ADDIS ABABA UNIVERSITY

SCHOOL OF GRADUATE STUDIES

SEXUAL BELIEFS OF ADOLESCENT BOYS AND GIRLS IN WOLAITA COMMUNITY

A THESIS SUBMITTED TO THE SCHOOL OF GRADUATE STUDIES ADDIS ABABA UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTERS OF ART IN DEVELOPMENTAL PSYCHOLOGY

BY

TEMESGEN LEA

JUNE 2009

ADDIS ABABA UNIVERSITY

ADDIS ABABA UNIVERSITY
SCHOOL OF GRADUATE STUDIES

SEXUAL BELIEFS OF ADOLESCENT BOYS AND GIRLS IN WOLOATIA COMMUNITY

BY

TEMESGEN LEA

APPROVAL OF BOARD OF EXAMINERS

NAME	SIGNATURE

CHAIRPERSON, DEPARTMENT GRADUATE COMMITTEE

ADVISOR

EXAMINER, INTERNAL

Acknowledgment

I would like to express my sincere gratitude and appreciation to my advisor Dr. Belay Tefera for his guidance and constructive comments through out my thesis work.

I am also grateful to the research participants who showed their unreserved cooperation in giving the required information.

I wish to extend my deepest gratitude to Gesuba, Humbo, Areka, Ligaba Beyene, Soddo highschool and Boditi school directors and unit leaders who in one way or another contributed to the data collection process. Finally yet importantly, my mother (W/ro Aselefech Zewuge and Buchu) have strengthened me in the work processes of this study.

Table of contents

Abstract

Literatures indicate that adolescent boys and girls have different beliefs about sex. The major purpose of this study was to investigate the pattern of these differences and the possible gender and age difference.

Data were collected from second cycle and high school students who were randomly selected from five Woredas. A total of 540 students were considered as data sources from grade 7 to 12. Self- constructed questionnaire was used to measure adolescents' sexual belief on pre-erotic, erotic and post-erotic sexual issues and their source of information in forming sexual belief. As regards data analysis, the mean scores of adolescent boys and girls on sexual belief and its source were compared. More specifically, important sexual elements such as love, dating, virginity, sexual intercourse, masturbation, unwanted pregnancy and sexually transmitted disease observed on gender and age trends.

In the study, the extent of conservativeness on sexual issues compared among three age groups and two sexes. Significant differences were observed in their sexual belief especially on dating, virginity, sexual intercourse, masturbation, and unwanted pregnancy. Significant difference also was seen in the three age groups on some sexual issues like sexual intercourse, STDs, virginity. After conclusion important recommendations were made, such as including sex education sufficiently in the curriculum so as to provide sexual information evenly for different age and sex groups.

I. Introduction

1.1. Background

Many literatures indicate that adolescence is a period of transition where the young person is no longer considered as child and not yet an adult. According to Kimmel & Weiner, this period is generally characterized by rapid physical, psychological social and cognitive changes (Kimmel & Weiner, 1995). More importantly, physiological changes leading to reproductive maturity occur. These changes are termed pubertal changes; changes that involve physical and sexual maturity. With regard to this Kimmel & Weiner, by supporting Freud's idea, indicated that adolescence is a genital stage during which sexuality becomes the dominant motive of the adolescent (Kimmel & Weiner, 1995)

Most of us would agree that adolescence is a fundamentally important time for the development of sexuality, because, perhaps, most obvious reason is the link between adolescents' sexuality and puberty. Supporting this idea, Udry said that there is an increase in the sex drive in early adolescence as a result of hormonal changes (Udry, 1987). But, what is frequently observed is the misuse of sexual maturity due to misbelieve and misconceptions of the issue. These situations are changing from time to time. The nature and type of beliefs are varying across time and generation. According to Chilman, adolescents' belief and attitude towards sexual drives in general and premarital sex in particular become more liberal during the late 1960's and 1970's and have become only slightly more conservative since then (Chilman, 1986).

Sexual beliefs of adolescents could be highly influenced by culture, tradition and value of society in which the adolescents grow up. Therefore, sexual socialization is the way in which adolescents are exposed to and educated about sexuality, and the resulting sexual beliefs of adolescents are shaped by the society in which adolescent subscribe.

In this regard, Steinberg (1993) raised important questions to show how much our social environment can influence our sexual beliefs and attitudes: "*when did you first learn about sex? How much were you exposed to (as a child)? Was it something that was treated casually around your house or something that had an air mystery to it?*" (p.354)

What is commonly experienced in many cultures particularly in restrictive societies, according to Stenberg, is that by being so secretive about sex when children are young, these societies are to make worried about it when they are adolescents. In such societies, pressure is exerted on youngster (adolescents) to refrain from sexual activities until they either have undergone a formal rite of passage or have married. In many restrictive societies, adolescents are forced to pursue sex in secrecy (Stenberg, 1993).

