

“Boys Remain Prestigious, Girls Become Prostitutes”: Socio-Cultural Context of Relationships and Sex among Young People in Nepal

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Abstract

One of the key characteristics of many developing countries compared to more developed countries is that their population is relatively young, and a proportion of those young people are becoming sexually active each year. The last two decades has seen a growing concern worldwide of the spread of HIV/AIDS, but, of course, young people face a range of socio-economic, cultural, psychological and sexual health-related problems at that time of their life. Very little research has been conducted in this area into Nepalese young people's problems. Our qualitative study explores key problems faced by Nepalese youths with particular emphasis on sexual and reproductive health issues. The findings of ten focus group discussions with a total of 75 participants and 31 in-depth individual interviews indicated that many young people of Nepal face a range socio-economic, psychological, sexual and reproductive health-related problems. Unemployment, less opportunity for sex and entertainment, stress, curiosity, communication gap and poor sex education and sexual health services were frequently reported problems. In addition there was a gender difference around sex with young women (girls) having fewer opportunities and less freedom than young men (boys). In order improve young people's sexual health, more attention needs to be given to rigorous research and the design and implementation of appropriate interventions. Young people's ability to make informed choices about their own health and risk behaviour should be enhanced.

Keywords: Socio-economic, Sexual, Young people, Generation gap

1. Background

There has been a major development in sexual and reproductive health programmes and research after the 1994 International Conference in Population and Development (ICPD) (UNFPA 2004, Beesey 2004, Dehne & Riedner 2005). However, research is lacking in Nepal (Stone *et al.* 2003, Adhikari & Tamang 2009) as young people's sexual and reproductive health has not been a public priority (Regmi *et al.* 2008).

Essentially, 'young people' are those between the beginning of puberty and the attainment of adulthood (Agampodi *et al.* 2008), this paper uses the term 'young people' throughout although there are slightly different

definitions for 'adolescence' and 'young people' (see below). Francis and colleagues (1994) argue that development of knowledge and attitudes takes place during this period. It is also generally agreed that this period is usually associated with problems and challenges as young people learn to become young adults, and sometimes they struggle to fit into society. In search of their identity, young people may start experimenting with drugs, alcohol, tobacco and sex which could make them vulnerable to contracting infections such as HIV (Human Immunodeficiency Virus (Gaash *et al.* 2003). Young people have to develop their knowledge and skills to deal with the temptations and dangers associated with being an adult. Beautrais (2000) discussed that young people's problems such as family adversity, individual vulnerabilities, exposure to stressful life events and social, cultural and contextual factors could also contribute to suicidal behaviour. The developmental stage of adolescence is a period of turmoil and health workers around the world are trying to prevent, or at least reduce risk-taking behaviour among young people (Mahat & Scoloveno 2001).

According to the 2001 census of Nepal, 23.6 percent of the population is adolescent (aged between 10-19 years) and almost one third (32.5 %) of the total population is young (aged between 10-24 years) (Aryal & Adhikary 2003). This illustrates that adolescents and young people constitute a large section of the total population of Nepal. Literacy status among young people is high (74%), although this proportion is lower for young women (65.2%). Marriage is nearly universal (Aryal & Adhikary 2003) although there has been a noticeable increase in the median age at marriage among women age 20-49 over the last ten years from 16.4 years in 1996 to 17.2 years in 2006 (New Era/MOH 2001, New Era/MOH 2006). There is a general view that education and rapid urbanization contributed to this rising age at marriage in Nepal. However, Pokharel and colleagues (2006) highlighted that Nepalese women generally stop attending school if they marry early.

Nepali have many strong traditional norms and beliefs on sex and sexuality (Mahat & Scoloveno 2001). Indeed, the topic of sexuality largely remains taboo in many Asian countries including Nepal (Agampodi *et al.* 2008, Ali 2004, Stone *et al.* 2003, Adhikari & Tamang 2009). Friendship with people from the opposite sex is still unacceptable in many Asian societies. Sexual and reproduction matters are rarely discussed and sexual activities outside marriage are not accepted in most of Nepalese society (Mathur *et al.* 2001). Despite these generally traditional views a significant proportion of young people is engaged in premarital and high risk-sexual activities (Adhikary & Tamang 2009, Tamang *et al.* 2001, New Era/MOH 2006). A recent study carried out among college students in Kathmandu found that 39% of the study participants have had premarital sex. This study also reported that more than half of the respondents (55%) have multiple sex partners and 23% of the responding students had visited commercial sex workers (Adhikari & Tamang 2009). Similarly, Tamang and colleagues (2001) found that 54% of unmarried residents of Nepalese border towns had sex with non-regular partners. The regular use of condoms during sexual intercourse with non-regular partners was found to be generally low. This study documented that only 31 % among residents and 20 % among non-residents men had used a condom during their last encounter with non-regular sex partners (Tamang *et al.* 2001). Limited routine data suggest that Nepal's young people are (a) at risk of HIV; (b) engaging in high risk behaviour; and (c) have high adolescent fertility (New Era/MoH 2006, Sanzero & Mahat 2003, NCASC 2008).

