In November 2014, Dr Arnoldus Tiniap from the West Papua provincial health department presented some of the results of the 2013 Integrated Bio-Behavioural Survey (IBBS), which is the most recent Tanah Papua–wide survey of HIV indicators, including HIV prevalence, knowledge of HIV, sexual behaviour and condom use. His presentation was a key component of the workshop ‘Developing an HIV Prevention and Control Strategy for Papuans in Tanah Papua’ (see Munro 2015). It has been seven years since the last IBBS was conducted in Tanah Papua, and the results were greatly anticipated by those in attendance. The results have yet to be made available beyond certain organisations in Indonesia, but this In Brief presents a recap of Dr Tiniap’s workshop presentation to facilitate access to this important new data, and to encourage further research on particular themes.

The IBBS participants were 2849 men and 3012 women aged 15–49 who were interviewed about their sexual behaviour and knowledge of HIV. Of 5861 total participants, 5674 participants were tested for HIV. The survey occurred in 12 regencies, all but 3 located in Papua province. Five sites were located in the highlands, four in easily accessible coastal areas, and three in hard-to-access coastal areas. The interviews were conducted by trained government workers, blood samples were collected by public health workers, and testing was supervised by the Jayapura Health Laboratory in Papua province. Statistics Indonesia (BPS) conducted the data analysis. The survey was funded by several international organisations.

Overall, HIV prevalence was found to be 2.3% of participants, ranging from 0.6% in easily accessible coastal areas to 3% in the highlands. Estimated HIV prevalence in Tanah Papua is thus second highest in the world outside Africa (WHO 2014). The 2013 IBBS analysed prevalence according to ethnic background, and found an HIV prevalence of 2.9% among indigenous Papuans and 0.4% among non-indigenous Indonesians. For the purposes of obtaining these results, ‘Papuan’ was defined as having two Papuan parents, while ‘non-indigenous’ was defined as having no Papuan parents. Participants of mixed heritage were not included in the analysis. There was no significant difference in HIV prevalence between men and women. HIV prevalence among youth aged 15–24 was estimated at 3.1%, while the older age group (25–49 years) recorded a prevalence rate of 1.8%. Just 5.9% of the study population had ever undergone an HIV test, and 1.1% of women had taken an HIV test during pregnancy.

The survey also assessed participants’ knowledge of HIV/AIDS, following the United Nations measure of ‘comprehensive knowledge’: being able to identify HIV prevention and transmission methods and knowing that a healthy-looking person can have HIV. Of those surveyed, 9.2% were considered to have comprehensive knowledge of HIV, ranging from 5.7% of participants in the highlands to 12.1% of participants in easily accessible coastal sites. The level of comprehensive knowledge of HIV in Tanah Papua was thus found to be lower than the Indonesian national average of 11.1% (BPS 2012).

It is very difficult to accurately capture sexual practice in a survey of reported behaviour. With this caveat, survey results report that most extramarital sex occurs not with sex workers as is often assumed but with ‘casual partners’ (pasangan tidak tetap). 12.7% of men stated they had extramarital sex in the 12 months before the survey, 4.7% said they had paid vaginal sex, while 10.5% of men said they had vaginal sex with a casual partner. The percentage of participants who said they had engaged in extramarital sex had decreased slightly, but not significantly, from the 2006 IBBS (BPS and Ministry of Health 2007).

Among those participants who reported extramarital sex in the previous 12 months, 16.5% of men said they had consistently used condoms during paid vaginal sex. The national target for consistent condom use by males during paid sex is 65%. Just 5.6% of men and 1.3% of women stated...
that they had consistently used condoms during sex with a casual partner. Men's reported consistent use of condoms during sex with a casual partner had decreased since 2006.

The IBBS 2013 findings show that the disproportionate HIV prevalence among indigenous Papuans requires a specific set of strategies to address this serious health inequity. At the same time, it is problematic to apply strict definitions of ‘indigenous’; rather, there is a need to recognise, understand, and respond to the diversity of Papuan–Indonesian relationships and interconnections.

The HIV response must broaden from focusing on key populations like sex workers, or even men who have sex with men, to married and non-married couples of all ages. To do so requires attention to contemporary Papuan relationships, and views on fertility and condoms (Munro 2014).

Sexuality, once more strictly defined by shared cultural values and controlled by clan leaders, is being redefined in the context of new values, experiences and opportunities. ‘Casual partner’ is an example of a poorly constructed category that does little to capture local understandings.

The 2013 IBBS findings affirm the need for attention to Papuan gender identities and gender relations, especially how male sexualities and masculinities interface with new forms of education and work, and with the cultures and masculinities of Indonesian men. How do conditions of political violence and economic exclusion, and the inflated possibilities of transformation associated with the new regime of decentralised development (Munro 2013), affect the social and gendered contexts in which sexual relationships occur?

The finding that just 1.1% of pregnant women had ever taken an HIV test suggests problems related to HIV services, education and outreach. In Manokwari, capital of West Papua province, a small qualitative study with HIV-positive pregnant Papuan women found that most had very little knowledge of HIV transmission despite being cared for in the public health system (Munro and McIntyre n.d.). Women were evidently also commonly advised by health workers not to breastfeed their infants, against World Health Organization guidelines for pregnant HIV-positive women on antiretroviral treatment. Some women described being advised by health workers to have caesarean section deliveries, which deeply concerned them for cultural and other reasons, and were largely unnecessary from a medical perspective. Women’s tendency to conceal their HIV status was found to be an important social survival strategy that health service providers typically did not consider in the context of pregnancy or childrearing.

The 2013 IBBS makes an important contribution to the rather limited research base upon which HIV responses in Tanah Papua rely. With the hope that the survey compels future critical research on social conditions and HIV in Tanah Papua, this In Brief has pointed to themes that require follow-up, including contemporary Papuan relationships, views on fertility and condoms, masculinities and male sexualities, and cultural and political aspects of HIV services.

Author Notes

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Endnote

1 Tanah Papua (Land of Papua) refers to the western half of the island of New Guinea, currently comprising the Indonesian provinces of Papua and West Papua.

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