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भारत सरकार

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GOVERNMENT OF INDIA

MINISTRY OF HEALTH & FAMILY WELFARE
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Youth in India: Situation and Needs 2006–2007

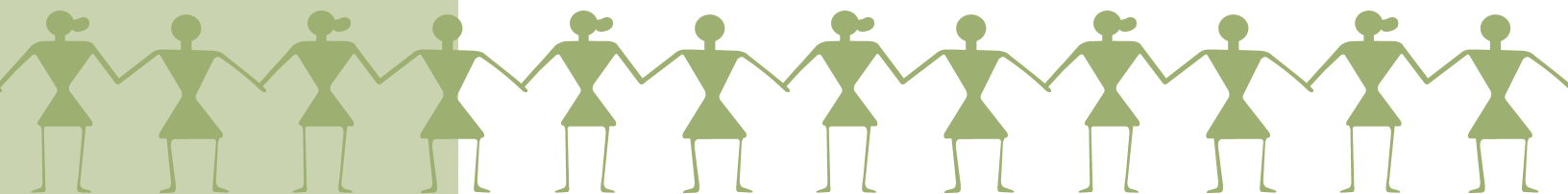


EXECUTIVE SUMMARY JHARKHAND



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This executive summary presents, in brief, findings on the situation of youth in Jharkhand, part of a sub-national study undertaken by the International Institute for Population Sciences, Mumbai and the Population Council, New Delhi, as part of a project to collect information on key transitions experienced by youth in India, including those related to education, work force participation, sexual activity, marriage, health and civic participation; the magnitude and patterns of young people's sexual and reproductive practices before, within and outside of marriage as well as related knowledge, decision-making and attitudes. The project was implemented in six states of India, namely, Andhra Pradesh, Bihar, Jharkhand, Maharashtra, Rajasthan and Tamil Nadu.

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The International Institute for Population Sciences (IIPS) is a deemed university under administrative control of Ministry of Health and Family Welfare, Government of India. The Institute engages in teaching and research in population sciences, and has been actively involved in building the capacity of Population Research Centres, and other state and central government offices that address population issues in the country and in the Asia-Pacific region. It has a proven record in conducting national- and sub-national-level studies in reproductive health, including the National Family Health Surveys and District Level Household and Facility Survey under the Reproductive and Child Health programme.

The Population Council is an international, non-profit, non-governmental organisation that seeks to improve the well-being and reproductive health of current and future generations around the world and to help achieve a humane, equitable and sustainable balance between people and resources. The Council conducts biomedical, social science and public health research, and helps build research capacities in developing countries.

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The *Youth in India: Situation and Needs* study (referred to as the Youth Study), implemented by the International Institute for Population Sciences, Mumbai and the Population Council, New Delhi is the first-ever sub-nationally representative study conducted to identify key transitions experienced by married and unmarried youth in India. Young people (aged 10–24) constituted almost 315 million and represented 31% of the Indian population in 2001. Not only does this cohort represent India’s future in the socio-economic and political realms, but its experiences will largely determine India’s achievement of its goal of population stabilisation and the extent to which the nation will be able to harness its demographic dividend. While today’s youth are healthier, more urbanised and better educated than earlier generations, social and economic vulnerabilities persist. In the course of the transition to adulthood, moreover, young people face significant risks related to sexual and reproductive health, and many lack the knowledge and power to make informed sexual and reproductive choices.

In recognition of the importance of investing in young people, several national policies and programmes formulated since 2000, including the National Population Policy 2000, the National Youth Policy 2003, the Tenth and Eleventh Five-Year Plans, the National Adolescent Reproductive and Sexual Health Strategy and the National Rural Health Mission, have underscored a commitment to addressing the multiple needs of this group in India. Effective implementation of both policies and programmes, however, has been handicapped by the lack of evidence on young people’s situation and needs. Currently available evidence is limited, at best, and comes largely from small-scale and unrepresentative studies.

The Youth Study focused on married and unmarried young women and unmarried young men aged 15–24 and, because of the paucity of married young men in the younger ages, married men aged 15–29 in both rural and urban settings. The study collected information pertaining to key transitions experienced by youth, including those related to education, work participation, sexual activity, marriage, health and civic participation; the magnitude and patterns of young people’s sexual and reproductive practices within and outside of marriage as well as related knowledge, decision-making and attitudes.

The Youth Study comprised three phases, and included both a survey and qualitative data gathering exercises prior to and after the survey. The study was conducted in a phased manner in six states of India: Andhra Pradesh, Bihar, Jharkhand, Maharashtra, Rajasthan and Tamil Nadu.

This report focuses on findings from the survey conducted in Jharkhand. The survey was undertaken between February and October 2006. During the survey, 10,708 young people were contacted, of which a total of 8,814 married and unmarried young women and men were successfully interviewed.



Characteristics of the household population

A total of 28,318 households were selected for interview. Among these, interviews were successfully completed in 25,978 sample households, and 137,669 individuals, who were usual residents in these households, were enumerated. The age distribution was typical of a high fertility population, with a larger proportion of the population in the younger age groups than older age groups. A comparison of age distributions obtained in the Youth Study and the 2001 Census, moreover, suggests that fertility levels remained virtually unchanged in the period 2001-06. With regard to the youth population, the distribution suggests that at the time of the survey, 13% of the population was aged 10–14 years, 10% was aged 15–19 years and 8% was aged 20–24 years. A total of 18% of the population was aged 15–24 years.

Overall, the sex ratio of the *de jure* population of the state was 978 females per 1,000 males. The child sex ratio of the state stood at 960 females per 1,000 males aged 0–6, almost exactly that reported in the 2001 Census (965).

The educational profile of the household population highlights low levels of educational attainment in the state: over two-fifths (42%) of the population aged 6 years and above had no formal education. Notably, as many as 55% of females compared to 30% of males, and as many as 48% of the rural population compared to 23% of the urban population had never been to school. Reaffirming the low levels of educational attainment in the state, findings also indicate that just 8% of the total population had received 12 or more years of education.

Housing characteristics of the surveyed population underscore poor living conditions among the majority of the state's population. Overall, 63% of all households lived in *kachcha* houses (constructed from mud, thatch or other low-quality materials), 15% lived in semi-*pucca* houses (constructed using a mix of low- and high-quality materials) and 22% lived in *pucca* houses (constructed entirely from cement, masonry or other high-quality materials). Only 37% of households had electricity, including 87% of urban households and 24% of rural households. Just over half of all households (54%) reported that their main source of drinking water was piped water, or water obtained from a hand-pump or a covered well. Access to a toilet facility of any kind was reported by just one-fifth of all households.

The distribution of households by wealth quintiles shows a stark rural-urban divide: more than three-fifths of urban households were in the wealthiest (fifth) quintile; in contrast, only 9% of rural households were in this quintile. Likewise, one-quarter of rural households were in the poorest (first) quintile compared to only 3% of urban households.

Situation of youth

As mentioned earlier, a total of 8,814 youth were interviewed. Age profiles suggest that a larger proportion of young men and women were concentrated in the 15–19 year age group than in the 20–24 year age group (56–57% compared to 43–44%). Moreover, the unmarried were younger than the married. Distributions by religion show that 70–72% of youth were Hindu, 13–14% were Muslim and 11–13% belonged to the *Sarna* religion. Caste-wise distributions show that 12–16%



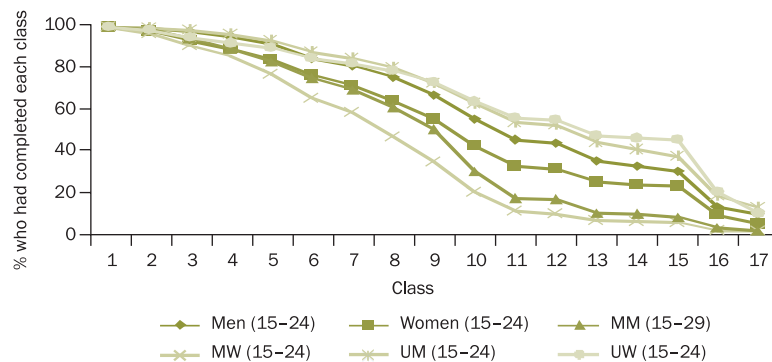
of youth belonged to general castes, 14% to scheduled castes, 24–25% to scheduled tribes and 46–49% to other backward castes. About four in five youth reported that both parents were surviving. For those with just one parent surviving, this parent was more likely to be the mother (12%) than the father (4–6%). Finally, 2–3% reported that neither parent was alive.

Education

While youth were better educated than the general population in Jharkhand, schooling was far from universal among young people in the state. As many as one in seven young men and two in five young women had never attended school. Findings show, moreover, that young women in rural areas and married young women in general were particularly disadvantaged; about or more than half of rural young women and married young women had never been to school.

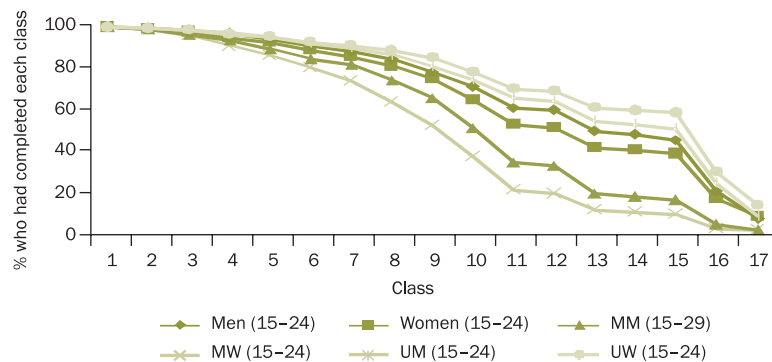
Not only was school enrolment limited, but school completion rates were also low among young people, particularly young women. For example, among young women, of those who had completed Class 1, only 93% had completed Class 3, and completion rates fell below 90% in Class 4. Among young men, in contrast, 95% had completed Class 4, and completion rates fell below 90% in Class 6. Declines in school completion became progressively steeper as the level of schooling increased. There was a particularly steep decline between Classes 8 and 11, suggesting that many youth discontinued their education at high school level. Indeed, just 32% of young men and 16% of young women in the state had completed high school. What is notable is that, at the time of interview, almost half of all unmarried youth (and very few married) were still in school or college. Among the unmarried, moreover, an almost equal percentage of young men and women were pursuing their education.

