SEXUAL RISK BEHAVIOUR AND RISK PERCEPTION OF UNWANTED PREGNANCIES AND SEXUALLY TRANSMITTED DISEASES AMONG YOUNG FACTORY WORKERS IN NEPAL



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Contents

Acknowledgements The Study Team Executive Summary **CHAPTER 1: INTRODUCTION** 1-6 1.1 Background 1.2 Objectives of the Study 2 1.3 Research Questions 1.4 Research Hypothesis 1.5 Study Design and Methods 1.6 The Research Instruments 1.7 Recruitment and Training 1.8 Data Management and Analysis 1.9 **Ethical Considerations** 6 1.10 Potential Sources of Bias/Errors CHAPTER 2: CHARACTERISTICS OF THE RESPONDENTS 2.1 Demographic Characteristics 2.2 Caste/Ethnicity 2.3 Literacy Status 2.4 Vocational Training 2.5 Mobility and Types of Accommodation 2.6 Types of Accommodation 12 2.7 Employment History and Remittances 13 Monthly Income 2.8 17 2.9 Job Security 2.10 Level of Satisfaction of Job and Reasons for Dissatisfaction 18 2.11 Remittance 19 2.12 Exposure to Mass Media 20 2.13 Behaviour of Peers 22 2.14 Consumption of Substances 23 2.15 Exposure to Pornographic Movies 24 2.16 Perception of Sexual Relationships 24 CHAPTER 3: KNOWLEDGE AND UTILIZATION OF REPRODUCIVE HEALTH SERVICES 26-32 3.1 Knowledge of Contraception 26 3.2 Use of Contraception 27 3.3 Perceived Appropriate Age for Marriage and Childbearing 28 3.4 Perception about Ideal Number of Children 29 3.5 Usual Place to visit for Reproductive Health Services 29 3.6 Reasons for Visiting or not Visiting Health Facility 31 3.7 Interaction with Health Workers 32

CHAI	PTER 4: KNOWLEDGE AND PERCEPTION ABOUT STDS AND HIV/AIDS	33-38
4.1	Knowledge of STD and HIV/AIDS	33
4.2	Knowledge of Types of STDs	33
4.3	Source of Information about AIDS	34
4.4	Awareness about Preventive Measures Against AIDS	35
4.5	Level of Knowledge of HIV/AIDS	35
4.6	Perceived Risk of Getting AIDS and Reasons for Not Considering Being at Risk	36
4.7	Ever Experiences of Signs and Symptoms of STDs	37
CHAI	PTER 5: KNOWLEDGE OF AND ATTITUDE TOWARDS	
	CONDOM USE	39-41
5.1	Knowledge of Condom	39
5.2	Attitude towards Condom	39
CHAI	PTER 6: SEXUAL EXPERIENCES AND SEXUAL RISK BEHAVIOR	42-64
6.1	Sexual Experience among Unmarried Workers	42
6.2	Age at First Sexual Intercourse	43
6.3	Characteristics of the First Sex Partner	46
6.4	Reasons for first sexual intercourse	48
6.5	Decision to have First Sexual Intercourse	48
6.6	Sexual Risk Behavior	49
6.7	Results of Multivariate Analysis	57
6.8	Sexual Harassment and Rape	60
6.9	Unwanted Pregnancy and Abortion	62
6.10	Strategies Adopted to Avoid Unwanted Childbirth	63
CHAI	PTER 7: SUMMARY CONCLUSIONS AND DISCUSSION	65-69
7.1	Summary Summary	65
7.2	Discussion	67
7.3	Conclusions	69

References Appendices

List of Table

	of embross A manual sess religions 4-most as embross in the contract Pag	e No
Table 1.1	District wise Distribution of Sampled Factories	4
Table 2.1	Experience of Pregnancy and Birth among Ever Married Respondents	8
Table 2.2	Distribution of Respondents according to Caste/Ethnicity	9
Table 2.3	Literacy Status of the Respondents	10
Table 2.4	Types of Vocational Education Training	10
Table 2.5	Distribution of the Respondents According to their Place of living until	
	12 years of age	11
Table 2.6	Distribution of Respondents According to Number and Time Lag of Visits to	
	Home	12
Table 2.7	Types of Accommodation and Duration of Stay at the Current Residence	13
Table 2.8	Age at First Visit to Kathmandu for Work and First Job for Pay	14
Table 2.9	Types and Duration of Work at the Current Place	15
Table 2.10		17
Table 2.11		18
Table 2.12	Level of Satisfaction and Reason for Dissatisfaction from the Present Job	19
Table 2.13	Financial Help to the Family	20
Table 2.14	Extent of Exposure to Mass Media	21
Table 2.15	Frequency of Watching Movies in Cinema Halls	21
Table 2.16	Use of Substances	23
Table 2.17	Exposure to Porn Movie	24
Table 2.18	Opinion on Sexual Relationship of Close Friends	25
Table 3. 1	Knowledge of Contraception	27
Table 3.2	Ever Use of Contraception among the Sexually Active Respondents	28
Table 3.3	Perceived Appropriate Age of Women for First Childbearing and Marriage	28
Table 3.4	Ideal Number of Children for a Couple	29
Table 3.5	Usual Place to Visit for Reproductive Health Services	29
Table 3.6	Time Required to Reach the Health Facility	30
Table 3.7	Opening Hours and Reasons for Inconvenient	30
Table 3.8	Visited Health Facilities in the Last 12 Months Preceding the Survey and	
	their Types	31
Table 3.9	Reasons for Visiting Health Facility Last Time	31
Table 4.1	Knowledge of types of STDs	34
Table 4.2	Awareness about Preventive Measures against AIDS	35
Table 4.3	Perception on Whether Healthy Looking Person Could Have AIDS Virus and	
m 11 4 4	Extent of Possibility of Death	36
Table 4.4	Perceived Risk of Getting AIDS and Reasons for Not Considering	27
T 11 45	Being at Risk	37
Table 4.5	Ever Experiences of Signs or Symptoms of STDs	37
Table 5.1	Knowledge about Condoms	39
Table 5.2	Attitudes towards Condom	40
Table 5.3	Perception on Condom Use	41
Table 6.1	Lifetime Sexual Experience	44
Table 6.2	Characteristics of first sex partner of unmarried boys and girls	47
Table 6.3	Age of the Sex Partner Reasons for the First Sexual Intercourse	47 48
Table 6.4	Decision to Have First Sexual Intercourse	48
Table 6.5 Table 6.6	Sexual Experience with Non-regular Sex Partner	49
Table 6.7	The percentage reporting a Non-Regular Sexual relationship by Selected	49
Table 0.7	Demographic Characteristics	51

Table 6.8	The Percentage Reporting a Sexual Relationship with non-Regular	
	Sex Partner by Selected Socio-economic Characteristics	52
Table 6.9	The Percentage Reporting a non-regular Sexual Relationships according to	
	Exposure to Mass Media	53
Table 6.10	The Percentage Reporting a Non-Regular Sex Partner According to	
	the Use of Substances	53
Table 6.11	The Percentage Reporting Non-Regular Sexual Relationships according to	
	their Perceptions of Sexual Experiences and Use of Substances	
	of their Friends	54
Table 6.12	Characteristics of Last Non-regular Sex Partner	54
Table 6.13	Reason for Not Using Any Contraception during the Last Sexual Intercourse	
	with Non-regular Sex Partner	56
Table 6.14	Perceived Risk of Contracting HIV/AIDS	56
Table 6.15	Estimated Odds Ratios (and 95% confidence interval) for having had	
	Casual Sex among Young Factory Workers by Selected Predicators	58
Table 6.16	Estimated Odds Ratios (and 95% confidence interval) for having had	
	Casual Sex among Sexually Active Young Factory Workers by Selected	
	Predicators	59
Table 6.17	Sexual Harassment and Rape	61
Table 6.18	Experience of Unwanted Pregnancy and Result of Last Unwanted	
	Pregnancy among sexually active girls	63
	The state of the s	

List of Figure

		Page No
Figure 2.1	Age Distribution of the Respondents	7
Figure 2.2	Marital Status of Respondents	8
Figure 2.3	Source of Information about Job in the Factory	16
Figure 4.1	Source of Information on AIDS	34
Figure 6.1	Sexual Experiences among Unmarried	43
Figure 6.2	Sexual Experienced Respondents by Current Age	45
Figure 6.3	Characteristics of First Sex Partner	46
Figure 6.4a	Partnership Status by Age: Girl	50
Figure 6.4b	Partnership Status by Age: Boys	50

Sexual Risk Behaviour and Risk Perception of Unwanted Pregnancies and Sexually Transmitted Diseases among Young Factory Workers in Nepal

EXECUTIVE SUMMARY

The main objectives of the study were to document and analyse the extent of sexual and reproductive health risk behaviour of young factory workers (14-19 years) and to understand risk perceptions and strategies to avoid the dual risks of unwanted pregnancy and sexually transmitted diseases. The ultimate aim is to identify ways in which the reproductive and sexual health of these young factory workers can be improved most effectively.

The main component of the study comprised a survey of 550 girls and 500 boys engaged in the carpet and garment factories in Kathmandu valley. In-depth case studies of 23 respondents (12 girls and 11 boys) depicting high sexual risk behaviour and victims of rape and abortion were also conducted to supplement the survey findings.

The questionnaire for the survey and the guidelines for the in-depth interviews were designed on the basis of "Illustrative questionnaire for interview-surveys with young people" and "Guidelines for in-depth interviews" developed by WHO. Necessary modifications were made to suit the Nepalese context and the research subjects. A half-day questionnaire finalisation workshop was also organised to invite suggestions from research professionals.

Prior approval for the study was obtained from the Nepal Health Research Council (NHRC) and Ethical Committee of London School of Hygiene & Tropical Medicine (LSHTM). A consent form developed under WHO guidelines was also used to obtain respondents' "Informed Consent" prior to the interviews.

FINDINGS:

Most Young Factory Workers (YFW) are unmarried with a low level of education

Over four-fifths (83%) of the sampled boys and two-thirds of the girls (66%) fall in the age group of 17-19 years. The mean age of the respondents is slightly higher among the boys than girls (17.84 years for boys and 17.14 for girls). Twenty one percent of the boys and 30 percent of the girls are married. Among the currently married respondents, much larger proportions of the girls than boys reported that they are currently staying with their spouse.

Nearly half (40%) of the respondents belong to the Tamang ethnic group who are one of economically disadvantaged groups in the country. The literacy rate of the respondents is 80 percent for boys and 56 percent for girls, which is slightly higher than the national average in the same age group. However, the majority of the literate workers (58%) had received only primary level of education.

YFW are migrants and originate from most districts in Nepal

Among young factory workers covered in the study, 89% are migrants from 45 districts of the country and India. The workers in the carpet factories were usually kept within the factory in order to facilitate work for longer hours and at any time. It was also observed that the accommodation for boys and girls are not segregated by sex in the carpet factories whereas in the garment factories, most of the girls live with their parents or in separate rented rooms.

YFW earn low wages

Two-thirds of the young workers (67%) are involved in weaving/knitting. Friends constitute the most important medium (36%) of getting information about the present job and relatives also assisted them in finding out the present job. The level of monthly income ranges from Rs. 300.0 to Rs 9000.0 (US \$ 4 to US \$121). Slightly more than two-thirds of the young workers (68%) send money to their home. On an average, they usually send Rs. 1568 (\$21) at a time, which is 69 percent of their total income. Negligible proportions of the young workers possess a contract letter for their job.

Exposure to the mass media is high

Young factory workers have regular access to some form of mass media especially radio and television. Among the boys, almost every one watches TV (93%) or tune to their radio sets (93%) and two-third of them read newspapers (65%). About one-third of the young workers (30%) believed that their peers watch pornographic movies.

Substance abuse is high

Over one-half of the young workers (55%) mentioned that their close friends take at least one type of substance. Over one-half of the young workers (58%) are using some type of substance including alcohol.

Awareness about FP Methods is high but correct knowledge is low

Awareness of at least one contraceptive method is almost universal (95%) among the respondents. Surprisingly, a higher proportion of girls than boys had heard of contraceptive methods except condoms. On the contrary, correct knowledge of methods is generally higher among boys than girls. Among the different types of modern methods, condom was the most frequently mentioned method (90%) among boys. However, only 60 percent of the girls have ever seen a condom. No substantial difference was observed regarding the knowledge of condom by marital status and level of education.

Awareness of STDs and HIV/AIDS is very high

A large majority of the young factory workers (70%) have heard about sexually transmitted diseases. Knowledge of STDs is higher among boys (80%) than girls (62%). Most young workers

(84%) have heard about AIDS. Knowledge of AIDS is higher among boys than girls. The major sources of information about AIDS are the radio (68%), followed by television (66%), friends (31%).

Vast majority of YFWs do not perceive themselves at the risk of getting HIV/AIDS

Over four-fifths of the respondents (82%) think that they are not vulnerable to the risk of getting AIDS. Among the respondents who did not perceive themselves to be at risk, over half of them (53%) were virgins while about one-fourth (23%) reported they have only one sex partner.

· Sexual activity among unmarried girls & boys is common

Having girl/boy friends and physical contacts such as holding hands, hugging, kissing, petting and even sexual intercourse are common among the young factory workers. More than one-fourth of the young unmarried factory workers (28%) have already experienced at least one type of sexual activity. Among unmarried respondents, higher proportions of boys (38%) than girls (18%) reported involvement in sexual activities.

In the whole sample the proportion who have experienced sexual intercourse rises from about 15% among 14 year olds to 50% among 19 year olds.

One in every five unmarried boys (20%) and one in every eight unmarried girls (13%) had an experience of sexual intercourse prior to the date of survey. Out of them, one in every twenty had sex with a casual partner in the last 12 months preceding the date of survey.

Among the sexually active, the mean age at first sexual intercourse was 15.8 years for boys and 15.4 years for girls. Over half the girls (51%) and over one-thirds of the boys (34%) had first sexual intercourse before the age of 16 years.

Two-thirds of the girls and about half of the boys reported that their spouse was their first sex partner. About one-fourth of the young workers had their first sexual contact with a friend from the community (20%) or from school/college (4%). Among the unmarried, one in every four boys (28%) and roughly one in ten girls (8%) had their first sexual experiences with a girl/boy friend. About one in five unmarried girls (18%) and one in eight boys had their first sex with a friend from the same factory. Very few unmarried boys had sex with sex workers. Among the unmarried respondents, love and curiosity were the main reasons for their sexual debut.

· Sex with a non-regular partner is common

Among the sexually active, over one in five boys as against one in twenty girls had sex with a non-regular partner in the last 12 months preceding the survey. A higher proportion of unmarried (28%) than married (6%) respondents were involved in sex with a non-regular sex partner. Boys were roughly four times more likely to report a non-regular sex partner than girls (22 % among boys as against 6% among girls). A relatively higher proportion of literate young people (17%) engaged in sex with a non-regular partner than the illiterate ones (8%). Higher income respondents are more likely to have non-regular sex partners compared with low income ones. Respondents staying in mixed sex hostel are more likely to have non-regular sex partners than those living in other types of

accommodation. Interestingly, a slightly lower proportion of those from the Hill Zone of Nepal than from the Terai were found to have engaged in sex with non-regular sex partner. Respondents who are exposed to mass media frequently were more likely to report a non-regular partner than the ones who are rarely or never exposed. Similarly, respondents who watch pornographic movies are more likely to have sex with non-regular partners than those who never watch.

Use of drugs is associated with sexual activity

Substance use by the respondents is also associated with involvement in non-regular sexual relationships. For example, 6 percent of the young workers who use some types of substance are involved in casual sex compared with 3 percent of non-users. Alcohol users are almost two times more likely to have non-regular sex partner than non-users.

Exposure to movies, marital status and caste/ethnicity are significant predictors of risky sexual behaviour

Multivariate analysis shows that, among all the respondents including virgins, only caste/ethnicity for girls and exposure to movies for boys are significant predictors of risky sexual behaviour. While among sexually active respondents, marital status, exposure to movie for boys and caste/ethnicity for girls turned out to be the significant predictors. Among all girls, those from the Hill Zone of Nepal are 82 percent less likely to have a non-regular sex partner than those from the Terai. Among boys, those who are exposed to the pornographic movies are 4.7 times more likely to have experienced sex with a non-regular sex partner compared with those who do not watch any type of movie. When we excluded virgins from the analysis (Model II), unmarried boys are 3.8 times more likely to have casual sex than those who are married. Among sexually active girls, unmarried ones are 35.7 times more likely to be involved in casual sex than their married counterparts. Boys who are exposed to pornographic movies are 5.27 times more likely to have sex with a non-regular partner compared with those who do not watch any movie.

Most non-regular sex partners for both boys and girls were friends from the factory

Friends from the factory were the last non-regular sex partners (NRSP) for all the girls and four-fifths of the boys (83%). However, a sex worker was cited as their last non-regular partner by one-sixth of the boys (17%). Half of the boys (51%) reported condom use during sexual intercourse with their non-regular sex partners.

Use of contraception during last sex with a non-regular partner is low

Only half of the boys reported the use of any method of protection from unwanted pregnancy or STIs during their last sexual intercourse with non-regular sex partner. Over four-fifths of the girls (83%) have not used any methods during sex with their non-regular partner. Despite high level of knowledge, the use of condom is low.

Those involved in non-regular sexual relationships do not considered themselves to be at the risk of contacting from HIV/AIDS

Among the sexually active respondents, a vast majority of the young factory workers (80%) who have non-regular sex partners perceived that they are not at all at the risk of contracting any form of sexually transmitted diseases or HIV/AIDS. The respondents who did not perceive themselves to be at risk cited the reason of infrequent sex and that their partners do not have other partners.

Sexual assaults and rape is not uncommon

One in every ten girls (11%) reported that their friends had been victims of rape. It is surprising to note that 12 out of 550 interviewed girls (2.2%) said that they were raped at least once in their life. Boys from the village and the close relatives known to them had raped the girls in most of the cases.

Many sexually active YFW report symptoms of STDs

One in ten young factory workers reported that they had experienced at least one possible sign and symptom of STDs. The proportion of girls ever having at least one sign and symptom of STDs is high compared with boys (girls 14%, boys 4%).

Exposure to unwanted pregnancy is high

Exposure to unwanted pregnancy is quite high among the young factory girls. One in every four girls (26%) had experienced at least one unwanted pregnancy. One in ten girls (11%) reported that they had aborted their last unwanted pregnancy.

Social networks were important for the young factory workers in reaching decisions regarding the method for termination of pregnancy, to locate a provider and pay the cost for the services. Firstly, the young workers reported to mothers, sister-in-laws, female friends, relatives and partners about their unwanted pregnancy and sought advice from them. Female friends and husbands or boyfriends occasionally forced a young girl to undergo an abortion or to carry the unwanted pregnancy to full term, against the girl's wishes. Economic issues also played central role in the decision making process both in terms of the cost of raising a child and the cost of the abortion procedure. Safe procedures were too expensive for young workers forcing them to seek unskilled providers and undergo dangerous procedures.

CONCLUSIONS:

The study has shown that substantial proportions of young factory workers indulge in risky sexual behaviour. Substance abuse, early sexual experimentation, multiple partners, irregular use of condoms, low use of other contraceptives, unwanted pregnancies, frequent occurrence of unsafe abortions and instances of rape or sexual harassment are common. Despite high-risk behaviour, relatively few young people considered themselves to be at risk of getting STIs or HIV/AIDS or unwanted pregnancy. Knowledge of contraceptive methods seems to be superficial and information regarding the risk of unsafe sex and its consequences is inadequate.

The findings of the study have some important programme implications. Young factory workers are aware of some forms of protection from unwanted pregnancy and STIs and other reproductive risks in general. However, their information is incomplete and they hold a number of misconceptions that are rarely addressed in health programmes. Young people are taking risks partly as a result of such mistaken beliefs. For instance, many believe that village girls or educated young women cannot be infected with STDs and that girls cannot become pregnant from first sexual intercourse. Therefore action is needed to dispel such myths and misconceptions and impart more knowledge of contraception. In particular, the message that every sexual act carries a potential risk of disease and unwanted pregnancy should be clearly imparted.

Since peers were the preferred source of getting information on reproductive and sexual health among the young workers, peer education and outreach can be an effective channel of dissemination reproductive and sexual health information. Reproductive and sexual health information should be provided through appropriate channels. In-depth case studies have shown that fear of disclosure particularly prevents girls from seeking appropriate and timely care for a variety of sexual and reproductive health needs. For example, a major reason for delay in seeking treatment for STIs is fear of disclosure about involvement in sex; abortion is delayed till the second trimester or sought from unqualified providers because of a similar fear. Therefore, it is essential to provide confidential and gender sensitive sexual and reproductive health care services to young working people. Case studies have pointed out difficulties of the young females in refusing sex or insisting on condom use to their partners (either regular or non-regular); sexual harassment including rape; reluctance of seeking appropriate and timely care for sexual and reproductive health needs. Therefore, programmes that focus on building life skills are needed for young working people.

CHAPTER 1

INTRODUCTION

1.1 Background

The adolescent period is a time in which individuals explore and develop their sexuality, gender and sex role. These factors have a profound influence on a young person's current and future health, most directly through exposure to safe or unsafe sexual practices (UNICEF/WHO, 1995). Unprotected premarital sexual relations are taking place at earlier ages giving rise not only to problems of unwanted pregnancy and child bearing, but also to induced abortion in hazardous circumstances, to sexually transmitted disease (STDs) including human immunodeficiency virus (HIV) leading to AIDS. One of the major concerns rose at the International Conference on Population and Development (ICPD) in Cairo in 1994 was how to understand and meet the needs of adolescents for reproductive and sexual health information and services (FCI, 1994). The ICPD emphasised that young people of both sexes are poorly informed about methods of protection against unwanted pregnancy and STDs including HIV/AIDS. The consensus that emerged in Cairo was that there was an urgent need to reduce adolescent's pregnancies and young people's risk in relation to unsafe abortion and STDs, by promoting responsible sexual behaviour including voluntary abstinence.

In Nepal, adolescents (10-19 years of age) comprise more than one fifth (22%) of the total population (CBS/HMG, 1995). Owing to high fertility and a youthful population, the proportion of adolescents in the total population is likely to increase in the coming years. The majority of the adolescent girls are illiterate. Amongst adolescent girls of age 10-14 and 15-19, only 49 % and 39 % are literate compared with 76 % and 71 % amongst boys in the corresponding age groups (NFHS, 1996). A number of socio-cultural factors and traditional beliefs operating in Nepalese societies have contributed to a high level of illiteracy, early age at marriage, early and frequent child bearing and their associated complications, unintended pregnancies and unsafe abortion-related health risks for adolescents (Tamang, 1998). In addition, an apparent trend to a lowering of the age of menarche, an increase in age at marriage, changes in values brought about by increasing urbanisation, exposure to foreign cultures through migration, tourism and the mass media, and a decline in the prevalence of the extended family exacerbate the problems of adolescents (CREHPA, 1996).

Nepal is considered a "low-incidence" country in terms of HIV infections, but recent seroprevalance data suggest that HIV and STIs infections have increased significantly in the last five years. HIV positive cases amongst adolescents are increasing in the country. The Government record adolescents (14-19 years) comprise one sixth (13%) of all the HIV infected cases comprise the adolescents (14-19 age group). The proportion of adolescent girls amongst the total women infected with HIV is about one-third (NCASC/MOH, 2000). The nature and extent of sexual contacts between individuals and their non-regular partners or sex workers (SWs) have important implications for the transmission of HIV in Nepal. Without a cure or vaccine at present, the best way of preventing the spread of the disease is to try to change the sexual behaviour of sexually active persons and prepare virgins for a responsible entry into sexual activity. This may be possible by disseminating information about HIV/AIDS and encouraging the use of

condoms. Knowledge of effective ways to prevent STD/HIV is a prerequisite for behavioural change. Unless change towards safer sexual behaviour including condom use the incidence of HIV infections will continue to increase in the country.

Owing to poverty and unemployment in rural areas, migration of young boys and girls aged 19 years and under, especially to cities located in Kathmandu Valley, is very high. According to UNICEF, approximately 200,000 young people (10-19 years) migrate to urban areas in Nepal. Most of them are absorbed as carpet and garment weavers, in brick factories, construction works and tea stalls. In addition, the rapid growth of formal manufacturing sector in Nepal has led to a large influx of young people from rural areas seeking employment in Kathmandu Valley. Many of these young people arrive in the city unaccompanied by parents or other guardians. Living situations and accommodations vary greatly, but many of these factory workers find lodgings with unmarried persons in "messes" and other group-living arrangements where they may develop experimentation and exploration of sexual activities. Owing to poor parental supervision, they may start sexual experimentation at younger ages and have more exposure to casual relationships than would otherwise the case. However, no information is available on these young workers, who are considered as a potential "high risk group".

