

Premarital Sexual Practice among School Adolescents in Nekemte Town, East Wollega

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Abstract

Background: Sexual activities among adolescents have been reported to be increasing worldwide. Several studies in Sub-Saharan Africa have also documented increasing premarital sexual activities among adolescents.

Objective: The objective of the study was to assess prevalence of premarital sexual practice and factors contributing to this practices among high school adolescents in Nekemte Town.

Methods: A cross-sectional study was conducted in Nekemte town of Oromia Regional State between February and March 2006.

Results: Three hundred sixty four (53.8%) male and 312 (46.2%) female high school adolescents participated in the study. About one-fifth (21.5%) of the participants had had premarital sexual intercourse at the time of the survey, of which 102 (70.3%) were males. While being male [AOR=2.11 (1.27, 3.51)], a ninth grade student [AOR=1.77 (1.05, 2.99)] and ever having a sexual partner [AOR=22.3 (13.1, 37.9)] were found to have significant positive association with premarital sexual practices, being less than 18 years was found to be protective against the practice [AOR=0.44 (0.26, 0.73)].

Conclusion: A considerable amount of school adolescents had started pre marital sexual activity that might predispose them to different sexual and reproductive health problems. Strengthening age and gender segregated IEC/BCC services on sexual and reproductive health in general and premarital sexual practices and its consequences in particular in school environments needs serious attention. [*Ethiop.J.Health Dev.* 2008;22(2):167-173]

Introduction

The World Health Organization (WHO) defines adolescent people as those between the ages of 10 to 19 years (1). Adolescence is the time of transition from childhood to adulthood during which young people experience changes following puberty (2).

Sexual activities among adolescents have been reported to be increasing worldwide. Several studies in Sub-Saharan Africa have also documented high and increasing premarital sexual activities among adolescents (3). However, viewing adolescents as a specific group with their own needs is a relatively recent practice, especially in developing countries (4).

Because of cultural taboos adolescents in many developing countries rarely discuss sexual matters explicitly with their parents. Most information for their patchy knowledge comes from peers of the same sex who may themselves lack adequate information or are incorrectly informed (5).

Studies also suggested that adolescents have limited knowledge about sexual and reproductive health and know little about the natural process of puberty. This lack of knowledge about reproductive health may have grave consequences (5). Moreover, sexual activities are occurring in the midst of an HIV/AIDS pandemic that disproportionately affects adolescents and young adults (4).

On the other hand, young people often face enormous pressure to engage in sex, especially from peers, exposure to unlicensed erotic video films and the desire for economic gain (7). As the result of this, a significant number of adolescents are involved in sexual activities at an early age (6, 7, and 8).

Adolescents in Ethiopia are also exposed to various risks such as unprotected sex, early marriage, early pregnancy and STIs/HIV/AIDS. Studies have shown that in Ethiopia 60% of adolescent pregnancies are unwanted or unintended (9). Premarital sex is one of the reproductive health problems witnessed in adolescence. Studies have revealed that the prevalence of premarital sex among in-school youth is higher in Oromia (31.3%) than nationally (19%) (5). However, factors that contribute to such an early initiation of sexual practices were not dealt in-depth within the study area.

Therefore, this cross-sectional study has been conducted to assess the magnitude of premarital sexual practice and factors contributing to this practice among high school adolescents in Nekemte town.

Methodology

A cross-sectional study (both quantitative and qualitative methods) was conducted from February to March 2006 to assess the prevalence of premarital sexual practice and the contributing factors among high school adolescents in Nekemte town. Nekemte is the capital city of East Wollega Zone in the Oromia Regional State. The town is located 331 km west of Addis Ababa with an estimated

population of 70,000 in 2005. There are 3 high schools (1 being a preparatory school), and 8 colleges, of which the government owns three and five are owned privately. Administratively, the town is divided into 6 sub city administrative divisions.

The source population for the study was all high school students in Nekemte town who were attending the school during the study period. The study population was students aged 10 to 19 years attending class during the study period in the selected high schools.

The sample size was calculated using the single population proportion formula with the following assumptions: expected prevalence of premarital sexual practice among adolescents was 31% (5) with desired precision of 5% at 95% confidence level and with a design effect of 2 and non response rate of 10%, the sample size was calculated to be 722.

A multistage sampling technique was used to get the required sample size. The two high schools, Biftu Nekemte and Darge high schools were purposely selected for the study. The third high school was excluded as this is a preparatory school and different from the two high schools. The total sample distributed to these two schools was proportionate to their student population size. The number of sampled students was calculated from each school and divided into grades, (9th and 10th). Among all sections, 35 sections were randomly selected (18 from Biftu Nekemte and 17 from Darge high schools) and the samples assigned to each school distributed proportionately by section.