Cumulative percentage of youth who had completed each year of education (Classes 1 to 17), Jharkhand (combined), 2006



MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Cumulative percentage of youth who had completed each year of education (Classes 1 to 17), Jharkhand (urban), 2006

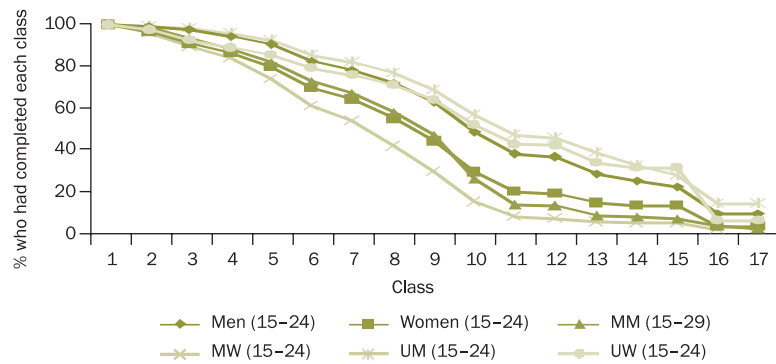


MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women



Leading reasons for never attending school among young men and women were economic (for example, the respondent was required for work on the family farm/business or for outside wage earning work, or the family could not afford school-related expenses) and attitude and perception-related (for example, education was unnecessary or the respondent was not interested in schooling).

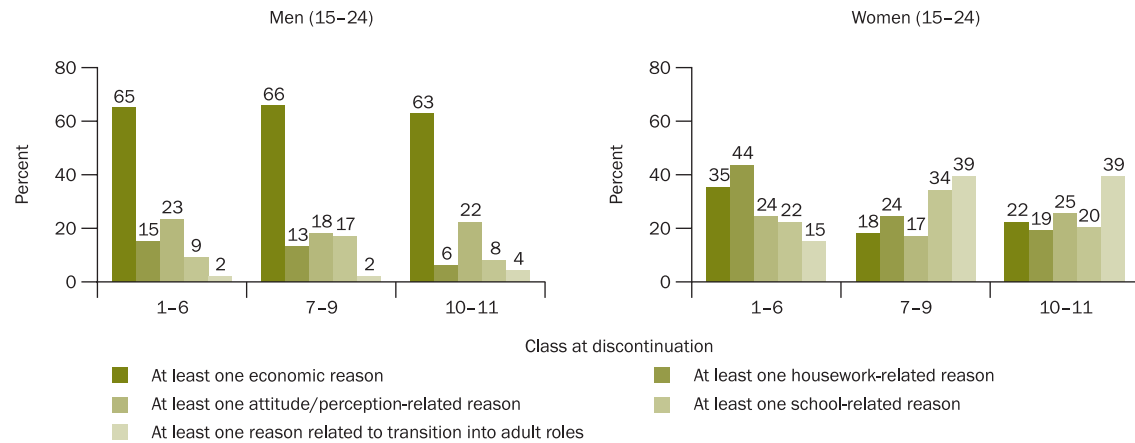
Cumulative percentage of youth who had completed each year of education (Classes 1 to 17), Jharkhand (rural), 2006



MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Housework-related factors (the respondent was required for care of siblings or housework) were additionally important reasons for young women never going to school.

Percentage of youth who had discontinued schooling by class when discontinued and reasons for discontinuation, Jharkhand, 2006



Among those who had ever been to school, gender differences in reasons for school discontinuation became more apparent. Leading reasons for school discontinuation among young men and women, irrespective of the level at which schooling was discontinued, continued to be economic issues and attitude or perception-related factors. However, for young women, other factors were also important: school-related reasons (for example, academic failure, distance to school, poor school quality and infrastructure) and housework responsibilities were significant factors for discontinuation at all levels. Of note, particularly, is that over one in five married young women who discontinued their education before completing Class 7 and half or more of married young women who discontinued their education in Classes 7-9 and 10-11, respectively, reported doing so in order to marry.



A gender divide was also observed in the type of educational facility that youth attended. While young men, typically attended co-educational facilities at all levels of education, young women were less likely to attend a co-educational facility at higher levels of schooling. Moreover, while fewer young women than men continued their education to high school and beyond, those who did so were more likely to attend private schools, particularly in rural areas.

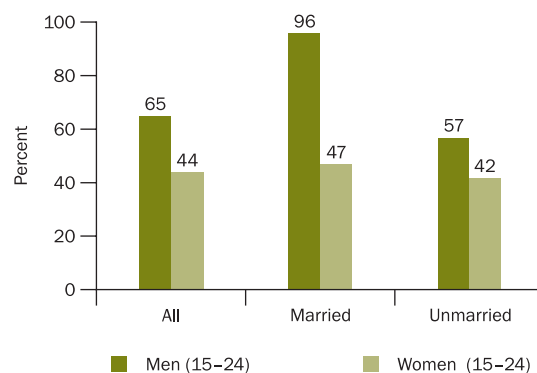
Differences were observed in the availability of amenities at educational facilities attended by youth who were still in school and those who had discontinued their education at various levels. For example, youth still studying were more likely, for the most part, to report the availability of water, toilets, playgrounds and libraries than were those who had discontinued their education. Schooling experiences also differed somewhat among those who had discontinued schooling and those who were studying at the time of interview. While differences in regular attendance and perceptions about academic load were less consistent, youth who were continuing their education were considerably more likely than those who had discontinued their education to report private tuition, and to have passed the last examination for which they had appeared.

Work

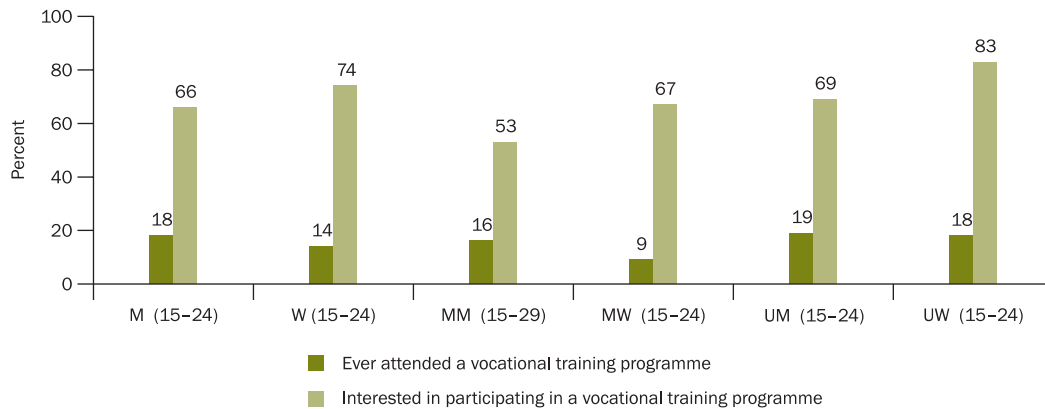
Work profiles suggest that two-thirds of young men and one-half of young women had at some time engaged in paid or unpaid work. Indeed, almost all married young men and three-fifths of unmarried young men had done so, compared with over half and two-fifths of married and unmarried young women, respectively. Likewise, larger proportions of youth in rural than urban areas had ever worked. While the majority of youth were engaged in paid work, considerable proportions of young men (27%) and women (33%) reported unpaid work on the family farm or business. Economic activity was often initiated at an early age: over one in four (29%) young men and one in three young women (35%) reported initiating work in childhood or in early adolescence (before age 15). Data on work participation in the 12 months prior to interview indicate that the majority of young men (57% of the unmarried and 96% of the married) and a substantial proportion of young women (42% and 47%, respectively) had engaged in paid or unpaid work at some point in the 12 months preceding the interview. The majority of young men (63%) who had worked in the year prior to interview had done so for the major part (at least six months) of the year. In contrast, among young women, just one-third had done so.

Findings also show substantial levels of unemployment among young men (22%) and women (26%). Unemployment tended to be considerably higher among unmarried than married young men; among young women, a reverse pattern was evident. Findings also indicate that unemployment was particularly high among young women in urban areas, particularly the married. Unemployment was also exceptionally high among the educated and economically better off.

Percentage of youth who engaged in paid or unpaid work in last 12 months, Jharkhand, 2006



Percentage of youth who ever attended a vocational training programme and percentage who were interested in participating in such programmes, Jharkhand, 2006



M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Youth were clearly interested in acquiring skills that would enable employment generation; two in three young men and three in four young women reported interest in vocational skills training. However, far fewer—just 18% of young men and 14% of young women—had attended at least one vocational training programme.

Media exposure

Large proportions of youth were exposed to the media, typically newspapers, magazines or books (88% of young men and 74% of young women with five or more years of education) and television (79% of all young men and 62% of all young women). Exposure to the internet was reported by many fewer (11% of young men and 6% of young women with five or more years of education).

Findings also suggest that about one in three young men and 4% of young women watched pornographic films, and one in five young men and 5% of young women accessed pornographic books and magazines. Over half of those who had been exposed to pornographic materials reported that they accessed these materials sometimes or frequently. Finally, between two-fifths and two-thirds of young men and women acknowledged the influence that media have on youth behaviours.

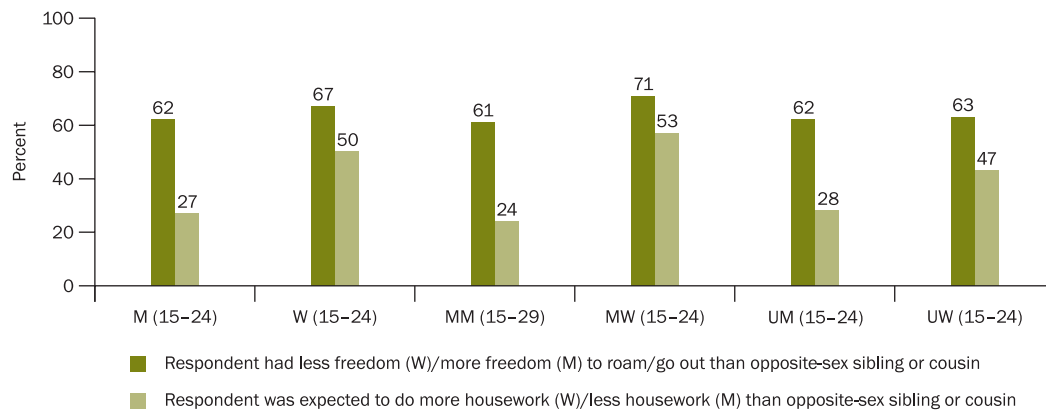
Socialisation experiences and communication with parents

Findings suggest, in general, the gendered nature of socialisation of youth. For example, responses from both young men and women indicate that unequal gender norms regarding freedom of movement prevailed in most study households, with about two-thirds of young men acknowledging that they had more freedom to go out than their sisters or female cousins did, and a similar proportion of young women agreeing that they had less freedom to go out than their brothers



or male cousins. Likewise, while parents appeared to control both young men’s and women’s social interactions, particularly those involving members of the opposite sex, young women were more likely than young men to experience such restrictions. For example, 71% of young men and 88–90% of young women reported expecting parental disapproval if they brought an opposite-sex friend to their home.