1.2 Objectives of the Study

The main objectives of the study were to document and analyse the extent of sexual and reproductive health risk behaviour of young factory workers and to understand risk perceptions and strategies to avoid the dual risks of unwanted pregnancy and sexually transmitted diseases. The ultimate aim is to identify ways in which the reproductive and sexual health of these young factory workers can be improved most effectively.

1.3 Research Questions

To fulfil the given objectives, the study attempted to answer the following research questions:

- i. What proportion of young people are involved in reproductive health risk behaviour?
- ii. Do young boys or girls perceive themselves to be at risk of contracting STDs and unwanted pregnancy (those who are sexually active)? Why and why not?
- iii. How do they deal with the dual risk of unwanted pregnancy and STDs?
- iv. What are the choices facing an unmarried person with an unwanted pregnancy or symptoms of STDs?

1.4 Research Hypothesis

- i. Socio-economic vulnerability leads to higher risk behaviour
- ii. Exposure to commercial media (Cinema, T.V, radio, newspapers and magazines) leads to higher risk behaviour and lower risk perception.
- iii. Lack of knowledge of contraception leads to low utilisation of services, which in turn leads to experience of adverse health outcomes (i.e. unwanted pregnancy and STDs).
- iv. Poor access to service delivery (distance, cost & time) leads to low utilisation services, which in turn leads to reproductive health problems (unwanted pregnancy and STDs).

1.5 Study Design and Methods

1.5.1 Study Area

The study was conducted in Kathmandu valley, which covers three out of 75 districts in the country. According to the Central Carpet Industries Association (CCIA) and the Garment Association of Nepal (GAN), more than 95% are concentrated in the Kathmandu valley. According to the most recent information, 1170 carpet and 195 garment factories operate in the valley (CCIA, 1999 & GAN, 2000). A map of Nepal showing the study area is presented in appendix I.

1.5.2 Study Methods

Both quantitative and qualitative research approaches were adopted in the study. In the quantitative component, structured individual interviews with 1050 young people (500 Boys and 550 Girls) working in the garment and carpet factories were conducted. In the qualitative approach, in-depth case studies were conducted to supplement the findings with the quantitative information

1.5.2.1 Quantitative Study

In the quantitative study, a sample survey was conducted. In the form of face-to-face personal interviews using structured questionnaire with young people (both married and unmarried) aged 14-19 years working in the carpet and garment factories.

1.5.2.2 Sample Size and Sampling Procedures

The sample size was calculated using the estimated proportion of sexually active unmarried young people. Since there was no such information available on young people in the country, the proposed sample size was based on the data from a study of 800 adult men in five border towns of Nepal conducted by Centre for Research on Environment Health & Population Activities (CREHPA, 1998). In the study, about 30% of unmarried young boys and 15 % of unmarried young girls (18-19 years) in the urban areas were reported to be sexually active. On this basis, required sample size is 504 for boys and 550 for girls to show the significant difference (if any) at 95 percent confidence level. The sample size was calculated using EPI info 6 statistical computer software.

A two-stage random sampling technique was implemented in the study. At the first stage, 100 carpet and garment factories were randomly selected. As stated earlier, there were 1365 factories in the study area. An updated list of all carpet and garment factories in the study area prepared by CCIA and GAN was used for the random selection. The available list was not as complete as anticipated in the design stage. Some small carpet and garment factories were not registered with their association. However, it has been learned that unregistered factories are very few in number and there is no reason to believe that behaviour of young people working in small unregistered factories are different from those working in the registered factories. Hence, the updated list is considered a representative of all the carpet and garment factories. Each factory had an equal probability of being selected, regardless of its size. At the second stage, a sampling frame i.e. a list of all the young boys and girls aged 14-19 years was prepared separately for each selected factory. The size of the sample for each selected factory was allocated using probability proportion to size (PPS). Finally, the required number of respondents was randomly selected for the individual interview.

Out of the 100 selected factories, only 79 could be located in the field. The unlocated factories mainly registered only to get membership of their association and thereby gain voting rights in the election of association officials. If fact these factories do not have any workers and are not actually functioning. Five factories did not have the workers aged 14-19 years and therefore they were excluded from the sample. As a result, the required sample of 550 girls and 500 boys were randomly selected from a sampling list of 921 boys and 643 girls aged 14-19 years working in the 74 (52 carpets and 22 garments) factories. Out of the sampled factories, three-fourths (76%) were from Kathmandu and remaining one-fourth from Lalitpur and Bhaktapur district.

Table 1.1 District wise Distribution of Sampled Factories

District	Ca	rpet		the factory ment	T	otal
	N	%	N	%	N	%
Kathmandu	39	75.0	17	77.3	56	75.6
Bhaktapur	7	13.5	2	9.1	9	12.2
Lalitpur	6	11.5	3	13.6	9	12.2
Total	52	100.0	22	100.0	74	100.0

The study has successfully interviewed the targeted sample of 1050 young people (500 boys and 550 girls) of 14-19 years of age working in carpet and garment factories of Kathmandu valley. In the qualitative study, a total of 23 in-depth case studies (11 boys and 12 girls) were conducted among the selected respondents. These respondents were the ones who had high-risk behaviours, had experienced signs and symptoms of STDs, had unsafe abortion and been victims of rape. They were selected purposively.

No body refused to give an interview in the present study. However, the research team had to spend a considerable amount of time to get support from the factory owners and consent from the respondents.

1.6 The Research Instruments

A structured questionnaire was developed for the sample survey. The structures as well as the words of the questionnaires were mainly based on adolescents' sexual behaviour questionnaire developed by World Health Organisation, Geneva. Necessary modification was done to accommodate the study population in the context of Nepalese culture. Terms collected in the previous small-scale study by CREHPA using ethnographic method was used appropriately. Most of the questions of the sample survey were close ended. However, some open-ended questions were also used. Questionnaire was first developed in English and then translated into Nepali.

A half-day workshop was also organised to finalise the questionnaires. Key researchers who were involved in the adolescents' reproductive and sexual health research and the programme implementers participated in the workshop. Discussion at the beginning of the workshop was about the objectives, key research questions, hypothesis to be tested and the methodology of the study. The workshop was very helpful in fine-tuning the research instruments.

A pre-test of the questionnaire was conducted and necessary modifications were done based on the results. A detailed topic guideline was prepared for in-depth interviews. Copies of the questionnaire and topic guidelines are presented in the appendices.

1.7 Recruitment and Training

A team of three male and three female research assistants was hired for the data collection. Young university graduates and experienced interviewers were hired for the fieldwork in order to obtain respondents' confidence and free and frank responses. They were given a one-week intensive training on sampling procedures, administration of structured questionnaires and conduct of in-depth interviews. The training involved class lectures, mock interviews, role-plays and field trials. As the questionnaires had both the open ended and close-ended responses, the enumerators were adequately trained on the administration of specific questions. Prior to deployment in the field they had to pass a short performance test.

Fieldwork was conducted from January to March 2001. For quality control, the interviewers did not conduct more than 3 interviews in a day. In-depth interviews were conducted among the purposively selected respondents. Field notes were taken as often as possible. The expanding of field notes was done in the same day when the interviews were taken. Several visits were made while conducting in-depth interviews.

The principal investigator closely supervised the research assistants in order to control the quality of their work. Spot checks and re-administration of selected questions were carried out for the selected respondents. Weekly meetings were held to discuss the progress and problems faced in the actual fieldwork.

1.8 Data Management and Analysis

The completed questionnaires were entered into the computer immediately after a manual edit and validation. In case of open-ended questions, coding was done after the completion of fieldwork. Computer software dBase IV was used for data entry. Data entry validity check was performed for all the questionnaires. After cleaning, data was transferred into the STATA statistical software package for further processing and analysis. Frequencies cross tables and logistic regression were the main outputs of the analysis.

Information collected through in-depth case studies was edited, translated into English, and analysed using content analysis methods. Five key stages such as familiarisation, identifying a thematic framework, indexing, charting, mapping and interpretation were implemented in the process of analysis.

1.9 Ethical Considerations

Ethical approval from Nepal Health Research Council (the government's ethical clearance body) was obtained for conducting the study. Participants involved in in-depth interviews and sample survey were fully informed about the nature of the study, research objectives and confidentiality of the data. Participants' full consent was obtained regarding their participation in the study.

A consent form (based on WHO Consent Form Guidelines) was used for the in-depth interview and survey respondents. It described the study objectives, nature of the participant's involvement and confidentiality of the data. This was read out to the individuals and their full consent regarding participation in the research was obtained. The consent form was written in simple local language that was understandable to the prospective participants.

1.10 Potential Sources of Bias/Errors

The aim of the study was to explore sensitive topics (e.g. induced abortion, premarital and extra marital sexual activity). It was anticipated that some of the potential respondents might be reluctant to participate in the study especially for in-depth interviews and some may not be willing to provide complete information. Fortunately, none of the respondents refused to give an interview. One problem that arose during the study was the refusal of some of the carpet and garment owners to give access to their factory workers. In order to overcome this, strategies such as a meeting with the factory owners, issuing a letter of cooperation from the Central Association, ethical clearance letter from Nepal Health Research Council, clear explanation about the importance of the study and assurance regarding confidentiality of the responses were adopted. These strategies helped a lot in receiving their co-operation and free and frank responses. In the end no factory owners have refused to give access in their factories. A thorough consideration of the sex and age of the interviewer, training of the interviewer, allocation of adequate time in building rapport with respondents and provision of repeated visits were the added benefits. Since the study explored past sexual behaviours and other events of life that needed recall, some information might be biased due to recall lapse. However, this problem was minimised by using standardised research instruments and highly skilled field researchers.

CHAPTER 2

CHARACTERISTICS OF THE RESPONDENTS

This chapter presents the socio-demographic background of the respondents. Respondents' educational level and occupation, as well as the extent of media exposure and mobility are discussed. Employment history, remittance and living arrangements of the respondents including peers' behaviours are also documented. Respondents' background such as marital status, ethnicity, mobility, educational level, working environment and living arrangement seem to have, in various instances, a considerable influence on reproductive health and sexual behaviours.

2.1 Demographic Characteristics

Among the boys, over four-fifth (83%) fall in the age group of 17-19 years and one-sixth (17%) in the middle adolescent age group (14-16 years). However, one third of the girls fall in the middle adolescent age group. The mean age of the respondents is slightly higher among the boys than girls (17.84 years for boys and 17.14 for girls). About four-fifth of the boys and seven in ten girls are unmarried. A slightly higher proportion of girls than that of boys (29% vs 20 %), are currently married. Less than 1 percent of the respondents reported separation from their spouse. Among the currently married respondents, overwhelmingly large proportions of the women (93%) have reported that they stay with their spouse. However, only one-half of the boys (51%) said that they are currently living with their wives. Among the ever married the majority had given birth or were currently pregnant (Table 2.1)

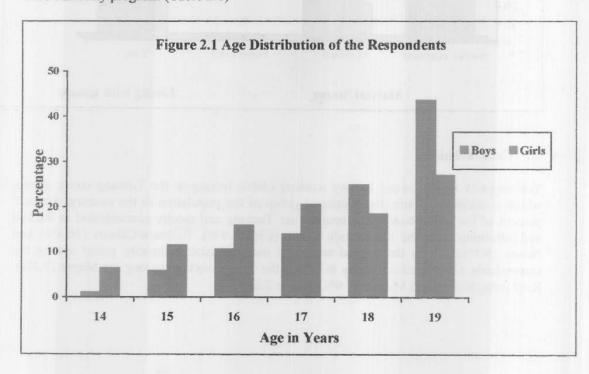
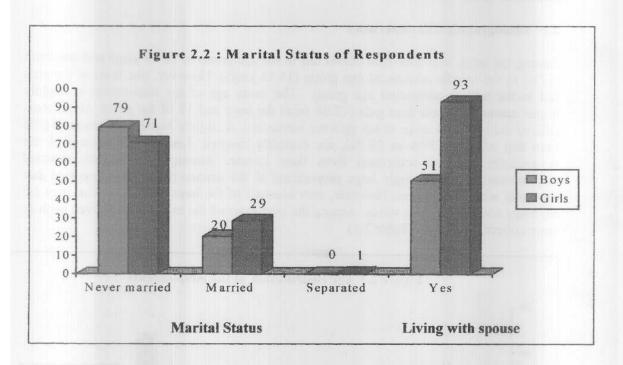


Table 2.1 Experience of Pregnancy and Birth among Ever Married Respondents

Experiences of pregnancy and birth	Boys	Girls	Total
Ever given birth	83.6	63.7	70.7
Currently pregnant	12.7	21.6	18.5
Miscarriage/abortion	1.8	10.8	7.6
Still birth	1.8	3.9	3.2
N	55	102	157
Total Percent	100.0	100.0	100.0



2.2 Caste/Ethnicity

The majority of the young factory workers (40%) belong to the Tamang ethnic group, which is socio-economic disadvantaged group of the population in the country. About 5 percent of the population in the country are Tamang and mostly concentrated in the hill and adjoining with the Kathmandu valley (CBS, 1995). Brhamin/Chhetri (16.4%) and Newar (9.1%) fall in the second and third majority caste/ ethnicity group among the respondents. Other caste/ethnicity to which the young workers belong are Magar (7.1%), Rai/Limbu (6.6%) and Muslim (5.8%) (Table 2.2).

Table 2.2 Distribution of Respondents according to Caste/Ethnicity

Caste/Ethnicity		Boys	Girls	Total
	A SECTION OF THE			behind in the
Tamang	30.0	32.4	46.9	40.0
Brahmin/Chhetri		18.0	14.9	16.4
Newar		4.8	12.9	9.1
Magar		5.8	8.2	7.1
Rai/Limbu		6.0	7.1	6.6
Muslim		12.0	0.2	5.8
Tharu		4.8	1.5	3.1
Damai/Kami/Chama	ar	3.6	1.6	2.6
Others (Praja/Khatv	veha etc.)	10.0	3.6	6.7
N	48.5	500	550	1050
Total Percent		100.0	100.0	100.0

2.3 Literacy Status

The literacy rate of the young factory workers is 80 percent for boys and 56 percent for girls that is slightly higher than the national average of 71 percent and 39 percent in the same age group (CBS, 1995). The majority of the literate workers (58%) had received only primary level of education, while 35 percent had studied up to secondary level and 6 percent had passed SLC. A great disparity can be observed in the education of girls and boys. For example, a higher proportion of the boys (80%) are literate compared with girls (56%). This is evident even at higher-level education (Table 2.3).

It is noteworthy that very few of the young workers (5%) are currently attending school or college. Several socio-cultural and economic factors account for the school dropouts among young factory workers. The main reason that compelled them to discontinue their schooling was a need to earn money (39%) in order to assist their parents. Other reasons cited were lack of interest (13%), influence of friends (13%), inability of parents to afford schooling (9%) and need to assist parents in domestic chores (7%).

An overwhelmingly large proportion of the respondents (95%) reported that they have never attended any types of health education or literacy classes in the factory. The study shows that very few organisations are working with young workers in the factory in order to improve their reproductive health. (Table 2.3)

Table 2.3 Literacy Status of the Respondents

A. Ever Attended School*		Boys	Girls	Total
% never attended school		20.4	50.9	36.4
% of literate		80.0	56.4	67.6
% of Primary level (1-5 class)		56.8	60.4	58.2
% of Secondary (6-10 class)		33.2	37.8	35.1
% of SLC and above		10.0	1.8	6.7
% currently attending school/college		2.8	8.9	5.2
% ever attended health education/ classes in the factory	literacy	3.2	5.8	4.6
B. Main reason for leaving school				
Needed to earn money		48.6	23.6	38.6
Did not want to study		10.3	17.4	13.0
Could not pay school's fee		7.5	11.2	8.9
Family needed help on farm		4.1	12.0	7.3
Didn't like school		8.7	1.9	6.2
Influence of friends		10.0	17.4	13.0
Failure		4.1	4.6	4.3
Married		0.3	4.3	1.8
Others		9.5	18.9	13.3
	tosoma PA	398	259	648
Total Percent		100.0	100.0	100.0

^{*} Total percentage may not be added up to 100 due to different number in the denominator.

2.4 Vocational Training

The ability of people to function effectively in their jobs depends not only on their level of educational attainment but also on additional training that they receive in areas directly related to the work they perform. Over half of the young factory workers (52%) had received carpet-weaving training. The proportion of girls receiving carpet-weaving training is slightly higher than the boys whereas in the case of sewing training, more boys had received such training. (Table 2.4)

Table 2.4 Types of Vocational Education Training

Types of training received	Boys	Girls	Total
None	17.4	37.1	27.7
Carpet weaving	50.6	53.6	52.2
Sewing	23.2	6.0	14.4
Thread cutting	1.6	0.6	1.1
Others	6.6	2.7	4.6
N	500	550	1050
Total Percent	100.0	100.0	100.0

2.5 Mobility and Types of Accommodation

2.5.1 District of Origin

Young factory workers covered in the study are from the 46 districts across the country. Thirteen districts, viz. Makwanpur, Rammechhap, Sarlahi, Sindhupalchowk, Kavrepalanchok, Sindhuli, Dolkha, Jhapa, Morang, Udayapur, Saptari, Kathmandu and Lalitpur account for 70 percent of the total young workers while the remaining 33 districts account for 26 percent. India has supplied 3.5 percent of the young people in the factories. Most of the people came from India are working in the garment factories. Among the districts, Makwanpur is on the top supplying 10.3 percent followed by Rammechhap (7.7%), Saralhi (7.3%), Sindhupalchowk (5.6%), Sindhuli (5.6%), Kaverpalanchok (5.3%) and Jhapa (5.2%) respectively. Tamangs are concentrated in these districts and also close to the Kathmandu valley.

Among the total respondents, only around 11 percent are working in their home district while the remaining (89%) are migrants from other districts of the country and India. Even those working in their home districts have migrated from their home villages.

It is evident from Table 2.5 that more than four-fifth of the young people have grown up in the village environment. Slightly over one-fifth of the girls have reported that they are brought up in the town compared with about one-tenth of the boys covered in the study. This confirms the fact that large majorities of the young people working in the factory are migrants from the rural areas of the country (Table 2.5)

Table 2.5 Distribution of the Respondents According to their Place of living until 12 years of age

Place of living until 12 years	Boys	Girls	Total
Village	90.2	77.8	83.7
Town	9.8	22.1	16.3
N	500	550	1050
Total Percent	100.0	100.0	100.0

The respondents were asked to report the number of visits made to their home in the last 12 months preceding the survey, so as to explore the level of attachment with their family. Table 2.6 shows that about one third of the migrant young people (29%) had not visited their home in the last 12 months preceding the survey. Higher proportions of girls than boys are not visiting their home (36% vs 21%). One of the reasons for less frequent visit to home among girls is that more girls than boys are married and staying with their partners (12% among boys as against 35% among girls).

Slightly more than one-third of young factory workers (35.6%) visited their home only once a year. This indicates that the majority of the young factory workers visit their villages only during major festivals. Out of those who visited home, majority of them (40%) had gone home in the past three months before the date of interview. About one-fourth of the respondents reported that they had visited their home in the last one or two months preceding the date of survey.

Table 2.6 Distribution of Respondents According to Number and Time Lag of Visits to Home

A. Number of visits to home in the last 12 months preceding the survey	Boys	Girls	Total
unus sares is aumili on an abil surde	uts self-mi bes	mayeo esochow	ration pr
One time	32.8	32.4	32.6
Two times	21.4	9.6	15.2
Three times	11.8	4.6	8.0
Four times or more	10.6	3.6	7.0
Not visited at all	21.0	36.0	28.9
Not applicable	2.4	13.8	8.4
Mean number of visits	2.15	1.79	2.00
N	500	550	1050
Total percent	100.0	100.0	100.0
ability and a respective for their home all the			
B. Time lag of last visit to home in the last 12 months preceding the survey	riigeants fiv		
1-2 months ago	25.6	21.0	23.7
3- 4 months ago	30.8	52.9	40.1
5-6 months ago	31.3	19.2	26.2
7-12 months ago	12.3	6.9	10.0
Numerical and the supplementary of the supplementar	383	276	659
Total percent	100.0	100.0	100.0

2.6 Types of Accommodation

As mentioned in the earlier chapter, majorities of the respondents covered in the study were from carpet factories. It was observed that the workers in the carpet factories were usually kept within the factory in order to facilitate work for long hours and at any time. It was also observed that the accommodation for boys and girls is not sex segregated in the carpet factories whereas, in the garment factories, most of the girls live with their parents or in separate rented rooms since the accommodation there is strictly for the boys. In most of the accommodation managed by the factory, the bathing space and toilets are for both the sexes. It was observed that various number of workers (both boys and girls) ranging from 5 to 15, share the rooms for sleeping, depending on the size of the room. It is very unusual to find a carpet factory with separate hostels for boys and girls. There is no separate place to stay for adult workers. Most of the workers are compelled to, or choose to, work late at night, giving more accessibility for the people to get involved in sexual exploitation. An 18 years old boy says:

[&]quot;Whenever the light fails (in the factory) the boys rush to the girls to fondle their breast. I also go but I haven't got a chance to screw them (THOKNA PAYEKO CHAINNA)."

Table 2. 7 shows that about three-fourths of the boys (74%) and two-thirds of the girls (68%) are staying in the mixed sex hostels of the factory. One-fourth of the young workers (25%) are staying with the members of their family either in their own house or in a rented room. More girls than boys are living with their family members (19 % for boys and 30% for girls). Very few proportions of the young workers are living in the single sex hostel.

Table 2.7 Types of Accommodation and Duration of Stay at the Current Residence

2.8	14.4	24	Boys	Girls	Total
A. Place of stay a	t present		van tol stre	or positions of	198415
Alone in rented roo	om		6.6	0.4	3.3
Mixed sex hostel			73.8	68.3	70.9
With family memb	ers in own	house or rented room	19.4	30.2	25.1
Single sex hostel			0.2	1.1 W	0.7
B. Duration of sta	y in the pr	resent residence			
1-3 months	3/23		32.2	23.8	27.8
4-6 months			14.8	14.2	14.5
7-12 months			30.2	19.1	24.4
1-2 years			11.4	12.6	12.0
2 years and more			11.4	30.4	21.3
Mean	15	10.30	7.05	11.17	9.21
N	1.6		500	550	1050
Total Percent			100.0	100.0	100.0

An average duration of stay in the current place is 7.05 for boys and 11.17 for girls. A slightly more than one-fourth of the young factory workers (28%) have been staying in the present residence for less than three months. Similarly, around one-fourth of the workers (24%) mentioned that they had been living in the current place for 7-12 months. The proportion of girls living in the current residence for 2 years and more is higher than for boys (30% vs 11%) indicating lower mobility of the girls (Table 2.7)

2.7 Employment History and Remittances

2.7.1 Age at First Visit to Kathmandu for Work

Although children are engaged in household activities from an early age, their migration to other areas for work requires an attainment of a certain age. The Children Act 1992 states that no child below the age of 14 years shall be engaged as a labourer. The Act however permits employment of children aged 14-16 years labelled as minors only for 6 hours a day between 6.00 a.m. to 6 p.m. and 36 hours per week. The employment of children below the age of 14 years is an offence under the Act and liable to punishment by fine or imprisonment. Table 2.8 clearly shows that despite the legal barriers, around one-third of the girls and more than one-fifth of the boys came to Kathmandu when they were below 14 years of age. A large majority of the young people visited Kathmandu for the first time for work at an age of 14 to 16 years. This indicates the prevalence of child workers in the carpet and garment factories of Nepal some years ago. No such difference has been noticed in the age of first visit to Kathmandu and age of starting work for pay.

This similarity confirms the fact that the young people immediately start working when they arrive in the valley. (Table 2.8)

Table 2.8 Age at First Visit to Kathmandu for Work and First Job for Pay

A. Age at visit to Kathm	andu for work	Boys	Girls	Total
8-13 years		22.0	31.3	26.9
14-16 years		44.8	- 39.8	42.2
17-19 years		30.8	14.5	22.3
Not applicable		2.4	14.4	8.7
B. Age at starting work	for pay			
8-13 years		22.2	37.3	30.1
14-16 years		47.6	40.5	43.9
17-19 years		29.2	17.5	23.1
Don't know		1.0	4.7	2. 9
C. Types of first job for	pay			
Carpet weaving		49.2	65.6	57.8
Sewing clothes		21.6	1.3	11.0
Spinning yarn/make ball		2.6	7.5	5.1
Helper in garment		8.2	2.4	5.1
Plough fields/plant		0.4	5.6	3.1
Washing dishes/wood		0.6	3.5	2.1
Loose checker		0.8	3.1	2.0
Others	0.000	16.6	11.2	13.7
N		500	550	1050
Total Percent		100.0	100.0	100.0

As regards their first job for pay, more than half of the respondents reported that carpet weaving was their first job followed by sewing clothes (11%), spinning yarn and making ball (5%) and helper in the garment (5%) respectively. In terms of gender difference in work, about two-third of the girls reported that carpet weaving was their first job whereas half of the boys were involved in the same job when they started working for pay.

