.8	78.0	47.5	34.4	485
Ratnapura	75.1	54.7	64.7	38.7	31.0	1,084
Kegalle	71.9	80.0	75.1	53.1	45.6	698
Education						
No education	30.8	16.8	19.4	7.5	4.3	285
Passed Grade 1-5	39.1	28.5	28.6	10.4	6.6	1,257
Passed Grade 6-10	66.6	58.0	58.4	33.7	25.4	8,130
Passed G.C.E.(O/L) or equivalent	74.5	67.9	74.1	45.6	35.8	4,044
Passed G.C.E.(A/L) or equivalent	86.3	78.1	84.6	61.7	51.0	3,731
Degree and above	87.4	82.1	88.0	66.2	57.5	856
Wealth quintile						
Lowest	49.5	45.6	43.1	21.1	14.4	3,390
Second	66.6	56.8	59.2	34.0	26.1	3,695
Middle	74.0	64.9	69.6	43.8	34.3	3,838
Fourth	78.1	68.9	74.5	48.4	39.0	3,816
Highest	84.8	76.4	81.7	58.9	49.1	3,562
Total 15-49	70.9	62.8	66.0	41.5	32.8	18,302

¹ Two most common local misconceptions: HIV CAN be transmitted by mosquito bites and a person CAN become infected by sharing food with a person who has HIV

² Comprehensive knowledge means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about AIDS transmission or prevention.

12.2 KNOWLEDGE OF PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV

Prevention of mother-to-child transmission (PMTCT) of HIV is a key component to reduce of transmission of HIV infection. Prevention of mother to child transmission of HIV is aided by encouraging pregnant women to know their HIV status. In the survey, to assess PMTCT knowledge, respondents were asked whether HIV can be transmitted from mother to child during child birth and by breast feeding.

Table 12.4 shows that in the 2016 SLDHS, over 70 percent of ever-married women aged 15-49, are aware that HIV can be transmitted through breastfeeding (73 percent). Sixty-three percent know that mother-to-child transmission (MTCT) can happen during delivery.

In Sri Lanka prior to scaling up of the PMTCT program, two premier maternity hospitals have been screening antenatal mothers for HIV since early 2000. Antenatal HIV prevalence is taken as a proxy prevalence of the general population. However, these two hospitals represent urban antenatal women and their HIV prevalence is considered higher than the rural antenatal prevalence (2015, Annual Report NSACP).

Table 12.4 Knowledge of prevention of mother-to-child transmission of HIV

Percentage of women age 15-49 who know that HIV can be transmitted from mother to child during delivery, by breastfeeding, and by all two means, according to age, Sri Lanka 2016

Age	Percentage who know that HIV can be transmitted from mother to child:			Number of respondents
	During delivery	By breastfeeding	By all two means	
Age				
15-24	65.4	59.2	53.9	1,639
..15-19	55.1	53.1	47.8	229
..20-24	67.1	60.3	55.0	1,410
25-29	74.4	63.9	59.0	2,620
30-39	75.0	64.3	60.0	7,560
40-49	72.2	62.6	58.4	6,483
Residence				
Urban	73.3	60.0	55.1	2,855
Rural	74.6	65.0	60.6	14,737
Estate	41.3	37.6	35.0	710
District				
Colombo	72.8	55.8	51.2	1,731
Gampaha	80.9	68.0	63.1	1,845
Kalutara	74.3	61.4	57.1	1,104
Kandy	70.2	57.7	54.2	1,223
Matale	81.8	72.3	66.9	490
Nuwaraeliya	52.5	46.8	43.9	572
Galle	83.8	72.0	68.2	935
Matara	76.3	60.2	56.2	718
Hambantota	69.8	60.1	55.3	556
Jaffna	73.7	68.0	63.0	471
Mannar	75.9	78.6	74.4	81
Vavuniya	66.3	65.7	61.9	136
Mullaitivu	73.3	69.7	66.0	81
Killinochchi	62.8	60.4	55.0	94
Batticaloa	66.9	69.0	62.3	531
Ampara	73.9	70.4	68.5	731
Trincomalee	63.7	66.5	56.3	362
Kurunegala	71.9	66.4	62.2	1,592
Puttalam	77.8	72.1	65.4	664
Anuradhapura	62.1	54.5	52.1	984
Polonnaruwa	78.3	67.2	62.9	399
Badulla	64.2	51.7	47.6	735
Monaragala	73.1	54.8	52.7	485
Ratnapura	77.8	67.1	61.4	1,084
Kegalle	75.2	68.3	63.1	698
Education				
No education	29.9	29.0	26.2	285
Passed Grade 1-5	46.1	45.8	41.4	1,257
Passed Grade 6-10	69.1	63.7	59.0	8,130
Passed G.C.E.(O/L) or equivalent	78.2	68.5	63.4	4,044
Passed G.C.E.(A/L) or equivalent	84.8	64.7	61.0	3,731
Degree and above	89.7	63.7	61.1	856
Wealth quintile				
Lowest	58.7	54.8	50.6	3,390
Second	69.0	63.4	58.5	3,695
Middle	74.8	66.0	61.3	3,838
Fourth	78.6	68.0	63.2	3,816
Highest	83.1	62.8	59.2	3,562
Total 15-49	73.1	63.2	58.7	18,302