Inclusion and exclusion criteria

Inclusion criteria

All regular day time students aged 10 to 19 years at the time of data collection who volunteered to participate in the study were included.

Exclusion criteria

Non-regular and night time class attendees whose age was less than 10 or greater than 19 years and who did not volunteer to participate in the study were excluded.

A structured, pre-tested and self-administrated questionnaire was used for quantitative data collection. Data collectors who have completed 12th grade and supervisors who knew the local language and culture were recruited for questionnaire administration and supervision, respectively.

Adequate training was given for data collectors and supervisors, both before and after the pretest, on the objectives of the study, the contents of the questionnaire, issues related to the confidentiality of the responses and the rights of respondents. The trainees were given the responsibility to handle the whole process of data

collection and to check and correct questions to be raised by the respondents. The overall data collection process was coordinated and supervised by supervisors and the principal investigators.

A total of eight Focus Group Discussions (FGDs) were conducted to supplement the quantitative survey in the study area. The first four FGDs segregated by sex and school were conducted for adolescent students using semi-structured open-ended questions which enabled the discussants to reflect on sexual experience and perceived determining factors for premarital sexual experience. The participants were in the age range of 15-19 years. The other four FGDs for teachers were organized in the same way. The FGDs were moderated using a pre prepared discussion guide to backup any information lacking during quantitative survey. A male supervisor moderated the FGD for males and a female supervisor moderated the FGD for females. The moderator tape-recorded the discussants' ideas, which were later on transcribed and translated. The participants for the discussion were selected purposively.

The study used premarital sexual practice as the dependent variable and socio-demographic and socio-economic variables (age, sex, and marital status), substance abuse (alcohol, khat, and drugs), HIV/AIDS knowledge, living arrangement, pocket money and family income as independent variables.

The collected quantitative data were entered into a computer and analyzed using SPSS version 12.0. During the process of analysis, frequencies and percentages of different variables were determined and odds ratios were calculated on some selected variables to determine the association of these selected variables. Logistic regression was used to control for confounders. The tape-recorded qualitative data were transcribed and translated under selected themes based on the question guides and summarized manually.

Ethical clearance was obtained from all concerned authorities at each level. In order to ensure privacy, male and female respondents gave their responses in separate rooms. Confidentiality was kept at each step of data collection and processing. The participants were assured that they have full right to participate or withdraw from the study. Health education was given on reproductive health including STI, HIV/AIDS and on premarital sexual practice for those who needed it.

Results

Socio-demographic characteristics of the study population

Six hundred seventy six of the total 722 school adolescents who were invited completed the survey questionnaire. Forty six questions (6.4%) were disregarded due to incompleteness. Among the total of

676 participants, 364 (53.8%) were males while the majority 455 (67.3%) were aged between 15-17 years with the mean age of 16 years. About two-fifth (39.6%) were attending ninth grade during the survey. Nearly all the respondents 663 (98.1%) were unmarried and the majority of the respondents 314 (46.4%) were Protestants followed by Orthodox religions followers (37.6%). Majority 624 (92.3%) were from Oromo ethnicity while 408 (60.4%) were living with their parents during the survey. More than a quarter of the respondents 179 (26.5%) reported having pocket money (Table 1).

Table 1: **Socio-demographic characteristics of the study population, Nekemte, East Wollega, 2006**

Variables	Frequency	Percentage
Sex		
Male	364	53.8
Female	312	46.2
Age		
< 15 years	18	2.7
15-17 years	455	67.3
≥ 18 years	203	30.0
Grade level		
Ninth	268	39.6
Tenth	408	60.4
Marital status		
Unmarried	663	98.1
Married	13	1.9
Religion		
Protestant	314	46.4
Orthodox	254	37.6
Catholic	32	4.7
Muslim	56	8.3
Others	20	3.0
Ethnicity		
Oromo	624	92.4
Amhara	39	5.8
Others	13	1.9
Currently living with		
Both parents	408	60.4
Single parent	96	14.2
Relatives, friends, fiancé/ spouses	136	20.1
Alone	36	5.3
Pocket money		
Yes	179	26.5
No	497	73.5
Total	676	100.0

About one-fifth (138) of the respondents' fathers were illiterate, and 250 (37%) of the respondents' mothers were illiterate. The majority, 41.3%, of fathers were government or private employees while about one-third of mothers were farmers. Income-wise, the majority, 67.9%, of the respondents were from middle class

families while 100 (14.8%) and 117 (17.3%) were from poor and rich families, respectively (Table 2).