The most recent Demographic Health Survey 2006 shows that 74% of young people in Nepal are unmarried. The practice of delayed marriage also appears to be on the rise in Nepal (New Era/MoH 2001, New Era/MoH 2006, Aryal & Adhikary 2003). Bott and colleagues (2003) argue that many South Asian young people spend more years in education and hence marry later. Education has created opportunities and given them more time to form intimate (sexual) relationships before marriage. The literature also suggests that such opportunities may result in forced sexual activities, aggression, unwanted pregnancies, induced abortion and Sexually Transmitted Infections (STIs) (Burke *et al.* 1988, Muñoz-Rivas *et al.* 2007).

Although there is a growing body of research on Nepalese young people's knowledge, attitude and behaviours on sexual and reproductive health including HIV/AIDS (for example, Stone *et al.* 2003, Jaiswal *et al.* 2005, Adhikari & Tamang 2009, Puri & Busza 2004), published literature about their socio-economic and relationship problems is still limited. Anecdotal evidence and a number of small- scale studies suggest that many young people of Nepal face a range of socio-economic, cultural, sexual and psychological issues. Therefore research into social, cultural and sexual and reproductive health status and problems is crucial for policy makers and health promoters alike, and ultimately for the population's future economic and social wellbeing.

The aim of this qualitative study is to explore the socio-cultural context of sexual and reproductive health problems among young people of Nepal. It is anticipated that the issues discussed in this paper would provide a basis for addressing the issues of young people's problems, which could be beneficial in designing policies and programmes to adopt the specific needs of young people of Nepal if taken into account accordingly.

2. Methods

As our research was primarily designed to explore sexual culture and behaviour among young people of Nepal, a qualitative approach was most appropriate. Qualitative methods are particularly suitable for exploring new topics since “qualitative methods address ‘how’ and ‘why’ questions” (van Teijlingen & Forrest 2004: 171). The literature suggests that qualitative methods have become an increasingly important mode of inquiry for social science issues (Pope *et al.* 2002, Smith 1998). It is an appropriate method to explore sensitive issues and it has previously been applied to researching sexual and sexuality issues of young people of Nepal (Thapa *et al.* 2001, Mathur *et al.* 2001, Puri & Busza 2004, Pokharel *et al.* 2006). Focus groups have been used with young people in similar sexual health studies (e.g. DiCenso *et al.* 2001, Roberts *et al.* 2005, van Teijlingen *et al.* 2007). However, since we were not sure if focus groups would work in a traditional society such as Nepal we also conducted a number of face-to-face interviews. Many issues such as young people’s problems, formation of partnerships (premarital and extramarital), sexual culture and behaviours, responsibility for safer sexual practices and sexual health service utilization were discussed. However, in this paper we have only focused on socio-economic, sexual and reproductive health-related problems of Nepalese young people. Ethical approval was granted by the Nepal Health Research Council, and consent was taken from each participant prior to the study.

2.1 Data Collection

Focus group discussions (n=10) and in-depth interviews (n=31) were carried out among urban and rural young people of Kathmandu and Chitwan districts between June and August 2007. Married and unmarried young people aged 15-24 years were selected purposively (Bowling 2002) from both urban and rural areas. Educated participants were approached with the help of educational institutions, whereas school drop-out participants were selected with the help of local community-based organizations. In addition, informal meetings with stakeholders were held to seek assistance in recruiting participants.

All focus group discussions (FGDs) and in-depth interviews were conducted by experienced researchers, who were (a) native Nepali speakers and (b) of the same gender as the participants. Thus a male researcher conducted all focus groups and interviews with young men and a female researcher those with young women (Hennink 2007, van Teijlingen *et al.* 2007). Comprehensive training which included research aims, method of data collection, use of equipment, structure of the questions and target groups was provided to researchers. A discussion guide in Nepali was developed and piloted. Two FGDs (1 male & 1 female) and four in-depth interviews (2 male & 2 female) were carried out in Kathmandu to pre-test the guide. All interviews and FGDs were carried out in Nepali language in a closed room to assure confidentiality and were also tape recorded with their permission. Only three people (2 male and 1 female) refused to take part in the interview for personal reason.