Percentages of youth reporting gendered socialisation experiences relative to an opposite sex sibling/cousin, Jharkhand, 2006



M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Note: For married respondents, questions referred to the period prior to marriage

Nonetheless, it is notable that large proportions of households did not discriminate between their sons and daughters in terms of expectations regarding housework. Just one-quarter of young men reported that they were expected to do less housework than their sisters or female cousins, and half of young women agreed that they were expected to do more housework than their brothers or male cousins. In addition, findings highlight that while young women were brought up with more restrictions, parents appeared to place considerable restrictions on young men’s interactions as well, including with same-sex peers.

Findings regarding communication with parents on issues relevant to youth—such as school performance, friendships, being teased or bullied, physical maturation, romantic relationships and reproductive processes—reiterate those from other studies, showing that such communication was far from universal. Moreover, sensitive topics—such as romantic relationships, reproduction and contraception among all youth, and even adolescent body change issues among young men—were rarely discussed with either parent.

That parent-child communication was restricted was also evident from responses to questions probing the most likely confidante on a range of topics from taking a job to boy-girl relationships. While parents were mentioned as leading confidantes on non-sensitive topics such as taking a job, they were rarely cited as leading confidantes on more sensitive matters. Moreover, while young women identified their mother as the most likely confidante on such matters as menstrual problems and experience of teasing, young men rarely identified a parent as a leading confidante



on matters relating to nocturnal emission or *swapnadosh*. Indeed, neither young men nor women identified a parent as a leading confidante on boy-girl matters.

Young people's family lives were marked by violence, both experienced and witnessed. About one in four youth had observed their father beating their mother. Many respondents reported experiencing a beating by a parent during adolescence; over two in five young men and one in seven young women reported such experiences.

Peer networks and interaction

Growing up was associated with close peer networks. Almost all youth reported having same-sex friends. Young men, however, reported larger networks of friends than did young women. Opposite-sex peer networks were less common but nonetheless reported by nearly one-quarter of young men and one-fifth of young women. Interaction with friends tended to be restricted to activities such as chatting and engaging in sports, although young men did tend to report engaging in outside activities such as going on picnics or to films. Indeed, findings suggest that youth derived an important measure of support from their peer networks on personal matters: friends were by far the leading confidante on boy-girl relationships for both young men and women, and on nocturnal emission for young men.

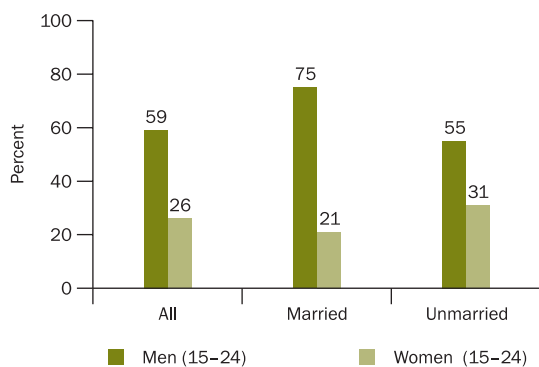
Agency and gender role attitudes

Findings highlight young women's limited agency. For example, just one in four young women reported independent decision-making on all three issues explored in the survey, namely, choice of friends, spending money and purchase of clothes for oneself. Likewise, freedom of movement even within the village or neighbourhood was not universal among young women; only three in five young women had the freedom to visit locations within their own village or neighbourhood unescorted. Moreover, just one in eight young women reported freedom to visit at least one place outside their village or neighbourhood unescorted, and one in 10 could visit a health

facility unescorted. Access to and control over financial resources tended to be limited among young women; just over two in five reported some savings and one in 10 owned a bank or post office savings account. Of those who owned an account, moreover, just half operated it themselves.

Within the sub-group of young women, findings indicate that the married were considerably more disadvantaged than the unmarried. By and large, compared to the unmarried, married young women were less likely to make decisions independently and have less freedom of movement; at the same time, they

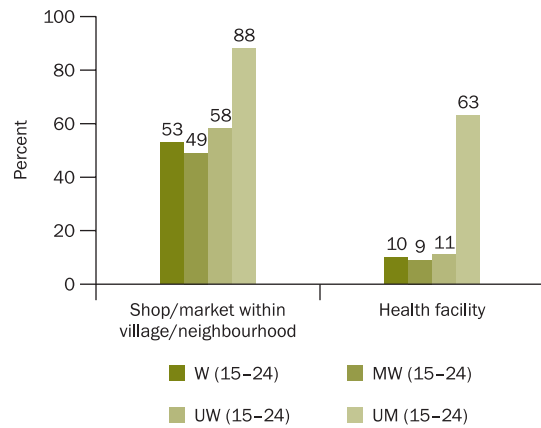
Percentage of youth who independently made decisions on choice of friends, spending money and buying clothes for themselves, Jharkhand, 2006



were more likely to hold inegalitarian gender role attitudes.

Also notable from the findings is the striking gender divide in all the dimensions of young people's agency explored in the survey. Young women were far more disadvantaged than young men. For example, even the least educated young man was more likely than the most educated young woman to report independent decision-making on all three issues explored in the survey. Likewise, although young women were more likely than young men to have money saved (44% and 22%, respectively), they were no more likely than young men to own a bank or post office savings account (11% and 13%, respectively). Moreover, they were much less likely than their male counterparts to operate the account themselves (51% versus 87%, of those who had an account).

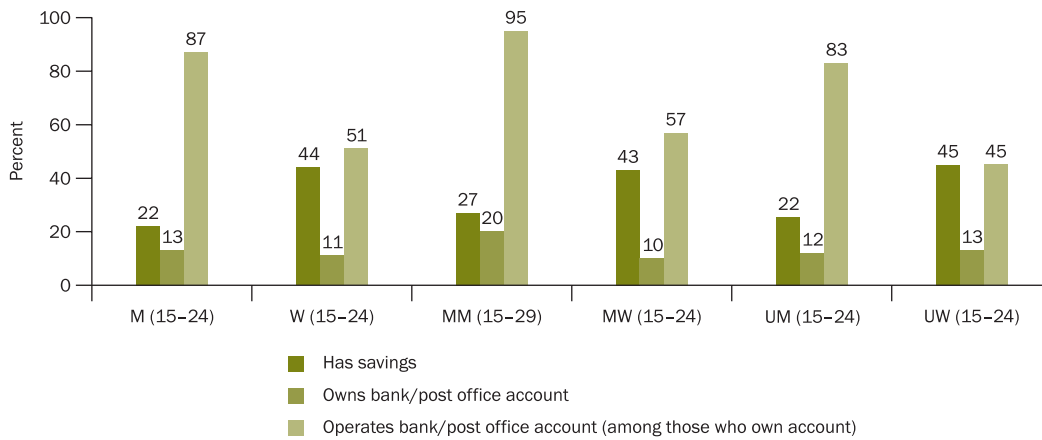
Percentage of youth allowed to visit selected places unescorted, Jharkhand, 2006



W=Women; MW=Married women; UW=Unmarried women; UM=Unmarried men;

Note: Questions regarding freedom of movement were not asked of married men, as their mobility is generally unrestricted

Percentage of youth who reported having any savings, owing an account in a bank or post office and operating the account themselves, Jharkhand, 2006

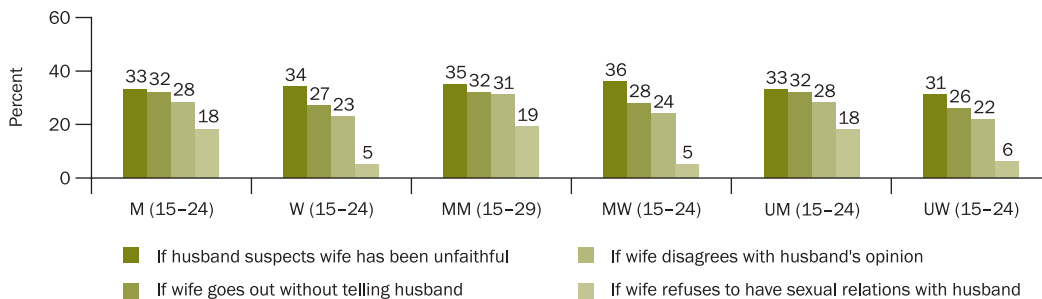


M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

While young men were not as disadvantaged as young women, findings indicate that many young men were also not able to exercise agency in their everyday lives. For example, only 59% of young men reported independent decision-making on all three issues explored in the survey. Similarly, young men's freedom to visit selected localities was far from universal; for example, just two in five unmarried young men were allowed to visit a place of entertainment or to attend a programme conducted outside their village or neighbourhood unescorted, and two in three were allowed to visit a health facility unescorted.



Percentage of youth who believed wife beating is justified in selected situations, Jharkhand, 2006



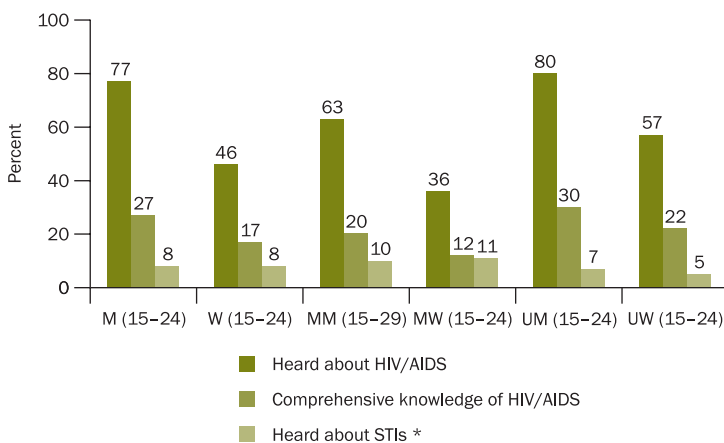
M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Although about half of both young men and women justified wife beating in at least one situation explored in the survey, relatively large proportions of youth espoused egalitarian gender role attitudes on other issues explored. Even so, it is notable that young men were consistently more likely than young women to report inequalitarian gender role attitudes on these issues.

Awareness of sexual and reproductive health matters

Findings underscore young people's limited awareness of most sexual and reproductive matters, ranging from how pregnancy occurs to contraception, HIV and safe sex practices. For example, just one-third of youth were aware that a woman can get pregnant at first sex, just 77% of young men and 46% of young women had heard about HIV/AIDS and only 8% of youth reported

Percentages of youth by awareness of HIV/AIDS, comprehensive knowledge about HIV/AIDS and awareness of STIs, Jharkhand, 2006



M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Note: *Other than HIV

awareness of STIs other than HIV. One in 10 youth and in the case of unmarried young women, as many as one in seven were not aware of any contraceptive method. Knowledge of legal issues related to marriage was similarly limited: 36% of young men and 47% of young women did not know that 18 years is the legal minimum age at marriage for females.