Table 2: **Description of parents of the study population by education, occupation and economic status, Nekemte, East Wollega, 2006**

Variables	Frequency	Percentage
Fathers' Education Level		
Illiterate	138	20.4
Read and write	62	9.2
Primary (1-8)	152	22.5
Secondary (9-12)	158	24.0
Above 12	170	24.0
Mothers' Education Level		
Illiterate	250	37.0
Read and write	59	8.7
Primary (1-8)	158	23.4
Secondary (9-12)	122	18.5
Above 12	84	12.4
Fathers' Occupation		
Daily laborer	39	5.8
Farmer	232	34.3
Government/private Employee	279	41.3
Self employed business	126	18.6
Mothers' Occupation		
Daily laborer	40	5.9
Farmer	222	32.8
Government/private Employee	152	22.5
Self employed business	262	38.8
Economic Status of the Family		
Rich	117	17.3
Medium	459	67.9
Poor	100	14.8
Total	676	100.0

Sexual history of the adolescents

One hundred forty-five (21.5%) adolescents reported having had premarital sexual intercourse at the time of the survey, of which 102 (70.3%) were males. The mean age at first sexual intercourse was 16.2 years (16.2 ± 1.5) for males and 15.2 (15.2 ± 1.7) for females. Among those adolescents who had premarital sex, the majority (57.2%) had their first sexual intercourse between the ages of 15 and 17 years. Sixty-seven (46.2%) adolescents who had had premarital sex were from the 9th grade while 78 (53.8%) were attending 10th grade at the time of the survey. When the relationship of the adolescents to their first sexual partners was examined, the majority of the partners 77 (53.1%) were friends followed by acquaintance, 48 (33.1%). The main reasons for initiation of sexual intercourse, were: fell in love, which accounted for 49 (33.8%), desire to practice sexual intercourse in 44 (30.3%), peer pressure in 25 (17.2%), and for money or

gifts in 11 (7.6%) of the cases. When respondents were asked about the number of sexual partners, 95 (65.5%) of them reported that they had only one sexual partner while 50 (34.5%) had two or more sexual partners in the past 12 months prior to the survey (Table 3).

Table 3: Description of study population by their past sexual history, Nekemte, East Wollega, 2006

Variables	Frequency	Percent
Premarital Sex (n=676)		
Yes	145	21.5
No	531	78.5
Relationship to the first Sexual Partner (n=145)		
Acquaintances	48	33.1
Friend	77	53.1
Fiancé	16	11.0
Spouse	3	2.1
Relatives	1	0.7
Reasons to start sex (n=145)		
Fell in Love	49	33.8
Desire to practice sex	44	30.3
Got married	13	9.0
Raped	3	2.1
Material gift	11	7.6
Peer Pressure	25	17.2
Number of Sexual Partners (n=145)		
One person	95	65.5
Two and above persons	50	34.5

In the univariate analysis, being male, a Darge high school student, being a ninth grade student, ever having a sexual partner, ever drinking alcohol, having regular pocket money and ever chewing khat were found to be positively and significantly associated with premarital sex. Age less than 18 years was found to be protective in the crude analysis.

Multi-variate logistic regression analysis was used to minimize the effect of confounding variables and to identify the real factors contributing to premarital sexual practice. Among the socio-demographic variables, sex and age of the respondents, school type, grade level living arrangements, ever having a sexual partner and pocket money and from the behavioral variables, drinking alcoholic drinks and chewing khat were evaluated using multiple logistic regression against premarital sex. Accordingly, while male adolescents were more likely to report premarital sexual experience than females [COR= 2.54 (1.71, 3.77)] and [AOR=2.23, (1.35, 3.68)], age less than 18 years was found to be protective against premarital sexual practice both in

crude and adjusted OR, [COR= 0.36 (0.25, 0.52), AOR= (0.51, 0.31, 0.83)] after controlling for other confounding factors. Similarly, being a ninth grade student [COR=1.52 (1.05, 2.19), AOR=1.77 (1.05, 2.99)], and ever having a sexual partner [COR=22 (13.4, 36.2), AOR=22.3 (13.1, 37.9)] were found to be associated significantly with premarital both before and after controlling for confounders. In this study even though having regular pocket money, ever drinking alcohol and ever chewing khat were found to be positively associated with premarital sex in the crude analysis, the association did not remain significant after multiple logistic regression analysis. Living arrangement was not associated with premarital sex (Table 4).

