Reproductive Health of Young Adults in Uganda

A Report Based on the 2000-2001 Uganda Demographic and Health Survey

This report is based on the findings of the 2000-2001 Uganda Demographic and Health Survey (UDHS), a nationally representative survey of households, women age 15-49, and men age 15-54. Interviews were successfully completed with 7,246 women age 15-49 and 1,962 men age 15-54. Information about children born to these women was also collected. Detailed questions about vaccination, breastfeeding, food supplementation, and illnesses were asked about children born in the five years before the survey.

The primary objective of the survey was to provide policymakers and programme managers with detailed information on fertility, family planning, childhood and adult mortality, maternal and child health, nutrition, and knowledge and attitudes about HIV/AIDS.

The survey was fielded between September 28, 2000 and March 3, 2001. Survey results are presented at the national level; by urban and rural residence, and for each of the four regions in the country. Results of this survey can be compared with those of the two previous Uganda DHS surveys, the 1988-1989 UDHS and the 1995 UDHS. However, caution needs to be exercised when analysing trends using these three data sets because of differences in geographic coverage. In the 2000-2001 UDHS, all but four of Uganda's 45 districts were included in the survey. The excluded districts are Bundibugyo, Gulu, Kasese and Kitgum.

The 2000-2001 Uganda Demographic and Health Survey (UDHS) was conducted by the Uganda Bureau of Statistics (UBOS). The U.S. Agency for International Development (USAID) provided most of the funding for the survey. Additional financial support was received from the Department for International Development of the British government (DFID/Uganda), the United Nation's Children's Fund (UNICEF/Uganda), and the United Nations Population Fund (UNFPA/Uganda.) The UDHS is part of the worldwide Demographic and Health Surveys (DHS) project designed to collect, analyse, and disseminate data on fertility, family planning, maternal and child health, and HIV/AIDS. Support for this report was provided by DFID.

This report was prepared by Sri Poedjastoeti with help from Anne Cross. Programming assistance was received from Martin Wulfe and Ivo Njosa. Sidney Moore and Kaye Mitchell assisted in the document production. The report was reviewed by staff at UBOS, the Child Health and Development Centre at Makerere University, the Ministry of Health, the Population Secretariat, and the World Health Organisation. The authors wish to thank all of the reviewers, especially Helen Nviiri and Andrew Mukulu of UBOS.

Additional information about the survey may be obtained from the Uganda Bureau of Statistics, P.O. Box 13, Entebbe, Uganda (Telephone: (256-41) 320-741; Fax: (256-41) 320-147; e-mail: ubos@infocom.co.ug). Additional information about the DHS programme may be obtained by writing to MEASURE *DHS+*, ORC Macro, 11785 Beltsville Drive, Suite 300, Calverton, MD 20705, USA (Telephone: 301-572-0200; Fax: 301-572-0999; e-mail: reports@macroint.com).

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EXECUTIVE SUMMARY

Interest in adolescent health in Uganda has stemmed partly from the fact that adolescents represent a significant portion of the country's population. At the same time, young women represent a growing proportion not only among the general population but also among women of reproductive age. The number of women age 15-24 is expected to increase from 2.1 million in 2000 to 3.6 million in 2015.

Young women leave school earlier than young men and are more likely than young men to have started working. At age 15-19, 69 percent of men are still in school, but more than half of women in the same age group are no longer attending school. In the same age category, more than half of women are currently employed, whereas only 27 percent of young men are working.

Overall, 42 percent of women 15-24 and 77 percent of men 15-24 have never been married and a sizeable preparation have never had sex (27 percent of women and 41 percent of men). The speculation that women start having sexual intercourse at a young age is not supported by data in the 2000-2001 Uganda Demographic and Health Survey (UDHS). The median age at first sexual intercourse has increased from 16.1 years in 1995 to 16.7 years in 2000-2001. Men show a similar trend: the corresponding ages are 17.6 years and 18.8 years, respectively. Most women have sex with men who are somewhat older than they are. Eleven percent of women who had sex reported that their first sexual partner was at least 10 years older.

Women in Uganda continue to have a large number of children. The average number of children a woman would have if she were subject to the current fertility patterns throughout her reproductive years has remained constant at 6.9 births throughout the 1990s. The contribution of young women to the overall fertility rate also has not changed much. Desire for smaller families, however, is evident. The ideal number of children among women 15-19 declined from 5.9 children in 1988-1989 to 4.1 children in 2000-2001. Because of this desire, there is a large demand for family planning services, especially among women in their twenties.

Although most young adults have heard of contraception, few actually use any method of birth control. Teen-aged women are less likely than older women to use contraception, largely because of their lower level of sexual activity. However, those who are not using contraception are more likely than older women and men to say that they want to use a method in the future.

It is generally believed that children born to young mothers have higher risks of illness and even death. This notion is supported by data in Uganda, where children born to mothers under 20 have a 30 percent higher risk of dying before their first birthday than children born to mothers age 20-29. Based on various child care indicators, however, younger mothers appear to be as capable of taking care of their children as older mothers.

Although knowledge of HIV/AIDS is almost universal in Uganda, this knowledge is not matched with knowledge of ways to avoid the disease, knowledge of sources for condoms, and ability to obtain condoms. Among men 15-19, for example, 86 percent know of two or more ways to avoid HIV/AIDS and 76 percent know a source for condoms, but only 66 percent said that they could get condoms themselves.

Overall, 16 percent of women and 6 percent of men age 15-24 reported having sexually transmitted infections or their symptoms in the 12 months before the survey. Teen-aged women and men are less likely than older people to report the diseases or symptoms, perhaps because they are less likely to be sexually active or have no knowledge of the symptoms. A small percentage of women and men have been tested for HIV/AIDS (9 percent of women (9 percent of women and 7 percent of men 15-24). Women and men in their twenties are the most likely to have been tested. Among those who have not been tested, about two-thirds of young women and men express interest in taking the test.

High-risk sexual behaviours have been linked to smoking and drinking. UDHS data show that smoking and drinking are positively related to age: younger people are less likely than older people to smoke and drink, and women are less likely than men to report these practices.

1 INTRODUCTION

Adolescence is a critical stage in a person's life, a period in which physical, psychological, and social changes take place. The World Health Organisation (WHO) (1995) defines adolescence as the progression from secondary sexual characteristics (puberty) to sexual and reproductive maturity, the development of adult mental processes and adult identity, and the transition from total socioeconomic dependence to relative independence. It is a phase in which children become adults, when major decisions about roles in life are made. It is also a period in which preparatory activities for adulthood are undertaken.

Interest in adolescent[1] health in Uganda has stemmed partly from the fact that young adults constitute almost one-fifth of the population and represent a rapidly growing segment of the population. Adolescents totaled 3.7 million in 1995 and 4.2 million in 2000, indicating an annual growth of 2.5 percent. By 2015, this number is expected to double that in 1995 (7.3 million) (Statistics Department, 1992). Young adults also hold the key to the country's future population growth.

The number of young adults age 15-24 will increase from 4.2 million in 2000 to 7.3 million in 2015.

Noting that indices of general health care need to be improved, the government of Uganda instituted several policies to help improve the health status and life of its people. The overall goal of the policies is to influence future demographic trends and patterns in desirable directions to improve the quality of life and standard of living of the people. In particular, the policies aim to reduce infant and child mortality, maternal mortality, and fertility and to increase life expectancy. Other goals include increasing the levels of full immunisation among children, increasing the levels of supervised deliveries, and increasing the contraceptive prevalence rate (Ministry of Health, 2001).

Adolescents as a group captured the government's special attention to the extent that a separate document (Ministry of Health, 2000) was prepared to address the health services that should be geared toward meeting their needs. In particular, sexual behaviour, use of contraception, unwanted pregnancy, antenatal care, care for infants of adolescents, substance abuse and sexually transmitted diseases including HIV/AIDS are among the issues of concern.

[1] In this report, the term "young adults" refers to the population age 15-24. This term is used interchangeably with adolescents. The Uganda National Adolescent Health Policy defines adolescents as persons age 10-19 and youths as those age 15-24. However, since the data set on which this report is based includes only women age 15-49 and men age 15-54, data for the 10-14 age group are not available.

Table 1.1 Population size

Number of women and men age 15-24, 2000 and 2015 (in thousands)

	2000			2015		
Age	Male	Female	Total	Male	Female	Total
15-19	1,190	1,173	2,363	2,010	1,977	3,947
20-24	952	927	1,879	1,662	1,617	3,279
15-24	2,141	2,100	4,242	3,672	3,594	7,266
15-49	-	4,865	-	-	7,298	-
Total population	11,010	11,200	22,210	16,321	16,196	32,517
Population 15-24 as percent of total	19.5	18.8	19.1	22.5	21.2	22.3
Population 15-24 as percent of 15-49	-	43.2	-	-	49.2	-

Source: Statistics Department (Uganda). 1992.

Uganda's population has grown rapidly in the past two decades, from 9.5 million in 1969 to 16.7 million in 1991. In 2001, the population was estimated to have reached 22.2 million. In the last decade, the population grew 2.9 percent annually. Most Ugandans live in a rural setting, with the urban population comprising only about 13 percent of the total population.

Along with the increase of young people in the general population, young women represent a growing proportion of all women of reproductive age (Table 1.1). In 2000, the number of women age 15-24 comprised 43 percent of women age 15-49 (2.1 million compared with 4.9 million). In 2015, young women will constitute almost half of all women in childbearing ages (3.6 million compared with 7.3 million). Population projections (Statistics Department, 1992) show that there are slightly more men than women 15-24.

This report presents a demographic profile and health characteristics of teenage and young adult women and men in Uganda. The socioeconomic characteristics of these young adults are influential in shaping their development, health, and health-seeking behaviours, as are sexual, marital, and childbearing experiences. These, in turn, have immediate and long-term implications on the future social and economic conditions of the country.

This report draws data primarily from the 2000-2001 Uganda Demographic and Health Survey. More information about the survey can be found on the inside front cover. A detailed description of the survey is found in the main survey report. Whenever applicable, data from past UDHS surveys (1988-1989 UDHS and 1995 UDHS) are presented to show trends. Although the geographic coverage of these surveys is not strictly comparable, aggregate data are probably not greatly affected by the exclusion of a few districts in each survey.

2 PROFILE

This chapter provides a description of the women and men age 15-24 interviewed in the 2000-2001 UDHS. Information about women and men presented in this chapter includes their living arrangements, education, literacy, employment, and exposure to mass media. These characteristics are expected to have some bearing on adolescents' knowledge, attitudes, and behaviour.

Table 2.1 shows the distribution of women and men by various background characteristics. Data in the table show that there are 1,615 women 15-19 and 1,504 women age 20-24 in the sample, along with 441 men 15-19 and 321 men 20-24. Forty-two percent of women, compared with 77 percent of men, have never been married.[2] Female respondents are much more likely than male respondents to be married (32 percent for females and 19 percent for males). Twenty percent of women declared themselves to be living together with a man or in a consensual union, while the corresponding percentage for males is only 3 percent.

Four in five women and men 15-24 live in rural areas.

Four in five women and men 15-24 live in rural areas. One-third of young people live in the Central Region (35 percent of women and 40 percent of men), while one in four live in either the Eastern or Western Region. Most have been to school. In fact, only 2 percent of men 15-24 have had no formal schooling. Women are more likely to be uneducated, with 12 percent never having gone to school. On the contrary, literacy levels for young women (57 percent) are higher than those for young men (51 percent).

In the 2000-2001 UDHS, a measure of wealth was calculated for each household. This index is defined in terms of assets or wealth, rather than in terms of income or consumption. Information used in the construction of the index is collected in the Household Questionnaire and includes the household's ownership of a number of consumer items, dwelling characteristics, source of drinking water, and toilet facilities. A standardised score for each asset is included in the index. These scores were summed by household, and households were ranked according to the total score. The sample was then divided into quintiles—five groups with the same number of households in each. Each household member is assigned the score of their household.

