

**RISKY SEXUAL BEHAVIOR AND ITS ASSOCIATED
FACTORS AMONG YOUTH STUDENTS OF POKHARA
METROPOLITAN CITY**

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**RISKY SEXUAL BEHAVIOR AND ITS ASSOCIATED
FACTORS AMONG YOUTH STUDENTS OF POKHARA
METROPOLITAN CITY**

Aakriti Wagle

A thesis submitted to

**Central Department of Public Health
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**In partial fulfillment of the requirements for the
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February 2023


APPROVAL SHEET

APPROVAL SHEET


This is to certify that Ms. Aakriti Wagle has prepared the thesis entitled "RISKY SEXUAL BEHAVIOR AND ITS ASSOCIATED FACTORS AMONG YOUTH STUDENTS OF POKHARA METROPOLITAN CITY" under my supervision and guidance. This report is prepared for the partial fulfillment of the requirement for the degree of Masters of Public Health (MPH). The report has been accepted and recommended for final examination.



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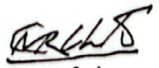
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Dear Ms.Wagle,

Thank you for the submission of your research proposal, entitled " **Risky sexual behaviour and its associated factors among youth students of Pokhara Metropolitan City**"


I am pleased to inform you that after careful evaluation, the above-mentioned research proposal has been approved by Institutional Review Committee (IRC) of Institute of Medicine (IOM), Tribhuvan University on December 13, 2022.

As per our rules and regulations, the investigator has to strictly follow the protocol stipulated in the proposal. Any change in title, objectives, problem statement, research questions or hypothesis, methodology, implementation procedures, data management and budget may be made so and implemented only after prior approval from IRC. Thus, it is compulsory to submit the details of such changes intended with justifications prior to actual change in the protocol.

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After completion of your study, you must submit a copy of final draft of your research to the Research Department.

If you have any further queries, please do not hesitate to contact us.


.....
Associate Prof. Dr. Manisha Chapagai
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DECLARATION

Declaration

To the best of my knowledge, I declare that this thesis entitled “*Risky Sexual Behavior and its associated factors among youth students of Pokhara Metropolitan city*” is the result of my own research and contains no material previously published by any other person except where due acknowledgement has been made. This thesis contains no material, which has been accepted for the award of any other degree or diploma in any university.

Signature: 

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I, Associate Professor Dr. Khem Bahadur Karki, being the Supervisor of Ms. Aakriti Wagle who is a MPH student in the Central Department of Public Health, certify that I have sighted the documentation supporting the thesis entitled "**Risky Sexual Behavior and its associated factors among youth students of Pokhara Metropolitan City**" and I am satisfied that the documentation is sufficient as the basis for examination.

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ABSTRACT

Introduction: Risky sexual behavior is defined as any sexual activity that increases the risk of acquiring sexually transmitted infections (STI), including HIV/AIDS and unwanted pregnancies. It includes having sex with multiple sexual partners, not using or inconsistent condom use, initiation of first sex at an early age, sex with commercial sex workers and sexual intercourse under the influence of substance use. The study aimed to estimate the prevalence of risky sexual behavior and its associated factors among youth students of Pokhara metropolitan city.

Methodology: A cross-sectional study was done. The study population was youths aged 15-24 years currently studying in Grades 11/12 or bachelor level. The sample size was 850, interviewed in two strata (M/F). Multi-stage cluster sampling technique was used. A self-administered structured questionnaire was used to obtain information from the students. Bivariate (Chi-square test) and Multivariate (logistic regression) analysis was performed to assess the statistically significant relationship between the dependent and independent variables.

Results: Overall, nearly a third (31%) of respondents ever had sexual intercourse, and the proportions were predominantly higher among males (44%) than females (19%). The overall prevalence of risky sexual behavior was 18.5%, while the prevalence among sexually active respondents was 60%. The variables significantly associated with risky sexual behavior in the chi-square test were sex, age, ethnicity, frequency of watching pornographic movies, consumption of alcohol in the past month, tobacco use, drug use, and having sexually active close friends or close friends having multiple sex partners or sex with commercial sex workers. Likewise, in logistic regression analysis, females were 72% (AOR=0.28 95% CI: 0.12-0.69) less likely than males and youths aged 20-24 years were 72% (AOR=0.28, 95% CI:0.13-0.57) less likely to involve in risky sexual behavior than adolescents aged 15-19 years. Similarly, janajatis were almost 6 times AOR=5.56 95% CI:2.47-12.5) and Dalits/Madhesei/others were almost 2 times more likely to involve in risky sexual behavior than Brahmin/Chhetri.

Conclusion: This study shows the high prevalence of risky sexual behavior among youth students, with a significantly higher prevalence among adolescents, males and janajatis than their counterparts which emphasizes the need for appropriate interventions

to create an enabling environment for youths to practice safe sexual behavior with a special focus on adolescents, males, and Janajatis.

ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
CDC	Center for Disease Control
CDPH	Central Department of Public Health
CSW	Commercial Sex Workers
HIV	Human Immuno Deficiency Virus
IRC	Institutional Review Committee
NDHS	Nepal Demographic and Health Survey
PPS	Probability Proportionate to Size
SPSS	Statistical Package for Social Sciences
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infections
UNFPA	United Nations Population Fund
WHO	World Health Organization

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CHAPTER-I

INTRODUCTION

1.1. Background of study

Risky sexual behavior refers to the behavior that increases the vulnerability of an individual to problems linked to sexuality and reproductive health (1). It is defined as any sexual activity that increases the risk of acquiring sexually transmitted infections (STI) including, HIV/AIDS and unwanted pregnancies(2). Risky sexual behavior is a significant public health problem all around the world (3). It includes having sex with multiple sexual partners, not using or inconsistent condom use, initiation of first sex at an early age, sex with commercial sex workers and sexual intercourse under the influence of substance use (4–6).

Youths aged 10-24 years have been identified as one of most vulnerable groups to the HIV/ AIDS pandemic in Nepal (7). Adolescents and youths generally mimic and explore several risky behaviors, including risky sexual behaviors and substance use(8). In the absence of appropriate interventions, unsafe behaviors can put them at a greater risk of contracting HIV, other STIs and unintended pregnancy(9). Two out of every seven new HIV infections globally in 2019 were among young people (15–24 years) (10). Risky sexual behavior affects the lifestyle of youths and adolescents and results in various adverse effects(11). The idea of safe sexual behavior needs to be promoted as a standard before adolescents and youths become sexually active. Otherwise, it will be challenging to change the risky behavior that are already developed(12).

The study among undergraduate students in Sri Lanka showed that the prevalence of risky sexual behavior among undergraduates was 12.4% for the last one year (13). Likewise, 19.6% of secondary students (2018) had practiced risky sexual behaviors in Ethiopia and discussions on SRH with parents, and raised by both parents had preventive significant association. On the other hand, Peer pressure, seeing pornographies had significant association with increased risk of sexual behavior (11). Similarly, in another study, factors like the use of alcohol, cigarettes, monitoring of parents, and having

sexually active close friend/s were significantly associated with risky sexual behavior (4).

According to NDHS 2016, 4% percent of men aged 15-24 had two or more partners in the last 12 months. Similarly, 16% of young men had sexual intercourse with a non-marital, non-cohabiting partner in the last 12 months, of whom 31% did not use the condom during the last sexual intercourse with such a partner (14).

Similarly, a study of sexual behavior among male college youths of Pokhara showed that 60.4% of the sexually active respondents had two or more than two partners, and more than half of those who were involved in sexual intercourse with commercial sex workers had not used condoms at every act of sexual intercourse (15). Likewise, a study of pre-marital sexual behavior in Pokhara showed that 13.4% of male respondents had sex with female sex workers (16). According to the Center for Disease Control (CDC), half of all new STDs reported each year are among young people aged 15 to 24. Nearly, 46% of sexually active high school students did not use a condom the last time they had sex. In 2018, 21% of all new HIV diagnoses were among young people (aged 13-24). Similarly, nearly 180,000 babies were born to teen girls (aged 15–19 years) in 2018 (17).

1.2. Statement of the problem

According to World Health Organization (WHO), STIs is a serious threat all over the world. Every day, more than 1 million STIs are acquired and most of them are asymptomatic. In 2020, WHO projected 374 million new infections encompassing 1 of 4 curable STIs: chlamydia, gonorrhoea, syphilis and trichomoniasis (18). Due to the asymptomatic nature of many STIs, they can spread in an uncontrolled manner before they are detected, especially among young adults who are more likely to engage in new sexual experiences.

The magnitude of risky sexual behavior is still high and its consequences are endured not only by society as a whole but also by individuals (19). In recent days, adolescents have their sexual debut at younger age, tend to have sex with multiple casual partners, and are not careful about using effective contraception (especially condoms). The risk of HIV virus from unsafe sex has been known for more than 4 decades. However, there are continuous practice of risky sexual behavior with each new generation. (20). Similarly, unwanted pregnancies affect about 10 million teenage girls aged 15–19 in developing countries. Complications during pregnancy and childbirth are one of the leading cause of death for 15–19-year-old girls globally (21).

According to UNAIDS Global AIDS Monitoring Report (2017), risky behavior among youths results in increased prevalence of HIV/AIDS infections, leading to high death rates among the economically active age group (22).

Nepal still has significant burden of HIV/STIs, and youths are also one of the vulnerable populations. Fifteen percent of ever reported HIV positive cases belonged to the age group 15-24 years (as of July 2020) (23). According to NDHS 2016, 4% percent of men aged 15-24 had two or more partners in the 12 months. Similarly, 16% of young men had sexual intercourse with a non-marital, non-cohabiting partner in the last 12 months. Similarly, the study of Sexual Behavior among male college youths (2019) in Nepal showed that 60.4% of the sexually active respondents had two or more sexual partners (24). These studies shows that the researches on Risky Sexual Behavior in Nepal are more focused among men. Hence, there are no adequate evidences in risky sexual behavior of young women.

In a study of risky behaviors of students in Pokhara Metropolitan city, among a tenth sexually active participants, more than three-fourth (76%) of the participants had a first

sexual experience before 16 years, and 34% had more than 2 partners (25). However, these studies scarcely discuss about the factors and core factors influencing the involvement of youths in risky sexual behavior.

Students of higher institutions are exposed to many risky sexual behaviors. However, there are no adequate researches that have been conducted in Nepal about the unsafe sexual behaviors. Most of these studies have incorporated only one/two risky behaviors in a single study, which shows the existence of fragmented knowledge and highlights the need of a comprehensive study.

1.3.Rationale of the study

Unsafe sexual behavior and the resulting infections are one of the major causes of preventable mortality in low-income countries. It is also the major means of transmission for HIV/AIDS, STIs and human papillomavirus (26).

Data related to sexual behavior and well-being can provide new dimensions to address structural determinants of health at local levels, and link local and larger public health policies and practices related to sexual and reproductive health (27).

In developing countries like Nepal, development has been hindered by challenges related to population, so, studies of sexual risky behavior can contribute in encouraging policy dialogue(22). Similarly, adequate evidences on risky sexual behavior can persuade program planners and policy makers to design appropriate programs and policies to control HIV and STIs by promoting safer sexual behavior. Thus, this study is therefore foreseen to contribute to the national agenda to limit the spread of HIV/AIDS and other sexually transmitted diseases.

This study intends to identify the factors associated with risky sexual behavior. So, the study helps to emphasize the promotion of health of adolescents and youths by creating a platform where youths could be informed to understand the threats associated with high-risk sexual behavior. Such understanding is necessary to minimize public health challenges, especially among the youths of Nepal.

This study can provide new contextual information about the existing situation of risky sexual behavior, which can be evidence to design appropriate sexual and reproductive health programs. Hence, the findings of this study can support improving the knowledge and practices of sexual health via the existing system of tertiary education.

1.4.Objectives of the study:

General objective:

To assess the status of risky sexual behavior and its associated factors among youth students of Pokhara Metropolitan City.

Specific objectives:

- To estimate the prevalence of risky sexual behavior among youth students of Pokhara Metropolitan City.
- To determine the socio-demographic factors associated with risky sexual behavior among youth students.
- To determine the association of risky sexual behavior with other individual factors among youth students.

1.5. Research questions:

1. What is the prevalence of risky sexual behavior among youth students of Pokhara metropolitan city?
2. What are the determining factors of risky sexual behavior among youth students?

1.6. Operational definitions:

Risky sexual behavior: “Risky sexual behavior” indicates one or more of the following (4,11) for the purpose of this study:

- Early sexual initiation: Sexual initiation before 18 years
- Multiple sexual partners: More than one sexual partner within one year
- Inconsistent/ failure to use condom with casual sex partner
- Sex with commercial sex workers

Substance use: For the purpose of this study, substance use includes:

Consumption of alcohol or cigarette/tobacco or any drugs (cocaine, heroin, marijuana etc.). In this study, both ever use of substance and its use in the past month is sought.

Sexually active: Respondents who are engaged in sexual intercourse at least once until the data collection period.

Early sexual initiation: Sexual initiation before the age of 18 years.

Consistent condom use: Use of condom during each sexual intercourse.

Inconsistent condom use: Failure to use condom during each sexual intercourse.

Casual sex partner: Sex partner other than husband/wife (if married) and boyfriend/girlfriend (if unmarried).

Commercial sex workers: People who exchange sex for money or goods or other materials/things.

Youths: Young people aged 15-24 years

1.7. Conceptual framework

The conceptual framework describes the relationship between dependent and independent variables in the study.

