

# **NATIONAL YOUTH REPRODUCTIVE HEALTH SURVEY, 1997**

## **SUMMARY REPORT**

**Zimbabwe National Family Planning Council (email: [znfpc@harare.iafrica.com](mailto:znfpc@harare.iafrica.com)),  
with support from IEC Family Planning and Health Education Project  
DECEMBER 1998**

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## **1. Introduction**

The Zimbabwe National Family Planning Council (ZNFPC), supported by the German Agency for Technical Co-operation (GTZ) conducted a National Youth Reproductive Health Survey (NYRHS) in April/May 1997 to find out the social and health status as well as sexual and reproductive behaviour of young people in Zimbabwe. This was a household based survey in which a total of 5449 young people aged between 10 and 24 years were interviewed throughout the country. The area sampling frame for the survey is the 1992 Zimbabwe Master Sample (ZMS92) developed by Central Statistical Office. The ZMS92 is based on the last Zimbabwe (1992) Population Census and it was designed to be nationally representative for use in various demographic and socio-economic surveys.

Data from the NYRHS is intended to be used by programme managers and policy makers to develop appropriate and effective adolescent reproductive health programmes and to evaluate and improve youth reproductive health projects. The survey provides a unique opportunity to update the body of knowledge on adolescent sexual and reproductive behaviour.

Young people in Zimbabwe represent a significant proportion of total population ( 45 % of Zimbabwe's population is aged below 15 years (CSO 1992) ). The sheer numbers, plus the fact that there are particular contemporary social and economic problems associated with adolescence makes them a special group that needs attention. Their reproductive behaviour and their socio-economic well-being have vast implications on Zimbabwe's economic and social development and, therefore, information on their behaviour is important.

The social and economic conditions in which these young people live are changing radically and are having an effect on their behaviour and relationships. For the vast majority, sexual relations begin during adolescence, in or outside of marriage, and this increases risks associated with too-early and/or unwanted pregnancy and childbirth,

induced abortion, reproductive tract infections, sexually transmitted diseases and HIV infection resulting in AIDS.

While better health and nutrition have lowered the age at which young people mature physically, the growing emphasis on education and the demands of the job market have raised the age at which they are considered mature socially and this is why the NYRHS has collected information from young people starting from the age of 10 years up to the age of 24 years. Young people need to have adequate and correct information on reproductive health issues if they are to understand and value their bodies.

## **2. Characteristics of Respondents**

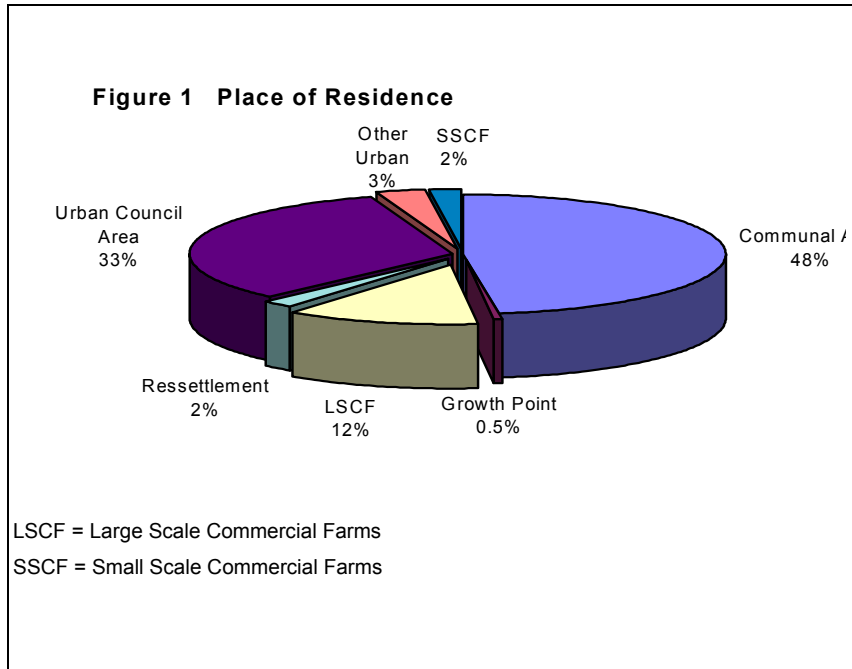
5449 young males and females were interviewed in almost equal numbers. The average age of the respondents was 17 years. Twenty- nine percent of the respondents were in the 10 - 14 years age range, 44% were in the 15 - 19 years age range and 27% were in the 20 - 24 years age group.

Forty-four percent of the respondents lived with both parents, 22 % lived with one parent, mostly the mother, 17% with relatives and 10% lived on their own.

Higher proportions of older females than males live away from home as the result earlier marriage (see below).