2.2 Data Analysis

The process of transforming conversation into words is not without challenges. We carefully made all transcriptions based on the original tape recordings (McLellan *et al.* 2003) and then translated them into English (Twinn 1997). The translated version was cross-checked to ensure the inter-rater reliability (Pitchforth & van Teijlingen 2005). Any differences in text were discussed in detail between researchers for appropriate translation. The data was cleaned and labelled prior to analysis, and organised with the help of NVivo 8 software. A thematic approach (themes or codes) was used to analyse the data (Forrest *et al.* 2005, Ryan 2003). Relevant quotes are presented to illustrate the key themes. In order to handle confidentiality and sensitivity of information provided by participants, we removed their real names and descriptions in some cases. The quotes are identified only by gender, age & locality (urban/rural), and whether it derives from a focus groups or individual interview. For the individual interviews we were able to add marital status of the interviewee’s quote.

3. Findings

3.1 Sample

Ten FGDs (5 composed of young males & 5 of young females) were conducted with an average of seven participants per group. Of these, four were with college students, three with school drop-outs and three with a mixture of college and university students (Table 1). Five FGDs were conducted with rural participants. Most participants were aged 18 to 22. Among the in-depth interview participants, fifteen were from the age group 21-23 and nine were aged 18-20 (Table 2). With regards to educational attainment, four participants were school pupils (Grade 1-10), 24 participants were from college level (Certificate level to Undergraduate) and three interviewees had completed a Masters degree.

3.2 Economic Problems and Social Inequalities

Most of the study participants (FGDs and Interviews) reported that many young people in Nepal face social, economic, familial and personal problems. It is interesting to note that both urban and rural women face financial problems purchasing jewellery, cosmetic items and fashionable clothes. Interestingly, economic limitation has also created problems for their courtships:

Cosmetic stuffs are very expensive and you cannot always get money for that....If you look ugly then no one looks at you (laughs). You know, we girls have to spend a lot on these stuffs to become pretty. Boys also expect the same from us (Urban Unmarried Female, 20).

Similarly, participants also argued that economic problems acted as barriers to accessing health services. All participants agreed that unemployment is one of the major problems among young people and also shared that women were more likely to face economic problems than young men. Most men argued that they can easily solve such problems:

I smoke and even go for drink with friends. We do not always have money. I have also borrowed money from friends. When friends ask me to return their money, I have to tell stories to other friends or parents or relatives to get money. We usually solve these problems easily (Urban Unmarried Men, 21).

This study also found that rural women have a tough life in comparison to their urban counterparts:

One of the major problems for young girls in our area is unemployment. Educated people are not getting the opportunities either (Rural Married Female, 22).

I think lack of money is our main problem because we are students. Sometime we don't have money when we plan for dating...so that we sometime decide to go to the local areas but still there is a fear of local people (Rural Unmarried Male, 23).

Participants also shared that there are gender inequalities, as boys have more freedom in society and they are inheritably authorised by their parents and senior family members to go out. For example:

My father never asks my brother about where he goes but they ask me every time when I plan to go somewhere (Urban Unmarried Female, 23).

We have more freedom. We can sleep and stay wherever we like but girls cannot do that (Focus Group, Urban Males).

Most young women in this study argued that there is further gender inequality in access to education, sport and entertainments. They also think that young men gain more pride and honour in their family and from the wider society more than young women, while urban young women thought they were treated more equally than rural ones. However, most agreed that greater freedom and access to education and other opportunities made boys more successful. They suggested that parents often ignore it if a son makes a mistake but a daughter's progress is seldom acknowledged. The rural young women reported that parents and society generally blame them even if young men are equally involved in socially undesirable activities:

Some men have two-three wives but still our society says nothing ... If you are a widow and marry again, you have to face too many things. Boys sleep with many girls but boys remains prestigious but girls become (regarded as) prostitutes (Unmarried Urban Female, 23).