12.3 COVERAGE OF HIV TESTING

In the case of persons who are HIV negative, knowledge of their HIV status helps in making specific decisions that will reduce the risk of becoming HIV positive and enable them to remain HIV free. For those who are HIV positive, knowledge of their HIV status allows them to live an affirming life, protecting their sexual partners, accessing care and treatment, and planning for the future. To assess awareness and coverage of prior HIV testing behavior, all ever-married women were asked whether they had ever been tested for HIV. If they said they had been tested for HIV, respondents were asked if they had received the results of their last test.

Table 12.5 Coverage of prior HIV testing: Women

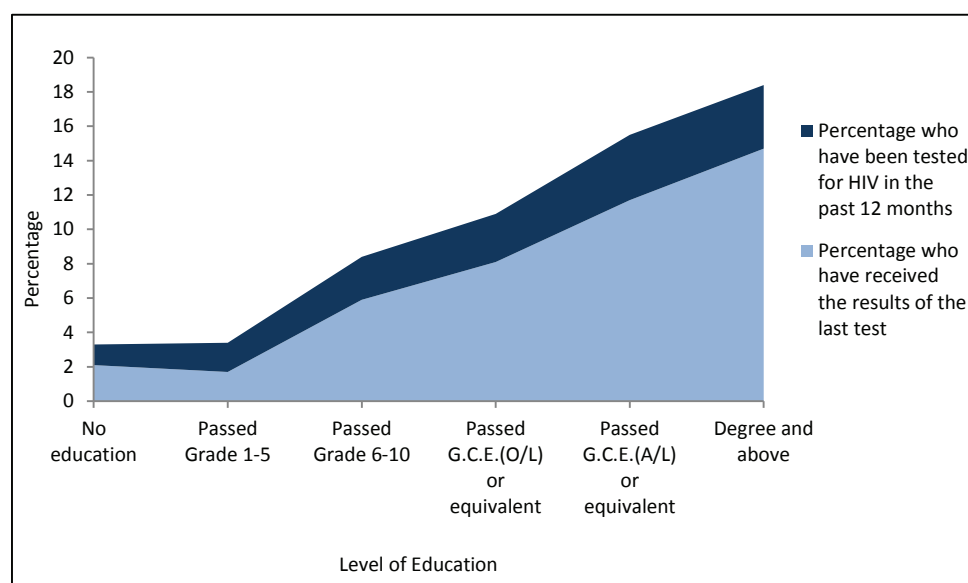
Percentage of women age 15-49 who know where to get an HIV test, and the percentage of women age 15-49 who were tested in the past 12 months and received the results of the last test, according to background characteristics, Sri Lanka 2016