Figure 1 shows the distribution of respondents by place of residence.

Almost half of the respondents are resident in communal areas, and 36% were in urban areas.



Nearly all respondents under the age of 15 years (92%) were attending school. Schools are therefore, a very appropriate institution for the delivery of reproductive health messages particularly to the young people. Most young people

stop attending school when they are in the 15 to 19 years age range.

Eighty-six percent of the respondents had never married, 12% were married while 2% were widowed, divorced or separated.

Table 1 shows the proportions of young people in full-time education, in employment and unemployed, by age-group.

**Table 1. Main Activities of youth, by age group**

<b>Activity</b>	<b>10 -14</b>	<b>15 - 19</b>	<b>20 - 24</b>
Student	93.2	53.4	9.1
Working	5.5	8.7	22.6
Unemployed	6	37.0	67.4

Nearly all children under 15 years are in school. 36% of all respondents reported that they were unemployed. Table 1 shows that unemployment increases with age for both males and females (33% among 15 to 19 year olds and 63% among 20 to 24 year olds) as increasing numbers of school-leavers join the hunt for jobs. The high level of unemployment gives some indication of the difficulty in reaching youth in Zimbabwe, for they cannot be approached through schools or the workplace. Ten percent reported to be working. The majority of those working were employed as domestic workers and general farm labourers.

### 3. Use of Free Time

Table 2 shows how young people spend their leisure time.

**Table 2. Use of free time**

Utilisation of Free Time	Women	Men	Total
Visiting Friends and Relatives	21.3	17.0	19.1
Doing Sporting Activities	12.6	36.1	25.0
Watching Movies / Videos	4.9	5.5	5.4
Going to Town	2.8	8.0	5.5
Visiting Boyfriend / Girlfriend	1.0	2.1	1.6

A quarter of the youth spend their free time doing sporting activities, 22% read novels, magazines, books etc., while 19% visit friends and relatives. One tenth of the youth also listen to the radio during their free time. Sporting activities are more associated with male adolescents while visiting friends and relatives is more associated with female adolescents.

Thirty-one percent of young people belong to a club or social group. Sporting activities are quite popular among the youth such that 52% of those who belong to clubs/associations belong to a sports club with football being the most popular sport. Some youth also visit youth centres for recreation (e.g., sports, games, watching videos), but only 7% of youth knew of a youth centre in their area, indicating the shortage of these facilities.

### 4. Drug and Alcohol Use

The study results suggest that very few youth smoke (3%) , drink alcoholic beverages (6%), or indulge in substance abuse (4%). These proportions are small, and under-reporting is likely. Drug and alcohol use is associated with older males and among those with unfavourable home environments.

## 5. Dating

Forty-two percent of all unmarried young men and women interviewed have had a boy/girlfriend. Among those who had a boy/girlfriend 72% started dating when they were in the age range 15 to 19 years and 17% started dating when they were in the 10 to 14 years age range.

The average age of dating among youth is 16 years for both males and females although young people themselves indicated that 18 years is the ideal age for them to start dating.

Figure 2 shows how time with boyfriends / girlfriends is used.

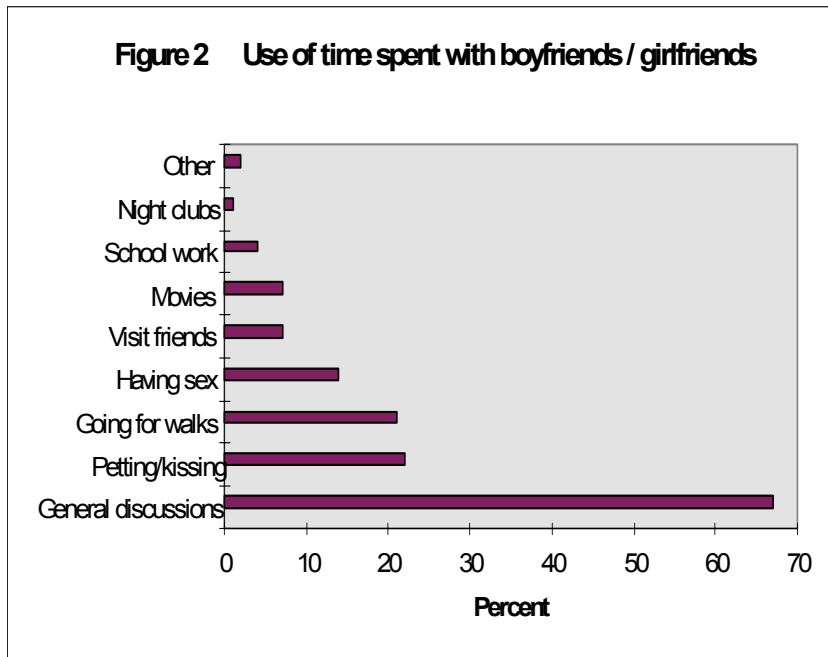


Figure 2 indicates that most of the time together is spent in "general discussions".