2.7.2 Types of Current Work

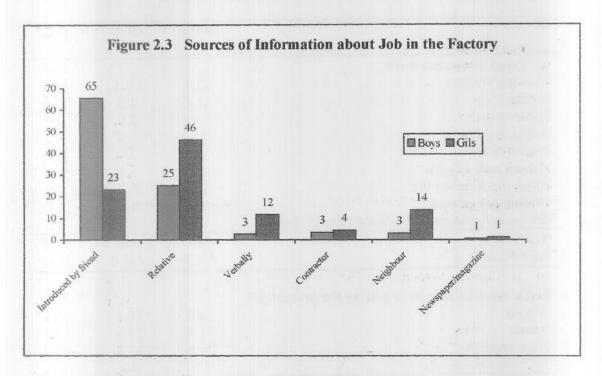
The young workers are involved in various occupations such as weaving/knitting, sewing, spinning, loose checker, ball makers, cutting, colouring, numbering etc. It is apparent from table 2.9 that over three-fourths of the young workers (67%) are involved in weaving/knitting. The proportion of respondents engaged in sewing is 12 percent followed by knitting (11.9%), helper (3.6%) and spinning of yarn (3%) respectively. As regards the gender difference at work, about three fourth of the girls (74%) are engaged in carving whereas only one third of the boys are doing so. As against this, about one-fourth of the boys mentioned that they are involved in sewing compared with 2 percent of the girls. A similar difference is observed in knitting work also. (Table 2.9)

Table 2.9 Types and Duration of Work at the Current Place

Forest and an entire department of the	Boys	Girls	Total
A. Types of present work			
Weaving/knitting	52.6	79.4	66.7
Sewing	23.4	2.0	12.2
Spinning yarn	2.8	2.9	2.9
Helper in garment	5.8	1.6	3.6
Ironing clothes	3.4	2.0	2.7
Making balls of yarn	0.0	2.7	1.4
Loose checking/cutting	1.4	2.7	2.1
Checking in garment	1.6	3.3	2.5
Cutting/colouring/marking/numbering clothes etc	9.0	3.3	6.0
N	500	550	1050
Total Percent	100.0	100.0	100.0
Nobody Friends	20.6	10.7	
Friends Other relatives	51.6 24.8	21.3 63.1	35.7 44.9
Friends Other relatives Contractor/master etc.	51.6 24.8 3.0	21.3 63.1 4.9	44.9 4.0
Friends Other relatives Contractor/master etc. N	51.6 24.8 3.0 500	21.3 63.1 4.9 550	35.7 44.9 4.0 1050
Friends Other relatives Contractor/master etc. N Total Percent	51.6 24.8 3.0	21.3 63.1 4.9	35.7 44.9 4.0 1050
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory	51.6 24.8 3.0 500 100.0	21.3 63.1 4.9 550 100.0	35.7 44.9 4.0 1050 100.0
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months	51.6 24.8 3.0 500 100.0	21.3 63.1 4.9 550 100.0	35.7 44.9 4.0 1050 100.0
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months	51.6 24.8 3.0 500 100.0 48.8 30.8	21.3 63.1 4.9 550 100.0 42.9 20.4	35.7 44.9 4.0 1050 100.0 45.7 25.3
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months 1-2 years	51.6 24.8 3.0 500 100.0 48.8 30.8 11.4	21.3 63.1 4.9 550 100.0 42.9 20.4 16.0	35.7 44.9 4.0 1050 100.0 45.7 25.3 13.8
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months 1-2 years 3-4 years	51.6 24.8 3.0 500 100.0 48.8 30.8 11.4 2.0	21.3 63.1 4.9 550 100.0 42.9 20.4 16.0 5.5	35.7 44.9 4.0 1050 100.0 45.7 25.3 13.8 3.9
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months 1-2 years 3-4 years 4-5 years	51.6 24.8 3.0 500 100.0 48.8 30.8 11.4	21.3 63.1 4.9 550 100.0 42.9 20.4 16.0 5.5 3.8	35.7 44.9 4.0 1050 100.0 45.7 25.3 13.8
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months 1-2 years 3-4 years	51.6 24.8 3.0 500 100.0 48.8 30.8 11.4 2.0	21.3 63.1 4.9 550 100.0 42.9 20.4 16.0 5.5	35.7 44.9 4.0 1050 100.0 45.7 25.3 13.8 3.9
Friends Other relatives Contractor/master etc. N Total Percent C. Duration of work in the present factory Up to 6 months 7-12 months 1-2 years 3-4 years 4-5 years	51.6 24.8 3.0 500 100.0 48.8 30.8 11.4 2.0 1.4	21.3 63.1 4.9 550 100.0 42.9 20.4 16.0 5.5 3.8	35.7 44.9 4.0 1050 100.0 45.7 25.3 13.8 3.9 2.7

2.7.3 Information about Job in the Factory

Young people received information about their current job in the factory through friends, relatives, contractors, neighbours, newspapers etc. Friends constitute the most important medium (43%) of getting information about the present job. Interestingly, only about one-fourth of the girls (23%) entered the factory through their friends compared with about two-third of the boys (65%). Relatives are the main source of information about the current job for girls (46%) while friends are in the case of boys (25%). A higher proportion of girls than boys mentioned that they had received information about the present job through a neighbour. Less than one percent of the young people entered the factory through information published in newspaper or magazine.



2.7.4 Person Who Helped in Getting the Job

Relatives are the main persons to help young people to find jobs in the factory. About forty five percent of the young people cited that their relative helped them to get the present job. Friends assisted over one-third of the young workers (35%) to find a job. Without assistance from others, 15 percent of the respondents found their present job. A marked difference is apparent between boys and girls in the persons helping these young people to find jobs. For example, relatives are the main persons for girls to assist them in finding jobs while in the case of boys, they are their friends (Table 2.9).

2.7.5 Duration of current employment

A majority of the young people had been working in the present factory only for the last 6 months. One-fourth of the respondents mentioned that they were working at the current place for 7-12 months. Under 2 percent of the young people were in the current work place for 5 years or more. This indicates that young people do not stay in the same factory for a long period of time (Table 2.9).

2.7.6 Working Hours

Since the majority of the young people in the carpet factory work on piece basis, they have no fixed working hours. They work from early morning to late at night along with the adult workers. Young workers do the same work as adults. Large majorities of the young people (64%) work 12 or more hours in a day. The proportion of young people working up to 8 hours a day constitutes only 15 percent. Girls are more likely to work for more than 14 hours a day than boys (38% as against 24%). The median hours of work are 12 for boys and 13 for girls (Table 2.10).

Table 2.10 Working Hours

Hours of work	Boys	Girls	Total
Up to 8	15.8	14.5	15.1
9-11	22.4	19.5	20.9
12-13	37.8	28.2	32.8
14 and over	24.0	37.8	31.2
Median	12	13	12
N dol med alle notonie	500	550	1050
Total percent	100.0	100.0	100.0

2.8 Monthly Income

Some factories provide free meals and accommodation to the young workers in addition to salary and wage. There is however, wide variation among in terms of frequency of meal provision. Most of the workers get their wage on piece basis at a fixed rate per square meter of carpet woven. Therefore there is no difference in wage among young and adults. Majority of those working on salary basis are the ones brought by the contractors. The average monthly income of the young workers is Rs. 2405.0 (US \$32.5) and ranges from Rs. 300.0 to Rs 9000.0 (US \$ 4 to 121). Boys earn relatively more than the girls (Rs. 2870 Vs 1952). The proportion of young workers working as apprentices, not getting wage/salary or not aware about their income is 5.3 percent. The proportion of the young people who do not get cash is higher among girls than boys (Table 2.11)

Table 2.11 Level of Income

Monthly income (in Rs)	Boys	Girls	Total
Less than 2200	35.0	57.8	47.0
2201-3000	35.0	27.7	31.1
3001 or more	28.2	6.0	16.6
Doesn't get cash/just started work/doesn't know the amount since parents receive the money	1.8	8.5	5.3
Average (In NRs.)	2869.96	1952.09	2405.49
N	500	550	1050
Total percent	100.0	100.0	100.0

2.9 Job Security

In the present study, job security of the young workers in the factories has been assessed in terms of possession of contract letter, contract period and the membership in any labour organisation. Table 2.12 shows that the young factory workers have very low job security. For example, less than one percent of the workers possess a contract letter for their job.

Out of the 8 young workers who have a contract letter, 7 of them have their contract period for less than a year. Very few young factory workers have become members of any labour organisation.

2.10 Level of Satisfaction of Job and Reasons for Dissatisfaction

A large majority of the young factory workers (72%) mentioned that they were satisfied with the present work. Among those who expressed dissatisfaction with their job, more than two-thirds of the boys and one-half of the girls reported that they are not happy with the job because of the workload and low income. One-tenth of the young workers were dissatisfied with the job because of fear of becoming disfigured especially in their hands. This is seen more in girls than in the boys. Seven percent of the respondents opined that they were not satisfied with the job because of poor hygiene and sanitation conditions in the working place that puts them at the risk of infection. (Table 2.12)

Table 2.12 Level of Satisfaction and Reason for Dissatisfaction from the Present Job

A. Level of satisfaction from the present job	Boys	Girls	Total
Very satisfied	1.6	3.6	2.8
Satisfied	82.4	56.7	69.0
Somewhat satisfied	9.4	23.5	16.8
Not satisfied	6.6	16.2	11.6
N	500	550	1050
Total Total	100.0	100.0	100.0
Work more income less Disease could be contracted	69.7 6.1	48.3 7.9	54.1 7.4
10 10 10 10 10 10 10 10 10 10 10 10 10 1	200 200	Intel Male	201 10
Hands ache and become disfigured	6.0	11.3	9.8
Doesn't like the job	0.0	6.7	4.9
Others (The environment is not good/wants to	18,2	25.8	23.8
learn another job/doesn't get sick leave/the		NEW A	
working place is full of dust	200	2	1025
N	33	89	122
Total	100.0	100.0	100.0

2.11 Remittance

The ability of young people to remit money home depends on whether they are working for themselves or for a contractor. Contractors take an order for a certain volume of work from the owner of the factory and recruit the workers and supervise them to complete the work on time. Therefore, some young workers have to deal with contractor for their working hours, salaries and other benefits. The contractors sometimes recruit young workers by paying advances to the parents, and so they take their wage/salary. In such cases young workers do not know their wages and working hours. They simply work at the command of their contractor. As mentioned earlier most of the young workers work on a piece basis so they have no fixed working hours. However, some are paid on a yearly salary basis, which was mainly decided by the parents of young workers and the contractors. Slightly more than two-thirds of the young factory workers (68%) send money to their homes. On an average, they usually send Rs. 1568 (US\$ 21) at a time, which is 69 percent of their total income. The boys send relatively larger amounts of money to their family than the girls (Rs. 1895 Vs 1232). Regarding the frequency of sending money, around one-third of the respondents mentioned that they send money every month. Onefourths of them (25%) assist their family financially by sending money once every 2-3 months.

Table 2.13 Financial Help to the Family

Financial help to the family		Boys	Girls	Total	
Yes*	2708	71.7	65.0	68.3	
Average amount sent (In NRs.)		1895.36	1232.87	1567.64	
% of income remitted per annum		67.4	71.4	69.2	
Frequency of sending mo	ney home				
Every month		23.6	39.5	31.2	
Once in 2-3 months		39.2	9.8	25.0	
Once in 4 –6 months		30.1	13.2	21.9	
Twice in a year		2.3	22.0	11.8	
Once in a year		4.8	15.6	10.0	
N ESP	0.99	352	327	679	
Total Percent		100.0	100.0	100.0	

^{*} The denominator is 491 for boys and 503 for girls

2.12 Exposure to Mass Media

The mass media play a major role in increasing awareness and knowledge of various aspects of life and is instrumental in bringing about attitudinal changes both at individual and societal level. Mass media expose audiences to different values and role models. Overall, young factory workers have regular access to some form of mass media especially radio and television. Among the surveyed boys, almost every one of them watches TV (93%) or tune to their radio sets (93%) and two-thirds read newspapers (65%). Among the girls, ninety percent watch TV, eighty nine percent tune to their radio sets while only around one-third read newspapers or magazines.

Further, among the boys who are exposed to mass media, about two-thirds (64%) listen to radio daily. One-fourth of the boys watch TV (25%) and four percent read newspaper everyday. (Table 2.14)

Among the girls who are exposed to mass media, half of them (51%) listen to radio and 41 percent watch TV everyday. Very few girls read a newspaper daily. It is interesting to note that a higher proportion of girls than boys watch television (42% Vs 25%) daily.

Table 2.14 Extent of Exposure to Mass Media

Extent of exposure	Radio		Television		Newspaper/ magazine	
	Boys	Girls	Boys	Girls	Boys	Girls
Daily	63.6	51.1	25.2	41.6	3.4	2.1
Most often	15.0	10.4	22.0	13.6	5.8	4.2
Occasionally	12.2	25.1	36.4	35.1	18.0	21.1
Rarely	4.8	2.7	9.4	2.0	37.4	6.2
No exposure/illiterate	4.6	10.7	7.0	7.6	35.4	67.4
N	500	550	500	550	500	550
Total Percent	100.0	100.0	100.0	100.0	100.0	100.0

Half of the young people (51%) go to cinema halls occasionally. Most of the time, friends of the same sex accompany them. For example, more than half of the boys and 43 percent of the girls reported that they go visit cinema hall with a friend of the same sex. Less than three percent of the respondents mentioned that they visit cinema halls with both male and female friends (Table 2.15)

Table 2.15 Frequency of Watching Movies in Cinema Halls

Frequency of watching movies in cinema hall	Boys	Girls	Total
Most often (1-2 times in a week)	11.8	4.2	7.8
Occasionally (1-2 times in a month)	61.6	40.6	50.6
Rarely (1-2 times in a year)	22.2	42.2	32.7
Never	4.4	13.1	9.0
N	500	550	1050
Total Percent	100.0	100.0	100.0
Persons accompanied			
Alone	30.1	0.4	15.3
Female friends	0.6	43.1	21.9
Male friends	59.0	1.1	30.0
Male and female friend	1.7	3.4	2.5
Spouse	4.4	13.6	9.0
Elder brother/sister/parents	2.3	33.9	18.2
Others	1.7	14.2	8.0
N	478	478	956
Total Percent	100.0	100.0	100.0

During in-depth interviews, some boys mentioned that they obtained information related to sex through books especially the erotic ones. Only one girl reported reading erotic and other general novels regularly and thus referring to them for gaining sexual knowledge.

2.13 Behaviour of Peers

Although research on peer's influence on early sexual activity is relatively limited, the attitudes and behaviour of peers is frequently cited as the single most important factor affecting the initiation of intercourse by an adolescent. Jo et al (1986) found that adolescent females who have sexually active best friends are more likely to become sexually active while adolescent males were more likely to select best friends on the basis of sexual experience. Walter et al. (1992) found that students whose friends had intercourse without use of condoms were much more likely to get involved in high risk sexual or drug behaviours. Diclemente (1992) found that sexually active adolescents who perceived peer's norms to support condom use were more likely to use condoms consistently.

In the present study, a few questions were asked about the perceived behaviour of their close friends. Table 2.16 shows the use of any types of substance by the close friends of the respondents. It is apparent from the table that over one-half of the young workers (55%) mentioned that their close friends take at least one type of substance. As anticipated, the proportion of use of substance is higher among the friends of boys than girls (71% vs 41%).

Table 2.16 Use of Substances

Types of Substance	Boys	Girls	Total
A. Smokers			
% of Peers	55.8	33.1	43.9
% of Respondents	20.4	7.8	13.8
B. Chew Tobacco			
% of Peers	62.8	25.5	43.2
% of Respondents	28.8	5.5	16.6
C. Take marijuana			э
% of peers	3.4	2.0	2.7
% of Respondents	0.6	0.9	0.8
D. Drink alcohol			
% of peers	58.6	52.2	55.2
% of Respondents	45.8	50.7	48.3
E. Use any injecting or non-injecting Drugs			28
% of peers	2.2	1.8	2.0
% of Respondents	NA	NA	NA
F. Use at least one of the above			
% of peers	70.6	40.9	55.0
% of Respondents	61.8	54.7	58.1
N	500	550	1050

More than half of the young boys and one-third of the girls have reported that their close friends take cigarette and alcohol. Surprisingly, more than half of the young girls reported alcohol use. However, it should be mentioned here that most of the carpet workers are Tamang and alcohol consumption is culturally accepted in this ethnicity. During in-depth interviews it was observed that majority of the young workers take alcohol (locally made alcohol called "Chhang") in the evening. It should be noted that about two percent of the young workers have the opinion that their peers take drugs, other than tobacco, Marijuna or alcohol.

2.14 Consumption of Substances

Over half of the young factory workers (58%) are using some type of substances including alcohol. Higher proportions of boys than girls have reported such habits. About half of the respondents (48%) reported of drinking alcohol. Roughly one in five boys and one in ten girls smoke cigarettes.

2.15 Exposure to Pornographic Movies

About one-third of the young workers (30%) believed that their peers watch pornographic movies. Relatively, thrice the proportion of boys than that of girls perceived that their close friends go out for pornographic movies (46% Vs 15%).

Table 2.17 Exposure to Porn Movie

Does any close friend watch porn movies?	Boys	Girls	Total
Yes	46.0	14.7	29.6
No	38.4	62.6	51.1
Don't know	15.6	22.7	19.3
N	500	550	1050
Invited to watch porn movies	41.2	5.5	22.5
	(500)	(550)	(1050

^{*} Numbers in the parenthesis is denominator.

2.16 Perception of Sexual Relationships

About one-third of the young factory workers perceived that their close friends have a boy/girl friend. It is interesting to note that comparatively a high proportion of the girls reported this (35% Vs 27%). Roughly one in five respondents reported that they are not aware about such matters.

As regards the sexual activities, one in five young factory workers believed that their unmarried friends also have had sexual intercourse. A slightly high proportion of boys than girls thought that their unmarried close friends are having sexual intercourse (24% Vs 20%).

Table 2.18 Opinion on Sexual Relationship of Close Friends

Does any close friend have a boy/girl friend?	Boys	Girls	Total
Yes	27.4	35.3	31.5
No ·	57.2	42.2	49.3
Don't Know	15.4	22.6	19.1
N	500	550	1050
Total Percent	100.0	100.0	100.0
Perception of unmarried close friends having sexual intercourse.			
Yes	24.4	18.9	21.5
No	53.2	58.0	55.7
Can't say	22.4	23.1	22.8
N	500	550	1050
Total Percent	100.0	100.0	100.0
Perceived number of friends having sex			
Many	8.5	13.0	10.8
Few	30.3	30.7	30.5
Some	20.2	16.4	18.3
None	4.3	3.5	3.9
Don't know	36.7	36.4	36.5
N	234	231	465
Total percent	100.0	100.0	100.0

CHAPTER 3

KNOWLEDGE AND UTILIZATION OF REPRODUCIVE HEALTH SERVICES

Young people tend to be extremely poorly informed regarding their own sexuality and physical well-being, their health and their bodies. Whatever knowledge they have, moreover, is incomplete and confused. Low rates of educational attainment, limited sex education activities, and inhibited attitudes towards sex are jointly responsible for this ignorance (Jejeebhoy, 1998). This chapter discusses the level of knowledge, use of contraception and extent of utilization of other reproductive health information and services.

3.1 Knowledge of Contraception

In the present study, respondents' knowledge of contraception was assessed by asking them the following three questions:

"Do you know of any method or way that one can use to delay or avoid getting pregnant?"

"If yes, please tell me all the methods you know/heard of?"

"(if the respondent mentioned any one method then ask): How is (Name of the method) used, please describe?"

Table 3.1 shows the awareness of specific methods among the young people working in the carpet and garment factories of Nepal. It is evident from the table that the proportion of young workers who could identify at least one contraceptive method is almost universal (95%). It is surprising to observe that more girls than boys had heard of contraceptive methods except condom. However, the correct knowledge of the methods is generally higher among boys than girls.

It is encouraging to note that the condom was the most frequently mentioned method of contraception in this subgroup of the population. In contrast, IUD and Foaming tablets are the least known methods among the respondents. It should be mentioned here that in Nepal, a high awareness of male and female sterilisation is to be expected since, from the very inception of the family planning programme in the country, much emphasis has been given to the permanent methods of contraception. However, only 74 percent of the respondents had heard of male sterilisation and 70 percent had heard of female sterilisation. Out of them, over three-fourths had correct knowledge of these permanent methods. Compared to modern methods, very few respondents have heard about the traditional methods of family planning. One of the reasons for the low reporting of traditional methods is that these methods are not included in the government family planning programme; therefore, it is possible that there may be some underreporting of traditional methods (NFHS, 1996). Moreover, young people may feel reluctant to mention a traditional method since they are not widely accepted.

Although superficial knowledge of contraceptives is generally high among the respondents, correct knowledge on various methods varies widely. For example, while about two-thirds of the respondents (64%) were aware of pills, only about one-half of

them (45%) had the correct knowledge of them. Similar findings are noticed for other contraceptive methods as well. This indicates that, although the young factory workers have heard about the contraceptive methods through different channels, their level of knowledge may not be enough for correct use when needed.

Table 3. 1 Knowledge of Contraception

FP Methods	Hear	Heard of methods		Correct knowledge of the methods		
	Boys	Girls	Total	Boys	Girls	Total
Pills	41.8	83.8	63.8	50.2	43.0	45.2
Condom	92.8	89.3	90.9	98.7	61.1	79.4
DMPA	82.6	91.1	87.1	84.5	67.1	75.0
Foaming Tablet	42.8	43.1	42.9	33.2	8.0	20.0
Norplant	55.6	68.5	62.4	60.8	62.1	61.5
IUD	34.4	52.2	43.7	30.2	22.6	25.5
Female sterilization	61.0	77.6	69.7	83.9	72.1	77.0
Male sterilization	64.4	77.8	74.4	85.4	67.5	75.2
Calendar Method	2.6	20.0	11.7	92.3	71.8	74.0
Withdrawal Method	1.2	12.6	7.1	83.3	85.5	85.5
Heard of at least one method of	94.0	96,4	95.2			
contraception						
Heard of at one modern methods of contraception	94.0	96.4	95.2	esprawa or Appadi mag	ti ework i. mag bas tee	Totale 3
N	500	550	1050	A SHOOL ONE	CO PARTIE E	

3.2 Use of Contraception

In the present study, respondents who had heard of a method of family planning were asked if they had ever used it. While almost all the young factory workers reported knowing at least one method, only 41 percent of boys and 21 percent them (who are sexually active) reported using the same. The married are more likely to use contraception than the unmarried. Among those who have ever used a method, condom is the most popular method among unmarried respondents. Of those who have ever used a family planning method, all unmarried boys and 69 percent of the girls used condoms. One-thirds of the unmarried girls (33%) have used Pills. DMPA is the most popular method (56%) among the married girls followed by condom (17%) and pills (14%). About one in seventeen married girls have used withdrawal method to avoid unintended pregnancy.

Table 3.2 Ever Use of Contraception among the Sexually Active Respondents

Ever use of contraception	Ever n	narried	Unma	Unmarried		tal
	Boys	Girls	Boys	Girls	Boys	Girls
Any method	48.7	28.4	26.8	12.0	40.8	21.2
Pills	10.3	14.3	0.0	33.3	5.9	15.7
Condom	69.0	16.9	100.0	66.7	82.3	20.5
DPMA	17.2	55.8	0.0	0.0	9.8	51.8
Norplant	0.0	1.3	0.0	0.0	0.0	1.2
IUD	0.0	1.3	0.0	0.0	0.0	1.2
Female sterilisation	0.0	1.3	0.0	0.0	0.0	1.2
Calendar method	0.0	2.6	0.0	0.0	0.0	2.4
Withdrawal	3.5	6.6	0.0	0.0	2.0	6.0
N	29	77	22	6	51	83
Total	100.0	100.0	100.0	100.0	100.0	100.0

3.3 Perceived Appropriate Age for Marriage and Childbearing

Young women have little choice about whom and when to marry, whether or not to have sexual relations, and when to bear children. However, the attitudes of young people towards appropriate age for marriage and first childbearing are changing. For example, about one-fourth of the young factory workers (25%) still perceived that less than 20 years of age is the appropriate for first childbearing for a woman.