Independent variables

Dependent variable

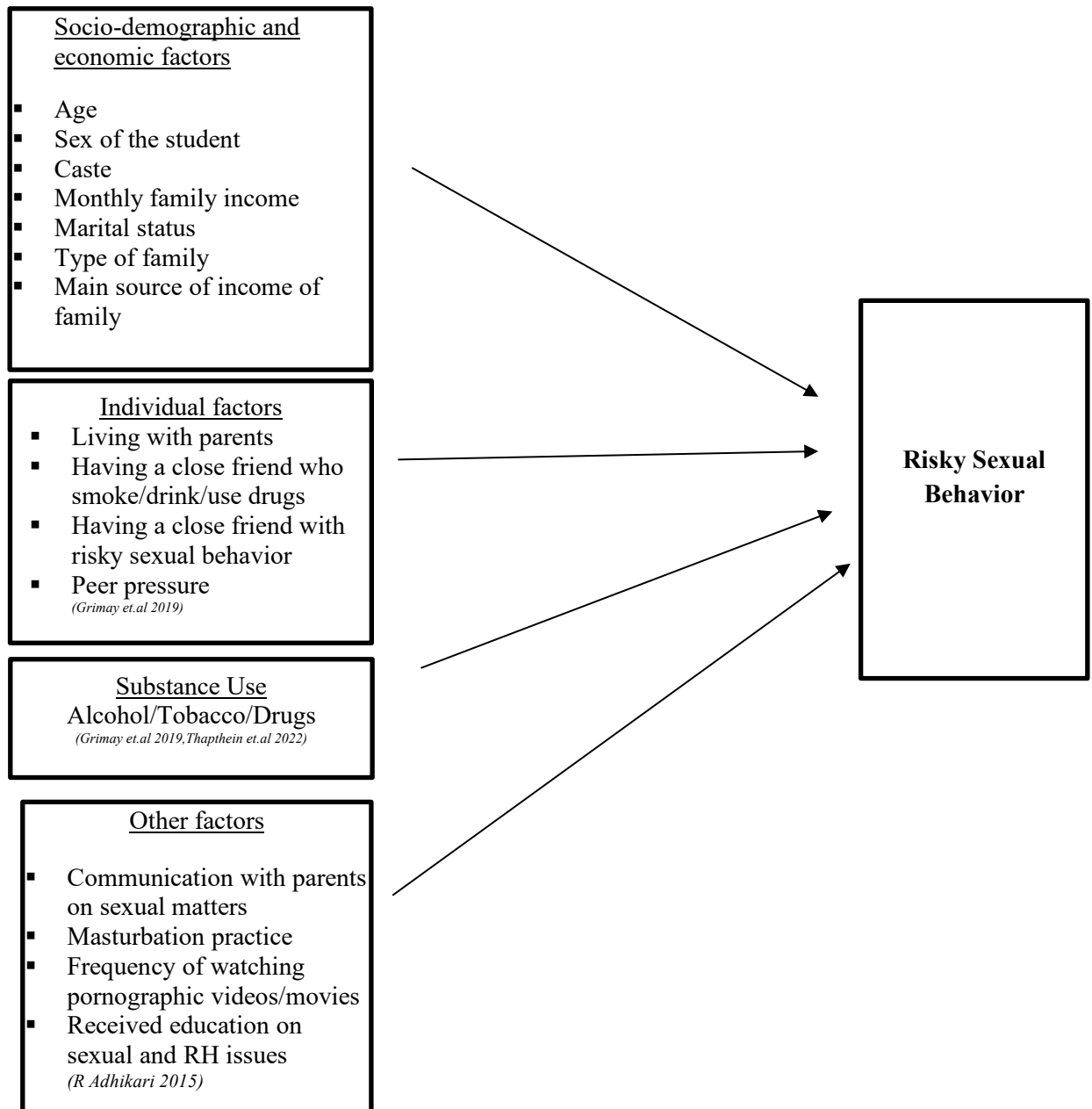


Fig 1: Conceptual Framework

1.8. Study variables:

Independent variables:

Socio-demographic variables:

- Age
- Sex
- Caste
- Marital status
- Main source of income of family

Individual factors:

- Living with parents
- Having close friend who smoke/drink/use drugs
- Having a close friend involved in risky sexual behavior
- Frequency of watching pornographic movies
- Peer pressure

Substance Use (Alcohol/Tobacco/Drugs)

Other factors

- Communication with parents on sexual matters
- Masturbation practice
- Frequency of watching pornographic videos/movies
- Received education on sexual and RH issues

Dependent variable: Risky sexual behavior

CHAPTER-II

REVIEW OF LITERATURE

Literature review is the process of searching, and reading literature for the purpose of our research to identify gaps which helps in determining objectives of our research. During the course of literature reviews, relevant research as well as non-research literature are reviewed. Different books, journals, website, register and database like PubMed, Google Scholar, HINARI are reviewed in order to understand the existing knowledge on the topic “*Risky sexual behavior and its associated factors among youths.*” and identify the significance of this study.

A detail literature review was done using the terms; Risky sexual behavior, Risky sexual behavior and youths, risky sexual behavior and youths and Nepal.

Global

A study conducted among secondary students in Southern Ethiopia (2021) showed that among the 306 sexually active participants, 24.7%, were engaged in risky sexual behaviors. In this study, risky sexual behavior, is defined as a composite outcome variable which includes one or more of the following; early sexual initiation, inconsistent use of condoms, having multiple sexual partners, and/or having sexual intercourse with commercial sex workers. Factors like ever used alcohol and smoked cigarettes, monitoring of parents, and having sexually active close friend/s were significantly associated with the risky sexual behavior(4).

In a school web-based survey among sexually experienced adolescents in Bangkok, Thailand (2022), out of 872 sexually-active participants, 69.5% were involved in risky sexual behavior. In multivariate logistic regression analysis, cigarette smoking and use of cannabis were significantly associated with the sexual risk behavior.

A study conducted among undergraduate students of a University in North-west Ethiopia (2021), among sexually active students, the prevalence of risky sexual behavior was 44%. Age (age group greater than 24 years more likely), residence (living in an urban area), living arrangement (students who lived without family were more likely),

daily religious attendance, use of alcohol and knowledge about reproductive health and STDs were significantly associated factors with risky sexual behavior (28). Similarly, a study on risky HIV sexual behavior among Nairobi students (2015) showed that 30% students had multiple sexual partners in the last 12 months, 27.4% of the students did not use condoms with sexual partners and 21% were engaged in sex after drinking alcohol within past 3 months. In multivariable-bivariate logistic regression, being older, having depressive symptoms, alcohol use, tobacco use, sex after drinking, previous diagnosis of STI, physical abuse and history of sexual abuse as a child were significantly associated with having multiple partners. Furthermore, younger age, being female, tobacco use and previous diagnosis of STI were significantly associated with inconsistent condom use.

A study of prevalence and associated factors of risky sexual behaviors among undergraduate students in Sri-lanka (2018) found that prevalence of risky sexual behavior in last 1 year was 12.4% and last 3 months was 12.1%. Factors like attended night clubs in last month, use of alcohol within last 3 months, and knowledge on condoms were significantly associated variables (13). Likewise, a study in northern Ethiopia on risky sexual behavior practice (2018) found that overall, 19.6% had practiced risky sexual behaviors. Students who did not face peer pressure were 0.36 times less likely to develop risky sexual behavior (11).

In a study of risky sexual behavior and associated factors among 1232 secondary school students in Ethiopia (2021), 29.8% were sexually active in which 240 (68.2%) students were involved in risky sexual behavior. Factors like education of father, drinking alcohol, perceived peer pressure and communication with parents, and perceived parental monitoring were significantly associated with risky sexual behavior in multivariate analysis (29).

A study of risky sexual behavior among out of school Thai and non-Thai youths (2017) showed that among sexually experienced participants, 75.4% did not use condoms consistently, and half of them had at least 2 lifetime sexual partners (30).

A study of risky sexual behavior among in-school youths in Ethiopia showed that Gender, educational status (AOR [95% CI] = 0.141 [0.025, 0.797]), pornography use (AOR [95% CI] = 6.401 [1.788, 22.919]) and alcohol use (AOR [95% CI] = 3.449 [1.359, 8.754]) influenced risky sexual behavior significantly (31).

A meta-analysis (2020) of social media use and risky behaviors showed that there were positive, small-to medium correlations between use of social media risky sexual behaviors ($r = 0.21$, 95% CI = 0.15-0.28) (32).

Nepal

A study entitled 'Prevalence and Correlates of Sexual Risk Behaviors among Nepalese Students' (2015) found that 42% students were engaged in sexual intercourse and among them, 75% had first experienced intercourse at age 15 to 17. Likewise, overall, more than one-fifth of the students (17%) were involved in sexual risk behavior. The study considered sexual risk behavior as either sex with sex workers, non-condom use with casual partner or sex with multiple partners. Sex of the student, marital status, level of education, alcohol consumption, exposure to pornography and close unmarried friends' sexual behavior were the main predictors of sexual risk behavior (33).

A further analysis of NDHS 2016, to investigate the sexual risk behavior among youths (2021), showed that the prevalence of premarital sex was 5.2%, and 5.5% had multiple sex partners. Variables that were significantly associated with premarital sex and multiple sex partners were male gender and smoking (34).

Similarly, a study of risky sexual behavior among young men of Nepal (2005) considered risky sexual behavior as having multiple partners, or having one non-regular partner with whom a condom was not used, in the past one year. The study found that about 9% of sexually active married men and 20 per cent of sexually active single men were engaged in risky sexual behavior (35).

The study of sexual behavior among school youths in a rural far-western district of Nepal found that over one fourth respondents had pre-marital sex, more than one-fourth (28.2%) of sexually active young boys and girls had multiple sexual relations with peers being the most common sexual partners. Overall, 73.2% sexually active youths practiced risky sexual behavior. Factors like age of the respondent, gender, education and age at first sexual intercourse were significantly associated with the sexual behavior of the school youths (24).

The study of Sexual Behavior among male college youths (2019) showed that 60.4% of the sexually active respondents had two or more sexual partners. Similarly, more than

half (52%) of those who were involved in sexual intercourse with CSWs had not used condom at an every act of sexual intercourse (15).

CHAPTER-III

METHODOLOGY

3.1. Study design

A cross-sectional and descriptive study was done. As the study aimed to find the prevalence of risky sexual behavior, a cross-sectional research design was used.

3.2. Study method

The study employed a quantitative method for data collection.

3.3. Study area:

The study was carried out in Pokhara Metropolitan city. Pokhara is one the biggest city in the country, where youths from different regions migrate for the purpose of study and employment. So, this area is representative and appropriate for investigating the sexual behavior of youths.

3.4. Study population

The study population was youths aged 15-24 years currently studying in Grade 11/12 or bachelor level.

3.5. Sample size

The sample size was calculated using the Cochran's formula as given below:

$$\text{Sample size: } n = \frac{(z^2 p * q)}{d^2} * Deff$$

Where, z= Standard normal deviate

=1.96 for 95% confidence interval

d=allowable error i.e., 5%

p=prevalence of risky sexual behavior=17% (33)

Hence sample size (n) = 217 &

After adding 30% non-response rate (36), the total sample size was 282.

After multiplying the sample size with design effect 1.5, the sample size becomes 423~425.

As the prevalence of risky sexual behavior varies greatly between male and female (33), the sample size 425 was taken for male and female each. So, 425×2 Strata (M/F) = 850. **Hence, the total sample size was 850.**

3.6. Sampling technique

Multi-stage cluster sampling technique (Probability sampling) was used for the selection of the male and female college students.

- In the first stage, 10 wards of Pokhara Metropolitan city were selected randomly from all the wards having +2/bachelor level colleges through a random number generator.
- The number of students (+2/bachelor) of the selected wards was obtained from Education Division of the metropolitan city or respective colleges/annual report in the case of bachelor level colleges.
- After obtaining the total number of students, the number of research participants from each ward was taken proportionately (**proportionate sampling**).
- At the ward level, one college (having more than the required ward level population) was selected randomly from each ward through the lottery method.
- From each college, classes (sections) were selected randomly (through lottery method), irrespective of the faculty. Number of classes to be selected was determined according to the required sample from each college. Similarly, equal number of male and female students were taken to attain the required sample size from each class. Students from each class were taken till we fulfilled our required sample size (such as in alphabetical order).

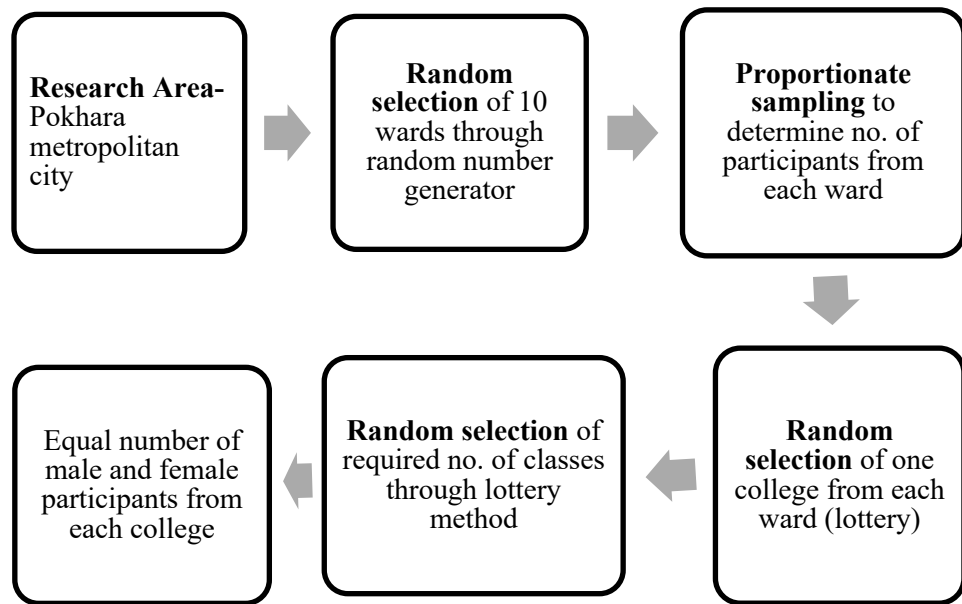


Fig 2: Sampling technique

Selected wards and sample size from each ward

Randomly selected wards	Population (+2 and Bachelors)	Sample size from each ward	
1	11664	317.6	318
3	1753	47.7	48
4	950	25.9	26
8	6748	183.7	184
9	1200	32.7	33
11	775	21.1	21
12	1225	33.4	33
14	1680	45.7	45
16	2546	69.3	69
30	2675	72.8	73
Total	31216	850.0	850

3.6. Data Collection Techniques

A self-administered structured questionnaire was used to obtain information from the students. Students were selected among those who were present on the day of the interview in the sampled classes. Sampled male and female students were kept in separate classrooms. Students were kept with adequate spacing in a bench/chair, as in an exam setting, before distributing the questionnaire.