14% and 22% of young people aged 10 - 24 years who have a boy / girlfriend spent time with their partners having sex and petting/ kissing respectively. Time spent on kissing/ petting does not vary with age, but time spent on sex with boy/girlfriends increases with age.

## 6. Sexual Initiation and Sexual Behaviour

Twenty-one percent of all interviewed youth reported that they had had sexual intercourse. Among the never-married young people however, 16 % had had sex, of whom the majority had their first sex at 16 years of age.

Figure 3 shows the proportions of respondents who are sexually experienced by single years of age.

**Figure 3** % Sexually active, by age and sex

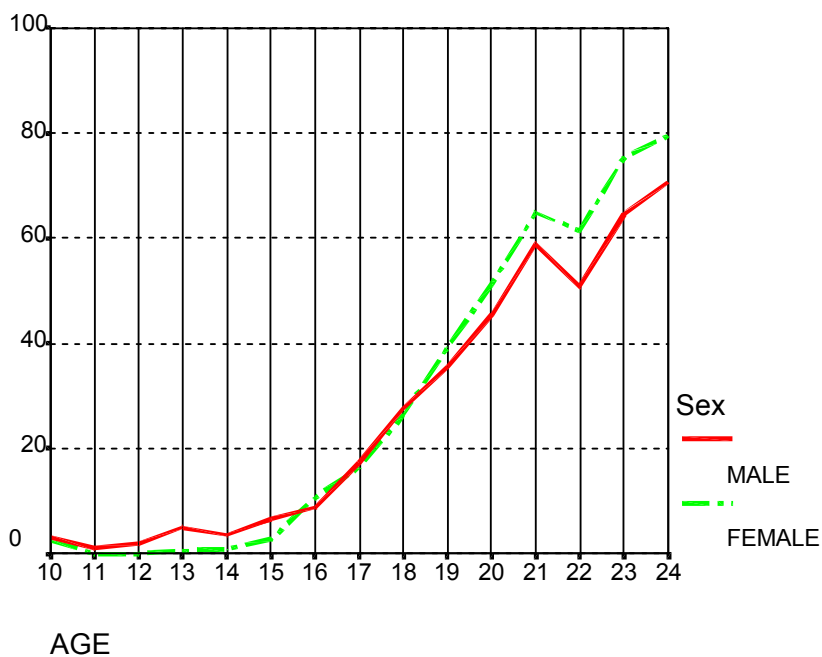


Figure 3 shows that very low proportions of both boys and girls had ever had sex up to age 15, with young boys more likely to have experience than young girls. A sharp rise begins at age 15 and, after age 18, a higher proportion of girls than boys report that they have had sex.

A high proportion of females (44%) said they had sex to show love to their partner while the most frequently-cited reason for males to have sex (36%) was experimentation.

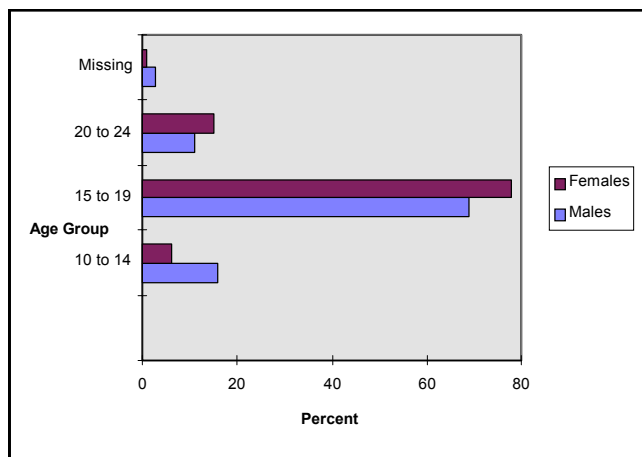
Nine percent of young females and 1% of young males who had had sex reported that they were forced/raped (sexually abused) when they first had sex.

### 6.1 Premarital adolescent sexual activity

Among the unmarried young people who have had sex, 64% have had more than one sexual partner and this increases the risk of contracting HIV/AIDS and other sexually transmitted infections. More males (66 %) than females (39 %) have had two or more sexual partners. Since few young people admitted to taking alcohol, it is not surprising that 96% of those who had sex reported that they were sober when they had their first sexual experience.

Figure 4 shows the age groups at which sexual initiation take place for unmarried males and females.

