



Proportion of Premarital Sexual Practice and Coupled Factors among High School Students in Alamata Town, Tigray, Ethiopia

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ABSTRACT

Background

The world wide trend in sexual activity of adolescents at young age is increase in the world. In many countries the majority of young people are sexually active before formal marriage and it is common among 15-19 years old.

Objective

To assess the Proportion of pre martial sexual practice and its associated factor among High School Students in Alamata Town, 2017.

Methods

A cross sectional study design was used and a structured pre-tested questionnaire was the tool to collect the data. Random sampling technique was used to select the high school from all high schools in Alamata town and proportionate stratified sampling technique and simple random sampling was used to select samples from grade 9th and grade 10th.

Results

The Proportion of pre martial sex among the study participants of this study was 18.9%. The risk factors associated with premarital sex among the study subjects are grade level, sex, alcohol use, khat use, watch sex movies, work to get money.

Conclusion

From this study it is possible to conclude that high school students engaged in premarital sexual practice (3.54% of females and 15.36 % of males) which is found to be higher than other studies. Most of students to start sexual activity were fall in love, had desire, peer pressure, alcohol drinks.

Keywords: Proportion, Premarital sex, Coupled Factors , High school, Students

INTRODUCTION

The world wide trend in sexual activity of adolescents at young age is increase in the world. In many countries the majority of young people are sexually active before formal marriage and it is common among 15-19 years old. 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 significant physiological, psychological and social changes following puberty; but not immediately assume the roles, privileges and responsibilities of adulthood [2].

The world today is experiencing a rapid increase in the number of young people. The trend in sexual activity of adolescents at younger are increase in the world. In many countries the majority of young people are sexually active before age 20, premarital sex is common among 15-19 years old [3]. Premarital sex is a penetrative vaginal or anal sexual intercourse performed between couples before formal marriage. Some people who advocate virginity and abstinence argue that those people engaged in such sexual practice may have sex with many sexual partners and may have high number of life time sexual partners. As a result, they may be liable to acquire STIs including HIV. Besides, females, particularly adolescent girls may end up with unwanted pregnancies, abortions, teenage deliveries, and various complications of these including death. Moreover, the girls may dropout from school to look after their children and in most cases they become economically dependent up on their parents [4].

But, in addition to this, females may end up with unwanted pregnancy and its negative sequel. Both male and female adolescents are usually curious to discover sex and are highly liable to practice premarital sex which is usually unprotected.

Family context has been shown to have consistent and strong effects on the timing of sexual debut. Adolescent living in single-parent families or with stepparents initiates sexual activity earlier than those in two-parent families. [5]. Adolescent feelings of closeness and connectedness to parents, parental disapproval of sex, and positive peer influences have been shown to delay sexual activity [6]. Dating, and especially early steady

dating, provides a context for many adolescent sexual experience. Previous studies have shown that adolescents' attitudes about sex affect adolescent sexual behavior, more permissive attitudes lead to earlier first sex [7].

One in every five people in the world is an adolescent, defined by World Health Organization as a person between 10 to 19 years of age. Unsafe sex is a major threat to the health and survival of millions of adolescents. Each year, one in 20 adolescents worldwide contracts STI including HIV. Every day, over 7000 young people aged from 10 to 24 years become infected with HIV [8]. Globally more than half of all new HIV infections are among 15 to 24 years old [9].

Early sexual initiation may predispose young people to HIV as their chances of having several partners before marriage increases [10]. Therefore, delaying the age of sexual debut and increased condom use is recommended in preventing HIV infection for this age group [11]. In Zambia, behavioral interventions have led to a decline in the prevalence of HIV [12].

In many societies, premarital sex is a taboo, especially among unmarried girls [13]. This norm is widespread in rural Ethiopia, as in many traditional societies [14]. A study about the concepts of HIV and AIDS in Ethiopia suggested that premarital sex may contribute to the expansion of HIV and AIDS [15]. Indeed, several studies from Ethiopia have shown that young people are engaged in premarital sex, have multiple sexual partners, and do not use condoms at all or use them irregularly [16].