[2] "Married" refers to those in a formal or official marriage, while "living together" refers to those in informal or consensual unions. In subsequent chapters, the term "currently married" refers to those in either category.

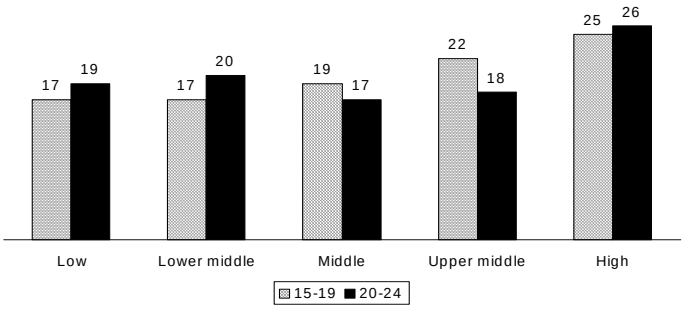
Table 2.1 Background characteristics of respondents

Percent distribution of women and men age 15-24 by background characteristics

Background characteristic	Women			Men		
	Weighted percent	Weighted number	Unweighted number	Weighted percent	Weighted number	Unweighted number
Age						
15	9.6	300	317	11.3	86	82
16	10.9	339	345	14.2	108	110
17	9.8	306	324	11.8	90	85
18	12.2	379	394	11.6	88	91
19	9.3	290	307	9.0	68	72
20	11.9	371	382	10.2	78	85
21	9.4	293	311	6.9	53	54
22	9.1	285	276	8.2	63	64
23	9.4	294	301	7.4	56	60
24	8.4	262	272	9.3	71	74
Marital status						
Never married	42.4	1,324	1,446	77.2	588	603
Married	31.5	982	932	19.2	146	141
Living together	20.3	634	657	2.7	21	24
Divorced, separated	5.4	168	182	0.1	1	1
Widowed	0.4	11	12	0.0	0	1
Residence						
Urban	19.6	611	1,198	19.8	150	263
Rural	80.4	2,508	2,031	80.2	611	514
Region						
Central	35.3	1,101	1,186	40.0	304	306
Eastern	25.5	796	757	23.8	181	167
Northern	14.8	463	426	12.4	94	96
Western	24.3	758	860	23.8	181	208
Education						
Never attended	12.0	375	351	1.8	13	15
Primary	64.4	2,010	1,952	69.2	527	510
Secondary +	23.5	733	925	29.0	220	252
Literacy						
Literate	57.1	1,780	1,838	50.7	386	392
Illiterate	42.9	1,338	1,391	49.3	376	385
Total	100.0	3,119	3,229	100.0	762	777

Figure 2.1 shows that adolescents are slightly better off than the general population. For example, 34 percent of persons 15-19 reside in households that are in the two lowest quintiles (low and lower middle), instead of the roughly 40 percent expected, while 47 percent of persons 15-19 are in the two highest quintiles (upper middle and high).

Figure 2.1 Percent distribution of the population age 15-19 and 20-24 by wealth status quintile



Education

Education plays an important role in shaping a person's outlook and behaviour in life in general and in health-seeking behaviour in particular. Data from previous studies (Statistics Department and Macro International Inc., 1996) have demonstrated the close relationship between women's educational attainment and their reproductive behaviour, patterns of contraceptive use, and childhood mortality.

Table 2.2 shows that education in Uganda has become more widespread over time for both sexes. In 1988-89, 21 percent of women 15-19 had never been to school; in 2000-2001, the percentage had declined to 9 percent. The corresponding figures for men are 4 percent in 1995 and 2 percent in 2000-2001. During the same period, the level of

Table 2.2 Trends in educational attainment

Percent distribution of women and men 15-19 and 20-24 by educational attainment: 1988-1989, 1995, and 2000-2001 UDHS

	1998-1989 UDHS	1995 UDHS		2000-2001 UDHS	
Age/education	Women	Women	Men	Women	Men
15-19					
Never attended school	20.7	16.5	4.4	9.1	1.6
Primary	67.1	67.2	67.7	66.1	71.7
Secondary+	12.3	16.2	27.9	24.7	26.8
Total	100.0	100.0	100.0	100.0	100.0
Number	1,157	1,606	387	1,615	441
20-24					
Never attended school	30.0	22.2	10.0	15.1	2.1
Primary	56.1	61.8	60.1	62.7	65.8
Secondary+	13.9	16.0	29.9	22.1	32.1
Total	100.0	100.0	100.0	100.0	100.0
Number	985	1,555	367	1,504	321

education attained increased for both women and men. For instance, the proportion of women 15-19 who have some secondary schooling has doubled from 12 percent in 1988-1989 to 25 percent in 2000-2001.

Education has also improved for women age 20-24. In 1988-1989, 30 percent of women had no formal education; the corresponding figure in 2000-2001 was 15 percent. At the same time, 22 percent of women age 20-24 attended secondary school in 2000-2001, compared with 14 percent in 1988-1989.

In general, men are better educated than women. They are more likely than women to have formal education and are more likely to achieve higher levels of education. Consequently, in the past five to six years, improvement in their education has not been as rapid as for women. For example, between 1995 and 2000-2001, the proportion of men 20-24 with no schooling declined from 10 to 2 percent and the proportion who have some secondary education increased from 30 to 32 percent.

Vocational Training

Besides general education, vocational training has been provided to complement general knowledge and better equip people with skills in a particular occupation. In the 2000-2001 UDHS, respondents who had some formal education were asked whether they had received any vocational training. Two types of vocational training that were expected to have attracted young people were teacher training and paramedical training. The findings are presented in Table 2.3.

Table 2.3 Vocational training

Percent distribution of women and men age 15-24 by type of vocational training attended, according to age

		Type of training received					
Sex	No training	Teacher	Para-medical	Other	Don't know	Total	Number
Women	80.3	1.1	0.3	5.8	12.6	100.0	3,119
Men	93.5	0.3	0.0	4.2	1.9	100.0	762

Overall, 20 percent of women and 7 percent of men have attended vocational training. Unfortunately, a large percentage of those who reported having vocational training did not specify the type of training. Only 1 percent of women and less than 1 percent of men 15-24 reported that they have taken teacher training.

Employment

Survey respondents were asked whether they were currently working or had done any kind of work in the 12 months preceding the survey. Those who were working were

asked questions on employment status, type of work, and type of payment. Data in Table 2.4 show the expected pattern: regardless of sex, persons age 15-19 are less likely than those 20-24 to be employed. The lower proportion of women and men age 15-19 who are employed may be attributed to the fact that many of them are still in school. Teen-aged women are twice as likely as teen-aged men to be working.

Employment of young women varies according to residence. Women in rural areas are much more likely than urban women to be employed (67 percent compared with 39 percent). Women who live in the Central Region are less likely to be employed than

Table 2.4 Employment

Percentage of women and men age 15-24 who are currently employed and percentage in various types of employment, according to background characteristics

Background characteristic	Currently employed	Number	Among those currently employed: Percentage who work in agriculture	Among those currently employed: Percentage who receive cash payment	Among those currently employed: Percentage employed by family member
		WOMEN			
Age					
15-19	54.4	1,615	82.2	38.6	50.2
20-24	69.5	1,504	73.9	65.4	28.1
Residence					
Urban	38.7	611	13.2	82.8	18.9
Rural	67.3	2,508	86.7	49.0	40.9
Region					
Central	45.0	1,101	49.5	70.1	18.0
Eastern	65.8	796	85.6	52.1	34.5
Northern	71.3	463	85.7	13.7	55.4
Western	75.7	758	90.1	62.1	49.1
Total	61.7	3,119	77.7	53.1	38.2
		MEN			
Age					
15-19	27.2	441	64.5	na	71.0
20-24	64.2	321	53.9	na	76.9
Residence					
Urban	42.0	151	5.4	na	98.5
Rural	43.0	611	70.4	na	69.0
Region					
Central	50.8	305	44.3	na	97.6
Eastern	22.3	181	46.7	na	91.1
Northern	19.0	95	84.4	na	29.8
Western	62.4	181	76.1	na	44.8
Total	42.8	762	57.8	na	74.8

na = Not applicable

women residing in other regions. Whereas 45 percent of women 15-24 in the Central Region are currently employed, the corresponding proportion in other regions were at least 65 percent.

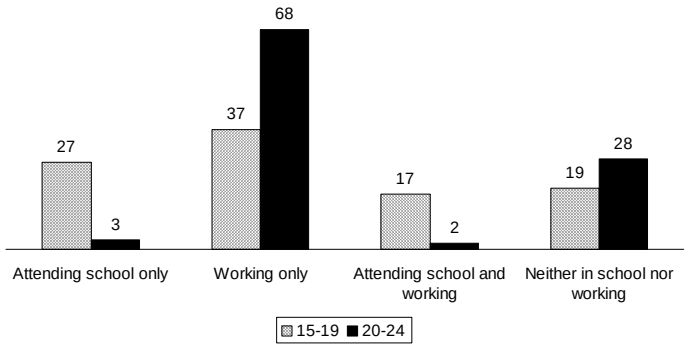
Young men show a different employment pattern. In both urban and rural areas, four in ten men 15-24 are employed. Men in the Eastern and Northern regions are the least likely to be employed (22 percent and 19 percent, respectively), while those living in the Central and Western region are more likely to have a job (51 percent and 62 percent, respectively).

The last three columns in Table 2.4 present the particulars of the employment. In line with the agrarian nature of the country, 78 percent of working women and 58 percent of working men 15-24 are engaged in agricultural occupations. Women and men age 15-19 are more likely than those age 20-24 to be working in agriculture. Living in the most urbanised region, working women and men in the Central Region are the least likely to work in agriculture.

About half of working adolescent women earn cash for their work. Women 20-24, women in urban areas, and women living in the Central and Western regions are more likely than other employed women to work for cash. Younger women, women in rural areas,and women living in the Western and Northern regions are more likely than other women to work for a family member.

Current Activity

Figure 2.2 Percent distribution of women age 15-19 and 20-24 by current activity



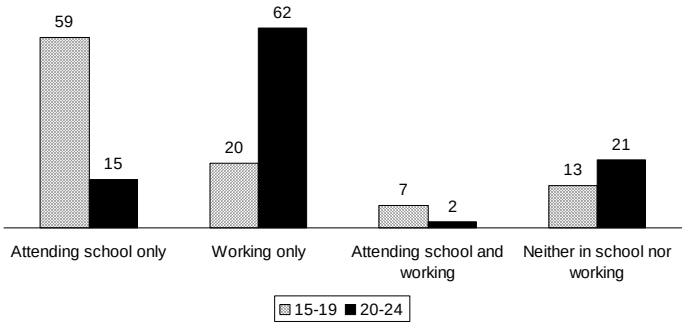
Figures 2.2 and 2.3 show the percent distribution of women and men 15-24 by their current activity, whether attending school, employed, doing both, or neither. Less than half of women 15-19 attend school; 27 percent go to school only and 17 percent attend school and hold a job. A different picture is shown for women 20-24, among whom only 5 percent are in school, while 70 percent are working (68 percent work only and 2 percent work and attend school). Nineteen percent of women 15-19 and 28 percent of women 20-24 are neither in school nor working (Figure 2.2).

Young adult men are more likely to stay in school than young adult women (Figures 2.2 and 2.3). Among men 15-19, 66 percent are attending school; 59 percent are in school only and 7 percent go to school and work. Men 20-24 are slightly less likely

than women in the same age group to have started working (64 percent compared with 70 percent) but are as likely to combine education and employment (2 percent).

Since young men are more likely to stay in school longer than women, they are less likely to be neither in school nor working. For age 15-19, the percentage for men is 13 percent compared with 19 percent of women. The corresponding percentages for age 20-24 are 21 percent and 28 percent, respectively.

