



सत्यमेव जयते
भारत सरकार

स्वास्थ्य एवं परिवार कल्याण मंत्रालय
निर्माण भवन, नई दिल्ली - 110011

GOVERNMENT OF INDIA

MINISTRY OF HEALTH & FAMILY WELFARE
NIRMAN BHAWAN, NEW DELHI - 110011


Youth in India: Situation and Needs 2006–2007

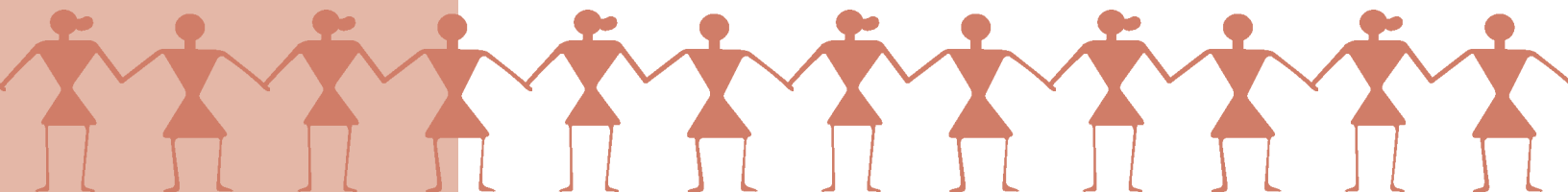


EXECUTIVE SUMMARY TAMIL NADU



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This executive summary presents, in brief, findings on the situation of youth in Tamil Nadu, 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.

For detailed reports please contact:

International Institute for Population Sciences

Govandi Station Road, Deonar
Mumbai 400088
India
Phone: 022-42372400/42372518
email: iipsyouth@rediffmail.com
Website: <http://www.iipsindia.org>

Population Council

Zone 5-A, Ground Floor
India Habitat Centre
Lodi Road
New Delhi 110003
Phone: 011-2464 2901/02
email: info-india@popcouncil.org
Website: <http://www.popcouncil.org/asia/india.html>

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 force 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 Tamil Nadu. The survey was undertaken between May 2006 and January 2007. During the survey, 9,752 young people were contacted, of which a total of 7,996 married and unmarried young women and men were successfully interviewed.



Characteristics of the household population

A total of 37,893 households were selected for interview. Among these, interviews were successfully completed in 35,880 sample households, and 146,973 individuals, who were usual residents in these households, were enumerated. The age distribution was typical of a population in which low levels of fertility have been reached, with relatively small proportions in both the younger (0–9 years) and older (60+ years) age groups. With regard to the youth population, the distribution suggests that at the time of the survey, the populations aged 10–14 years, 15–19 years and 20–24 years each comprised some 9% of the total population. 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 999 females per 1,000 males.

Almost one-quarter of the population aged 6 years and above had no formal education. More females than males fell into this group: 32% and 15%, respectively. At the other extreme, 18% and 13% of males and females, respectively, had received 12 or more years of education. The median years of schooling was 8 years for males and 5 years for females, but was three years higher in the urban compared to the rural population (8 and 5 years, respectively).

Overall, 16% of all households lived in *kachcha* houses (constructed from mud, thatch or other low-quality materials), 44% lived in *semi-pucca* houses (constructed using a mix of low- and high-quality materials) and two-fifths lived in *pucca* houses (constructed entirely from cement, masonry or other high-quality materials). Over 90% of households had electricity, including almost all urban households (95%) and 88% of rural households. Almost all households (96%) reported that their main source of drinking water was either piped water, or water obtained from a hand-pump or a covered well. Access to a toilet facility of any kind was reported by over two-fifths of all households (42%); 69% in urban areas and 20% in rural areas.

The distribution of households by wealth quintiles shows that one-third of urban households were in the wealthiest (fifth) quintile; in contrast, only 9% of rural households were in this quintile. Likewise, 29% of rural households were in the poorest (first) quintile compared to only 9% of urban households in this quintile.

Situation of youth

As mentioned earlier, a total of 7,996 youth were interviewed. Age profiles suggest that the unmarried were younger than the married, and rural youth were somewhat younger than their urban counterparts. About nine in 10 youth were Hindu and about 5% were Muslim. Caste-wise distributions show that 71–74% of youth belonged to other backward castes, 23–27% to scheduled castes and the remaining (3% or fewer) to general castes or scheduled tribes. Over 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 (11–13%) than the father (2–3%). Finally, 1% reported that neither parent was alive.



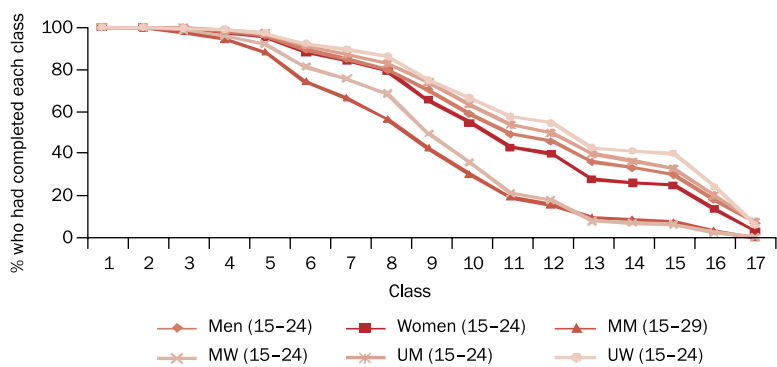
Education

Educational profiles indicate that the vast majority (91–94%) of youth in the state had attained at least five years of schooling. Educational attainment levels suggest that irrespective of sex and marital status, youth had 8–10 years of schooling. At the time of interview, over two-fifths of all unmarried youth (and very few married) were still in school or college. Findings also indicate that 95–96% of youth who had completed Class 1 had completed Class 5, and 80% had completed Class 8. Following Class 8, declines became progressively steeper for both young men and women; for example, declines per year reached or exceeded 10% among both young men and young women between Classes 8 and 11. Married and rural youth were considerably less likely than their respective counterparts to have completed high school.

Findings suggest moreover that youth were considerably better educated than their parents. The median number of years of education completed by fathers of young men and women was 5 years; mothers of young men and women were far less educated, with a median of 2–3 years of education.

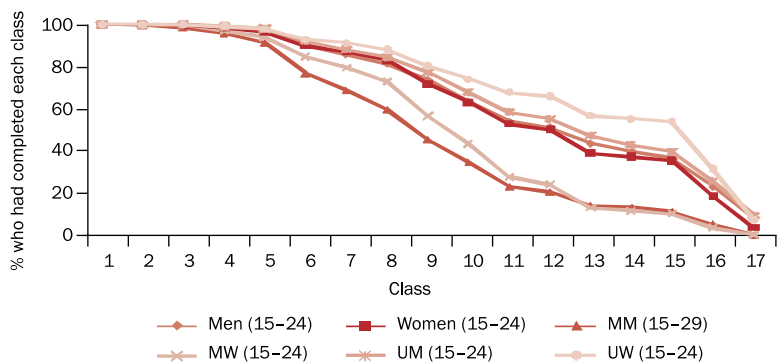
Leading reasons for discontinuation among young men and women who discontinued at middle and high school levels were economic issues (child required for work on the family farm/business or for outside wage earning work, or the family could not afford school-related expenses), attitudes and perceptions (such as for example, respondent's lack of interest in studies) and school-related factors (academic failure, distance to school, poor school quality and infrastructure). Of note is that school-related factors, particularly poor academic performance, were significant motivating reasons behind discontinuation, reported by 47% of young men and 51% of young women who discontinued schooling before completing Class 10. It is also notable that transitions into

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



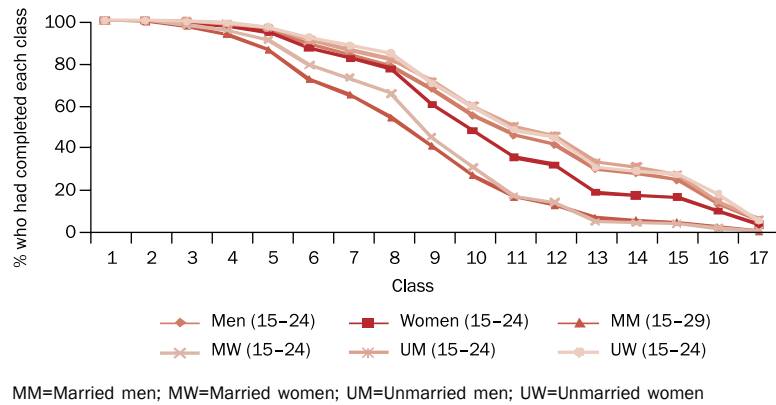
MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women