**Figure 4 Distribution of Unmarried Youths by Sex and by Age at First Sex**



Over two thirds ( 72%) of unmarried youth were in the age range 15 to 19 years when they started having sex. A higher proportion of sexually experienced young males (16%) started having sex at very early ages of 10 to 14 years compared to females (6%)

Table 3 shows the reported levels of sexual experience of unmarried male and female respondents, together with the levels of sexual experience attributed to the best friends of these respondents.

**Table 3. Reported sexual experience of unmarried respondents and their best friends, by sex**

	<b>Male (%)</b>	<b>Female (%)</b>	<b>Total (%)</b>
Percent of Respondents Sexually Experienced	21.7	9.4	16.0
Percent of Best Friends Sexually Experienced	44.5	30.1	38.3

Table 3 shows that for both males and females best friends are reported to be much more sexually active than the respondents. These results suggest the likelihood of underreporting by the respondents of personal experience of sex.

Among the respondents who had had sex, 79% said they were single when they had their first sexual experience. A higher proportion of males (96%) have sex before marriage compared to their female counterparts (66%).

With 80% of females and 53% of males reporting that did not want to have sex at the time of their first experience, the regret of having had sex too early is clearly shown by the fact that 94% and 83% of unmarried females and males respectively, who were sexually experienced, said they would advise others to delay.

## 6.2 Risk factors for early sexual activity

What predicts early sexual experience? The two postulated "risk factors" - home environment and substance use are related to the proportions of under-18 year olds admitting to being sexually experienced. Tables 4 and 5 show the results.

**Table 4 Home environment and early (under 18) sexual experience**

		Sexually experienced?		Total
		NO	YES	
LIVING WITH	BOTH PARENTS	1525 96.0%	64 4.0%	1589 100.0%
	MOTHER ONLY	596 94.0%	38 6.0%	634 100.0%
	OTHER	794 89.3%	95 10.7%	889 100.0%
TOTAL		2915 93.7%	197 6.3%	3112 100.0%

**Table 5 Substance abuse and early sexual experience (under-18 years)**

		Sexually experienced?		Total
		NO	YES	
SUBSTANCE ABUSE	NO SUBSTANCE ABUSE	2864 94.3%	172 5.7%	3036 100.0%
	ONE TYPE	53 75.7%	17 24.3%	70 100.0%
	TWO TYPES	4 33.3%	8 66.7%	12 100.0%
TOTAL		2921 93.7%	197 6.3%	3118 100.0%

Although the numbers of young people admitting to substance abuse (alcohol, tobacco, drugs) are very small, their influence in predicting early sexual activity can still be seen. Both home environment and substance use are predictors of early sexual experience. These factors are also related to each other.

Adolescents living in a home environment where the mother is absent are much more likely to indulge in early sex than those who are staying with their mother or both parents.

Eight out of the 12 youths under 18 years who admitted to two types of substance use, also had had early sexual experiences.

The number of sexual partners is a risk factor for HIV/AIDS and other STIs. Table 6 shows, for those admitting to being sexually experienced, the mean number of sexual partners by age and gender.

**Table 6 Mean no. of sexual partners by age and gender**

No. of sexual partners

SEX	AGE GROUP	Mean	N	Std. Deviation
MALE	10 TO 14	2.9167	24	3.3997
	15 TO 19	2.8208	212	2.3439
	20 TO 24	4.1931	378	4.6481
	Total	3.6694	614	4.0065
FEMALE	10 TO 14	1.0000	4	.0000
	15 TO 19	1.2669	266	.6326
	20 TO 24	1.4019	535	1.0763
	Total	1.3553	805	.9518
Total	10 TO 14	2.6429	28	3.2113
	15 TO 19	1.9561	478	1.8027
	20 TO 24	2.5575	913	3.3914
	Total	2.3566	1419	2.9611

The differences by age and gender are clear: males admit to many more sexual partners than females, the highest numbers being for males aged 20-24, who report an average of 4.2 partners. Females either do not have, or do not like admitting to having, more than one sexual partner.

Home environment is not significantly related to the mean numbers of partners for sexually-active youth, but a strong relationship is found with substance use. The mean number of partners for those who have not indulged in any substance use is 1.9, compared with means of 3.7, 5.1 and 4.0 partners for those experienced in one, two and three types of substance use respectively. Age and the predominance of male substance abusers are only partly related to these results.

### **6.3 Communication and Decision Making on Sexuality.**

Before they first had sex , 57% of unmarried youth discussed the issue with their partners. Forty-three percent did not discuss. Three quarters of both young men and young women believe that a boy is the one who is supposed to decide whether or not to have sex. Young people, especially women, therefore, need assistance in communicating with their partners as well as in decision making on sexuality and

reproduction.

Most young unmarried women (71%) discuss the possibility of marriage before their first sexual encounter compared to 41% of their male counterparts.