Figure 2.3 Percent distribution of men age 15-19 and 20-24 by current activity



Media Exposure

Access to information opens an opportunity to gain knowledge, which may shape a person's perception, attitude, and eventually behaviour. Respondents in the 2000-2001 UDHS were asked how often they listen to the radio, watch television, and read a newspaper or magazine. The responses are presented in Table 2.5. In general, men are more exposed to the mass media—especially radio—than women. The most popular medium is radio, which has attracted increasing numbers of listeners in the past five years. For example, in 1995 only one in three women 15-24 and less than half of men 15-24 listened to the radio weekly, compared with more than half of women and three-fourths of men in the same age groups in 2000-2001.

Television has also gained audience, especially among young people. Whereas 8 percent of women 15-19 watched television weekly in 1995, the corresponding figure in 2000-2001 is 14 percent. The same is true for men in the same age group and for women and men age 20-24. The increase in access to radio and television seems to have had an inverse effect on the readership of newspapers and magazines, which has decreased since 1995.

Table 2.5 Exposure to mass media

Percentage of women and men age 15-24 who usually read a newspaper weekly, watch television weekly, and listen to the radio weekly, by background characteristics

Background characteristic	Type of mass media exposure: Reads a newspaper at least once a week	Watches television at least once a week	Listens to the radio at least once a week	All three media	No mass media	Number of women/ men
WOMEN						
Age						
15-19	20.1	13.8	54.9	7.6	35.2	1,615
20-24	14.9	9.2	56.5	5.2	36.9	1,504
Residence						
Urban	43.4	38.9	83.4	22.7	8.2	611
Rural	11.3	5.0	48.9	2.4	42.8	2,508
Region						
Central	33.4	27.2	75.9	15.5	14.9	1,101
Eastern	11.5	4.3	49.0	1.9	43.3	796
Northern	6.3	1.5	28.3	0.8	65.3	463
Western	8.0	2.8	50.1	1.4	41.2	758
Total	17.6	11.6	55.7	6.4	36.0	3,119
MEN						
Age						
15-19	19.7	14.5	76.8	8.0	15.4	441
20-24	24.8	15.4	78.0	9.2	13.5	321
Residence						
Urban	48.1	47.8	90.7	32.1	2.3	151
Rural	15.4	6.7	74.0	2.8	17.6	611
Region						
Central	29.7	25.9	89.2	16.5	5.3	305
Eastern	19.1	12.9	68.0	3.5	25.0	181
Northern	12.7	1.8	61.4	1.5	25.8	95
Western	16.3	5.1	75.0	3.9	14.0	181
Total	21.9	14.9	77.3	8.5	14.6	762

3 SEXUAL EXPERIENCE

Age at First Sexual Intercourse

The government of Uganda recognises the importance of addressing the sexual behaviour of young adults, not only in relation to their reproductive outcomes but, more importantly, to high-risk behaviours. Survey results indicate that young adults in Uganda initiate sexual activity at a relatively early age. The median age at sexual debut is 16.7 for women age 20-24,[3] which means that half of girls have had sex by this age (UBOS, 2001:79). A comparison of the UDHS 1995 and UDHS 2000-2001 data shows a small increase in the median age at first sex among women, from 16.1 to 16.7.

Young men initiate sex more than two years later than women, with a median age of 19.4 among men 25-29 (UBOS, 2001:79). As with women, there has been a substantial increase in the age at first sex among men between 1995 and 2000-2001, from 17.5 to 18.8 among men 25-54. Among men, data from 2000-2001 also show an increasing trend by age group, corroborating the evidence that age at first sex is increasing.

Table 3.1 shows a steady increase in the proportion of women and men who have ever had sex, from 17 percent of women age 15 to 98 percent of those age 22 and older and from 10 percent of men age 15 to over 90 percent of those in their early 20s. The data also indicate that very few adolescents had sex before reaching age 14.

Age of First Sexual Partner

Sexual activity among adolescents can be either voluntary or involuntary. Young women may have sex for romance, sexual desire, economic gain, or because of coercion. The extent of autonomy women have in relationships is difficult to mrsdutr. However, coercion is more likely to take place when the woman is young and her sexual partner is considerably older. Thus, it is of interest to investigate the age difference between women and their first sexual partners. In the 2000-2001 UDHS, women were asked the age of their first sexual partner. Table 3.2 presents data generated from that question. Complete data were obtained for only six in ten women in the sample who have ever had sex, because either their age at first sex was missing or they could not report the age of their first sexual partner.

[3] Medians cannot be calculated for women age 15-19 and for men age 15-24, since a sizeable proportion have not yet initiated sexual activity and thus could still influence the median age at first sex for their age group.

Table 3.1 Age at first sexual intercourse

Percentage of women and men who had first sexual intercourse by specific exact ages, according to current age

Age	Percentage who had first sexual intercourse by exact age			Percent ever had sex	Number
	13	14	15		
			WOMEN		
15-19	**1.8**	**4.0**	**14.2**	**52.1**	**1,615**
15	0.6	1.8	9.4	17.0	300
16	2.5	4.6	13.0	34.3	339
17	1.7	3.9	11.9	51.1	306
18	1.9	3.7	18.1	74.1	379
19	1.9	6.0	17.7	81.2	290
20-24	**2.8**	**8.8**	**20.5**	**96.3**	**1,504**
20	2.4	8.7	19.0	93.1	371
21	3.4	8.6	19.7	94.8	293
22	3.4	9.0	25.6	98.1	285
23	2.2	7.6	17.6	98.1	294
24	3.0	10.1	21.4	98.4	262
15-24	2.3	6.3	17.2	73.4	3,119
			MEN		
15-19	**7.4**	**10.0**	**15.5**	**38.7**	**441**
15	5.3	5.8	8.8	10.4	86
16	5.9	9.6	21.7	28.4	108
17	12.9	14.7	18.9	43.0	90
18	9.9	12.3	16.1	51.8	88
19	2.1	6.8	8.8	68.2	68
20-24	**3.4**	**5.3**	**7.5**	**87.5**	**321**
20	4.4	4.9	7.1	69.9	78
21	4.6	11.8	13.0	88.2	53
22	2.0	2.7	3.1	93.3	63
23	3.3	3.3	6.5	96.9	56
24	2.8	5.0	8.5	93.8	71
15-24	5.7	8.0	12.1	59.3	762

The data show that most young women first have sex with a partner who is several years older; only 4 percent said that their first sexual partner was either younger (1 percent) or the same age (3 percent). One in four women said that their first sexual partner was one or two years older, 31 percent said their first sexual partner was three to four years older. Eleven percent of women reported that their first sexual partner was at least 10 years older..

Table 3.2 Age of first sexual partner

Percent distribution of women age 15-24 who have ever had sex by the difference in age between her and her first sexual partner

	Age of first sexual partner at first sex								
Age	Partner was younger	Partner was same age	1-2 years older	3-4 years older	5-6 years older	7-9 years older	10+ years older	Total	Number
15-24	1.3	3.0	25.1	31.3	16.2	12.6	10.5	100.0	1,385

Note: Table excludes almost 40 percent of women who could not report the age of their first sexual partner or their own age at first sex.

Recent Sexual Activity

In societies in which use of family planning methods is limited, a woman's probability of becoming pregnant depends on her exposure to and frequency of sexual intercourse. Information on sexual activity, particularly in the recent past, is used as a measure of exposure to the risk of pregnancy. In the UDHS, women were asked when they last had sex.

Eleven percent of women reported that their first sexual partner was at least 10 years older than they..

Table 3.3 shows data for women and men 15-24 on the timing of last sexual intercourse. Overall, almost half of women 15-24 were sexually active in the four weeks preceding the survey, while 20 percent had had sex within the year but not in the four weeks prior to the survey. Six percent of women 15-24 reported that their last sexual intercourse was more than one year prior to the survey, and 27 percent had never had sex. Age is closely associated with recent sexual activity among those age 15-19; the older a woman is, the more likely she is to be sexually active. This is obvious among women in the 15-19 age group. In the 20-24 age group, two in three women had had sex in the four weeks preceding the survey.

Young men are less likely than young women to report sexual activity, with only 28 percent reporting having had sex in the four weeks preceding the survey. On the other hand, men are more likely to report having had their most recent sexual intercourse one or more years ago or never having had sex. Rural women and men are more likely to report recent sexual activity than urban women and men.

Table 3.3 Sexual activity

Percent distribution of women and men 15-24 by timing of sexual activity, according to current age and residence

Background characteristic	Timing of last sex: Within the last 4 weeks	Within 1 year[1]	One or more years	Never had sex	Total	Number
WOMEN						
Age						
15-19	**30.0**	**15.8**	**6.2**	**47.9**	**100.0**	**1,615**
15	7.0	7.5	2.6	83.0	100.0	300
16	15.3	11.3	7.7	65.7	100.0	339
17	25.8	18.3	7.0	48.9	100.0	306
18	47.8	20.5	5.8	25.9	100.0	379
19	52.2	22.6	6.4	18.8	100.0	290
20-24	**66.2**	**23.6**	**6.3**	**3.7**	**100.0**	**1,504**
20	63.8	23.2	6.1	6.9	100.0	371
21	62.3	27.5	5.0	5.2	100.0	293
22	69.9	23.8	4.4	1.9	100.0	285
23	67.4	22.8	7.9	1.9	100.0	293
24	68.5	23.3	6.6	1.6	100.0	262
Residence						
Urban	40.8	23.6	9.3	26.4	100.0	611
Rural	49.1	19.0	5.2	26.7	100.0	2,506
15-24	47.5	19.9	6.0	26.6	100.0	3,117
MEN						
Age						
15-19	**12.8**	**14.4**	**11.5**	**61.3**	**100.0**	**441**
15	0.0	4.1	6.3	89.6	100.0	86
16	5.8	9.9	12.7	71.6	100.0	108
17	7.3	22.4	13.4	57.0	100.0	90
18	23.1	15.7	13.0	48.2	100.0	88
19	33.8	22.5	11.6	32.1	100.0	68
20-24	**48.2**	**25.0**	**14.4**	**12.5**	**100.0**	**321**
20	22.0	28.9	19.1	30.1	100.0	78
21	41.7	25.5	21.0	11.8	100.0	53
22	59.5	24.3	9.5	6.7	100.0	63
23	64.7	26.4	5.7	3.1	100.0	56
24	58.6	19.9	15.4	6.2	100.0	71
Residence						
Urban	25.5	29.6	14.0	30.9	100.0	150
Rural	28.2	16.2	12.4	43.2	100.0	611
15-24	27.7	18.9	12.7	40.7	100.0	762

[1]Excludes women who had sexual intercourse within the last 4 weeks

Comparison with data from the 1995 UDHS reveals that for the period of four weeks prior to the survey, young women were less sexually active in 2000-2001 than in 1995. Among women 15-19, 30 percent were sexually active in 2000-2001, compared with 41 percent in 1995. This finding supports what was presented in the previous section: young Ugandans are less sexually active than they were in 1995.

Condom Use at Last Sex

Overall, condoms are not a popular method of family planning in Uganda. The 2000-2001 UDHS data show that only 4 percent of all women 15-49 in Uganda are using condoms to delay or avoid a pregnancy. Use of condoms varies widely according to the woman's marital status; sexually active unmarried women are much more likely to use condoms than married women (29 percent and 2 percent, respectively) (UBOS and ORC Macro, 2001: 56).

However, 7 percent of women age 15-49 and 15 percent of men age 15-54 reported using a condom during their last sexual intercourse. The data further show that use of condoms is limited among spouses or cohabiting partners (3 percent of women and 4 percent of men). Condoms are much more likely to be used with noncohabiting partners than within marriage or in more stable relationships; 38 percent of women and 59 percent of men used a condom during their most recent sexual intercourse with a noncohabiting partner (UBOS and ORC Macro, 2001: 188-189).