As such restrictive societies spend an inordinate amount of energy trying to suppress sexual behavior in that narrow time period between puberty and marriage. After marriage sex is required, but it is defined and controlled by convention and even by law (Haste, 1993).

As far as such restrictive practices are concerned, in fact, there are distinct gender differences in sexual socialization. That is, male and female adolescents are unlikely to be treated equally. Steinberg (1993), stated that the sexual behavior of males and females may be similar but the sexual socialization (by which sexual beliefs are developed) of males and females is quite different. According to him the variation of beliefs among boys and girls, in terms of sexual socialization, is greater in restrictive societies than permissive and semi permissive societies. That may cause differences in boys' and girls' belief and attitude in sexual matters.

In the light of the above points, it appears interesting to examine the sexual belief of male and female adolescents in Wolaita community. This community is one of the different nations and nationalities in SNNPR and is equipped with multi cultural settings. Among these cultural events the community is known by its sexy dance and ritual ceremony of *'Gaziya'* playing of adolescents during 'Mesqel' holiday by which they start dating and love. However, the community socializes the adolescents by restraining sexual intercourse. With this regards, Wanna said that adolescents have a feeling of abstaining them from sexual intercourse until they either have undergone a formal rite of passage or have married. This is because to confirm the culture that completely prohibits premarital sex. Thus, premarital sex is a hidden agenda to adolescents in the community (Wanna Wagesho, 1998)

1.2. Statement of the Problem

Many findings indicated that adolescents are highly predisposed to sexual drives due to rapid biological maturation. With this regard, one study indicates that this stage is generally characterized by intensive sexual outlooks and expressions than any other stages (Kimmel & Weiner, 1995). Like wise, numerous researches signified the pervasive nature of adolescents' sexuality. Although many studies conducted on adolescents' sexuality, mainly they focus on the nature and intensity of their sexuality compared with other periods.

But adolescents' sexual beliefs that guide their sexual life are often less considered due to its subjective nature and its pattern variation across societies (Steinberg, 1993). According to him, sexual belief is a social construct. Thus, sexual beliefs have to be studied intensively in every society as long as it is widely varied across cultures. In other words the nature of society and its sexual socialization have significant role in adolescents' sexual life in general and sexual belief in particular. For

example, males and females treated differently in different societies thereby the two sexes may develop different beliefs on sexuality.

Generally, in multi-cultural Ethiopia, though there are studies on adolescents' sexuality, not sure for the existence of the studies which relates adolescents' sexual belief with some specific society (nation nationality). This gap in knowledge creates the need to investigate the sexual beliefs of adolescents in relation to specific society which is assumed to be restrictive type and found in SNNPR called the Wolaita society.

More specifically, this study attempts to examine sexual beliefs of adolescents in the Wolaita community by raising the following basic questions:

1. What is their sexual belief (about dating, love, masturbation, virginity, sexual intercourse, unwanted pregnancy and STDs)?
2. Do these beliefs differ between:
   - adolescent boys and girls (sex trend)?
   - early, middle, late adolescents (age trend)?
3. What are the sources of these sexual beliefs?
4. Do the sources of sexual beliefs differ for:
   - adolescent boys and girls?
   - early, middle, late adolescents?

1.3. Objectives

The study has the following specific objectives; to:

1. identify sexual beliefs of adolescents
2. assess the impact of culture on sexual beliefs.
3. identify sexual belief differences on age and gender trends
4. examine risky sexual beliefs and miss concepts.
5. identify areas of intervention.

1.4. Operational definition of terms

1. **Adolescents**- are second cycle and high school students between the ages of 12 to 20 years (as the age range stated by Lefrancois, 1993).
2. **Early adolescence**- according to Lefrancois, 1993, it is the time of age between 12-14 years and beginning of adolescence stage (puberty).
3. **Middle adolescence**- according to Lefrancois, 1993, it is the time of age between 15-17 years.
4. **Late adolescence**- according to Lefrancois, 1993, it is the time of age between 18-20 years.
5. **Sexual belief**- refers in this study, the way of adolescents' thinking or the way of taking as appropriate or inappropriate concerning their sexual activity. In other word, what is (morally) right and wrong on sexual behavior.
6. **Dating**- is an act of an individual towards opposite sex to meet, to play, to talk, to dance, to have a dinner or launch together.
7. **Love** – when one adolescent likes very much the other opposite sex. In other words, it is romantic and emotional relationship between two different adolescent sexes.
8. **Masturbation**- it refers when adolescents try to make themselves feel sexually *exited* by touching or rubbing the sex organ.
9. **Sexual intercourse**- refers the act between two different sexes in such a way that penetrating of male's genital into females' genital.
10. **Virginity**- when adolescents are not involved in any sexual intercourse or it is simply never has had sexual intercourse.