3.3 Teasing, Touching and Violence

Our findings indicate that unmarried and uneducated young women face comparatively more teasing and bullying problems than better educated women. Both urban and rural women frequently reported teasing and also complained of young men teasing them, feeling harassed and disappointed with family members or relatives. They even mentioned that girls may feel stressed, which they think may result in long-term psychological problems. Frequently reported ways of teasing were making clicking sound with tongue, staring, whistling, singing a song (especially based on what they wear, their body or face), attempt to touch parts of their body etc:

They (men) sing songs based on that dress (laughs). Just a day before yesterday I wore Kurta Sulbar (popular dress worn by women). Boys said things like 'what a beautiful Kurta Sulbar' and laughed. Boys even read loudly if there is anything written on our clothes. Whatever we wear, they admire it and say things like "what a perfect choice. It really suits you" (Rural Unmarried Female, 21).

Generally young women agreed that young men usually tease young women using bad words and even request sex indirectly. Uneducated women reported that even educated young men try to exploit them, and concluded

that uneducated young women can easily be persuaded. Almost all participants agreed that young men take advantage of women in busy places, for example:

I was returning home from college on a bus ... a boy standing next to me. We were nearly all standing. He was pushing me by his waist. I said nothing because the bus was full of passengers ... Later he tried to pop his hand up my t-shirt. I scolded him then he turned to other side (Urban Unmarried Female, 17).

Discussions with young women clearly indicated that both genders sometimes get involved in violence and also argued that it is often observed in urban areas where more freedom exists. Most women argued that young men sometimes cross the limits and misbehave in violent and unacceptable ways:

I was one of the beautiful girls in the class. One boy teased me and called me a SEXY GIRL. I became very angry and punched his face. Later on it became a big issue. Boys' gangs frequently teased me after that and one day they posted a picture of a naked girl and put my name there...we removed the picture and complained to the principal (Urban Unmarried Female, 20).

This study also found that young men usually treat married young women differently than unmarried ones. Some married women also reported that wearing special dresses such as *Sari*, bangles and necklaces, which are symbols of a married woman, helps avoid attracting attention and teasing from the opposite gender. Also it appears that young men do not tease young women in groups. When asked whether mature men also tease them, most of the participants also reported that mature men are also involved in teasing and tormenting girls:

If there is a widow, men tease her thinking that she is alone...Men can easily identify them as they don't wear the Chura and Pote (Bangle and Necklace) and usually look so simple. Men pay more attention to them and also try to make intimate (sexual) relationships...You know, I know a widow sister but she always uses the Chura and Pote (Bangle and Necklace) for her safety (Focus Group, Rural Female).

It is also worth pointing out that young women (mostly urban) also teased men if they were in a group. We also found a difference among young women's behaviours towards attractive and non-attractive young men. They reported that if they find boys unattractive they tease them. Our participants also agreed that same-sex teasing in Nepal is rare:

Boys tease us and we also do the same. If there is a nice and handsome boy then we just laugh and say nothing. Sometimes we even respond to them positively but if there is an unattractive and simple boy then we either scold or tease him (Unmarried Urban Female, 17).

Most young men believed that teasing and touching are normal in their stage of life and should not be taken seriously. They claimed that many young women take it unnecessarily seriously. Young men claimed they did no harm as they were involved in such activities just for entertainment and fun. Here is an example:

There is a lack of understanding. Girls feel shy to talk with us. If you tease them, they take it seriously. You know we like to have fun and entertainment at this stage but girls never co-operate with us. That is the main problem we are facing now (Focus Group, Urban Males).

3.4 Generation and Communication Gap

Most participants reported that there is a huge generation gap in Nepal. Most of the rural participants found it is very difficult to share their feelings and experiences with people of authority (e.g. teachers, community leaders). Urban participants also accepted this situation. It was frequently reported that senior people in the community do not listen to young people even if they make useful and important suggestions:

There is a huge generation gap. Neither we can agree with senior people's views nor do they accept our views. We are in a transitional phase (Focus Group, Urban Males).

Almost all participants agreed that sexual and relationship issues are not discussed within families. Nearly all young women feel shy and uncomfortable talking about such matters with family members:

When I had my first period, I really felt shy. I could not even share with my mother. I had not a pad either. I stole one pad from my mother's pack but it was not sufficient. Finally I had to tell to my mother (Unmarried Urban Female, 18).

However, some young men could discuss sexual health related issues with their brothers. Here is an example:

I am very close with my brother. We even discuss about sexual matters. He also knows that I have a relation with a girl. He frequently advises to me what to do or what should not (Urban Unmarried Men, 18).

