Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) is a major global health problem due to its devastating health, socio-economic and developmental impact. Despite recent improved access to antiretroviral treatment and care in many regions of the world, HIV and AIDS pandemic claimed 3.1 million lives in 2005, more than half a million were children. The total number of people living with HIV and AIDS reached its highest level: an estimated 40.3 million people. Close to 5 million people were newly infected with the virus in 2005. There is need for international community to launch a coordinated and massive response to the pandemic, otherwise it is estimated that there will be 45 million new infections by 2010. In Kenya the pandemic peaked in 1990s with an overall HIV prevalence of 10% in adults, which declined to 5.7% - 6.4% in 2005. Approximately 65% of new HIV infections are found in youth aged between 15 - 25 years. Culture may play a crucial role in spread of HIV. For instance, the deep-rooted culture of the Maasai people has made it difficult to influence the community on behaviour change. Some of the practices could be harmful in the context of the prevailing HIV and AIDS situation making the community probably vulnerable to HIV infection. Many studies have been done on the HIV infection trends without providing exhaustive data on the behaviour dynamics that may be influencing the pandemic. The current study aimed at determining socio-cultural practices and HIV and AIDS awareness among the Maasai people in Osupuko Division, Narok District, Kenya. The study design was descriptive and data was collected by use of structured open and close-ended questionnaires and focus group discussions. Chi-square test of independence was used to test the relationship between age, gender, marital status and education of the respondents with various socio-cultural practices, awareness on HIV and AIDS, utilization of VCT services and condom use. Statistical Package for Social Science (SPSS) was used for entry, storage and retrieval of the data. The results obtained showed that the community engaged in premarital sex (53.3%). Majority (79.4%) of the respondents said that age mates shared sexual partners and 10.6% said that polygamy was encouraged. These practices may contribute to the spread of HIV among the community members. Other inherent practices were female circumcision (95.2%), tattooing and ear piercing (58.9%), scarification (60.9%) and traditional birth attendance (10.6%). These were practices that would transmit the virus through infected body fluids if instrument used were unsterilized. Early girl child marriage was practiced (70.6%) in the community and this exposed young girls to risk of sexual exploitation and HIV infection. Other socio-cultural practices were: ‘olamal-emanayatta’ (57.6%; Cultural practices where group assembles in Manyattas for the pass over into another age set at a particular region and local brewing (21.2%), these would probably encourage community members to engage in risky sexual behaviour hence contracting HIV from infected partners. There was a relationship between reasons why culture allowed having multiple sexual partners and gender of the respondents (.y2 = 36.349, df- 4, p= 0.000), in this case, many male respondents said that multiple sexual /partners was for prestige and cultural influence. There was a significant relationship between respondents' gender and multiple sexual relationships (x2=16.515, df =2, p= 0.000). Consequently, there was a relationship between age of the respondents and practice of polygamy (v2=121.805, df- 3, p= 0.000); respondents in the age bracket (40-44years) had multiple sexual partners than other age brackets. Openly discussing sexual issues was a taboo resulting in loss of prestige. However, majority (76%) of the respondents discussed with friends/age mates (65.9%) while (32.8%) discussed with sexual partners. Results of the current study will provide guideline information to
health policy makers, and social service providers to effectively curb the possible HIV transmission among the community.