The young boys working in the factory considered that the ideal age for marriage of girls is 19.78 and for boys 22.32 years which is about two years higher than actual age at marriage. Similar difference has been noticed in the perception of girls regarding ideal age for marriage. (Table 3.3).

Tables 3.3 Perceived Appropriate Age of Women for First Childbearing and Marriage

Appropriate age of women for first childbearing	Boys	Girls	Total
Less than 20 years	24.4	10.7	17.2
21-30 years	73.2	76.9	75.1
31-35 years	0.4	1.3	0.9
Don't know	2.0	11.1	6.8
N	500	550	1050
Total Percent	100.00	100.00	100.00
Mean	22.26	22.86	the state
Std. Dev.	2.34	2.63	
Ideal mean age for marriage (in years)			
For boys	22.32	23.45	
For girls	19.78	20.73	
N	498	504	

3.4 Perception about Ideal Number of Children

Table 3.3 presents the young factory workers' perception about the ideal number of children. As the table shows, small family norm of just two children is becoming popular among the young people. About three-fourth of the factory workers (72%) considered two children as the ideal family size for a couple. However, a substantial proportion of young workers still believed three or more children is an ideal family size (Table 3.4).

Table 3. 4 Ideal Number of Children for a Couple

Ideal number	of child	ren for a	couple	Boys	Girls	Total
1	0.0	100	F	5.0	6.0	5.5
2				58.4	74.2	66.7
3				25.4	13.1	18.9
4 or more				11.2	6.7	8.9
N	6.000	En nov	6.061	500	550	1050
Total percent				100.0	100.0	100.0

3.5 Usual Place to visit for Reproductive Health Services

Around one-third of the factory workers (33%) do not go to any place for reproductive health services. The proportion of girls not visiting any place of reproductive health services is almost three times higher than boys. Hospital is the main place (37%) for getting reproductive health services followed by medical shop (14%). Health post as a usual place for getting services was mentioned by 11 percent of the workers (Table 3.5)

Table 3.5 Usual Place to Visit for Reproductive Health Services

Usual place to visit for RH services	Boys	Girls	Total
Nowhere	17.6	46.2	32.6
Hospital	44.0	30.2	36.8
Health post	12.4	10.2	11.2
Private doctor	1.4	7.1	4.4
Medical shop	23.6	5.8	14.3
Others	1.0	0.6	0.8
N	500	550	1050
Total Percent	100.0	100.0	100.0

Majority of the young workers (61%) mentioned that they required only less than half an hour to reach a health facility. This has been facilitated because of the location of almost all the carpet and garment factories within Kathmandu Valley. About 92 percent of the boys and 69 percent of the girls felt that it is easy to reach the places for reproductive health services. However, one in seven girls (15%) are not aware ease of reaching the service.

Table 3.6 Time Required to Reach the Health Facility

Time required to reach the health facility	Boys	Girls	Total
Less than 15 minutes	40.1	34.5	37.7
15-30 minutes	27.2	16.9	22.9
More than 30 minutes	26.9	32.4	29.2
Don't know	5.8	16.2	10.2
N	412	296	708
Total Percent	100.0	100.0	100.0
How easy or difficult is it to reach the service place?			
Easy	91.8	68.6	82.1
Difficult	4.9	16.6	9.8
Don't know	3.4	14.9	8.2
N A STATE OF THE S	412	296	708
Total Percent	100.0	100.0	100.0

Among the young workers who had ever visited the health facilities, a vast majority of them (83%) mentioned that opening hour is convenient for them. However, roughly one in every 20 young workers (5%) have reported that opening hours are not suitable for people like them. The main reasons for inconveniences are that the facilities are not open when needed (79%) and require long waiting time (21%), etc. It should be noted here that one-fifth of the girls (19%) expressed ignorance about the opening hours of the health facility (Table 3.7).

Table 3.7 Opening Hours and Reasons for Inconvenient

Opening hours	Boys	Girls	Total
Convenient	89.1	74.7	83.1
Inconvenient	3.6	6.4	4.8
Do not know	7.3	18.9	12.1
N	412	296	708
Total percent	100.0	100.0	100.0
Reasons for inconvenience	100	THE SOLD	Charles de la
Not open when needed	93.3	68.4	79.4
Long waiting time/didn't admit when he or she fell	6.7	31.6	20.6
sick			
N	15	19	34
Total	100.0	100.0	100.0

One-third of the young factory workers (34%) had visited a health facility in the past 12 months preceding the date of survey. Among the ones who visited a health facility, 36% visited hospital followed by medial shop/drug store (33%), health post (14%) and private doctor (12%) respectively. A high proportion of boys than girls goes to medical shop (46%, girls 26%). In contrast, more girls consulted a private doctor than boys (girls 18%, boys 4%).

Table 3.8 Visited Health Facilities in the Last 12 Months Preceding the Survey and their Types

Visited any health facility in the la months	st 12 Boys	Girls	Total
TYE DELENGED TO		and the last of th	d and le
Yes	28.0	39.3	33.9
No	72.0	60.7	66.1
N	500	550	105
Total	100.0	100.0	100.0
Hospital	35.0	37.0	36.2
most occasion?	35.0	27.0	26.2
Health post	10.7	15.3	13.5
Private doctor	4.3	18.0	12.6
Medical / drug shop	45.7	24.5	32.9
Faith healer	0.7	1.9	1.4
Others	3.6	3.2	3.4
N	140	216	356
Total	100.0	100.0	100.0

Table 3.9 Reasons for Visiting Health Facility Last Time

Reason for visiting health facility	Boys	Girls	Total
Fever analysis and actions	41.4	22.7	30.0
Headache	15.0	7.4	10.4
Sores on the feet	2.9	2.3	2.5
Cough and cold	4.3	3.7	3.9
To take Depo-Provera / pills	0.0	14.8	9.0
For delivery	0.0	2.3	1.4
Antenatal check up/pregnancy related problem	1.4	22.2	14.0
Boils / sores / typhoid/fracture leg/allergy on hand and feet/pain in the joints of legs	25.0	16.7.	19.9
Stomach ache / diarrhoea	6.4	6.0	6.2
Chest pain	3.6	1.9	2.5
No. 15 Telephone 1	140	216	356
Total	100.0	100.0	100.0

3.6 Reasons for Visiting or not Visiting Health Facility

Majority of the boys (41%) visited health facility for treatment of fever, headache (15%) and other diseases such as boils, sores, typhoid, and allergy (25%). Among the girls, beside fever, the two main reasons were to have antenatal check ups (22%) and to take contraceptives (15%) (Table 3.9). One in nine girls (11%) mentioned that they have not visited a health facility due to lack of money required for the treatment.

3.7 Interaction with Health Workers

Very few young factory workers ever had interaction with health workers on reproductive health issues such as contraception, STIs and unwanted pregnancy. Less than 10 percent of the young boys and girls ever discussed about contraception with health workers. Discussion on sensitive topics like STIs and unwanted pregnancy is found to be even less (less than 5 %) than of contraception.

CHAPTER 4

KNOWLEDGE AND PERCEPTION ABOUT STDS AND HIV/AIDS

Knowledge about STDs and HIV/AIDS is often considered to be associated with the behaviour. However, the link between knowledge and behaviour is not automatic; the former does not always affect the latter (WHO, 1997). For example, a Korean study involving male students and industrial workers found that a large majority of respondents (99% of students, 96% of industrial workers) knew that AIDS could be transmitted by sexual intercourse with an infected person. At the same time, more than 9 out of 10 young men in both groups knew about condoms both as a method of contraception and as a means of preventing STDs. However, of those who were sexually active, only 39 % of industrial workers and 48% of students reported they have used condom in their last sexual intercourse (Rugpao et al. 1995). Similarly, a Guatemala study found that 90% of women and 99% of men had heard of AIDS. Of those surveyed, 88% of males and 37% of the females were familiar with condoms, but the males admitted only to sporadic use of them (Mondez, 1997). In Nigeria, a study showed that in spite of the fact that all the respondents had heard of AIDS and 87% males and 78% females were aware that having sex with stable partner and using condom could prevent contracting from STDs, 44% of males and 17% of females reported having sex with a casual partner without using condom (WHO, 1997). In rural Thailand, 8 out of 10 of the young respondents knew about STD and HIV/AIDS and they considered condom primarily as a means of preventing STDs. However, only 23% of young men who had sex with a prostitute reported that they have used a condom on every occasion (Rugpao et al. 1995).

This chapter examines the extent of knowledge about STDs and AIDS among young factory workers. It also discusses men's perceptions about risk behaviours and preventive practices regarding STDs and AIDS.

4.1 Knowledge of STD and HIV/AIDS

A large majority of the young factory workers (70%) have heard about sexually transmitted diseases. However, the knowledge of STDs is higher among boys than girls. For example, around 80 percent of the boys had heard of STDs as against 62 percent of the girls. No significant difference can be seen in the level of awareness of STDs among the young factory workers.

As regards the knowledge of AIDS, a large majority of the young workers (84%) have heard about AIDS. However, over one in every five girls has never heard of AIDS.

4.2 Knowledge of Types of STDs

AIDS was the most common sexually transmitted disease known to both the boys and girls. Over 90 percent of the boys and girls cited AIDS as a sexually transmitted disease. Over one half of the boys (57%) heard about syphilis as against only one-fifth of the girls (22%). A very few proportion of the young workers (2%) had heard about Gonorrhoea. Around 4 percent of the workers mentioned other diseases such as hysteria, hepatitis and cancer as sexually transmitted diseases.

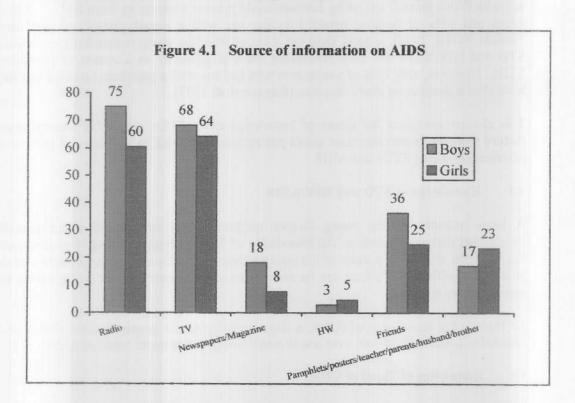
Table 4.1 Knowledge of types s of STDs

Knowledge of Types of STDs *	Boys	Girls	Total
Gonorrhea	1.4	2.6	1.8
Syphilis	56.8	22.2	40.7
AIDS	94.4	91.3	92.9
Hysteria/hepatitis/cancer	3.0	4.4	3.6
N	396	343	739

^{*} Total percentage may exceed 100 due to multiple responses.

4.3 Source of Information about AIDS

Figure 4.1 shows the source of knowledge of AIDS among the young workers who have heard about the disease. The major source of information is the radio (68%), followed by television (66%), friends (31%) and newspapers/magazine (13%) respectively.



4.4 Awareness about Preventive Measures Against AIDS

Among the young factory workers who had heard of AIDS, knowledge about any form of preventive measure was very high. Almost all the boys (96%) and girls (76%) mentioned at least one of such measure. It is discouraging to note that about one in every four girls did not know about the preventive measures against AIDS.

Table 4.2 Awareness about Preventive Measures against AIDS

Awareness about the ways to prevent AIDS	Boys	Girls	Total
Yes	95.6	73.5	84.7
No ACC	0.7	3.5	2.0
Don't know	3.8	23.0	13.2
N - U.N.M.C. STANAN	450	434	884
Total Percent	100.0	100.0	100.0
Safe sex Abstain from sex	27.4 36.3	6.0 28.5	18.3 32.9
Perceived measures of preventing AIDS*			
Use of condom	92.3	70.2	82.9 15.2
Have only one sex partner	10.5	21.6	
Avoid having sex with prostitute/avoid sharing needles	25.0	17.9	22.0
Avoid sleeping/touching/sitting	0.7	3.1	1.7
Don't know	0.7	4.1	2.1
N	430	319	749
Total Percent	100.0	100.0	100.0

^{*} Total percentage may exceed 100 due to multiple responses

92 percent of the boys and 70 percent of the girls mentioned condom as a preventive measure. About one-third of the young workers (33%) mentioned that AIDS is preventable by abstinence from sex. Other preventive measures against AIDS mentioned by the young workers were as such: avoiding sex with sex workers, sharing needles (boys 25%, girls 18%); safe sex (boys 27%, girls 6%) and having only one sex partner (boys 11%, girls 22%).

4.5 Level of Knowledge of HIV/AIDS

Young workers who had heard about AIDS were asked whether a healthy looking person can have the disease, whether AIDS is a fatal disease, and whether their chances of getting AIDS is great, moderate, small or nil. As shown in Table 4.3, about four-fifth of the boys (74%) felt that a healthy looking person can have AIDS, 15 percent did not think so, and 10 percent were unsure about it. Similarly, among the girls, over one-half of them believe that a healthy looking person can have AIDS, 18 percent do not think so and 24 percent are not sure about it. A clear difference has been noticed between boys and girls regarding the level of knowledge of HIV/AIDS.

As mentioned earlier, boys have more knowledge of AIDS than girls. Seventy seven percent of the boys compared to 45 percent of the girls believed that AIDS is almost always fatal. Whereas around one in five boys (19%) and two in ten girls (44%) perceived

that it is fatal only sometimes. Roughly one in every six young workers (16%) thinks that the disease is not fatal. About one in every ten young factory workers (9%) do not know whether AIDS is fatal or not (Table 4.3).

Table 4.3 Perception on Whether Healthy Looking Person Could Have AIDS
Virus and Extent of Possibility of Death

Opinion on whethe can have the AIDS	r a healthy looking person virus	Boys	Girls	Total
Yes	27) U A 11	74.4	58.8	66.7
No		15.1	17.7	16.4
Don't know		10.4	23.5	16.9
N	3.8	450	434	884
Total Percent		100.0	100.0	100.0
Perception on the p person with AIDS	ossibility of death of a			
Almost never die		0.0	2.8	1.4
Sometimes die		19.1	38.0	28.4
Almost always die		77.1	44.5	61.1
Don't know		3.8	14.8	9.2
N	I similar need os 210	450	434	884
Total Percent		100.0	100.0	100.0

4.6 Perceived Risk of Getting AIDS and Reasons for Not Considering Being at Risk

Young workers were asked about their chances of getting AIDS. Over four-fifth of the young factory workers (82%) think that they have no risk of getting AIDS, 7 percent perceive that they have little chance, about 3 percent think they have moderate chance, and about two percent believe that they have a greater chance of getting AIDS. Remaining 7 percent do not know about the risk of getting AIDS.

Among the young factory workers who did not perceive themselves to be at risk, over half of them (53%) perceived the reasons being inexperience of sexual intercourse and about one-fourth of them (23%) opined it is because they have only one sex partner. Around seven percent of the young workers responded that since their partners do not have other partners, they are safe from the risks of infection. However, 5 percent of the boys and less than one percent of the girls were confident about themselves for not being at risk, saying that they had been using condoms every time during sex (Table 4.4)

Table 4.4 Perceived Risk of Getting AIDS and Reasons for Not Considering Being at Risk

Perceived risk of getting AIDS	Boys	Girls	Total
No risk at all	91.6	71.0	81.5
Small	3.1	10.8	6.9
Moderate	2.9	2.3	2.6
Great	1.1	2.5	1.8
Don't know	1.3	13.4	7.2
N	450	434	884
Total Percent	100.0	100.0	100.0
Reasons for not considering being at risk*			
Reasons for not considering being at risk* Infrequent sex	4.2	0.9	2.7
Infrequent sex	4.2 5.4	0.9	2.7
Infrequent sex Use condom all the time			
Infrequent sex Use condom all the time Have only one sex partner	5.4	0.3	3.1
Infrequent sex Use condom all the time Have only one sex partner My partner has only no other partner	5.4 20.2	0.3 25.6	3.1 22.7
Infrequent sex Use condom all the time Have only one sex partner My partner has only no other partner Never had sex	5.4 20.2 6.3	0.3 25.6 7.0	3.1 22.7 6.7
Infrequent sex Use condom all the time Have only one sex partner My partner has only no other partner	5.4 20.2 6.3 59.6	0.3 25.6 7.0 44.8	3.1 22.7 6.7 52.9

^{*} Total percentage may exceed 100 due to multiple responses.

4.7 Ever Experiences of Signs and Symptoms of STDs

Roughly one in ten young factory workers (9%) interviewed during the survey suffered from at least one sign and symptom of STDs. The proportion ever having at least one sign or possible symptom of STDs is higher among girls than boys (girls 14%, boys 4%). Among those who have had signs or possible symptoms of STDs, 7 percent have reported smelly discharge from vagina followed by pain during urination (5%) and sores in genital area (4%) respectively. In the boys, about three percent mentioned pain during urination followed by painful sores in genital area (2%).

Table 4.5 Ever Experiences of Signs or Symptoms of STDs

Ever experiences of signs and symptoms of STDs	Boys	Girls	Total
No experiences of any sign and symptoms of STDs	95.0	72.0	92.0
Pain during urination	2.6	5.3	4.0
Painful ulcers/sores in genital area	1.8	1.8	1.8
Non painful ulcers/sores in genital area	0.6	3.6	2.2
Smelly discharge from vagina	NA	7.3	
Puss discharge from penis	0.0	NA	-
Any types of sign and symptoms of STDs	3.8	13.8	9.1
N	500	550	1050

Out of the young factory workers who had experienced at least one type of sign and symptom, slightly over one-fourth of them (28%) went for treatment. It is discouraging to note that over three-fourth of the girls (76%) did not seek treatment for their STDs related problems. The girls confess that they get embarrassed to go for check up when they get infections. Despite knowing that the infection might be fatal, they would rather die than expose their problems to society. A 16 years old girl replies:

"I am experiencing this white discharge problems since two-three weeks....it harts when I pass urine. I don't go anywhere for treatment....I don't care if I die. I am not afraid...."

Similarly, another 18 years old unmarried girl working in carpet factory who has multiple sex partners says:

"I've been experiencing the white discharge from the vaginal track, which is very smelly. I've not consulted anyone yet. I'm so embarrassed to tell anyone. However, I want to go to see a doctor but I haven't got any money now."

Most of the young workers who had gone for treatment consulted private clinics (10 out of 27). Hospital and health or sub health posts were the second and third most commonly visited place for treatment by these young workers. Most of the girls took oral medicines (they said white tablet) for treatment after consulting either from private clinic or public from health centers.

CHAPTER 5

KNOWLEDGE OF AND ATTITUDE TOWARDS CONDOM USE

Condom, as a method of safer sex practice, has gained greater importance especially at a time when the spread of HIV/AIDS is increasing rapidly. In this context, it is imperative for men and women to be aware of the importance of condom use. This chapter attempts to assess the knowledge of, and attitude of young factory workers towards the use of condom.

5.1 Knowledge of Condom

It is evident that the knowledge of condom is very high among young factory workers. Over 90 percent have ever heard about condom. However, only 60 percent of the girls have ever seen a condom. No substantial difference was observed regarding the knowledge of condom by marital status and level of education.

Table 5.1 Knowledge about Condoms

Knowledge about condoms	Boys	Girls	Total
Yes	92.8	89.3	91.0
No at the second	7.2	10.7	9.1
N	500	550	1050
Total Percent	100.0	100.0	100.0
Ever seen a condom			
Yes	93.1	60.5	76.4
No	6.9	39.5	23.7
N	464	491	955
Total Percent	100.0	100.0	100.0

5.2 Attitude towards Condom

To assess the attitude and perceptions of condom use, a list of statements was read out to every respondent who had ever heard of condom. They could either answer 'agree' or 'disagree' or 'don't know' depending on their attitude towards the statements. In general, the young factory workers responded positively regarding condom use.

A vast majority of the interviewed young workers agreed with statements such as 'condoms is an effective method for preventing pregnancy' (boys 98%, girls 81%) and 'condoms are effective methods for protecting from HIV/AIDS' (boys 93 %, girls 68%). Similarly, the proportion of respondents who perceived condoms to be suitable for a casual relationship was very high (boys 91%, girls 61%). The positive attitudes of the respondents can be inferred as the reason for their disagreement to statements such as 'condoms slip off and disappear inside woman's body (boys 74%, girls 59%).

The young workers views on some issues such as sexual enjoyment and a girl cannot suggest to her partner were diverse. Over one-third of the boys felt that condoms make sex less enjoyable while similar proportion did not agreed with the same. About one third of the girls were not sure about the statement.

Table 5.2 Attitudes towards Condom

Statements	ine you	Boy (n= 50		titts ben	Girls (n=550)			
	Agree	Disagree	Don't know	Total percent	Agree	Disagree	Don't know	Total percent
Condoms are effective method	98.3	0.2	1.5	100.0	80.7	2.4	16.9	100.0
for preventing pregnancy								
A condom can be used more than once	1.9	89.0	9.1	100.0	12.8	48.3	38.9	100.0
A boys can suggest to his girl friend he will use a condom	83.0	7.1	9.9	100.0	59.1	14.5	26.5	100.0
Condoms are effective way of protecting from HIV/AIDS	92.7	0.2	7.1	100.0	68.4	2.7	28.9	100.0
Condoms are suitable for causal relationships	90.5	1.5	8.0	100.0	61.3	6.1	32.6	100.0
Condoms are suitable for steady and loving relationships	74.1	11.0	14.9	100.0	58.7	7.9	33.4	100.0
It would be too embarrassing for someone like me to buy or obtain condoms	44.0	55.2	0.9	100.0	64.2	26.5	9.4	100.0
If a girl suggested using a	32.8	34.9	32.3	100.0	38.9	26.5	34,6	100.0
condom to her partner, it would mean that she doesn't trust him								
Condoms reduces sexual pleasure	36.0	9.9	54.1	100.0	14.5	9.2	76.4	100.0
Condoms can slip off the man and disappear inside woman's body	22.8	53.8	24.1	100.0	31.8	10.0	58.3	100.0
Condoms are an effective way of protecting against STDs	89.2	1.3	9.5	100.0	69.0	2.2	28.7	100.0

More boys than girls had a positive perception on condom use. For example, over two-third of the boys considered that they could ask their partner to use a condom whereas around 15 percent of the girls felt that it is not possible. Similarly, 78 percent of the boys perceived that it is acceptable for a woman to ask her husband to use a condom where as 44 percent of the girls believed that they could not make such a request to her husband. Same perception has been found in the case of acceptance of an unmarried woman to ask her male partner to use a condom. This indicates lower confidence of girls in the decision making process of condom use than the boys (Table 5.3).

Table 5.3 Perception on Condom Use

Statements			Boys				Girls	
*	Yes	No	Don't know	Total percent	Yes	No	Don't know	Total percent
Do you think you can ask your partner to use a condom?	78.8	18.8	2.4	100.0	37.	48.9	13.2	100.0
Do you think it is acceptable for a woman to ask her husband to use a condom?	78.2	18.1	3.7	100.0	34.	44.2	21.0	100.0
Do you think it is acceptable for an unmarried woman to ask her male partner to use a condom?	78.9	14.2	6.9	100.0	45.	29.3	25.1	100.0

CHAPTER 6

SEXUAL EXPERIENCES AND SEXUAL RISK BEHAVIOR

This chapter analyses the sexual behaviour of young factory workers. It attempts to explore the first and most recent sexual experiences of the respondents and the characteristics of their sex partners. The prevalence of casual sex partners among married as well as unmarried young workers and the extent of sexual risk behaviours are also discussed. Finally, sexual exploitation, unwanted pregnancy and its outcomes are examined.

6.1 Sexual Experience among Unmarried Workers

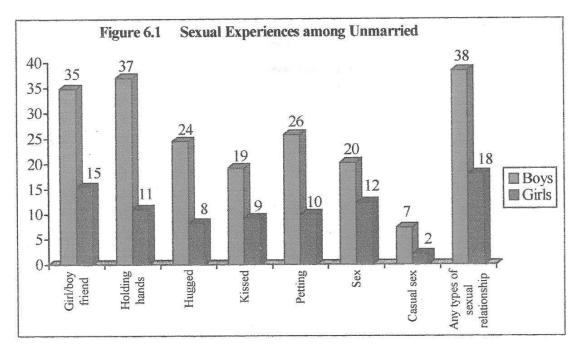
More than one-third of the boys (35%) and one in every seven girls (15%) had friends of the opposite sex. Around one-fifth of the young unmarried factory workers (24%) were involved in holding hands with their girl/boy friends. The proportion of boys who had held hands three times higher than girls (37% vs 11%). Similarly, about one-fourth of the boys (24%) have reported the experience of hugging as against 8 percent of the girls. About one-fifth of the boys (19%) and one-tenth of the girls (9%) experienced kissing. One in every four boys and one in every ten girls cited the experience of petting with their partner. More than one-fourth of the young unmarried factory workers (28%) have already experienced in at least one type of sexual activity. A higher proportion of the boys than girls reported their involvement in such sexual activities. For example, more than one-third of the boys (38%) and about one-fifth of the unmarried girls (18%) had experienced at least one type of sexual act. (Figure 6.1)

In the present study, the following question was asked for married respondents to know the extent of involvement in casual sex.

