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Sexual Behaviour among School Youths in a Rural Far-western District of Nepal

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Abstract

Background
Youth population (10-24 years of age) comprises more than 30% of the total population in Nepal. This is the age when values are formed, many become sexually active and begin to develop a pattern of risky sexual behaviour. This makes youth more vulnerable to contacting sexually transmitted diseases including HIV/AIDS. The main objective of this study was to assess the sexual behavior among school youths of a rural far-western district, Achham, Nepal.

Methods
A cross sectional study was conducted among school youths aged 15 to 24 years studying at grade 11and 12 in Achham district. Data were collected from February to April, 2011 using self-administered questionnaires from 229 boys and 156 girls of randomly selected eight higher secodary schools of the district.

Results
The study found that over a quarter of the respondents were sexually active before marriage, boys five times more compared to girls. More than one-fourth (28.2%) of sexually active young boys and girls were found to have engaged in multiple sexual relations; of which peers were the most common (71.1%) sexual partners. Overall, three out of every four sexually active school youths were found to have practised risky sexual behavior. The study found age of the respondent, gender, education and age at first sexual intercourse were significantly associated with the sexual behavior of the school youths.

Conclusions
Young people at schools were found to be engaged in unsafe sexual activities in study district. They were found initiating multiple sexual relations and pre-marital sexual relations. The use of condom was found declining in subsequent sexual contacts. Such risky sexual behaviours were putting the young population at more vulnerable to the risks of any sexually transmitted infections. Sex education would therefore be imperative to focus on sexual and reproductive health interventions targeted for the young people.

Keywords: sexual behaviour; cross-sectional study; school youth; Achham; Nepal.

Introduction
Adolescence is a period of life spanning the ages between 10-19 years, and youth between 15-24 years. Young people are those between 10-24 years of age. This is a time when growth is accelerated, major physical changes take place and differences between boys and girls are accentuated. One in every five people in the world is an adolescent; and 85% of them live in developing countries. (1) In Nepal, young population (10-24 years of age) comprises about 33% of the total population. (2) Owing to high fertility and a youthful population, the proportion of adolescents in the total population of Nepal is likely to increase in the coming years. (3)

Various physical, mental and psychosocial changes occur during the youth period. Young people are often inquisitive and try to experiment and experience new behaviours. These traits increase their vulnerability to different aspects of life including the risk of having unprotected sex. (1)

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Out of the reported total HIV positive cases in 2008 in Nepal, three in four were found to have unsafe sexual practices. About 20% of the total HIV cases were in the age group of 15-24 years. (4) According to Nepal Demographic and Health Survey 2006, students of secondary and higher secondary schools were found practicing more risky sexual behavior. (5)

Furthermore, concentration of the HIV/AIDs is higher in the districts of Far-western region of Nepal and Achham is one of such districts. (6) However, little is known about the sexuality of one of the most vulnerable age group population, higher secondary grader in this region. This study aims to explore the sexual behaviour of these school youths in Achham district which could contribute to understand and develop youth focused prevention programs to address the possible future threats of sexual behaviour related problems in rural Nepal.

Methods

This study had a cross sectional design. It was conducted in eight randomly selected higher secondary schools of Achham district, where list of higher secondary schools was prepared for sampling frame. List of total 27 higher secondary schools was obtained from District Education Office, Achham. Each using a random number table, 30% of higher secondary schools were randomly selected. Study participants from each school who agreed to participate in the study were included in the study. This comprised a survey of total 229 boys and 156 girls. Written informed consent was obtained from administration of each school and District Education Office of Achham district.

Data were collected from February to April, 2011. The questionnaire for the survey was adopted from the "Illustrative questionnaire for interview-surveys with young people" developed by WHO/UNFPA. The questionnaire was finalized with necessary modifications to suit the local context after pretesting and consultation with the district health supervisors and public health officer. Realizing the sensitive nature of Sexual and Reproductive Health (SRH) information, the questionnaire was self administered and anonymous to each of the study participants. Students were informed to participate voluntarily so as to ensure more accurate responses from them.

For this study purpose, safe sexual behaviour referred to composite variable comprising those sexually active respondents with condom use (condom use during last and second last sexual intercourse in the past 12 months) and having only one sexual partner in the last 12 months preceding the survey. Respondent with two or more sexual partners were considered to have multiple sexual relationships. For the purpose of this study "young people" were classified as those between 10-24 years of age. Sexual act included heterosexual activities limited to vaginal sex only.

