

## Age at sexual debut

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### *HIV & AIDS and STI National Strategic Plan 2007-2011*

*“Young people represent the main focus for altering the course of this epidemic. UNAIDS data on the experience of several countries including South Africa, confirm that positive behaviour change is more likely in this group than in older ages [p34]. Earlier sexual debut is significantly associated with increased risk of HIV infection. Risks of earlier sexual debut also include higher likelihood of having multiple partners, lower likelihood of condom use at first sex and higher overall number of sexual partners, not to mention high biological susceptibility to infection of adolescent and young girls. Shifts towards later sexual debut have been correlated with prevalence declines in a number of African countries [p37].”*

#### Indicator

Age at sexual debut.

#### Definition

The percentage of teenagers and youth (15 – 24 years) who had their first sexual intercourse by the age of 15 years.

Percentage of youth (15-24 years) who had first sex by age 15.

| Province            | Female    | Male       |
|---------------------|-----------|------------|
| Eastern Cape        | 11%       | 21%        |
| Free State          | 6%        | 15%        |
| Gauteng             | 6%        | 13%        |
| KwaZulu-Natal       | 2%        | 6%         |
| Limpopo             | 9%        | 14%        |
| Mpumalanga          | 9%        | 10%        |
| North West          | 6%        | 12%        |
| Northern Cape       | 6%        | 9%         |
| Western Cape        | 5%        | 12%        |
| <b>South Africa</b> | <b>6%</b> | <b>12%</b> |

Source: Department of Health, Medical Research Council & OrcMacro (2007) *South Africa Demographic and Health Survey 2003*. Pretoria: Department of Health.

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### Commentary

Heterosexual sex is the most common means of HIV transmission in South Africa.<sup>1</sup> Early sexual debut increases young people's vulnerability to HIV infection. Females, in particular, are a high-risk group.<sup>2</sup> The age of sexual debut is therefore an important indicator of risky sexual behaviour, having implications for HIV prevention and intervention.

The HIV & AIDS and STI Strategic Plan for South Africa (NSP 2007 – 2011) identifies youth as a specific target group for HIV interventions, particularly those aimed at the prevention of infection. A key target of the NSP is to reduce the rate of new HIV infections by 50% by the year 2011. The NSP identifies the strengthening of behaviour change programmes to prevent sexual transmission of HIV, and the implementation of interventions targeted at reducing HIV infection in young people, as two key objectives. The plan also identifies young women as a key target group for interventions aimed at reducing HIV infection. This would include strengthening and evaluating life skills and HIV prevention programmes in schools, and ensuring the quality delivery of these programmes. In addition to targeting educational institutions, NSP interventions include implementing parenting programmes that promote positive communication with children on sexuality and HIV, and increasing access to youth friendly public health services. The NSP promotes abstinence, especially delaying first sex, as part of its HIV prevention and intervention package.<sup>3</sup>

Although the South African Demographic and Health Survey (SADHS) 2003 pre-dates the implementation of the NSP, it provides an indication of sexual onset amongst youth.

Six percent of young women (15 – 24 years) reported having had sex by the age of 15, compared with 12 percent of young men. This suggests that boys become sexually active earlier than girls. By the end of their childhood (18 years), 42% of women and 63% of men had become sexually active. .

Some provincial variation is evident, with comparatively high rates of early sexual activity reported in the Eastern Cape (11% of girls and 21% of boys had first sex by age 15). Early sexual onset amongst girls was lowest in the Western Cape (5%) and KwaZulu-Natal (2%). Comparison of the SADHS 1998 and 2003 suggests that there may be an increase in women delaying age of first intercourse.<sup>4</sup> Comparisons are not possible for men because they were not asked this question in the 1998 survey.

### Strengths and limitations of the data

Two nationally representative South African Demographic and Health Surveys (SADHS) have been conducted to date. These cover the population living in private households. The first was conducted in 1998, and the second in 2003. The main survey targets women aged 15 and 49 years.

Both the 1998 and 2003 surveys use two-stage nationally representative probability samples, drawn from Census enumeration areas. The sample is first stratified by the country's nine

provinces, and then by urban and non-urban areas. The final sample yielded approximately 12,000 households for the 1998 survey and 10,000 households for 2003.

There was a marked decline in the response rate to the survey. The overall response rate for the women's questionnaire was 75% in 2003, far lower than the 92% in 1998. Western Cape had the highest number of women who refused to be interviewed. The response rate for the adult survey (which includes men) was 71% in 2003, again lower than the 90% response rate in 1998.

The SADHS 2003 report suggests an over-representation of urban areas and of the African population group, and an under-representation of Whites and Indian females. It also highlights problems with age misreporting.

Key demographic and adult health indicators from the SADHS 2003 have data quality problems, which may be the result of poor fieldwork. These include child mortality, fertility and hypertension prevalence estimates. These indicators are either inconsistent with other data sources or difficult to interpret. Findings that are not sufficiently robust for decision-making are indicated in the report.

September 2009

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## References

- <sup>1</sup> Shisana O, Rehle T, Simbayi LC, Zuma K, Jooste S, Pillay-van-Wyk V, Mbelle N, Van Zyl J, Parker W, Zungu NP, Pezi S & the SABSSM III Implementation Team (2009) *South African national HIV prevalence, incidence, behaviour and communication survey 2008: A turning tide among teenagers?* Cape Town: HSRC Press.
- <sup>2</sup> Ibid.
- <sup>3</sup> Department of Health (2007) HIV & AIDS and STI Strategic Plan for South Africa 2007 – 2011. Pretoria: Department of Health.
- <sup>4</sup> Department of Health, Medical Research Council & OrcMacro (2007) *South Africa Demographic and Health Survey 2003*. Pretoria: Department of Health.