As the respondents were higher secondary/undergraduate students, they were able to comprehend and answer the questions easily by themselves. However, a short orientation was provided to the students before filling out the questionnaire, and any confusion/queries were sorted out.

3.7. Data collection tools

A valid questionnaire was used for data collection. The questionnaire for the survey was partly adopted from the “*Illustrative questionnaire for interview-surveys with young people*” developed by WHO/UNFPA (37) and Youth Risk Behavioral Survey standard questionnaire (38). As the study covered both government and private schools/campuses, the questionnaire was translated in Nepali, with keywords stated in both English and Nepali languages. The questionnaire was finalized with necessary modifications to suit the local context after pretesting and consultation with the experts (supervisors).

3.8. Data Management and Analysis

Data was entered in Epi-Info (version 4.2.7) and exported to SPSS for further analysis. Coding was carried out to simplify the data entry. Bivariate and Multivariate Analysis was performed to assess the statistically significant relationship between the dependent and independent variables. Chi-square test was done to find the associated variables. Similarly, binary logistic regression analysis was done for multivariate analysis. The odds ratio and 95% CI was reported while showing the association between dependent and independent variables. Results were considered significant at a 5% i.e., p-value (<0.05).

3.9. Validity

- The research tool was partly adopted from other standard questionnaires, and consultation with content expert (reproductive and sexual health) was done to finalize the tool after necessary modifications.
- The translation validity of the tool was assured by forward and backward translation of the tool into Nepali and English language.
- The face validity of the tool was ensured by pre-testing the tool.
- The variables and units of measurements under study were clearly operationalized.

3.10. Reliability

- Pre-testing was done in 10 respondents in a similar population but not including the youths of selected school/college. Few changes were made in the tools following the pre-testing.

3.11. Ethical considerations

- Verbal consent was taken from the school authorities and written consent was taken from students above 18 years and parental consent was taken for students aged below 18 years before starting the interview.
- Before the study, purpose and process of the study was clearly explained to the respondents.
- The study was conducted after formal approval from Institutional Review Committee (IRC), Institute of Medicine.
- Permission was taken from Pokhara Metropolitan city.
- Privacy and confidentiality of respondents was strictly maintained.
 - All the personal identifiers were kept confidential and no real name was disclosed throughout the study. No names of the students and schools were collected and ID number was used for each student.

3.11.1. Informed consent

In the process of obtaining informed consent, the respondent was greeted and informed about the study's objective. They were assured that their information will be kept totally confidential and that they need not write their names in the questionnaire. The information gathered was used solely for academic purposes. Each participant was informed that participation is fully optional, that there is no obligation, and that they are free to quit at any moment. They were asked to sign the consent document after they had agreed to these points, and only then the interview proceeded; otherwise, it was terminated.

For the participants below 18 years, parental consent and assent from the respondents was obtained by sending the consent form home with students before the day of data collection.

3.12. Delimitation of the study:

Sexual behavior is a sensitive topic; hence there may be respondent bias and underreporting/overreporting of the information. However, this was addressed by assuring the privacy, confidentiality and anonymity of the participant (including the name of the school/college of the participant) during data collection, analysis and dissemination, and secured in a password protected computer.

CHAPTER IV

RESULTS

This chapter comprises of analysis and interpretation of the findings from the study. As the study was conducted in two strata by sex, all the findings are disaggregated by sex.

4.1 Socio-demographic characteristics

Overall, more than half (53%) of respondents belonged to the age group 15-19 years. The mean age of the respondents was 19.4 ± 2.2 years. In regards to caste/ethnicity, more than three-fifths (63%) were Brahmin/Chhetri, followed by Janajati/Newar (26%). Higher proportions of male respondents (67%) than female respondents (58%) were Brahmin/Chhetri. More than nine out of ten (92%) respondents were Hindus. Similarly, about three-fifths (59%) of respondents belonged to the nuclear families. Overall, the majority of respondents (95%) were unmarried. Notably, higher proportions of female (9%) were married than male respondents (0.5%).

Table 1 Number and percentage distribution of the respondents by their socio-demographic characteristics disaggregated by sex

n=850

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Age group						
15-19	194	45.6	253	59.5	447	52.6
20-24	231	54.4	172	40.5	403	47.4
Mean age		19.8 ± 2.2	19.01 ± 2.17		19.4 ± 2.2	
Ethnicity						
Brahmin/Chhetri	286	67.3	247	58.1	533	62.7
Janajati/Newar	93	21.9	125	29.4	218	25.6
Dalits	28	6.6	42	9.9	70	8.2
Madhesi/Muslim/Others	18	4.2	11	2.6	29	3.4
Religion						
Hindu	397	93.4	385	90.6	782	92.0
Buddhist	16	3.8	35	8.2	51	6.0
Muslim/Christian/others	12	2.8	5	1.2	17	2.0
Type of family						
Nuclear	248	58.4	254	59.8	502	59.1
Joint	177	41.6	171	40.2	348	40.9
Marital status						
Unmarried	421	99.1	387	91.1	808	95.1
Currently married	2	.5	38	8.9	40	4.7
Divorced	2	.5	0	0	2	.2
Total	425	100	425	100	850	100

4.2 Main source of income and monthly income

In regards to the main source of income in the family, the most common sources of income in the family were Business (29%), Agriculture (28%), Government job and foreign employment (17% each). More than a third (36%) respondents had family income ranging from 30001-50000, followed by up to 30000 (32%). Similarly, 10% respondents had income higher than 1 lakh.

Table 2 Number and percentage distribution of the respondents by their economic characteristics disaggregated by sex

n=850

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Main income source of family						
Agriculture	105	24.7	131	30.8	236	27.8
Business	145	34.1	99	23.3	244	28.7
Private job	29	6.8	40	9.4	69	8.1
Government job	82	19.3	60	14.1	142	16.7
Foreign employment	55	12.9	85	20.0	140	16.5
Daily wages/other	9	2.1	10	2.4	19	2.2
Total	425	100.0	425	100.0	850	100.0
Income range*						
Up to 30000	106	27.7	138	37.1	244	32.3
30001-50000	145	37.9	124	33.3	269	35.6
50001-100000	79	20.6	85	22.8	164	21.7
>100000	53	13.8	25	6.7	78	10.3
Total	383	100.0	372	100.0	755	100.0

*n varies due to some missing cases

4.3. Person currently living with and relationship with their parents

More than three-fifths (63%) respondents were currently living with their parents, followed by other relatives (18%) and alone (14%). Sex-wise disaggregation shows that a fifth male respondents (20%) were currently living alone while less than a tenth (9%) female respondents. In regards to the relationship with father, an overwhelming majority (91%) of respondents had good/very good relationship with father, while 5% also stated that it was neither good nor bad. Likewise, 97% respondents had good/very good relationship with their mothers.

Table 3 Number and percentage distribution of the respondents by relationship with their parents disaggregated by sex

n=850

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Person currently living with						
Parents	270	63.5	264	62.1	534	62.8
Other relatives	52	12.2	100	23.5	152	17.9
Friends	19	4.5	25	5.9	44	5.2
Alone	84	19.8	36	8.5	120	14.1
Relationship with father						
Very good	247	58.1	270	63.5	517	60.8
Good	146	34.4	111	26.1	257	30.2
Neither good nor bad	22	5.2	21	4.9	43	5.1
Bad	1	.2	1	.2	2	.2
Very bad	2	.5	1	.2	3	.4
NA (died/contactless)	7	1.6	21	4.9	28	3.3
Relationship with mother						
Very good	332	78.1	355	83.5	687	80.8
Good	87	20.5	56	13.2	143	16.8
Neither good nor bad	3	.7	4	.9	7	.8
Very bad	2	.5	2	.5	4	.5
NA (died/contactless)	1	.2	8	1.9	9	1.1
Total	425	100.0	425	100.0	850	100.0

4.4. Discussion of sexual matters with parents

The study shows that 7% of the respondents had ever discussed about sexual matters with their father, and the proportion was higher among males (9%) than females (5%). Majority of them (93%) among those who had ever discussed, had discussed sometimes about the sexual matters. Similarly, nearly a sixth (16%) respondents had ever discussed about sexual matters with their mothers.

Table 4 Number and percentage distribution of the respondents by discussion on sexual matters with their parents disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
n=850						
Discussed sexual matters						
with father						
Yes	38	8.9	20	4.7	58	6.8
No	387	91.1	405	95.3	792	93.2
Total	425	100.0	425	100.0	850	100.0
Frequency of discussion						
with father						
Sometimes	35	92.1	19	95.0	54	93.1
Often	3	7.9	1	5.0	4	6.9
Total	38	100.0	20	100.0	58	100.0
Discussed sexual matters						
with mother						
Yes	23	5.4	111	26.1	134	15.8
No	402	94.6	314	73.9	716	84.2
Total	425	100.0	425	100.0	850	100.0
Frequency of discussion						
with mother						
Sometimes	23	100.0	92	82.9	115	85.8
Often	0	0	19	17.1	19	14.2
Total	23	100.0	111	100.0	134	100.0

4.5. Pornographic movies and masturbation

More than two-fifths (41%) respondents had never watched pornographic movies, but 10% watch it every day/almost every day, and the proportion of watching pornographic movies everyday was notably higher among male respondents (18%) than female respondents (1%). Similarly, more than a fifth (21%) watch it sometimes. In regards to the masturbation practice, 46% of all respondents masturbate but the proportion varies according to sex. Majority (84%) of males masturbate but only 7% of the female practice masturbation. Among those who masturbate, more than two-fifths (43%) masturbate sometimes followed by usually (24%) and everyday/almost every day (15%). Only three females in total masturbate usually/every day.

Table 5 Number and percentage distribution of the respondents by frequency of watching pornographic movies and masturbation disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Frequency of watching pornographic movie						
Everyday/Almost everyday	78	18.4	6	1.4	84	9.9
Sometimes (1-2 days a week)	153	36.0	26	6.1	179	21.1
Rarely	138	32.5	101	23.8	239	28.1
Never	56	13.2	292	68.7	348	40.9
Total	425	100.0	425	100.0	850	100.0
Masturbation practice*						
Yes	355	83.9	30	7.2	385	45.8
No	68	16.1	388	92.8	456	54.2
Total	423	100.0	418	100.0	841	100.0
Frequency of masturbation practice						
Everyday/Almost everyday	55	15.5	1	3.3	56	14.5
Usually (2-3 days a week)	89	25.1	2	6.7	91	23.6
Sometimes	158	44.5	7	23.3	165	42.9
Rarely	53	14.9	20	66.7	73	19.0
Total	355	100.0	30	100.0	385	100.0

*n varies due to missing cases

4.6. Sexual and Reproductive health education

Majority of the respondents had received sexual and reproductive health education (90%) in their school/college.

Table 6 Number and percentage distribution of the respondents by reproductive and sexual health education disaggregated by sex

n=850

Variable	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Received sexual and reproductive health education in school/college						
Yes	372	87.5	391	92.0	763	89.8
No	53	12.5	34	8.0	87	10.2
Total	425	100.0	425	100.0	850	100.0

4.7. Use of alcohol

The study shows that more than a third (35%) of respondents had ever consumed alcohol, and the proportion of males ever consuming alcohol (47%) was twice the proportion of females (23%). Among those who had consumed alcohol, 44% had been taking alcohol for more than 2 years, followed by 1-2 years (42%) and less than a year (15%). In regards to the consumption of alcohol in the past month, 45% did not drink it last month, while 31% drank it for 1-2 days and 14% drank it for 3-7 days. Likewise, 9% of males and none of the female consumed it for 15 days or more.

Table 7 Number and percentage distribution of the respondents by use of alcohol disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Ever consumed alcohol						
Yes	200	47.1	98	23.1	298	35.1
No	225	52.9	327	76.9	552	64.9
Total	425	100.0	425	100.0	850	100.0
Alcohol consumption duration*						
Less than a year	24	16.4	2	6.7	26	14.8
1-2 yrs	55	37.7	18	60.0	73	41.5
>2 yrs	67	45.9	10	33.3	77	43.8
Total	146	100.0	30	100.0	176	100.0
Alcohol consumption days of last month*						
Did not drink last month	60	34.1	56	68.3	116	45.0
1-2 days	55	31.3	25	30.5	80	31.0
3-7 days	37	21.0	0	0	37	14.3
8-14 days	9	5.1	1	1.2	10	3.9
15 days or more	15	8.5	0	0	15	5.8
Total	176	100.0	82	100.0	258	100.0
Close friend taking alcohol						
Yes	276	64.9	76	17.9	352	41.4
No	65	15.3	228	53.6	293	34.5
Don't know	84	19.8	121	28.5	205	24.1
Total	425	100.0	425	100.0	850	100.0

*n varies due to missing cases

4.8. Use of Tobacco

Overall, 15% respondents had ever consumed cigarette/tobacco, the proportion of which varies greatly among male (25%) and female (5%) respondents. Among those who had consumed tobacco products, 36% and 41% respectively had been consuming tobacco for 1-2 years and >2 years respectively. Likewise, in regards to tobacco consumption last month, 36% did not consume tobacco last month, whereas it is notable that 25% males and none of the female consumed tobacco for more than 15 days.