Adolescents in Ethiopia are also exposed to various risks such as unprotected sex, early marriage, early pregnancy, sexually transmitted infections (STIs) and HIV/AIDS, unemployment, drug abuse and crime [17]. Moreover, studies show that in Ethiopia, 60% of adolescents 'pregnancy is unwanted or unintended pregnancies resulted from unprotected sexual intercourse [18].

Schools are the ideal places where adequate and accurate information be provided along with their formal education. However, it is one of the least researched topics in Ethiopia, Due to the sensitivity of the topic of premarital sexuality; youth receive inadequate education, guidance and services on reproductive health.

OBJECTIVE

- To determine the proportion of pre-marital sex among high school students in Alamata
- To identify factors associated with premarital sex among high school students in Alamata

METHODOLOGY

- **Study Area and period**
The study was conducted among high school students in Alamata from February to March 2017.
- **Study design**
A cross-sectional study design was employed
- **Population**
- **Source population**
The source population for this study was all high school students in Alamata.
- **Study population**
All high school students attending their regular education at the time of data collection and fulfilling the inclusion criteria was included.
- **Inclusion criteria**
All regular unmarried high school students and attending their regular education at the time of data collection were included.
- **Exclusion criteria**
 - ✓ Those who have psychiatric, visual impairment and married students were excluded from the study.
 - ✓ Those who are not willing to participate

Sample size determination

The required sample size was calculated by single population proportion formula and p-value obtained from study conducted in Nekemte, prevalence of premarital sex among high school adolescents 21.4% in the literature.

A single population proportion formula, $[n = \frac{(z \frac{\alpha}{2})^2 p(1-p)}{d^2}]$, was used to estimate the sample size. ($p = 0.214$), 95% confidence interval, margin of error 5% ($d = 0.05$). Computing with the above formula and 10% of contingency for non-respondent rate gives a total sample size of 264

Sampling technique

A random sampling technique (lottery method) was used to select one high school from all high schools in Alamata. Consultation with the school administration was made to obtain details of classes and respective numbers of students in the school. Proportionate stratified of sampling technique was used to select sample from each grade.

Sample size from G9 = $844 * 264 / 1631 = 137$, sample size from G10 = $787 * 264 / 1631 = 127$

And then simple random sampling was used to select students.

Dependent variable

Premarital sexual practice

Independent variable

Socio-demographic variables (age, sex, grade level, religion, ethnic group, parental education level, family monthly income, living with, living area, work to get money). Substance use (alcohol, Khat, drugs), watching sex movies

Data collection procedures

The structured questionnaire was prepared in English language after review of relevant literature and was translated to local language and back to English language. The questionnaires were closed ended and have two parts socio demographic and about pre marital sex practice.

Data collection method and data collectors

Data was collected by three trained 4th year nursing students of Wollo University, and data was collected using self-administered structured questionnaires from February to March 2017 and it takes only about 15 minutes to fill the questionnaires, the participant was informed about the study and informed consent was gained by their signature.

Data quality management

The questionnaires which were initially developed in English and were translated to local language by a person who can speak both languages and then back to English to ensure consistency. Pretest was done in other school students out of the main study nearby to the study area. And the questionnaires were assessed for clarity, length, completeness where missed patterns were rephrased. Data was entered to Epi-Info 3.5.1

for windows and analyzed using SPSS software version 16 for windows. The data was double entered to check the consistency and was cleaned and edited before analysis.

Data processing, analysis, interpretation and presentation

Data was processed and analyzed using scientific calculator, and manual. The collected data was summarized and was presented in graphs, the frequency, percentage and cross tabulation of variables was done and also data was checked for completeness, consistency and further cleaning of data was done. Odd ratio was performed on some selected variables to determine the association of these selected variables and Logistic regression was used to control any confounders.

RESULTS

The total sample size was 264 high school students from these, 254 study participants were provided their complete and relevant response rates 96.21%. The rest did not provide either complete data or refused to complete the questionnaires were not included from the analysis.

Socio demographic characteristics

The mean age of the study participants were 17 with standard deviation of 1.42 the maximum age was 21 years and the minimum age was 13 years. One hundred twenty six (49.61%) of the study subjects were male and the remaining one hundred twenty eight (50.39%) were females. Most of the students 168 (66.14%) were grade 10 and 86 (33.86%) were grade 9. The majority of the study participants 219 (86.22%) were Tigray followed by 28 (11.02%) Amhara 5 (1.97%) were Afar and 2 (0.79%) were others. By religion 207(81.50%) were orthodox, 36 (14.17%) were Muslim, 9 (3.54%) were protestant and 2 (0.79%) were catholic.