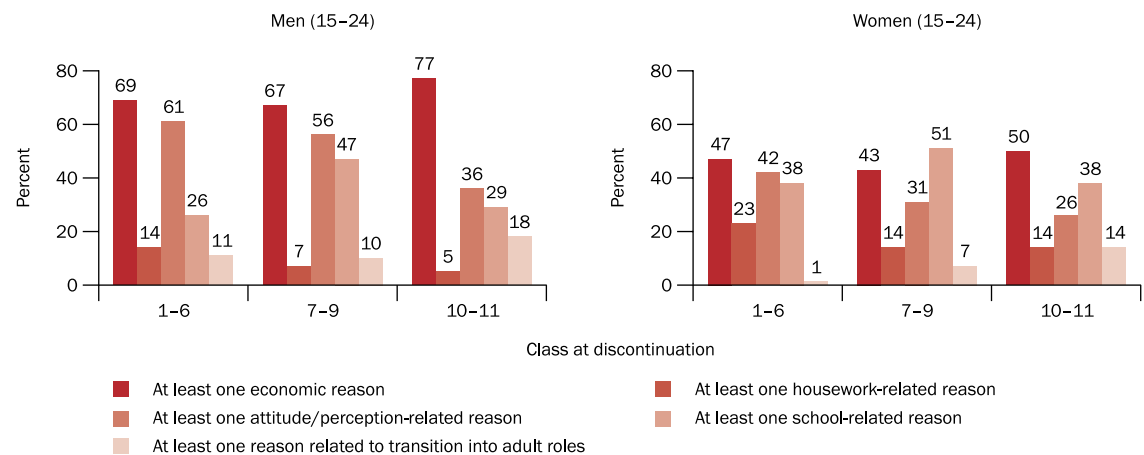
adult roles were rarely expressed as a reason for school discontinuation at these levels of education; even so, marriage was reported as a reason for school discontinuation at high school level by one-tenth of married young women.

Differences were observed in the availability of amenities among youth who were still in school and those who had

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



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



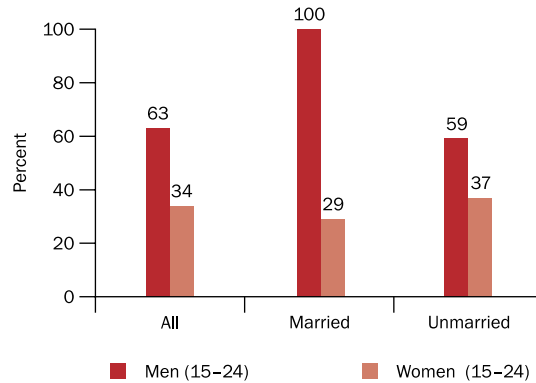
discontinued their education at various levels. Most youth, irrespective of whether they were pursuing their education or not, had access to drinking water and playgrounds. However, for the most part, youth still studying were somewhat more likely to report the availability of toilets and libraries than were those who had discontinued schooling. The availability of all four amenities was, for the most part, considerably more likely to be reported by those who were studying at the time of interview than those who had discontinued their education, suggesting that the lack of amenities may have played a role in school discontinuation. Schooling experiences were also different; those who had discontinued their education were, for the most part, less likely than those who were still in school to report private tuition. They were considerably less likely, moreover, to have passed the last examination for which they had appeared, suggesting that poor school performance is a significant factor leading to school discontinuation among both young men and women.



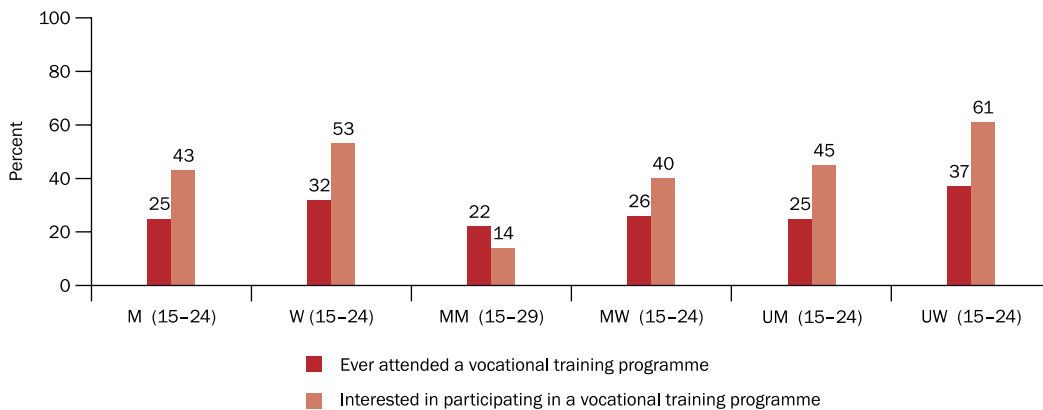
Work

Work profiles suggest that about two-thirds of young men and half of young women had ever engaged in paid or unpaid work. Indeed, almost all married young men and over three-fifths of unmarried young men had done so, compared with over half and two-fifths of married and unmarried young women, respectively. Likewise, more rural than urban youth had ever worked. Economic activity was often initiated at an early age: 21% of young men and 17% of young women reported initiating work in childhood or early adolescence (before age 15). The majority of young men (all the married and 59% of the unmarried) and a substantial proportion of young women (29% and 37%, respectively) had engaged in paid or unpaid work at some point in the 12 months preceding the survey. Almost nine in 10 young men and two in three young women who had worked in the year prior to interview had done so for the major part (at least six months) of the year.

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



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



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

Unemployment rates ranged from 7% among young men to 15% among young women. Unemployment rates tended to be considerably higher among the educated and economically better off than any other group. Youth were clearly interested in acquiring skills that would enable employment generation; 43% of young men and 53% of young women reported interest in vocational skills training. However, far fewer—one-quarter of young men and one-third of young women—had attended even one vocational training programme.



Media exposure

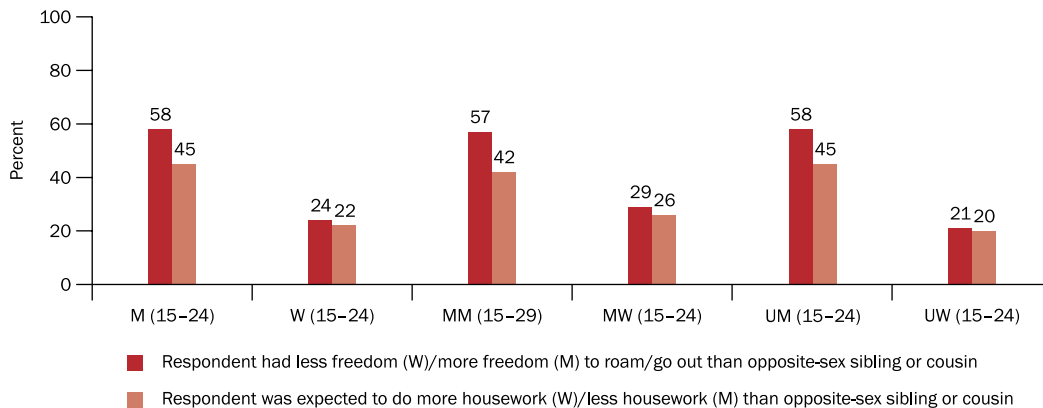
Large proportions of youth were exposed to the media, typically newspapers, magazines or books (96% of young men and 78% of young women with five or more years of education), and television (96% of all young men and 92% of all young women). Exposure to the internet was reported by 26% of young men and 14% of young women with five or more years of education.

Findings also show that as many as two in five young men and hardly any young women had accessed pornographic or “blue” films, and almost four in five young men who had been exposed to pornographic films reported that they accessed these materials sometimes or frequently. One-quarter of young men had read or looked at pornographic books and magazines, and 29% of those exposed to the internet had accessed such materials on the internet, compared to far fewer young women. Finally, half or more young men and women acknowledged the influence that the media have on youth behaviours.

Socialisation experiences and communication with parents

Findings reveal a mixed scenario with regard to young people’s socialisation experiences. Responses from both young men and women suggest that large proportions of households did not discriminate between their sons and daughters in terms of freedom of movement and expectations regarding housework. At the same time, far more consistently observed were gender differences in perceptions of parental control: young women were more likely than young men to perceive that their parents would disapprove of social activities in which youth participate, particularly those involving members of the opposite sex. For example, 62–68% of young women compared with 43–48% of young men reported that their mother or father would be angry if they talked with a person of the opposite sex from outside the home.

Percentage of youth reporting gendered socialisation experiences relative to an opposite-sex sibling/cousin, Tamil Nadu, 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.



Findings show that communication with parents on issues relevant to youth—such as school performance, friendships, being teased or bullied, physical maturation, romantic relationships, contraception and reproductive processes—was not universal. Indeed, just 61–83% of youth reported discussing school performance or friendships, two relatively general topics, with their mother or father. Moreover, sensitive topics such as romantic relationships, reproductive processes and contraception were rarely discussed with either parent (reported by 9% or fewer youth). Nevertheless, among young women, mothers were reported as the most likely confidante on such matters as menstrual problems and the experience of being teased by a boy.

Young people’s family lives were marked by violence, both experienced and witnessed. Over two in five young men and about one-third of young women had observed their father beating their mother. Many youth reported being beaten by a parent during adolescence; three in five young men and one-third of young women reported such experiences.