Table 8 Number and percentage distribution of the respondents by use of tobacco disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Ever consumed cigarette/tobacco						
Yes	110	25.9	20	4.7	130	15.3
No	315	74.1	405	95.3	720	84.7
Total	425	100.0	425	100.0	850	100.0
Duration of consumption of tobacco*						
Less than a year	18	22.0	2	33.3	20	22.7
1-2 yrs	29	35.4	3	50.0	32	36.4
>2 years	35	42.7	1	16.7	36	40.9
Total	82	100.0	6	100.0	88	100.0
Tobacco consumption days of last month*						
Did not consume last month	33	32.7	10	50.0	43	35.5
1-2 days	19	18.8	6	30.0	25	20.7
3-7 days	11	10.9	4	20.0	15	12.4
7-15 days	13	12.9	0	0	13	10.7
More than 15 days	25	24.8	0	0	25	20.7
Total	101	100.0	20	100.0	121	100.0
Close friend smoking tobacco/cigarette						
Yes	230	54.1	42	9.9	272	32.0
No	106	24.9	255	60.0	361	42.5
Don't know	89	20.9	128	30.1	217	25.5
Total	425	100.0	425	100.0	850	100.0

*n varies due to missing cases

4.9. Use of drugs

It is discouraging to note that a tenth of respondents (10%) had ever taken any drugs, and the proportion is higher among males (17%) than female respondents (2%). Among

those who had taken drugs (N=72), 47% did not take any drug last month, but 21% took drug for 1-2 days last month and all those respondents were male. Likewise, 11% (N=8) had taken drug for more than 15 days and all those respondents were male.

Table 9 Number and percentage distribution of the respondents by use of drugs disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Ever taken any drugs						
Yes	71	16.7	10	2.4	81	9.5
No	354	83.3	415	97.6	769	90.5
Total	425	100.0	425	100.0	850	100.0
Duration of consumption of tobacco*						
Less than a year	12	26.7	0	0	12	25.5
1-2 years	17	37.8	1	50.0	18	38.3
>2 years	16	35.6	1	50.0	17	36.2
Total	45	100.0	2	100.0	47	100.0
Drug consumption days of last month*						
Did not consume last month	30	44.8	4	80.0	34	47.2
1-2 days	15	22.4	0	0	15	20.8
3-7 days	7	10.4	1	20.0	8	11.1
7-15 days	7	10.4	0	0	7	9.7
More than 15 days	8	11.9	0	0	8	11.1
Total	67	100.0	5	100.0	72	100.0
Close friend taking drugs						
Yes	122	28.7	9	2.1	131	15.4
No	191	44.9	281	66.1	472	55.5
Don't know	112	26.4	135	31.8	247	29.1
Total	425	100.0	425	100.0	850	100.0

*n varies due to missing cases

4.10. Sexual behavior of close friends

The sexual behavior of close friends of the respondents was also investigated in the study. Overall, nearly two-fifths (39%), more than a fourth (28%) respondents had close unmarried friend who was sexually active and who had more than one sexual partner respectively. The proportions of respondents having close friends with more than one sexual partner varies to a great extent among two sexes (male=51% and female=5%). Likewise, nearly a third (32%) male respondents whereas less than one percentage (0.7%) had close friend who had sexual intercourse with commercial sex workers. In the similar manner, it is notable that 6% respondents (male=11%, female=2%) mentioned that any of their friends had pressurized them to have sexual intercourse.

Table 10 Number and percentage distribution of the respondents by sexual behavior of close friends disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Had close unmarried friend who had sexual intercourse						
Yes	274	64.5	53	12.5	327	38.5
No	59	13.9	174	40.9	233	27.4
Don't know	92	21.6	198	46.6	290	34.1
Had close friend who had sex with more than one partner						
Yes	217	51.1	21	4.9	238	28.0
No	72	16.9	179	42.1	251	29.5
Don't know	136	32.0	225	52.9	361	42.5
Had close friend who had sex with CSWs						
Yes	135	31.8	3	.7	138	16.2
No	139	32.7	234	55.1	373	43.9
Don't know	151	35.5	188	44.2	339	39.9
Total	425	100.0	425	100.0	850	100.0
Any friend pressurized to have sexual intercourse						
Yes	46	10.9	7	1.7	53	6.3
No	377	89.1	413	98.3	790	93.7
Total	423	100.0	420	100.0	843	100.0

4.11 Sexual behavior of respondents

The study shows that nearly a third (31%) of respondents had boyfriend/girlfriend. Overall, 31% respondents ever had sexual intercourse, and the proportions was predominantly higher among males (44%) than females (19%). In regards to the age at first sexual intercourse, the mean age at sexual intercourse was 18.4 ± 2.1 years, ranging from (12-23) years for male and (15-24) years for female. Similarly, 3% respondents had their first sex before 15 years, 27% had their first sex between 15-17 years, and 70% initiated sexual intercourse at 18 years or above. Likewise, more than two-third (68%) respondents used condom at their first sexual intercourse, and the proportions was slightly higher among males (69%) than females (65%). In the similar manner, overall, the most common reasons for first sexual intercourse were love (44%), followed by sexual desire (29%) and curiosity (23%). But sex wise disaggregation showed that the most common reason for male respondents to initiate sex was sexual desire (35%) while it was love for majority of female respondents (75%). It is notable that 2% respondents initiated sexual intercourse because of peer pressure (2%).

Table 11 Number and percentage distribution of the respondents by their sexual behavior disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
Had						
girlfriend/boyfriend						
Yes	164	38.6	102	24.0	266	31.3
No	261	61.4	323	76.0	584	68.7
Total	425	100.0	425	100.0	850	100.0
Ever had sexual intercourse						
Yes	186	43.8	81	19.1	267	31.4
No	239	56.2	344	80.9	583	68.6
Total	425	100.0	425	100.0	850	100.0
Age at first sex						
Less than 15 yrs	9	4.9	0	0	9	3.4
15-17 yrs	57	31.0	14	17.3	71	26.8
>=18 yrs	118	64.1	67	82.7	185	69.8
Mean age	17.7±2.0		19.3±1.9		18.4±2.1	
Total	184	100.0	81	100.0	265	100.0
Condom use at first sexual intercourse						
Yes	128	68.8	53	65.4	181	67.8
No	58	31.2	28	34.6	86	32.2
Total	186	100.0	81	100.0	267	100.0
Reason for first sexual intercourse						
Curiosity	58	31.5	4	4.9	62	23.4
In love	56	30.4	61	75.3	117	44.2
Sexual desire	65	35.3	13	16.0	78	29.4
Peer pressure	3	1.6	2	2.5	5	1.9
Pressure by partner	2	1.1	1	1.2	3	1.1
Total	184	100.0	81	100.0	265	100.0

**n varies due to missing cases*

4.12. Sexual behavior of respondents

Sexually active respondents were also asked about the number of sexual partners till date and in the past one year. In this regard, overall, 44% respondents had one partner and 46% had 2-5 sexual partners till date. It is notable that, 14% males while none of the female had more than 5 sexual partners till date. Likewise, 9% respondents did not have sexual intercourse in the past one year and 63% had one sexual partner, and the proportions was to a great extent higher among females (91%) than males (50%). On the other hand, more than a third (35%) sexually active males, and 6% females had 2-5 partners in the past one year. It is notable that 3% (N=6) males had more than 5 partners. In regards to the sexual partners till date (multiple response), 83% said it was girlfriend/boyfriend/husband/wife, followed by friend (38%), stranger (29%) and commercial sex workers (18%). Among those who had sexual intercourse with persons other than husband/wife/girlfriend/boyfriend (N=153), 45% used condom at each sexual intercourse, 45% sometimes used condom, while 10% never used condom. Similarly, it is noteworthy that overall, 18% respondents had sex with commercial sex workers, in which all the respondents were male. Among those who had sex with CSWs, 83% used condom at each sexual intercourse, while it is notable that 4% never used condom. Likewise, overall, 29% respondents ever had one night stand in which all the respondents expect one was male.

Table 12 Number and percentage distribution of the respondents by their sexual behavior disaggregated by sex

Variables	Sex of the respondent				Total	
	Male		Female		n	%
	n	%	n	%		
No of sexual partners till date						
One	50	27.2	65	80.2	114	43.7
2-5	108	58.7	16	19.8	121	46.4
More than 5	26	14.1	0	0	26	10.0
Total	184	100.0	81	100.0	261	100.0
No of sexual partners in past 1 year						
None	22	12.0	2	2.5	24	9.1
1	91	49.5	74	91.4	165	62.5
2-5	65	35.3	5	6.2	69	26.1
More than 5	6	3.3	0	0	6	2.3
Total	184	100.0	81	100.0	264	100.0
Sexual partners till date						
Girlfriend/Boyfriend/Husband/Wife	144	78.3	76	93.8	220	83.0
Friend	83	45.1	17	21.0	100	37.7
Stranger	75	40.8	1	1.2	76	28.7
Commercial sex workers	48	26.1	0	0	48	18.1
Total	184	100.0	81	100.0	265	100.0
Condom use with casual sex partner						
At each sexual intercourse	65	47.8	4	23.5	69	45.1
Sometimes	57	41.9	12	70.6	69	45.1
Never	14	10.3	1	5.9	15	9.8
Total	136	100.0	17	100.0	153	100.0
Ever had sex with commercial sex workers						
Yes	48	25.8	0	0	48	18.0
No	138	74.2	81	100.0	219	82.0
Total	186	100.0	81	100.0	267	100.0
Condom use with CSWs						
At each sexual intercourse	40	83.3	0	0	40	83.3

Sometimes	6	12.5	0	0	6	12.5
Never	2	4.2	0	0	2	4.2
Ever had one night stand						
Yes	75	41.2	1	1.3	76	29.1
No	107	58.8	78	98.7	185	70.9
Total	182	100.0	79	100.0	261	100.0
Condom use during one night stand						
At each sexual intercourse	37	49.3	0	0	37	48.7
Sometimes	26	34.7	0	0	26	34.2
Never	12	16.0	1	100.0	13	17.1
Total	75	100.0	1	100.0	76	100.0

**n varies due to missing cases*

4.13. Risky Sexual Behavior

Risky sexual behavior is a composite variable calculated by responses of four variables; age at sexual initiation, number of sexual partners in the past one year, condom use with casual sex partner and sex with CSWs. The prevalence of risky sexual behavior among sexually active respondents (N=267) is 60% (53.7%-65.5%). The prevalence varies greatly among male and female respondents in which 72% males while 31% female were involved in risky sexual behavior. Likewise, the overall prevalence of risky sexual behavior is 18.6% (16.0%-21.2%).

It is notable that 10 respondents (4%) were involved in all of the risky behaviors, and all of those respondents were male.

Table 13 Prevalence of risky sexual behavior disaggregated by sex

Variables	Sex of the respondent				Total		95% CI
	Male		Female		n	%	
	n	%	n	%			
Risky sexual behavior							
(Any of the 4 risky behaviors)							
Yes	133	72.3	25	30.9	158	59.6	53.7-65.5
No	51	27.7	56	69.1	107	40.4	
All four risky behaviors							
Yes	10	5.4	0	0	10	3.8	1.5-6.1
No	174	94.6	81	100.0	255	96.2	
Total	184	100.0	81	100.0	265	100.0	

4.14. Association of Risky Sexual Behavior with other variables

4.14.1 Risky Sexual behavior by socio-demographic characteristics of respondents

Bivariate analysis using chi-square test was done to find out the association of risky sexual behavior with other variables. Similarly, confidence interval was also calculated for these variables. A higher proportion of respondents aged 15-19 years (74%) (CI=64%-83%) were involved in risky sexual behavior than respondents aged 20-24 years (53%, CI=46%-60.5%) and the association was statistically significant as well (p-value=0.002). Similarly, significantly higher proportions of male (72%) than female respondents (31%) were involved in risky sexual behavior (p-value<0.001). Likewise, ethnicity also had significant association with risky sexual behavior in which Janjatis (80%) and Madhesi/Muslims (77%) were more likely to involve in risky sexual behavior than Brahmin/Chhetri (52%) and Dalits (31%) (p-value<0.001).