Data were entered in Statistical Package for Social Sciences (SPSS) version 19. Descriptive analysis was done and association was tested using chi-square/Fischer's exact test. Bivariate analysis was used to assess crude odds ratio. P-value at $p<0.05$ was considered to be statistically significant.

Results

Only one-tenth (10.4%) of the respondents were married. Less than quarters (23.6%) of the respondents were from broken families (any respondents who had lost either or both parents; or respondent from family of the separated parents) and nearly one-fifth of the respondents belonged to disadvantaged/lower caste. (Table 1)

Nearly one third (29.6%) of the respondents were found sexually active before marriage. Boys were found more sexually active than girls [(P 0.0005; OR 5.262; 95% CI 3.013 to 9.543)]. Minimum age of first sexual contact for boys was 12 years and 14 years for girls; whereas the maximum age was 22 years for both the sexes. Most of the respondents (87.5%) had their first sexual intercourse when they were teenagers (≤19 years). The mean age at first sexual intercourse among boys was 17.6 years (±1.60 SD) and among girls 16.85 years (±1.746 SD).

Over one-fourth (28.2%) of the respondents had multiple sexual partners. More than two-third of the respondents had peers as their sexual partners. Only 3.5% of the respondents had sex with commercial sex workers. (Table 2)

A statistically significant association between age, sex and marital status of respondents was found with the multiple partners. Adolescents, compared to those above 19 years, were more likely to have multiple partner sexual relations [P 0.030; OR 2.684; 95% CI 1.080 to 6.667]. Married, compared to unmarried, were less likely to practice multiple partner sexual relations [(P 0.001; OR 0.412; 95% CI 0.41 to 0.494)].

Nearly two-third (67.8%) of the sexually active respondents had ever used condom at least once. There was a decline in use of condom on subsequent sexual contacts. (Figure 1)

Over two-third of the sexually active respondents (73.2%) were found practicing risky sexual behavior. Study found significant association between age of the respondents, gender, education, age at first sexual intercourse with the sexual behavior. Adolescents compared to young adults aged 20 to 24 years, boys compared to girls, and those who initiated sex during adolescence compared to those who initiated in young adulthood were found more likely to have risky sexual behaviour. However, study did not show statistically significant association between the type of relationship (spousal or friend), age of sexual partner and ethnicity with the sexual behavior of the respondents. (Table 3)

Table 1: Distribution of Respondents by Demographic Characteristics

Characteristics	Number (n=385)	Percentage
Age Group		
15-19	310	80.5
20-24	75	19.5
Gender		
Male	229	59.5
Female	156	40.5
Marital Status		
Married	40	10.4
Unmarried	345	89.6
Structure of the family		
Intact family	294	76.4
Broken family	91	23.6
Ethnicity		
Dalit*/religious minority	72	18.7
Upper caste group	313	81.3
Education		
Grade 11	225	58.4
Grade 12	160	41.6
Religion		
Hindu	379	98.4
Other than Hindu	6	1.6