Figures 3.1 and 3.2 show that women and men age 15-19 are much more likely than those age 20-24 to use condoms. Among women who had sexual intercourse in the year preceding the survey, 19 percent of those 15-19 reported using a condom during the last sexual intercourse, compared with 7 percent of women 20-24. They are also more likely to use a condom with a noncohabiting partner (50 percent compared with 37 percent, respectively).

Half of girls 15-19 report using condoms the last time they had sex with a non-cohabiting partner.

Like women 15-19, men 15-19 are more likely to report using condoms than men 20-24. However, the use of condoms reported by women and men differ by the type of partner. Men age 20-24 are more likely than men 15-19 to use condoms when having sexual intercourse with a noncohabiting partner.

Figure 3.1 Percentage of women age 15-19 and 20-24 who used a condom during last sexual intercourse, by type of partner

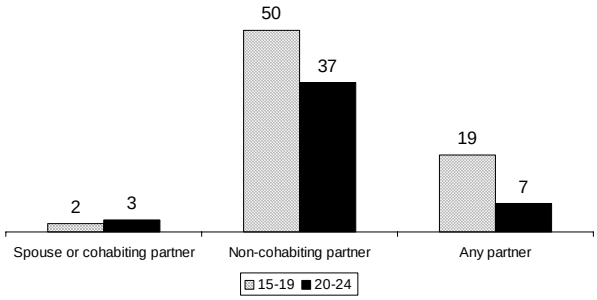
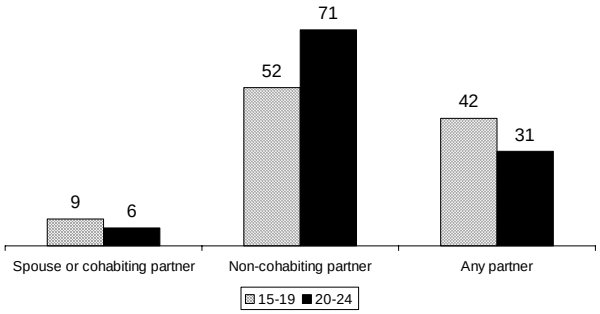


Figure 3.2 Percentage of men age 15-19 and 20-24 who used a condom during last sexual intercourse, by type of partner



Reason for Condom Use

Female and male respondents in the 2000-2001 UDHS who used a condom during last sexual intercourse were asked why they used a condom. Those who did not use condoms were asked why they did not. Various reasons were cited to support their decision to use a condom, including fear of contracting sexually transmitted infections (STIs) including HIV/AIDS, avoiding pregnancy, or both.

Table 3.4 looks at all women and men who had had sex in the 12 months preceding the survey. Data in the table refer to condom use during their last sexual intercourse. Comparison by age group shows that women and men 15-19 are more likely than their older counterparts to use condoms with the dual objective of preventing pregnancy and preventing STIs.

Table 3.4 Reason for condom use

Percent distribution of all women and men who had sexual intercourse in the last year and who used a condom during last sex by main reason for using a condom, according to current age

Age	Respondent wants to prevent STI	Respondent wants to prevent pregnancy	Respondent wants to prevent STI and pregnancy	Respondent did not trust partner/ partner has other partners	Partner insisted	Other reason/ missing	Total	Number
				WOMEN				
15-19	23.0	36.3	39.6	0.3	0.8	0.0	100.0	139
20-24	23.1	52.7	18.8	1.7	3.0	0.7	100.0	94
25-39	24.6	45.8	23.8	2.0	1.8	2.0	100.0	132
40-49	(40.1)	(39.0)	(15.8)	(1.0)	(0.0)	(4.1)	100.0	23
15-49	24.6	43.6	27.8	1.2	1.6	0.8	100.0	389
				MEN				
15-19	54.8	14.8	27.3	0.0	0.0	3.2	100.0	50
20-24	53.0	26.1	19.6	0.0	1.0	0.4	100.0	72
25-39	45.3	39.7	10.1	4.9	0.0	0.0	100.0	77
40-54	*	*	*	*	*	*	100.0	11
15-54	49.4	30.0	17.6	1.8	0.4	0.9	100.0	211

Note: Figures in parentheses are based on 25-49 unweighted cases. An asterisk indicates that a figure is based on fewer than 25 unweighted cases and has been suppressed.
STI = Sexually transmitted infection

Women are most likely to report condom use to avoid a pregnancy, while men are most likely to use condoms to protect themselves from sexually transmitted diseases. Overall, 28 percent of women stated they used a condom for both reasons—to protect themselves from getting pregnant and from contracting STIs. In contrast, only 18 percent of men reported the same two reasons. Other reasons such as distrust of sexual partner, partner has other sexual partners, and pressure from the partner, account for only 3 percent or less.

Payment for Sexual Relations

Male respondents in the 2000-2001 UDHS were asked whether they had ever paid for sex. Few young adult men reported having paid for sex at any time in the last 12 months (2 percent). Among these men, differences by age and residence are small and difficult to interpret due to small sample sizes (Table 3.5).

Table 3.5 Payment for sexual relations

Among men age 15-24 who had sexual intercourse in the 12 months preceding the survey, the percentage who paid for sex, according to current age and residence

Age and residence	Total	Number
Age		
15-19	1.8	120
20-24	2.5	233
Residence		
Urban	3.2	83
Rural	2.0	270
Total	2.3	353

4 MARRIAGE

Marriage Patterns

Marriage for many women is the initiation of exposure to the risk of pregnancy. Marriage in the context of the Uganda DHS survey refers to unions recognised by civil and religious laws, as well as by the community. Table 4.1 presents the percent distribution of women and men by marital status. In this table, women and men who have never been married are distinguished according to whether they have ever had sex.

Table 4.1 Current marital status

Percent distribution of women and men age 15-24 by current marital status and whether they have had sex, according to age

Age	Current marital status				Total	Number
	Never married/ never had sex	Never married/ ever had sex	Married[1]	Widowed/ divorced/ separated		
			WOMEN			
15-19	47.9	19.8	28.9	3.4	100.0	1,615
15-17	65.7	20.2	12.6	1.5	100.0	945
18-19	22.8	19.3	51.9	6.0	100.0	670
20-24	3.7	11.6	76.4	8.3	100.0	1,504
20-22	4.9	12.2	75.9	6.9	100.0	948
23-24	1.8	10.4	77.3	10.6	100.0	556
15-24	26.6	15.8	51.8	5.8	100.0	3,119
			MEN			
15-19	61.3	32.2	6.4	0.1	100.0	441
15-17	72.4	27.1	0.5	0.0	100.0	284
18-19	41.1	41.5	17.3	0.2	100.0	157
20-24	12.5	42.2	43.2	2.1	100.0	321
20-22	17.5	51.2	31.1	0.1	100.0	194
23-24	4.8	28.6	61.4	5.1	100.0	127
15-24	40.7	36.4	21.9	0.9	100.0	762

[1] Includes those who are living together in informal unions.

Overall, 42 percent of women 15-24 have never been married. The majority of these women reported that they have never had sex (27 percent of women 15-24, or 63 percent of women who have never married). More than half (52 percent) of women 15-24 are currently married or living with a partner, and 6 percent have been married but are no longer living together. Among men, 77 percent have never married, 41 percent have never married nor had sex and 36 percent have never married but have had sex. Twenty-two percent of men 15-24 are currently married or living with a woman.

Figures 4.1 and 4.2 show that a growing proportion of young adults have not married; the percentage of women 15-19 who had never married increased from 50 percent in 1995 to 68 percent in 2000-2001. Women age 20-24 show the same trend; 12 percent in 1995 and 15 percent in 2000-2001. Figure 4.2 shows that during the same period, young men show the same pattern; the percentage of men 15-19 had not married increased from 89 percent in 1995 to 94 percent in 2000-2001. For men 20-24, the increase is more significant, from 45 percent in 1995 to 55 percent in 2000-2001.

Figure 4.1 Percentage of women age 15-19 and 20-24 who have never married, 1995 and 2000-2001 UDHS

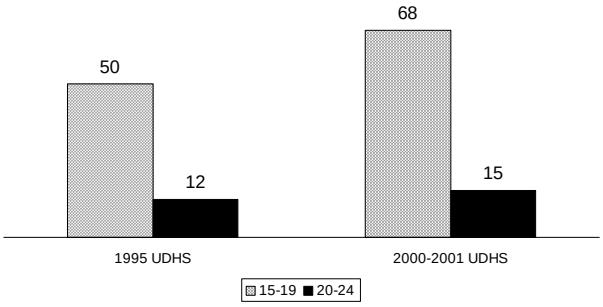
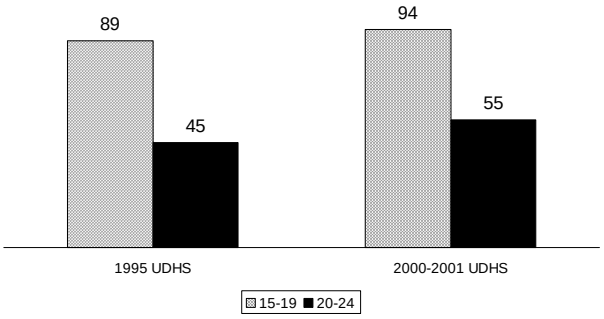


Figure 4.2 Percentage of men age 15-19 and 20-24 who have never married, 1995 and 2000-2001 UDHS



Polygyny

The practice of having more than one wife is common in Uganda. In addition to its impact on the individual's social life, economy, and fertility desires, this practice could increase the risk of contracting sexually transmitted diseases. The 2000-2001 UDHS data show that overall, one in three women age 15-49 (32 percent) reported being in a polygynous union. Polygyny is prevalent even among young married women, almost one-quarter of whom report having cowives (Table 4.2). The prevalence of polygyny increases with age, from 21 percent of women 15-19 to 38 percent of women 45-49.

One in four married women age 15-24 is in a polygynous union.

Table 4.2 Polygyny

Percent distribution of currently married women by number of cowives, according to age

Age	Number of cowives				Total	Number of women
	0	1	2+	Missing		
15-19	79.1	14.3	6.2	0.3	100.0	466
20-24	74.5	16.4	9.0	0.2	100.0	1,150
25-29	68.1	21.8	9.9	0.2	100.0	1,078
30-34	60.4	27.6	11.1	0.9	100.0	807
35-39	60.7	25.4	13.3	0.6	100.0	652
40-44	62.0	27.0	10.9	0.1	100.0	431
45-49	59.8	23.5	14.9	1.8	100.0	297
Total	67.3	21.8	10.4	0.5	100.0	4,881

5 CHILDBEARING

Age at First Menstruation

During puberty and early adolescence, women undergo biological and physiological changes, such as physical growth, the development of secondary sexual characteristics, and menarche. The start of menstruation also identifies the beginning of the time when a girl is exposed to the risk of pregnancy.

Table 5.1 shows that half of girls have started menstruating by age 14. By age 15, three in four have had a menstrual period. Urban girls start menstruating earlier than rural girls; by age 13, 31 percent of girls in urban areas have had their first period, compared with 21 percent for rural girls.

Table 5.1 Age at first menstruation

Percentage of women who had first menstruation by specific exact ages, according to current age and residence

Age/ residence	Percentage of women who had first menstruation by exact age					Percentage who have never menstruated	Number
	13	14	15	16+	Don't know		
Age							
15	23.8	54.3	69.5	–	1.0	29.5	300
16	24.6	57.1	82.1	90.2	0.4	9.4	339
17	17.1	47.2	80.9	96.6	0.9	2.6	306
18	25.1	49.1	78.6	98.2	0.7	1.1	379
19	27.1	53.8	75.2	96.9	2.3	0.8	290
20	18.6	48.0	72.3	95.1	4.9	0.0	371
21	23.6	43.8	70.0	96.8	3.2	0.0	293
22	19.8	49.3	75.7	95.0	4.1	0.8	285
23	25.9	51.0	73.3	94.7	5.3	0.0	294
24	22.3	1.6	73.5	95.6	4.2	0.1	262
Residence							
Urban	31.1	61.0	82.3	98.5	0.3	1.2	611
Rural	20.7	46.7	73.6	91.6	3.2	5.2	2,508
Total	22.8	49.5	75.3	92.9	2.7	4.4	3,119

Motherhood

Examination of trends in fertility in Uganda shows that the total fertility rate (TFR) was 7.3 births in mid-1987 and has remained at 6.9 births through the 1990s (Table 5.2).