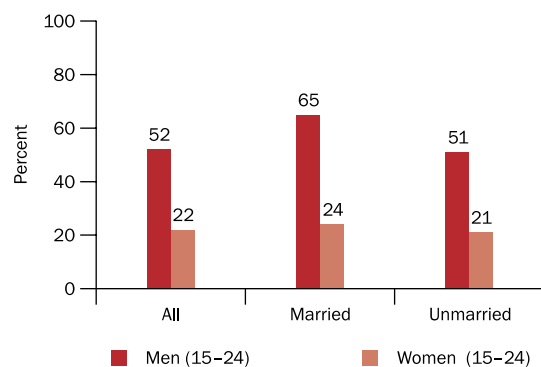
Peer networks and interaction

Growing up was associated with close peer networks. Almost all youth reported having same-sex friends. Young men reported larger networks of friends than did young women. Opposite-sex peer networks were less common but nonetheless reported by 29% of young men and 27% of young women. Interaction with friends tended to be restricted to activities such as chatting, studying and playing sports, especially among young women, although large proportions of young men did report engaging in outside activities such as going on picnics or to see films as well. An important measure of support was derived from these networks, however, with peers reported as the most likely confidante on issues related to boy-girl relationships for both young men and women, and on nocturnal emission for young men.

Agency and gender roles

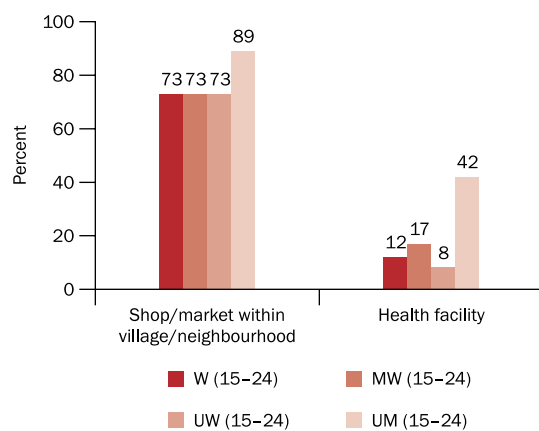
Substantial proportions of young men and many more young women did not exercise agency in their everyday lives. For example, decision-making was relatively limited: while 52% of young men reported independent decision-making on all three issues explored in the survey, namely, choice of friends, spending money and purchase of clothes, just 22% of young women reported so. Likewise, freedom of movement even within the village or neighbourhood was not universal, although young men reported considerably more freedom of movement than did young women. Indeed, only 79% of young women compared to 93% of unmarried young men could visit locations

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



within their village or neighbourhood unescorted, and just 30% of young women compared to 71% of unmarried young men could visit at least one location outside their village or neighbourhood unescorted. Findings also show that control over financial resources among youth tended to be limited, and particularly so among young women. Although young women were more likely than young men to have money saved (31% and 19%, respectively), they were somewhat less likely to own a bank or post office savings account (9% and 13%, respectively) and less likely than their male counterparts to operate these accounts themselves (75% and 89%, respectively, of those who had an account).

Percentage of youth allowed to visit selected places unescorted, Tamil Nadu, 2006

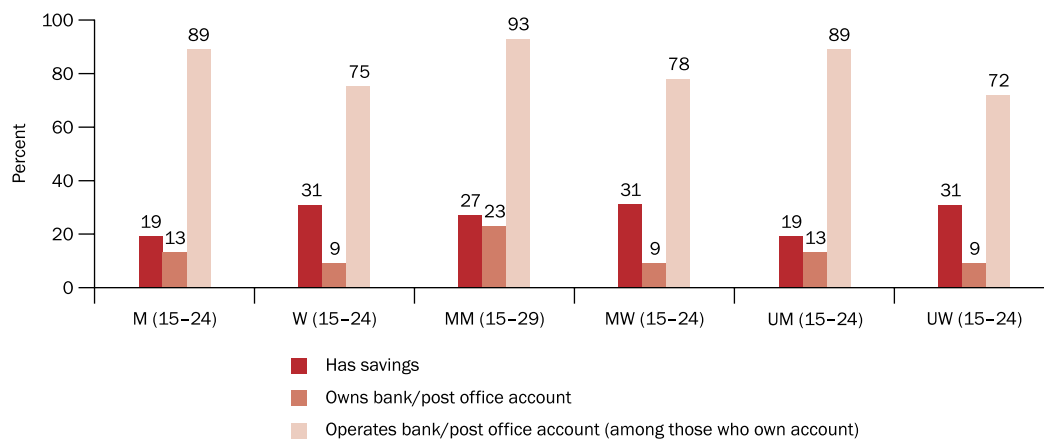


W=Women; MW=Married women; UM=Unmarried women; UW=Unmarried men

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

Gender role attitudes were mixed. However, young men were consistently more likely than young women to report unequal gender role attitudes. Considerable proportions of youth espoused egalitarian attitudes on such issues as whether girls are usually as good as boys in studies, whether the husband should be the main decision-maker with regard to spending money and whether girls should be allowed to decide about their own marriage. In contrast, the majority of youth expressed inequalitarian views on other matters. For example, just 26% of young men and 42% of young women disagreed with the view that a woman should obtain her husband's permission for most things. Moreover, 51% of young men and 56% of young women justified wife beating in at least one situation.

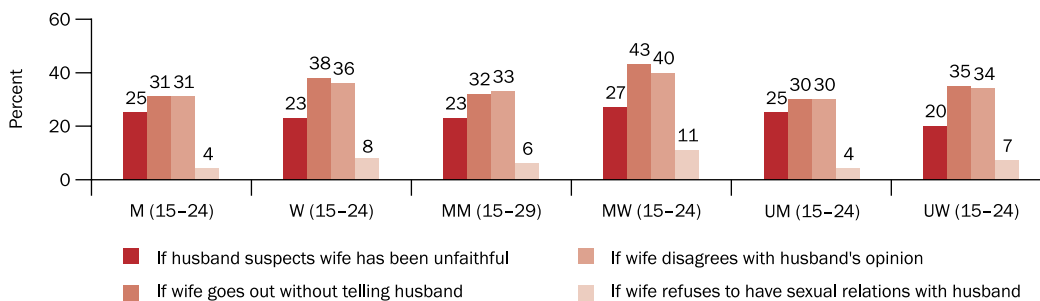
Percentage of youth who reported having any savings, owning an account in a bank or post office and operating the account themselves, Tamil Nadu, 2006



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



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



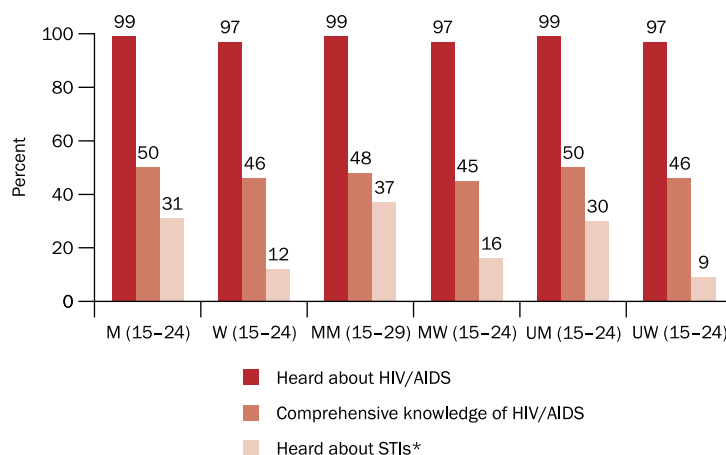
M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Awareness of sexual and reproductive health matters

Findings reiterate young people’s limited awareness of sexual and reproductive matters, ranging from how pregnancy occurs to contraception, HIV and safe sex practices. For example, just half or fewer youth were aware that a woman can get pregnant at first sex, only about half had comprehensive knowledge of HIV and its transmission routes, and just 31% of young men and 12% of young women were aware of STIs other than HIV. Moreover, even on issues about which young people were generally aware, findings show that in-depth understanding was limited. For example, in-depth awareness of condoms and oral contraceptives, the non-terminal methods most familiar to youth, was reported by 77% and 20% of young men, and 39% and 24% of young women, respectively. Findings suggest, moreover, that the unmarried were the most poorly informed about sexual and reproductive matters. Among the married too, young women were far less likely than young men to report pre-marital awareness of contraception. Taken together, these findings suggest that many young women, and fewer young men, enter marriage uninformed.

Many young women (22%) and a few young men (6%) reported that they had never received information on sexual and reproductive matters (prior to marriage among the married).

Percentage of youth by awareness of HIV/AIDS, comprehensive knowledge about HIV/AIDS and awareness of STIs, Tamil Nadu, 2006



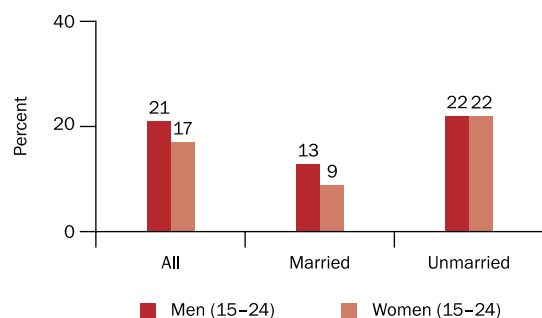
M=Men; W=Women; MM=Married men; MW=Married women; UM=Unmarried men; UW=Unmarried women

Note: *Other than HIV.