Even on topics about which young people were generally aware, findings show that in-depth understanding was limited. For example, while 89–90% reported awareness of at least one contraceptive method,

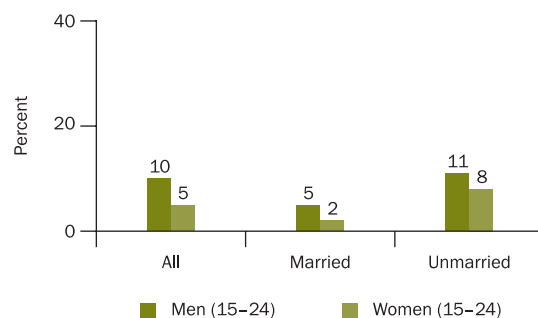


in-depth awareness of condoms and oral contraceptives, the methods most familiar to youth, was reported by just 68% and 31% of young men and 30% and 41% of young women, respectively. Likewise, only 27% of young men and 17% of young women had comprehensive awareness of HIV. Findings suggest, moreover, that unmarried young women were the most poorly informed about sexual and reproductive matters among youth, implying that many young women—and fewer young men—enter marriage uninformed.

Leading sources of information on sexual matters were friends and the media for both young men and women. In contrast, few youth cited teachers and health care providers, respectively, as a source of information, and few young men and somewhat more young women cited a family member. Among the leading current sources of information on contraception among young people who were aware of at least one method were similarly, peers and the media. Again, teachers and health care providers were relatively infrequently reported as such. Indeed, health care providers were cited as an important source of information on contraception by only one-fifth of married young men; they were far less likely to have provided information to the unmarried and even to married young women. Teachers were cited by even fewer. However considerable proportions of young women (42%) but hardly any young men cited family members as a leading source of information about contraception. In short, health care providers, teachers and family members—often assumed to be more reliable sources of information than peers or the media—were infrequently and inconsistently cited as sources of information on sensitive topics such as sexual matters and contraception by young people.

Few youth had attended family life or sex education programmes either in or outside the school setting—just one in 10 young men and one in 20 young women. Despite this, youth were overwhelmingly in favour of the provision of family life or sex education to young people; typically, young people preferred to receive this education from a professional (health care provider, teacher and so on). Findings suggest, moreover, that youth who had undergone family life or sex education were indeed more knowledgeable about sexual and reproductive matters than those not exposed to this education.

Percentage of youth who received family life or sex education, Jharkhand, 2006

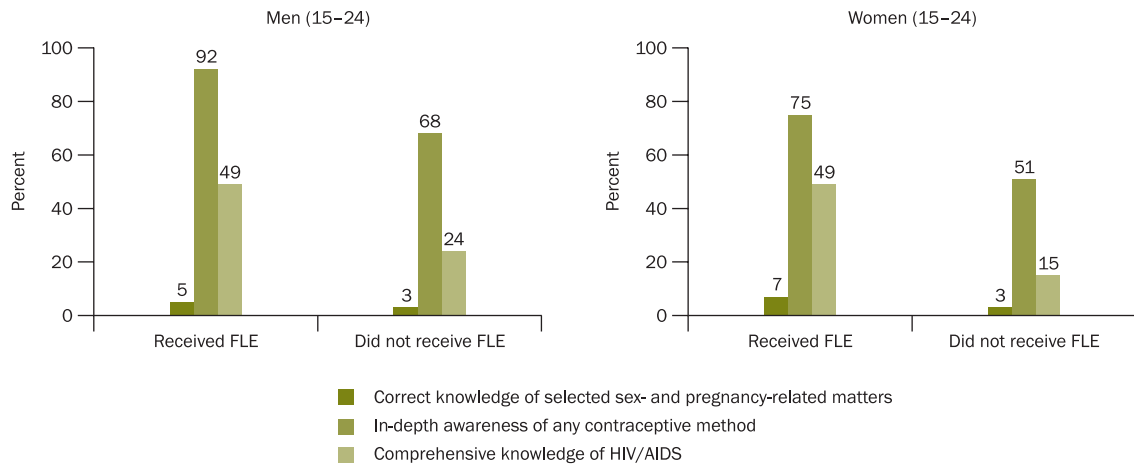


Pre-marital romantic relations

Findings confirm that despite norms prohibiting pre-marital opposite-sex mixing, opportunities do exist for the formation of pre-marital romantic relations. Indeed, over one in four young men and women had received or made a “proposal” for a romantic relationship (27–28%), and over one in five young men and one in seven young women had been involved in a romantic partnership. Patterns of pre-marital romantic relationships suggest that where partnerships occurred, they were initiated at an early age and were usually hidden from parents but not from peers. Notable



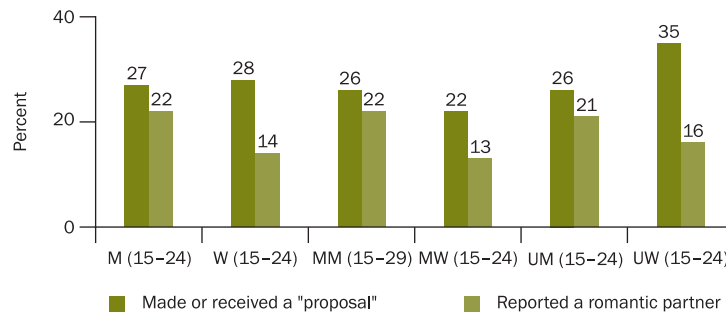
Percentage of youth reporting knowledge of selected sexual and reproductive health matters according to whether they had or had not received family life or sex education, Jharkhand, 2006



Note: FLE: Family life or sex education

disparities in expectations of a longer-term commitment emerged that show that young women were considerably more likely than young men to have expected a romantic relationship to lead to marriage. The experiences of the married suggest, moreover, a disconnect between intentions and reality: among those who reported the intention to marry their pre-marital partner, just three-quarters of young women and one-third of young men had done so.

Percentage of youth who had made or received a “proposal” for romantic partnership formation and percentage who had an opposite-sex romantic partner, Jharkhand, 2006



M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

There was a clear progression in reported physical intimacy and sexual experience with romantic partners: while over 90% of young men had held hands with a romantic partner, about two-fifths had engaged in sexual relations with their partner; and among young women, while four in five had held hands with a romantic partner, two in five had engaged in sexual relations with their partner. It is notable that unlike many previous studies, gender differences in reports of pre-marital sex with a romantic partner were narrow. Partner communication and negotiation

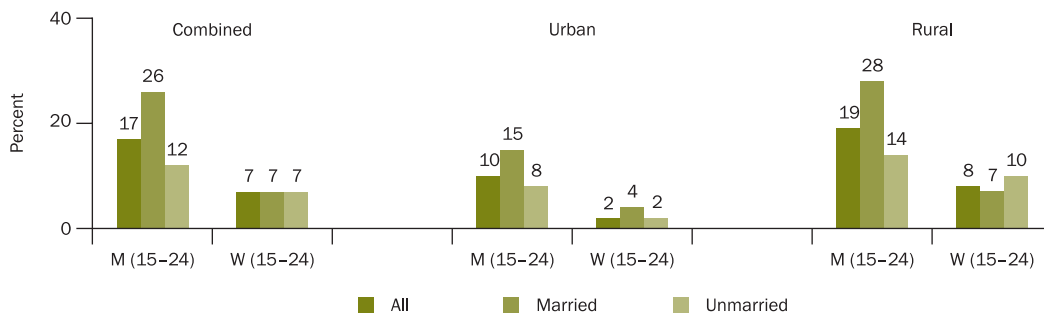


regarding safe sex were rare, and the vast majority had engaged in unprotected sex. Almost one in five young women who had engaged in sexual relations with a romantic partner reported that their opposite-sex romantic partner had forced them to engage in sex the first time.

Pre-marital sexual experiences in romantic and other relationships

In total, 17% of young men and 7% of young women reported the experience of pre-marital sex within romantic and/or other partnerships. Similar proportions of young men and women—8% and 7%, respectively—had initiated first sex before age 18; however, youth in rural areas had initiated pre-marital sexual relations earlier than their urban counterparts. Moreover, initiation into pre-marital sexual activity increased as young people transitioned from early into late adolescence, and further as they transitioned into young adulthood.

Percentage of youth reporting pre-marital sex, according to residence, Jharkhand, 2006



M=Men; W=Women

While sex with a romantic partner characterised pre-marital experiences for many of the sexually experienced, findings suggest that young men, but not young women, also engaged in sex in other contexts; other partners reported by young men included, mainly, sex workers, married women and casual partners. Many of the pre-marital sexual experiences reported by youth were risky, for example, one-quarter of young men and one-third of young women reporting pre-marital sex had engaged in sex with more than one partner. Moreover, consistent condom use was limited—only 7% of young men and 2% of young women reported condom use in all pre-marital encounters.

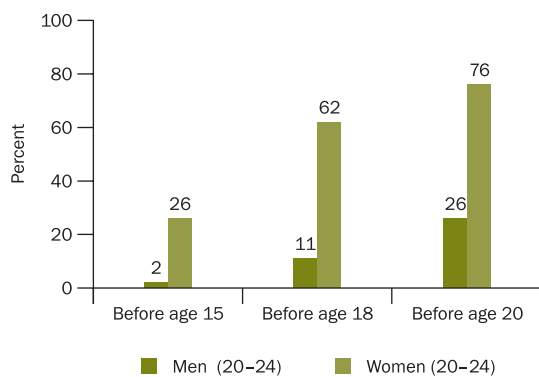
We acknowledge that youth, especially young women, may not report sexual experience in a survey situation. Hence, the Youth Study supplemented a series of direct questions with an opportunity to report sexual experience in an anonymous format. Surprisingly, findings suggest that a larger percentage of sexually active young men than women reported pre-marital sex only in the anonymous format. In total, direct questioning supplemented by self-reporting in an anonymous format provided considerably higher estimates of sexual experience among young men than did face-to-face questioning alone or anonymous third-party reporting of peer behaviours among young men. However among young women, differences between reporting only in face-to-face interviews, in face-to-face interviews supplemented by self-reporting in an anonymous format and anonymous third-party reporting provided largely similar estimates of pre-marital sex.



Transition to marriage and early married life

Findings indicate that although most youth preferred to marry after age 18, significant minorities of young women also expressed a preference to marry before that age, indicating an adherence to norms favouring child marriage even among youth in this setting. Reiterating the fact that early marriage continues to characterise the lives of many young women, findings show that among young women aged 20–24 years, as many as one in four was married before age 15, three in five before age 18 and three in four before age 20. Even though early marriage was less prevalent among young men, one in 10 young men aged 20–24 years was married before age 18 and one in four before age 20.

Percentage of youth aged 20–24 who were married before selected ages, Jharkhand, 2006



Not only did marriage occur at young ages but it was also often arranged without the participation of young people themselves, particularly young women. Almost all youth reported arranged marriages. As many as one in eight young men and two in five young women reported that their parents did not seek their approval while determining their marriage partner. Hence, not surprisingly, reported pre-marital acquaintance was limited. Just one in seven youth reported that they had ever had a chance to meet and interact with their spouse-to-be alone prior to marriage. About four in five married youth reported that they had met their spouse for the first time on the wedding day.