Though urban participants said that the community's attitude and perceptions towards young people's activities have been changing, rural women thought that community people pay more scrutiny and show more concern for young women. Here are two quotes from rural and urban participants:

People pay more attention to girls in rural areas. They pay attention about what we are wearing and where we are going. I think it is not cared about in cities. If we try to put on fancy dress then they look at us differently. Even our family members look at us differently and try to arrange our marriage (Focus Group, Rural Females).

The situation is improving...one of my friends had taken her boyfriend to her house to show her parents. I think that is only possible for a high class family (Urban Unmarried Female, 23).

Although compressive sexual matters cannot be discussed due to cultural boundaries, young people were suggesting (hoping for) a change towards creating an environment where sexual and reproductive health matters could be discussed and where appropriate information was made available.

3.5 Domestic Problems: Barrier for Study

Our participants reported that many rural young people face domestic or household-related problems, as young women and men have work hard in and around the house leaving less time and energy for their education. Some rural participants also claimed that domestic and familial problems have caused them to stop their education. However, most urban participants did not report similar problems:

We hardly used to have time for homework and other things. We had to go to the jungle for grass for cattle and sometimes we had to herd the cattle into the jungle... we have to be busy washing clothes. ...if you are lucky then you're born in city...otherwise you have to face many things in rural areas (Rural Married Female, 23).

Married participants also agreed that they face many household and family problems after marriage and that some young women drop out of education after their marriage. Young women experience a lot of pressures in their new (husband's) home and they always have to look after other family members. Married women also argued that if husbands are not at home then they get less family support. They highlighted that their work in their husband's home is less acknowledged. For example:

We have many problems...If husband are not at home then you don't get any support from family members. My husband is in the USA. Sometime I feel bored. Husband's family members are always suspicious of me. Even if I do nice work, they don't take it positively (Urban Married Female, 21).

Participants also have a belief that these problems to the young men (especially married ones) are rare although they agreed that married men have more responsibility and economic burdens.

3.6 Immaturity, Irresponsibility and Unsocial Behaviour

Both rural and urban participants reported that many young people display immature behaviour, and that this behaviour is encouraged by their peers. There was agreement that young people get involved in irresponsible and immature activities for fun:

In almost all picnic programmes, there have been fights in the name of girls. ...just two months ago, we went to ... park for a picnic. We became wild during that picnic. You know, we threw eggs at each other. We had spoiled our clothes. ...sometimes we become very irresponsible. I know we do it all for fun (Urban Unmarried Female 17).

According to some young men in our study Nepalese youths show no respect for their family or responsibility for their own future, but most female participants disagreed. The latter felt responsible for their family. However, it is interesting to note that both genders reported that they prioritize their friends over their family:

Our parents have invested a lot for us ...but we are never serious....We go with friends. We know that it happens at this age but it should not be taken as a game...I think it is a big problem these days. Many young people regret such behaviour later (Focus Group, Males, School Drop-outs).

Some young people stop education and get involved in unsocial activities due to their poor decision making ability. Some young women felt that young people do not take advice seriously:

I was even asked to go to another school after failing twice in grade 9 but I was not interested at all. Now I regret it. I did not understand the importance of study at that time (Married Female, 20, School Drop-out)

3.7 Onset of Puberty: Curiosity, Sexual Desires and Stress

Most of our male participants described that curiosity about sexual matters has made them more complex and stressed. They revealed that it is very difficult to control their sexual desires. Participants told many stories of uncontrolled sexual desires in their communities. Some quotes are presented:

One boy of 17-18 had sex with a she-goat in the forest. Other people saw it and punished the boy. The boy was asked to carry the goat and go around the village (big laugh) (Focus Group, Rural Females).

When we become teenagers we become so curious about sexual matters. We cannot get opportunities for sex so it causes depression (Focus Group, Rural Males).

Young people also became interested in friendship with the opposite sex. Both genders paid more attention to fashionable clothes. Some found that young men spend money unnecessarily to attract girls. Most girls were worried about physical beauty and paid more attention to it. They concluded that these activities do not always have satisfactory outcomes. For example:

Nowadays, girls want to look more beautiful... I was also worried in my time. I always thought how can I become beauty? I think most of the girls also have similar problems. There was a kothi (mole) in my chin...I removed it by doing a small surgery but now it looks awful. I was very beautiful before (laughs) (Urban Married Female, 24).

