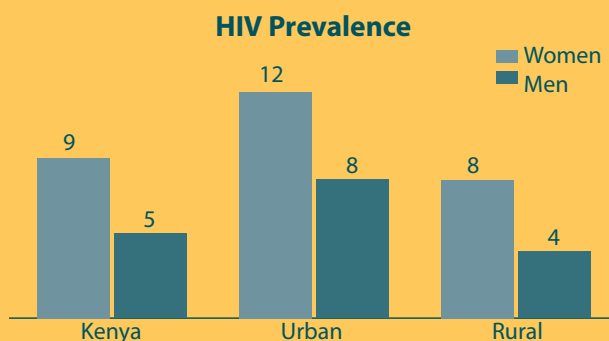
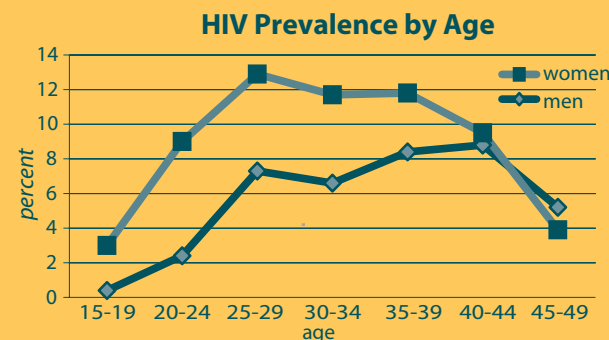


HIV/AIDS in the 2003 Kenya Demographic and Health Survey

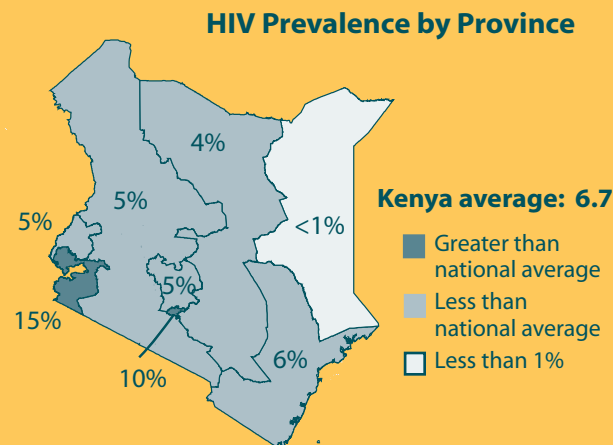
The 2003 Kenya Demographic and Health Survey included HIV testing of over 6,000 people. The 2003 KDHS shows that 7 percent of Kenyan adults are HIV positive.



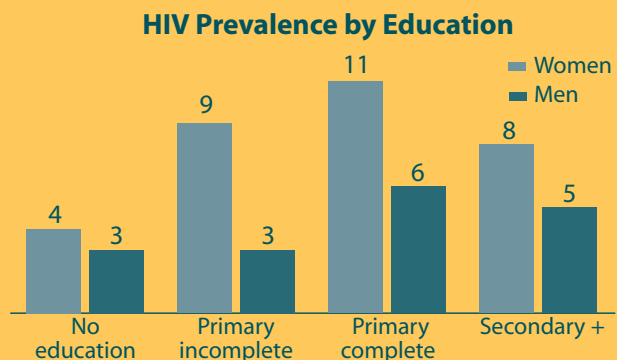
HIV prevalence is substantially higher among women than men. Urban residents have considerably higher infection levels than rural residents (10 percent vs. 6 percent).



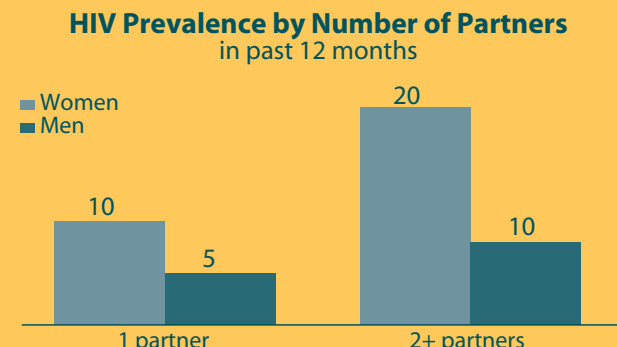
Younger women are particularly affected by HIV. Prevalence rates among those age 20-24 are three times higher among women than men.