Result of FGDs

Almost all discussants mentioned that premarital sex was not uncommon in the area and as many as 95% of adolescents were practicing sexual intercourse before marriage. They further explained that the practice was usually unprotected and so, many girls were getting pregnant and commit suicides. One of the discussants said *"I think, nowadays, adolescents' premarital sexual intercourse is becoming uniformly a fashion. Once the girl's breasts start to grow and become visible, it is a time for males to persuade that girl. Then communication begins to mislead by enticing her because girls are misled by males' sweet words and unexpectedly engaged in sexual practice"*.

The discussants also mentioned economic needs as a factor for pre-marital sex. They emphasized that the majority of adolescent girls are unemployed. They, therefore, start early sex to gain money. They also pointed out that adolescents migrate from rural area to town in search of job and money that increases the chance of interaction with the opposite sex and being engaged in unprotected pre marital sex.

The other reason cited by the discussants for the initiation of sexual intercourse was khat chewing and alcohol drinking. They said that *"when boys drink, they lose their control over their sexual drive and get forced to make premarital sex."*

Almost all discussants stressed that one of the contributing factors for engagement in premarital sex was *"girls' bad clothing styles"* such as tight trousers, short skirts and short T-shirts that expose their body, which increases boy's attention. These clothing styles were even condemned by the girl discussants. A 15 years old female discussant said, *"As males' sweet words mislead girls, girls' clothing styles mislead boys'. We girls should wear normal clothes that doesn't expose our body, and doesn't attract the opposite sex"*.

Table 4: Variables evaluated for possible association with premarital sexual intercourse among high school adolescents, Nekemte, East Wollega 2006

Variables	Premarital sex		Crude	OR (95%) CI	
	Yes	No		Adjusted	
Sex					
Male	103 (28.3)	261 (71.7)	2.54 (1.71, 3.77)	2.11 (1.27, 3.51)	
Female	42 (13.5)	270 (86.5)			
Age					
<18 years	75 (15.9)	133 (84.1)	0.36 (0.25, 0.52)	0.44 (0.26, 0.73)	
≥18 years	70 (34.5)	398 (65.5)			
School Type					
Darge High School	79 (25.8)	227 (74.2)	1.60 (1.11, 2.32)	1.32 (0.80, 2.16)	
N/Biftu High School	66 (17.8)	304 (82.2)			
Grade Level					
Ninth grade	69 (25.7)	199 (74.3)	1.52 (1.05, 2.19)	1.77 (1.05, 2.99)	
Tenth grade	76 (18.6)	332 (81.4)			
Currently living with					
Both families	67 (16.4)	341 (83.6)	0.59 (0.25, 1.42)	0.67 (0.25, 1.86)	
Single family	22 (22.9)	74 (77.1)	0.89 (0.34, 2.40)	1.19 (0.39, 3.68)	
Relative, fiancé or friends	47 (34.6)	89 (65.4)	1.58 (0.65, 2.40)	1.74 (0.61, 5.00)	
Alone		27 (75.0)	1.00		
Have sexual partner					
Yes	122 (54.2)	103 (45.8)	22.0 (13.4, 36.2)	22.3 (13.1, 37.9)	
No	23 (5.1)	428 (94.9)			
Alcohol drink					
Yes	29 (34.9)	54 (65.1)	2.21 (1.32, 3.72)	0.59 (0.27, 1.27)	
No	116 (19.6)	477 (80.4)			
Pocket money					
Yes	52 (29.1)	127 (70.9)	1.78 (1.2, 2.64)	1.16 (0.69, 1.93)	
No	93 (18.7)	404 (81.3)			
Khat chewing					
Yes	18 (36.0)	32 (64.0)	2.21 (1.15, 4.22)	0.61 (0.23, 1.61)	
No	127 (20.3)	499 (79.7)			

Discussion

The overall prevalence of premarital sexual practice in the study population was 21.5%. The proportion of male adolescents (70.3%) who were involved in premarital sex in the study area was more than twice the proportion of female adolescents (6.4%). This finding is relatively low particularly for males compared to other prior study findings in the country. In Addis Ababa, for example, the proportion was 39.8% for males and 5.6% for females (14). In Gondar, it was 46.2% and 16.2% for males and females, respectively (19). The National finding of the prevalence of premarital sex among in-school adolescents was 19%, which is lower than the current finding (5). This finding is high when also compared to another similar study done in Harar where 65% of males and 20% of females were sexually active (12). However in Sub-Saharan Africa, the figures are higher than the current findings, which were 45%-52% for both sexes (16). But it is found to be higher than the findings from Asia, which ranges from 2%-11% (10). This shows that premarital sexual practice among school adolescents in the study area is higher than some other study findings. This was substantiated by the focus group discussion which emphasized that premarital sex in the study area was not uncommon and was becoming a fashion.