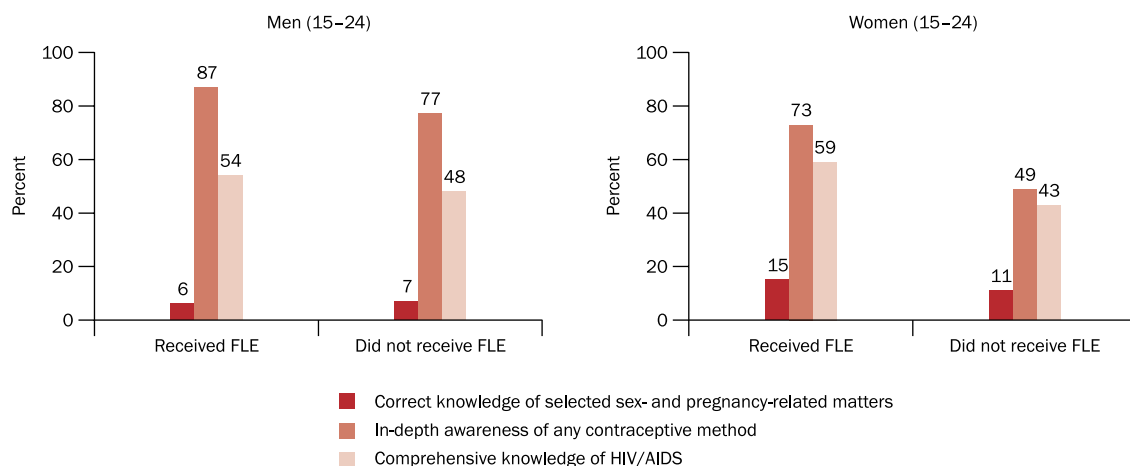
Of those who had received such information, among the leading sources of information on both contraception and sexual matters were peers and the media. In contrast, few youth cited a family member as a source of information on either topic; the exception was married young women, several of whom cited their husband as a leading source of information on contraception. Teachers, charged with providing family life education to youth, were seldom cited as a source of information. Health care providers also played a limited role in providing youth information on contraception. These findings reflect the lack of attention that the RCH Programme has paid, thus far, to young people. Neither young men nor the unmarried appear to have come under the purview of health care providers. Among married young women, less than one in three were reached with any information from health care providers, underscoring the extent to which even this group has been neglected in the programme. In short, health care providers, teachers and family members—often considered more credible sources of information than peers and the media—were infrequently cited as sources of information on these sensitive topics by young people.

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



Few youth—just one in five young men and one in six young women—had attended family life or sex education programmes either in or outside the school setting. 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 teacher, with smaller percentages citing friends, health care providers and other experts. Findings suggest, moreover, that youth who had received family life or sex education were more likely to have in-depth

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, Tamil Nadu, 2006



Note: FLE: Family life or sex education.

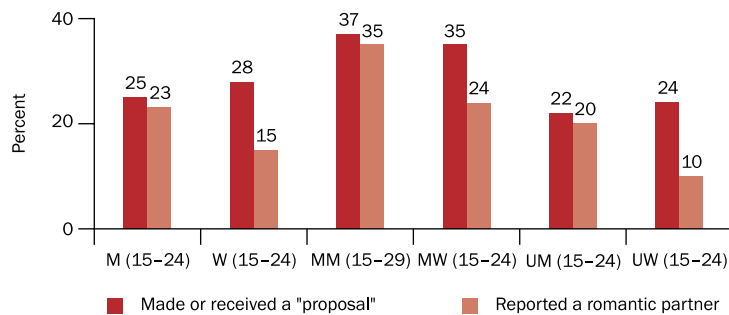


awareness of contraception and comprehensive knowledge of HIV/AIDS than those not exposed to this education.

Pre-marital romantic relations

Findings confirm that despite strict norms prohibiting pre-marital opposite-sex mixing, opportunities do exist for the formation of pre-marital romantic relations. Indeed, significant minorities of young men and women had received or made a “proposal” for a romantic relationship (25–28%), and noteworthy, if smaller, percentages reported that they had been involved in a romantic partnership (23% and 15% of young men and women, respectively). Patterns of pre-marital romantic partnerships suggest that where partnerships occurred, they were initiated at about age 18 among young men and age 16 among young women, and were usually hidden from parents but not from peers.

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



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

While the majority of youth had held hands with their romantic partner, consistently fewer reported more intimate behaviours. Gender differences in reporting of such experiences were evident: while 74% of young men had held hands with a romantic partner, about a quarter had engaged in sexual relations with that partner; and among young women, while three in five had held hands with a romantic partner, 10% had engaged in sexual relations with this partner. Notable gender disparities in expectations of a longer-term commitment emerged: young women were considerably more likely than young men to have expected a romantic relationship to lead to marriage. Partner communication and negotiation regarding safe sex were rare, and sex was unprotected for the overwhelming majority of sexually active youth. For almost one in three young women who had engaged in sexual relations with a romantic partner, sex was not consensual.

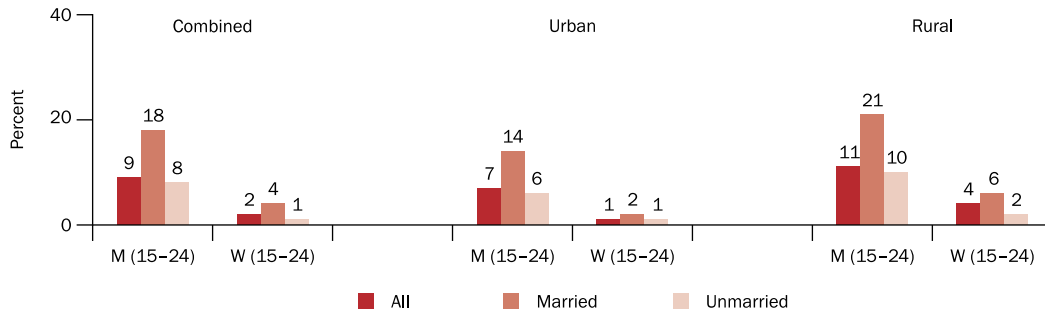
Pre-marital sexual experiences in romantic and other relationships

In total, 9% of young men and 2% of young women reported the experience of pre-marital sex within romantic and/or other partnerships. In general, life table estimates reveal that first pre-marital sex did not take place, for the most part, in adolescence: just 5% and 2% of young men and women had initiated sex before age 20. Initiation into pre-marital sexual activity



increased as young people transitioned into young adulthood, sharply among young men and more gradually among young women. Also notable is the finding that sexual initiation took place earlier among rural than urban youth.

Percentage of youth reporting pre-marital sex, according to residence, Tamil Nadu, 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—mainly with sex workers, married women and casual partners. Many sexual experiences were risky, for example, about one-third of young men and women reporting pre-marital sex had engaged in sex with more than one partner. Moreover, consistent condom use was limited—just 5% of sexually active young men and not a single young woman reported condom use in all pre-marital encounters.

While we acknowledge that youth, especially young women and unmarried young men, may not report sexual experience in a survey situation, the Youth Study experience suggests that a series of direct questions posed in a face-to-face interview, supplemented by an opportunity to report sexual experience in an anonymous format, using the sealed envelope technique, provides higher estimates of sexual experience than does face-to-face questioning alone, or, for the most part, anonymous third-party reporting of peer behaviours. On balance, findings suggest that the sealed envelope technique did indeed enable a considerable number of sexually active young men and women who opted not to disclose their sexual experiences in face-to-face questioning the opportunity to do so.

Transition to marriage and early married life

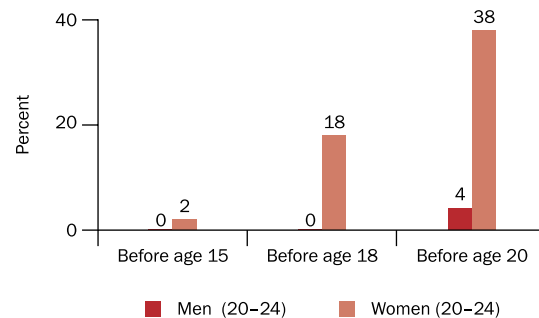
Findings indicate that Tamil Nadu is characterised by a relatively late age at marriage: hardly any young men and fewer than one in five young women aged 20–24 (18%) were married before age 18. While the majority of married youth reported an arranged marriage, it is notable that about one in five young men and women reported a love marriage, and about three-quarters reported that their approval of the prospective spouse had been sought. Likewise, considerable proportions reported some pre-marital acquaintance with their spouse; even so, about one-fifth of married young men and over one-third of married young women had met their



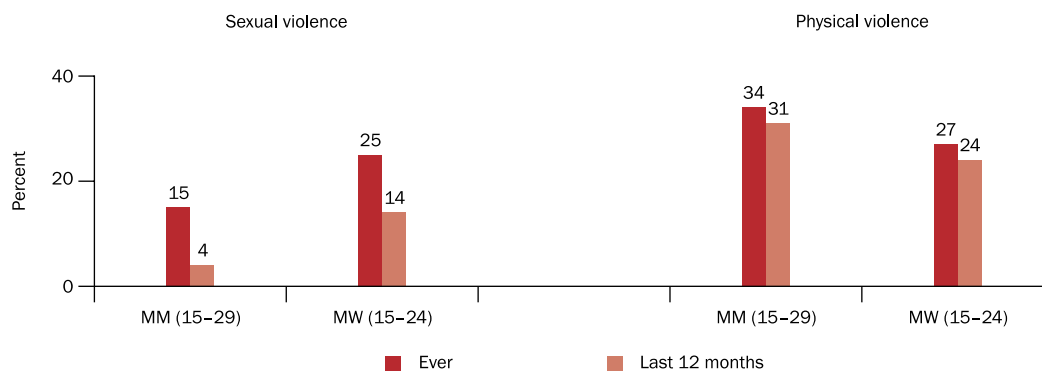
spouse for the first time on their wedding day. Dowry characterised the marriages of 84% of young men and 88% of young women. Despite the fact that many were acquainted with their spouse prior to marriage and had played a role in determining who they would marry, large proportions—two-thirds of young men and three-quarters of young women—reported that they had lacked awareness of what to expect of married life.