#### **6.4 Sex with Sugar Daddies and Sugar Mummies**

A much-publicized matter, sex between young people and much older, and wealthier, men and women, is relatively uncommon. Only 7% of unmarried female youth who had had sex, had their first sexual experience with a married man (Sugar Daddy), and less than 1% of young men had had their first sexual experience with a married woman. However, assuming a certain amount of under-reporting in this matter, the implication is that a significant number of young girls are being sexually exploited by married men. The higher incidence of forced sex involving young girls has already been noted.

#### **6.5 Peer Pressure**

Thirty-seven percent of sexually active males have been influenced by friends to have sex compared to 19 % of sexually active females. Peer pressure is therefore higher among males than females. Table 3, above, may also suggest peer pressure for sexual initiation.

## 7. Family Planning and Reproductive Health

### 7.1 Knowledge and Attitudes

Basic awareness of contraceptive methods is high, with 98% of males and 83% of females able to recognize at least one method. Table 7 shows the proportions recognizing specific methods of contraception.

**Table 7. Knowledge of specific contraceptive methods**

<b>Contraceptive method</b>	<b>% Knowing Method</b>
Pill	52
Male Condom	48
Female Condom	7
Spermicides	6
Injectables	18
IUD/LOOP	15
Implant	4
Female Sterilisation	7
Male Sterilisation	6
Safe Days	4
Withdrawal	3
Other	1

Pills and condoms are best-known methods. No other single method was known to more than 18% of respondents.

Approval, by youth, of the use of FP methods out of marriage depends strongly on whether or not they, themselves, are sexually experienced, as Table 8 shows.

**Table 8. Opinion on use of family planning methods by unmarried youth**

<b>Opinion</b>	<b>Sexually Experienced (%)</b>	<b>Not Yet Had Sex (%)</b>	<b>Total</b>
Approve	58	26	31
Do not approve	40	65	62
No Opinion	2	1**	7
Number	745	4701	5446

Thirty-one percent of young people said they would approve use of family planning by sexually active unmarried young people and 62% would not approve. A proportion of 58% of unmarried respondents who were sexually experienced, however, said they would approve use of family planning methods by unmarried young people who are sexually active.

In Zimbabwe, policy and provider bias against young unmarried clients, may cause difficulties in access to methods of contraception. However, only 23% of sexually-active respondents noted difficulties in obtaining methods.

Only 4% of youth cited rhythm / "safe days" as a method of avoiding pregnancy (see Table 7). For unmarried youth, however, "safe days" is the second most commonly

employed method. The data on reproductive health knowledge of young people, however, show that most of the youth (49%) openly admitted that they do not know the fertile time of the monthly cycle. Only 4% correctly identified the period in the menstrual cycle during which pregnancy is most likely to occur, and, of those using "safe days" as a method, an astonishingly low proportion of 7% correctly identified the "safe days".

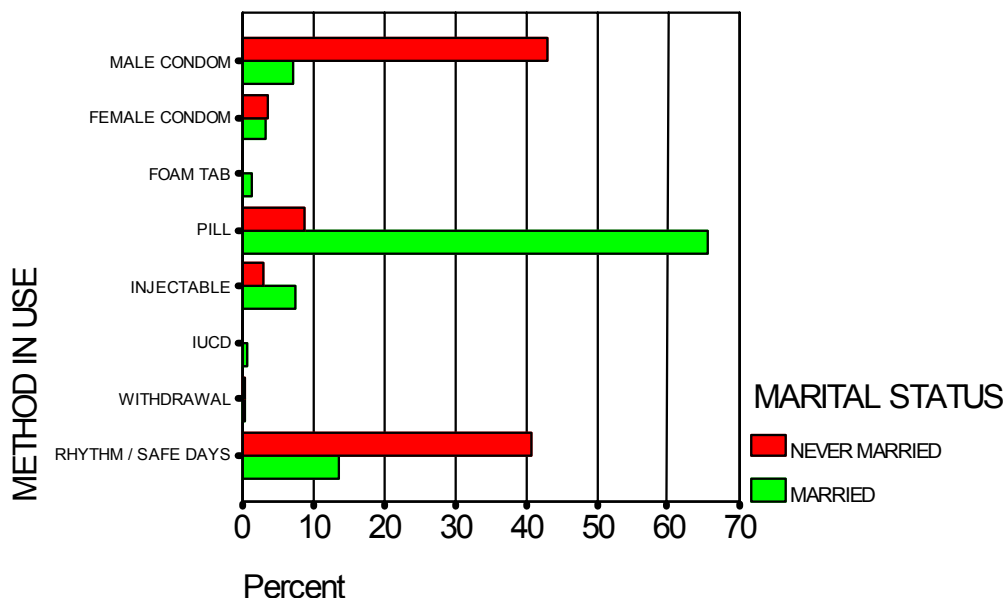
Prior knowledge of body changes is at a low level. The average age at menarche is 14 years but 39 % reported onset by 13 years. Most young females who have menstruated (73%) and young males (81%) who have had wet dreams said they did not know what to expect the first time this happened.