Table 14 Risky Sexual behavior by socio-demographic characteristics of respondents

Variables	Risky sexual behavior			Total	
	Yes		95% CI (Lower- Upper)	n	P-value (Chi- square)
	n	%			
Age group					
15-19	61	73.5	64.0-83.0	83	0.002 (9.659)
20-24	97	53.3	46.0-60.5	182	
Sex					
Male	133	72.3	65.8-78.8	184	<0.001 (40.077)
Female	25	30.9	20.8-40.9	81	
Ethnicity					
Brahmin/Chhetri	85	52.1	44.5-59.8	163	<0.001 (22.7)
Janajati/Newar	55	79.7	70.2-89.2	69	
Dalits	5	31.3	8.5-54.0	16	
Madhesi/Muslim	13	76.5	56.3-96.6	17	
/Others					
Type of family					
Nuclear	97	61.8	54.2-69.4	157	0.387 (0.747)
Joint	61	56.5	47.1-65.8	108	
Total	158	59.6		265	
Main income source of family					
Agriculture	35	66.0	53.3-78.8	53	0.796 (2.373)
Business	53	57.0	46.9-67.1	93	
Private job	12	63.2	41.5-84.8	19	
Government job	26	53.1	39.1-67.0	49	
Foreign employment	29	63.0	49.1-77.0	46	
Daily wages/other	3	60.0	17.1-100	5	
Total	158	59.6		265	

4.14.2 Risky Sexual behavior by individual characteristics of respondents

The study shows that higher proportions of respondents who were currently living with other relatives (71%) and friends/alone (64%) were involved in risky sexual behavior than respondents living with their parents (56%), but the relationship was not statistically significant. On the other hand, the frequency of watching pornographic movies had significant association with risky sexual behavior ($p\text{-value}<0.001$). The respondents who watched pornographic movies everyday/almost every day (82%) were more likely to get involved in risky sexual behavior than who watched it sometimes (69%), rarely (51%) or never (41%).

Table 15 Risky Sexual behavior by individual characteristics of respondents

Variables	Risky sexual behavior			Total	P-value (Chi-square)
	Yes		95% CI	n	
	n	%			
Person currently living with					
Parents	93	55.7	48.2-63.2	167	0.189 (3.327)
Other relatives	20	71.4	54.7-88.2	28	
Friends/Alone	45	64.3	53.1-75.5	70	
Total	158	59.6		265	
Discussed sexual matters with father					
Yes	13	56.5	36.3-76.8	23	0.751 (0.101)
No	145	59.9	53.7-66.1	242	
Discussed sexual matters with mother					
Yes	17	47.2	30.9-63.5	36	0.103 (2.661)
No	141	61.6	55.3-67.9	229	
Total	158	59.6		265	
Frequency of watching pornographic movie					
Everyday/Almost everyday	46	82.1	72.1-92.2	56	<0.001 (24.683)
Sometimes (1-2 days a week)	42	68.9	57.2-80.5	61	
Rarely	46	51.1	40.8-61.4	90	
Never	24	41.4	28.7-54.1	58	
Received sexual and reproductive health education in school/college					
Yes	126	56.5	50-63	223	0.017
No	32	76.2	63-89	42	

4.14.3 Risky sexual behavior of respondents by substance use

The association between substance use and risky sexual behavior was also explored in the study. Respondents who ever consumed alcohol were more likely to get involved in risky sexual behavior (65%) than those who did not (53%), but the association was not statistically significant. On the other hand, consumption of alcohol in the past month had statistically significant association with risky sexual behavior in which higher proportions of respondents who consumed alcohol last month (72%) were involved in risky sexual behavior than those who did not (43%) (p-value=0.001). Likewise, significantly higher proportions of respondents who had smoked cigarette/tobacco (71%) were involved in risky sexual behavior than those who did not (54%) (p-value=0.008). In the similar manner, intake of drugs also had significant association with risky sexual behavior. Significantly higher proportions of respondents who had ever consumed any drugs (72%) than those who did not (56%) were involved in risky sexual behavior (p-value=0.034). Likewise, among those who had consumed drugs, those who took it last month (74%) were more likely to be involved in risky sexual behavior than those who did not (63%), but the association was not statistically significant.

Table 16 Risky sexual behavior of respondents by substance use

Variables	Risky sexual behavior			Total n	P-value (Chi-square value)
	Yes	95% CI			
	n	%		n	
Ever consumed alcohol					
Yes	98	64.5	56.9-72.1	152	
No	60	53.1	43.9-62.3	113	0.062 (3.484)
Total	158	59.6		265	
Consumed alcohol last month					
Yes	69	71.9	62.9-80.9	96	
No	19	43.2	28.5-57.8	44	0.001 (10.640)
Total	88	62.9		140	
Ever smoked cigarette/tobacco					
Yes	63	70.8	61.3-80.2	89	0.008 (6.938)
No	95	54.0	46.6-61.3	176	
Total	158	59.6		265	
Consumed tobacco last month					
Yes	44	68.8	57.4-80.01	64	
No	17	73.9	56.0-91.9	23	0.643 (0.215)
Total	61	70.1		87	
Ever taken any drugs					
Yes	39	72.2	60.0-84.2	54	0.034 (4.472)
No	119	56.4	49.7-63.1	211	
Total	158	59.6		265	
Consumed drug last month					
Yes	25	73.5	58.7-88.4	34	0.427 (0.630)
No	10	62.5	38.8-86.2	16	
Total	35	70.0		50	

4.14.4 Risky sexual behavior of respondents by sexual behavior of close friends

The study found that sexual behavior of close friends had statistically significant associations with risky sexual behavior of respondents. Higher proportions of respondents who had close unmarried sexually active friend (69%) (CI=61.8%-75%) were involved in risky sexual behavior than those who did not have such friend (50%) (CI=25.5%-74.5%), and the association was statistically significant as well (p-value<0.001). Likewise, significantly higher proportions of respondents who had close friend with multiple sexual partners (70%) were involved in risky sexual behavior than those respondents who did not have such friend (45%) (p-value<0.001). In the similar manner, significantly higher proportions of respondents who had close friend who had sex with CSWs (76%) were involved in risky sexual behavior than those who did not have such friend (59%) or did not know about it (41%) (p-value<0.001). Likewise, higher proportions of respondents who had peer pressure to have sexual intercourse (78%) were involved in risky sexual behavior (78% CI=65.1%-91.6%) than those who did not face peer-pressure (57% CI=50%-63.4%) (p-value=0.013).

Table 17 Risky sexual behavior of respondents by sexual behavior of close friends

Variables	Risky sexual behavior			Total	P-value (Chi-square)
	Yes		95% CI		
	n	%		n	
Had close unmarried friend who had sexual intercourse					
Yes	132	68.4	61.8-75.0	193	<0.001
No	8	50.0	25.5-74.5	16	(24.349)
Don't know	18	32.1	19.9-44.4	56	
Total	158	59.6		265	
Had close friend who had sex with more than one partner					
Yes	104	70.3	62.9-77.6	148	<0.001
No	17	44.7	28.9-60.0	38	(15.833)
Don't know	37	46.8	35.8-57.8	79	
Total	158	59.6		265	
Had close friend who had sex with CSWs					
Yes	76	76.0	67.6-84.4	100	<0.001
No	46	59.0	48.1-69.9	78	(23.183)
Don't know	36	41.4	31.0-51.7	87	
Total	158	59.6		265	
Any friend pressurized to have sexual intercourse					
Yes	29	78.4	65.1-91.6	37	0.013(6.11)
No	128	56.9	50.0-63.4	225	
Total	157	59.9		262	

4.15. Multivariate analysis:

Logistic regression was done to find out the determinants of risky sexual behavior. All the variables which were significant on Chi-square test were included in the logistic regression.

Correlation coefficient was used to identify multicollinearity, and between two variables with correlation coefficient more than 0.7, only one of the variables was included. For instance, close unmarried sexually active friend, and close friend with multiple sex partner, had correlation coefficient 0.783, so only one of them was included. Hosmer and Lemeshow test was done to test the goodness of fit, which found the model to be fit ($p=0.595$) as the value was greater than the cut-off point of value ($p=0.05$). The coefficient of determinant (Nagelkerke R-square) for the equation was 0.37 which explains that the about 37% change in the dependent variable is explained by the independent variables.

The results of multivariate analysis showed that sex, age and ethnicity had significant relation with risky sexual behavior. Females were 72% (AOR=0.28 95% CI: 0.12-0.69) less likely than males to involve in risky sexual behavior. Similarly, youths aged 20-24 years were also 72% (AOR=0.28, 95% CI:0.13-0.57) less likely to practice in risky sexual behavior than adolescents aged 15-19 years. In regards to ethnicity, Janajatis were almost 6 times (AOR=5.56 95% CI:2.47-12.5) and Dalits/Madhesi/others were almost 2 times more likely to involve in risky sexual behavior than Brahmin/Chhetri. Likewise, youths who do not smoked cigarette were 36% (AOR=0.644 95% CI=0.312-1.33) less likely to involve in risky sexual behavior than those who smoke. In the similar manner, youths who did not have close friend having sex with CSWs were 46% (AOR=0.54 95% CI: 0.22-1.28) less likely and who did not have any peer pressure to have sexual intercourse were 43% less likely to involve in risky sexual behavior.

The analysis was fit in the logistic regression model $\ln\left(\frac{y}{1-y}\right) = \beta_0 + \beta_1x_1 + \beta_2x_2 + \dots + \beta_kx_k$; where y is the predicted value of the dependent variable (y), k is the number of independent (x) variables and b is the regression coefficient of independent variables.

With the predicted outcome variable risky sexual behavior, three variables were significant. Based on the findings, the final regression model is as follows:

$$\text{logit}(\text{Risky sexual behavior}) = 2.58 - 1.26(\text{sex}) - 1.28(\text{agegroup}) + 1.7(\text{ethnicity})$$

Table 18 Determinants of risky sexual behavior

Variables	Unadjusted (Crude) OR (95% CI)	Adjusted OR (95% CI)	P value
Sex of the respondent			
Male (ref)	1.00	1.00	
Female	0.17 (0.097-0.30)	0.28 (0.12-0.69)	0.006
Age group			
15-19 (ref)	1.00	1.00	
20-24	0.41 (0.23-0.73)	0.28 (0.13-0.57)	0.001
Ethnicity			
Brahmin/Chhetri (ref)	1.00	1.00	
Janjati/Newar	3.60 (1.86-6.99)	5.53 (2.45-12.46)	<0.001
Dalit/Madhese/Others	1.1 (0.5-2.33)	1.87 (0.75-4.71)	0.22
Frequency of watching pornographic movies			
Everyday/Almost every day (ref)	1.00	1.00	
Sometimes (1-2 days a week)	0.48 (0.20-1.15)	1.04 (0.36-3.0)	0.958
Rarely	0.23 (0.10-0.50)	0.53 (0.2-1.4)	0.181
Never	0.15 (0.065-0.36)	1.11 (0.31-3.86)	0.817
Received sexual and reproductive health education in school/college			
Yes (ref)	1.00	1.00	
No	2.46 (1.1-5.2)	1.81 (0.71-4.6)	0.21
Ever smoked cigarette			
Yes (ref)	1.00	1.00	
No	0.48 (0.28-0.83)	0.7 (0.34-1.46)	0.35
Ever taken any drugs			
Yes (ref)	1.00	1.00	0.92
No	0.497 (0.26-0.96)	0.95 (0.38-2.36)	
Had close unmarried sexually active friend			
Yes (ref)	1.00	1.00	0.122
No/Don't know	0.26 (0.15-0.46)	0.51 (0.22-1.2)	
Had close friend who had sex with CSWs			
Yes (ref)	1.00	1.00	
No/Don't know	0.31 (0.18-0.54)	0.54 (0.22-1.28)	0.16
Any friend pressurized to have sexual intercourse			
Yes (ref)	1.00	1.00	
No	0.36 (0.16-0.83)	0.64 (0.22-1.9)	0.41

CHAPTER V

DISCUSSION

The study shows that the overall prevalence of risky sexual behavior is 18.5%, whereas the prevalence among sexually active respondents is 60%. The variables significantly associated with risky sexual behavior in the Chi-square test are sex, age, ethnicity, frequency of watching pornographic movies, received reproductive health education in school/college, consumption of alcohol in the past month, tobacco use, drug use, and having sexually active close friends or close friends having multiple sex partners or sex with CSWs. In contrast, only the sex of the respondent, age group and ethnicity had a significant relationship with risky sexual behavior in multivariate analysis.

5.1 Prevalence of risky sexual behavior

The overall prevalence of risky sexual behavior (25%) and prevalence among sexually active respondents (64%) of the study in South Ethiopia (2021) (39) and Nigeria (66%)(40) is higher than the prevalence of our study. The difference to some extent may be attributed to socio-economic and cultural differences between Nepal and Africa. Similarly, the overall prevalence of risky sexual behavior in a study carried out in Sri Lanka among undergraduates was 12.4%(41) which is a bit lower than the prevalence of our study. This could be due to variation in the operationalization of risky sexual behavior in this study, as it does not consider early sexual initiation as risky in this study and also considers the sexual behavior of past one year or three months. In contrast, a study done in Bangkok (42), shows a comparatively high prevalence (70%) of risky sexual behavior than our study, which could be the result of a larger sample size and varying socio-demographic and cultural settings than our country.

In the context of Nepal, a study of sexual risk behaviors among Nepalese students (43) shows that the overall prevalence is 17%, which is consistent to the findings of our study but the prevalence of risky sexual behavior among sexually active respondents (41%) in this study is less than the prevalence of our study. This could be due to variation in the quantification of risky sexual behavior i.e., early sexual initiation is not considered a risky sexual behavior in this study.

According to NDHS 2016, 38% of female youths, and 27% male youths had sexual intercourse before 18 years. But the proportion is quite different in our study, as 17% female and 36% male youths had sexual initiation before 18 years. This difference may be the result of the inclusion of in-school/college youths in our study.