Married life was characterised by considerable inter-spousal communication on most topics, yet only two-fifths of young men and three-fifths of young women had ever communicated with their spouse on matters relating to contraception. Moreover, physical violence and forced sex within marriage were reported by significant minorities of youth. For example, more than one-quarter of young women reported ever experiencing physical violence perpetrated by their husband, and an even larger percentage of young men (34%) reported perpetrating physical violence on their wife. Recent physical violence was likewise reported by one-fourth of young women and 31% of young men. Sexual violence was also reported; indeed, one-fifth of young women reported that their first sexual experience within marriage was forced. Overall, 25% of young women reported ever being forced to engage in sex with their husband; in comparison, just 15% of young men reported forcing their wife to engage in sex.

Percentage of youth aged 20-24 who were married before selected ages, Tamil Nadu, 2006



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, Tamil Nadu, 2006



MM=Married men; MW=Married women

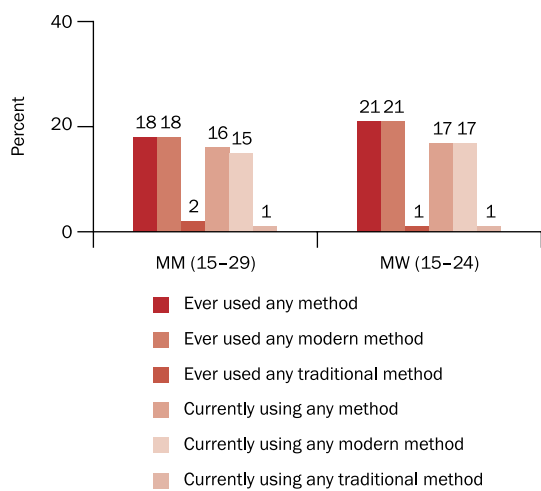
While the Youth Study did not explore extra-marital sexual experiences in detail, the available data indicate that 4% of young men reported an extra-marital sexual encounter. In contrast, hardly any young women reported an extra-marital sexual encounter.



Contraceptive practice and pregnancy experience

Contraceptive use at any time within marriage was reported by 18% of young men and 21% of young women. Just 16% of young men and 17% of young women reported use of contraception at the time of interview. The limited percentages of youth practising contraception may be attributed to

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



MM=Married men; MW=Married women

the relatively late age at marriage in Tamil Nadu and consequently, the fact that many married youth may not have initiated childbearing. The pattern of methods used suggests, however, a considerable reliance on terminal methods: female sterilisation was reported by 9–10% of young men and women. Use of non-terminal methods at the time of interview was reported by just 6–7% of young men and women; the main methods used were the condom and the IUD. Few young people practised contraception to delay the first birth—reported by less than 3% of youth. Pregnancy typically occurred within the first six months following marriage among those who reported that they or their wife had been pregnant at least once. While just 1–2% of young men reported a mistimed or unwanted pregnancy, as many as 10–13% of young women reported experiencing an unintended pregnancy.

Circumstances of the first birth suggest that the overwhelming majority of first births were delivered in a health facility (81–84%) and almost all were delivered by a skilled attendant (93%).

Son preference was evident. Although most respondents wanted one child of each sex, of those who preferred more than two children, somewhat more preferred to have more sons than daughters.

Substance use

Findings show that substantial proportions of young men (23–25%) reported the consumption of tobacco and alcohol. Drug use was reported by just 0.3% of young men. Hardly any young women reported consuming 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, 18% of young men and 33% of young women had experienced high fever, and



2% and 21%, respectively, reported the experience of symptoms of genital infection. Moreover, about one in 10 young women reported menstrual problems; at the same time, nearly one in three young men reported anxiety about nocturnal emission. Finally, responses indicative of mental health disorders were reported by some 13% of young men and 10% of young women.

With regard to care seeking for general and sexual and reproductive health problems, patterns varied by the type of problem experienced. While the large majority of those who had experienced high fever, for example, had sought care, many fewer had sought care for sexual and reproductive health problems. 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 in the case of anxiety about nocturnal emission, youth rarely sought advice from a health care provider, preferring to do so from peers.

Findings suggest that youth were uncomfortable about seeking sexual and reproductive health services. Many youth—minorities in the case of married young men, but larger proportions in the case of unmarried young men and both married and unmarried young women—would indeed find it difficult to seek appropriate care for sexual and reproductive problems.

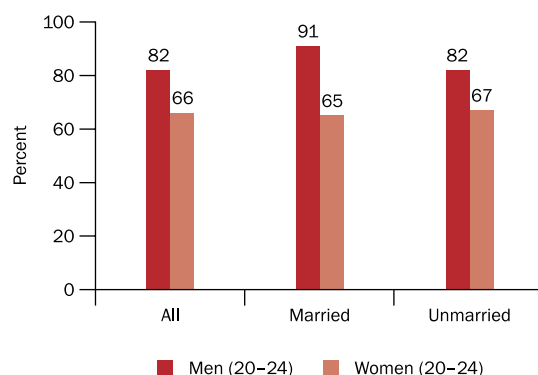
Finally, small minorities of youth reported that they had undergone HIV testing—10–13% of the married and 1–3% of the unmarried. Youth were, however, overwhelmingly in favour of pre-marital HIV testing.

Participation in civil society and political life

Although a number of programmes are held to build youth skills, relatively few youth (one-fifth of young men and two-fifths of young women) reported familiarity with either government—or NGO-sponsored programmes organised at the community level in which youth could participate. Far fewer youth—14% of young men and 9% of young women—reported participating in any such programme. Many more young men (52%) and somewhat more young women (13%) reported that they had participated in community-led activities such as cleanliness drives and the celebration of festivals and national days. Finally, 12% of young men compared to 16% of young women reported membership in organised groups.

Among those eligible to vote, 82% of young men and 66% of young women had cast their vote in the most recent election. While 91% of married young men had cast their vote, 82% of unmarried young men and two-thirds of young women, irrespective of marital status, had voted. Also of note is that while most youth perceived that elections were fair and permitted one to vote without fear, the large majority (64–73%) reported disillusionment with the commitment of political parties to work for change at the community level.

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



By and large, youth reported secular attitudes: 97% or more reported that they mixed freely with individuals of different religions and castes. However, just half of young men and somewhat fewer young women agreed that it was better to tolerate rather than punish someone who showed disrespect to their religion. Findings typically suggest that rural youth were more likely than others to report conservative views. Similarly, among young women, the married were more likely than the unmarried to report so.

Considerable proportions of young men and women acknowledged that physical fights among young men as well as among young women did occur in their village or neighbourhood. However, just 10% of young men and 3% of young women reported that they had been involved in a physical fight in the year preceding the interview.

Finding employment was expressed as the single most important problem facing youth in the state; reported by 69% of young men and 49% of young women. Additionally, 10% of young men and 14% of young women reported poverty as a major problem. Nine percent of young women also reported lack of amenities/infrastructure as a major problem.

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 outlined below.

Address obstacles to universal secondary school completion

Although young people in Tamil Nadu are spending much of their adolescence pursuing their education, concerted efforts are needed if the state is to meet its goal of achieving universal access to secondary education by the year 2015. Youth Study findings suggesting notable declines in school completion following Class 8 call for efforts to address barriers to secondary school completion. A number of factors have been identified in the Youth Study that inhibit secondary school completion; leading among these were economic reasons, attitudes and perceptions, and school-related reasons. Multiple activities are needed to address these barriers. Efforts must be made, for example, to address the economic pressures that may lead parents to withdraw their children from school in favour of work. While a number of state government programmes are ongoing that aim to reduce the cost of education, additional inputs, by way of conditional grants that encourage school completion among disadvantaged groups, also need to be considered. Moreover, there is a need to ensure that government programmes do indeed reach the most disadvantaged groups. At the same time, activities are needed that sensitise parents about the importance of a secondary school education in expanding their children's livelihood opportunities.