"Apart from your wife/husband have you had sex with anyone else"

A similar question "Apart from your regular partner have you had sex with anyone else?" to unmarried respondents.

One in every five boys (20.2%) and roughly one in every eight unmarried girls (12%) had an experience of sexual intercourse prior to the date of survey. Out of them, one in every twenty had a casual sex in the last 12 months preceding the date of survey.



6.2 Age at First Sexual Intercourse

There seems little doubt that first sexual intercourse remains an event of immense social and personal significance. The status of virginity, which is still of considerable cultural and legal importance, is technically defined in terms of experience of sexual intercourse. The apparent ease with which individuals are able to recall the first occasion on which coitus takes place also testifies to the fact that it is memorable event. In addition, the first sexual event has clear health implications, since it marks initiation into the sexual act, which if unprotected, and carries a risk of adverse outcomes such as unplanned pregnancy and sexually transmitted infection (Wellings et al.1994)

Table 6.1 shows the lifetime experience of the respondents. It can be seen from the table that over one-third of the young people (37%) are already sexually active. Of them, about one-fourth had sex (23%) for the first time before 14 years of age. The proportion of the respondents having sex before the age of 15 is higher among girls than the boys (27% Vs 18%). Among those who are sexually experienced, the mean age at first sexual intercourse was 15.8 years for boys and 15.4 years for girls. Among sexually active respondents, the mean age at first sexual experience was much higher among married young workers (16.2) years) compared with single ones (14.2). A remarkable difference is also observed in the mean ages (unmarried boys 14.8 years, married 16.6 years & unmarried girls 13.9 years, married girls 15.9 years) at the time of first sexual experience in the case of boys and girls. It was found out from the in-depth interviews that on one hand, the parents of young girls try to prevent them from being friendly with boys; on the other hand, they often go unaccompanied to work on the fields and to fetch firewood in the forest. It is especially in such situations and places that they reported of exposure to sexual opportunities and encounters with possible sex partners either intentionally or unintentionally and develop sexual activities. Below are some examples of the circumstances of their first sexual experience in the villages and early sexual experimentation.

Table 6.1 Lifetime Sexual Experience

Ever had a sexual experience	Boys	Girls	Total
Yes	36.8	37.8	37.3
No	63.2	62.2	62.7
N	500	550	1050
Total	100.0	100.0	100.0
Age at first Intercourse			
Less than 15	17.9	26.9	22.7
15	16.3	23.6	20.2
16	22.8	16.4	19.4
17	19.6	19.7	19.6
18	19.0	9.6	14.0
19	4.5	3.9	4.1
Mean age of first sexual experience			
among sexually active	15.80	15.48	15.63
SD	2.34	1.90	2.12
N	184	208	392

"When I was nine years old, I started helping my parents to collect fodder and used to go to the jungle to collect firewood. Since the time I was 10 years old, I had started going to the jungle to look after the cattle. I had three good friends, all boys. We used to play together in the jungle and ate snacks together. But later on, the other two boys were separated from us. Then one of the boys and I became very close friends and always used to be together in the jungle. During that time, he proposed me for sex. Sometimes, it rained when we were in the jungle and we had to use the same umbrella because I did not have one of my own. During that time, he used to pinch my body, touch and patted me. I liked that..."

- An 18 years old single girl.

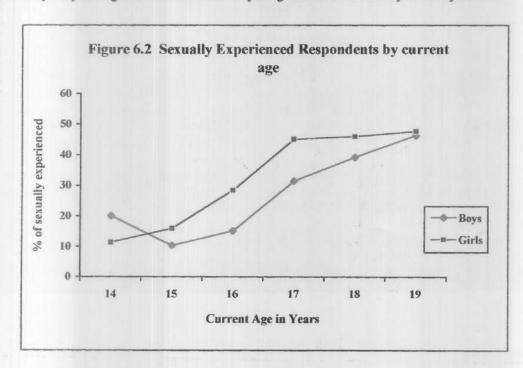
"You know, it is very easy in the villages to go to the jungle and have sex. So, Ashok also asked me to go to the jungle to collect wood. Ashok said, 'We'll go to the jungle to collect wood." I answered, 'I have to go with my friends.' He said,' They will be busy on their own we'll be isolated from them.' So according to the plan, I went to the jungle and met him. He asked me for sex. I couldn't say anything and we went to the thick bushes and had sex..."

- An 15 year old girl

I did it when I was in the fifth standard. I must have been around 13 years then. I really wanted to do it. I used to stroll around alone in the jungle and the fields. One day, when I was in the fields, I saw a girl cutting grass. Thinking that I would get my chance that day, I went near her. I asked her as to how long she had been there and she answered that she had been there for a short while. I went and sat on the edge of the field, she came and sat next to me. We used to study together and were from the same village. I knew her. She was also about 13 years old. I said," I'll also cut the grass". She said, 'No'. I gradually kept my hand on her thigh, she did not say anything, and I became bolder. I started squeezing her thighs. She told me to stop fooling around. I asked her why, I had not stopped squeezing her thighs. She said, "What are you doing? The others will see us". I said, "No one is around and no one is going to see us." I caught her breasts. She tried to remove my hand but I was holding it firmly. I squeezed her nipple. Playing with it, I told her that no one would come to know about it so let's do it. She was wet and said, "Fine let's do it." I laid her down for sometimes but could not ejaculate. After a while, she said, "Stop it." So I got up. I asked her if she enjoyed it, she said, "Yes". I told her that we would do it the next day also. She said, "No, we will do it some other time." Later, I did it 3 or 4 times with her. I took leave and left. She came later after cutting some more grasses.

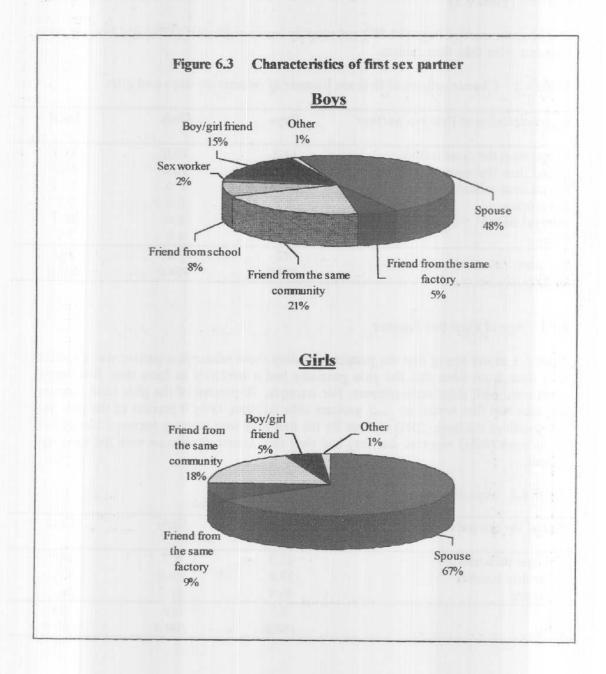
- A 19 years old boy, married, primary level education

It is clear from the figure 6.2 that sexual experience is increased with age except in age 14 for boys. By the age 19 about half of the young workers are already sexually active.



6.3 Characteristics of the First Sex Partner

Two-thirds of the girls and about one-half of the boys reported that their spouse was their first sex partner. About one-fourth of the young workers had their first sexual contact with a friend from the community (20%) or from school/college (4%). Seven percent of the sexually experienced workers mentioned that a friend from the same factory was their first sex partner. One in every ten workers had their first sexual experience with girl/boy friends. Sex workers were the first sex partners for 2 percent of the boys (Figure 6.3).



About half of the unmarried workers had their first sexual experience with a friend from the community (49%) but this proportion is much higher for girls than boys. About one in twenty boys (17%) had their first sexual experience with a friend from school.

It should be mentioned here that one in every four unmarried boys (28%) and roughly one in ten girls (8%) had their first sexual experience with a girl/boy friend. About one in five unmarried girl (18%) and one in eight boys had their first sexual experience with a friend from the same factory. Very few unmarried boys (4%) had sex with a sex worker for the first time (Table 6.2).

One in seven married boys (14.7%) and roughly one in eight girls (12%) had first sex with someone other than their spouse.

Table 6.2 Characteristics of first sex partner of unmarried boys and girls

Characteristics of first sex partner	Boys	Girls	Total
Friend from the same factory	12.2	18.0	14.4
Friend from the same community	36.6	70.0	49.2
Friend from school	17.1	0.0	10.6
Sex worker	3.7	0.0	2.3
Boy/girl friend	28.1	8.0	20.5
Other	2.4	4.0	3.0
N	82	50	132
Total	100.0	100.0	100.0

6.3.1 Age of First Sex Partner

Table 6.3 shows age of first sex partner excluding those whose first partner was a spouse. It is clear from table that the girls generally had a tendency to have their first sexual experience with elder male partners. For example, 70 percent of the girls have reported that they had first sexual act with partners elder to them. Only 9 percent of the girls and one-fourth of the boys (26%) had sex for the first time with younger partners. Nearly half of the boys (46%) reported that they had their first sexual experience with the same age partner.

Table 6.3 Age of the Sex Partner

Age of the sex partner	Boys	Girls	Total
Younger than him/her	25.7	8.7	18.7
Older than him/her	27.8	69.6	45.2
Same age	46.4	21.7	36.1
N	97	69	166
Total	100.0	100.0	100.0

6.4 Reasons for first sexual intercourse

Among married respondents those whose first sex partner was not a spouse, around half (47%) opined that love was the main reason for their first sexual intercourse. Higher proportions of girls than boys mention that love was the reason. In contrast, more boys than girls reported that curiosity or opportunity as the reason for having sex for the first time. Surprisingly, among the married girls, one in five (21%) reported that the pressure from their partner was the reason for indulging in sexual intercourse for the first time (Table 6.4).

Among the unmarried respondents, love and curiosity were the main reasons for their first sexual intercourse. Around half of the married girls perceived that love was the main reason whereas for boys, curiosity was the main reason for their first sexual intercourse. Pressure from the partner as a reason to have first sexual intercourse was reported by over one-fourth of the unmarried girls (28%). One in seven boys had sex for the first time because they didn't want to miss the opportunity (Table 6.4).

Table 6.4 Reasons for the First Sexual Intercourse

Reasons for the first sex	Married excluding those whose first sex partner was a spouse			Unmarried		
	Boys	Girls	Total	Boys	Girls	Total
Love	26.7	63.7	47.1	24.4	46.0	32.6
Curiosity	26.7	00	11.8	45.1	8.0	31.1
Getting carried away	0.0	0.0	0.0	3.7	6.0	4.5
Pressure from friend	6.7	5.3	5.9	3.7	8.0	5.3
Pressure from partner	0.0	21.1	11.8	2.4	28.0	12.1
Not to be left out	33.3	5.3	17.7	17.1	2.0	11.4
Natural follow-on in relationship	6.7	5.3	5.9	2.4	0.0	1.5
Being drunk	0.0	0.0	0.0	1.2	2.0	1.5
N	15	19	34	82	50	132
Total	100.0	100.0	100.0	100.0	100.0	100.0

6.5 Decision to have First Sexual Intercourse

In the present study, the respondents were asked to report as to how they decided to have sexual intercourse for the first time. Of them whose first partner was not a spouse, about two-thirds of the young factory workers (65%) mentioned that both the partners had an agreement to have the first sexual intercourse. About one in seven workers reported that their partner persuaded him or her. It is surprising to observe that about half of the girls (49%) said that their partner forced them to have first sexual intercourse.

Table 6.5 Decision to Have First Sexual Intercourse

Decision for first sexual intercourse	Boys	Girls	Total
I persuaded	8.3	0.0	4.8
Partner persuaded	15.4	17.4	15.1
Partner forced	3.9	33.3	15.6
Both willing	75.3	49.3	64.5
N	97	69	166
Total	100.0	100.0	100.0

6.6 Sexual Risk Behaviour

6.6.1 Sexual Experiences with Non-regular Sex Partner

About one in twenty of all young factory workers including virgins had sex with non-regular sex partner in the last 12 months preceding the survey. More boys than girls had done so. A higher proportion of ever married than unmarried were involved in a non-marital sexual relationship in the 12 months preceding the survey (4.6% among unmarried vs 6% among married)

Among sexually active, over one in five boys (22%) and one in twenty girls (6%) had sex with a non-regular sex partner in the past 12 months preceding the date of survey. Among sexually active unmarried, 35% of the boys and 16% of the girls had sex with non-regular sex partner in last 12 months.

Table 6.6 Sexual Experience with Non-regular Sex Partner

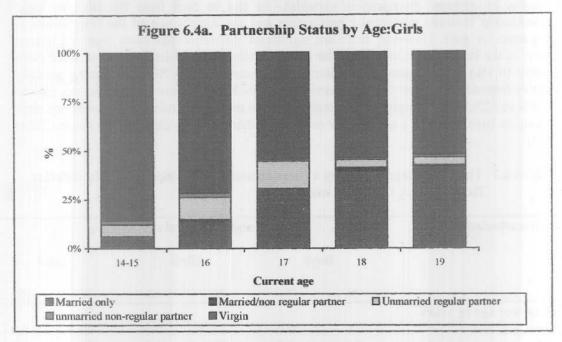
Casual sex in the last 12 mont preceding the survey	hs Boys	Girls	Total
All respondents (including virgin)	8.2	2.2	5.1
	(500)	(550)	(1050)
Among sexually active (all)	22.3	5.8	13.5
	(184)	(208)	(392)
Among sexually active (unmarried)	35.4	16.0	28.0
	(82)	(50)	(132)
Among married	11.8	2.5	6.2
	(102)	(158)	(260)

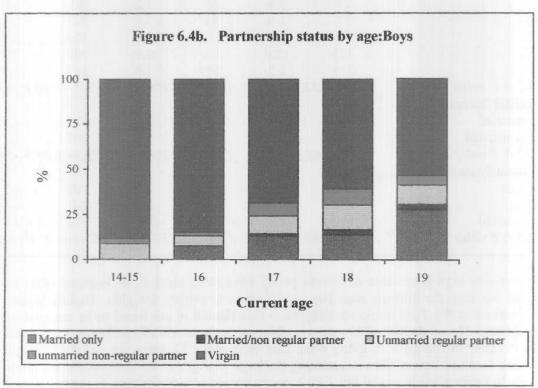
Note: Denominators in parenthesis.

6.6.2 Sexual Partnership Status

An effort is made in Figure 6.4 to summarise the pattern of sexual relationships at different ages for boys and girls separately. All the respondents have been classified into five main groups: married only; both married and in another non-regular partnership; unmarried but regular partner; unmarried with non-regular partner and virgin. The majority of the young workers classify themselves as married or as virgins. Very few girls than boys reported to have sexual activity with regular partner. As expected the regular partner among boys is increase with age while as among girls it decreases. The detail

about the regular partnership is not known since this study is not explored in that area. Similar observation has been noticed in case of having non-regular sex partner.





6.6.3 Differentials in Non-regular sex Partnerships

Table 6.7 presents the percentage reporting a non-regular sexual relationship in the last 12 months by selected demographic variables. As can be seen from the table no clear relationship between non-regular partnership and the current age of the respondents is apparent for girls. However, there are significant difference has been observed among boys in the involvement in non-regular sexual relations. Surprisingly, married were more likely (6.1%) to have non-regular partners than unmarried (4.7%). But among sexually active respondents unmarried than married are more likely to have non-regular sex partner (35% vs 12%). Surprisingly, among males who are currently staying with spouse are more likely to have sex with a non-regular sex partner than living in alone or are single (Table 6.7)

Table 6.7 The percentage reporting a Non-Regular Sexual relationship by Selected Demographic Characteristics

Characteristics	Non-regular sexual relationship						
	В	Boys		Girls		tal	
	N	%	N	0/0	N	0/0	
Current age in years			artists let the			53/	
14	5	0.0	35	0.0	40	0.0	
15	29	3.4	63	3.2	92	3.3	
16	53	1.9	88	3.4	141	2.8	
17	70	8.6	113	0.9	183	3.8	
18	125	12.0	102	2.9	227	7.9	
19	218	8.3	149	2.0	367	5.7	
Ch2 & P value	Ch2 = 6.5	3 P<0.05	Ch2=2.88 P>0.05		Chi2 =9.03 P<0.0.		
Marital Status							
Unmarried	397	7.3	390	2.1	787	4.7	
Ever married	103	11.6	160	2.5	263	6.1	
Ch2 & P value	Chi=2.0	5 P>0.05	Ch2 = 0.1	7 P>0.05	Ch2 = 0.78 P > 0.0.		
Currently staying with							
Spouse	51	17.7	146	2.1	197	6.1	
Alone	50	6.0	11	9.1	61	6.6	
Unmarried	399	7.3	393	2.0	792	4.7	
Ch2 & P value	Ch2 = 6.8	3 P<0.05	Ch2 = 2.5	2 P>0.05	Ch2=0.9	7 P>0.05	

A relatively high proportion of literate young boys (8%) seem to be engaged (3%) in casual sex than the illiterate ones but no difference is evident for girls. Slightly higher proportions of the Terai origin ethnicity/caste than the hill in are found to be engaged in casual sex. No substantial difference was observed in the extent of involvement in casual sex in terms of the place of living when they were under 12 years old and the types of current accommodation. However, among the boys who grown up in the town are more likely to be involved in casual sex. Those young people who are staying in the mixed sex accommodation than other are almost two times more likely to be involved in casual sex. This is particularly true among the boys. No much difference was observed in the involvement in non-regular sexual relationship according to the length of employment of

the workers. However, a slightly higher proportion of workers who earned more than Rs 2500 (\$34) per month are involved in sex with non-regular sex partner than their low income counterparts. (Table 6.8)

Table 6.8 The Percentage Reporting a Sexual Relationship with non-Regular Sex Partner by Selected Socio-economic Characteristics

Characteristics		Non-regular sex partner					
	В	Boys		irls	Total		
	N	%	N	%	N	%	
Literacy	25	1,0	The Man				
Illiterate	100	4.0	245	2.5	345	2.9	
Primary/NFE	228	7.9	198	2.0	426	5.2	
Secondary or above	172	11.1	107	1.9	279	7.5	
Ch2 & P value	Chi2=4.	22 P < .05	Chi2=0.1	6 P> 0.05	Chi2 = 6.9	91 P < 0.05	
Caste/ethnicity							
Hill Origin	335	7.9	495	1.6	830	4.3	
Terai origin	165	8.4	55	7.3	220	7.7	
Ch2 & P value	Ch2 = 0.	03 P> .85		12 P<0.05	Chi2 = 4.16 P < 0.0		
Place of living until 12 years of old							
Village	451	7.8	428	2.3	879	5.1	
Town	49	12.2	122	1.6	171	4.7	
Ch2 & P value	Chi2 =1	.18 > 0.05	Chi2= 0.2	22 P > 0.05	Chi2=0.0	6 P>0.05	
Types of accommodation							
Mixed sex hostels	369	9.2	376	2.4	745	5.7	
Other	131	5.3	174	1.7	305	3.3	
Ch2 & P value		92 P>0.05	Ch2=0.25 P>0.05		Chi2=2.81 P>0.03		
Length of employment							
Less than a year	142	9.2	169	3.0	311	5.8	
1-2 years	155	6.5	148	3.4	303	4.9	
Above two years	203	8.9	233	0.9	436	4.6	
Ch2 & P value		02 P>0.05		9 P>0.05	Chi2 =0.5		
S DIST THE	Ser Jan	The same	one.	SECTION AND ADDRESS.	il madis	NIA 10 32.0	
Level of monthly							
income							
Less than 2500	278	7.9	437	2.1	715	4.3	
2500 or more	222	8.6	113	2.7	335	6.6	
Ch2 & P value	Ch2=0.0	07 P > 0.05	Ch2 = 0.1	5 P>0.05	Chi2=2.3	87P > 0.05	

The relationship between exposure to mass media (T.V, Radio, Newspapers) and sexual behaviour is not well understood because of difficulties in establishing causal links in cross sectional studies. However, a few studies have indicated that exposure to media have leads to higher risk behaviour. For example, Nepalese study has shown that young men who watch TV regularly are 51 percent more likely to be involved in risky sexual

behaviour than those rarely watch TV (CREHPA, 1998). The present study further confirms the earlier findings. As shown in the Table 6.9, young workers who are exposed to mass media frequently were two times more likely to have had a non-regular sex partners in the last year than the ones who are rarely or are never exposed. Young workers who watched pornographic movie are 5 times more likely to be engaged in casual sex than their counterparts who never watch movies.

Table 6.9 The Percentage Reporting a non-regular Sexual Relationships according to Exposure to Mass Media

Characteristics	Non-regular sex partner						
	В	oys	Gi	irls	To	otal	
	N	%	N	0/0	N	0/0	
Exposure to the Mass Media		11.9.5	001			#URS/III	
(TV, Radio, Newspaper)							
Often	424	9.4	441	2.0	865	5.7	
Rare/Never	76	1.3	109	2.7	185	2.2	
Ch2 & P value	Ch2=5.6	64 P < 0.05	Ch2 = 0.2	1 P>0.05	Ch2=3.9	$0 P \le 0.05$	
Exposure to Movie							
Pornographic	165	15.8	10	10.0	175	15.4	
General	202	5.5	236	1.3	438	3.2	
Neither	133	3.0	304	2.6	437	2.8	
Ch2 & P value	Ch2=19.	32 P < .05	Ch2=4.0	7 P<0.05	Ch2 = 47	.31P< .05	

Young male workers who use any type of substances (tobacco, smoking, and marijuana) are more prone to involvement non-regular sexual relationships than nonusers (6.7% vs 2.7%). Boys who use alcohol are more almost twice as likely to have sex with non-regular sex partner than non-drinkers. Those relationships are not found among girls.

Table 6.10 The Percentage Reporting a Non-Regular Sex Partner According to the Use of Substances

Characteristics	Non-regular sex partner					
	Boys		Gi	Girls		tal
	N	%	N	%	N	%
Use of any type of substances						
Yes	309	11.0	301	2.3	610	6.7
No	191	3.7	249	2.0	440	2.7
Ch2 & P value	Chi2=8.44	P<0.05	Ch2=0.0	6 P>0.05	Ch2 = 8.50	P < 0.05
Use of Alcohol						
Yes	229	12.2	279	2.2	508	6.7
No	271	4.8	271	2.2	542	3.5
Ch2 & P value	Ch2=9.10	P = 0.05	Ch2 = 0.0	2 P>0.05	Ch2=5.56	$6P \le 0.05$

Peer's behaviour seems to have a strong association with the behaviour of young people. It is apparent from Table 6.11 that the proportion of young workers who reported non-regular sex partners in the last year is higher among the ones whose close friends use some type of substance (8%) than the counterpart non-users (1.0%). Interestingly, about one-fifth of the boys (18%) who believe that their unmarried close friends have had sex with non-regular partners compared with 3 percent who do not think so.

Table 6.11 The Percentage Reporting Non-Regular Sexual Relationships according to their Perceptions of Sexual Experiences and Use of Substances of their Friends

	Non-regular sex partner Boys Girls Total						
Peers behaviour	В	Boys		rls	10	otal	
	N	%	N	%	N	%	
Use of any type of		CLASS TANGETS					
substances by peers							
Yes	353	10.2	225	4.9	578	8.1	
No	147	3.4	325	0.3	472	1.3	
Ch2 & P value	Chi2=6.2	87 P<0.05	Ch2=13.07 P<0.05		Ch2 = 25.52 P < 0.0		
Unmarried friends had se	x						
Yes	122	18.0	104	5.8	226	12.4	
No	266	3.4	319	0.6	585	1.9	
Can't say	112	8.9	127	3.2	239	5.9	
Ch2 & P value	Chi2=23.9	95 P<0.05	Ch2=10.4	4 P<0.05	Ch2=37.	98 P<0.05	

6.6.4 Characteristics of the Last Non-Regular Sex Partner

Friends from the factory were the last non-regular sex partners (NRSP) for all the girls and over four-fifths of the boys (83%). However, a sex worker as their last non-regular sex partner was cited by one-fourth of the boys (17%). One-fifth of the unmarried boys (20%) reported about SW as their last non-regular sex partner as against 8 percent of the married ones.

