

Theme: Determinants of risky sexual behavior among young people aged 15-24 in Burundi

1. Introduction

Reproductive health is of paramount importance, especially as it concerns adolescents and young people, who are considered the nervous system of society.(Inoussa, 2004). According to the World Health Organization (WHO), adolescence is the age group between 10 and 19 years old and youth is the age group between 20-24 years old. According to(SARRAMEA, 2018), adolescence is a period of life where the transition from childhood to adulthood undergoes many changes, both physical and psychological. In the period of adolescence and youth, the desire for intense experiences increases rapidly, while their ability to control their impulses takes longer to develop. The increase in risky sexual behavior in adolescence is partly due to the fact that, from a neurological point of view, they sometimes do not have the means to curb their enthusiasm(Damour, 2018).Young people who start their sexual life early are more likely not to use a condom when this happens(Kacou, 2018). Sexual debut occurs earlier in disadvantaged social classes and the likelihood of having sexual intercourse with several partners is higher for these young people than for those living in better socio-economic conditions.(Edouard, 2018). In Burundi, early sexual intercourse is the most visible facet of health problems among adolescents and young people. According to a study conducted in 2002 among adolescents and young people, 16% of respondents said they had their first sexual intercourse at the age of 10, 17% between 10 and 14 and 38% between 15 and 20. The 2017 Demographic and Health Survey (EDS) shows that among women aged 25-49, 3% had their first sexual intercourse at an early age, that is, before the exact age of 15. The proportion of young people who have had sexual intercourse without using a condom and with several sexual partners is increasing day by day in Burundi according to the EDSB III report of 2017. This leads us to ask the main question of our following study: what are the determinants of risky sexual behavior among young people aged 15-24 in Burundi.

2. Presentation of the study area

The study was conducted in Burundi. Burundi is one of the countries of the African continent straddling Central Africa and East Africa. It is bordered to the north by Rwanda, to the east and south by Tanzania and to the west by the Democratic Republic of Congo (DRC). It is located between 2°45' and 4°26' South latitude and between 28°50' and 30°53' East longitude. Most of the relief is between 1300 and 2000 m above sea level. With an area of 27,834 km² (of which 1725 km² are occupied by the waters of Lake Tanganyika and some small inland lakes), it is one of the smallest and most densely populated countries in Africa.

3. Theoretical framework of the study

The sociocultural approach postulates that the sexual behavior of individuals is largely influenced by the morals and values of the society in which they live. **The demographic approach** highlights the influence of demographic factors on the occurrence of risky sexual behavior among adolescents and young people. **The economic approach** stipulates that the sexual activity of young people and the behaviors that govern it are the result of a rational calculation by their authors. The biological approach postulates that the sexual activity of young

people results from a purely biological and therefore natural mechanism. For Freud (1905), the types of sexual behavior are the result of a strong sexual desire. **The institutional approach** is based on the idea that the adoption of risk-free behavior by young people depends both on the political and legal framework and on the possibility of access to information and means of prevention. **The gender approach** stipulates that the woman or young girl, due to her weak decision-making power, has no control or at least limited control over her sexuality (Moloua et al., 2004) and finally **the systemic approach** which integrates all the factors in order to evaluate the explanatory power of each.

4. Data source

This study uses data from the third Burundi Demographic and Health Survey (EDSB-III), conducted by the Burundi Institute of Statistics and Economic Studies (ISTEEBU)

5. Target population and dependent variable

The target population of our study is all young single women aged 15-24 who have had sexual intercourse at least once in their life. In our study, we have chosen as the dependent variable "Precocity of sexual intercourse". This variable has two modalities, namely: Early (sexual intercourse at an age below 18 years) or Normal (sexual intercourse at an age above 18 years). The independent variables that we used in our study include: region of residence, place of residence, religion of young people, level of education of young people, age and sex of the head of household, age and sex of young people, standard of living of the household, occupation of young people, marital status of young people, size of household and degree of exposure to the media.

6. Analysis method used

Given the dichotomous nature of our dependent variable, the appropriate analysis model we used is binomial logistic regression.

7. Bivariate descriptive analysis

All the independent variables used in this study are significantly associated with the precocity of sexual intercourse at the 1% threshold except the variable level of education of young people which has a significance threshold greater than 10% (see appendix 3).