Activities must also address school-level barriers, notably, poor infrastructure, quality of education and academic failure. There is a need to incorporate livelihoods skills building models within the school setting that will not only raise young people's aspirations regarding their education



and careers but also provide them opportunities to gain market-driven job skills. Moreover, investments in improving the quality of the schooling experience are needed that focus on providing better training and ensuring the accountability of teachers.

While the stark gender divide in educational attainment levels seen elsewhere in the country is not observed in Tamil Nadu, findings suggest that married young men and women remain considerably disadvantaged. Interventions are needed that give the married a second chance to continue their education. Likewise, evidence that rural youth were more disadvantaged with regard to educational opportunities than their urban counterparts calls for efforts to provide those out of school an opportunity to complete their schooling.

Enable opportunities for youth employment

The Youth Study finding that between one in five young men and one in six young women had initiated work in childhood reiterates 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.

The finding that unemployment rates were particularly high among the educated suggests a possible disconnect between youth skills and market needs. Indeed, few youth were aware of employment generation programmes and even fewer had availed of these or vocational skills training. It is notable that while considerable proportions of urban youth reported exposure to computer skills, English language skills and so on, rural youth tended to opt for relatively traditional vocational skills and may not have had the opportunity to learn about market needs or develop appropriate skills for which a demand exists. Formal mechanisms need to be developed that enable youth—particularly rural youth—to acquire skills for which there is an established market demand, and that link eligible youth to market opportunities.

Build upon youth's growing access to the internet

Findings suggesting that one-quarter of young men and one in seven young women with five or more years of education—and considerably more in urban areas—had accessed the internet highlight the role that this medium can play in building youth awareness of the world around them and opportunities available to them. The development of youth-friendly web-sites in Tamil may be a useful way to convey such information to youth.

Promote youth agency and gender equitable norms among youth

Findings highlight that substantial proportions of young men and the majority of young women do not exercise agency in their everyday lives. Almost half of young men and over three-quarters of young women lacked decision-making authority even on such matters as choosing friends, purchasing clothes and spending money. Young women, in addition, lacked freedom of movement and opportunities to build peer networks. These findings call for attention to promote life skills education programmes for youth, especially young women, both unmarried and married, that will enable them to have an informed say in their own lives. Safe spaces should be identified in which young women can build social networks and find support among peers.



Inegalitarian gender role attitudes were expressed by many, notably young men but including young women. Moreover, as many as half of all young men and women justified wife-beating in at least one situation. Egalitarian attitudes must be promoted among young men and women, and programmes should be tailored to meet each group's situation and needs. These programmes should promote new concepts of masculinity and femininity among youth and at the same time, promote messages that build egalitarian relations between women and men.

An increasing number of intervention models to build agency and promote egalitarian gender role attitudes among young people have been tested in India. These models should be reviewed and replicated or scaled up as appropriate.

Provide opportunities for formal saving, especially for young women

Findings suggest that while young women were more likely than young men to report savings, they were less likely to own a savings account or to operate the account independently. At the same time, few youth owned a bank or post office account; just 13% of young men and 9% of young women. Programmes are needed that inculcate a savings orientation among young people, 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 have noted that large proportions of youth have exercised their right to vote, that the majority hold secular attitudes with regard to mixing with a person from another caste and religion, and few engage in community-level violence. Nevertheless, not all youth expressed secular attitudes; half of young men and somewhat more young women reported that they would endorse violence against someone who showed disrespect to their religion. Relatively few, moreover, had participated in civil society, that is, government- or NGO-sponsored programmes or community-led activities. 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 provide considerable evidence suggesting that family life or sex education is urgently needed among youth, both those in school and those who have discontinued their education. Findings demonstrate a limited understanding of sexual and reproductive matters among young people, including the married. Misconceptions abound on most topics: sex and pregnancy, contraceptive methods including condoms, STIs and HIV/AIDS, and the conditions under which abortion is legally available or restricted. Where awareness exists, it is typically superficial.



Youth themselves have called for family life or sex education. Findings highlight that large proportions recognised the need for information and education on these issues, and indicated a preference for receiving this education from teachers, health care providers or other experts, and in the case of young women, parents. However, few young people had been exposed to family life or sex education, notwithstanding the School AIDS Education Programme, the Red Ribbon Clubs and the special programme for out-of-school youth. Indeed, substantial proportions of married young women (and some young men) reported entering marriage unaware of what marriage entailed. At the same time, several young people had engaged in sexual risk taking.

As mentioned above, a number of state government programmes are ongoing that aim to impart sexual and reproductive health information to young people. What is needed is a strong commitment to ensuring that these programmes do indeed reach young people, including those in school and out-of-school, married and unmarried, and in rural and urban settings. Moreover, there is a need to expand the content of existing awareness raising programmes to include not just HIV-related information but broader sexual and reproductive topics. These programmes should be designed not only to raise awareness among youth but also to enable young people to correctly understand and assess the risks they face and to adopt appropriate protective actions.

In addition, special attention needs to be paid to the training of trainers. It is important that teachers, health care providers and other experts undergo training that enables them to overcome their reluctance to communicate with youth on sensitive sexual and reproductive matters, dispels their misconceptions on these matters and enhances their technical knowledge of these issues.

Ensure that the transition to sexual life is safe and wanted

While for the vast majority of young women sexual activity is initiated within the context of marriage, findings show that a small proportion of young men and women had engaged in sex before marriage. As documented in this report, many youth had initiated sexual activities uninformed, reiterating the need to provide family life or sex education to young people. Moreover, the finding that for many youth, pre-marital sexual experiences were unsafe or unwanted calls for programmes that focus on building sexual and reproductive health awareness among young people, and developing their skills in negotiating safe sex and communicating with their partners on sexual and reproductive health 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.

Address power imbalances within marriage

Findings confirm that early marriage was relatively rare in Tamil Nadu, and that the majority of youth did play a role in decisions relating to their own marriage and had some pre-marital acquaintance with their spouse. Within marriage, large proportions reported communication and interaction with their spouse; nevertheless, communication on sensitive matters such as contraception was limited for many. Indeed, married life was marked by considerable power



imbalances; for example, notable proportions of young women had suffered physical and sexual violence perpetrated by their husband.

Efforts are needed to encourage couple communication on sensitive issues (contraception, for example), negotiation and conflict management skills early in marriage. Efforts are also needed to inform married young women of their rights so that they have the opportunity to exercise control over their own lives; at the same time, efforts must be made to promote new concepts of masculinity and femininity and egalitarian couple relations among young men and women. Intervention models exist in India that have attempted to address these needs; these should be reviewed and up-scaled as appropriate.

Create a supportive family environment

Findings highlight the limited interaction and social distance between parents and young people while growing up, and the gendered nature of perceptions regarding parental control on youth behaviours. Efforts must be made to create a supportive environment for young people. While evidence on models that are effective in bridging the distance between parents and children or enabling parents to adopt more gender-egalitarian socialisation practices is not currently available, findings presented in this report call for programmes 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 RCH Programme has advocated special services for youth, including the unmarried, these services had not reached youth in our survey. For example, relatively small percentages of young people had ever practised contraception and the method most likely to be adopted was sterilisation. Few had sought care for symptoms of STI or gynaecological problems, and most youth who had sought care for the latter preferred private to public sector facilities. Lack of care seeking and the disconnect between the public health sector and youth underscores the need to sensitise health care providers about the special needs, heterogeneity and vulnerability of unmarried and married young women and men, and to orient them to the need for developing appropriate strategies to reach these diverse groups, including young newly-weds.

Programmes must be inclusive of unmarried as well as married 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 all young people, including the unmarried, in a non-threatening, non-judgmental and confidential environment. Indeed, these findings call for the implementation of strategies outlined under the National Rural Health Mission's RCH Programme.

At the same time, mental health issues need to be addressed. While relatively few young men and women reported symptoms suggestive of mental health disorders, these symptoms were somewhat more apparent among the married than the unmarried. Efforts are needed to screen



young people—particularly the married—for mental health disorders when they avail of other primary health services, including, for example, 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 Tamil Nadu. 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 study in terms of formative research that explores in greater depth the factors impeding successful transitions to adulthood, in the areas, for example, of secondary school completion, economic activity, sexual relations, and 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 may contribute to or impede young people's ability to make successful transitions to adulthood. 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 India 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-oriented vocational skills and providing family life of sex education—few 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 its 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 Tamil Nadu. The study highlights several positive aspects of young people's lives but also 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 Tamil Nadu 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: Tamil Nadu