Educational level of the study subjects family majority of them can read /write 93(36.62%), 50(19.69%) were collage/university level, 41(16.41%) were illiterate, 36(14.17%) attend primary school and the remaining 54 (13.39%) attend secondary school.

Monthly income of most of the study subjects family is above 2000birr (37.00%) less than 500 birr accounts 53 (20.87%),500-1000 birrs accounts 49 (19.30%) 1100-1500birrs accounts 30 (11.81%),1600-2000 birr accounts 28 (11.02%). About their living area most of the study subject lives in urban 197 (77.56%) and 57 (22.44%) were in rural area. One hundred nine (42.91%) study subjects work different jobs to get money .these includes 50 (45.87%) shop keeper,32(29.40%) were labor worker 19 (17.43%) were café serevant,6(5.50%) were shoe shining and 2 (1.83%) work other jobs.

Concerning current residence of the study participants majority of them 153 (60.24%) were living with their both parents 43 (16.93%) were living with their mother only, 20 (7.87%) were living alone 11(4.33%) were living with brother, 11(4.33%) were also living with their sister and the rest 4 (1.57%) were living with other relatives.

Premarital sex

The proportion of premarital sexual practice in this study was 18.8%. The maximum age at which the study subjects had sexual intercourse was 20 year and the minimum age was 11 year with the mean age 15.5. The prevalence among male was 15.36% and among female was 3.54% The maximum age of their first sexual partner for female students was 24 year and the minimum age was 12 years for male students with the mean age of 18 and 21(43.75%) of them had sexual intercourse with a friend 11(22.92%) with acquaintance, 10(20.83%) with boy/girlfriend, 5(10.42%) with their fiancé, 1(2.08) with other people. Out of two hundred sixty four majority of them 215 (84.65%) had no sexual partner and the remaining 39 (15.35%) had sexual partner.