5.2 Factors associated with risky sexual behavior

Several studies show some consistent and some contrast results with the findings of our study. A significantly higher proportion of males was involved in risky sexual behavior in a systematic review (OR: 1.69; 95% CI: 1.21, 2.37) and a study in Nigeria (40), which is similar with the findings of our study. In the similar manner, a meta-analysis of risky sexual behavior among male youth of developing countries showed a statistically significant association of risky sexual behavior with age younger than 20 years, well educated, and of a high economic status (44). Another similar finding is shown in a study in Ethiopia where sex of the respondent, and father's educational level were significantly associated with risky sexual behavior just as in our study (45). Similarly, a study conducted in far western district of Nepal showed that adolescents, compared to those above 19 years (P 0.030; OR 2.684; 95% CI 1.080 to 6.667), and males compared to females were more likely to have multiple sexual partners, which is in alignment with the findings of our study as well (46). A secondary analysis of the Nepal Demographic and Health Survey (NDHS 2016) also showed similar findings to the findings of our study in which males (AOR=5.5, 95% CI=2.58, 7.05) were more likely to have multiple sex partners than females (47).

Similarly, a study in South-Africa (39) shows that risky sexual behavior has significant association with consumption of alcohol, tobacco and having sexually active close friends. Similarly, another study in Ethiopia (2019) showed that substance use and peer pressure were the significant predictors of risky sexual behaviors which is in-line with the findings of our study (48). A systematic review and meta-analysis of risky sexual behavior among secondary and above students in Ethiopia showed that substance use [OR: 2.41 (95% CI: 1.49, 3.89)], and watching pornography [OR: 2.59 (95% CI: 1.01, 6.69)] were the associated factors of risky sexual behavior (49). Similarly, a cross-cultural study of 8 countries also showed that individuals who used substances were more likely to practice sexual risk behavior as compared to non-substance users (50). Smoking (AOR=2.2, 95% CI=1.6, 3.05) had significant positive relation with risky

sexual behavior in a study in Nepal as well(47). But in our study although these factors were associated with risky sexual behavior in chi-square test, but the relation did not retain in multivariate analysis.

The findings of this study also align with the previous studies on the relationship between exposure to pornography and risky sexual behavior. Higher exposure to pornography is significantly associated with risky sexual behavior in other studies as well (40,43). Our study also shows a significant association of the risky sexual behavior of respondents with the risky behavior of their close friends in bivariate analysis but the association did not retain in multivariate analysis. Sexuality is a sensitive issue, so it may be difficult to discuss related issues with the family, which is also supported by the findings of our study. Hence, peer group plays an important role in influencing the views, attitudes and sexual behavior of youths (51).

CHAPTER VI

CONCLUSION AND RECOMMENDATIONS

6.1. Conclusion:

The study investigates the sexual behavior of youths of Pokhara metropolitan city to find the prevalence of risky sexual behavior and its associated factors. Overall, nearly a third (31%) of respondents were sexually active, and the proportions were predominantly higher among males than females. The overall prevalence of risky sexual behavior is 18.5%, whereas the prevalence among sexually active respondents (i.e., who have had sexual intercourse till the data collection period) is 60%. The variables significantly associated with risky sexual behavior in the bivariate analysis are sex, age, ethnicity, frequency of watching pornographic movies, reproductive health education, consumption of alcohol in the past month, tobacco use, drug use, and having sexually active close friends or close friends having multiple sex partners or sex with CSWs. On the other hand, only sex, age group and ethnicity had significant relation with risky sexual behavior in multivariate analysis.

6.2. Recommendations

This study sheds light on the status of sexual risk behavior among youth students of Pokhara Metropolitan city and recognizes some variables that significantly influence this sort of behavior. This study shows a high prevalence of risky sexual behavior among youth students, with a significantly higher prevalence among adolescents, males and Janajatis than their counterparts. Hence, youths should be empowered and enabling environment should be created to promote safer sexual behavior among youth students with a special focus on adolescents, males, and Janajatis. Similarly, substance use and peer education related interventions can be effective for addressing risky sexual behavior among youths.

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Annexes

Annex-I Work plan

SN	Months Year	Bhadra 2079		Ashoj 2079				Kartik 2079				Mangsir 2079				Poush 2079				Magh 2079				Falgun 2079			
		3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
	Major activities																										
1	Identification of research topic																										
2	Literature Review																										
3	Research proposal writing																										
4	Presentation of research proposal																										
6	IRC submission, Pre-testing of research tool																										
7	Data Collection and cleaning																										
8	Data Analysis and Interpretation																										
9	Report writing phase Draft Report submission																										
10	Report presentation																										

Annex-II Budget

S.N.	Budget headings	Quantity	Unit	Unit Cost (NRS)	Total Cost (NRS)
1.	Research cost				
1.1	Printing and photocopy (research tools and other)	1	Lump sum		15,000
1.2	Stationeries	1	Lump sum		5,000
1.3.	Communications	1	Lump sum		2,000
2.	Transportation cost		Lump sum		15,000
3.	Research dissemination				
3.1	Research report binding and printing	3	Copies	2000	6000
4.	Miscellaneous				8,000
	TOTAL				51,000

Annex-III Data Collection tool

सुशुचित मन्जुरीनामा (Informed Consent)

नमस्ते ! म आकृति वाग्ले, हाल जनस्वास्थ्य केन्द्रिय विभाग, महाराजगञ्जमा जनस्वास्थ्य स्नातकोत्तर दोस्रो वर्षमा अध्ययनरत विद्यार्थी हो । म आफ्नो पाठ्यक्रमको माग अनुसार “Risky Sexual Behavior and its associated factors among youths of Pokhara Metropolitan City” शिर्षकमा अध्ययन गर्नको लागि तथ्यांक संकलन गर्न आएको हुँ।

अध्ययनको उद्देश्य र फाइदा/बेफाइदा

यस अध्ययनको मुख्य उद्देश्य कक्षा ११, १२ र स्नातक तहमा अध्ययनरत विद्यार्थीहरूको यौन व्यवहारको बारेमा अध्ययन गर्ने हो । यस प्रक्रियामा, सहभागीलाई उसको यौन व्यवहारहरूको बारेमा प्रश्नहरू सोधिने छ र त्यसको लागि लगभग १५-२० मिनेट जति लाग्नेछ । यस अध्ययनमा भाग लिनुमा कुनै जोखिम वा प्रत्यक्ष फाइदाहरू छैनन् तर यसले आउने दिनहरूमा यौन तथा प्रजनन स्वास्थ्य सम्बन्धि कार्यक्रमहरू ल्याउन मद्दत गर्नसक्छ ।

गोपनीयता

यस अध्ययनमा सहभागीको नाम सोधिने छैन र सहभागीको अरु विवरणहरू पनि पासवर्ड भएको कम्प्युटरमा पूर्ण रूपमा गोप्य राखिनेछ र सबै जानकारी यस अध्ययन प्रयोजनका लागि मात्र प्रयोग गरिनेछ।हामीले केहि गोप्य र संबेदनशील कुराहरू पनि सोध्नेछौं, तर तपाईं नलजाईकन निर्धक्क भएर सहि उत्तरहरूमा चिन्ह लगाउनुहोला किनभने यी जानकारीहरू कसैलाई पनि देखाइने छैन र निकै गोप्य र सुरक्षित राखिनेछ ।

स्वेच्छिक सहभागीता

यस अध्ययनको लागि तपाईं छनोट हुनुभएको छ । यसमा तपाईंको सहभागीता स्वेच्छिक हो । सहभागी हुन मन नलागेमा अध्ययनको कुनैपनि बेला सहभागिता टुङ्गाउन सकिनेछ । यस अध्ययनको लागि तपाईंको सहभागीता अत्याधिक उपयोगी हुनेछ । यदि तपाईं यस अध्ययनको लागि सहमत हुनुहुन्छ भने कृपया यस फारममा हस्ताक्षर गर्नुहोस् ।

मन्जुर छु

मन्जुर छैन

सहभागीको हस्ताक्षर:.....

कोड न.

Section 1: General Information

प्रश्न न	प्रश्नहरू	उत्तरहरू	कोड	Skip
101	महानगरपालिका	पोखरा		
102	वार्ड न.	<input type="text"/>		
103	विद्यालय/कलेजको प्रकार	सरकारी..... निजि	१ २	
104	तपाईं हाल कुन स्तरमा पढ्दै हुनुहुन्छ?	कक्षा ११ कक्षा १२..... स्नातक तह (Bachelor) यदि स्नातक तह हो भने (If bachelor level), वर्ष (Year) <input type="text"/>	१ २ ३	
105	तपाईंको विधा कुन हो? (What is your faculty/stream?)	विज्ञान (Science)..... व्यवस्थापन (Management)..... शिक्षा (Education)..... मानविकी (Humanities)..... कानून (Law)..... Medicine/Nursing/Paramedics इन्जीनियरींग (Engineering) अन्य (खुलाउनुहोस).....	१ २ ३ ४ ५ ६ ७ ९६	

Section 2: Socio-demographic characteristics

QN	Questions	Coding Categories	Code	Skip
201.	तपाईंको उमेर कति हो? (पुरा भएको उमेर वर्षमा)	<input type="text"/> <input type="text"/>		
202.	तपाईंको लिङ्ग के हो?	पुरुष	१	
		महिला	२	
		तेश्रो लिंगी.....	३	
203.	तपाईंको जात/ जातियता के हो ?	ब्राहमण/क्षेत्री.....	१	
		जनजाती/नेवार.....	२	
		दलित.....	३	
		मधेसी/तराई जाति.....	४	
		मुस्लिम.....	५	
		अन्य (खुलाउनुहोस्)	९६	
204.	तपाईं कुन धर्म मान्नु हुन्छ ?	हिन्दु.....	१	
		बौद्ध.....	२	
		मुस्लिम.....	३	
		क्रिस्चियन.....	४	
		अन्य खुलाउने.....	९६	
205	तपाईंको परिवार कस्तो प्रकारको छ?	एकल.....	१	
		संयुक्त.....	२	
206.	तपाईंको वैवाहिक स्थिति के हो?	अविवाहित	1	
		विवाहित	2	
		छुटिएको	3	
		पारपाचुके भएको (Divorced)	4	
		विधवा/विधुर	5	

207	तपाईंको परिवारको आम्दानीको मुख्य श्रोत के हो ?	कृषि..... व्यवसाय..... निजि जागिर..... सरकारी जागिर दैनिक ज्याला मजदुरी..... वैदेशिक रोजगार अन्य खुलाउने.....	१ २ ३ ४ ५ ६ ९६	
208.	तपाईंको परिवारको मासिक आम्दानी लगभग कति हुन्छ (monthly income) ?	रु.		
209.	तपाईंको आमाले पुरा गर्नु भएको माथिल्लो शैक्षिक तह के हो ?	निरक्षर..... अनौपचारिक शिक्षा..... आधारभूत शिक्षा (१-८)..... माध्यामिक (९-१२)..... स्नातक..... स्नाकोत्तर र सो भन्दा माथि..... आमा जीवित/सम्पर्कमा नभएको.....	१ २ ३ ४ ५ ६ ८८	
210	तपाईंको बुवाले पुरा गर्नु भएको माथिल्लो शैक्षिक तह के हो ?	निरक्षर..... अनौपचारिक शिक्षा..... आधारभूत शिक्षा (१-८)..... माध्यामिक (९-१२)..... स्नातक..... स्नाकोत्तर र सो भन्दा माथि..... बुवा जीवित/सम्पर्कमा नभएको.....	१ २ ३ ४ ५ ६ ८८	

3. Individual factors

QN	Questions	Coding Categories	Code	Skip
301	तपाईं हाल को संग बस्नुहुन्छ?	बुवा/आमा अन्य नातेदार..... साथीहरु एकलै..... अन्य (खुलाउनुहोस)	१ २ ३ ४ ९६	
302	तपाईं आफ्नो बुवासंगको सम्बन्धलाई कसरी व्याख्या गर्नुहुन्छ? (How do you describe your relation with your father?)	धेरै राम्रो राम्रो..... न राम्रो न नराम्रो..... नराम्रो धेरै नराम्रो बुवा बित्नुभयो.....	१ २ ३ ४ ५ ८८	
303	तपाईं आफ्नो आमासंगको सम्बन्धलाई कसरी व्याख्या गर्नुहुन्छ? (How do you describe your relation with your mother?)	धेरै राम्रो राम्रो..... न राम्रो न नराम्रो..... नराम्रो धेरै नराम्रो बुवा बित्नुभयो.....	१ २ ३ ४ ५ ८८	
304	तपाईंले कहिल्यै यौन संग सम्बन्धित विषयहरु (sex-related matters) आफ्नो बुवासंग छलफल/कुराकानी गर्नुभएको छ ?	गरेको छु गरेको छैन.....	१ २	→306
305	यदि कुराकानी गर्नुहुन्छ भने, धेरैजसो गर्नुहुन्छ कि कहिलेकाही ?	कहिलेकाही धेरैजसो	१ २	

306	तपाईंले कहिल्यै यौन संग सम्बन्धित विषयहरू (sex-related matters) आफ्नो आमासंग छलफल/कुराकानी गर्नुभएको छ ?	गरेको छु गरेको छैन.....	1 2	→309
307	यदि कुराकानी गर्नुहुन्छ भने, धेरैजसो गर्नुहुन्छ कि कहिलेकाही ?	कहिलेकाही धेरैजसो	१ २	
309	तपाईं उत्तेजना गराउने चलचित्र/भिडियोहरू (pornographic movies) कतिको हेर्नुहुन्छ?	सधैँजस्तो कहिलेकाही (हप्तामा १ २ पटक)..... विरलै (Rarely) कहिल्यै पनि हेर्दिन	१ २ ३ ४	
310	तपाईं हस्तमैथुन (masturbation) गर्नुहुन्छ ?	गर्छु गर्दिन.....	१ २	→ 312
311	यदि गर्नुहुन्छ भने, कतिको गर्नुहुन्छ ?	सधैँजसो धेरैजसो (हप्तामा २-३ पटक)..... कहिलेकाही/विरलै	१ २ ३	
312	तपाईंले कहिल्यै आफ्नो विद्यालय/कलेजमा प्रजनन स्वास्थ्य (Reproductive health) संग सम्बन्धित शिक्षा पाउनुभएको छ ?	छ..... छैन	१ २	
313	तपाईंले कहिल्यै आफ्नो विद्यालय/कलेजमा यौन स्वास्थ्य (Sexual health) संग सम्बन्धित शिक्षा पाउनुभएको छ ?	छ..... छैन	१ २	