Key indicators	Men (15-24)		Women (15-24)		Men (15-24)		Women (15-24)	
	Combined				Rural			
	Urban		Rural		Urban		Rural	
Number of respondents	1,913	5,008	890	2,151	1,023	2,857		
Socio-demographic profile								
1. Completed 7 years of schooling (%)	20.0	19.6	18.5	17.1	21.3	21.8		
2. Not in school at age 12 (%)	13.9	17.4	12.4	14.0	15.0	20.1		
3. Engaged in paid and/or unpaid work in last 12 months (%)	62.5	33.8	59.0	24.0	65.2	41.7		
4. Engaged in paid work in last 12 months (%)	60.2	30.9	57.2	22.0	62.5	38.0		
5. Unemployment rate (as % of labour force)	7.0	14.6	6.5	15.0	7.2	14.3		
6. Mother discussed reproductive processes with respondent (%)	0.1	2.0	0.2	1.8	0.0	2.2		
7. Father discussed reproductive processes with respondent (%)	0.2	0.0	0.4	0.1	0.0	0.0		
8. Talked to mother about friends (%)	75.9	82.5	79.0	86.2	73.5	79.6		
9. Talked to father about friends (%)	70.0	60.5	71.9	63.2	68.6	58.4		
Young people's control over their own lives								
10. Had a bank account (%)	18.9	31.0	22.4	32.6	16.3	29.7		
11. Took independent decisions about buying clothes (%)	58.9	28.0	60.6	33.1	57.5	24.0		
12. Allowed to visit friends within village/neighbourhood unescorted (%)	N.A.	67.4	N.A.	65.5	N.A.	68.9		
13. Allowed to visit health facility unescorted (%)	N.A.	11.8	N.A.	11.5	N.A.	12.0		
Sexual and reproductive health knowledge								
14. Correct knowledge of legal minimum age at marriage for females (%)	42.1	32.7	40.7	30.6	43.1	34.4		
15. Aware that a woman can get pregnant at first sexual intercourse (%)	28.6	50.0	32.9	47.0	25.4	52.4		
16. Aware of:								
a. Condom (%)	95.8	83.4	96.2	86.1	95.6	81.3		
b. Oral contraceptive pills (%)	57.1	65.4	58.1	65.0	56.4	65.7		
c. IUD (%)	29.0	63.3	35.1	64.7	24.4	62.2		
d. Withdrawal (%)	19.1	13.3	21.0	14.0	17.7	12.7		
17. Correct specific knowledge ¹ of:								
a. Condom (%)	77.0	38.6	79.2	40.0	75.4	37.5		
b. Oral contraceptive pills (%)	20.2	23.5	22.9	24.2	18.0	23.0		
c. IUD (%)	19.0	38.2	24.9	39.0	14.5	37.7		
d. Withdrawal (%)	16.3	8.4	17.8	8.1	15.2	8.6		

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 (%)	31.2	20.6	34.2	18.7	28.8	22.2	28.8	22.2
19. Comprehensive knowledge of the conditions under which abortion is legal ¹ (%)	6.0	5.8	7.9	6.4	4.5	5.3	4.5	5.3
20. Heard about:								
a. HIV/AIDS (%)	98.9	97.1	99.0	98.6	98.7	96.0	98.7	96.0
b. STI/RTI (%)	30.5	11.7	31.4	12.0	29.7	11.5	29.7	11.5
21. Comprehensive knowledge of HIV ³ (%)	49.6	45.5	54.6	49.4	45.7	42.3	45.7	42.3
Pre-marital romantic and sexual relationships								
22. Ever had an opposite-sex romantic partner (%)	22.7	15.4	20.0	12.8	24.9	17.5	24.9	17.5
23. First spent time alone with an opposite-sex romantic partner before age 15 (%)	15.6	33.5	15.2	32.0	15.6	34.5	15.6	34.5
24. Ever had pre-marital sexual relations with an opposite-sex romantic partner (%)	5.8	1.5	4.3	0.9	6.9	2.0	6.9	2.0
25. Ever had pre-marital sex ⁴ (%)	9.2	2.4	6.5	1.0	11.3	3.5	11.3	3.5
Self-reported health problems								
26. Anxiety about swaptadosh/nocturnal emission (men) in last 12 months (%)	29.3	N.A.	31.6	N.A.	27.5	N.A.	27.5	N.A.
27. Menstrual problems (women) in last 3 months (%)	N.A.	9.0	N.A.	7.7	N.A.	10.1	N.A.	10.1
28. Symptoms of genital infection in last 3 months ⁵ (%)	1.7	21.0	1.1	15.3	2.1	25.5	2.1	25.5
Youth life-style								
29. Consumed alcohol at least once in last month (%)	7.4	0.0	6.1	0.0	8.3	0.1	8.3	0.1
30. Consumed drugs at least once in last month (%)	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0
31. Consumed tobacco products at least once in last month (%)	17.4	0.4	15.4	0.5	18.9	0.4	18.9	0.4
32. Involved in physical fights in last 12 months (%)	9.7	2.8	8.8	1.6	10.3	3.8	10.3	3.8
33. Watched television often (%)	10.8	14.0	11.9	15.4	9.9	12.9	9.9	12.9
Programme participation and voting experience								
34. Participated in youth-related programmes implemented in the community in last 3 years (%)	13.9	9.1	15.4	6.1	12.7	11.4	12.7	11.4
35. Voted in last election ⁶ (%)	81.9	65.6	83.8	67.0	80.6	64.5	80.6	64.5
Marriage								
36. Youth aged 20-24 married before age 18	0.3	18.1	0.2	15.3	0.4	20.4	0.4	20.4

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 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. N.A.: Not applicable.





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

Key indicators	MM (15-29)		MW (15-24)		UM (15-24)		UW (15-24)		MM (15-29)		MW (15-24)		UM (15-24)		UW (15-24)			
	Combined						Urban						Rural					
	1,322	2,007	1,666	3,001	653	804	789	1,347	669	1,203	877	1,654						
Number of respondents																		
Socio-demographic profile																		
1. Completed 7 years of schooling (%)	40.7	28.4	17.3	13.9	39.2	25.2	15.7	12.3	41.9	30.5	18.7	15.3						
2. Not in school at age 12 (%)	31.8	28.7	11.4	10.0	26.3	23.5	10.3	8.6	35.7	32.3	12.4	11.2						
3. Engaged in paid and/or unpaid work in last 12 months (%)	99.7	28.5	58.5	37.4	99.4	15.3	55.2	29.0	99.9	37.4	61.2	44.7						
4. Engaged in paid work in last 12 months (%)	99.2	25.6	56.1	34.5	99.3	13.5	53.3	26.9	99.2	33.7	58.4	41.1						
5. Unemployment rate (as % of labour force)	0.9	15.5	7.9	14.0	0.8	22.9	7.4	12.4	1.1	12.6	8.3	15.3						
6. Mother discussed reproductive processes with respondent (%)	0.1	3.7	0.1	1.0	0.0	2.9	0.3	1.2	0.1	4.3	0.0	0.8						
7. Father discussed reproductive processes with respondent (%)	0.1	0.1	0.2	0.0	0.0	0.0	0.5	0.1	0.2	0.1	0.0	0.0						
8. Talked to mother about friends (%)	63.2	76.4	77.1	86.4	65.9	79.6	79.9	89.9	61.4	74.2	74.8	83.4						
9. Talked to father about friends (%)	56.8	52.0	71.6	65.7	58.2	54.2	73.3	68.0	55.9	50.6	70.2	63.7						
Young people's control over their own lives																		
10. Had a bank account (%)	27.2	30.6	19.1	31.2	35.2	29.4	22.1	34.4	21.7	31.4	16.8	28.4						
11. Took independent decisions about buying clothes (%)	72.1	30.1	57.8	26.7	75.1	34.5	60.5	32.2	70.1	27.2	55.7	21.7						
12. Allowed to visit friends within village/neighbourhood unescorted (%)	N.A.	65.2	79.5	68.8	N.A.	63.0	81.8	66.9	N.A.	66.8	77.6	70.6						
13. Allowed to visit health facility unescorted (%)	N.A.	17.3	41.9	8.1	N.A.	17.3	42.2	8.1	N.A.	17.4	41.6	8.1						
Sexual and reproductive health knowledge																		
14. Correct knowledge of legal minimum age at marriage for females (%)	39.6	33.0	41.7	32.5	39.2	31.9	40.4	29.9	39.8	33.8	42.8	34.8						
15. Aware that a woman can get pregnant at first sexual intercourse (%)	45.9	68.4	26.8	37.9	52.3	67.9	31.1	34.9	41.4	68.8	23.3	40.5						
16. Aware of:																		
a. Condom (%)	98.3	88.0	95.6	80.4	98.7	91.4	96.0	83.1	97.9	85.6	95.2	78.1						
b. Oral contraceptive pills (%)	71.7	76.3	56.2	58.2	74.4	76.4	57.0	58.4	69.7	76.2	55.7	58.0						
c. IUD (%)	48.0	81.6	28.3	51.2	55.1	87.8	34.1	51.2	43.0	77.4	23.6	51.3						
d. Withdrawal (%)	42.5	26.4	16.9	4.7	44.6	28.5	19.1	5.6	41.1	24.9	15.0	3.9						
17. Correct specific knowledge ¹ of:																		
a. Condom (%)	89.4	49.5	76.1	31.4	92.1	54.4	78.3	31.7	87.5	46.2	74.2	31.2						
b. Oral contraceptive pills (%)	34.0	34.7	19.8	16.1	36.3	37.3	22.9	16.6	32.3	33.0	17.3	15.8						
c. IUD (%)	34.2	57.2	18.4	25.7	42.0	64.0	24.1	24.4	28.9	52.7	13.7	26.8						
d. Withdrawal (%)	40.2	20.0	13.9	0.8	42.5	20.7	15.8	0.8	38.4	19.4	12.5	0.8						
18. Reported that condoms do not reduce sexual pleasure (%)	41.1	30.8	31.1	13.3	45.3	27.6	34.1	13.0	38.2	33.2	28.6	13.4						
19. Comprehensive knowledge of the conditions under which abortion is legal ² (%)	6.6	6.9	6.3	5.1	7.4	7.8	8.6	5.6	6.0	6.3	4.5	4.6						
20. Heard about:																		
a. HIV/AIDS (%)	99.0	96.8	98.9	97.3	99.1	98.3	99.1	98.7	99.0	95.8	98.7	96.1						
b. STI/RTI (%)	37.4	15.6	30.2	9.1	40.9	15.2	31.6	10.1	35.0	15.9	29.1	8.3						
21. Comprehensive knowledge of HIV ³ (%)	48.3	44.7	49.9	46.0	56.0	48.3	55.3	50.1	43.0	42.4	45.6	42.3						
Pre-marital romantic and sexual relationships																		
22. Ever had an opposite-sex romantic partner (%)	34.8	24.0	19.9	9.8	29.3	21.5	17.6	7.8	38.6	25.7	21.9	11.5						
23. First spent time alone with an opposite-sex romantic partner before age 15 (%)	5.0	35.1	18.0	31.1	5.0	34.5	17.4	28.2	5.0	35.4	18.4	32.8						