According to both rural and urban participants there is a lack of entertainment programmes in Nepal which can help to divert their uncontrolled sexual desires. Most males argued that they regularly involve in masturbation practice because, they do not get a sexual partner when they want one. Most young men considered masturbation as one of their major problems, as they believed that it could make them physically weak and stressful. Surprisingly, some young men revealed that they already lost weight because of it. We also found some myths related to masturbation among the young men, including the frequently reported myths “one drop of sperm is equivalent to loss of 100 drops of blood”:

It is true that we don't always get a sex partner when needed. I masturbate up to 4 times in a day and some time I feel pain inside my penis (Focus Group, Urban Males).

Young females were familiar with masturbation, some of their sources of information included friends and porn videos.

3.8 Poor Sexual Health Knowledge and Services

Many physical and sex-related problems were identified including lack of sexual health knowledge, information and services. It is interesting to note that there were very few unmarried participants who have discussed sexual and reproductive health matters with health workers or their family members. Some married women had received some sort of health-related information from their husbands although they thought that it was not easy to discuss such matter even with their husbands:

When I was 14/15 years old, I had pain in my breasts. There were some lumps too but I did not dare to share this with my family members. One of my friends told me that that could be cancer...I worried a lot but could not share with anyone...I thought that it was cancer but it disappeared after some weeks (Urban Unmarried Female, 23).

The main reported sources of information about sexual matters were friends and the media (newspapers, radio and television). Participants recognised that their sources were sometimes wrong, which could lead to confusion and increased vulnerability. Most participants said that they feel comfortable talking about these matters with friends. Participants also highlighted that lack of comprehensive sex education especially in early adolescence. One of the female participants shared her story:

In class 7, one of our friends had her first menstruation. Blood was running to her knee but she did not know what had happened. Then we told her about that. She was really scared and feeling shy. We informed her mother about that incident. Later on boys also knew about it and teased her for a few days (Urban Unmarried Female, 23).

Sexual health education and services were perceived to be neither sufficient nor youth friendly. Participants stressed the need for youth-friendly services in all areas. Condoms were not easily available in rural areas and there was always the fear of other people finding out when buying condoms. Rural participants argued that only some shops provide condoms and usually most people know each other in rural settings. On the contrary, urban young men shared that they can easily buy condoms, but they also mentioned people knowing you as a barrier:

We have one health post there and it's too far. Doctors who work here know almost everybody. We know we can get condoms there but we don't go because we know the service providers very well...some people even try to get condoms from hospital but they don't always get them...mostly, they are out of stock (Focus Group, Rural Males).

3.9 Drugs, Alcohol and Unsafe Sex

Most of the participants considered smoking, drinking and drug use as major youth problem in Nepal. Although these habits were perceived to be more common in urban than in rural areas, whilst most were aware about their negative consequences. Young men tried to persuade parents and friends to give them money to fulfil their habits by telling lies. Although most of the rural girls had negative attitudes towards these habits, some urban women told that drinking beer at parties is not uncommon and they further stressed that drinking is also important for socialization. However, they indicated that these habits frequently invite crime and violence and are usually related to love and sex. For example:

Most of the young people here smoke and take drugs. If you are better educated then you might shun such habits but many young people have such bad habits... It usually links with other problems (Focus Group, Urban Males).

Most young men agreed that proposing sex when you are drunk is very easy and there is less chance of being denied if women are also drunk. They believe that these habits make them stronger but their decision towards safer sex could be affected. Young women also shared that alcohol could influence their decision making:

Many people may get involved in unsafe sex...I know about safe sex but I could not even remember if we used a condom at that time. We were drunk (Unmarried Rural Female, 17).

We also found the role of peers to be important on making decisions on alcohol, drugs, sex and romantic relationship. Most young people in this study had been introduced to smoking and drinking by their peers. Participants further explained that young people seek advice from their friends first on these matters and sometime receive wrong information. Participants also argued that both genders got involved in risky behaviour due to the peer pressures as they could not easily deny the pressures and requests.

4. Discussion

Our study found that economic, cultural and sexual problems are considered major problems by young people in Nepal, and that these are interrelated. This clearly suggests that there is an urgent need to address these issues as this group constitutes a significant proportion of the county's population (Aryal & Adhikary 2003).

Most of our participants reported that many young people of Nepal face socio-economic problems. Participants emphasised that the economic condition of a family usually plays a decisive role in the continuing of young people's education. Thapa and colleagues (2001: 84) have also argued that "The family economic situation determines which families send children to school". This suggests that more focus should be given to keeping young people in education, especially female pupils as they are more likely to drop out or taken out of education by their family. Aryal and Adhikary (2003) also argued that education plays a vital role in changing behaviour.