Table 5.2 Trends in fertility

Trends in age-specific fertility rates, 1988-89 UDHS, 1995 UDHS and 2000-2001 UDHS

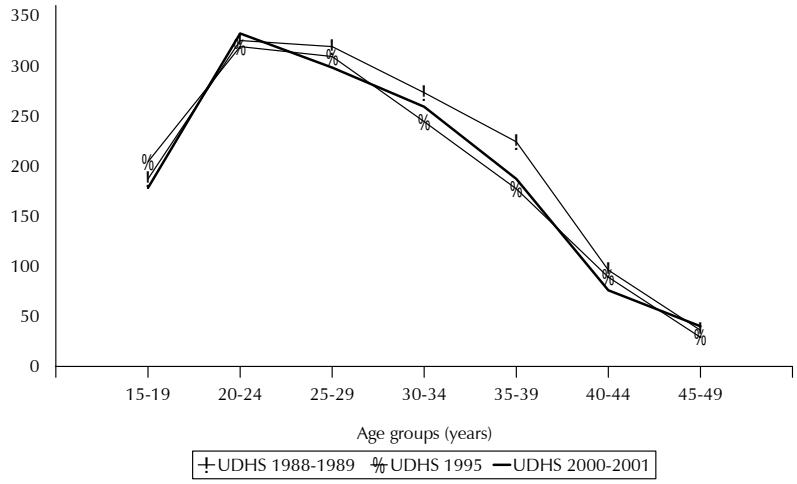
Age	1988-1989 UDHS	1995 UDHS	2000-2001 UDHS
15-19	187	204	178
20-24	325	319	332
25-29	319	309	298
30-34	273	244	259
35-39	224	177	187
40-44	96	89	76
45-49	36	29	40
TFR	7.3	6.9	6.9

Note: Age-specific fertility rates are per 1,000 women. Rates are for the period 1-36 months preceding the survey. Data from the three UDHS are not strictly comparable due to some differences in geographic coverage.
TFR = Total fertility rate for age 15-49, expressed per woman

The TFR denotes the number of live births a woman would have if she were subject to the current fertility patterns throughout her reproductive years.

It is also obvious that Ugandan women start childbearing early. At current rates, an average woman will have given birth to 2.6 children by age 25 and to more than 5 children by age 35. Since 1995, there has been a slight decline in the age–specific fertility rate for age 15-19, from 204 to 178 births per 1,000 women (Table 5.2 and Figure 5.1). Age-specific fertility rates for women 15-19 represent about 13 percent of the TFR.

Figure 5.1 Trends in age-specific fertility rates, 1988-1989 UDHS, 1995 UDHS, and 2000-2001 UDHS



While the age-specific fertility rates have not changed much since 1988, examination of the level of pregnancy among teenagers in Uganda shows that there has been a decline in the percentage of young women who have started childbearing. In 1995, 43 percent of women 15-19 either were mothers or were pregnant with their first child. In 2000-2001, this percentage had declined to 31 percent (UBOS and ORC Macro, 2001:50).

Teenage pregnancy has declined from 43 percent in 1995 to 31 percent in 2000-2001.

The age at initiation of childbearing has not changed much over time. Comparison of findings from previous UDHS surveys shows that the median age at first birth has remained around 18.5 for the past 30 years (UBOS and ORC Macro, 2001: 48).

Table 5.3 shows that in 2000-2001, 32 percent of women 15-19 and 88 percent of women 20-24 have ever been pregnant. This percentage generally increases with age, reaching close to 90 percent at age 22. At the time of the survey, 9 percent of women 15-19 and 19 percent of women 20-24 were currently pregnant. Again, the likelihood that a woman is pregnant is positively associated with her age; older women are generally more likely than younger women to be pregnant.

Table 5.3 Teenage pregnancy and motherhood

Percentage of women age 15-24 who have ever been pregnant, who are currently pregnant ,and who have given birth

Age	Percent ever pregnant	Percent currently pregnant	Percent who have given birth	Number of women
15-19	**32.2**	**9.2**	**25.6**	**1,615**
15	3.3	1.4	1.9	300
16	13.4	3.0	9.9	339
17	23.8	8.5	17.1	306
18	55.3	17.7	43.1	379
19	62.7	14.2	54.6	290
20-24	**87.8**	**18.9**	**84.4**	**1,504**
20	83.1	18.4	77.0	371
21	86.8	21.5	83.3	293
22	89.1	16.3	87.0	285
23	90.2	19.5	88.3	294
24	91.5	18.6	89.2	262
Total	59.0	13.9	54.0	3,119

Ideal Family Size

A measure of fertility preference is the ideal number of children, which is the number of children women and men would want in their whole life if they could start afresh. There has been a gradual decline in the mean ideal number of children among Ugandan women from 6.4 children in 1988-1989 to 4.8 children in 2000-2001.

Figure 5.2 shows that among young adult women, the mean ideal number of children has declined from almost six children in 1988-1989 to just over four children. In general, men want larger families than women and have not changed their fertility preferences much in the last five years. Figure 5.3 shows that the ideal number of children among men 15-19 has declined from 5.0 children in 1995 to 4.6 children in 2000-2001, while among men 20-24, it has declined from 5.1 to 4.8 children.

Figure 5.2 Mean ideal number of children among women age 15-19 and 20-24

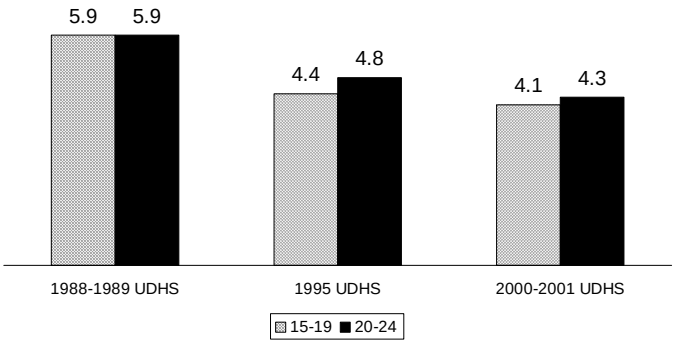
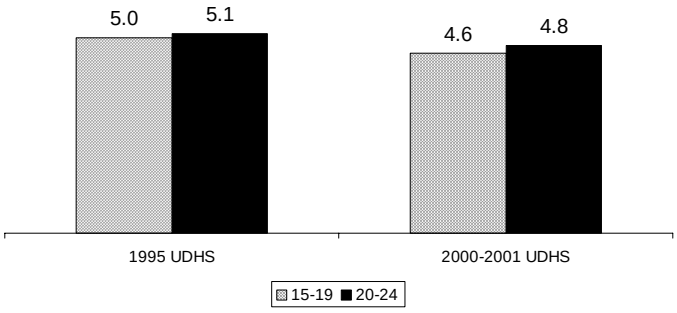


Figure 5.3 Mean ideal number of children among men age 15-19 and 20-24



Need for Family Planning Services

In the UDHS, women who said that they did not want any more children or wanted to delay their next child for two years or longer but who were not using any method of contraception are defined as having an unmet need for family planning services. Table 5.4 shows the data for all women 15-49. As expected, younger women are more likely to be in need of family planning for spacing than for limiting, while older women are more in need for stopping childbearing. Unmet need for women 15-19 is especially small (9 percent) because the majority has not started childbearing. Among all young adult women, 19 percent are in need of family planning services—17 percent for spacing births and 2 percent for limiting births.

Table 5.4 Need for family planning among all women

Percentage of all women with unmet need for family planning by age

Age	Unmet need for family planning: For spacing	Unmet need for family planning: For limiting	Total	Number of women
15-19	8.9	0.4	9.3	1,615
20-24	25.0	3.3	28.3	1,504
25-29	22.0	9.7	31.7	1,341
30-34	15.2	15.5	30.8	983
35-39	9.5	21.0	30.5	810
40-44	3.3	23.1	26.4	570
45-49	1.1	15.0	16.1	423
Total	14.7	9.7	24.4	7,246

The total unmet need increases from 9 percent among women 15-19, peaks at 32 percent among women 25-29, and gradually declines to 16 percent for women in the oldest age group. The high level of unmet need in the 20-39 age group is due to the fact that women in this age group tend to be more regularly sexually active and more likely to want to control childbearing.

Fertility Planning

As a measure of the ability of women to control their fertility, in the 2000-2001 UDHS, all women who had had a birth in the five years preceding the survey were asked whether the pregnancy was wanted at the time it was conceived, wanted at a later time, or not wanted at all. For women who were pregnant at the time of the survey, this question was asked of the current pregnancy.

Table 5.5 shows the distribution of births in the five years prior to the survey by planning status, presented according to the mother's age at birth. Overall, 60 percent of births were wanted then, 25 percent were wanted but at a later date, and 15 percent were not wanted at all. Births to younger women are more likely to be wanted at the time they were conceived than births to older women. Although 68 percent of births to women less than 19 years old were wanted then, the corresponding percentage of births to women 40-44 is 35 percent. On the other hand, births to older women are more likely to be unwanted than those to younger women. Although 61 percent of births to women 40-44 were not unwanted, the corresponding percentage for women under 20 is 9 percent.

Table 5.5 Fertility planning status

Percent distribution of births (including current pregnancy) in the five years preceding the survey by fertility planning status, according to mother's age at birth

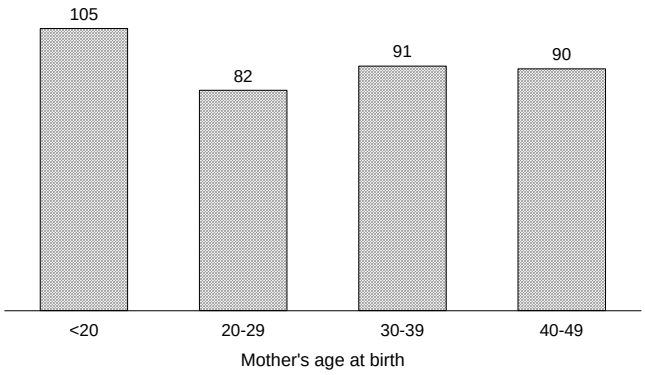
Age at birth	Planning status of birth: Wanted then	Wanted later	Wanted no more	Missing	Total	Number of births
<19	67.7	22.7	9.3	0.3	100.0	1,678
20-24	64.0	29.4	6.3	0.2	100.0	2,643
25-29	59.5	28.6	11.6	0.3	100.0	2,003
30-34	55.7	21.7	22.4	0.1	100.0	1,251
35-39	47.9	15.6	36.0	0.5	100.0	748
40-44	35.4	3.9	60.6	0.1	100.0	221
45-49	(53.7)	(2.3)	(41.0)	(3.1)	100.0	38
Total	60.3	24.8	14.6	0.3	100.0	8,581

6 Parenting

It is generally believed that children born to young mothers are at a disadvantage. There is strong evidence that children born to very young women suffer higher mortality rates than those born to older women. This holds true in Uganda, where the infant mortality rate drops from 105 deaths per 1,000 births to women under 20 to 82 per 1,000 for births to women age 20-29 (Figure 6.1) (UBOS and ORC Macro, 2001: 102). This pattern is often interpreted as being due to biological factors, such as the body not being fully prepared for childbirth.

Aside from child mortality, studies have shown that younger mothers are more likely to be unmarried and less educated than older mothers, both of which tend to result in fewer available financial resources. Presumably, younger mothers also have less experience with and wisdom about parenting. These factors could lead to poorer health care for children of young mothers.