Compounding the lack of pre-marital acquaintance was the lack of awareness of what to expect of married life, reported by two-thirds of young men and three-quarters of young women.

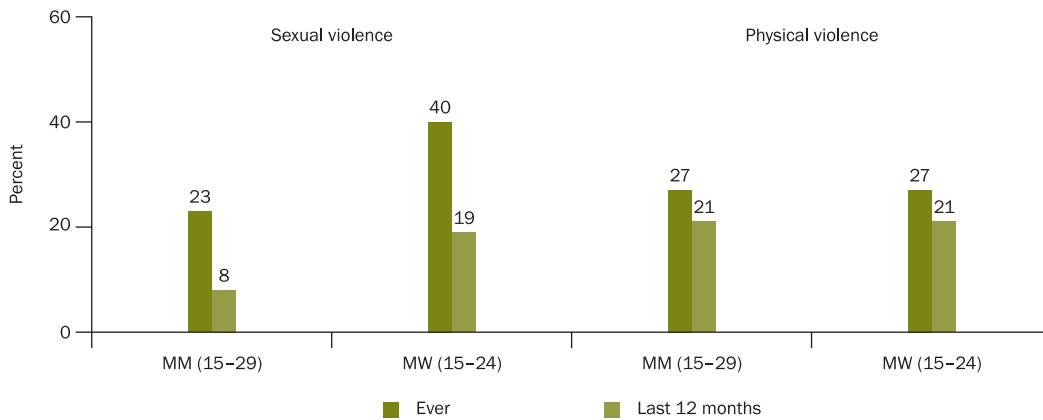
Despite the existence of laws against payment of dowry, this practice characterised the marriages of over two-thirds of young men and women. Findings also show that families of urban youth appeared no less likely to conform to traditional practices, such as payment of dowry, than their rural counterparts.

Reports of marital life suggest that spousal communication was far from universal and that marital life was marked by violence. For example, couple communication on contraceptive use was reported by just three in five women and one-third of young men, undermining married young people's ability to adopt safe sexual and reproductive health practices. Physical violence and forced sex within marriage were reported by considerable proportions of youth. For example, more than one-quarter of young women reported that they had ever faced physical violence perpetrated by their husband and a similar percentage of young men reported perpetrating violence on their wife. Recent violence was likewise reported by one-fifth of young women and men. Sexual violence was also reported. Indeed, over one-third of young women reported that their first sexual experience within marriage had been forced. Overall, two in five young women reported ever being forced to engage in sex by their husband; as many as one in four young



men reported forcing their wife to engage in sex. Recent sexual violence was experienced by one in five young women and perpetrated by almost one in 10 young men.

Percentage of married young women reporting experience of physical and sexual violence perpetrated by their husband and percentage of married young men reporting perpetration of physical and sexual violence against their wife, Jharkhand, 2006



MM=Married men; MW=Married women

While the Youth Study did not explore extra-marital sexual experiences in detail, the available data indicate that 2% of young men reported an extra-marital sexual encounter. In contrast, hardly any young women reported an extra-marital sexual encounter.

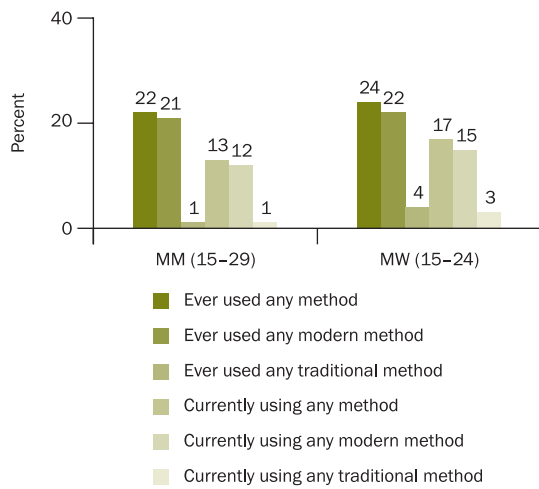
Contraceptive practice and pregnancy experience

Contraceptive use at any time within marriage was limited, reported by 22% of young men and 24% of young women. Moreover, just 13% of young men and 17% of young women reported current use of contraception. Among contraceptive methods typically used, oral contraceptives and condoms were most likely to be reported; however, significant minorities of young women had already undergone sterilisation at the time of interview. Few young people practised contraception to delay the first birth—just 12% of young men and 5% of young women. Not surprisingly, pregnancy typically occurred within a year of marriage for half of young women and men who reported that they or their wife had been pregnant at least once. Moreover, large proportions of youth reported experiencing unintended pregnancy. For example, among young women who were not pregnant at the time of interview and young men whose wife was not pregnant at the time of interview, 31% and 24%, respectively, reported that the last pregnancy was mistimed or unwanted.

Circumstances of the first birth suggest that institutional delivery and skilled attendance at delivery were limited: only 23-24% of first births were delivered institutionally and 41-42% reported delivery by a skilled attendant.



Percentage of married youth reporting lifetime and current use of contraceptive methods within marriage, Jharkhand, 2006



MM=Married men; MW=Married women

Findings also show that although most youth wanted one child of each sex, son preference was evident. Over one-third of youth preferred to have more sons than daughters. In contrast, just 3–6% preferred to have more daughters than sons.

Substance use

Findings show that substantial proportions of young men reported the consumption of tobacco and alcohol; two-fifths of young men reported tobacco consumption and over one-fifth reported alcohol consumption. Drug use was reported by less than 2% of young men. Few young women reported that they consumed any of these substances.

Health seeking behaviour

Although youth is a generally healthy period of life, significant minorities reported experiencing general, mental, and sexual and reproductive health problems in the period preceding the interview. For example, 17% of young men and 26% of young women had experienced high fever, and 12% and 17%, respectively, reported the experience of symptoms of genital infection. Moreover, about one in eight young women reported menstrual problems; at the same time, one-fifth of young men reported anxiety about nocturnal emission. Finally, responses indicative of mental health disorders were reported by 28% of young men and 19% of young women.

With regard to care seeking for general and sexual and reproductive health problems, patterns varied by type of problem experienced. While the large majority of those who experienced high fever, for example, sought care, many fewer sought care for sexual and reproductive health problems. Findings also show that care seeking for health problems tended to be more limited among young women than men, irrespective of the type of problem experienced. Of those who had sought treatment, the majority had sought advice or treatment from a private facility or provider, irrespective of the type of problem experienced. However, it is notable that over one-quarter of youth who sought care for symptoms of genital infection or menstrual problems had used home remedies or the services of traditional or untrained providers. In the case of anxiety about nocturnal emission, moreover, young men rarely sought advice from a health care provider, preferring to do so from peers.

Findings suggest that youth were shy about seeking sexual and reproductive health services. For example, many youth, including the married, reported that they would indeed hesitate to approach a health care provider or a pharmacy/medical shop for contraceptive supplies.

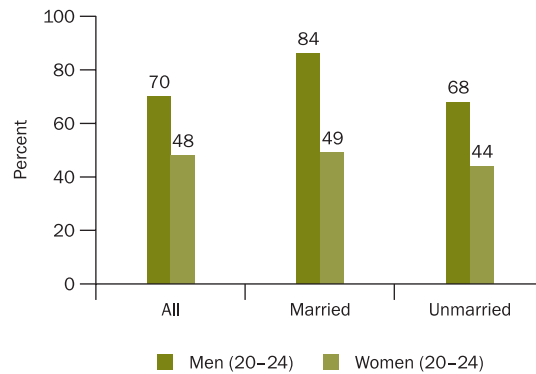


Finally, small minorities (1–2%) reported that they had undergone HIV testing. Youth were, however, overwhelmingly in favour of pre-marital HIV testing.

Participation in civil society and political life

Findings highlight the limited participation of youth in civil society. Although a number of programmes are organised by the government and NGOs at the community level in which youth can participate, few youth (10–12%) reported familiarity with these programmes. Even fewer youth—6% of young men and 3% of young women—reported participating in such programmes. Considerably more young men (31%) and about as many young women (5%) reported that they had participated in community-led activities such as cleanliness drives, and the celebration of festivals and national days. Finally, just 9% of young men and 4% of young women reported membership in organised groups.

Percentage of youth aged 20 or above who voted in last election, Jharkhand, 2006



Participation in political processes was also far from universal. Among those eligible to vote, 70% of young men and 48% of young women had cast their votes in the most recent election. While most youth perceived that one could vote freely and without fear and pressure, as many as 19% of young men and 14% of young women felt that one could not vote freely. Moreover, 63% of young men and 41% of young women reported disillusionment with the commitment of political parties to work for change at the community level.

Expressions of secular attitudes varied. Over 90% of young men and over 80% of young women reported that they mixed freely with individuals of different religions and castes. However, only 63% of young men and 45% of young women would eat together with a person of a different caste or religion, just under 40% would talk to a person who has had an inter-caste marriage and only 29% of young men and two-fifths of young women agreed that it was best to tolerate rather than punish someone who showed disrespect to their religion.

Considerable proportions of young men and women acknowledged that physical fights among young men and also among young women did occur in their village or urban neighbourhood. About one-fifth of young men and 4% of young women reported that they had been involved in a physical fight in the year preceding the interview.

The four leading problems facing youth expressed by both young men and women were unemployment, poverty, lack of amenities and lack of educational opportunities. However, young people's perceptions of the leading problems facing youth varied enormously by sex. Among young men, the majority reported difficulty in finding employment as the leading problem, followed by concerns about poverty more generally, lack of amenities or infrastructure and lack



of educational opportunities. In contrast, the leading problem expressed by young women was lack of amenities and infrastructure, and to a lesser extent, poverty more generally, difficulties in finding employment, and lack of opportunities for education.

Recommendations for programmes

Findings presented in the sections above underscore the fact that youth face numerous challenges while making the transition to adulthood. These challenges call for programme interventions at the youth, family and service delivery levels. Key programme recommendations emerging from this study are highlighted below.

Strengthen efforts to achieve universal school enrolment and increase levels of school completion

Youth Study findings highlight that school enrolment was far from universal among young people in the state and that school completion rates were also relatively low, particularly among young women. The Jharkhand Youth Policy has articulated the need for universal school enrolment and the recently enacted Right to Education Bill has made education compulsory for all children. What is required now, particularly if the state is to achieve the Millennium Development Goal of ensuring universal primary school completion, are programme actions to implement these commitments. While the achievement of universal school enrolment and primary school completion are key goals, the importance of high school education in enabling youth to make a successful transition to adulthood underscores the need, at the same time, for efforts to overcome barriers to high school completion. The stark gender divide and rural-urban divide observed in school enrolment and completion call, moreover, for efforts that target female children and children in rural areas.