* refers to untouchables and those belonging to other than Hindus

Table 2: Distribution of Respondents by Pattern of Sexual Partners

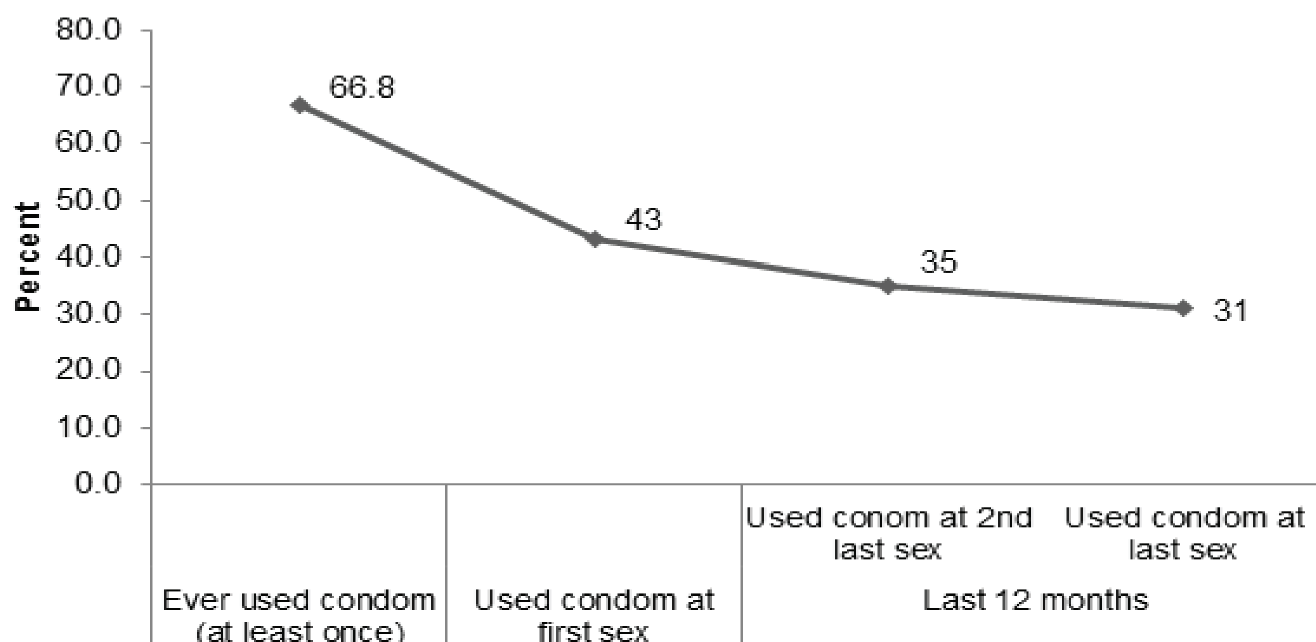
Category	Number (n=142)	Percentage
Number of partner		
Single	102	71.8
Multiple	40	28.2
Number of partner		
One	102	71.8
Two	24	16.9
Three or more	16	11.3
Age of the partner (Years)		
15-17	37	26.1
18-19	28	19.7
20-25	31	21.8
Don't Know	46	32.4
Relationship with partner		
Spouse	36	25.4
Friends	101	71.1
Sex worker	5	3.5

Table 3: Factors Associated with Sexual Behaviour of the Respondents

Variables	Sexual Behaviour (n=142)		P	OR	95 % Confidence Interval	
	Safe	Unsafe			Lower	Upper
Age (in years)						
15-19	18 (18.4)	80 (81.6)	0.001			
20-24	20 (45.5)	24 (54.5)		0.27	0.123	0.591
Gender						
Male	21 (21.2)	78 (78.8)	0.023			
Female	17 (39.5)	26 (60.5)		0.412	0.189	0.897
Marital Status						
Married	13 (32.5)	27 (67.5)	0.333			
Unmarried	25 (24.5)	77 (75.5)		1.483	0.666	3.303
Education						
Grade 11	12 (16.4)	61 (83.6)	0.004			
Grade 12	26 (37.7)	43 (62.3)		0.325	0.148	0.715
Family Structure						
Intact	34 (30.4)	78 (69.6)	0.046**			
Broken	4 (13.3)	26 (87.7)		2.833	0.918	8.746
Age at first sexual contact (in years)						
15-19	29 (22.5)	100 (77.5)	0.001			
20-22	9 (69.2)	4 (30.8)		0.129	0.037	0.449
Relationship with sexual partner						
Spouse	11 (30.6)	25 (69.4)	0.552			
Other than spouse	27 (25.5)	79 (74.5)		1.287	0.56	2.961
Ethnicity						
Lower caste & minority	8 (25.8)	23 (74.2)	0.892			
Upper caste	30 (27)	81 (73)		0.939	0.379	2.326
***Age of the sexual partner (in years)**						
15-19	17 (26.2)	48 (73.8)	0.534			
20-25	10 (32.3)	21 (67.7)		0.744	0.292	1.893

*There were 'don't know response' and they were not included in analysis, ** Fisher's exact test, a safe sex refers to respondents having only one sexual partner and using condom during last & second last sexual intercourse.

Figure 1: Condom Use at Subsequent Sexual Contacts among the sexually active married and unmarried young people



Discussion

This study aimed to indentify sexual behaviours of the young people in Achham district of far western Nepal. Sexual behaviours were found more riskier than the general expectation as of our cultural scenario where sexual activities are strongly prohibited before marriage. Nearly one third (29.6%) of the unmarried youths were found sexually active. Similar study done in capital city of Nepal had found 39% of the college students sexually active before marriage. (7) This study found that mean age at first sexual contact was 17.6 years among boys and 16.8 among girls. The minimum age of first sexual contact among boys was 12 years and 14 years among girls. About a quarter (26.1%) of the sexual partners were below 17 years of age. As reported in different demographic and health surveys, 51% in India, 30% in Indonesia and 60% in Nepal have sex by age 18. (8)

Having premarital sexual intercourse indicates greater likelihood of unsafe sexual practices which is clearly evident by this study finding in which nearly one-third of school youths had unsafe/risky sexual practices. This finding alerts health program planners and policy makers including non-governmental organizations; this is contrary to the popular belief of traditional Nepalese cultural norm where sexual relations are strictly prohibited before marriage.