Figure 6.1 Infant mortality by mother's age at birth



Two pieces of data from the UDHS mute this view of younger mothers. Figure 6.2 shows that children of younger mothers are only slightly less likely to be fully immunised against childhood diseases than children whose mothers are older. Thirty percent of children age 12-23 months whose mothers are 15-19 have been fully immunised, compared with the average of 37 percent.

Data in Figure 6.3 show that children of younger mothers are only slightly more likely than average to be malnourished. The differences are not significant. Other results show that mothers age 15-19 are as likely as older mothers to know about oral rehydration solution for the treatment of diarrhoea (UBOS and ORC Macro, 2001: 132).

Younger mothers appear to be as capable of taking care of their children as older mothers.

In conclusion, this brief overview indicates that in general, younger mothers appear to be as capable at parenting as older mothers.

Figure 6.2 Vaccination coverage among children age 12-23 months (percentage fully immunised), by mother's age

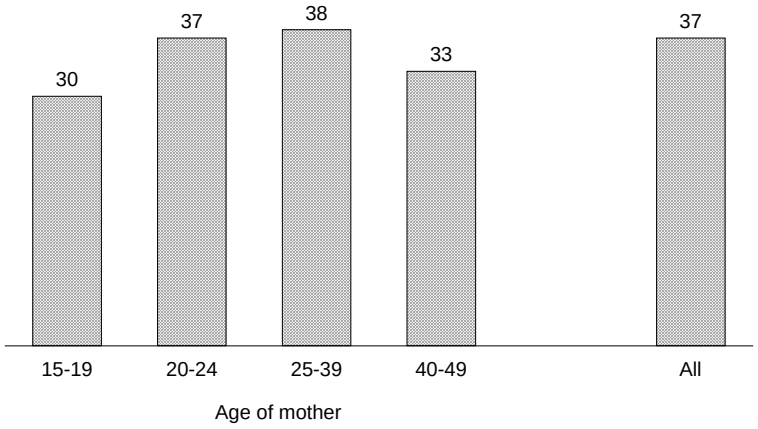
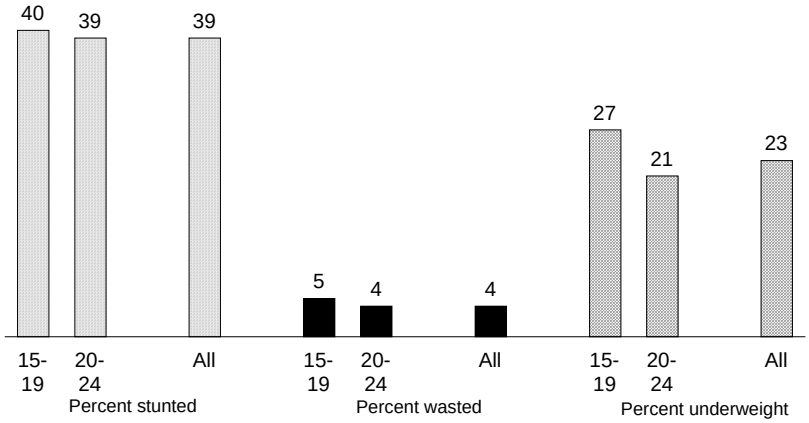


Figure 6.3 Malnutrition among children under age five, by mother's age



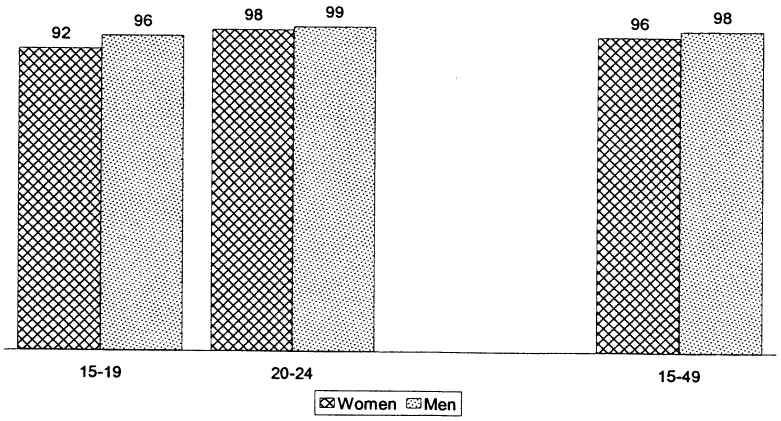
Stunted - less than -2 standard deviations below the mean for height-for-age
Wasted - less than -2 standard deviations below the mean for weight-for-height
Underweight - less than -2 standard deviations below the mean for weight-for-age

7 Contraception

Contraceptive Knowledge

Ugandan adolescents are generally knowledgeable about contraceptive methods. Ninety-two percent of women 15-19 and 98 percent of those 20-24 have heard of at least one modern method of contraception. Levels are even higher among young men (Figure 7.1). Although the *number* of methods known is slightly lower among younger women, it is only among those who have never had sex that knowledge of at least one method is appreciably lower (UBOS and ORC Macro, 2001: 52).

Figure 7.1 Contraceptive knowledge
(percentage who know at least one modern method)



However, young adults are not as knowledgeable about the female ovulatory cycle as older individuals. Women 15-24 are less likely than older women to know that their most fertile time is halfway between two menstrual periods (Table 7.1). They are also more likely to say they do not know when they are most fertile. The same is true among men, who seem to gain some knowledge of the female reproductive cycle with age.

Contraceptive Use

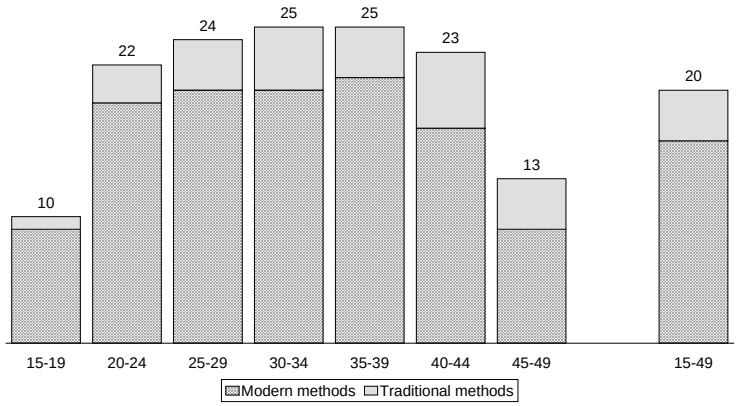
As expected, contraceptive use is lower among younger Ugandan women. As shown in Figure 7.2, only 10 percent of all women 15-19 were currently using some sort of family planning method at the time of the survey. However, by the time women reach age 20-24, levels of contraceptive use are almost as high as among women 25-39. It is also interesting to note that, despite the belief that young women rely more heavily on traditional methods, the proportion of modern method use remains fairly uniform through the thirties.

Table 7.1 Knowledge of fertile period

Percent distribution of women and men by knowledge of the fertile period during the ovulatory cycle, by broad age groups

Perceived fertile period	Women			Men		
	15-24	25-49	Total	15-24	25-49	Total
Just before period begins	7.5	7.0	7.2	8.8	7.2	7.8
During menstrual period	1.1	0.6	0.8	3.1	1.3	2
Right after period has ended	32.1	39.3	36.2	36.2	58.3	49.7
Halfway between periods	15.3	20.0	17.9	11.6	18.2	15.6
No special time	8.5	8.3	8.4	7.5	3.9	5.3
Other	0.2	0.7	0.5	1.1	1.1	1.1
Don't know	35.3	24.3	29.0	31.8	10.1	18.5
Total	100.0	100.0	100.0	100.0	100.0	100
Number	3,119	4,127	7,246	762	1,200	1,962

Figure 7.2 Contraceptive use
(percentage of all women currently using)



The low level of use among women 15-19 is largely a reflection of their lower level of sexual activity. Among currently married women, 12 percent of those age 15-19 and 21 percent of those age 20-24 are currently using a method, compared with 23 percent of all married women. Among sexually active, unmarried women, more than half are using some family planning method (52 percent of 15-19, 54 percent of 20-24) (UBOS and ORC Macro, 2001: 56).

Although young contraceptive users are as likely as older ones to use modern methods, there are significant differences in the methods they use. Adolescents who are using a method are much more likely to use condoms than older users. For example, more than half of the 10 percent of women 15-19 who are using modern methods are using condoms, compared with less than 20 percent for all users. Injectables and pills are also popular and become even more so among women 20-24. Among older women,

although injectables remain popular, use of lactational amenorrhoea and female sterilisation become prominent as well (UBOS and ORC Macro, 2001: 56).

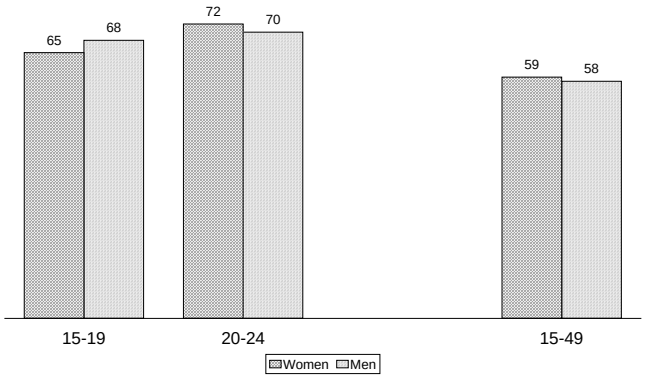
Intention to Use Contraception

As mentioned above, an important reason why younger women may not be using a method is that they are not currently sexually active. Another reason is that they may be trying to get pregnant to start their family. Consequently, it is useful to know whether nonusers ever expect to use contraception in the future.

As Figure 7.3 shows, two-thirds or more of young nonusers say they intend to use family planning methods at some time in the future. Intended future use declines with age since older women are more likely to be infertile, menopausal, widowed, or no longer sexually active.

Two-thirds or more of young nonusers intend to use family planning at some time in the future.

Figure 7.3 Intention to use contraception in future (among those not currently using)



Men's Attitudes toward Condoms

Table 7.2 shows the percentage of men 15-54 who agreed with specific statements about condoms. The data are presented by age group and separate those who have used condoms from those who have not.

Overall, slightly more than one-third of men agree with the statement that condoms diminish a man's sexual pleasure. Agreement is considerably higher among men who have experience with condoms than among never-users. The youngest men (age 15-19) are less likely to agree that condoms diminish pleasure (28 percent); this is in large part because fewer have used them.

Slightly more than one-quarter of men agree with the statement that condoms are very inconvenient to use. There is no clear age pattern of responses, nor is there much difference of opinion between those who have used condoms and those who have not.

Table 7.2 Attitudes of men about condoms

Percentage of men who agree with specific statements about condoms

Age	Condoms diminish a man's sexual pleasure	Condom is very inconvenient to use	Condom can be reused	Condom protects against disease	Woman has no right to tell a man to use a condom
Never used condoms					
15-19	22.0	22.0	4.2	63.7	28.8
20-24	31.6	34.6	2.8	65.8	28.7
25-29	38.5	27.6	3.3	66.9	36.4
30-39	33.8	32.2	2.9	66.0	32.0
40-54	24.3	26.2	1.4	60.4	26.1
Has used condoms					
15-19	57.3	22.3	3.0	92.8	26.6
20-24	52.5	33.1	1.3	93.2	24.1
25-29	56.9	24.9	2.7	96.6	31.3
30-39	57.4	35.2	1.8	91.1	30.8
40-54	49.2	22.8	3.1	92.4	31.9
Total					
15-19	28.1	22.0	3.9	68.7	28.4
20-24	42.8	33.8	2.0	80.4	26.3
25-29	47.4	26.3	3.0	81.2	33.9
30-39	42.0	33.3	2.5	74.8	31.6
40-54	28.7	25.6	1.7	66.0	27.1
All	37.4	28.3	2.7	73.7	29.5

It is encouraging to note that only a small fraction of men (3 percent) believe that condoms can be reused. It is also encouraging that almost three-quarters know that condoms can protect against disease. Men who have used condoms are much more likely to know of their disease-resistant properties than men who have not used them. Still, two-thirds of men age 15-19 and four-fifths of men age 20-24 agree that condoms can protect against disease.