Table 6.12 Characteristics of Last Non-regular Sex Partner

Characteristics of last non regular sex partner	Boys	Girls	Total
Friend from the factory	82.9	100.0	86.8
Sex worker	17.1	0.0	13.2
N constant with	41	12	53
Total	100.0	100.0	100.0

6.6.5 Use of Contraception during Last Sex with Non-regular Partner

Only one-half of the boys (51%) reported the use of any method of protection from unwanted pregnancy or sexually transmitted infection during sexual intercourse with their non-regular sex partners. It is encouraging to note that almost all the boys (21 out of 22 who have used a method) have used a condom in their last non-regular sex counter. However, it is discouraging to note that 83 percent of the girls have not used any contraception in their last non-regular sexual contact. Comparatively, a higher proportion of married boys than girls have used contraception. In contrast, more unmarried girls than married have done so.

The following are some examples about the attitude of young boys about the use of condom with non-regular partners.

Using condoms is no fun. When you are doing it without a condom, bang into her vagina, then you can enjoy. A condom does not let our liquids meet and give that sticky reaction. As for the girls, it does not affect their enjoyment whether the guy is wearing a condom or not.

- A 19-year-old, married boy with fifth standard of education

No I didn't. How was I to know at that time that I could get to do it (Sexual intercourse) and how to get one (condom) instantly

- A 18 year old, unmarried boy with sixth standard of education

Only once in a while I use it. I don't use condom while doing (sexual intercourse) with the girls from the villages. I use it while doing with the BHALU (sex workers) from Ratnapark.

A 17 year old, unmarried boy with eighth standard of education

No, that time we went in a hurry. I did not have one neither did my friends. That girl should have had but she did not have it either. Since I was in a hurry I did not go to buy condoms. My friends also had sex without it. I too did it (without it)...

- A 18 year old unmarried

6.6.6 Reasons for not Using Any Contraception

Use of condom (other contraception) is low during their last sexual intercourse with non-regular sex partner despite the fact that the level of knowledge about condom is very high. The main reason cited by the young factory workers for not using condom during their last sexual intercourse with non-regular sex partner was that they were unaware of the same (60% among girls and 40 % among boys). The other reasons for not using condoms as mentioned by these workers are 'partner objected' and 'unavailability of the method when needed'. For example, an 18-year-old boy who was brought up in the city and spent some time as a tourist guide relates the following statement:

"My friend also had sex without it. I too did without it. The white women know a lot. They have the knowledge about AIDS and Bhirengi (Syphilis). They protect themselves from contracting such disease. If they contract a 'ROG" (disease) they get immediate treatment. I don't think she had such disease. How can a person who has all the knowledge get infected? That is why I had no fear of contracting a disease. On the top of them, why would I think of "ROG" (disease) when I had got a chance, you have to give "JHYAPAI"

Table 6.13 Reason for Not Using Any Contraception during the Last Sexual Intercourse with Non-regular Sex Partner

Reasons for not using	Boys	Girls	Total
Don't know	40.0	60.0	46.7
Partner objected	20.0	10.0	16.7
Method not available	30.0	0.0	20.0
Others	10.0	30.0	16.7
N	20	10	30
Total	100	100	100

6.6.7 Risk Perception Among Those Who Have Had a Non-regular Partner

There is no significant difference found in perceived risk of contacting from HIV/AIDS among those who did and didn't have a non-regular sex partner. For example, around 80 percent of the young factory workers who have non-regular sex partners perceived that they are not at all at the risk of contacting any forms of sexually transmitted diseases or HIV/AIDS compared with 76 percent of them who didn't have such relationships. A small proportion of the boys (5%) and the girls (8%) opined that they were at small risk of contracting HIV/AIDS. Five out of 12 girls are not sure about themselves.

Table 6. 14 Perceived Risk of Contracting HIV/AIDS

Perceived risk of getting HIV/AIDS	Among those who had non- regular sex partner			nose who d egular sex		
	Boys	Girls	Total	Boys	Girls	Total
No risk at all	90.2	41.7	79.2	86.6	67.7	76.3
Small	4.9	8.3	5.6	5.2	13.7	9.8
Moderate	2.4	0.0	1.9	5.2	3.7	4.4
Great	2.4	8.3	3.8	2.2	1.2	1.7
Don't know	0.0	41.7	9.4	0.7	13.7	7.8
N	41	12	53	134	161	295
Total Percent	100.0	100.0	100.0	100.0	100.0	100.0

Among the respondents who did not perceive themselves to be at risk or at small risk, onethird opined it was because of infrequent sex. However, 30 percent of boys were confident about their not being at risk, saying that they had been using condoms during sex. Onefifth of the young workers responded that, since their partners do not have other partners, they are safe from the risks of infection. The statement is an example of why young people do not think themselves to be at the risk of contracting STIs.

"No, not at all. I have done only with village girls without using a condom. They have not slept with too many. They can't contract AIDS not Bhiringe (Syphilis). That is why there is no possibility of getting a disease. Having sex with a city girl might bring an infection. I have not done with a city girl without using condoms. There is no question of being infected when I am using a condom. Before I do, I spread their legs to check if they have marks scars. A girl without scars can't be infected".

- An 19 year old single with primary education and having multiple partners

6.7 Results of Multivariate Analysis

Multivariate analysis has been carried out to identify the factors associated with the likelihood of being involved in risky sexual behaviour (sex with a non-regular partner) among the young factory workers. The logistic regression technique was used to estimate the likelihood of sexual relations with a non-regular (or casual) partner. This statistical technique is appropriate for analysing dichotomous dependent variables.

The dependent variable in the multivariate analysis is 'whether the young workers were involved in casual sex'. In the present study, casual sex has been defined for married respondents as "any non-marital relationship during last 12 months preceding the date of survey". For unmarried respondents, it is defined as "any sexual relationship other than with a regular partner". Two models were employed for logistic regression analysis. Model I includes all the respondents (500 boys and 550 girls) but Model II is based on sexually active respondents only (184 boys and 208 girls). The results are presented in table 6.15 and 6.16 respectively.

The independent variables considered in the models include socio-demographic characteristics of the respondents (age, marital status, literacy, caste/ethnicity, place of living until 12 years of age, current type of accommodation, length of employment, monthly income), their exposure to media, exposure to movie, use of substances and use of alcohol.

The results of Model I (which includes the virgin respondents) show that only caste/ethnicity for girls and exposure to movies for boys are significant predictors of risky sexual activity. In model II (among sexually active respondents), marital status, exposure to movie for both boys and girls and caste/ethnicity for girls are significant predictors. For females, in both models, those from the Hill Zone of Nepal are less likely to report non-regular sex than those from the Terai. Among boys, those who watch pornographic movies are about five times more likely to have had a non-regular sex partner compared with those who do not watch any types of movie. When we excluded virgins from the analysis (Model II), unmarried boys are 3.8 times more likely to have casual sex than married ones. Among sexually active girls, the unmarried are 35.7 times more likely to be involved in casual sex compared with their married counterparts.

Table 6.15 Estimated Odds Ratios (and 95% confidence interval) for having had Casual Sex among Young Factory Workers by Selected Predicators

Selected Predictors		Boys	Girls	
	OR	95% CI	OR	95% CI
A. Current Age in years				
15 (ref)	1.00			
16	0.53	.03-9.45	2.05	.31-13.70
17	3.17	.33-30.85	0.48	.04-6.31
18	3.70	.42-32.25	1.99	.26-15.35
10	2.34	.26-20.88	1.66	.20-13.54
B. Marital Status				
Ever married (ref)	1.00			
Unmarried	0.73	.32-1.64	0.97	.22-4.21
C. Literacy	0	.52 1.01	0.0	
Illiterate (ref)	1.00			
Primary/NFE	1.55	.48-4.97	0.75	.17-3.19
Secondary or higher level	1.75	.51-6.01	0.69	.10-4.58
D.Caste/ethnicity	1.75	.51-0.01	0.09	10-4.50
Tarai origin (ref)	1.00			
Hill origin	1.04	.46-2.35	0.18	.0471*
	1.04	.40-2.33	0.18	.U-1/1
E. Place of living until 12 years	1.00			
Village (ref)	1.83	66 5 11	0.04	0 15 4 49
Town	1.63	.66-5.11	0.84	0.15-4.48
F. Types of accommodation				
Other (ref)	1.00	71 400	0.04	0.10.2.04
Mixed sex hostel	2.21	.71-6.89	0.86	0.19-3.84
G. Length of employment	1.00			
Above 2 years (ref)	1.00			
1-2 years	1.07	.42-2.69	4.65	0.85-25.33
Less than a year	1.82	.68-4.87	3.29	0.53-20.29
H. Level of Monthly income (in Rs.)	2X 0			
2500 or more (ref)	1.00			O OF STREET,
Less than 2500	0.96	.45-2.04	0.66	0.14-3.02
I. Exposure to the mass media(TV,				
Radio, Newspapers)				
Rare/never (ref)	1.00			
Often	4.12	.53-31.98	0.87	0.19-3.85
J. Exposure to Movie				
Neither (ref)	1.00			
General	1.65	.49-5.47	0.33	0.07-1.52
Pornographic	4.78	1.55-14.74*	2.19	0.15-31.1
K. Use of any substance				
No (ref)	1.00			
Yes	1.77	.54-5.75	2.41	0.22-25.80
L. Use of alcohol				
No (ref)	1.00			
Yes	1.69	.63-4.57	0.45	0.04-4.74
Number of observation	W. W. T.	500		550
LR chi2 (18)		44.23		14.95
Prob > chi2				
	0.005 0.1559		0.665 0.1294	

^{*} P<0.05

Table 6.16 Estimated Odds Ratios (and 95% confidence interval) for having had
Casual Sex among Sexually Active Young Factory Workers by Selected
Predicators

Selected Predictors			Boys	(Girls
		OR	95% CI	OR	95% CI
A. Curremt Age in years		AND THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUMN TO THE		STATE OF SELECT	A Secretary
15 (ref)		1.00		1.00	
16		0.47	.01-14.70	1.48	.12-17.99
17		1.61	.09-27.50	0.09	.00-2.74
18		1.41	.09-21.96	1.38	.11-16.11
19		1.13	.07-17.75	1.23	.10-14.64
B. Marital Status		1.13	.07-17.73	1.43	.10-14.04
Ever married (ref)		1.00		1.00	
Unmarried (ref)		3.85	1.59-9.28*	35.68	3.73-340.9
C. Literacy		3.03	1.59-9.28"	33.08	3./3-340.9
Illiterate (ref)		1.00		1.00	
			50 7 16	1.00	14.4.02
Primary/NFE		1.97	.52-7.46	0.84	.14-4.93
Secondary or higher level		1.23	.29-5.21	0.69	.06-7.65
D. Caste/ethnicity		1.00		1.00	
Tarai origin (ref)		1.00	10.2.00	1.00	00 504
Hill origin		1.06	.40-2.80	0.06	.0059*
E. Place of living until 12 yea	rs	1 00			
Village (ref)		1.00	10 6 0 1	1.00	770 10 7
Town		1.69	.48-6.01	1.04	0.10-10.7
F. Types of accommodation					
Other (ref)		1.00	110	1.00	an to enur to
Mixed sex hostel		2.27	.62-8.28	0.99	.12-8.25
G. Length of employment		7 22			
Above 2 years (ref)		1.00	40.00	1.00	The Assess La
1-2 years		1.56	.52-4.68	1.71	.20-14.53
Less than a year		2.41	.74-7.89	2.77	.27-28.23
H. Level of Monthly income ((In Rs.)				Acres district
2500 or more (ref)		1.00		1.00	
Less than 2500		0.88	.36-2.13	0.15	.01-1.22
L Exposure to the mass medi	a(TV,				
Radio, Newspapers)					
Rare/never (ref)		1.00		1.00	
Often		6,48	.72-58.27	0.37	.05-2.38
J. Exposure to Movie					
Neither (ref)		1.00		1.00	
General		2.57	.67-9.82	0.07	.00-0.69*
Pornographic		5.27	1.49-18.52*	1.24	.04-30.88
K. Use of any substance					
No (ref)		1.00		1.00	
Yes		1.62	.40-6.58	1.51	.05-44.79
L. Use of alcohol					
No (ref)		1.00		1.00	
Yes		1.00	.29-3.37	0.47	.01-13.73
V		360.1	184	301	208
LR chi2 (18)		3	35.72	3	2.14
Prob > chi2			.0077		0211
Pseudo R2			1830		3530
* P<0.05	1000	U.	1000	0,	3330

6.8 Sexual Harassment and Rape

Rape has been broadly classified into two categories. Stranger rape is defined as non-consensual sex between two individuals who are not familiar with each other before the sexual act. Acquaintance rape has been defined as non-consensual sex between two individuals who were familiar with each other before the act. Date rape is considered a subset of acquaintance rape where non-consensual sex occurs between two people who are in a romantic relationship. Various research studies have demonstrated that most rape victims fall into the age group of 16-25 years, and most victims know their perpetrator prior to the rape (Rickert et all, 1998)

Although sexual harassment and rape are highly sensitive topics for research, an effort has been made to explore the extent of sexual harassment and rape among the young factory workers, especially girls, in the present study. Sexual harassment here refers to such activities as touching on the breast or some other parts of the body or a forceful sexual intercourse by a stranger, relative or an older person, teacher, owner, friend without the girl's will. In the present study, the following questions were asked to understand extent of sexual harassment.

"Young boys/girls are sometimes touched on the breast or some other parts of the body when they do not want it, by a stranger, relative or an older person. Has this ever happened to your friends?"

"Young boys/girls are sometimes touched on the breast or some other parts of the body when they do not want it, by a stranger, relative or an older person. Has this ever happened to you?"

"Young boys/girls are sometimes forced to have sexual intercourse against their will by a stranger, relative or an older person, teacher, owner etc. Has this ever happened to your friends?"

"Young boys/girls are sometimes forced to have sexual intercourse against their will by a stranger, relative or an older person, teacher, owner etc. Has this ever happened to you?"

Table 6.17 shows that over one-fourth of the girls (28%) reported that their friends had experiences of sexual harassment. Roughly one in ten boys (8%) also heard that such activity happened to their women friend. When it comes to personal experiences of sexual harassment, one in ten girls (11%) admit of having had such experiences.

One in every nine girls (11%) reported that their friends had been victims of rape. It is surprising to note that 12 out of 550 girls interviewed (2.2%) said that they were raped at least once in their life. Boys from the village and the close relatives known to them had raped the girls in most of the cases. The following is an excerpt from a case history of a 15-year-old girl who had been raped twice in her life. She is presently working in the factory and also attends school.

Table 6.17 Sexual Harassment and Rape

	Boys	Girls	Total
Aware of friends who have experience of sexual	bul over the	and real	EXPERIMENT OF
harassment and the second seco	8.0	27.6	18.3
Respondent has experience of sexual harassment	1.4	10.9	6.4
Aware of friends who have been raped	2.4	11.3	7.0
Respondent has been raped	0.2	2.2	1.2
Name and the second of the sec	500	550	1050

It was a holiday in the school and I was working. His 'taam' was just in front of ours. While my friends and I were playing riddles (GAUN KHANE KATHA) and having singing competitions, that boy used to talk in between (BICHAMA PYACH PYACH BOLTHYO). Whenever I asked for water to my friends, he used to get it for me. He used to come to our house making excuses of listening to 'cassettes'. He asked me all sorts of questions like where is your house, where do you study etc. He also brought foodstuffs, chewing gums. 'chatpatee' and ice-candies (Baraf) for me during the hot seasons. When I went to watch films he would come there, he followed me everywhere. One day we planned to go out with friends. His sister was also among us. The brother came along with his sister (Gestures towards the park) We came out here. There were two married girls without kids and we were one or two immarried girls. (Does not speak for sometime, looks down). After that all of us took group photographs; then clicked in pairs. I too took a picture with that boy. We had taken a normal photograph but later he changed it and developed it with (indicates with her hands) this big hig between us. He said that I had to have sex with him or else he would disgrace me by sticking those pictures everywhere on the walls. A few days later, he came and told me his sister was calling me and he told me to go to their room. I went there to find that his sister was not there. I was turning back and getting down the stairs, when he pulled me and made me sit. I asked him "what are you doing". He said, "keep quet, fulfil my desires". He raped me forcefully right down on the stairs. "I was wearing a check shirt and skirt so it was easy for him to pull up my clothes."

I lost my senses for 15/20 minutes. When I did come back to my senses I felt as if I'd fallen down from somewhere. That boy was walking up and down. He started asking, "what happened, how was it" when I got angry, he said," don't show your price, I've fulfilled my job." It was drizzling and had been nearly 7-30. Everyone was busy cooking food at his or her own rooms. After that I got sick for a week or so. My lower abdomen ached and I bled that day and for two days more. That boy told (about it) to the people in the factory. I believe no one thinks good of me in the factory.

The girls who become victims of rape neither report to someone or in concerned authority with the fear of getting condemned. The below statement given by an 18-year-old girl further clarifies this.

[&]quot;I did not scream. I cried quietly. I was scared of what my neighbour would think of me if they heard me"

An 18 year old unmarried girl working in the carpet factory narrates her story as follows:

"Once I was forced to have sex by an adult from the same village. It happened to me two months ago, just before coming to Kathmandu. He is called 'KAMI KANCHHA' as he belonged to the lowest cast. I know him since my childhood. He used to tease my friends and me since I was very young. It happened in the jungle. As always, I was busy collecting fodder that day. I saw him standing in front of me. He first asked me for sex bur I ignored him. Then he tried to persuade me but I did not agree with him. He said: 'MA SANGA GARALA' (do it with me), but I said,' no'. After that he caught me so tightly, however, I fought with him to escape, but I couldn't. I tried to hit him with the shackle but he snatched it and tore my clothes. Then he knocked me on the ground and gave a big slap on my cheek and did it to me. I felt very bad, I cried for a long time. I did not tell this event to anybody. I thought if people heard about it, they would call me a slut. You know, villagers never understand such kind of circumstances, they just blame the girl".

Similar findings have been found in other research studies also. For example, 13 studies conducted in various countries have documented the extent of sexual coercion. In most of the studies, 5-15 percent of young females report a forced or coerced sexual experience. In several studies, the figure is higher: 21 percent among adolescents in Botswana, 20 percent secondary school students in Lima, Cusco and lquitos, Peru, and 41 percent among young females attending urban night study centres in Lima. Among females working in an export zone in Korea, 9 percent report that sexual debut had been forced by factory supervisors or colleagues (WHO, 2000)

6.9 Unwanted Pregnancy and Abortion

Unwanted and unplanned pregnancies are common in both developing and developed countries. Each day one million women conceive producing 50 percent unplanned and 25 percent unwanted pregnancies. An unwanted pregnancy may lead to an induced abortion, which in the case of an inexperienced or ashamed adolescent is likely to take place later in the pregnancy and involve risk to life, health and future fertility. If the procedure is illegal, it will probably be performed under unsafe conditions increasing the risk even further (WHO 1993). Although in many places birth rates are dropping amongst young women as they marry later, sexual relations prior to marriage are on the rise. This poses several health risks for young women, including the dangers of unsafe abortion. (UNFPA, 1999). Abortion was a commonly reported strategy to deal with an unwanted pregnancy amongst adolescents (UNICEF/WHO, 1995). Surveys in developing countries showed that between 20 % and 60 % of the pregnancies and births to women under age 20 are mistimed or unwanted (WHO, 1997). No past research and documentation has been done in Nepal addressing to the problem of unintended pregnancies among young people in Nepal. However, a small study conducted by CREHPA in a rural district revealed that unintended pregnancy amongst the age group of 15-24 is as high as 39 percent. Although abortion is legally restricted in Nepal, 'backstreet' abortions are common. Unqualified persons perform most of the induced abortion cases with crude and primitive methods. Information on the prevalence of induced abortion is not available. A hospital-based study conducted by CREHPA has shown that out of all the patients admitted at the hospitals due to induced abortion complications one-fifth were under the age of 19. (Tamang et al. 1998).

In this study, an effort has been made to explore the extent of unwanted pregnancy and steps taken to deal with unwanted pregnancies among young factory workers in Nepal. An experience of unwanted pregnancy is quite high among young factory girls. Among the sexually active young workers, one in every four girls (26%) had at least one experience of unwanted pregnancy. One in nine girls (11%) reported that they had an abortion of their last unwanted pregnancy. A private nursing home was the most popular place for obtaining abortion services for these working girls. However, it was found out during indepth interviews that the young girls first consulted with their female friends, relatives and partner before taking a decision to terminate their unwanted pregnancy. There are several cases where the girls try to abort themselves or seek abortion services from unqualified personals. Out of the seven girls who reported of having aborted in their last unwanted pregnancy, six of them experienced complications as a result of abortion.

In a study of male industrial workers and students in the Republic of Korea, 21% of the sexually experienced workers and 11% of the sexually experienced students reported having caused pregnancy in a female sex partner. Most of the pregnancies were aborted. In a survey of students in Nigeria, 13% of the males reported having caused pregnancy, of which 70% were aborted. Nine percent of the females surveyed reported being pregnant at least once, with 77% ending in abortion. (WHO, 1997).

Table 6.18 Experience of Unwanted Pregnancy and Result of Last Unwanted Pregnancy among sexually active girls

Experienced unwanted pregnancy	N	Girls
Yes	54	26.0
Never	153	74.1
Total	208	100.0
Currently pregnant	21	38.9
Currently pregnant Abortion		38.9 11.1
		* * * *
Miscarriage	on olderis rebit 3 barriotts	5.6
Miscarriage Still birth		

6.10 Strategies Adopted to Avoid Unwanted Childbirth

During in-depth interviews with young factory workers, information regarding the people consulted for advice and reasons for taking the decision to avoid unwanted pregnancy was gathered. Social networks were important for the young factory workers to make decision regarding the method to adopt for terminations of pregnancy, to locate a provider and pay the cost of services. Firstly, the young workers told mothers, sister-in-laws, female friends, relatives and partners about their unwanted pregnancy and sought advice from them. They also requested them to pay for the services. Female friends and husbands or boyfriends occasionally forced a young girl to undergo an abortion or conversely to carry unwanted pregnancy to full term, contrary to what the girl actually wanted. Economic issues also played central role in the decision-making process both in terms of the cost of raising a

child and the cost of the abortion procedure. Safe procedures were too expensive for young workers forcing them to seek unskilled providers and undergo dangerous procedures. It was found that the girls who decided to terminate their pregnancy were unable to carry out their decision either because of lack of financial resources to access clandestine abortion service or because of the failure of their attempts to an self-induced abortion. They had unsuccessfully sought an abortion or tried to self-induce using oral medicine (tablet or liquid) or violent physical exercise. Mamta Lama (False name), an 18 year old illiterate, mother of one child is a good example of this.

"My husband had returned after staying out for 6 months. During that period, we were using condoms but irregularly. My periods stopped and I started getting the same symptoms. I told my husband that I did not want the baby at all. Before that, I told my sister-in-law. I went with her for a urine-check and my pregnancy was confirmed. I asked for the charge of curate the foems, they said, 'RS. 3000'. My Bhaum told me that there are some medicines to get rid of the baby and she would get it for me. She said that she had also used it and it had worked for her and since I was only I month pregnant I could try that out. She also said that I could drink rose water (GULAF KO PANI) in the meantime. I tried once but it didn't work. Then she brought the medicine, I don't remember the name but there were two. I was supposed to take one on the first day and the other on the next day at the same time. I did it but nothing happened. I even took the contraceptive tablet that my 'Bhaqui' was taking for a week but it did not work. In the end, I had to tell my husband. He told me not to tell my family members about it especially his mother. He went and talked to a doctor in a clinic where he had some contact. We went there. They did not use any painkillers. The lady doctor told me to lie down; it took less than 15 minutes and was quite painful. The doctor gave me a medicine to take in case I had bleeding and told me to visit her after a week but I did not go there again. They charged RS: 2000".

Another example of an unsuccessful attempt of pregnancy termination, an experience of an 18 years old illiterate mother of two children, abandoned by husband (Pema Tamang).

"It's father left me when I was one month pregnant, I even tried to get rid of it by taking liquid medicine and some tablets "YO PHAYENE BHANERA 150 KO JHOL DABAI RA TABLET KHAYEKO. A friend of mine, (the girl who was sitting there that time) got some medicine for me "ALE BACHA JANCHHA BHANYO". I paid Rs. 100 to her. When it didn't work out, I went to the medical shop in Sallaghari and got a liquid medicine for Rs. 150. I took it regularly but it didn't work. When I went there again to complain, they said that they couldn't get rid of it unless I gave them Rs. 4000. The women around told me to carry heavy things to get rid of it since it was only one month old. It also didn't work out. I didn't have much money so I decided to keep the baby"

CHAPTER 7

SUMMARY CONCLUSIONS AND DISCUSSION

7.1 Summary

The main objectives of the study were to document and analyse the extent of sexual and reproductive health risk behaviour of young factory workers (14-19 years) and to understand risk perceptions and strategies to avoid the dual risks of unwanted pregnancy and sexually transmitted diseases. The ultimate aim is to identify ways in which the reproductive and sexual health of these young factory workers can be improved most effectively. The study covered 550 girls and 500 boys engaged in the carpet and garment factories in Kathmandu valley. In-depth case studies of 23 respondents (12 girls and 11 boys) depicting high sexual risk behaviour and victims of rape and abortion were also conducted to supplement the survey findings.