Wide-ranging efforts are needed to address the barriers inhibiting school enrolment and completion in the state. Efforts must be made, for example, to address the economic pressures that dissuade parents from enrolling their children in school and from keeping them in school once enrolled. Conditional grants and targeted subsidies that encourage school enrolment and completion among disadvantaged groups need to be considered. At the same time, activities are needed that are directed at parents that promote positive attitudes towards education and school completion, raise parents' aspirations for the education of their children and encourage greater parental involvement in their children's education. School-related factors must also be addressed. Activities must address such barriers as distance to school, poor infrastructure and quality of education, and academic failure. The state government has launched various schemes to address these barriers (for example, the bicycle scheme for girls); however, it is important that the effectiveness of these schemes is evaluated and promising lessons are assimilated and scaled up.

There is also a need to incorporate livelihoods skills building models within the school setting and provide opportunities for those in school to gain market-driven job skills that will raise young people's aspirations regarding their education and career. Moreover, investments in improving the quality of the schooling experience are needed that focus on providing better training and



ensuring accountability for teachers. Given the large proportions of youth reporting that schooling had been interrupted because they were required for work on the family farm or business or for housework, efforts are needed to adjust school timings, or to establish evening schools, to enable children to accommodate their work commitments without sacrificing their education.

Findings indicating that early marriage is an important reason for school discontinuation among adolescent girls emphasise the fact that programme commitments outside the education sector are also critical to the achievement of universal school enrolment and completion. Specifically required are programmes that seek to critically examine norms surrounding marriage and to eliminate the practice of early marriage. Explorations of subsidies and cash transfers that link school retention and delayed marriage among girls are needed. Moreover, findings suggest that married young women remain considerably disadvantaged in terms of school completion. Interventions are needed that give married young women a second chance to obtain a basic education.

Invest in promoting youth employment

Findings of the Youth Study that considerable proportions of youth had initiated work in childhood reiterate the recommendation highlighted above regarding the need to provide conditional grants and targeted subsidies to disadvantaged groups, which would encourage parents to opt for schooling over work for their children. At the same time, the finding that youth were poorly equipped for employment for which there is a market demand—few had completed high school, even fewer had attended a vocational training programme, those who were engaged in economic activity were working largely in agricultural and unskilled non-agricultural activities and considerable proportions of youth, particularly the educated, were indeed unemployed—calls for the state to significantly strengthen investments in programmes that enable youth to make successful transitions to work roles. Enhancing employability would depend to a considerable extent on improvements in educational attainment discussed above; it would also require greater investment in enabling youth to acquire vocational skills. Formal mechanisms must be developed that provide opportunities to youth to acquire skills for which there is an established demand, and that link eligible youth to market opportunities. These efforts need to promote self-employment and entrepreneurship through various livelihood schemes, for example, providing soft loans to youth to enable them to set up their own business enterprises. Also required are efforts to ensure that existing programmes aimed at job creation do indeed reach young people, and pay special attention to the employment needs of young women.

Promote youth agency and gender equitable norms among youth

Findings presented in this report highlight the limited agency of young women and the persistence of gender double standards among youth, and call for multi-pronged interventions to promote gender equitable norms and practices that are directed at young women, young men, their families, communities, and the educational, labour and health systems. At the same time, programmes are also needed that promote life skills education for young women, both unmarried and married, as well as for young men, many of whom were not able to exercise agency in their everyday lives.



Provide opportunities for formal saving, especially for young women

Findings that few youth owned a savings account and that among those who did own an account, young women were far less likely than young men to operate the account independently call for programmes that inculcate a savings orientation among both young men and young women, that offer savings products that are attractive and appropriate to the small and erratic savings patterns of young people and that enable young women in particular to overcome obstacles related to owning and controlling savings products.

Promote youth participation in civil society and political processes and reinforce secular attitudes

Findings reveal that for many youth in Jharkhand, opportunities to engage in civic and political processes were limited and secular attitudes were not uniformly observed. Programmes are needed—at the school, college and community levels, through national service programmes, sports and other non-formal mechanisms—that encourage civic participation, incorporate value building components and reinforce secular attitudes and values that espouse responsible citizenship.

Provide family life or sex education for those in school and out-of-school

Youth Study findings on young people's limited understanding of sexual and reproductive matters, their articulated demand for such information, and the fact that substantial minorities had engaged in sexual risk taking call for school-based family life or sex education for those in school and community-based expert-led education for those out-of-school. These programmes should provide information to youth on sexual and reproductive matters and rights, as well as enable young people to correctly understand and assess the sexual and reproductive risks they face and adopt protective actions. Attention must simultaneously be paid to the training of trainers. Finally, in view of the finding that the media are a major but not necessarily reliable source of information on sexual and reproductive matters for youth, efforts must be made to ensure that media content is accurate and comprehensive.

Ensure that the transition to sexual life is safe and wanted

Findings that a sizeable proportion of young men and some young women reported having engaged in sex before marriage, and that for many youth pre-marital sexual relations were uninformed, unsafe or unwanted, underscore the need to build sexual and reproductive health awareness of young people, and to develop their skills in negotiating safe sex and communicating with partners on sexual and reproductive matters. At the same time, programmes must make available appropriate family planning and infection prevention services for both married and unmarried young men and women in a manner acceptable to them.

Intensify efforts to eliminate the practice of early marriage

There is a need for action to delay marriage. Findings indicate an adherence, even among youth, to the traditional cultural norm of child marriage, and the practice of early marriage not only among young women but also, to a lesser extent, among young men. These findings call for



measures that go beyond information campaigns to address the underlying factors—social norms and economic constraints—driving early marriage. Strategies are needed that mobilise communities to help parents resist pressures that foster the practice of early marriage; that establish new norms and practices; as well as that initiate campaigns highlighting the adverse consequences of early marriage and how it is a violation of the rights of the child. Community mobilisation efforts must involve youth themselves, their families, as well as influential persons in the community, including religious and political leaders. Equally important is to ensure greater commitment on the part of law enforcement agencies to enforce existing laws on the minimum age at marriage and the registration of marriages, and to levy penalties on violators. Allowing anonymous reporting, making law enforcement agencies and others aware that the practice of early marriage is not a minor violation, and making the guidelines for penalties clear to enforcement agencies and the wider community are possible steps in this direction.

Efforts to delay marriage also require providing girls with viable alternatives to marriage in the form of accessible and quality schooling and opportunities to build and use livelihood skills. Working with the education sector to make schooling for girls more accessible, and to make classrooms gender-sensitive and responsive to the needs of girls and the concerns of their parents is important. At the same time, it is necessary to provide livelihoods training within and outside the educational system.

Parents must also be apprised of the need to involve children in marriage-related decisions and enable them to interact with their prospective spouse prior to the wedding day. Parents must also be made aware of the adverse physical and mental health consequences of early marriage and the adverse experiences of many young women (and some young men) who were married early or who were unprepared for marriage.

Enable married young women to exercise greater control over their lives

Findings on the multiple vulnerabilities faced by married young women underscore the need for programmes that support young women, especially the newly-wed, acknowledging that their situation and needs may differ from those of married adults. Married young women are notably isolated, have little decision-making authority and have few sources of support. They have little communication with their husband, and notable proportions have experienced physical and sexual violence perpetrated by their husband.

Efforts are needed that address these vulnerabilities. Programmes need to break down the social isolation of married young women, encourage couple communication, build negotiation and conflict management skills early in marriage and enable married young women to have greater control over resources. Intervention models exist in India that have attempted to address these needs; these models should be reviewed and scaled up as appropriate.

Support newly-weds to postpone the first pregnancy and promote pregnancy-related care among those who become pregnant

Many young women in Jharkhand experienced their first pregnancy soon after marriage. Programmes are needed that inform youth about their pregnancy postponement options and



enable them to access appropriate contraception. At the same time, providers must be trained and charged with the responsibility of reaching married young women and men—including those who have not yet experienced pregnancy—with information regarding contraception and other reproductive health matters as well as contraceptive supplies. The finding that the first and often the most risky delivery was only occasionally conducted by a skilled attendant underscores the need for programme attention on newly-married and first-time pregnant young women. Moreover, the finding that married young women lack the freedom of movement to seek health care underscores the need for health workers to reach these women in their homes.

Create a supportive family environment

At the family level, findings of limited interaction and social distance between parents and young people while growing up and the gendered nature of socialisation experiences call for efforts to create a supportive environment for young people. Programmes are needed that address parental inhibitions about discussing sexual matters with their children, encourage greater openness and interaction between parents and children and enable the adoption of gender-egalitarian child-rearing practices.

Reorient service provision to address the unique needs of unmarried and married young women and men

Although the National Rural Health Mission's Reproductive and Child Health Programme has advocated special services for youth, including the unmarried, these services had not reached many youth in our survey. Action is needed that sensitises health care providers about the special needs, heterogeneity and vulnerability of unmarried and married young women and men, and orients them to the need for developing appropriate strategies to reach these diverse groups, including young newly-weds. Programmes must be inclusive of unmarried young people and recognise their need and right to sexual and reproductive health and related information and services. Counselling and contraceptive services must be made available to unmarried young people in a non-threatening, non-judgmental and confidential environment. Indeed, these findings call for the implementation of strategies outlined under the Reproductive and Child Health Programme.

The finding that few youth had sought care for health problems, and those who had sought care preferred to seek services from the private rather than the public sector, suggests the need to explore the feasibility of implementing various financing strategies, for example, health insurance, competitive voucher schemes and community financing schemes, which will allow youth to have a wider choice of providers and enhance the possibility of obtaining quality care. At the same time, efforts are needed to address the mental health needs of youth, for example, screening young people for mental health disorders when they avail of other primary health services, including sexual and reproductive health services, and to refer youth with such symptoms to appropriate health facilities and providers.



Directions for future research

Findings presented in this report provide a broad picture of youth in Jharkhand. At the same time, findings have raised a number of issues that require further investigation, particularly with regard to the determinants and consequences of youth behaviours and practices during the transition to adulthood. While the Youth Study is indeed a rich source of data that will enable investigators to fill many of the information gaps identified, there are several gaps in knowledge that will require additional research.

Youth Study findings highlight the need for further research in terms of formative research that explores in greater depth factors impeding successful transitions to adulthood, in the areas, for example, of school enrolment and completion, economic activity, sexual relations, marriage and parenthood. Research is also needed that explores the role of peers, socialisation practices, young people's access to information and services, and the ways in which these factors contribute to or impede young people's ability to make successful transitions. A general research recommendation is the urgent need for prospective or panel study designs that follow a cohort of adolescents at regular intervals up to age 24. Prospective study designs would enable researchers to take a life course approach, identify, with compelling data, the factors responsible for healthy transitions to adulthood and point to the ways in which the situation and experiences of youth influence their life course at later ages.