Key indicators	MM (15-29)		MW (15-24)		UW (15-24)		MM (15-29)		MW (15-24)		UW (15-24)	
	Combined						Urban					
	MM (15-29)	MW (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UW (15-24)	MM (15-29)	MW (15-24)	UW (15-24)
24. Ever had pre-marital sexual relations with an opposite-sex romantic partner (%)	12.0	2.5	4.6	8.5	1.4	3.7	14.4	3.3	0.5	14.4	5.3	1.1
25. Ever had pre-marital sex ⁴ (%)	18.2	4.1	7.7	14.2	1.9	5.5	20.9	5.6	0.6	20.9	9.5	1.9
Self-reported health problems												
26. Anxiety about swaptadosh/nocturnal emission (men) in last 12 months (%)	8.9	N.A.	31.3	10.1	N.A.	33.5	8.0	N.A.	N.A.	8.0	29.6	N.A.
27. Menstrual problems (women) in last 3 months (%)	N.A.	8.4	N.A.	N.A.	7.2	N.A.	N.A.	9.1	8.0	N.A.	N.A.	10.7
28. Symptoms of genital infection in last 3 months ⁵ (%)	1.4	24.1	1.7	18.9	1.1	0.9	1.7	27.5	13.0	1.7	2.3	24.1
Youth life-style												
29. Consumed alcohol at least once in last month (%)	17.7	0.0	6.1	17.3	0.0	5.2	18.0	0.1	0.0	18.0	6.9	0.1
30. Consumed drugs at least once in last month (%)	0.1	0.0	0.1	0.0	0.0	0.1	0.1	0.0	0.0	0.1	0.0	0.0
31. Consumed tobacco products at least once in last month (%)	37.5	0.7	14.6	39.0	0.9	13.1	36.5	0.7	0.2	36.5	15.9	0.2
32. Involved in physical fights in last 12 months (%)	9.2	3.2	9.3	9.6	1.2	8.3	8.9	4.6	1.8	8.9	10.1	3.2
33. Watched television often (%)	9.0	15.5	11.3	8.1	16.5	12.4	9.6	14.9	14.7	9.6	10.3	11.4
Programme participation and voting experience												
34. Participated in youth-related programmes implemented in the community in last 3 years (%)	11.6	15.9	14.1	12.2	11.4	15.2	11.2	19.0	3.1	11.2	13.2	5.8
35. Voted in last election ⁶ (%)	91.4	65.0	81.7	90.8	66.0	83.7	91.9	64.3	68.4	91.9	79.9	64.8
Married life												
Combined												
36. Reported a love marriage (%)	20.1		19.1	18.4		17.9	21.3			21.3		20.0
37. Usually discussed money matters with spouse (%)	95.6		92.8	95.9		92.2	95.3			95.3		93.2
38. Reported any physical violence perpetrated on wife by husband (%)	34.3		27.0	31.9		22.0	36.0			36.0		30.3
39. Husband ever forced wife to have sex (%)	14.7		25.3	15.3		23.3	14.2			14.2		26.6
40. Ever had extra-marital sex (%)	3.5		0.1	3.3		0.2	3.6			3.6		0.1
41. Ever used contraception within marriage (%)	18.3		21.1	20.5		26.9	16.9			16.9		17.2
42. Currently using contraception (%)	15.7		16.9	17.5		21.7	14.5			14.5		13.8
43. Ever used a contraceptive method to delay first pregnancy (%)	2.5		1.6	2.8		1.7	2.3			2.3		1.5
44. Children ever born (mean)	1.1		1.1	1.0		1.0	1.1			1.1		1.1
45. Ideal number of children ⁷ (mean)	2.1		2.1	2.1		2.1	2.1			2.1		2.1
46. First delivery in health institution ⁸	81.2		83.8	80.9		87.5	81.4			81.4		81.2
47. First birth attended by a health professional ⁹ (%)	93.0		93.4	97.7		97.4	89.7			89.7		90.7

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 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. 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

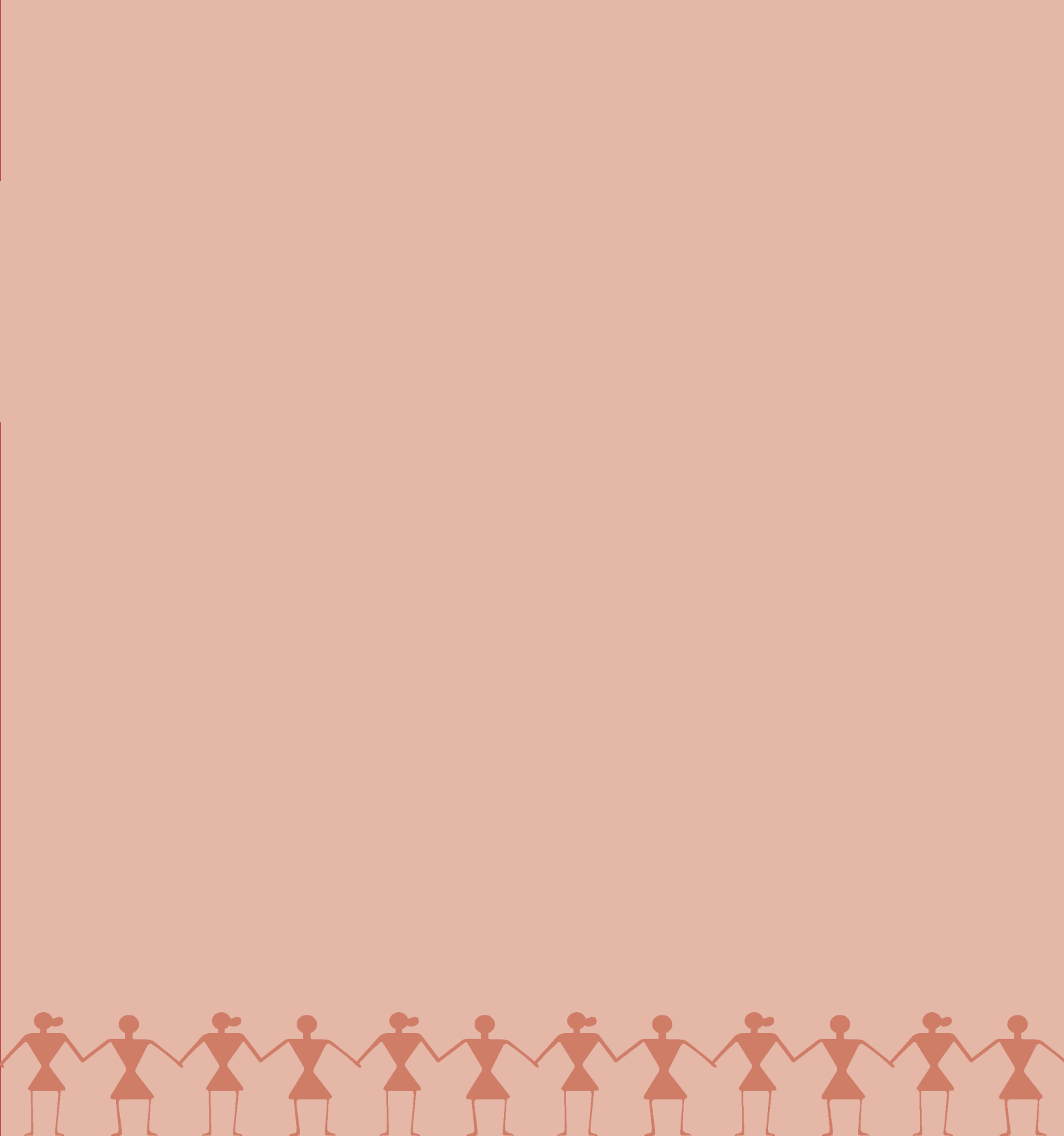


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