Background characteristic	Percentage who have been tested for HIV in the past 12 months	Percentage who have received the results of the last test	Number of women
Age			
15-24	15.9	12.5	1,639
15-19	13.2	9.4	229
20-24	16.3	13.0	1,410
25-29	19.5	15.3	2,620
30-39	12.0	8.7	7,560
40-49	3.5	2.1	6,483
Marital status			
Married/Living together	10.8	8.0	17,257
Divorced/Separated/Widowed	4.2	2.5	1,045
Residence			
Urban	12.0	9.9	2,855
Rural	10.3	7.4	14,737
Estate	7.4	4.7	710
District			
Colombo	13.7	12.3	1,731
Gampaha	9.6	8.1	1,845
Kalutara	11.8	8.4	1,104
Kandy	11.5	8.7	1,223
Matale	3.1	2.6	490
Nuwaraeliya	5.1	4.6	572
Galle	11.6	10.1	935
Matara	9.8	7.8	718
Hambantota	9.9	8.6	556
Jaffna	9.9	8.4	471
Mannar	13.5	7.5	81
Vavuniya	6.5	5.4	136
Mullaitivu	6.2	5.2	81
Killinochchi	11.4	9.4	94
Batticaloa	5.4	3.9	531
Ampara	3.9	2.6	731
Trincomalee	7.8	4.2	362
Kurunegala	8.1	5.7	1,592
Puttalam	15.3	6.7	664
Anuradhapura	9.4	7.7	984
Polonnaruwa	10.9	6.5	399
Badulla	9.4	7.7	735
Monaragala	8.5	6.9	485
Ratnapura	18.1	8.0	1,084
Kegalle	15.0	9.5	698
Education			
No education	3.3	2.1	285
Passed Grade 1-5	3.4	1.7	1,257
Passed Grade 6-10	8.4	5.9	8,130
Passed G.C.E.(O/L) or equivalent	10.9	8.1	4,044
Passed G.C.E.(A/L) or equivalent	15.5	11.7	3,731
Degree and above	18.4	14.7	856
Wealth quintile			
Lowest	7.9	5.5	3,390
Second	8.9	6.5	3,694
Middle	10.2	7.2	3,840
Fourth	12.4	9.1	3,817
Highest	12.5	9.8	3,561
Total 15-49	10.4	7.6	18,302

Tables 12.5 and Figure 12.2 present information on HIV testing among ever-married women. One in ten women aged 15-49 in Sri Lanka (10 percent) have ever been tested for HIV and 73 percent of those have received their results. The percentage of ever-tested for HIV and who received the test results increases with the level of education and the wealth quintile.

As expected the more urbanized the place of residence, the higher the percentage of HIV testing and reporting. In the urban areas, 90 percent of the ever-married women tested received their results, compared to 72 percent in those of the rural sector, and only 63 percent for the estates sector residents. Likewise, the residents of Colombo and Gampaha registered higher percentages of HIV/AIDS test takers that received their results (90 percent and 85 percent, respectively) compared to about 44 percent in the districts of Puttalam and Ratnapura (Analyzing Table 12.5).

Figure 12.2 Percentage of HIV Testing and Getting Result by Education Levels



12.4 SELF-REPORTING OF SEXUALLY TRANSMITTED INFECTIONS

Sexually transmitted infections (STIs) are closely linked with HIV because they share similar risk factors for partners. In the 2016 SLDHS, ever-married women were asked whether they ever had a sexually transmitted infection or symptoms of an STI with a bad-smelling, abnormal discharge from the vagina or a genital sore or ulcer in the 12 months preceding the survey.

The results presented in Table 12.6 indicate that less than 2 percent of ever-married women aged 15-49 have had an STI or symptoms of an STI, in the past 12 months. There are no important differences in this percentage by marital status or any other background characteristic of the ever-married women.