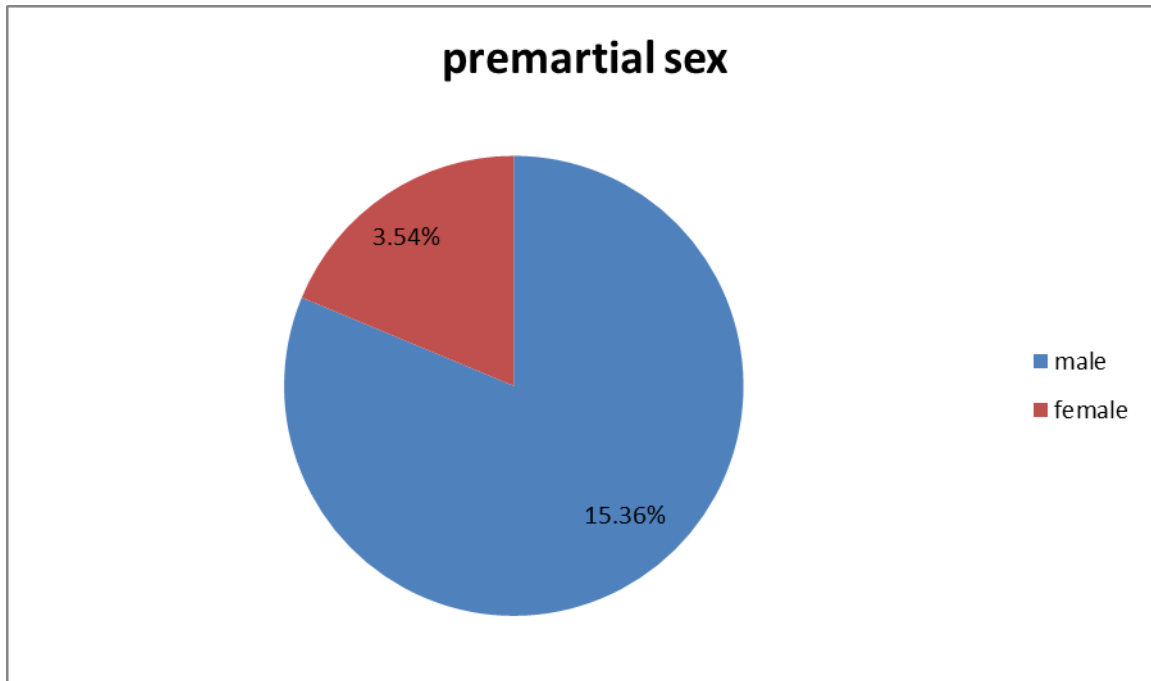


Figure: Premarital sex among male and females in Tadagiwa High School 2017

Above shown data depict that the total number of sexual partner they have had sexual yet. Majority of them 28(58.3%) of them have had sex with one partner 8 (16.67%) have had sex with two partner and 1(2.08%) have had sex with three partner.

Factors associated with premarital sex

The risk factors associated with premarital sex among the study subjects are grade level, sex, alcohol use, khat use, watch sex movies, work to get money. Grade 10 students are 2.6 risk to be involved in premarital sex AOR = 2.6, 95% CI [1.60, 4.06], living area is also another factor associated with premarital sexual practice those who lives in rural area are more likely to involve in premarital sex AOR=2.09 [1.29,3.35] ,male students are more likely to involve in premarital sex AOR= 5.93,95% CI [3.43,10.26], and also those who use alcohol and khat are more likely to involve in premarital sex AOR=12.08,95% CI [7.10,20.58], AOR=6.86 [3.82,12.15] respectively. Those who watch sex movies are more likely to involve in premarital sex AOR=10.70, 95%CI [6.49, 17.64], and also those who work to get money are more likely to engage in premarital sex AOR=2.15, 95%CI [1.36, 4.10]

DISCUSSION

The world today is experiencing a rapid increase in the number of young people. The trend in sexual activity of adolescents at younger are increase in the world. in many countries the majority of young people are sexually active before age 20 pre martial sex is common among 15-19 years old [3]. The prevalence of pre martial sex among the study participant was 18.9% with the mean age of 15.5 and the maximum age was 20 and the minimum age was 11. Which is higher when compared to the study conducted in Jimma town is 17.9% high school adolescents (6.75, females, 11.25 of males) were involved in unprotected sexual activities [19].

In Robit High School students the prevalence of premarital sex was 14% the prevalence of premarital sex among this study subjects is higher when compared to the study conducted in Robit high school students. The main reason of having sexual intercourse of those study subjects was fall in love (37.5%) followed by had desire to have sexual practice (25%) which is almost similar to study conducted in robit high school students, large number of students start premarital sex because of fall in love (44.4%) had desire (22.2%) [20]. In this study (66.67%) of the students who have

experienced premarital sex had one sexual partner. Similar to the study conducted among Agaro high school adolescent students showed that large proportion of the study participants 55.6% had one sexual partner [21].

The risk factors associated with premarital sexual practice among this study were different in grade level, sex, living area, alcohol use, khat use, those who work to get money and watching sex movies are associated with pre marital sexual practice .in this study grade 10th students are more likely to involve in premarital sex AOR=2.60,95% CI [1.60 , 4.06] which is higher than the study conducted in Robit high school students, AOR=0.5, 95% CI [0.24, 1.01]. In this study males are more likely to engage in premarital sex AOR = 5.93, 95% CI [3.43,10.26] which is higher than the study conducted in Robit high school students males are 1.3 times more likely to practice pre martial sex. This is just because of students in Alamata are more affected by globalization than Robit high school students. in this study alcohol user are more likely to involve in premarital sex AOR =12.08 ,95%CI [7.10,20.58] which is higher when compared to study conducted in Robit high school students. In Robit High school alcohol user are 2 times at risk to practice premarital sex.

CONCLUSION

From this study it is possible to conclude that high school students engaged in premarital sexual practice (3.54 of females and 15.36 of males) which is found to be higher than most of students to start sexual activity were fall in love, had desire, peer pressure, alcohol drinks. Premarital sexual practice among study participants of this study was

strongly associated with being grade 10th, alcohol users, watching sex movies, sex, and working to get money and chewing Khat.

Recommendations

- ✓ Tadagiwa high school should establish opportunity for student to dialog with their parents about risk of premarital sex.
- ✓ The school should add life skill behavioral and reproductive health education in curriculum.
- ✓ The school should provide psychosexual services for adolescent students.
- ✓ The school should Establishing reproductive health club in school.

