Vulnerability of adolescents in their sexual behaviour
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Abstract
Background: The purpose of the study was to understand the vulnerability in the sexual behaviour of some adolescents in a district in Sri Lanka.
Method: A three-component study: Component I—Pregnant adolescents (Sample 450), Component II—Partners of pregnant adolescents (Sample 150), and Component III—School adolescents (Sample 2020). Data collection tools were interviewer administered questionnaires to pregnant adolescents and partners of pregnant adolescents and self-administered questionnaire to the school adolescents. Ethical approval was obtained from the Ethical Review Committee of SLMA (Sri Lanka Medical Association).
Results: Initiation of sex is non-consensual (either did not want or forced) in almost a quarter (6/23) of the sexually active school girls and one fifth of the sexually active school boys (10/46). Non-consensual first intercourse was reported by 4% pregnant adolescents and 1% partners of pregnant adolescents.
Bivariate analysis showed that male partners whose attitude towards their sexual experiences were uncertain (n=24) or forced (n=2) were more likely to report their adolescent partner’s pregnancy as unplanned. In the multivariate analysis, male partners of pregnant adolescents who said their adolescent partners’ pregnancies were not planned had odds three times higher of having non-consensual first intercourse than the partners who said they planned their adolescent partners’ pregnancies. In the multivariate analysis under age pregnant adolescents had three times odds of having a non-consensual first intercourse than the older pregnant adolescents.
Conclusions and Recommendations: A group of male and females had been equally vulnerable to be sexually victimized. This shows that non-consensual sex exists across all samples. Need appropriate policy formulation in empowering children to be protected from sexual abuse by providing them with appropriate skills from preschool age.

Introduction
Adolescence and sexual behaviour
Adolescence is that period between childhood and adulthood and is characterised by substantial physical, cognitive and social development. It is universally accepted that adolescence is a period of sexual maturity that transforms a child into a biologically mature adult capable of sexual reproduction.
Non-consensual sex
Definitions of non-consensual sex vary. However, all definitions rest on a common foundation: a lack of full and free choice in decisions to engage in sexual relations. Intense psychological, emotional, and financial pressure or a fear of social consequences also can compel individuals to relinquish their right to resist unwanted sexual advances. While there is limited data on sexual violence in young people’s relationships, one study in the United Kingdom of 489 young people found that almost one in five girls (17.9%) reported that their boyfriends had either attempted to force, or had forced, sexual intercourse within the past year [1].
Several national surveys carried out in Sri Lanka have reported sexual abuse. UNICEF (2004) reported 10% of adolescents being the subject of sexual abuse [2]. Thalagala [3], reported sexual abuse in 5.1% Sri Lankan children aged 8-14 years. Basnayake S [4], reported 7% of adolescents have been sexually molested.

Age of consent
In relation to sexual activity, the age of consent is the minimum age at which a person is legally competent to consent to sexual acts. Sri Lanka’s criminal law recognizes that there is a common age of sexual consent for boys and girls at 16 years. According to the rape laws of Sri Lanka, a man is said to commit rape when “he has sexual intercourse with a woman with or without her consent when she is under 16 years of age unless the woman is married according to Islam law and his wife who is over twelve year of age and is not judicially separated from the man” [5].
Consent to marry
Consent to marry has been an important requirement of marriage under the marriage legislation in Sri Lanka for over a century, [Early marriage legislation, Kandyan Marriage and Divorce Act, (1951), and General Marriages Ordinance (1907)]. This legislation was amended in 1995 to raise the minimum age of marriage for the Kandyan girls from 14 years, and harmonize it with the age of 18 years [6]. Sri Lanka, the study setting, has impressive health and social indicators for a low-income country as well as has one of the most literate populations amongst developing nations [7].

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There is little public awareness about ARH in Sri Lanka, primarily due to cultural taboos that have made it difficult for parents, teachers and community leaders to openly discuss key issues among themselves or with adolescents [8]. As a result, channels of communication, such as mother-daughter discussions, teacher-student discussion or peer-to-peer programmes through which adolescents might receive information on safe sex, relationships, reproductive health, and related issues are not widely available to Sri Lankan adolescents [8].