## **7.2 Contraceptive Use**

The ever-use of contraceptives, for the whole sample, was 58%, and the contraceptive prevalence rate was 38%. For married females only, the CPR was 48.1%, and, for unmarried females over 15 years, the CPR was 6.8%. Contraceptive use among sexually-experienced, unmarried youth is slightly higher than among married youth.

Figure 5 shows the contraceptive method currently used by married and unmarried youth.

**Figure 5 Current use of contraceptive methods: Married and Unmarried youth**



There are clear differences in the use patterns of contraceptives between married and unmarried youth. Unmarried youth rely on two main methods - the male condom and "safe days", the latter, as noted above, is likely to be very unreliably used.

Young married users employ a wider range of methods, perhaps reflecting both the easier access and the more stable relations amongst the married group. The pill dominates, used by almost two-thirds of young married couples who are using any method.

With the well-documented hazards of HIV/AIDS and unwanted pregnancy to contend with, sexually-active youth require a high level of protection, particularly through condom use. However, 46% and 53% of sexually active unmarried males and females respectively had not used anything to protect themselves against STIs and pregnancy the last time they had sex. The major reason given (23%) for not using contraceptives was that "having sex was unplanned/it just happened".

## 8. Pregnancy and Childbearing

It has often been noted that teenage and premarital pregnancies in sub-Saharan Africa often lead to dropping out of school, illegal abortion, child abandonment and high mortality among new-borns. Teenage childbearing is most likely to be a problem among unmarried girls, especially when they are still in school.

**Table 9. Percent of youth who have been / have made a girl/ pregnant by marital status**

<b>Marital Status</b>	<b>Male (%)</b>	<b>Female (%)</b>
Never Married	1.6	5.6
Married	66.4	85.6
Total	4.4	24.6

Table 9 shows that 6 % of all unmarried females in the survey reported having been pregnant while 2% of all unmarried male youth reported having made a girl pregnant. Just over a third of those who got pregnant were enrolled in school and a large majority, more among females, had to drop out of school.

Most pregnancies (70%) occurred while girls were between 15 and 19. The average age of first pregnancy for female respondents was 18 years.

The survey showed that 91% of unmarried females who had ever been pregnant had never used family planning before their first pregnancy.

Amongst those who had ever been pregnant, 7% reported that the pregnancy ended as

either a miscarriage or an abortion. However, 22% of all the respondents reported that they knew of a girl in the 10 - 24 years age range who got pregnant and had an abortion. This may indicate that there was an under-reporting of abortions.

## **9. Marriage and Fertility Preferences**

Early marriage is uncommon in Zimbabwe. Twenty percent of female compared to 4% of male respondents were married and the pattern is similar for both urban and rural areas. The average age at first marriage for females is 18 years and 21 years for males. Young women get married to men who are on average 6 years older than themselves while young men get married to women who are on average 3 years younger than themselves. The ideal age for marriage, according to the respondents, is 23 years for women and 25 years for men, a marked departure from the attitudes of traditional African societies.

Almost all 10 to 14 year olds have never married and only 16% and 1% of the 15 to 19 year old girls and boys respectively are married.

The ideal number of children a family should have averaged 4.8 (4.7 for males and 4.9 for females). However, when asked how many children they, themselves, would like to have, respondents nearly always gave a lower number. The average desired number of children was 3.5 (3.6 for males and 3.3 for females). This finding suggests that the youth have already internalised the advantages and needs for having smaller families.

## **10. HIV/AIDS and other Sexually Transmitted Infections (STIs)**

HIV/AIDS and STIs are a global threat to reproductive health and their prevalence among young people is worrisome. Ninety-three percent of respondents had heard of AIDS, and 75% had heard of sexually transmitted infections. Considering the proportions of relatively young persons interviewed, these figures are gratifyingly high. A larger proportion of sexually experienced respondents than those who had never had

sex said that they had heard of STIs (83% and 73% respectively).

A very low proportion reported ever having suffered from an STI - 5% of unmarried sexually active young males and 3% of their female counterparts. The low rates again suggest under-reporting. Table 10 shows that the admission of ever having had an STI is mainly associated with the older male adolescents.

**Table 10. Respondents who have ever had STI by age and sex**

Age Group	% Ever Had STI		
	Male	Female	Total
10 - 14	1.3	0.6	0.9
15 - 19	1.6	1.3	1.4
20 - 24	5.3	2.7	4.0

As in the case of early sexual activity, the occurrence of STI is associated with home environment, particularly where the mother is absent, and, to some extent, with substance abuse.