Among the young factory workers covered in the study, 89% are migrants from 45 districts of the country and India. Most of the young factory workers covered in the study are unmarried with low level of education. The mean age of the respondents is slightly higher among the boys than girls (17.84 years for boys and 17.14 for girls). A large proportion of respondents belong to the Tamang ethnic group who are one of the most economically disadvantaged groups in the country. The majority of the literate workers (58%) had received only primary level of education. The workers in the carpet factories were usually kept within the factory in order to facilitate work for longer hours and at any time. It was also observed that in most of the cases, accommodations for boys and girls are not segregated according to the sexes in the carpet factories whereas in the garment factories, most of the girls live with their parents or in separate rented rooms. Friends constitute the most important medium (43%) of getting information about the job. The level of income is very low and a slightly more than two-thirds of the young workers send money to their homes. On an average, they send Rs1568 (\$21) which is 69 percent of their total income. Negligible proportions of the young workers possess contract letter of their job.

Knowledge of at least one contraceptive method is almost universal (95%) among the respondents. However, the correct knowledge is low. Surprisingly, higher proportions of girls than boys had heard of contraceptive methods, except condoms. Conversely, correct knowledge of methods is generally higher among boys than girls. No substantial difference was observed regarding knowledge of condoms by the respondents' marital status and level of education.

Awareness of STDs and HIV/AIDS is very high, particularly among boys. A vast majority of the young workers have heard about AIDS. One in ten young factory workers reported experience of at least one sign and symptom of STD infection. Such reporting is higher among girls than boys. Workers have a fairly good knowledge about the high-risk behaviours that put a person at risk of HIV/AIDS. Knowledge about the different preventive measure is also satisfactory among working young people. However, substantial proportions have misconceptions about the possible modes of transmission of HIV/AIDS and the fatality of the disease. Very few respondents perceived themselves to be at risk of getting HIV/AIDS. Among the respondents who did not perceive themselves

to be at risk, over half of them cited inexperience of sexual intercourse as the reason while about one-fourth defined themselves to be at no risk because they have only one sex partner.

Having girl/boy friends and physical contact such as holding hands, hugging, kissing, petting and even sexual intercourse are common among the young factory workers. One in every five unmarried boys and roughly one in every eight unmarried girls had experience of sexual intercourse. Out of them, one in every twenty had sex with a non-regular (or casual) partner in the last 12 months preceding the date of survey. Among the sexually active, the mean age at first sexual intercourse was low: 15.8 years for boys and 15.4 years for girls.

Young workers generally do not visit sex workers. Among the unmarried, one in every four boys and roughly one in ten girls had their first sexual intercourse with a girl/boy friend. About one in five unmarried girls and one in eight boys had their first sexual intercourse with a friend from the same factory. Love and curiosity were the main reasons for their sexual experience.

Friends from the factory were the last non-regular sex partners for all the girls and four-fifths of the boys. However, a sex worker was cited as their last non-regular partner by one-sixth of the boys. Half of the boys (51%) reported using a condom during sexual intercourse with their non-regular sex partners. None of the girls reported condom use during their last sex intercourse with non-regular sex partners.

Among the sexually active respondents, most young factory workers (80%) who have non-regular sex partners perceived that they are not at all at the risk of contracting any form of sexually transmitted diseases or HIV/AIDS. The main reasons for this perception were infrequent sex and the belief that their partners do not have other partners.

Among those sexually active, one in five boys as against one in twenty girls had experienced sex with a non-regular partner in the last 12 months preceding the survey. A higher proportion of unmarried than married respondents were involved in sex with a non-regular partner. A relatively higher proportion of literate young people (17%) than illiterates (8%) seem to have engaged in non-regular sex. Respondents staying in mixed sex hostels are more likely to have had a non-regular sex partner compared with those staying in other types of accommodations. Interestingly, slightly lower proportions of those originating from the Hill Zone than the Terai were found to be engaged in sex with non-regular partner. Respondents who are frequently exposed to mass media were more likely to have sexual relationship with non-regular partner than the ones who are rarely or never exposed. Similarly, respondents who watch pornographic movies are more likely to have had a non-regular sex partner than those who never watch.

Multivariate analysis of the predictors of non-regular sex confirms that Zone of origin is significantly associated with non-regular sex among girls, and that exposure to movies is a significant predictor among boys. When virgins were excluded from the analysis it became apparent that single persons were much more likely to report a non-regular partner than the married.

Peer behaviour seems to have a substantial effect on the behaviour of young people. The proportion of young workers who reported casual sex is higher among those whose close

friends use some type of substance (19%) than their counterpart non-users (4%). Substance use by the respondents themselves is also associated with involvement in casual sex.

Sexual assaults and rape are common among young workers. One in every ten girls (11%) reported that their friends had been victims of rape. It is surprising to note that 12 out of 550 interviewed girls (2.2%) said that they were raped at least once in their life. Boys from the village and the close relatives known to them had raped the girls in most of the cases.

Exposure to unwanted pregnancy is quite high among the young factory girls. Social network was important for the young factory workers to make decision regarding the method for terminations of pregnancy, to locate a provider and pay the cost for the services.

7.2 Discussion

This study is the first of its kind in Nepal that attempts to understand sexual risk behaviour and risk perception in relation to unwanted pregnancy and sexually transmitted diseases of young working people in the country. It begins to address a severe dearth of information, particularly on high-risk sexual behaviour among this subgroup of population of the country.

Throughout history, societies have dealt with the problem of premarital sex and illegitimacy by strictly supervising young people so that sexual activity does not begin until marriage (WHO, 1993). Although premarital sex is socially unacceptable in Nepal, the study has shown that the proportions of sexually experienced unmarried young people working in the factories are quite high. Social attitudes clearly favour cultural norms of premarital chastity but double standards are apparent. Unmarried boys are more likely than girls to approve of premarital sexual relations for themselves but not for girls. Unmarried boys are far more likely to be sexually active than girls and to have multiple partners. However, married young women are vulnerable to unintended pregnancy and sexually transmitted infections. They are also unlikely to have decision-making power in their sexual relationships. Sexual awareness seems to be largely superficial.

Most of the sexually experienced young workers had their first sexual experience while they were in the village (before coming to the city for work). On the one hand, the parents of young girls try to prevent them from being friendly with boys; on the other hand, they often go unaccompanied to work on the fields and to fetch firewood in the forest. It is especially in such situations and places that they reported exposure to sexual opportunities and encounters with possible sex partners either intentionally or unintentionally. One of the 16 year old girls said: "You know, it is very easy in the villages to go to the jungle and have sex............. A friend from the community was their first sex partner for most of the unmarried workers. Use of contraception was very low in those sexual experiences. A substantial number of girls reported pressure from the partner as the main reason for their first sexual intercourse.

As expected, unmarried individuals are more likely to report casual sex than married ones, and boys are also more likely than girls. One of the main reasons could be that unmarried girls have regular or more steady partners, whereas boy do not. A similar finding has also been documented in an earlier study (Tamang et al. 1998). Friends from the factory were their last non-regular sex partners for all the girls and most of the boys. Knowledge about

condoms is high, but the use is low and irregular. Citing a reason for non-use of condoms, one of the respondents said," Using condoms is no fun. When you are doing it without a condom, bang into her vagina, then you can enjoy..... Therefore the information campaigns should focus on changing attitudes that create barriers to use of condoms.

Multivariate analysis identified the factors associated with high-risk sexual behaviour. Among sexually active, young unmarried boys who watch pornographic movies are more likely to report risky sexual behaviour. In the case of girls, only marital status and region of origin were predictors of casual sex. It is difficult to prove any causal relationship between viewing pornographic movies and risky sexual behaviour in this type of cross sectional study. However, the results indicated that exposure to pornographic movies increases the likelihood of involvement in non-regular partnerships among young working boys. The statement such asSometimes we see blue films in video (pornographic movies). When only the boys are there, we talk about girls and sexual intercourse......and we look for opportunities to have sex.....(19 year old unmarried boy) further confirmed the findings. A study in Moluccas of eastern Indonesia has documented that films and videocassettes have fostered in girls the idea of romantic love and premarital sexual intercourse (Caldwell et al, 1998). It is very surprising to find that girls from the Terai are more likely to have non-regular partners than those from the Hill. One of the reasons could be that exposure to movies is higher among Terai girls. Moreover, in-depth interviews show that Terai girls were less demanding and relatively easier to approach than the Hill girls.

It was hypothesized in the present study that socio-economic vulnerability (low income, low job security, staying in the mixed sex hostels) leads to high-risk behaviour. Little evidence was found in the study that economic insecurity led to high-risk behaviour. However, some support was found for the expectation that mixed sex hostels facilitate non-regular sexual partnerships. It was observed during the in-depth interviews that staying in the unsupervised mixed sex hostel gives ample opportunities to young workers to mix with the opposite sex and experiment and explore sexual activities.

Although we expect exposure to mass media would reduce the likelihood of non-regular sexual partnership, an earlier study conducted in Nepal has contradicted this expectation (Tamang et al 1998). In that study, young men who watch television regularly are more likely to indulge in risky sexual behaviour than those who rarely watch. The results of present study further confirmed the relationship between exposure to mass media (TV, Radio and Newspapers) and sexual behaviour among men whereas the relationship is the opposite among girls. This is a matter of concern for campaigns to prevent HIV/AIDS by using the mass media. This contradiction should be explored further.

Another unexpected result was the relationship between risky behaviour and alcohol use. Sexual behaviour studies elsewhere and also in Nepal had shown that the use of alcohol increases likelihood of engaging in risky sexual behaviour (Tamang et al 1998). The result of the present study contradicts this finding. In this population, alcohol use makes no difference in having non-regular sexual partnership among boys and even less likely among girls. Therefore, it is difficult to predict the relationship of alcohol use and risky sexual behaviour especially among young working people.

7.3 Conclusions

The study has shown that substantial proportions of young factory workers experience risky sexual behaviour. Substance abuse, early sexual experimentation, multiple partners, irregular use of condoms, low use of other contraceptives, unwanted pregnancies, frequent occurrence of unsafe abortions and victims of rape or sexual harassment are common. Despite high-risk behaviour, relatively few young people considered themselves to be at risk of getting STIs or HIV/AIDS or unwanted pregnancy. Awareness of contraceptive methods seems to be superficial and information regarding the risk of unsafe sex and its consequences is inadequate.

The findings of the study have some important programme implications. Young factory workers are aware of some forms of protection from unwanted pregnancy and STIs and other reproductive risk in general. However, their information is incomplete and they hold a number of misconceptions that are rarely addressed in health programmes. Young people are taking risks partly as a result of such mistaken beliefs. For instance, many believed that village girls or educated young women cannot be infected with any diseases and that girls do not become pregnant from first sexual intercourse. Therefore an attempt is needed to dispel such myths and misconceptions and impart more knowledge of contraception. In particular, the message that every sexual act potentially can lead to the risk of diseases and unwanted pregnancy should be clearly imparted.

Since peers were most preferred source of getting information on reproductive and sexual health among the young workers, peer education and outreach can be an effective channel for disseminating reproductive and sexual health information among these young working people. Reproductive and sexual health information should be provided through appropriate channels. In-depth case studies have shown that fear of disclosure particularly prevents girls from seeking appropriate and timely care for a variety of sexual and reproductive health needs. For example, a major reason for delay in seeking treatment for STIs is fear of disclosure about involvement in sex; abortion is delayed till second trimester or sought from unqualified providers because of similar fears. Therefore, it is essential to provide confidential and gender sensitive sexual and reproductive health care services to young working people. Case studies have pointed out difficulties of young females in refusing sex or insisting on condom use to their partners (either regular or non-regular); sexual harassment including rape; reluctance of seeking appropriate and timely care for sexual and reproductive health needs. Therefore, programmes that focus on building life skills are needed for young working people.

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Appendices

Appendix I: Map of Nepal Showing the Study Area



Appendix II: Questionnaire for Individual Interviews

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A SURVEY OF SEXUAL RISK BEHAVIOUR AND RISK PERCEPTIONS OF UNWANTED PREGNANCIES AND SEXUALLY TRANSMITTED DISEASES AMONG YOUNG FACTORY WORKERS IN NEPAL

CREHPA/LSHTM/TWT

Informed Consent Form for Individual Interviews

As part of this study we would like to speak to you and other people like you, to learn more about your life, how you come to work here, where you live and whom you live and whom you interact with. We are especially interested in your reproductive health, what you know about infectious diseases, including those that may be spread by intimate contact, and how they may be prevented or treated. The information you provide will be very useful for this study. We know some of the questions we may have may be sensitive. Your answers will be confidential and you will remain anonymous, no one other than the person you speak to will ever know your identity. Your participation in this study is voluntary and the information will be used for the purpose of the research study only. If there are some questions you do not wish to answer, that is perfectly all right. You can stop the interview at any time if you do not wish to continue. If you have any further questions regarding this study, please contact Mahesh Puri at the CREHPA office (530344) for information. Is it okay, if I begin you the questions? Or, is there another time when I should come and contact you?

- 1. It is okay to ask questions now
- 2. Some other time (fix an appropriate time)
- 3. Not interested in the research

I have read the information above, or it has been read to me. I have had the opportunity to ask questions about the study and they have been answered to my satisfaction. I consent voluntarily to participate as a subject in this study and understand that I have the right to withdraw from the study at any time or refuse to answer any question(s) without any detriment.

Signature of Participants	Signature of Researcher
Date:	Date:

Section A: Introduction

Q.No.		Questions		Code	Got
A.1	Name of the town			Kathmandu Bhakatapur Lalitpur	DOMESTIC CONTRACTOR OF THE PARTY OF THE PART
A.2	Name of the	factory	GIVANCIES AND SI	SA GALLA	
A.3	Types of indu	Types of industry			1
A.4	Place of inter	view	Residence Place of work Other (specify)	2	
A.5	Name of resp	ondent	TREADY SUSSINGS I	PROTOTES	
A.6	Name of interviewer			ID #	
A.7	Date of interview (In English calendar)			DayMonth	Year
A.8	Name of Supervisor			ID#	
A. 9	Date of field editing (In English calendar)			DayMonth	Year
A.10	Signature of	field supervisor	es of the study is (1.5)	sees The objective	
A.11 N	Number of visits	s made for interview, d			The same
# of vis	sit made		Date of visit		Result of visit
Hasirle		Day	Month	year	white side to the
1 st visit	i non mai	n hand and me			co lot se c
2 nd visi	t	n, relial interferen	1980 NO.	THE COLUMN TWO IS NOT	alphales a F 31
3 rd visi	t				
Resul	t of visit Co	de (for A 11)	llise atswins me		
I. Interview completed Respondents not available at home/place of work Other (specify)				Interview incomplete Refuse to give interview	Vijous, no one operion in His s

Section B: Socio-demographic characteristics

Q. No.	Questions	Code	Go to
B.1	Sex of the respondent	Male1	
15.1		Female2	
B.2	Where were you born?	de la vaniri en mini vo	05.0
D.2	VDCDistrict		
B.3	In what day, month and year you were born?	DayMonthYear	
B.4	How old were you at your last birthday?	Years old CROSS-CHECK WITH DATE OF BIRTH AND RECONCILE	
B.5	What ethnicity/caste group do you belong to?	Tamang 1 Magar 2 Chhetri/Brahmin 3 Rai/Limbu 4 Other (specify) 5	
B.6	Can you read, for example, a newspaper?	Yes	→ B.11
D 7	House was attended cohool?		D.11
B.7	Have you ever- attended school?	Yes	→ B.11
B.8	What is the highest grade that you have completed?	Primary (1-5 class)1	P D.11
D.0	what is the highest grade that you have completed?	Secondary (6-10)	1
	Years of Schooling / other non formal education	SLC completed3	
	Tears of Schooling / other non formal education	I. A and above4	1 2 1
		Other non-formal education5	
	in Exchanged in the second sec	Other (specify)6	
B.9	Are you attending school/college?	Yes 1	→ B.11
B.9	tes in the second secon	No2	D.11
B.10	What was the main reason that stopped you from attending school?	Could not pay school fees1 To care for younger children2 Needed to earn money3 Didn't like school4 Family needed help on farm5 Other (specify)6	
B.11	Have you received any vocational education or training besides school?	Yes	B.13
B.12	What type of training have you receive?		
B.13	Have you ever attended any health education/literacy classes in the factory?	Yes	
B.14	What is your current marital status?	Currently married1	
		Never married2	Section C
		Separated3	→ B.16
	marrisonal phical Month Year	Divorced4	→ B.16
		Widowed5	B.16
B.15	Is your spouse living with you now or is he staying elsewhere?	Living with me	
B.16	FEMALE: Have you ever been pregnant?	Yes1	
D.10	MALE: Has your wife ever been pregnant?	No	Section C
	THE LOSS. THE JOHN WHILE COVER DECEMBER.	***************************************	The second secon

B.17	FEMALE: Have you ever given birth? MALE: Has your wife ever given birth?	Yes
B.18	How many children do you have?	# of children
B.19	How many of them are currently not living with you?	# of children
B.20	How many are living with you?	# of children
B.21	Who looks after these children while you are at work?	Self/Spouse

Section C: Mobility and Types of Accommodation

Q.No.	Questions	Code	Go to
C.1	Until you were 12 years old, did you live in a town or rural area?	Rural	
C.2	Where did you come from? District: VillageTown	Lindle-See use see	
	Country	ne terligidadi el nov	10 - 28
C.3	In which year did you first come to Kathmandu?	From Kathmnadu itself66	→ C.7
C.4	How old were you when you first came to Kathmandu to work?	Years old Not applicable66	D 93
C.5	How many times have you gone back home during the last 12 months?	# of times	01.8
C.6	When was the last time you went back home?	Months ago	
C.7	Who mainly decided that you should come here to work? Was it you, your parents or someone else?	Me	
C.8	Where do you stay at present?	Alone	
	Please describe	With other members of family (specify)3 Other relatives (specify)4	\$1.8
	College Colleg	Friends of same sex	III us
	The same the same of the same	Single sex hostel	1) 5) 5
C.9	Since when are you living at this above mentioned place?	MonthYear	THE REAL PROPERTY.

Section D: Work Employment History and Remittances

Q.No.	Questions	Code	Go to
D.1	From what age did you start working for pay?		
	Years ago		
D.2	What was your first occupation?		
	St. Automotive Care Great		
D,3	What did you do?	DISC THE ETA HANDON BOOK WALLE IN CO.	
		The same of the same	M 4 18-2
D.4	How did you come to know about the present job?	Newspaper/magazine advert1	
D.T	Trow dra you come to know about the present job	Walk in2	
		Introduced by friend3	
	11 DO 14 DO	Relative4	
		Verbally5	-
	Mark Street Control of the Control o	Agency/Recruiter6	
		Other (specify)7	
D.5	What types of work do you do?	Carving 1	
		Weaving	
	(CIRCLE ALL MENTIONED)	Knitting 3	
		Cutting 4	
		Dying 5	
- /		Other (specify)6	
D.6	How long have you been at carpet/garment factory job?		×
	Month		
D.7	How long have you been working in this factory?	MonthsYear	
D.8	Who helped you to get this job?	Nobody1	
D.0	who helped you to get una joo.	Friends	
		Relatives3	
		Other (specify)4	
D.9	For how many hours do you work everyday?	Usual hours	
D.10	Do you have any contractual agreement with your employer	Yes1	
	in paper?	No2 -	D.12
D.11	How long is your contract period valid?	Less than 6 months 1	
	takenkii bi jake	6-12 Months2	
		One year or more3	V 123
D.12	Are you a member of any labour organisations?	Yes1	
		No2	P 1-11-50
		No labour organisation in our	
		factory3	
D.13	To what extent are you satisfied with your present	Very satisfied1	D.15
	occupation?	Satisfied 2 -	→ D.15
D 11		Not satisfied3	1 10
D.14	If not satisfied, please explain why?		100
D.15	Normally how much money do you receive in a month?		
D.13	Rs		
	100		

D.16	As you know some young people like you send money back to their home and some of them do not. What about you?		
	Do you support anyone financially back home?	Yes	Section E
D.17	How frequent do you send home money?	Every month 1 Once in 2-3 months 2 Once in 4-6 months 3 Twice in a year 4 Once in year 5	10
D.18	Usually how much amount of your earning do you send to home?		

E. Exposure to Mass Media

Q.No.	Questions	Code	Go to
E.1	How often do you listen to the radio?	Daily (every day). 1 Most often (2-3 times in a weeks). 2 Occasionally (1-2 times in a week 3 Rarely (once-twice in a month 4 Never. 5 Don/t have radio 6	1 E
E.2	How often do you watch TV?	Daily (every day)	▶ E4
E.3	What is your favourite TV programme/channel?		8.
E. 4	How often do you read a newspaper or magazine?	Daily (every day) 1 Most often (2-3 times in a weeks) 2 Occasionally (1-2 times in a week 3 Rarely (once-twice in a month 4 Never 5- NAP (if illiterate) 6	→ E.6
E.5	What is your favourite magazine? For example, movie magazine, porn magazine, magazine containing fictional stories, any other	Complications susselves be selected a unit of	
E.6	How often do you go to the movies?	Most often (1-2 times in a week)	Section F
E.7	Usually, with whom do you go for movies?	Alone	

F. Peers Behaviour

Q.No.	Questions	Code	Go to
F.1	Does any of your close friends take the followings?	and resulting	
	Cigarettes/Bidi Jarda Pan	$\frac{\mathbf{Yes}}{1}$ $\frac{\mathbf{No}}{2}$	
	Chewing (Kahini) Smoke Marijuana	1 2 1 2 1 2	
F.2	What about you? Do you take any of the followings?		
	Cigarettes/Bidi Jarda Pan	Yes No 2 1 2	
	Chewing (Kahini) Smoke Marijuana	1 2 2	
F.3	Does any of your close friends consume alcohol?	Yes No	
F.4	Do you ever drink alcohol? If yes, how many times in the last month?	Number of times	88
F.5	Has any of your friends offered you to drink alcohol during the past 3 months?	Yes No	
F.6	Does any of your close friend take drugs that are not prescribed by the doctor?	Yes	
F.7	Does any of your close friend go to watch pornographic video films?	Yes	2
F.8	Has any of your friends ever invited you to watch pornographic videos?	Yes	
F.9	Does any of your close friends have a boy/girl friend?	Yes No Don't know	2
F.10	Do you think that any of your close unmarried friends are having sexual relationship with their boy/girl friends?	Yes	2 Section. G
F.11	How many of your friends who are unmarried have had sexual intercourse? Would you say many, some, a few, or none?	Many Few Some None	3

Section G: Knowledge on Contraception and sources of reproductive health information

I now have some questions about contraception. I mean ways in which men and women can avoid getting pregnant. Which methods have you heard of? Any others?

Q. No.	Questions	Code	Go to.
G.1	Do you know of any method or way that one can use to	Yes1	
	delay or avoid getting pregnant?	No2 —	- ▶G.6
G.2	Please specify the method (s) you know? (CIRCLE ALL MENTIONED) Have you heard of Pills	How is [NAME] used Tabs to eat everyday1	
	No2 Condom	Other2 Rubber sheath to wear1	
	No2	Other2	
	Depo/Sangini	3-month injection	
	Norplant	6-capsule to implant under arm1 Other2	
	IUD	Copper device to put into uterus1 Other	
	Foaming tablets	Tabs to put in vagina before sex1 Other2	
	Male sterilisation	Surgical operation for male1 Other2	
	Female sterilisation	Surgical operation for female1 Other2	
	Periodic abstinence Yes 1 No2	To avoid sex at 10-20 days1 Other2	
	Withdrawal	To ejaculate outside 1 Other 2	
G.3	(Please ask only those respondents who have heard of Pills, Condom, Depo/Sangini) Do you know any place where young people could obtain this method?	ung isstrain vormalisatell teoretto ven Vandaliv aktigationa Valla avais shipard social move to ema at	
	Methods: Places		
	Condoms Depo/Sangini	god rough directions and the latest transfer and	
G.4	Have you ever used anything or tried in anyway to delay or avoid getting pregnant?	Yes	→ G. 6 → G. 6
G.5	What have you used or done? (CIRCLE ALL MENTIONED)	Pills 01 Condom 02 DMPA 03 Norplant 04 IUD 05 Foaming tablets 06 Male sterilisation 07 Female sterilisation 08 Periodic abstinence 09 Withdrawal 10	, 3, 0

G.6	In your opinion, what is the right age for a girl and right age for a boy to marry?	For girls For boys Don't know88
G.7	At what age do you think women should start having children?	Age
G.8	How many children do you think that a couple should have, of them how many sons and how many daughters?	# of children

Section H: Sexual Activity

I would like asking you very personal questions that will be very helpful in this study. Your information will be kept confidential. I would be asking the same questions to a number of other persons of your age. Please try to give answers that are as accurate as possible. Your help is appreciated. I would like to remind you that your response would be kept very confidential.