Operations research is also needed. While a number of interventions have been initiated in several states of India, including Jharkhand intended to address the needs of youth—for example, addressing the needs of married girls, changing the norms of masculinity and femininity, encouraging education for girls, developing market-based vocational skills and providing family life and sex education—few of these have been rigorously evaluated. Urgently needed, therefore, are carefully designed and rigorously tested intervention models that not only pay attention to the content and delivery of the intervention but also measure effectiveness and acceptability—in short, that will enable a shift from the implementation of *promising* to *best* practices in addressing young people's needs. Ultimately, research is needed that monitors the scaling up of successful interventions in terms of their impact on young people's lives.

In brief, the Youth Study has documented, for the first time, the multi-faceted situation of youth in Jharkhand. The study alerts us to the many challenges confronting youth and their ability to make a successful transition to adulthood. It emphasises the heterogeneity of youth, not only in terms of their situation but also with regard to their stated needs and preferred mechanisms to address these needs. Programmes must recognise the heterogeneity of young people and interventions and delivery mechanisms should be appropriately tailored to meet their needs. Evidence presented here provides not only a blue-print for the programming needs of youth in Jharkhand but also a base-line by which to measure the impact of programmes intended to address youth needs.





Youth in India: Situation and Needs

Key indicators by sex of respondents, 2006-2007: Jharkhand

Key indicators	Men (15-24)	Women (15-24)	Men (15-24)	Women (15-24)	Men (15-24)	Women (15-24)
	Combined		Urban		Rural	
Number of respondents	2,637	5,414	1,656	2,415	981	2,999
Socio-demographic profile						
1. Completed 7 years of schooling (%)	26.9	26.6	17.2	20.3	30.4	28.7
2. Not in school at age 12 (%)	20.1	46.8	10.8	22.2	23.6	55.3
3. Engaged in paid and/or unpaid work in last 12 months (%)	65.1	44.1	51.9	19.7	70.1	52.6
4. Engaged in paid work in last 12 months (%)	57.4	29.7	46.0	14.8	61.6	34.8
5. Unemployment rate (as % of labour force)	21.9	25.6	25.4	38.5	20.7	22.0
6. Mother discussed reproductive processes with respondent (%)	0.3	6.3	0.3	5.1	0.3	6.7
7. Father discussed reproductive processes with respondent (%)	0.3	0.1	0.3	0.1	0.4	0.1
8. Talked to mother about friends (%)	48.8	63.4	60.1	74.5	44.5	59.5
9. Talked to father about friends (%)	46.6	25.2	55.9	35.6	43.1	21.5
Young people's control over their own lives						
10. Had a bank account (%)	22.4	44.3	28.9	60.8	20.0	38.6
11. Took independent decisions about buying clothes (%)	68.3	34.2	74.5	48.7	66.1	29.2
12. Allowed to visit friends within village/neighbourhood unescorted (%)	N.A.	48.3	N.A.	58.5	N.A.	44.7
13. Allowed to visit health facility unescorted (%)	N.A.	10.3	N.A.	13.8	N.A.	9.1
Sexual and reproductive health knowledge						
14. Correct knowledge of legal minimum age at marriage for females (%)	63.5	52.7	71.4	74.4	60.5	45.2
15. Aware that a woman can get pregnant at first sexual intercourse (%)	36.2	35.4	31.1	30.2	38.1	37.2
16. Aware of:						
a. Condom (%)	84.6	57.2	95.3	79.8	80.6	49.4
b. Oral contraceptive pills (%)	67.1	74.3	82.9	90.9	61.2	68.5
c. IUD (%)	27.8	34.4	38.0	51.9	24.0	28.3
d. Withdrawal (%)	6.9	17.5	7.8	16.3	6.6	17.9
17. Correct specific knowledge ¹ of:						
a. Condom (%)	67.7	30.4	78.0	39.3	63.8	27.3
b. Oral contraceptive pills (%)	31.0	40.8	34.8	53.1	29.5	36.6
c. IUD (%)	11.7	15.8	17.6	22.6	9.5	13.4
d. Withdrawal (%)	4.6	14.0	6.2	13.7	4.1	14.1

Key indicators	Men (15-24)		Women (15-24)		Men (15-24)		Women (15-24)					
	Combined				Urban				Rural			
	Men (15-24)	Women (15-24)	Men (15-24)	Women (15-24)	Men (15-24)	Women (15-24)	Men (15-24)	Women (15-24)				
18. Reported that condoms do not reduce sexual pleasure (%)	24.6	22.0	27.4	18.8	23.2	23.9						
19. Comprehensive knowledge of the conditions under which abortion is legal ² (%)	6.3	5.6	5.8	6.5	6.5	5.3						
20. Heard about:												
a. HIV/AIDS (%)	76.5	45.7	92.5	78.1	70.5	34.4						
b. STI/RTI (%)	7.8	8.3	9.9	8.0	7.0	8.4						
21. Comprehensive knowledge of HIV ³ (%)	26.5	16.6	39.6	33.7	21.5	10.7						
Pre-marital romantic and sexual relationships												
22. Ever had an opposite-sex romantic partner (%)	22.2	14.3	24.7	14.9	21.2	14.1						
23. First spent time alone with an opposite-sex romantic partner before age 15 (%)	38.4	53.2	34.4	41.3	40.3	57.5						
24. Ever had pre-marital sexual relations with an opposite-sex romantic partner (%)	8.5	5.7	4.7	1.9	10.0	7.0						
25. Ever had pre-marital sex ⁴ (%)	16.6	6.7	9.5	2.4	19.3	8.3						
Self-reported health problems												
26. Anxiety about <i>swapnadosh</i> /nocturnal emission (men) in last 12 months (%)	20.1	N.A.	21.5	N.A.	19.6	N.A.						
27. Menstrual problems (women) in last 3 months (%)	N.A.	11.5	N.A.	10.1	N.A.	12.0						
28. Symptoms of genital infection in last 3 months ⁵ (%)	11.5	16.8	8.1	13.8	12.7	17.8						
Youth life-style												
29. Consumed alcohol at least once in last month (%)	8.9	2.4	7.7	0.9	9.3	2.9						
30. Consumed drugs at least once in last month (%)	0.4	0.0	0.4	0.0	0.4	0.0						
31. Consumed tobacco products at least once in last month (%)	36.1	3.8	31.6	1.8	37.7	4.5						
32. Involved in physical fights in last 12 months (%)	17.9	4.2	18.4	3.8	17.7	4.4						
33. Watched television often (%)	17.3	20.4	37.6	47.3	9.6	11.1						
Programme participation and voting experience												
34. Participated in youth-related programmes implemented in the community in last 3 years (%)	5.8	2.8	5.6	2.4	5.9	2.9						
35. Voted in last election ⁶ (%)	70.4	47.7	66.9	41.8	71.7	49.7						
Marriage												
36. Youth aged 20-24 married before age 18	10.9	61.7	4.0	37.5	13.5	69.7						

Note: ¹Among all youth. ²Includes being aware that: (1) termination of pregnancy is legal for married women; (2) termination of pregnancy is legal for unmarried women; (3) aborting a fetus after 20 weeks of pregnancy is illegal, and (4) sex-selective abortion is illegal. ³Includes: (1) identification of two major ways of preventing HIV (using condoms and having a single sexual partner); (2) rejection of three common misconceptions about HIV transmission; and (3) awareness that one cannot tell by looking at a person whether he/she has HIV. ⁴Includes sex with opposite-sex romantic partner, same-sex partner, married woman (for young men not including wife), sex worker (for young men), casual partner, and forced and exchange sex relations, as well as responses in linked anonymous reporting (through sealed envelope). ⁵Includes genital ulcers, genital itching, swelling in the groin, discharge, burning during urination, etc. ⁶Among those aged 20 or above. N.A.: Not applicable.





Key indicators by sex and marital status of respondents, 2006-2007: Jharkhand

Key indicators	Combined					Urban					Rural				
	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)		MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)		MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)	
	1,259	2,684	2,141	2,730	605	1,034	1,448	1,381	654	1,650	693	1,349			
Number of respondents															
Socio-demographic profile															
1.	29.0	26.1	25.2	27.4	22.0	25.4	15.8	17.5	30.4	26.3	29.5	32.6			
2.	39.3	60.5	15.4	30.3	22.8	38.6	8.8	13.0	42.4	64.9	18.4	39.5			
3.	95.5	46.6	56.8	41.8	92.4	18.2	47.7	20.5	96.0	52.4	60.9	53.1			
4.	89.4	29.2	49.2	30.8	88.8	12.4	41.6	16.2	89.5	32.6	52.6	38.5			
5.	12.7	28.1	26.1	22.2	9.4	49.2	27.5	33.1	13.5	24.8	25.4	17.7			
6.	0.5	7.1	0.2	5.4	0.0	5.1	0.3	5.2	0.5	7.5	0.2	5.5			
7.	0.2	0.0	0.4	0.1	0.0	0.0	0.3	0.1	0.3	0.0	0.4	0.1			
8.	36.4	58.8	51.1	68.6	46.0	67.7	61.1	78.1	34.6	57.1	46.6	63.5			
9.	38.5	19.2	47.6	31.8	44.4	25.1	56.6	40.9	37.5	18.0	43.6	26.9			
Young people's control over their own lives															
10.	27.4	43.3	22.1	44.9	42.1	59.4	28.6	61.7	24.7	40.1	19.2	36.1			
11.	83.6	29.6	64.9	39.5	87.2	40.9	73.6	53.0	82.9	27.3	61.1	32.3			
12.	N.A.	44.2	84.0	53.0	N.A.	50.9	88.2	62.8	N.A.	42.9	82.1	47.8			
13.	N.A.	9.3	62.6	11.4	N.A.	13.8	71.3	13.9	N.A.	8.4	58.6	10.2			
Sexual and reproductive health knowledge															
14.	58.5	45.0	65.2	61.8	68.4	66.2	72.0	79.1	56.7	40.8	62.1	52.5			
15.	46.2	41.0	32.9	28.6	47.2	41.0	30.0	24.0	46.0	41.0	34.2	31.0			
16.	82.5	58.6	85.9	54.6	98.5	83.6	94.8	77.7	79.7	53.6	81.9	42.4			
a.	69.8	76.9	66.2	70.3	91.4	93.6	82.1	89.3	65.8	73.5	59.1	60.2			
b.	30.7	36.6	28.2	31.2	50.3	64.3	38.2	44.9	27.0	31.0	23.7	23.9			
c.	7.9	29.3	6.9	2.7	13.8	40.1	7.4	2.8	6.9	27.1	6.6	2.7			
d.	71.8	38.9	68.0	19.5	88.8	58.8	76.5	28.3	68.6	34.9	64.1	14.8			
a.	40.4	47.1	29.8	32.5	53.8	67.4	32.9	45.1	37.9	43.1	28.4	25.8			
b.	18.1	20.0	11.3	10.3	30.5	36.1	17.0	14.9	15.8	16.8	8.6	7.9			
c.	6.7	23.9	4.4	1.5	11.7	35.0	5.8	1.6	5.7	21.6	3.8	1.5			
d.	32.8	30.6	23.4	10.8	43.8	32.5	26.0	10.2	30.4	29.9	22.1	11.4			
18.	6.6	5.6	6.6	5.5	7.6	6.9	5.6	6.2	6.4	5.4	7.0	5.1			
19.	63.3	35.5	80.2	57.3	91.3	65.6	92.6	85.1	58.1	29.5	74.7	42.6			
20.	10.3	10.7	7.4	5.2	11.2	12.4	10.3	5.5	10.2	10.4	6.2	5.1			
a.	20.0	12.2	29.6	21.6	34.5	28.8	41.0	36.5	17.3	8.8	24.6	13.8			
b.	22.4	12.7	21.2	16.3	26.4	16.9	24.3	13.8	21.7	11.9	19.8	17.6			
21.	31.6	54.4	36.8	52.5	28.8	45.5	33.5	38.5	32.0	56.8	38.6	58.2			
22.	22.4	12.7	21.2	16.3	26.4	16.9	24.3	13.8	21.7	11.9	19.8	17.6			
23.	31.6	54.4	36.8	52.5	28.8	45.5	33.5	38.5	32.0	56.8	38.6	58.2			