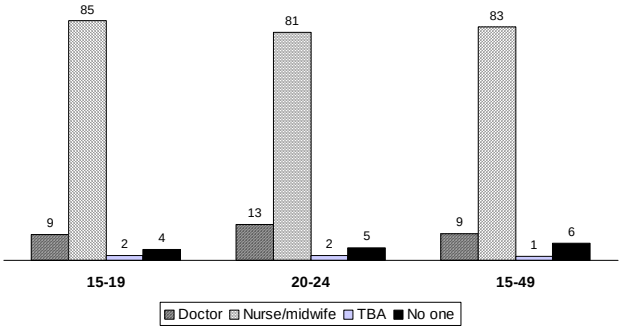
Almost one in three men believe that a woman has no right to tell a man to use a condom. Younger men are slightly less likely than older men to take such a hard line.

8 MATERNAL HEALTH

Antenatal Care

In addition to monitoring the progress of the foetus, the primary objective of antenatal care is to detect and treat problems during pregnancy. Early detection is of absolute importance to avoid future complications, such as during delivery and the postnatal period. Figure 8.1 shows the distribution of births in the past five years by the antenatal service provider and age of the mother at the birth of the child. Overall, nine in ten births receive antenatal care from a medical professional: 83 percent from a nurse, midwife, or auxiliary midwife and 9 percent from a doctor. Few births have had antenatal care from a traditional birth attendant (1 percent), and 6 percent of births did not receive antenatal care.

Figure 8.1 Percent distribution of births by antenatal care provider, according to mother's age at birth



Comparison across age groups shows that there are slight variations in the care provider. It is encouraging to see that young mothers are slightly more likely than average to receive medical care during pregnancy, especially from a doctor.

Knowledge of Pregnancy Complications

In the 2000-2001 UDHS, women who had given birth in the five years preceding the survey were asked whether they were told of danger signs in pregnancy by a health provider during their antenatal care visit for the most recent birth. If so, they were asked what symptoms they knew. Although the data may provide an indication of programme effectiveness, the data do not measure the actual level of knowledge because women may have known symptoms of pregnancy complications without being informed by a health care provider. In the case of male UDHS respondents, those who had a child were asked whether they knew of signs and symptoms that indicate that a pregnancy may be in danger. The responses are presented in Table 8.1.

Overall, the problems most frequently cited by women are vaginal bleeding (22 percent), abdominal pain (10 percent), and high fever (5 percent). The same signs are reported by men but at higher rates: vaginal bleeding (40 percent), abdominal pain (22 percent), and high fever (14 percent). For men, although one in six men failed to

Table 8.1 Knowledge of pregnancy complications

Among women and men who had a birth in the five years preceding the survey, percentage who reported specific symptoms that a pregnancy may be in danger, according to age at last birth

	Pregnancy complications								
Age	Vaginal bleeding	High fever	Abdominal pain	Swelling in hands and feet	Difficult labor for more than 12 hours	Con-vulsions	Other	Do not know any signs or symptoms/ missing	Total
					WOMEN				
<20	20.5	4.4	8.2	2.1	0.8	0.2	3.3	0.9	746
20-24	24.6	6.1	10.4	2.0	0.4	0.4	3.0	0.5	1,311
25-29	21.9	5.5	9.7	3.0	1.9	0.8	2.1	0.8	1,089
30-34	19.3	5.3	9.4	1.7	1.1	0.9	2.7	0.8	659
35-39	22.7	5.6	8.4	1.8	1.8	0.2	4.5	1.2	501
40-44	14.8	3.6	10.0	0.2	1.3	0.0	3.0	0.0	154
45-49	19.2	4.9	5.8	0.0	0.0	4.7	3.8	0.0	30
Total	21.9	5.4	9.5	2.1	1.1	0.5	3.0	0.7	4,489
					MEN				
<20	34.0	13.8	11.8	2.4	3.1	0.0	4.5	12.8	93
20-24	38.3	10.1	18.7	4.7	4.9	1.7	6.9	19.9	323
25-29	35.4	17.6	24.1	0.6	3.4	5.3	8.6	15.4	463
30-34	48.5	14.6	27.8	3.0	4.6	1.8	8.0	12.2	392
35-39	37.0	14.6	21.6	3.2	3.3	1.3	8.0	15.6	321
40-44	39.7	14.4	17.3	2.2	5.5	3.2	5.9	9.2	235
45-49	49.3	9.7	24.4	6.8	5.9	4.5	4.3	18.7	96
50-54	37.5	20.6	23.1	5.5	11.5	7.3	5.3	11.6	34
Total	39.8	14.3	22.1	2.8	4.4	2.8	7.3	14.8	1,962

mention any sign of problems during pregnancy, those who were able to cite any problems were able to mention the various complications.

Comparison across age groups shows that no significant variations are found among women. Mothers 20-24 are slightly more likely than other mothers to be able to mention these problems. On the other hand, older men are more likely than their younger counterparts to cite difficult labor and convulsions.

Assistance during Delivery

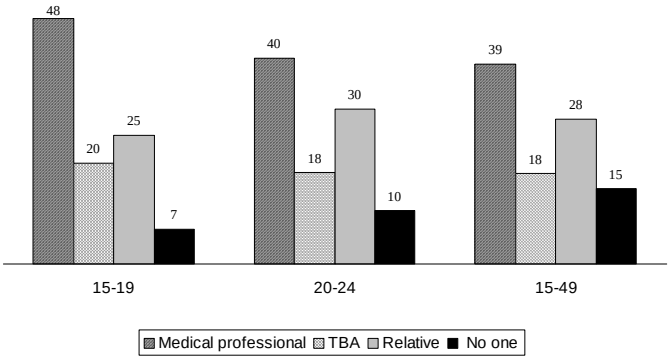
The type of assistance during delivery is important since the skills of the provider influence the delivery outcome as well as the health of the mother and baby. A medical professional is expected to have better knowledge in managing complications and maintaining hygienic practices. Figure 8.2 shows the distribution of births in the five

years prior to the survey by assistance during delivery, according to the mother's age at birth. Overall, 39 percent of births were assisted by a medical professional. The role of the traditional birth attendant (TBA) in assisting delivery in Uganda is much more important than in providing antenatal care. This means that while most women receive antenatal care from a medical professional, the vast majority are not assisted by health personnel during delivery. Overall, 18 percent were assisted by a traditional birth attendant, 28 percent were assisted by a relative, and 15 percent delivered their baby by themselves.

Births to younger women are not only more likely to be assisted but are more likely to be assisted by a medical professional.

The likelihood that a birth received any assistance is inversely associated with the mother's age at birth; the younger the mother is, the more likely she is to receive assistance during delivery. Births to younger women are not only more likely to be assisted but are also more likely to be assisted by a medical professional.

Figure 8.2 Percent distribution of births by assistance during delivery, according to mother's age at birth



9 HIV/AIDS

In Uganda, sexually transmitted infections (STIs) and HIV/AIDS have been recognised as serious public health and social problems. STIs have both short- and long-term adverse effects on the individual's health. HIV/AIDS is by far the most serious STI.

The first AIDS case was identified in Uganda in 1982. By 1999, more than 50,000 cases were reported in clinics throughout the country. These represented a small proportion of all cases. In 2000, the Ministry of Health reported that close to 1.5 million people were estimated to be infected, with 838,000 people estimated to have died of the disease.

To have comprehensive services for adolescents in dealing with these diseases, the Uganda Ministry of Health has integrated STI and HIV/AIDS programmes into reproductive health services, including voluntary confidential counselling and testing. The guidelines call for improved health education and advocacy, strengthened interventions to reduce transmission from mother to child, and screening and treatment (Ministry of Health, 2001).

Awareness of HIV/AIDS and Related Issues

Although practically all respondents in the 2000-2001 UDHS said that they had heard of AIDS, this knowledge is not matched with their knowledge of ways to avoid contracting the disease. Three ways are programmatically important: abstaining from sex, using condoms, and limiting the number of sexual partners. In general, men are more knowledgeable than women of the various ways to avoid AIDS. Whereas 90 percent of men are able to cite two or more ways, the corresponding proportion for women is 78 percent (Table 9.1). On the other hand, while 13 percent of women do not know of any method to avoid AIDS, the proportion for men is only 5 percent.

Comparison across age groups shows that younger women are slightly more likely than older women to be able to cite two or three programmatically important ways to avoid AIDS. For men, those age 25-34 are the most knowledgeable about avoiding AIDS.

When asked about specific ways to avoid AIDS, young adult men are more likely than young women to mention the use of condoms and limiting the number of sexual partners (Figures 9.1 and 9.2). For example, 83 percent of men 15-19 mention condom use as an AIDS prevention measure, compared with 69 percent of women 15-19. Women and men 15-19 are less likely than those 20-24 to cite the use of condoms and limiting the number of partners.

Table 9.1 Knowledge of programmatically important ways to avoid HIV/AIDS

Percent distribution of women and men by knowledge of three programmatically important ways to avoid HIV/AIDS, according to age

	Women					Men				
	Programmatically important ways to avoid HIV/AIDS					Programmatically important ways to avoid HIV/AIDS				
Age	None	One way	Two or three ways	Total	Number of women	None	One way	Two or three ways	Total	Number of men
15-19	15.5	6.4	78.1	100.0	1,615	8.4	5.3	86.3	100.0	441
20-24	11.5	6.1	82.5	100.0	1,504	2.5	3.4	94.1	100.0	321
25-29	12.1	8.8	79.1	100.0	1,341	1.9	5.8	92.3	100.0	310
30-34	12.0	10.7	77.2	100.0	983	2.9	4.5	92.5	100.0	291
35-39	15.2	10.7	74.1	100.0	810	4.3	5.0	90.8	100.0	231
40-44	12.8	11.1	76.1	100.0	570	8.5	7.0	84.5	100.0	165
45-49	17.9	11.3	70.8	100.0	423	8.8	4.9	86.3	100.0	120
50-54	na	na	na	0.0	0	10.7	7.4	81.9	100.0	83
Total	13.4	8.5	78.1	100.0	7,246	5.2	5.1	89.6	100.0	1,962

na = Not applicable

Figure 9.1 Percentage of women age 15-19 and 15-24 who know two specific ways to avoid HIV/AIDS

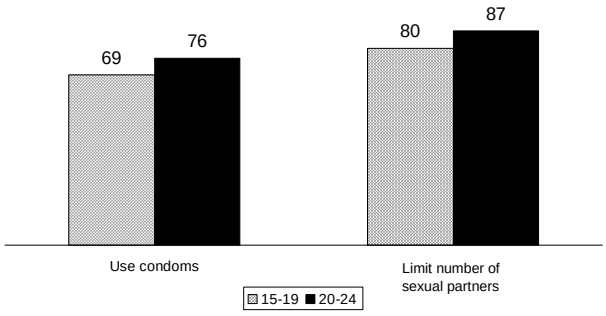
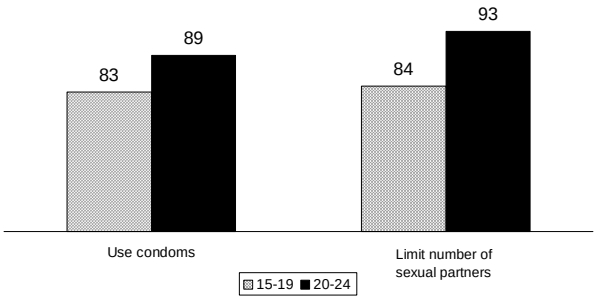


Figure 9.2 Percentage of men age 15-19 and 20-24 who know two specific ways to avoid HIV/AIDS



Access to Condoms

The use of condoms is considered one of the most important ways to avoid the spread of HIV/AIDS. Therefore, knowledge of, access to, and use of condoms are essential in controlling STIs. Respondents in the 2000-2001 UDHS were asked whether they knew of a place where they could get male condoms and whether they themselves could get condoms. Many young women and men know that using condoms can prevent them from contracting HIV but do not know where to get condoms. Whereas 69 percent of women 15-19 know that using condoms can protect against getting the AIDS virus (Figure 9.1), only 53 percent know a source for condoms (Table 9.2 and Figure 9.3). For men, the corresponding proportions are 83 and 77 percent, respectively. Women and men 20-24 are the most likely to know a source for condoms.