Ethical consideration

The research project proposal was submitted to Wollo University, College of Medicine and Health Sciences, School of Nursing and Midwifery, Department of Comprehensive Nursing, Following the approval by Institutional Review Board, ethical clearance from Wollo university and letter of permission from the school was obtained, the study was conducted through consenting the study participants to answer the self-administered questionnaire privately and the individual students was not subjected to any harm as far as the confidentiality was kept. No personal identifiers were used on data collection.

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REFERANCES

- [1]. UNDO/UNFPA/WHO, Special Program of Research Development and Research Training in Human Reproductive Health (HRP), Progress in Reproductive Health Research; World Bank, 64, 2003.
- [2]. Strengthening the Provision of Adolescent-Friendly Health Services to meet the health and development needs of adolescents in Africa. A consensus statement, Harare, Zimbabwe, 2000, 17-21.
- [3]. UNFP the state of world population Geneva, 2006.
- [4]. <http://www.adulthoodwonderful.com/>, Retrived 2017.
- [5]. Manlove JS, Ryan S, Franzetta K: Risk and protective factors associated with the transition to a first sexual relationship with an older partner. *Journal of Adolescent Health* 40, 2007, 135-143.
- [6]. Bearman PS, Bruckner H, (Eds): *Peer Effects on Adolescent Girls' Sexual Debut and Pregnancy*. Washington, D.C.: National Campaign to Prevent Teen Pregnancy; 1999.

- [7]. Marin BV, Kirby DB, Hudes ES, Coyle KK, Gomez CA: Boyfriends, girlfriends and teenagers' risk of sexual involvement. *Perspectives on Sexual and Reproductive Health* 38, 2006, 76-83.
- [8]. World Health Organization (WHO) Improving adolescent health and development. Adolescent Health and development program. Family and reproductive health. WHO/FRH/ADH, 1998/98-18.
- [9]. Bongaarts, J. and Cohen, B. Adolescent reproductive behavior in the developing world Introduction and overview. *Studies in family planning*; 29(1), 1998, 99-105.
- [10]. UNFPA: State of the world population 2003: Gender inequality and Reproductive Health; 2003.
- [11]. Lamptey PR: Reducing heterosexual transmission of HIV in poor countries. *Bmj* 324(7331), 2002, 207-211.
- [12]. Michelo C, Sandoy IF, Dzekedzeke K, Siziya S, Fylkesnes K: Steep HIV prevalence declines among young people in selected Zambian communities: population-based observations (1995-2003). *BMC Public Health* 6, 2006, 279.
- [13]. Grao G: Sexuality, and HIV/AIDS: The What, the Why, and the How. : Plenary address on the XII the International AIDS Conference [http://siteresources.worldbank.org/EXTA_FRREGTOPGEN/DER/Resources/durban_speech.pdf].
- [14]. Reminick AR.: The Symbolic Significance of Ceremonial Defloration among the Amhara of Ethiopia. *American Ethnologist* 3(4), 1976, 751-763.
- [15]. Pankhurst A: Conception of and responses to HIV/AIDS Views from 26 Ethiopian rural villages. [http://www.wed-ethiopia.org/docs/working_paper_2.pdf].
- [16]. Fekadu Z: Casual sex debuts among female adolescents in Addis Ababa. *Ethiop J Health Dev* 15(2), 2001, 109-116.
- [17]. FikaduA. And Fikadu K.(2002).Creating a better future for Ethiopian Youth .A conference on ARH. The David and Lucile Packard Foundation Bahir Dar, Ethiopia. 2000, 6-9.
- [18]. HIV and Sexual Behavior Among young South Africans. National Survey of 15-24 years old.University of Witwatersrand. www.rhru.co.za. 2014.
- [19]. Lemma E: Predictors of HIV/AIDS related sexual behavior of high-school adolescents, Jimma town, southwest Ethiopia, 2000.
- [20]. In Jimma Zone Preparatory Schools, South West Ethiopia; *Ethiop J Health Sci.* 24(1), 2014.
- [21]. Fikirialebachew, fentaw Mohammed, “prevalence of premarital sexual practice and its contributing factors in robit high school students.

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