In this study, the mean age at first sexual intercourse was about 16.2 ± 1.5 years for males and 15.2 ± 1.7 years for

females. Studies conducted in Addis Ababa in 1994 and 2000 reported that the mean age at first sexual intercourse was 15.5 ± 5.4 years for females and 16.4 ± 4 years for males and 15.3 ± 1.45 for both sexes (14, 15). A study from Cameroon also showed that the mean age at first sexual practice was 15.6 years for males and 15.8 years for females (18). The mean age of the adolescents at first sexual intercourse in the current study also falls within the range of other similar studies both in the country and in the continent.

Early and premarital sexual practice is becoming common and is one of the risky sexual behaviors of adolescents and young people. One study revealed that 71.9% of boys and 71.4% of girls had had first sexual intercourse between the ages of 15 to 17 years, while 13% reported having sex between the ages of 10-14 years (17). A study done in Uganda also showed that adolescents start sex as early as 10 -14 years (13). The current study showed that, among those high school adolescents who had premarital sex, only 1 (0.7%) reported having had first sexual intercourse before the age of 15 years, while 74 (51.0%) and 70 (48.3%) reported having the first sexual practice between 15-17 years and at the age of 18 and above, respectively. This finding is lower than findings in previous studies. This may be attributed to the traditional norm where early

sexual practice is condemned in our society. More than half of the participants had had sex between the ages of 15-17 years which might be related to the early marriage practices which is common in the country.

Although adolescents' sexuality is often affected by hormonal influence, the role of psychological factors is not insignificant. The desire to maintain the relationship with friends and peer pressure, the need to experiment, lack of guidance and poor modeling of elders are important in terms of influencing adolescent sexuality (11, 13). In this study, the main reasons claimed by the adolescents for starting the first sexual intercourse were falling in love, 49 (33.8%), desire to have sex, 44 (30.3%) peer pressure, 25 (17.2%), and to get money or gifts, 11 (7.6%). In addition, the qualitative findings showed that increased number of unfiltered pornographic films in the town, females dressing styles, and khat chewing which usually followed by alcoholic drinks, mentioned as a major contributing factor to premarital sexual practices in the study area.

In this study, being a male adolescent, a ninth grade student and ever having a sexual partner were found to be positively and significantly associated with premarital sex in the study area. Similar studies show that a much higher percentage of young men reported having premarital sex than young women (10). This may be due to cultural norms that encourage and approve sexual experimentation of boys and the value given to virginity for girls (20). Even though the possibility of reporting bias cannot be ruled out, studies showed that the sex difference in sexual behavior are not merely the result of under reporting by females or over reporting by males, but rather are the outcome of sexual ideology that promotes males' sexuality and controls females' sexuality (21). Involvement of more ninth grade students in premarital sex may also be explained by the fact that they are new to the high school environment as most of them come from rural settings and may have difficulties of refusing an offer to have sex from their seniors.

Various studies have shown that economic factors have a significant role in adolescents' sexuality. Young girls enter into sexual relationship with older and wealthy men (referred as sugar daddies) who can assist them with school related expenses, or purchase of material goods. Others engage in sexual exchanges in order to achieve long-term objectives of establishing contacts with wealthy and prestigious people that may be beneficial in the long term and assistance with searching job (20). The current study also showed that 11 (7.6%) of the adolescents were engaged in sex in exchange for money or gifts. This figure is lower than that of Botswana where one-in-five out of school adolescents reported money in exchange for sex. The difference might arise from the difference in the environment where our study considered in-school adolescents while that of Botswana studied out-

of-school adolescents. This finding was supported by the FGDs where the discussants emphasized the idea that adolescents, especially females are forced to engage in sexual intercourse to satisfy their economic and material needs such as clothing, ornaments and cosmetics.

From this study, it is possible to conclude that a considerable proportion of adolescents had engaged in premarital sex. Personal desire to experiment, peer pressure and economic needs were the most frequently mentioned reasons for school adolescents to commence premarital sex. While being male gender, ninth grade student and ever having a sexual partner were positively associated with premarital sex in the study area, age less than 18 years was found to be protective against premarital sex. The need to strengthen age and gender segregated ICC/BCC services about sexual and reproductive health in general and premarital sex and its consequences in particular within the school environment is recommended.

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