8. Explanatory analysis

The explanatory analysis of our study was done with the binary logistic regression model. The analysis of the results of the final model reveals 7 significant variables, namely the age of the young people, the size of the household, the marital status of the young people, the region of residence, the religion, the occupation of the young people and the level of education of the young people. Indeed, the interpretation of this final model shows that young people living in the southern region, single young people, young people of the Protestant and Muslim religions, young people with no level of education, young people without occupation and those living in large households have a higher risk of experiencing early sexual intercourse.

9. Discussion of the results of significant variables

❖ **Household size**

Household size is significantly associated with early sexual intercourse among young people aged 15-24 in Burundi. The final model M7 shows that the risk of experiencing early sexual intercourse is very high for young people living in medium-sized households (six people) than those living in small households (less than six people). This result is contrary to that found in most previous studies. Some previous studies have shown the influence of household size on young people's risky sexual behavior. A study conducted by Rwenge (2013) in French-speaking countries in sub-Saharan Africa, shows that a large household size, involving the presence of several adults, can promote more supervised sexual education. In Chad, Côte d'Ivoire and Madagascar, boys living alone are at increased risk of risky sexual behavior. For girls, this risk is observed in Cameroon and Chad, particularly in households of 2-3 people. On the other hand, the theory of relative deprivation thus explains how household size, by exacerbating conditions of deprivation and lack of support, can lead to increased precocity of sexual intercourse among young people.

➤ **Marital statuses**

The marital status of young people significantly influences the precocity of sexual intercourse among young people aged 15-24 in Burundi. In this study, we find that young single people have a very high risk of experiencing early sexual intercourse compared to their married counterparts. This result is contrary to that found by previous studies. In the Central African Republic, Yadjindji (2008) found that young single people have a lower risk of experiencing early sexual intercourse than their married counterparts. The predominance of early sexual intercourse among young single people in our study is explained by the Burundian context. One of the determining factors is the fact that many young people live alone in rented houses, which reduces parental supervision and increases their freedom, thus exposing them to early sexual behaviors. This situation can be analysed through the theory of relative deprivation, which postulates that individuals facing inequalities and socio-economic deprivations are more likely to engage in risky behaviors. Living alone, without supervision or family support, and facing economic challenges, young people may be further pushed toward early sexual intercourse. This analysis refutes our hypothesis H5 according to which young married people are more likely to have early sexual intercourse than young single people.

➤ **Religion**

The results of our study show that young people of the Muslim faith are at greater risk of experiencing early sexual intercourse than those of the Christian religion. This result is consistent with that found by several authors. All these authors have shown that religious affiliation is a determinant of early sexual debut in certain countries. In Cameroon, it appears that Muslim adolescents and followers of traditional religions are significantly less likely to delay their first sexual intercourse in all regions of residence. (Kuate, 1998). Another study carried out in Cameroon by Tsabang (2001) found that Muslim youth are more likely to have started their sexual activity earlier than Catholic youth. Dembélé (2004) observed almost the same trend in Burkina Faso. His study found that animist and Muslim adolescents are more likely to engage in premarital sexual activity than Catholics. Furthermore, the Burundian

context shows that Catholic communities in Burundi are often very close-knit and provide a strong support network for young people. Parishes organize youth activities, spiritual retreats, and workshops on sexual morality, providing safe spaces where young people can discuss their concerns and receive advice. This confirms our hypothesis H1 that Muslim youth initiate their sexual life earlier than Christian youth.

➤ **Educational level of young people**

Educated youth are less likely to experience early sexual intercourse compared to uneducated youth. This observation is consistent with the results of Yadjindji (2008) in Central Africa. This difference is easily explained: the lengthening of schooling delays the age of first marriage for women in most countries, thus prolonging the period of celibacy and creating a gap between the age of onset of sexual life and the age of union among women.(Mondain & Delaunay, 2006). Schooling plays a crucial role in providing individuals with information about sexuality, associated risks and prevention methods.(Songué, 1998). In addition, school exposes young people to the influence of their peers in matters of sexuality, thus illustrating the impact of the school environment(Dembélé, 2004). Indeed, school is not limited to teaching reading, writing and professional skills. It also develops young people's ability to reason, analyze, judge, research and understand, including the risks associated with early sexual activity. These skills distinguish educated young people from uneducated ones. Thus, educated young people, thanks to education, their critical observations and the influence of the media, are better informed about the consequences of early sexual intercourse. This knowledge makes them more reluctant to adopt this practice compared to uneducated young people, who often lack information about sexuality.

10. Some bibliographical references

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