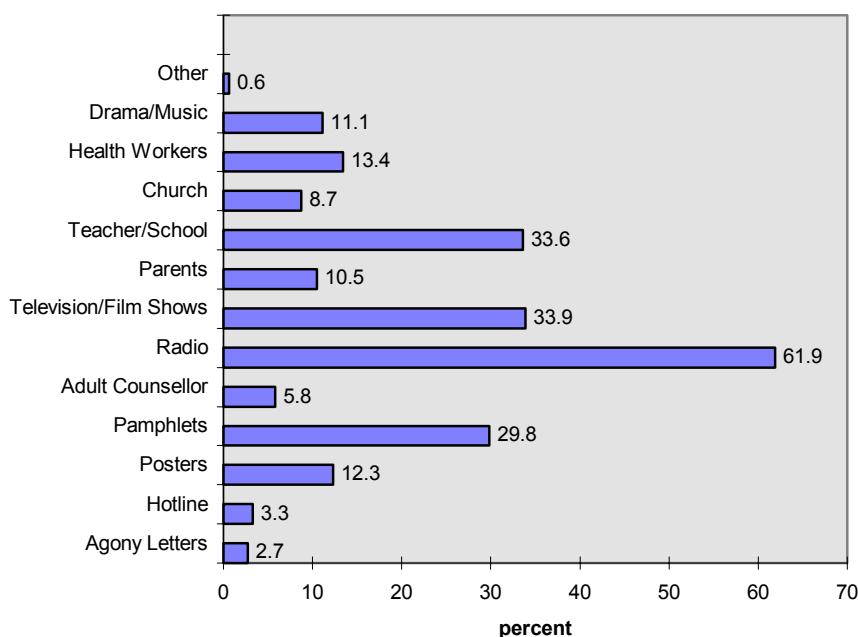
## 11. Media Exposure

Radio is the most important type of media for young people. 57% of respondents reported that they listened to the radio every day. Radio 2 is the most popular radio station for young people. Slightly over half of the young people (51%) usually read a

newspaper. The Herald is the most widely read paper (65%) followed by the Sunday Mail (32%). Most young people said they like reading the sports column. Magazines are also read. "Parade" is the most popular magazine among the youth. Two fifths of the youth usually watch television. A significantly higher proportion among the urban youth (66%) reported watching television compared to 24% of rural youth.

Figure 6 shows preferred media for disseminating reproductive health messages.

**Figure 6 Preferred media for dissemination of RH messages**



Most young people would prefer to have the radio as the means of hearing reproductive health messages. School-based information and television are cited as appropriate by around one-third of respondents. The low figure mentioning parents in connection with RH messages, suggests a chronic lack of communication between parents and children on these matters, and suggests that improvement in RH knowledge would be better directed through other channels.

## 12. Conclusions and Recommendations

The main conclusions of the 1997 National Youth Reproductive Health Survey are that:

- ☐ School attendance is almost universal up to age 15
- ☐ Two-thirds of the 20-24 cohort are unemployed
- ☐ There are insufficient youth centres and recreational facilities for youth in the country
- ☐ Few youths have sufficient and correct information about reproductive health issues
- ☐ Early sexual activity, substance abuse, STIs, pregnancy and abortion are likely to have been under-reported in the survey, but still occur at levels which require remedial measures
- ☐ Sexual activity is at a low level until age 15, but increases rapidly thereafter
- ☐ The majority of sexual encounters between youth are unplanned and tend to lead to unprotected sex
- ☐ Forced sex and rape are factors in early sexual encounters
- ☐ The absence of the mother in the home environment of youth is identifiable as a risk factor for many of the undesirable outcomes
- ☐ A relatively small proportion of sexual initiation involves older men and women, and most sexual activity occurs between peers
- ☐ The decision to have, or not to have sex is perceived by both males and females, as resting on the male
- ☐ Most young people are aware of at least one form of contraception, and relatively low proportions suggest difficulties in accessing contraceptives
- ☐ Contraceptive use by sexually-active unmarried youth is higher than for their married counterparts, but still at an insufficient level to combat AIDS, STIs and unwanted pregnancy
- ☐ The male condom and "safe days" are the most frequently-used methods for unmarried youth, the pill for married couples
- ☐ Knowledge of the fertile period is extremely poor, even amongst users of the

"safe days" method

- ☐ AIDS-awareness is high, but the gap between knowledge and practice in AIDS-prevention, is wide. There is a low rate of reporting of STIs
- ☐ Early marriage is uncommon, and desired family size suggests a continued lowering of fertility as youth mature
- ☐ Radio is the commonest form of media used by young people. Other forms of media show an urban bias
- ☐ Radio messages are the most acceptable form of communication about RH issues. Parents rank very low in preference by youth for receiving RH messages

Regardless of sexual activity or childbearing status, all young people need reproductive health services, such as sexuality education, and information about physical maturation. There is need for accurate sexual and reproductive health information and education for both boys and girls. A reproductive health IEC program for adolescents and adults who influence them should be developed and implemented.