As per the study, over one-fourth of respondents had multiple sexual partners. About 11% of those who had three or more partners, peers were the most common. A few of them (3.4%) had sexual contact with sex workers which signaled a further risky behaviour. Compared to these rural school youths, college students in capital city were found more engaged in sex with commercial sex workers and they had more common multiple sexual relations. (7) A study in border towns of Nepal reported that 15% of the unmarried men had commercial sex worker as their sexual partner. A considerable proportion of the unmarried men had first sexual experience with their friends found (46%) from the community or friends of school/college (36%). (9) As per this study, although a lower percentage of school youth chose commercial sex workers as their sexual partner, sexual relations with friends and with different partners was common. This could be an important issue for district level program planners to think on how to decrease the possible risk of unsafe sexual behavior and likely of sexually transmitted infections (STIs).

The study found statistically significant relationship between respondents having multiple sexual partners and their marital status, age and sex. Risky sexual relationships were higher among unmarried male who were aged 19 years and below. Condom use during first sex was about 43%, 35% during second last sex and 31% during the last sex. This showed decreasing condom use with increasing frequency of sexual intercourse. The findings were similar to the study conducted to find out the determinants of high-risk sexual behavior and condom use. (10) WHO multi-country case studies also reported the use of condom during the first sexual intercourse to be only around 32% among female and 28% among male. (11)

Nepal Demographic & Health Survey 2006 showed only 5% of young women and 26% of young men had used condoms during their first sexual contact, never married male youth were much more likely than ever married youth to have used condom. (5) This study revealed that slightly more married (both male and female) respondents were using condoms in first and subsequent sexual contacts than unmarried. This scenario might be due to various structural, societal and cultural barriers where open discussions and decisions about contraceptive use are not made especially when it comes to unmarried people in Nepalese cultural context. There are social stigmas attached with unmarried (male or female) for getting condom. The study districts did not have a single youth friendly health facility clinic posing a serious barrier in contraceptive access. More female respondents were found using condom in subsequent sexual contact. The social consequences

when a female gets STI/HIV-AIDS or pregnancy outside marriage are detrimental compared to male counterparts.

Overall, this study reported about a quarter (26.8%) of students practicing safe sexual behavior in 12 months preceding the survey. The remaining three-fourth of the school youths are a big pool of students with unsafe sexual practices. School authorities including parents are therefore required to be more vigilant on their behavior. The study found more married compared to unmarried and more female compared to male were practicing safe sexual behavior. The study also found statistically significant association between age of the respondents, gender and education with age at first sexual contact.

Sexual behaviour was not significantly associated with the marital status (mainly due to singularity of the partner), ethnicity, relationship with sexual partner and age of the sexual partner. However, it found spousal relationship safer compared to relationship with friends and others. Regarding ethnicity, the study did not find much difference, nearly equal proportion of lower caster/minority (25.8%) and upper caste group (27%) were practicing the safe sexual behaviour.

The study findings have a meaningful implication in terms of getting concerned stakeholders (schools, communities, health facilities and parents) aware of the risky sexual behavior of young people. Findings may be particularly important for district program mangers and policy makers to target adolescent/school youths through schools, families/parents and health facilities.

Considering the rural context with closed cultural system where even the topics related to sexual and reproductive activities are not openly discussed, sexual activities related to anal sex and homosexuality could not be studied. Presuming a possible cultural threat to the researchers, in-depth exploration of the sexual activities of these young people was not carried out. Qualitative studies that can explore the role of family in shaping the behavior of adolescents/school youths, large scale cross sectional studies and the studies targeting the role of school teachers and primary health care providers in shaping the healthy sexual behavior of the school adolescents and youths could be essential in better comprehension and prevention of the increasing threats due to risky sexual behaviours.

Conclusion

Just over a quarter (26.8%) of the young people were found to have engaged in safe sexual behaviour in the last 12 months preceding the survey. There was a declining trend in condom use in subsequent sexual contacts. Over a quarter of the young people were engaged in multiple sexual relations. Nearly one-third (29.6%) of the young people were found sexually active before marriage. With these key findings, this study informs a growing risky sexual behavior in the study district. Addressing these sexual behaviours would be an appropriate and timely intervention to prevent consequences of risky sexual behavior such as STIs including HIV/AIDS in those communities. Young people focused educational interventions at communities, schools and health facilities could be the key targeted interventions.

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