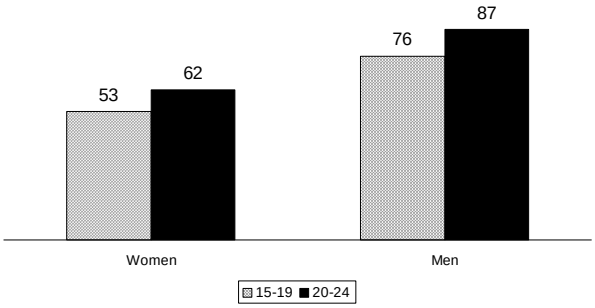
Table 9.2 Access to condoms

Percentage of women and men who know a source for male condoms, the percentage who think they themselves could get a male condom, and the percentage of women who think that they can convince their partner to use a condom, by current age

	Access to condoms: women				Access to condoms : men		
Age`	Know of a source for male condom	Could get a condom	Think can convince partner to use condom	Number	Know of a source for male condom	Could get a condom	Number
15-19	53.1	32.3	27.5	1,615	76.1	63.6	441
20-24	62.1	47.1	35.8	1,504	87.2	79.4	321
25-29	58.1	42.0	29.1	1,341	83.4	77.0	310
30-34	53.8	39.1	24.2	983	82.0	72.5	291
35-39	48.3	29.5	19.5	810	70.9	60.3	231
40-44	43.5	25.3	15.6	570	65.6	50.7	165
45-49	29.8	15.0	10.1	423	63.5	46.3	120
50-54	na	na	na	0	58.4	35.7	83
Total	53.3	36.2	26.2	7,246	76.9	65.9	1,962

na = Not applicable

Figure 9.3 Percentage of women and men age 15-19 and 20-24 who know a source for male condoms



The percentage of women and men 15-19 who said that they could get condoms themselves if they wanted them was even lower: 32 percent for women and 64 percent for men. These figures indicate that only about half of women 15-24 who know that using condoms can reduce the risk of getting HIV/AIDS can get condoms themselves.

The gap between knowledge of condom use to prevent AIDS and knowledge of a source for condoms and the ability to get condoms should be a concern to HIV/AIDS programme managers.

Comparison across age groups shows that women and men 15-19 are slightly less likely than those 20-24 to have access to condoms. Women and men age 20-29 are the most likely to have access to condoms.

In the UDHS, women were also asked if they had a condom, whether they felt they could convince their partner to use it. Table 9.2 shows that only one-quarter of women 15-19 and about one-third of those 20-24 said they thought they could convince their partners to use condoms.

There is a gap between knowledge of condom use to prevent sexually transmitted diseases and where to get condoms, and whether women and men themselves can get condoms.

Prevalence of STIs

Data on the prevalence of STIs in the 2000-2001 UDHS was obtained by asking respondents who had ever had sex whether they had a sexually transmitted disease in the last 12 months. They were also asked whether they had a genital discharge or a genital sore or ulcer in the same period. The results are presented in Table 9.3.

Across age groups, women and men 15-19 are the least likely to report having had STIs or symptoms, presumably because some of them are not currently sexually active and some do not know the symptoms. The prevalence of STIs or their symptoms is the same among women 20-39. Overall, 17 percent of women 15-49 and 6 percent of men 15-54 reported having had an STI or its symptoms.

Table 9.3 Self-reporting of sexually transmitted infections and STI symptoms by sex

Percentage of women and men who had an STI and/or associated symptoms in the 12 months preceding the survey, according to current age

	Women		Men	
Age	Percentage with STI, discharge, or sore/ulcer	Number	Percentage with STI, discharge, or sore/ulcer	Number
15-19	13.3	841	2.7	171
20-24	17.5	1,448	7.4	281
25-29	17.3	1,333	7.0	304
30-39	17.6	1,785	5.2	520
40-49	15.4	991	4.4	285
50-54	na	0	5.1	83
Total	16.6	6,398	5.5	1,643

Testing for HIV/AIDS

In the survey, respondents were asked whether they had been tested for HIV/AIDS. Although they were not asked to report their HIV status, those who had been tested were asked whether they obtained the results. Overall, 8 percent of women and 12 percent of men said that they had been tested for AIDS (Table 9.4). Women and men 20-24 are more likely to have been tested than those 15-19 (Figures 9.4 and 9.5). Most of the people who had been tested for AIDS received the results (90 percent of women and 93 percent of men—data not shown).

Table 9.4 Testing for the AIDS virus

Percent distribution of women and men 15-24 by whether tested for the AIDS virus, desire to be tested, and percentage of women and men who have not been tested who know a source for the test, according to age

	Women			Men		
		Not tested			Not tested	
Age	Tested for the AIDS virus	Want to be tested	Knows source for test	Tested for the AIDS virus	Want to be tested	Knows source for test
15-19	6.0	62.2	26.6	3.2	69.3	41.5
20-24	11.4	67.8	34.9	12.7	68.9	54.1
25-29	11.1	64.7	30.2	18.5	63.4	53.4
30-34	8.1	63.6	28.8	16.3	64.7	54.3
35-39	7.0	59.3	22.9	14.4	64.4	37.1
40-44	5.8	63.1	25.3	13.5	60.4	46.0
45-49	5.2	60.5	22.6	11.0	66.6	42.1
50-54	na	na	na	8.8	51.6	41.7
Total	8.4	63.7	28.5	12.0	65.4	47.0

na = Not applicable

Figure 9.4 Percentage of women age 15-19 and 20-24 who have been tested for AIDS, who want to be tested, and who know a source for AIDS test

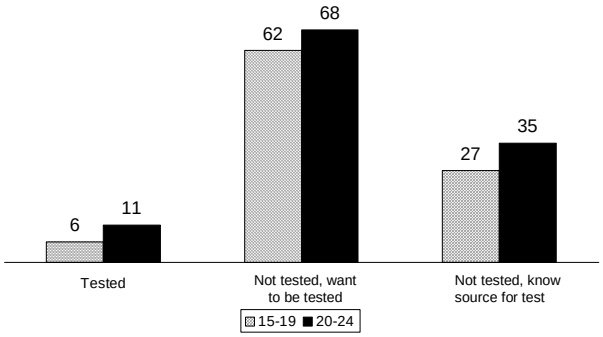
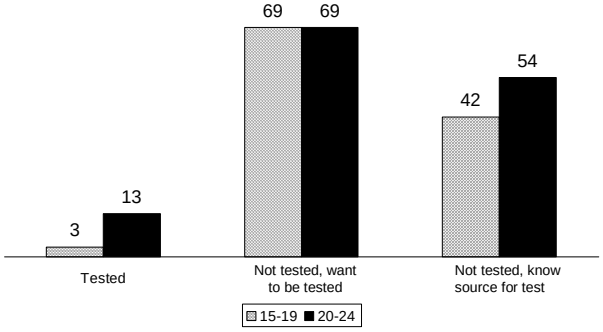


Figure 9.5 Percentage of men age 15-19 and 20-24 who have been tested for AIDS, who want to be tested, and who know a source for AIDS test



Two in three young adult women and men who had not been tested for HIV expressed interest in getting tested. Although many women and men want to have the HIV test, only a limited number know where to go to have the test (about one-third of young adult women and half of young adult men).

10 TOBACCO AND ALCOHOL USE

Although substance abuse in Uganda has not reached alarming levels, it is on the rise, especially tobacco and alcohol use. This section investigates the smoking and drinking habits of young adults in Uganda. In the 2000-2001 UDHS, respondents were asked whether they smoke and how many cigarettes they had smoked in the past 24 hours. Respondents were also asked whether they had ever drunk alcohol, whether they had drunk alcohol in the 30 days preceding the survey, and how often they had become drunk in the past 30 days.

Table 10.1 shows the prevalence of smoking and drinking alcohol among women 15-49 and men 15-54. Overall, smoking is not as popular as drinking. Furthermore, women are much less likely than men to smoke and drink. Only 3 percent of women 15-49 smoke compared with 25 percent of men 15-54, and whereas one in four women drinks alcohol, the proportion among men is 45 percent.

Women are less likely than men to report smoking and drinking.

Table 10.1 Smoking and drinking

Percentage of women and men who smoke, drink, and were drunk in the 30 days preceding the survey, by age

	Women					Men				
Age	Smokes	Drinks	Smokes and drinks	Drunk in past 30 days	Number of women	Smokes	Drinks	Smokes and drinks	Drunk in past 30 days	Number of men
15-19	0.7	12.8	0.2	2.5	1,615	3.0	17.1	1.4	6.4	441
20-24	2.1	20.0	0.7	3.9	1,504	15.0	39.7	6.3	12.0	321
25-39	3.8	28.9	1.7	7.3	3,134	33.4	54.5	23.7	28.6	832
40-49	7.5	32.5	4.2	10.4	993	42.9	61.9	32.0	41.8	285
50-54	na	na	na	na	0	39.4	59.0	33.5	32.9	83
Total	3.3	24.0	1.5	6.0	7,246	25.2	45.0	17.5	23.0	1,962

na = Not applicable

The data show that younger people are less likely than older people to smoke and drink. Whereas less than 1 percent of women 15-19 smoke, the corresponding percentage for women 40-49 is 8 percent. Although 13 percent of women 15-19 had drunk alcohol in the 30 days preceding the survey, the corresponding percentage for women 40-49 is 33 percent. For men, the percentages for drinking are 17 percent and 62 percent, respectively.

Younger women and men are also less likely to get drunk than older people. For example, whereas only 6 percent of men 15-19 reported being drunk in the past 30 days, not less than four in ten men 40-49 were drunk in the same period.

Figures 10.1 and 10.2 show the degree of smoking, drinking, and drunkenness among young adults. The figures underscore the differences in smoking, drinking, and becoming drunk between women and men and between those 15-19 compared with those in the 20-24 age group.

Figure 10.1 Percentage of women age 15-19 and 20-24 who smoke, who drink, and who were drunk in the 30 days preceding the survey

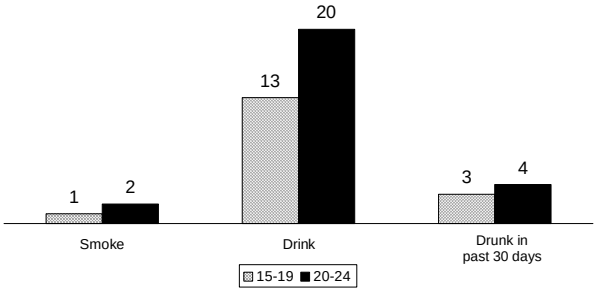
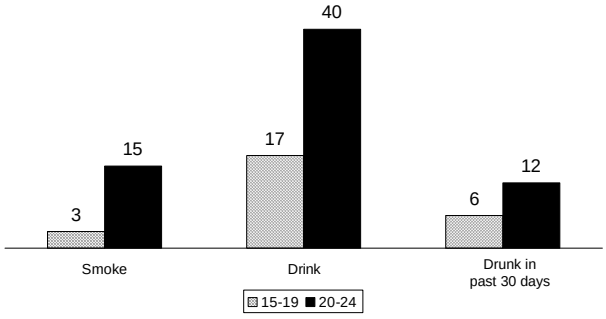


Figure 10.2 Percentage of men age 15-19 and 20-24 who smoke, who drink, and who were drunk in the 30 days preceding the survey



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