Q.No.	Questions	Code	Go to
H. 1	How old were you when you had your first sexual intercourse?	Age2	I.3
H.2	Was your first partner younger than you were, elder than you or same age?	Younger than me	
H.3	How would you describe your relationship to that person (sex partner)?	Spouse 1 A friend from the same factory 2 A friend from community 3 A friend from school 4 Commercial sex partner 5 Boy/girl friend 6 Other (specify) 7	LIEV
H.4	When was the last time that you had sexual intercourse?	Days ago	1965.1 SA SI
H.5	When you had sex for first time did you or your partner do anything to avoid pregnancy?	Yes	► H.7
H.6	If YES, what method did you use?	Condom. 1 Pill. 2 Injection. 3 Withdrawal. 4 Calendar Method. 5 Other(specify). 6 Don't know. 7	word depose segretaristical se
H.7	Did you or your partner ever use a method to avoid pregnancy? IF YES, always or sometimes?	Always 1 Sometimes 2 Never 3	→ H.7

What method did you or your partner mostly use?	Condom
The state of the s	Pill
	Injection3
The base of the ba	Withdrawal 4
A SELLING TO BE TOOK IN THE SELLING AS A SEL	Calendar5
plant and the second meaning and the second m	Others6
	Don't know7
Thinking about when you have first sexual intercourse,	Love1
what do you think was your main reason (s) for doing so?	Curiosity2
	Getting carried away3
	Pressure from friend4
	Pressure from partner5
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Not to be left out6
	Natural follow-on in
CONTRA MORE	relationship7
	Being drunk8
TOTAL ENGINEERING AND MARKET STATE OF STAN BOTHER.	Other (specify)9
227 TERM TO REPORTED TO ASSOCIATE USE MINUSCOLO	
(Please cross check in Q. N H.i if yes then ask)	
Think back to the first time you had sex with him/her-I	SUBSCIEDE GOV. HERE OF PRINCE A SERBIGICAL TITLE THE
mean the first time that the penis went inside the vagina.	
Would you say	anotherop av
a. I forced him/her to have intercourse against her/his will	Forced1
b. I persuaded him/her to have intercourse	I persuaded 2
	He/she persuaded3
d. He/she forced me to have intercourse	He/she forced4
e. We were both equally willing	Both willing5
(Please, cross check in Q.N. H.1 if no then ask)	I haven't been in love1
What would you say are the main reasons that you have not	I haven't yet had the chance2
yet had sexual intercourse?	I don't feel ready yet3
	I want to wait until I meet the right
Section was beauty 2	person4
	I want to wait until I am
	engaged or married5
	Control of the second of the s
	Thinking about when you have first sexual intercourse, what do you think was your main reason (s) for doing so? (Please cross check in Q. N H.i if yes then ask) Think back to the first time you had sex with him/her-I mean the first time that the penis went inside the vagina. Would you say

I. Sexual Risk Behaviour and Risk Perception

FOR MARRIED BOYS/GIRLS ONLY (PLEASE CHECK MARITAL STATUS IN B.14)

Q.No.	Questions	Code	Go to
I.1	Apart from your wife/husband, have you had sex with anyone else?	Yes	▶ I. 19
I.2	How many women/men have you had sex with in last 12 months besides your wife/husband?	# of women/men	

FOR UNMARRIED BOYS/GIRLS ONLY (PLEASE CHECK MARITAL STATUS IN B. 14)

I.3	Have you ever had a girl/boy friend? I mean someone to whom you were emotionally attracted to and whom you 'dated'?	Yes	ec.
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I.4	Did you have any physical contact, such as holding hands, hugging or kissing?	Yes No	
To Philip	I.4.1 Holding Hands	1 2	
	I.4.2 Hugging	1 2	
	I.4.3 Kissing	1 2	
	I.4.4 Petting	1 2	
	I.4.1 Sexual intercourse	digental visits of section in the contract	
1.5	Apart from your regular sex partner have you had sexual intercourse with anyone else?	Yes	I. 19
1.6	Apart from your regular sex partner, when did you have sex with anyone in the last 12 months?	Days ago Months ago	

FOR THOSE WHO HAD SEX WITH NON-REGULAR SEX PARTNER (PLEASE CHECK IN I.1 OR I.5)

I.7	How do you describe your relationship with your last non- regular sex partner?	Friend	
I.8	Did you use a method to avoid pregnancy during the last sexual intercourse with your non-regular sex partner?	Yes1 No2	→ I.10
I.9	If yes, which method (s) did you use?	Condom 1 Pill 2 Injection 3 Withdrawal 4 Calendar Method 5 Other (specify) 6 Don't know 8	
I.10	Why not?	ABARE SHA PAGE ROW ROW	IV O SHEA
I.11	Did you use a method for protection from sexually transmitted diseases during the last sexual intercourse with your non-regular sex partner?	Yes	→ I.13
I.12	If yes, which method (s) did you use?	Condom	→ I.14 → I.14 → I.14
I.13	Why not?		
I.14	Do you think that you/your partner are at risk of getting pregnant?	Yes	→ 1.16
I.15	Why do you think that you/your partner are not at risk of getting pregnant?	Use FP all the times	
I.16	Some young people pay or receive money or gifts in exchange for sexual intercourse. Has this ever happened to you?	Yes	▶ I.19
I.17	How many times have you had sex with for money?	# of times	

I.18	Did you or the sexual partner do anything to avoid a pregnancy on these occasions? IF YES Always or sometimes?	Always
I.19	Young boys/girls are sometimes touched on the breast or some other part of the body when they do not want it, by a stranger, a relative or an older person. Has this ever happened to your friends?	Yes1 No2
I.20	Young boys/girls are sometimes touched on the breast or some other part of the body when they do not want it, by a stranger, a relative or an older person. Has this ever happened to you?	Yes
I.21	Young boys/girls are sometimes forced to have sexual intercourse against their will by stranger, a relative or an older person, teacher, owner etc. Has this ever happened to your friend?	Yes
1.22	Young boys/girls are sometimes forced to have sexual intercourse against their will by stranger, a relative or an older person, teacher, owner etc. Has this ever happened to you?	Yes
I.23	When did it happen?	Ago
I.24	If yes, then please say who?	The inguis and seed and in the seed of the

J. Unwanted Pregnancy and Abortion

ASK ONLY FOR THOSE WHO ARE SEXUALLY ACTIVE (PLEASE CHECK IN H.1)

Q.No.	Questions	Code	Go to
J.1	As you know, most of the times many young women do not want to get pregnant but unfortunately they get pregnant, has it ever happened to you/ your partner?	Yes	Sec. K
J.2	What happened to the (last) unwanted pregnancy?	Currently pregnant 1 Abortion 2 Miscarried 3 Still birth 4 Live-birth 5 Don't know 8	 Sec. K Sec. K Sec. K Sec. K Sec. K
J.3	If aborted where did you/your partner get this service?	Nursing home	
J.4	How much did you/your partner pay for it?	Rs.	
J,5	Did you/your partner experience of any health complication after abortion?	Yes	

K. Knowledge on STDs and HIV/AIDS

Q.No.	Questions	Code	Go to
K.1	Are you aware of the disease that spread through sexual contact?	Yes	→ K.3
K.2	What are the various sexually transmitted diseases that you have heard of? Any other? (CIRCLE ALL MENTIONED)	Gonorrhea 1 Syphilis 2 AIDS 4 Other (specify) 5 Don't know 8	e sal 13
K.3	Have you ever experienced any of the followings? K3.1 Pain during urination K.3.2 Painful Ulcers/sores in genital area K. 3.3 Non-painful ulcer/sores in genital area FOR FEMALE ONLY K 3.4 Smelly discharge from Vagina FOR MALE ONLY K3.5 Puss discharge from penis	Yes No 2 1 2 1 2	
K.4	Did you seek treatment for most recent episode?	Yes	
K.5	Where did you go for treatment?	Pharmacy 1 Govt. hospital 2 HP/SHP 3 Private clinic 4 Other (specify) 5	
K.6	What other steps did you take for the treatment? (Please probe all the steps taken and persons visited)		- 67
K.7	Do you know anyone among your friends having contracted sexually transmitted diseases?	Yes	
K.8	Have you ever heard of an illness called AIDS?	Yes	Bec. L
K.9	From which sources of information have you learned most about AIDS? (PLEASE CIRCLE ALL MENTIONED)	Radio 1 Television 2 Newspaper/magazine 3 Pamphlet/posters 4 Health workers 5 School/teachers 6 Friends 7 Work place 8 Other (specify) 9	
K.10	Is there anything a person can do to avoid getting AIDS?	Yes 1 No. 2 Don't know. 8	► K.12 ► K.12

K.11	What can a person do?	Safe sex
	Any other ways?	Use condoms3
	Any other ways:	Have only one sex partner4
	(CIRCLE ALL MENTIONED)	Avoid sex with prostitutes. 5 Avoid blood transfusion 6
		Avoid kissing7
		Avoid mosquito bite8
	La	Other (specify)
K.12	Is it possible for a healthy-looking person to have the AIDS	Yes1
	virus?	No2
****		Don't know8
K.13	Do you think that persons with AIDS almost never die from	Almost never1
	the diseases, sometimes die, or almost always die from the	Sometimes2
	disease?	Almost always3
K.14	D did to four ADC H	Don't know4
N.14	Do you think your chances of getting AIDS are small,	Small Sec. L
	moderate, great, or that you have no risk at all?	Moderate2
		Great
		Has AIDS
		Don't know
K.15	Why do you think that you have no risk/a small chance of	Infrequent sex1
	getting AIDS?	Use condoms all the time2
	544445	Have only one sex partner3
		No blood transfusion4
		My partner has
	The many the	no other girlfriend/wife5
	Land the second	Not drug user6
	The state of the s	Don't Know8

Section L. Condom Knowledge and Attitudes

Q.No.	Questions	Code	Go to
L.1	PLEASE CHECK RESPONDENT'S KNOWLEDGE ABOUT CONDOMS IN G.2)	Known	Section M
L.2	Have you ever seen a condom?	Yes	I correct

L.3	People have different opinion about condoms. I will read out some opinions. For each one, I want you tell me whether you agree or disagree or whether you don't know?			telengad	in .
		Agree	Disagree	Don't Know	
L.3.1	Condoms are effective method of preventing pregnancy	1	2	8	
L.3.2	A condom can be used more than once	1	2	8	
L.3.3	A boy can suggest to his girlfriend that he will use a	d el ligry		or my silbert	
	condom	1	2	8	
L.3.4	Condom are an effective way of protecting against HIV/AIDS	1	2	8	
L.3.5	Condoms are suitable for casual relationships	1	2	8	
L.3.6	Condoms are suitable for steady, loving relationships	pår sizig i d		person of the sale	
L.3.7	It would be too embarrassing for someone like me to buy or obtain condoms	1	2	8	
L.3.8	If a girl suggested using a condom to her partner, it would	1	2	8	
	mean that she doesn't trust him	1	2	8	
L.3.9	Condoms reduce sexual pleasure	O FERMAN		on borround	
L.3.10	Condoms can slip off the man and disappear inside woman's body	1	2	8	
L.3.11	Condoms are an effective way of protecting against	1	2	8	
	sexually transmitted disease	1	2	8	
L.4	Do you think you can ask your partner to use a condom?			1	
Maria.				8	
L.5	Do you think it is acceptable for a woman to ask her	Yes		1	D-0
	husband or male partner to use a condom?			2	
		Don't k	now	8	esVI
L.6	Do you think it is acceptable for an unmarried woman to	Yes		1	Waste Land
	ask her male partner to use a condom?	No		2	
		Don't k	now	8	

Section M: Accessibility and Utilisation of Reproductive Health Services

Q.No.	Questions	Code	Go to
M.1	Usually where do you go when you need the reproductive health services (such as family planning, sexually transmitted diseases or other RH services)?	No where	M. 9
M.2	How long does it normally take to get to this place from your residence?	Minutes	
M.3	How easy or difficult is it to get there?	Easy	
M4	Is the opening hours of this place convenient or inconvenient to you?	Convenient 1 Inconvenient 2 Don't know 8	→ M.6

M.5	If inconvenient, then why do you say so? (Please probe)	de trave d'ille ser appendant about qu	
1			
M.6	Have you ever visited a health facility for any reasons in	Yes	→ M.9
V	last 12 months?		171.9
M.7	Where did you go in your last visit to the health facility?	Hospital1	
		Health Post	Es la
			MA TO
		Nursing home4	
1.60	177 d C 114 d 1 14 C 115 A	Other (specify)5	
M.8	What was the reason for you to visit the health facility the last time you did?	or o	
	.,,		
	The water and the second	and de lineands visions potest and T	
		mid-learn 2 deaders at his	
M.9	Why have you never visited a health facility?	No need1	
	***************************************	Lack of money2	
		Other (specify)3	
		Don't know8	
M.10	Have you ever talked with any health worker in the		
	following matters?	Yes No	-
	1,000	The second secon	77
	M. 10.1 Contraception?	1 2	Terminate
	M. 10. 2 Sexually transmitted diseases?	1	interview
2.11	M. 10.3 Unwanted pregnancy?	1 2-	
M.11	Did you feel comfortable enough to ask questions?	Yes1	duid
10.00		No2	
M.12	Were the questions you asked during the consultation	Yes1	Fed I N
	answered adequately?	No2	
M.13	Was there enough confidentiality?	Yes1	
		No2	

THIS IS THE END OF INTERVIEW. THANK YOU FOR GIVING YOUR VALUABLE TIME AND TALKING WITH ME.

Appendix III. GUIDELINES FOR IN-DEPTH INTERVIEWS

MIND (Body language and facial expressions which will show if he/she is feeling awkward, irritated etc. Do not force them to answer you if they CONFIDENTIALITY OF THEIR RESPONSES. BEFORE ASKING ANY QUESTIONS PLEASE PAY ATTENTION TO HIS/HER STATE OF NOTE: PLEASE SPEND SUFFICIENT TIME TO BUILD RAPPORT WITH THE RESPONDENTS AND ASSURE HIM/HER ABOUT are not ready)

1. Mobility, work employment history

Topic Focus	Core questions	Additional questions or prompts
DONE CO.	Tell me about your growing up?	When did you first come to this town?
Mobility	STATE OF THE PROPERTY OF THE P	Why did you decide to come here? Who took the main decision that you should
	Tell me how you came to work here?	come here to work?
Work employment	Please tell me about you average day?	Is this your first work? How did you find the present job? When did you join
history		this present job?
		How long do you work per day?
	de you sussinstity medi:	How are you feeling about you current job? To what extent are you satisfied?
	mentally interpt, Agrees que zone de politique prépara herbannes en	Why and why not? What type of co-workers do you have?
	Hotel brightness ges fact the gas transfers, Milds Advantage	How much do you earn in a month?
	Do you support family financially? How?	Usually how much amount from your salary do you send back to home? How
	Thou go spend your totally frame, whether you mently do to	frequent?

	Please tell me about the basic standard of living condition of your	What do your parents do to earn a day to day to living?
	own family at home?	Do you have your own house (concrete), TV, stereo, motor cycle?
Aspirations	How is the standard of living of your close friends? Do they have	How do you expect your own future living standard to be as compared with
	good house? Bike? TV etc? Sufficient pocket money?	that of your parents? Do you think that you'll have a better life than that of
		your father?
	What are the expectations/ambition of your life?	Own a house in town (district headquarter), good and permanent job, colour
		TV, motor cycle, educational/training expectations?
	How do spend your leisure hours? What do you usually do to enjoy	- Erotic literature/porn magazine
Media exposure	yourself in free time?	- Erotic TV images/programmes
	How frequent do you go for movies? With whom?	- Thinking about sex
	How frequent do you watch television? Which programmes do you	
	usually watch? Where do you go to watch T. V.? Which magazines	
	do you normally read?	The State of the S

2. Sources of Information and Sexual Development

Core duestions
How do young people like you usually find out about Bodily changes, periods, the biology of sex/reproduction, pregnancy relationship,
physical relationship, contraception and sex? marriage, when to have sex contraception, STI, HIV etc
How knowledgeable do you feel about sexual matters? Can you remember what you were told/what you found out?
Whom or what do you rely on for information? How old were you?
(sources: individuals and/or media) How did you feel/act?
What about your parents? Other family members? Have they What did you think about it?
ever told you about sex? What did you discuss? Can you remember much about what was said? How did you feel
at that time? How did they feel? Were you embarrassed?
Are there any other people/places where young people like Were they embarrassed?

	you could obtained information about sexual relationship	
	and contraception?	Who or where? Have you ever visited? Why?
Sexual	At what age do you first remember being looked at or	When do you recall experiencing a sexual sensation for the first time in your life? (sexual
Development	approached by someone in a sexual way?	feelings/thoughts/dreams/desires/crushes)
	of Destrict description of the respective for respective to the state of the	When did you first become interested in a boy/girl as desirable/acceptable sexual partner?
		When did you first fall in love or experience romantic thoughts about someone?
	What sexual activity have you engaged in?	When did you have your first boy/girl friend?
	- Hug/hold hands	How would you describe your first relationship? Casual, exploratory etc.
	- Kiss	Who (which partner) did you experience this with?
	- Petting	How did you feel about this?
- Schlebestalle	How quickly did you progress from one stage to the next?	Did you have fears of others finding out? Who? Why?

3. First sexual experience

Topic Focus	Core questions	Additional questions or prompts
	What does sex mean to you? Why?	What are you looking for in sex?
		How old were
	Can you describe your first experience of sexual	you and your partner? Was your partner experienced? Did this fact influence your
First intercourse	intercourse? I mean penetrative sexual intercourse?	behaviour? Did it influence your partner's behaviour? Do you have any regrets?
	Contraction	Where did you meet? How did you develop the relationship with him/her?
	- topic ficting porting	How long had you known him/her and in what ways?
	Detailed description of interaction plus, what where, why	How did you feel about the relationship? How would you describe it?
	when, who, how? (Context)	Did anyone influence/help your partner choice? Did you seek advice about your partner
		choice from anyone?
	The state describes their type feathing throughtness and	What was your/their motivation for sex? Reasons for engaging in first intercourse? Where
		did you go for sex? Was it expected? Planned?

		W See 9 D Hill that influence behaviour? Did was give
		were you given any girls. Do you milk tial mildeneed your behaviour. Dut you give
		any gifts? Do you think that influenced your partner's behaviour?
Partners and sexual	Can you give a detailed account of your sexual history? Use	How long you generally know/seen your partner before sex?
activities through	of a timeline indicating when the relationship started, ended,	What influences your partner choice/selection?
the years to the	their duration, their type, feeling about them	To what extent do negotiations about sex take place? Who initiates the discussion? What
current time (sexual	Numbers of:	is said? What normally leads to sex? Reasons for engaging in sex?
history)	-Sexual intercourse partner	What activities have you/do you normally engage in?
	-Other partner	Do you have multiple partners?
	-male/female partner	at the stand toward the country between the country to consider the country of the standard to consider the country of the cou
	-Casual/steady	
	THE PROPERTY OF THE PROPERTY O	Have condoms been used every time you had sex? Why? Why not?
	Which forms of protection against pregnancy and STI have	How do you decide when and when not use them?
	you used-what why, when, how was it's use or non-use	
	decided?	

4. Last sexual intercourse and risk taking behaviour

Last sexual	Can you describe your last sexual experience with a non-	What does having sex mean to you (What does it involve?)
intercourse	regular sex partner?	Where did you meet? How did you develop the relationship with him/her?
		How long had you known him/her and in what ways?
		How did you feel about the relationship? How would you describe it?
	The state of the s	Did anyone influence/help your partner choice? Did you seek advice about your partner
	the executive physical process and department of the part of the p	choice from anyone?
		Where did you go for sex? Was it expected? Planned?
	Detailed description of interaction plus, what where, why	Were you given any gifts? Do you think that it influenced your behaviour? Did you give
No chilpatest	when, who, how? (Context)	any gifts? Do you think that it influenced your partners behaviour?

Sexual risk taking	Which forms of protection against pregnancy and STIs have	Which methods were used? Where were the methods obtained from?
and protective	you used -what, why, when and how was it's use or non-use	Who provided it/them? Whose responsibility is protection?
practices	decided?	Have condoms been used? Why? Why not?
		How do you decide when and when not to use them?
		Did you visit a reproductive leadily service for the fleet from before or after your were
Abortion	Have you/your partner tried to abort pregnancy? How many	Have you/your partner ever been pregnant? What happened? What did you do? How did
	times?	you feel? How did other people react? Has it changed your behaviour?
	Can you tell the entire step you/your partner took to abort	Whom did you contact/consult with first?
	the pregnancy last time?	What suggestions he/she did gave you? Have you tried any oral medicine? Have you tried
		any other traditional methods? Was it successful?
		With whom did you/your partner consulted next? What methods were used for the
		abortion?
		Did you/your partner feel bad after the abortion? Were there any health complications?
STIs	Do you think that there are any risks involved with sex? To	Whom did you first contact/consult when you developed symptoms of STIs?
	what extent?	What suggestions did he/she give you? Have you used any medicine? Was it effective? If
	What action can people take in relation to these risks?	not, whom did you/your partner consult next?
	Do you consider yourself to be at risk? Why? Why not?	Was your partner was also treated?
	-Pregnancy	South district the country of the co
	-STIs and HIV/AIDS	
Section of the sectio	Have you ever been infected?	
holi to shrough	Please tell me about the action you took when you started	
20 Date of reflect	showing signs and symptoms of STIs.	

Sexual Pressure	Did you ever experienced any forms of pressure to have	Have you or anyone you know experienced sexual pressure, force, rape? By whom?
	Sex?	What happened? (Context)
	Have you ever been pressured by anyone into sexual	How do you feel about it?
	interaction?	What influence did this have on you?

5. Use of reproductive health services

information	yourself are able to visit and name the people that you could talk to, to find out about sex, contraception, STDs?	Hospitals, private doctors, prantiacy, private nursing none etc.
	Have you ever been to any of them for help and advice about	(If have been) How many times have you been? (to each one)
	contraception, STIs, etc?	What for? (If haven't been)
	M. County and Co.	Is there any reason(s) why you haven't been along?
	the pear obtained that there is no study developed with seed To-	Would you consider going to any of the services? Why/why not? Is it not affordable? Far
		away? Is the opening hours is not convenient for you?
		How have you found out about the services? Family, friends etc?
		Has anyone you know been to any services? Do you know about their experiences? Can
		you describe it?
	Can you remember the very first place that you went to?	How did the visit go? Were you scared/nervous? How were you treated? Were you
	What was your first experience like?	satisfied with the visit? Why/why not? Did anyone accompany you? Were you fearful of
		others finding out? Did anyone find out where you had been, I mean the people you
	What have your subsequent experiences been like?	wouldn't have liked to disclose the truth to?
		Did you visit a reproductive health service for the first time before or after you were.
		sexually active? Why?

What are the general impressions of the services on young	Have the services you attended been welcoming, friendly, helpful, confidential etc?
people like you?	Are the services, easy to get to, open at convenient times?
	Do they provide you with all the services you want/require?
	What do you think are the most important feature of a sexual health service for working
	young people? What do you think are the essential elements of a service?
	Where do you think young working people's sexual health services should be held
	(location)? Why? Who should provide the information and advice?

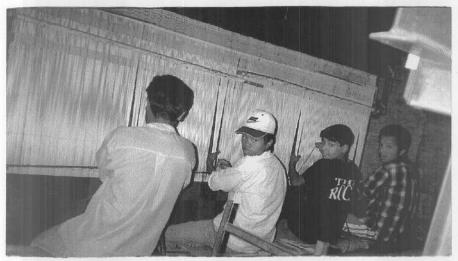
Photographs



Boys and girls are working together in one carpet



Three girls are weaving the same carpet



Four boys are weaving the same carpet



Girls are spinning the wool which is used to weave the carpet



Girls at work (finishing) in a carpet factory



Stitching, finishing and taking out the rough thread of clothes in a garment factory