Table 12.6 Self-reported prevalence of sexually-transmitted infections (STIs) and STIs symptoms

Among women age 15-49 who ever had sexual intercourse, the percentage reporting having an STI and/or symptoms of an STI in the past 12 months, by background characteristics, Sri Lanka 2016

Background characteristic	Percentage of women who reported having in the past 12 months:				
	STI	Bad smelling/ abnormal genital discharge	Genital sore or ulcer	STI/ genital discharge/ sore or ulcer	Number of women who ever had sexual intercourse
Age					
15-24	0.6	0.5	0.5	1.4	1,621
15-19	0.5	0.6	0.5	1.6	224
20-24	0.7	0.5	0.4	1.3	1,397
25-29	0.8	0.7	0.4	1.4	2,599
30-39	0.8	0.5	0.3	1.4	7,545
40-49	0.7	0.5	0.3	1.3	6,469
Marital status					
Married or living together	0.7	0.5	0.3	1.4	17,195
Divorced/separated/widowed	0.7	0.5	0.5	1.5	1,039
Residence					
Urban	0.6	0.7	0.5	1.6	2,840
Rural	0.8	0.5	0.3	1.3	14,687
Estate	0.7	0.4	0.2	1.1	708
District					
Colombo	0.6	0.7	0.6	1.6	1,719
Gampaha	0.4	0.2	0.3	0.8	1,845
Kalutara	1.7	1.3	0.3	2.9	1,104
Kandy	0.5	0.8	0.1	1.4	1,208
Matale	0.7	0.8	0.5	1.7	490
Nuwaraeliya	1.2	0.1	0.0	1.2	572
Galle	0.6	0.3	0.3	0.6	935
Matara	1.6	0.1	0.0	1.8	718
Hambantota	0.5	0.1	0.0	0.7	555
Jaffna	0.2	0.4	0.2	0.7	470
Mannar	0.2	0.0	0.0	0.2	81
Vavuniya	0.0	0.0	0.0	0.0	136
Mullaitivu	0.0	0.0	0.0	0.0	81
Killinochchi	0.0	0.0	0.0	0.0	94
Batticaloa	0.2	0.4	0.0	0.4	529
Ampara	0.1	0.3	0.1	0.4	731
Trincomalee	0.3	1.3	0.4	1.7	358
Kurunegala	1.1	0.3	0.4	1.6	1,572
Puttalam	2.1	1.1	1.3	3.0	664
Anuradhapura	1.3	0.5	0.4	2.0	983
Polonnaruwa	0.6	0.0	0.0	0.6	399
Badulla	0.0	0.0	0.0	0.0	724
Monaragala	0.5	0.0	0.0	0.5	485
Ratnapura	0.5	2.1	0.8	3.0	1,084
Kegalle	0.3	0.2	0.3	0.8	698
Education					
No education	0.4	1.0	0.3	1.4	285
Passed Grade 1-5	0.2	0.3	0.2	0.5	1,256
Passed Grade 6-10	0.7	0.5	0.4	1.3	8,110
Passed G.C.E.(O/L) or equivalent	0.7	0.5	0.3	1.4	4,034
Passed G.C.E.(A/L) or equivalent	1.0	0.7	0.3	1.8	3,701
Degree and above	1.0	0.7	0.4	1.9	848
Wealth quintile					
Lowest	0.6	0.4	0.3	1.0	3,385
Second	0.9	0.6	0.2	1.4	3,680
Middle	0.6	0.7	0.3	1.4	3,830
Fourth	0.9	0.5	0.4	1.6	3,799
Highest	0.7	0.6	0.3	1.5	3,541
Total 15-49	0.7	0.5	0.3	1.4	18,235

12.5 HIV/AIDS KNOWLEDGE AMONG YOUTH

Younger people are often at a higher risk of contracting STIs, as they are more likely to experiment with sex before marriage. Therefore, condom use among young adults plays an important role in preventing the transmission of HIV and other sexually transmitted infections, as well as unwanted pregnancies. At the same time, they may be using condoms during sexual intercourse and having more partners, expanding the risks of exposure to HIV and other STI infections. These risks can be reduced by increasing, among young

people, the comprehensive knowledge about STIs and of HIV in particular.