314	तपाईंले सामाजिक संजालहरु जस्तै (Facebook, Instagram, tik-tok, snapchat twitter) आदि प्रयोग गर्नुहुन्छ ?	गर्छु गर्दिन	१ २	
315	यदि प्रयोग गर्नुहुन्छ भने, तपाईं सामाजिक संजालमा प्रायजसो कस्ता खालका सामग्रीहरु हेर्नुहुन्छ ? <i>बहुउत्तर</i>	समाचार/पढाईका सामग्री..... मनोरन्जनका गतिविधि अस्लिल (prone) सामाग्री..... अन्य (खुलाउनुहोस्)	१ २ ३ ९६	

4. Substance Use

QN	Questions	Coding Categories	Code	Skip
401.	तपाईंले कहिल्यै रक्सी (alcohol) पिउनुभएको छ?	छ छैन	१ २	→ 404
402.	यदि पिउनुभएको छ भने, तपाईंले रक्सी पिउन थालेको कति समय भयो/ कति समय जति रक्सी पिउनुभयो ?	.....महिना वर्ष		
403.	गत १ महिनामा तपाईंले कति दिन जति रक्सी पिउनुभयो? <i>एक दिन पनि पिउनुभएन भने, ० लेख्नुहोस्</i> /	..... दिन		
404.	के तपाईंको कुनै नजिकको साथीले रक्सी पिउछ?	पिउछ पिउदैन	१ २	
405.	के तपाईंले कहिल्यै चुरोट/अन्य सुर्तीजन्य पदार्थ सेवन गर्नुभएको छ?	छ..... छैन	१ २	→ 407

406.	यदि गर्नुभएको छ भने, तपाईंले सेवन गर्न थालेको कति समय जति भयो?	.....महिना वर्ष		
407.	गत १ महिनामा तपाईंले कति दिन जति चुरोट/अन्य सुर्तीजन्य पदार्थ सेवन गर्नुभयो ? एक दिन पनि पिउनुभएन भने, ० लेख्नुहोस् /	..... दिन		
408.	के तपाईंको कुनै नजिकको साथीले चुरोट/अन्य सुर्तीजन्य पदार्थ सेवन गर्छ??	गर्छ गर्दैन	१ २	
409.	के तपाईंले कहिल्यै लागूऔषध जस्तै गाँजा, धतुरो (like cocaine/heroine/ marijuana) सेवन गर्नुभएको छ?	छ..... छैन	१ २	412
410.	यदि गर्नुभएको छ भने, तपाईंले लागूऔषध सेवन गर्न थालेको कति समय जति भयो?	.....महिना वर्ष		
411	गत १ महिनामा तपाईंले कति दिन जति लागूऔषध सेवन गर्नुभयो ? एक दिन पनि पिउनुभएन भने, ० लेख्नुहोस् /	..... दिन		
412	के तपाईंको कुनै नजिकको साथीले लागूऔषध सेवन गर्छ?	गर्छ गर्दैन	१ २	

5. Sexual Behavior

QN	Questions	Coding Categories	Cod e	Ski p
501.	के तपाईंको कुनै नजिकको अविवाहित साथीले यौन सम्पर्क (sexual intercourse) राखेको छ?	छ..... छैन थाहा छैन	१ २ ९८	
502.	के तपाईंको कुनै नजिकको साथीले एक जना भन्दा बढी साथीहरु संग यौन सम्पर्क राखेको छ? (sexual intercourse with more than one partner) ?	छ..... छैन थाहा छैन	१ २ ९८	
503.	के तपाईंको कुनै नजिकको साथीले यौन व्यापारीहरुसंग (पैसा तिरेर यौन सम्पर्क राख्ने) (commercial sex workers) यौन सम्पर्क राखेको छ?	छ..... छैन थाहा छैन	१ २ ९८	
504.	के तपाईंलाई कहिल्यै कुनै साथीले अरुसंग यौन सम्पर्क राख्नको लागि दबाव दिएको छ ?	छ..... छैन	१ २	
505.	तपाईंले कहिल्यै यौन सम्पर्क गर्नुभएको छ ?	छ छैन	१ २	End
506.	यदि गर्नुभएको छ भने, पहिलो पटक यौन सम्पर्क गर्दा तपाईं कति वर्षको हुनुहुन्थ्यो ?	..... वर्ष		

507.	पहिलो पटक यौन सम्पर्क गर्दा, के तपाईं वा तपाईंको साथीले कण्डम (condom) को प्रयोग गर्नुभयो ?	गरे गरिन	१ २	
508	पहिलो पटक यौन सम्पर्क गर्नुको कारण के थियो?	उत्सुकता(Curious)..... मायामा परेकाले (In love) यौन चाहाना (Sexual desire)..... साथीको दबावले (Peer pressure)..... प्रेमी/प्रेमिका/यौनसाथिको दबाव ले (Pressure by partner) अन्य (खुलाउनुहोस्)	१ २ ३ ४ ५ ९६	
509	तपाईंले जीवनमा हालसम्म कतिजना संग यौन सम्पर्क गर्नुभयो? (During your life, with how many people have you had sexual intercourse?)	.....	
510	गत १ वर्षमा तपाईंले कति जनासंग यौन सम्पर्क गर्नुभयो?	.....	

511	तपाईंले हालसम्म को को संग यौन सम्पर्क राख्नुभएको छ ? Who are the partners, you had sexual intercourse with till date? (multiple response) बहुउत्तर	प्रेमिका/श्रीमती..... साथि अपरिचित व्यक्ति(Stranger) यौन व्यापारीहरु(Commercial sex worker).... अन्य (खुलानुहोस).....	१ २ ३ ४ ९६	
512	यदि प्रेमिका/श्रीमती बाहेक अरुसंग यौन सम्पर्क गर्नुभएको छ भने, उनीहरूसंग यौन सम्पर्क गर्दा कण्डमको प्रयोग गर्नुहुन्छ ?	प्रत्यक पटक यौन सम्पर्क गर्दा कण्डमको प्रयोग गर्छु कहिलेकाही कण्डमको प्रयोग गर्छु कहिल्यै पनि गर्दिन	१ २ ३	
513.	के तपाईंले कहिल्यै यौन व्यापारीहरूसंग (पैसा तिरेर यौन सम्पर्क राखे) (commercial sex workers) यौन सम्पर्क गर्नुभएको छ ?	छ..... छैन	१ २	→ 516
514.	यदि यौन सम्पर्क गर्नुभएको छ भने, उनीहरूसंग यौन सम्पर्क गर्दा कण्डमको प्रयोग गर्नुहुन्छ ?	प्रत्यक पटक यौन सम्पर्क गर्दा कण्डमको प्रयोग गर्छु कहिलेकाही कण्डमको प्रयोग गर्छु कहिल्यै पनि गर्दिन	१ २ ३	
515.	यदि यौन सम्पर्क गर्नुभएको छ भने, हालसम्म कतिजना यौन व्यापारीहरूसंग (पैसा तिरेर यौन सम्पर्क राखे) यौन सम्पर्क गर्नुभएको छ ?	.....	

516.	के तपाईंले कहिल्यै कुनै अपरिचित व्यक्तिसंग यौन सम्पर्क राख्नुभएको छ (जस्तै कुनै पार्टी/जमघट पछाडी)? (one-night stand after a party/drinking)?	छ..... छैन	१ २	End
517.	यदि यौन सम्पर्क राख्नुभएको छ भने, उनीहरूसंग यौन सम्पर्क राख्दा कण्डमको प्रयोग गर्नुहुन्छ ?	सधैं कण्डमको प्रयोग गर्छु..... कहिलेकाही कण्डमको प्रयोग गर्छु गर्दिन.....	1 2 3	

Annex IV: Information to participant sheet

नमस्ते ! म आकृति वाग्ले, हाल म जनस्वास्थ्य केन्द्रिय विभाग, महाराजगञ्जमा जनस्वास्थ्य स्नातकोत्तर दोस्रो वर्षमा अध्ययनरत छु । म आफ्नो पाठ्यक्रमको माग अनुसार “Risky Sexual Behavior and its associated factors among youths of Pokhara Metropolitan City” शिर्षकमा अध्ययन गर्नको लागि तथ्यांक संकलन गर्न आएको हुँ । यस अध्ययनको मुख्य उद्देश्य कक्षा ११, १२ र स्नातक तहमा अध्ययनरत विद्यार्थीहरूको यौन व्यवहारको बारेमा अध्ययन गर्ने हो । यस प्रक्रियामा, सहभागीलाई उसको यौन व्यवहारहरूको बारेमा प्रश्नहरू सोधिने छ र त्यसको लागि लगभग १५-२० मिनेट जति लाग्नेछ । यस अध्ययनमा भाग लिनुमा कुनै जोखिम वा प्रत्यक्ष फाइदाहरू छैनन् तर यसले आउने दिनहरूमा यौन तथा प्रजनन स्वास्थ्य सम्बन्धि कार्यक्रमहरू ल्याउन मद्दत गर्नसक्छ । यस अध्ययनमा सहभागीको नाम सोधिने छैन र सहभागीको अरु विवरणहरू पनि पासवर्ड भएको कम्प्युटरमा पूर्ण रूपमा गोप्य राखिनेछ र सबै जानकारी यस अध्ययन प्रयोजनका लागि मात्र प्रयोग गरिनेछ । हामीले केहि गोप्य र संवेदनशील कुराहरू पनि सोधिनेछौं, तर तपाईं नलजाईकन निर्धक्क भएर सहि उत्तरहरूमा चिन्ह लगाउनुहोला किनभने यी जानकारीहरू कसैलाई पनि देखाइने छैन र निकै गोप्य र सुरक्षित राखिनेछ ।

Annex V: Informed consent for parents

अभिभावकको लागि सुशुचित मन्जुरीनामा (Informed Consent)

नमस्ते! म आकृति वाग्ले, जनस्वास्थ्य केन्द्रिय विभाग, महाराजगञ्जमा जनस्वास्थ्य स्नातकोत्तर दोस्रो वर्षमा अध्ययनरत विद्यार्थी । म आफ्नो पाठ्यक्रमको माग अनुसार “Risky Sexual Behavior and its associated factors among youths of Pokhara Metropolitan City” शिर्षकमा अध्ययन गर्न गईरहेको छु ।

अध्ययनको उद्देश्य र फाइदा/बेफाइदा

यस अध्ययनको मुख्य उद्देश्य कक्षा ११, १२ र स्नातक तहमा अध्ययनरत विद्यार्थीहरूको यौन व्यवहारको बारेमा अध्ययन गर्ने हो । यस प्रक्रियामा, सहभागीलाई उसको यौन व्यवहारहरूको बारेमा प्रश्नहरू सोधिने छ र त्यसको लागि लगभग १५-२० मिनेट जति लाग्नेछ । यस अध्ययनमा भाग लिनुमा कुनै जोखिम वा प्रत्यक्ष फाइदाहरू छैनन् तर यसले आउने दिनहरूमा यौन तथा प्रजनन स्वास्थ्य सम्बन्धि कार्यक्रमहरू ल्याउन मद्दत गर्नसक्छ ।

गोपनीयता

यस अध्ययनमा सहभागीको नाम सोधिने छैन र सहभागीको अरु विवरणहरू पनि पासवोर्ड भएको कम्प्युटरमा पूर्ण रूपमा गोप्य राखिनेछ र सबै जानकारी यस अध्ययन प्रयोजनका लागि मात्र प्रयोग गरिनेछ ।

स्वेच्छिक सहभागीता

यस अध्ययनको लागि हजुरको छोरा/छोरी छनोट हुनुभएको छ । यसमा उहाँको सहभागीता स्वेच्छिक हो । सहभागी हुन मन नलागेमा अध्ययनको कुनैपनि बेला सहभागिता टुङ्गाउन सकिनेछ । यस अध्ययनको लागि तपाईंको छोरा/छोरीको सहभागीता अत्याधिक उपयोगी हुनेछ । यदि तपाईं यस अध्ययनको अनुमतीको लागि सहमत हुनुहुन्छ भने कृपया यस फारममा हस्ताक्षर गर्नुहोस् ।

मन्जुर छु

मन्जुर छैन

अभिभावको हस्ताक्षर:.....