**General objective**

To conduct a rigorous population-based study including both adolescent boys and girls to explore the vulnerability in the sexual behaviour of some adolescents in a district in Sri Lanka.

**Methodology**

| Study population      | Sample size | Data collection tool                      |
|-----------------------|-------------|------------------------------------------|
| Pregnant adolescent   | 450         | Interviewer administered Questionnaire    |
| Partner of pregnant adolescent | 150    | Interviewer administered Questionnaire    |
| School adolescents    | 2020        | Self-administered questionnaire           |

Population based cross sectional explorative study. The study employed three-components of data collection: Component I- Pregnant Adolescents, Component II- Partners of pregnant adolescents, and Component III- School adolescents.

**Results**

The results are presented in the three components studied.

**Component 1-Pregnant adolescents**

Only 409 pregnant adolescents’ data were taken for in depth analysis as 41 of the pregnant adolescents were not in their first pregnancy. From the 409, 121 (30%) was under 18 years of age and 146 (36%) said they did not plan their pregnancy (Table 1).

When asked the reason for their first intercourse, five adolescents have divulged that they were forced in to their first intercourse (Table 2).

The first sexual intercourse was forced upon five of the adolescents in the sample. 15 (4%) says that they regretted having their first sexual intercourse (Table 3). However, it is important to note that the attitudes expressed by the pregnant adolescents in relation to first sexual intercourse significantly differed (p<0.05) between the two age groups, with the younger group being more likely to express negative feelings/responses (Table 2).

As shown in table 3, the adolescents who said they planned their pregnancies were significantly more likely to report that they had wanted (consensual) their first intercourse than the adolescents who said they did not plan their pregnancies. The adolescents who said they did not plan their pregnancies had reported that they did not want (non-consensual) their first intercourse. Though as already noted above, majority of the respondents across the groups reported wanting the sexual encounters to happen. Significantly more adolescents who had planned their pregnancies were glad about their first intercourse (248, 94%) than the adolescents who had not planned their pregnancies. Though the actual numbers and percentages are small, significantly more adolescents who reported they had not planned their pregnancies had not had consensual sex. Their first intercourse (9, 6%) had been unwanted or they have reported they had been forced in to their first intercourse (3, 2%). They further have responded that they regretted the first sexual intercourse (11, 8%).

**Component 11-Partner**

One hundred and fifty partners of pregnant adolescents were the sample in this component. Overall, the picture is predominately one of partners who were willingly participating in the sexual encounter. As shown in table 5, when the total sample was considered, 124 (84%) men have said they wanted their first intercourse to happen. A small minority had been ambivalent (24, 16%). Two (1%) has said that it had happened by force (Table 4).

Interestingly, however, the respondents’ current reflections on the age at which they had had their first sexual intercourse showed that eight (5%) thought their age at first sexual intercourse was too young, seven (5%) were of the opinion they were too old. The difference emerging is understood to reflect the range of first intercourse which was from 16 to 37 years.

**Component 11- School adolescents**

In response to the question ‘Have you ever had any experience of a ‘Sexual’ relationship’, almost 9% boys and 1% of girls reported that they were sexually active. In all these findings, the differences between the males and females were statistically significant (p<=0.001) (Table 5).

The 69 sexually active adolescents comprised 46 boys and 23 girls. All of them were Sinhalese by ethnicity. The age at first sexual experience ranged from 12 to 19 for the girls (mean 16.36 and SD 1.74) and from 10 years to 17 years for the boys (means 15.28 and SD 1.8). As illustrated in table 8, a greater proportion of boys than girls reported sexual activity below the age of consent. Among the group, 23 (50%) boys and 5 (22%) girls reported that they were sexually active before 16 years of age (Table 5).