This study has also found that most of the economic and related problems exist among rural youths, suggesting urban young people have a comparatively better economic status. Moreover, it was repeatedly claimed by the urban participants that they were able to solve such problems by any means; and were sometimes engaged in antisocial activities (e.g. telling lies, theft) to fulfil their economic needs. Participants believed that high unemployment and lack of opportunities in rural areas has further fuelled these problems. Income-generating programmes for young people could help to improve this situation. There was a general agreement among participants that economic constraints might have influenced their health-seeking behaviour. Despite this, previous studies carried out in Nepal documented that the main reasons for not using condoms were loss of pleasure during intercourse and unavailability of condoms (Regmi 2005, Puri & Cleland 2006). However, some of our study participants reported that economic constraint is another barrier to obtaining condoms and other health services. Indeed, it should be taken into account that the current unemployment rate is 46% (CIA 2009). This indicates that young people of Nepal may be involved in unsafe sex due to their poor economic condition. Furthermore, Guvaju (2002) argued that economic constraint also affects the ability to seek medical services.

We found that teasing, especially of young women, is common and most of our female participants reported that it is mainly men who tease women although some of the urban young women also argue teasing young men. This suggests that young women in the city have perhaps a slightly more gender equal relationship than their rural counterparts. Perhaps, modernization and freedom in urban areas could have contributed to this. The male participants argued that they teased and bullied for fun but they are unaware about the psychological consequences of such activities. Wearing clothes and jewellery indicating that the woman is married was a tactic used by some to avoid male attention, whilst it was also recognised that young women were less likely to be harassed when they were in groups. An Australian study showed the relationship between a history of

victimisation of teasing and bullying and the onset of depression among girls (Bond *et al.* 2001). These findings clearly suggest that more moral education should be incorporated both in formal and informal education systems.

The subject of sexual and reproductive matters revolves around notions of dirt and taboos. It is still considered as a secret matter in most of Nepal's society and is barely discussed openly within families. Parents and society also fear that discussing sexual issues with young people would suggest approval of pre-marital sex (Bott & Jejeebhoy 2003). Our findings clearly suggest that many rural young people feel ashamed and uncomfortable in discussing their feelings and situation about sexual and reproductive health issues. Similar findings were observed in other Asian societies (Garg *et al.* 2001, Ali *et al.* 2006). It is also possible that the reason for unprotected sexual activities is fear of disclosure while seeking condoms and other contraceptives. It is also a generally agreed fact that a lack of communication between partners and inability to negotiate on sexual and reproductive matters are obvious risk factors.

Our findings also revealed that young people of Nepal acquire information from limited sources such as the press and electronic media but they heavily rely on friends. Both genders seem to believe their friends more and were more likely to approach them than family. Although some young men said they could discuss sexual (health) issues with their brothers. A similar phenomenon was reported by Buckingham and Bragg (2004: 59) who found children with older siblings (particularly same sex ones) frequently claimed that they were better off in terms of learning about sex and relationships. Friends were their main sources of information about sexual matters although some urban participants are faced with extensive globalisation of information on sexuality through mass media (e.g. radio, movie, TV, books and the Internet). Most of the participants argued that it is often difficult to ignore friends' requests. However, participants concluded that it is not always possible to receive accurate information through friends. Our results show that most young people of Nepal follow their friends and in some situations they were, or felt, forced and had also bad experiences. These findings are similar with a study carried out in rural Thailand which showed that 40 % of young boys became involved in sexual activities because they also wanted to be as experienced as their friends (Isarabhakdi 2000). Adhikari and Tamang (2009) also reported that peer pressure was a possible reason for premarital sex among college students of Kathmandu.

Many young people of Nepal still believe in some myths about sex and sexuality, which they think causes anxiety and depression. Indeed, these issues are difficult to discuss within families but are easier discussed among peers. Sex and relationship education through trained peer educators could be an appropriate approach in order to address these issues (Gautam 2004), perhaps in the form of school-based peer sexual health (Agha & Rommem 2004). However, this is also a challenging task as it is often difficult to develop a network among young people not attending school or college. In addition, it should be managed wisely and teachers should be trained with culturally appropriate training. A study conducted by Pokharel and others (2006) in one district of Nepal found that school-based sex education was very poor. They have mentioned that "quality of sex and reproductive health education was found to be poor because of inadequate preparation by teachers for such instruction, lack of adequate teaching/learning materials and lack of school and community supports for teachers to provide this instruction" (Pokharel *et al.* 2006: 159). This clearly suggests that more emphasis should be given for a strengthened and sustained existing peer-led and school-based sex education.