Annex VI: Assent for students below 18 years

नमस्ते! म आकृति वाग्ले, जनस्वास्थ्य केन्द्रिय विभाग, महाराजगञ्जमा जनस्वास्थ्य स्नातकोत्तर दोस्रो वर्षमा अध्ययनरत विद्यार्थी । म आफ्नो पाठ्यक्रमको माग अनुसार “Risky Sexual Behavior and its associated factors among youths of Pokhara Metropolitan City” शिर्षकमा अध्ययन गर्न गईरहेको छु ।

अध्ययनको उद्देश्य र फाइदा/बेफाइदा

यस अध्ययनको मुख्य उद्देश्य कक्षा ११, १२ र स्नातक तहमा अध्ययनरत विद्यार्थीहरूको यौन व्यवहारको बारेमा अध्ययन गर्ने हो । यस प्रक्रियामा, सहभागीलाई उसको यौन व्यवहारहरूको बारेमा प्रश्नहरू सोधिने छ र त्यसको लागि लगभग १५-२० मिनेट जति लाग्नेछ । यस अध्ययनमा भाग लिनुमा कुनै जोखिम वा प्रत्यक्ष फाइदाहरू छैनन् तर यसले आउने दिनहरूमा यौन तथा प्रजनन स्वास्थ्य सम्बन्धि कार्यक्रमहरू ल्याउन मद्दत गर्नसक्छ ।

गोपनीयता

यस अध्ययनमा सहभागीको नाम सोधिने छैन र सहभागीको अरु विवरणहरू पनि पासवर्ड भएको कम्प्युटरमा पूर्ण रूपमा गोप्य राखिनेछ र सबै जानकारी यस अध्ययन प्रयोजनका लागि मात्र प्रयोग गरिनेछ ।

स्वेच्छिक सहभागीता

यस अध्ययनको लागि तपाईंको सहभागीता स्वेच्छिक हो । सहभागी हुन मन नलागेमा अध्ययनको कुनैपनि बेला सहभागिता टुङ्गाउन सकिनेछ । यस अध्ययनको लागि तपाईंको सहभागीता अत्याधिक उपयोगी हुनेछ । तपाईं १८ वर्ष भन्दा कम उमेरको भएकाले यस अध्ययनको अनुमती हामीले तपाईंको अभिभावकसंग लिसकेका छौं, तैपनि के तपाईं यस अध्ययनमा सहभागी हुन मन्जुर हुनुहुन्छ ?

मन्जुर छु

मन्जुर छैन

Annex VII: Approval letter from municipality



प.सं. ०७९१८०
च.नं. ३७९



फोन नं ०६१-४३२३०१
इमेल pokharametro.healthdivision@gmail.com
वेबसाइट pokharamun.gov.np

गण्डकी प्रदेश, नेपाल

मिति: २०७९/०७/३०

जो जस सँग सम्बन्धित छ।

विषय: अनुमति सम्बन्धमा।

प्रस्तुत विषयमा त्रि.वि.वि., चिकित्सा शास्त्र अध्ययन संस्थान जनस्वास्थ्य केन्द्रिय विभागको मिति २०७९/०७/३० गतेको पत्रानुसार तहाँ स्नातकोत्तर तह Master in public Health दोस्रो वर्षका विद्यार्थी श्री आकृती वाग्लेले पो.म.न.पा.अन्तर्गतका ११ र १२ कक्षा साथै स्नातक तहमा अध्ययनरत विद्यार्थीहरूमा " Risky sexual Behaviour and Its Associated Factors Among Youths of pokhara Metropolitan City" विषयमा अध्ययन अनुसन्धान गर्न अनुमति माग गर्नु भएकोले सो कार्यको लागि अनुमति प्रदान गरेको व्यहोरा अनुरोध छ।

कृष्ण प्रसाद अर्याल
व.स्वा.वि.अधिकृत


महाशाखा प्रमुख


बोधार्थ :

श्री त्रि.वि.वि., चिकित्सा शास्त्र अध्ययन संस्थान जनस्वास्थ्य केन्द्रिय विभाग।
श्री आकृती वाग्ले (कार्यक्रम सम्पन्न भएपछि पो.म.न.पा.को
स्वास्थ्य महाशाखामा प्रतिवेदन पेश गर्नु हुन)

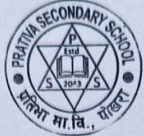
Annex- VIII: Letters from Schools/Colleges

(Prativa Uchha Madhyamic Vidhyala (Pvt) Ltd.)

 **PRATIVA**
SECONDARY SCHOOL


An ISO 9001:2015 Certified School

Ref. No.: 220/079/080

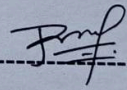


Date: 2079/09/07

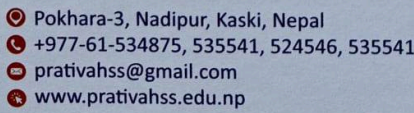
To Whom It May Concern

This is to certify that **Ms. Aakriti Wagle** (Institute of Medicine Central Department of Public Health, Tribhuwan University, 2nd year, Master in Public Health) has presented a set of questionnaires in our school to collect the data required for her research entitled **"Risky Sexual Behavior and Its Associated Factors Among Youths of Pokhara Metropolitan City"**. She has successfully completed her assigned job.

I wish her success in every aspect of her life.



Co-Ordinator


Pokhara-3, Nadipur, Kaski, Nepal
+977-61-534875, 535541, 524546, 535541
prativahss@gmail.com
www.prativahss.edu.np

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Pokhara Engineering College

(Affiliated to Pokhara University)

"Committed to Excellence in Technical Education"



Date: 2079/09/12

Ref. No.: 146-079-080

To,
The Department Head,
Central Department of Public Health
Institute of Medicine,
Maharajgunj, Kathmandu.


Sub: Regarding data collection

Dear Sir,

As per your letter dated 2079/07/22, Ms Aakriti Wagle, student of your college from Masters in Public Health second year has collected data for her thesis entitled 'Risky Sexual Behavior and its Associated Factors Among youth of Pokhara Metropolitan City' among bachelor level student of this college

Thank you.

Sincerely,


Principal
Ar. Rojana Joshi
Principal



POKHARA UNIVERSITY
FACULTY OF SCIENCE AND TECHNOLOGY
SCHOOL OF ENGINEERING
Kaski, Nepal

Ref. No.: ३६३/०६३/८०



मिति २०७९/०९/२२

श्री प्रमुखज्यू,
चिकित्सा शास्त्र अध्ययन संस्थान
जनस्वास्थ्य केन्द्रीय विभाग
काठमाण्डौ, नेपाल।

विषय : जानकारी गराईएको सम्बन्धमा।

उपरोक्त सम्बन्धमा त्यस कलेजको मिति २०७९/०९/२२ को पत्र अनुशास त्यस संस्थानमा अध्ययनरत विद्यार्थी श्री आकृती वाग्लेले पाठ्यक्रम अनुसार आफ्नो व्यक्तिगत अनुसन्धानका लागि "Risky Sexual Behaviour and Its Associated Factors Among Youths of Pokhara Metropolitan City" शिर्षकमा पोखरा विश्वविद्यालय, विज्ञान तथा प्रविधि संकाय अन्तर्गत यस स्कुल अफ इन्जिनियरिङ्गका विद्यार्थीहरुमा अनुसन्धान गर्नु भएको व्यहोरा जानकारी गराईन्छ।

ई. ओम प्रकाश गिरी
निर्देशक



TRIBHUVAN UNIVERSITY

त्रिभुवन विश्वविद्यालय

Prithvi Narayan Campus

पृथ्वीनारायण क्याम्पस

(A QAA Certified Institution, Accredited by UGC, Nepal)

प.स. :
च.न. : १३२५१०५५-०८०

(शैक्षिक प्रशासन शाखा)



मिति : २०७८।८।१०

श्रीमान् प्रमुखज्यू :

त्रि. वि. चिकित्साशास्त्र अध्ययन संस्थान

जनस्वास्थ्य केन्द्रीय विभाग

महाराजगन्ज, काठमाण्डौ, नेपाल ।

विषय : तथ्यांक संकलन गरेको सम्बन्धमा ।

उपरोक्त सम्बन्धमा त्यस विभाग अन्तर्गत स्नातकोत्तर तह Master in Public Health (MPH) दोस्रो वर्षमा अध्ययनरत रोल नं. ४१३ की छात्रा आकृती वाग्लेले यस क्याम्पसमा अध्ययनरत विद्यार्थीहरूको तथ्यांक संकलन गर्नुभएको ब्यहोरा अनुरोध गरिन्छ ।

यादवराज उपाध्याय

सहायक क्याम्पस प्रमुख

पृथ्वीनारायण क्याम्पस, पोखरा

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श्री अमरसिंह माध्यमिक विद्यालय
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Ramghat, Pokhara-12, Kaski, Nepal

☎ 061-570359, 531390
531506, 532841
524894
Code : 400320075
P.O. Box: 597

पत्र संख्या (Let. No.):
चलानी नं. (Ref. No.):



मिति (Date) ...२०७९/०९/१९.....

जो जससँग सम्बन्धित छ।

त्रिभुवन विश्वविद्यालय, चिकित्सा शास्त्र अध्ययन संस्थान, जनस्वास्थ्य केन्द्रीय विभाग महाराजगञ्जमा जनस्वास्थ्य विषयमा स्नातकोत्तर तह Master in Public Health (MPH) दोस्रो वर्षमा अध्ययनरत रोल नं. ४१३ को छात्रा श्री आकृती बाग्लेले अध्ययनको शिलशिलामा यस विद्यालयमा “*Risky Sexual Behaviour and Its Associated Factors Among Youths of Pokhara Metropolitan City*” शिर्षकमा अनुसन्धान कार्यका लागि तथ्याङ्कसंकलन गरेको व्यहोरा जानकारीका लागि अनुरोध छ।


श्री तेजस्वी बराल
प्रधानाध्यापक
प्रधानाध्यापक,

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त्रि.वि.वि.बाट सम्बन्धन प्राप्त
Affiliated to Tribhuvan University

पोखरा बहुमुखी क्याम्पस POKHARA MULTIPLE CAMPUS

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Ref. No. / पत्र संख्या 115/074/80

पोखरा-९, नयाँबजार
Pokhara- 9, Nayabazar

Date/ मिति: 2079/09/08



TO WHOM IT MAY CONCERN

This is to mention that Aakriti Wagle studying in Master in Public Health (MPH) Second Year in Central Department of Public Health, IOM has completed data collection for her thesis in our campus.

We wish her every success in her future academic career.

Shishukala Parajuli
Campus Chief

Email: pokharamultiplecampus@gmail.com
Web: www.pmcpokhara.edu.np

CS CamScanner



Pokhara College of Management

(Affiliated to Pokhara University)


Ref. No.: 337/03



Date: २०७९/१०/०३

जो जस संग संबन्धित छ।

त्रिभुवन विश्वविद्यालय, चिकित्सा शास्त्र अध्ययन संस्थान, जनस्वास्थ्य केन्द्रिय विभाग महाराजगञ्जमा स्नातायकोत्तर तह Master in Public Health (MPH) दोस्रो वर्षमा अध्ययनरत विद्यार्थी श्री आकृती वाग्लेले यस पोखरा कलेज अफ म्यानेजमेन्टमा मिति २०७९/१०/०३ गतेका दिन तथ्यांक संकलन गर्नुभयो छ। साथै कलेज उहाँको उज्वल भविष्यको कामना गर्दछ।


सरोज कुवर
कोअर्डिनेटर :

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Swagat Nagar, Chauthe-14, Pokhara, Nepal

Estd. 2051

Ref. No.: 033
079-080

Date:

Date: 2079/09/18

To Whom It May Concern

This is to certify that **Ms. Aakriti Wagle** who is studying Master in Public Health in Central Department of Public Health, Institute of Medicine (IOM), has collected data from class XI and XII students of this school for her thesis on '**Risky Sexual Behaviour and Its Associated Factors Among Youths of Pokhara Metropolitan City**'.

I wish her further progress in the days to come.

Coordinator

Bijaya Kumar Paudel



त्रिभुवन विश्वविद्यालय
जनप्रिय बहुमुखी क्याम्पस
(विश्वविद्यालय अनुदान आयोगबाट गुणस्तर मान्यता प्राप्त)
जनप्रिय मार्ग-सिमलचौर, पोखरा-८
२०४८




पत्र संख्या : ७३७
चलानी नं.: ७३७/२०७३/०८०

२०७९/०९/१३

श्री त्रिभुवन विश्वविद्यालय,
चिकित्सा शास्त्र अध्ययन संस्थान
जनस्वास्थ्य केन्द्रीय विभाग
महाराजगन्ज, काठमाण्डौ
नेपाल

विषय : तथ्यांक संकलन गरिएको बारे ।

उपर्युक्त विषयमा त्यस संस्थान अन्तर्गत स्नातकोत्तर तह Master in Public Health दोस्रो वर्षमा अध्ययनरत विद्यार्थी आकृति बाग्लेले "Risky Sexual Behaviour and Its Associated Factors Among Youths of Pokhara Metropolitan City" शिर्षकमा लागि यस क्याम्पसमा स्नातक तहमा अध्ययनरत विद्यार्थीहरुबाट तथ्यांक संकलन गरिएको व्यहोरा प्रमाणित गरिन्छ ।


(मेख राज पौडेल)
सहायक क्याम्पस प्रमुख
सहायक क्याम्पस प्रमुख

फोन नं.: ०६१-४३९८२२, ४३२२८७, ४३७७२३, Email: office@janapriya.edu.np, Website : www.janapriya.edu.np



Mount Annapurna Secondary School
माउण्ट अन्नपुर्ण माध्यमिक विद्यालय



To
Tribhuvan University
Institute of Medicine
Central Department of Public Health
Maharajgunj, Kathmandu, Nepal

Ref.No: 72-2079/080

Subject: Permitted to Aakrit Wagle for data collection to her MPH dissertation

Dear Sir/Madam

We hereby would like to mention you that Ms. Aakrit Wagle from your well esteemed Institute has submitted the letter in our school from your department seeking permission for the preliminary data collection on the title "Risky Sexual Behavior and Its Associated Factors among Youths of Pokhara Metropolitan City" as per the private exploration on her MPH dissertation. We permitted her to do so of our School's adolescence especially class XI and XII.

We wish her all the best for her future endeavour.

Director
21st December, 2022