In relation to the question about whether first sexual experience was consensual, the responses ‘did not want’ and ‘happened forcefully’ were taken as indications of non-consensual sexual activity. As table 6 shows, in the majority of cases it was consensual although a significant minority 23% reported non-consent. In terms of their feelings after it had happened, most the boys were glad whereas most girls were ambivalent.

**Discussion**

This population based study focused on understanding the context and patterns of adolescent pregnancy and sexual behaviour in a district in Sri Lanka.

The study employed three-components of data collection: Component I- Pregnant adolescents, Component II- Partners of pregnant adolescents, and Component III- School adolescents.

| Reasons                       | N  | %  |
|-------------------------------|----|----|
| After marriage                | 217| 53 |
| Eloped and living together    | 106| 26 |
| Believing the boy friend      | 41 | 10 |
| Eloped ‘married’              | 12 | 3  |
| With intention to get married | 8  | 2  |
| Leading from kissing          | 8  | 2  |
| Afraid the boyfriend will get | 8  | 2  |
| Because of love               | 4  | 1  |
| By force                      | 5  | 1  |
| Total                         | 409| 100|

Table 1. Reasons given by adolescents for their first sex.
pregnant adolescents, and Component III- School adolescents. In this study, a sample of 450 pregnant adolescents (Component I), a sample of 150, partners of adolescents (Component II) and 2020 school adolescents (Component III) have been the focus. However, practical considerations dictated that the method of data collection differed across the components. There were advantages of using an interviewer-administered questionnaire in Components I and II as the study population included respondents from different ethnic groups and with different levels of literacy. Face-to-face interviews were conducted by trained and experienced female and male staff to pregnant adolescents and partners of pregnant adolescents respectively. The fact that data collectors could speak to the respondents in their first language helped to ensure that the respondents felt comfortable in the interviews and there was a high level of cooperation. In contrast, a self-administered questionnaire was appropriate for Component III - the school adolescents - due to the nature of anonymity/confidentiality that could be maintained by the instrument.

Self-reporting on sensitive topics (premarital sexual behavior / adolescent sexual behavior/ sexual activity with more than one/and partners of pregnant adolescents respectively. The fact that data collectors could speak to the respondents in their first language helped to ensure that the respondents felt comfortable in the interviews and there was a high level of cooperation. In contrast, a self-administered questionnaire was appropriate for Component III - the school adolescents - due to the nature of anonymity/confidentiality that could be maintained by the instrument.

Self-reporting on sensitive topics (premarital sexual behavior / adolescent sexual behavior/ sexual activity with more than one/
Table 4. Distribution of respondents’ according to their attitude regarding first sexual intercourse and intercourse in general.

| Variable                                      | N   | %    |
|----------------------------------------------|-----|------|
| Wanted                                       | 124 | 82.7 |
| Was not sure                                 | 24  | 16.0 |
| Happened forcefully                          | 2   | 1.3  |

Respondent reflecting how he feels about his age at first intercourse

| Too young                                    | 8   | 5.3  |
| About right                                  | 135 | 90.0 |
| Too old                                      | 7   | 4.7  |

Respondent’s view on intercourse before marriage

| Accept intercourse before marriage           | 35  | 23.3 |
| Do not accept                               | 115 | 76.7 |

Number of partners ever having intimate sexual relationships

| One                                          | 130 | 86.7 |
| Two                                          | 10  | 6.7  |
| Three                                        | 7   | 4.6  |
| >3                                          | 3   | 2.0  |

Table 5. Adolescents’ practices on sexuality.

| Attitude and practice | Total N=2,020 | Male N=521 | Female N=1,499 | x² | P   |
|-----------------------|---------------|------------|----------------|----|-----|
| Have experienced a sexual relationship | 69 | 3.4 | 46 | 8.8 | 23 | 1.5 | 62.6 | <0.001 |

Table 6. Distribution of adolescents by experience on the first sexual experience according to attitude at first sexual experience by gender.