The rate of infection in Nyanza Province is more than twice the national average. Residents of Nairobi also have an elevated prevalence of HIV infection.

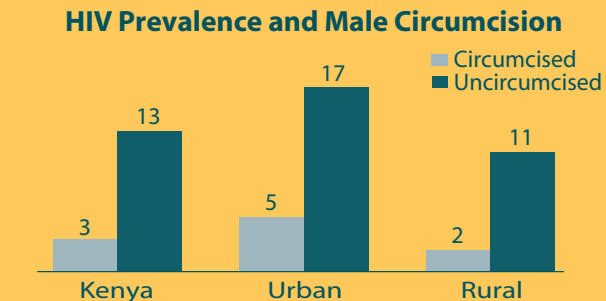


HIV prevalence increases with education up to the primary complete level, and then falls slightly among those with some secondary education.



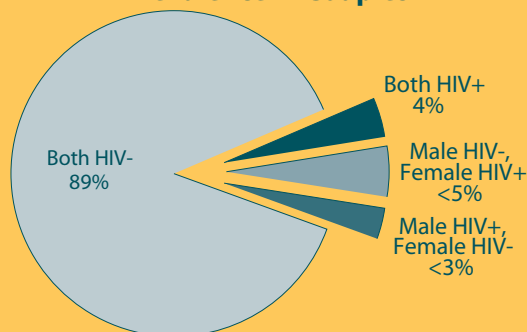
For both men and women, having more than one partner in the past 12 months is strongly associated with higher HIV prevalence.

Women who have never drunk alcohol have a much lower rate of HIV infection than those who have ever drunk alcohol.



Lack of male circumcision is considered a risk factor for HIV infection. In Kenya, men who are not circumcised have a significantly higher rate of HIV prevalence.

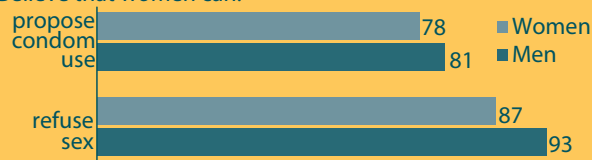
HIV Prevalence in Couples



Almost 8 percent of couples in Kenya are discordant, meaning that one partner is HIV infected and the other is not. The large proportion of discordant couples points to an unmet need for HIV prevention, as most of these couples do not know of their status.

Attitudes Towards Negotiating Safer Sex

Believe that women can:



Eighty percent of women and men believe that if a husband has a sexually transmitted disease, his wife is justified in proposing that they use a condom, while around 90 percent believe the wife is justified in refusing sex.

Response Rates and Methods

HIV prevalence data were obtained from fingerstick dried blood spots voluntarily provided by women and men age 15-49 who were interviewed in the 2003 KDHS. Of the 8,486 eligible subjects, 73% provided blood spots. Response rates were considerably higher in rural than urban areas (79% vs. 62% overall).

For additional information on the results of the 2003 Kenya Demographic and Health Survey, please contact:

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www.measuredhs.com

The 2003 KDHS was conducted by the Central Bureau of Statistics in partnership with the Ministry of Health and the Kenya Medical Research Institute. ORC Macro and the U.S. Centers for Disease Control (CDC) provided technical assistance in the design, implementation and analysis of the survey. Funding was provided by the U.S. Agency for International Development (USAID), as well as CDC, UNFPA, DFID/U.K., the government of Japan through UNDP, and UNICEF.



2003 Kenya Demographic and Health Survey



Photographer: Edward Reilly/
 Lutheran World Relief, 2001, Courtesy of Photoshare

HIV/AIDS