In Sri Lanka, over 90 percent of ever-married women aged 15-24 have heard about HIV or AIDS, (Table 12.1) and 24 percent of them indicated having comprehensive knowledge about AIDS, substantially less than the other age groups. Table 12.7 shows the levels of comprehensive knowledge about HIV or AIDS among ever-married women aged 15-24 according to background characteristics. The level of comprehensive knowledge about HIV increases with age and level of education of the woman. It is also higher among those residents of the rural sector (26 percent) compared to those of the estates sector (only 8 percent).

Table 12.7 Comprehensive knowledge about HIV among young people		
Percentage of young women age 15-24 with comprehensive knowledge about HIV, according to background characteristics, Sri Lanka 2016		
Background characteristic	Women Percentage with comprehensive knowledge of AIDS ¹	Number of respondents
Age		
15-19	16.4	229
15-17	(11.4)	39
18-19	17.4	190
20-24	25.2	1,410
20-22	26.5	689
23-24	24.0	721
Marital status		
Ever married	24.0	1,639
Residence		
Urban	19.6	222
Rural	25.6	1,346
Estate	8.3	71
Education		
No education	*	2
Passed Grade 1-5	(4.1)	32
Passed Grade 6-10	18.9	867
Passed G.C.E.(O/L) or equivalent	26.4	477
Passed G.C.E.(A/L) or equivalent	39.2	251
Degree and above	*	9
Total	24.0	1,639
¹ Comprehensive knowledge means knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chance of getting HIV, knowing that a healthy-looking person can have HIV, and rejecting the two most common local misconceptions about AIDS transmission or prevention of HIV. The components of comprehensive knowledge are presented in Tables 13.1, and 13.2.		

12.6 AGE OF FIRST SEXUAL INTERCOURSE AMONG YOUTH

Marriageable age (or marriage age) is the minimum age at which a person is allowed by law to marry, either as a right or subject to parental or other forms of consent. Although, age and other prerequisites to marriage vary between jurisdictions, marriage age is often set at 18. Data related to age at first sexual intercourse was collected in the 2016 SLDHS by asking about the age of the respondents when they had their first sexual intercourse. Table 12.8 shows that 3 percent of ever-married women aged 15-24 had their first sexual intercourse experience before the age of 15. If the analysis is restricted to ever-married women aged 18-24, 29 percent of them reported having first sexual intercourse before age 18.

Considering sectors in the country, the rural sector has the highest percentage of early sexual intercourse for both age groups 15-24 and 18-24. The level of education seems to have a positive effect on the age at first sexual intercourse. By sector of residence, the higher prevalence of first sexual intercourse before age 18 is observed among those ever-married women aged 18-24 of the rural sector (29 percent) compared to 27 and 25 percent (urban and estate sectors respectively).



Table 12.8 Age at first sexual intercourse among young people (Revised)

Percentage of young women age 15-24 who had sexual intercourse before age 15 and percentage of young women age 18-24 who had sexual intercourse before age 18, according to background characteristics, Sri Lanka 2016

Women				
Percentage who had sexual intercourse before age 15	Number of respondents (15-24)	Percentage who had sexual intercourse before age 18	Number of respondents (18-24)	
Background characteristic				
Age				
15-19	4.6	229	na	na
15-17	(12.1)	39	na	na
18-19	3.1	190	53.8	190
20-24	2.6	1,410	25.2	1,410
20-22	2.9	689	29.6	689
23-24	2.3	721	20.9	721
Residence				
Urban	2.0	222	26.6	217
Rural	3.1	1,346	29.1	1,316
Estate	1.7	71	24.8	67
Education				
No education	*	2	*	2
Passed Grade 1-5	(16.2)	32	(67.0)	31
Passed Grade 6-10	4.5	867	38.8	834
Passed G.C.E.(O/L) or equivalent	0.4	477	22.6	472
Passed G.C.E.(A/L) or equivalent	0.0	251	1.7	251
Degree and above	*	9	*	9
Total	2.9	1,639	28.6	1,600

na = Not available