| Variable                                      | Total N=69 | Male N=46 | Female N=23 | x² | P   |
|----------------------------------------------|------------|-----------|-------------|----|-----|
| Wanted to happen                              | 37 | 53.7 | 28 | 60.8 | 9 | 39.1 | 5.00 | 0.01 |
| Was not sure                                  | 16 | 23.1 | 8 | 17.4 | 8 | 34.8 |
| Did not want                                  | 4 | 5.8 | 3 | 6.5 | 1 | 4.3 |
| Happened forcefully                           | 12 | 17.4 | 7 | 15.3 | 5 | 21.7 |

Adolescents’ reflecting how they felt after their first sexual experience

| Glad it happened | 35 | 50.7 | 26 | 56.6 | 9 | 39.1 | 4.32 | 0.03 |
| Was not sure     | 18 | 26.1 | 10 | 21.7 | 8 | 34.8 |
| Regret           | 16 | 23.2 | 10 | 21.7 | 6 | 26.1 |

Chi square tests were performed on the cross-tabulation of the binary categorised variables wanted it to happen/’not sure versus did not want/happened forcefully' and ‘glad it happened’/‘not sure versus/’regret’ and ‘too young’ versus ‘about right/other’ against male and female.

Table 7. Degree of ‘wantedness’ of first sexual experience of males and females across the three components.

| First sexual experience | Pregnant adolescent N=409 | Sexually active School girl N=23 | Partner N=150 | Sexually active School boy N=46 |
|-------------------------|----------------------------|---------------------------------|---------------|---------------------------------|
|                         | N | %   | N | %   | N | %   | N | %   |
| Wanted                  | 385 | 94.1 | 9 | 39.1 | 116 | 90.7 | 28 | 28.6 |
| Was not sure            | 12 | 2.9 | 8 | 0.0 | 0 | 0.0 | 8 | 8.3 |
| Did not want            | 9 | 2.2 | 1 | 0.0 | 12 | 8.0 | 3 | 3.0 |
| Happened forcefully     | 3 | 0.8 | 5 | 4.0 | 2 | 1.3 | 7 | 7.0 |

Did not want and happened forcefully taken as non-consensual sex.

Despite the overarching picture of planned and welcomed adolescent pregnancy among the study samples, the findings across the three components also alert us to a proportion of males and females whose experiences of sexual behaviour and pregnancy are not positive and who therefore appear to be vulnerable.

Unwanted pregnancy

Out of one hundred and forty six (36%) adolescents who said they did not plan their pregnancy, 37 (9%) were not happy at all in their pregnancy and 23 (6%) had wanted to get rid of the pregnancy. The majority of these adolescents were younger than 18 years of age.

Unwanted sex

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There was evidence across all three components that a proportion of boys and girls had not wanted their first sexual experience to occur.
Table 8.4 shows that the experience of non-consensual (either did not want or were forced) in almost a quarter (6/23) of the sexually active school girls and one fifth of the sexually active school boys (10/46). Almost 1% of pregnant adolescents and partners have disclosed their first sexual experience was forced, and further respondents reported that they had not wanted their first sex. This is an area of concern. Clearly, there needs to be more understanding about the circumstances of these sexual experiences and how these may vary between the genders. Steps are needed to be taken to protect these vulnerable adolescents.

When more advanced statistical analysis was done, it was shown that underage pregnant adolescent had three times higher odds of having had non-consensual first intercourse compared to the older group. Moreover, adolescents who said their pregnancies were not planned had three times higher odds of having had non-consensual first intercourse as compared to the group who planned. Bivariate analysis showed that male partners whose attitude towards their sexual experiences was uncertain (n=24) or forced (n=2) were more likely to report the pregnancy as unplanned. Data shows that being underage renders one more vulnerable to non-consensual intercourse [9].

**Conclusion and recommendation**

Among the adolescents who engage in sexual behaviour with some ambivalence and/or regret, there is a core of vulnerable adolescents for whom additional measures are needed to increase levels of protection and reduce exposure to harmful sexual experiences. Need appropriate policy formulation in empowering children to be protected from sexual abuse by providing them with appropriate skills from preschool age.

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