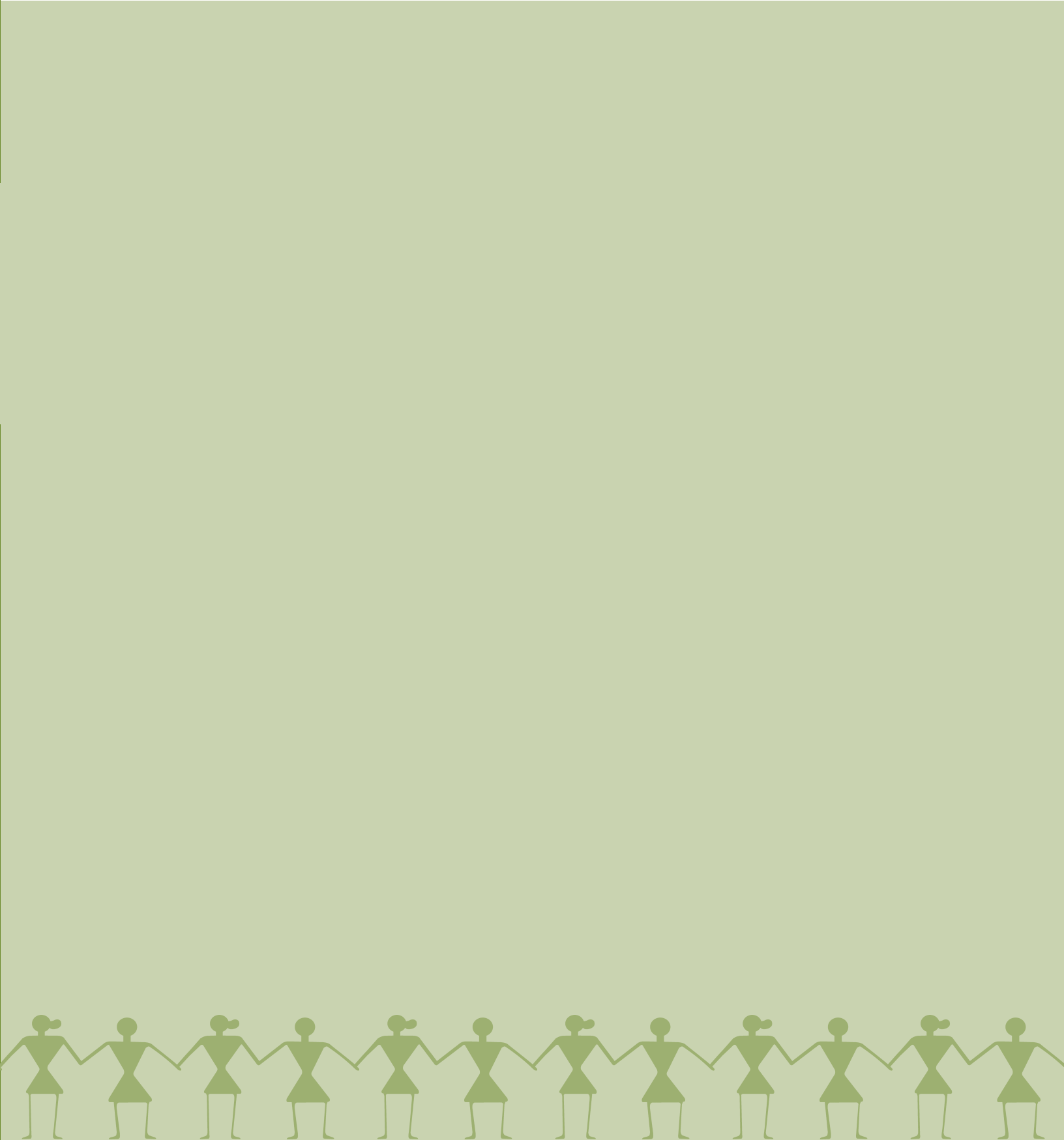
Key indicators	Combined				Urban				Rural			
	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)
24. Ever had pre-marital sexual relations with an opposite-sex romantic partner (%)	11.8	5.8	6.1	5.8	8.7	3.1	4.1	1.4	12.4	6.4	7.0	8.1
25. Ever had pre-marital sex ⁴ (%)	25.7	6.5	12.4	7.2	15.3	3.5	8.2	1.7	27.7	7.1	14.3	10.1
Self-reported health problems												
26. Anxiety about swapanadosh/ nocturnal emission (men) in last 12 months (%)	9.6	N.A	22.9	N.A	9.1	N.A	22.9	N.A	9.7	N.A	22.9	N.A
27. Menstrual problems (women) in last 3 months (%)	N.A	12.1	N.A	10.7	N.A	10.6	N.A	9.7	N.A	12.4	N.A	11.1
28. Symptoms of genital infection in last 3 months ⁵ (%)	13.9	20.3	11.3	12.4	6.6	18.6	8.2	11.2	15.2	20.7	12.6	13.1
Youth life-style												
29. Consumed alcohol at least once in last month (%)	23.0	3.4	6.4	1.2	21.3	2.0	6.1	0.1	23.4	3.6	6.5	1.8
30. Consumed drugs at least once in last month (%)	0.8	0.0	0.3	0.0	1.0	0.0	0.5	0.0	0.8	0.0	0.3	0.0
31. Consumed tobacco products at least once in last month (%)	64.9	5.3	29.9	2.1	66.0	4.2	27.7	0.3	64.6	5.5	30.9	3.0
32. Involved in physical fights in last 12 months (%)	15.8	3.7	18.9	4.9	12.8	3.8	19.1	3.8	16.3	3.6	18.8	5.5
33. Watched television often (%)	9.4	14.2	19.8	27.3	28.4	37.9	38.8	52.6	5.8	9.4	11.3	13.8
Programme participation and voting experience												
34. Participated in youth-related programmes implemented in the community in last 3 years (%)	5.6	1.9	6.2	4.0	4.6	1.1	5.6	3.1	5.7	2.0	6.5	4.4
35. Voted in last election ⁶ (%)	83.6	48.5	67.6	44.0	79.6	39.8	66.0	45.1	84.4	50.6	68.5	42.9
Married life												
	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UM (15-24)	UW (15-24)
36. Reported a love marriage (%)	4.8	7.9	7.9	7.9	7.6	17.5	30.8	12.4	4.2	7.0	7.0	7.0
37. Usually discussed money matters with spouse (%)	84.9	87.0	87.0	87.0	90.2	3.1	0.0	90.3	84.0	86.4	86.4	86.4
38. Reported any physical violence perpetrated on wife by husband (%)	27.0	27.0	27.0	27.0	23.2	40.2	38.9	22.5	27.7	27.9	27.9	27.9
39. Husband ever forced wife to have sex (%)	23.3	39.7	39.7	39.7	17.5	31.0	30.8	30.8	24.4	41.5	41.5	41.5
40. Ever had extra-marital sex (%)	2.4	0.5	0.5	0.5	3.1	0.5	0.0	0.0	2.3	0.6	0.6	0.6
41. Ever used contraception within marriage (%)	21.6	24.0	24.0	24.0	40.2	25.1	27.9	27.9	18.1	21.0	21.0	21.0
42. Currently using contraception (%)	12.8	17.4	17.4	17.4	25.1	21.1	10.1	10.5	10.5	15.3	15.3	15.3
43. Ever used a contraceptive method to delay first pregnancy (%)	11.5	5.1	5.1	5.1	21.1	1.4	1.3	1.3	9.6	4.1	4.1	4.1
44. Children ever born (mean)	1.3	1.4	1.4	1.4	1.3	1.3	1.3	1.3	1.3	1.4	1.4	1.4
45. Ideal number of children ⁷ (mean)	2.6	2.6	2.6	2.6	2.3	2.3	2.3	2.3	2.7	2.7	2.7	2.7
46. First delivery in health institution ⁸	22.9	24.4	24.4	24.4	45.2	55.1	55.1	55.1	18.5	18.5	18.5	18.5
47. First birth attended by a health professional ⁹ (%)	90.6	89.7	89.7	89.7	95.6	95.6	94.4	94.4	89.8	89.8	89.8	89.8

Note: MM: Married men, MW: Married women, UM: Unmarried men, UW: Unmarried women. ¹Among all youth. ²Includes being aware that: (1) termination of pregnancy is legal for married women; (2) termination of pregnancy is legal for unmarried women; (3) aborting a foetus after 20 weeks of pregnancy is illegal, and (4) sex-selective abortion is illegal. ³Includes: (1) identification of two major ways of preventing HIV (using condoms and having a single sexual partner); (2) rejection of three common misconceptions about HIV transmission; and (3) awareness that one cannot tell by looking at a person whether he/she has HIV. ⁴Includes sex with opposite-sex romantic partner, same-sex partner, married woman (for young men not including wife), sex worker (for young men), casual partner, and forced and exchange sex relations, as well as responses in linked anonymous reporting (through sealed envelope). ⁵Includes genital ulcers, genital itching, swelling in the groin, discharge, burning during urination, etc. ⁶Among those aged 20 or above. ⁷Includes only numeric responses. ⁸Includes those whose first pregnancy outcome was a live or still birth. ⁹Includes institutional delivery or home delivery attended by a doctor/ANM/nurse/LHV, midwife (trained) or other health professional, among those whose first pregnancy outcome was a live or still birth. N.A.: Not applicable.



Notes







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