An in-depth understanding of young people's reproductive behaviour is also needed to guide social policies. What complex physical, familial and cultural factors determine who will marry and when, who will begin sexual activity while still unmarried, who will start childbearing during adolescence, who will delay marriage and childbearing until much later in life, who will become parents first and marry later or remain unmarried - all are issues which require further investigations.

Under-reporting of sexual activity, and certain undesirable aspects of sex, for example, STIs, abortion, incest, rape and forced sex, as well as substance abuse, are very likely, and more sensitively-tuned research instruments are needed to bring these to light.

## Fact Sheet

### 1992 population Data

Total youth aged 10 - 24 years	3,694,886
Youths in urban areas	29.9%
Youths with no education	2.2%

### National Youth Reproductive Health Survey 1997

#### Sample population

Females aged 10 - 24	2729 (49.8%)
Males aged 10 - 24	2704 (50.2%)

#### Background Characteristics of Respondents

Percent living in urban areas	35.8%
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Age	10-14	15-19	20-24
Percent at school	93.2%	53.4%	9.1%
Percent working	5.5%	8.7%	22.6%
Percent unemployed	1.2%	37.0%	67.4%

Percent living with both parents	43.8%
Percent unmarried girls aged 15-19 living without mother	34.0%

#### Time Use

Percent belonging to any club/association/social group	30%
Percent spending time on sporting activities	25%
Percent visiting boyfriend / girlfriend	1.6%

#### Drug and Alcohol Use

Percent admitting to smoking	2.8%
Percent admitting to drinking	6.4%
Percent admitting to using hard drugs	4.2%

#### Dating, Marriage and sexual activity

Average age to start dating (all groups)	16.5 years
Ideal age to start dating (females opinion on females)	18 years
Ideal age to start dating (males opinion on males)	19 years

Percent of females ever-married:	All	23.4%
	10-14 years	0%

	15-19 years	16.2%
	20-24 years	58.3%
Percent of males currently married:	All	4.4%
	10-14 years	0%
	15-19 years	1.1%
	20-24 years	14.9%
Percent of 18 year old females ever-married		28.6%
Percent of 18 year old males ever-married		1.3%
	Males	Females
Percent who have ever had sex:	10-14 years 3.2%	0.7%
	15-19 years 17.8%	15.3%
	20-24 years 52.5%	46.6%
% Sexually active unmarried males		21.7%
% Best friends of unmarried males said to be sexually active		44.5%
% Sexually active unmarried females		9.4%
% Best friends of unmarried males said to be sexually active		30.1%
<b>Knowledge and use of Family Planning</b>		
Percent of females knowing any method		83.2%
Percent of males knowing any method		98.5%
Percent sexually-active youth who have ever used any method		55.7%
Percent sexually-active youth currently using any method		37.6%
<b>Desire for children</b>		
Mean ideal number of children among females		3.6
Mean ideal number of children among males		3.3
Percent of females who have given birth:		
Age	10-14	0.0%
	15-19	11.1%
	20-24	59.4%
<b>STI / HIV / AIDS</b>		
Percent knowing that HIV/AIDS is transmitted by sex		92%
Percent recognizing HIV/AIDS as an STI		82%
Percent able to name gonorrhoea as an STI		45%
Percent able to name syphilis as an STI		45%
Percent admitting to having had an STI		2%
Percent linking condom with protection against HIV/AIDS		73%
How can HIV/AIDS be avoided?		

Abstinence from sex	38%
Having only one sexual partner	42%
Using a condom	50%
Percent never-married youth using a contraceptive method at last sexual act	50%
Main reason for not using:	"Sex was unplanned" (22%)

## **MEDIA AND COMMUNICATIONS**

Percent youth who usually listen to radio	77%
Percent youth listening to radio daily	57%
Lowest levels of listening	Girls 10-14 years (70%)
Percent youth who usually read newspapers	51.5%
Percent youth who usually read magazines	36.4%
Percent youth who usually watch TV	38.4%
Urban	66%
Rural	24%
Percent youth who have ever attended a FLE session	5.1%
Percent knowing of a youth centre where they live	7%
Percent youth belonging to a social or sports club	30.7%
Urban	40.0%
Rural	25.7%
Males	32.5%
Females	25.7%
Percent who would prefer parents to deliver RH messages	10.4%
Percent who would prefer teachers to deliver RH messages	33.5%
Percent who would prefer the radio to deliver RH messages	61.9%