Surprisingly, we found that most young men considered sexual desire as a problem as they think that it leads to non-consensual sexual activities. They further argued that the provision of alternative entertainment programmes such as concerts, drama and sports may help to reduce their involvement in sexual practices. However, the socio-economic, cultural impact and cost-effectiveness of such activities should be investigated. A previous study carried out in the UK among adolescents found a decreased likelihood of participating in sexual and other risky behaviours if leisure time is spent with family or going to church (Akker & Lees 2001). Furthermore, sexual abstinence plays a significant role in HIV and AIDS prevention among male adolescents (Iriyama *et al.* 2007).

Smoking and drinking was a problem among urban youths with social and economic development. Similarly, our findings also suggest that the use of alcohol contributes to unsafe sexual activities and many believe that it strongly influences their decision making toward safer sex. Previous studies carried out with young people (Tamang *et al.* 2001) and trekking guides (Regmi 2005; Simkhada *et al.* 2010) have documented similar findings. Young people as well as the community as a whole needs to be better informed about the serious negative health consequences of smoking and drinking.

There are, of course, limitations to our study. First, since sexual and reproductive matters have long been considered to be secretive and sensitive subjects in Nepal, hence information provided by the participants in this study might also have affected by underreporting, although it is also possible that there has been an element of

showing off sexual prowess especially in the focus groups. Secondly, by the nature of qualitative studies its size was limited and the study was conducted in only two districts of Nepal, hence our findings might not be generalised to the other parts of the country.

One particular strength of our study is that despite the general taboo in Nepalese society, we surprisingly observed that many participants actively discussed sex, sexuality and reproductive health issues. The influence of mass-media and sexual and reproductive health programmes targeting young people might have encouraged them to take part in the study. Indeed, engaging same sex researchers and assuring confidentiality might have helped to get good response from participants. Even young female participants reported several examples of social, sexual and reproductive problems.

5. Conclusion

Unmarried girls face more socio-economic and sexual problems than boys, whereas married boys face more economic problems. There is a huge communication gap about sexuality within family and it is still considered a taboo in many Nepalese families. Young people of Nepal are relying heavily on friends in spite of increasing usage of mass-media to receive sexual health information. There was a general agreement among young women that more freedom and greater access to the education opportunities and other activities has given men a gender-based advanced. More opportunities should be provided to young women and the parents and communities should be advocated and sensitized. In order to effect real improvements in young people's sexual health, more attention needs to be given to rigorous research and appropriate interventions. Integrating sex and relationship education, both in formal and informal education, can play a significant role to improve young peoples' sexual and reproductive health status. Young people's ability to make informed choices about their own health and risk behaviour should be enhanced.

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Table 1. Characteristics of focus group participants

Groups	Participants (N)	Average Age	Education	Place
FGD 1	Girls (8)	22.6	College=6 University=2	Urban
FGD 2	Girls (7)	19.2	School Drop-out=6	Rural
FGD 3	Girls (8)	21.5	College=6 University=2	Rural
FGD 4	Girls (7)	20.4	College=4 University=3	Urban
FGD 5	Girls (6)	19.3	School Drop-out=6	Rural
FGD 6	Boys (8)	18.1	College=8	Rural
FGD 7	Boys (8)	20.0	College=8	Rural
FGD 6	Boys (8)	20.3	College=8	Urban
FGD 9	Boys (7)	19.4	School Drop-out=7	Urban
FGD 10	Boys (8)	20.3	College=8	Urban

Table 2. Characteristics of interview respondents

	Boys	Girls	Total
Age Group			
<i>15-17</i>	1	2	3
<i>18-20</i>	5	4	9
<i>21-23</i>	8	7	15
<i>24</i>	2	2	4
Education			
<i>Secondary</i>	3	1	4
<i>College</i>	10	14	24
<i>Universities</i>	3	-	3
Place			
<i>Rural</i>	7	5	12
<i>Urban</i>	9	10	19
Ethnicity			
<i>Brahmin</i>	8	4	12
<i>Chhetri</i>	3	4	7
<i>Magar</i>	-	1	1
<i>Newar</i>	2	3	5
<i>Gurung</i>	1	1	2
<i>Marwadi</i>	-	1	1
<i>VK</i>	1	-	1
<i>Rai</i>	-	1	1
<i>Ghale</i>	1	-	1
Marital Status			
<i>Married</i>	5	6	11
<i>Unmarried</i>	11	9	20
Total Respondents			31