1.5. Significance

Considering the psychological well being and reproductive health of adolescents, examining the different beliefs of adolescents and some related factors of their sexual belief development is necessary. With this regards this study tries to investigate the nature and development of sexual beliefs. The study also helps adolescents by providing information beliefs and misconceptions. Another important thing is investigating the differences among boys and girls in their sexual belief are very crucial for uniform treatment, counseling services intervention and prevention of sexual related health problems. This is how the study can help in filling the gap of human understanding on adolescents' sexuality and their difference in respect of their age and sex trends.

In addition, the study provides information on what extent adolescent boys and girls are different in their sexual belief particularly in different societies. Moreover, it can aid in the design and implementation of effective prevention program on adolescent-sexual related problems.

1.6. Delimitation

The study is delimited only to Wolaita Community, which is found in SNNPR. Based on personal experiences this community is assumed to be restrictive type of society. Moreover, though there are societies which are more restrictive, Wolaita community selected only on the bases of feasibility and the familiarity to the researcher.

II. Review of Related Literature

This section attempts to review some previous findings by different scholars in different times in reference to adolescents' sexuality in general and their sexual beliefs in particular. Conceptual framework of adolescents' development, their sexual beliefs, sources of information and factors affecting sexual belief are included in this review.

2.1. Conceptual issues of Adolescence

The word adolescence is Latin in origin, derived from the word '*adolescere*' which means "*to grow into adulthood*" (Steinberg, 1999) or "*to grow into maturity*" (Gross, 2001). In line with this, frequently used definition as stated by Steinberg (1993) describes adolescence as a time of growing up and moving from immaturity into maturity in all societies. In other words, it is a transitional period from childhood to adulthood involving a dramatic cognitive, social, ad emotional change, ranging in age from 12 to 20 (Lefton, 2000; Gross, 2000).

According to Gross, generally, this developmental transition involves significant changes in biological, cognitive and psychosocial aspects and that changes can provide challenges and new opportunities for the adolescents. In other way round, it involves in *normative maturational shift* (such as spurt growth, first menstruation, changed romantic relationship, gender-role identity, autonomy and responsibility) and *normative society dependent shifts* (such as school transition, leaving school, being employed, right to vote etc) (Gross, 2000).

Among the many developmental events that characterize puberty and the onset of adolescence, none is more dramatic than the physical and psychological changes associated with sexual maturation (Conger, 1991). The bodily proportions of boys and girls become increasingly

differentiated: as Conger stated, boys develop broader shoulders and show a greater overall gain in muscle development, while girls undergo breast development and develop more rounded hips. Girls experience their first menstruation and boys their first ejaculation. All of these physical changes require adjustments of the young person and lead to a changing self image (Conger, 1991).

2.2. Sexual beliefs of adolescents

Today's adolescents are characterized by somewhat greater openness about sexual issues than their counterparts of earlier generations. According to Conger (1991), they also increasingly tend to base decision about sexual behavior more on personal beliefs, values and judgment. This change has manifested itself in a variety of ways. The reason for Conger (1991) ranges from greater freedom in sexual relations to a desire for more and better sex education, including access to information about reproductive issues (Conger, 1991).

2.2.1. General sexual belief differences of Adolescents

Regarding differences in sexual belief among boys and girls while they are trying to make sexual relationship, they do have different feelings and beliefs on opposite sex at different age. A study on adolescents in New Zealand about their beliefs at different age presented by Droger shows that boys and girls shows different belief at different age. For example, early adolescent girls say *"boys are a sort of disease"* where as the boys say *"girls are a pin prick in the side"*. According to him, this age and sex difference on their beliefs still continuous across adolescence stage. At middle adolescence the boys have such belief of *"girls are the main objective"* where as the girls belief in such a way that *"boys are strange -they hate you if you are ugly and brainy but love you if you are pretty but dumb "* (Droger, as cited in Berger, 1994).

2.2.2. Specific differences of adolescent males and females in sexual belief

During the growth spurt is taking place, another set of changes occurs that transforms boys and girls into young men and women. Before puberty, the physical differences between boys and girls are relatively small. At puberty, however, sexual maturation results in many significant body differences. These include changes in both the primary and secondary sex characteristics (Berger, 1994).

According to Stenberg (1993), despite the convergence of males' and females' rates of sexual activity, the early sexual experiences of adolescent boys and girls are usually very different in nature and, as a consequence, are imbued with different meanings among the two sexes. In other words, the sexual behavior of males and females may be similar but the sexual attitude, belief and perception of males and females is different. In many findings their belief is different in love, dating, virginity, sexual intercourse, masturbation, and STDs. Let us see them in detail:

Virginity

Virginity is important issue among adolescents and the society in which they are living. Attitude and belief of adolescents on virginity may not be the same on both sexes. With regard to this, Stenberg stated that the typical male reports more love for a woman who lost her virginity with him than for a woman who lost her virginity with a previous partner. His own loss of virginity, however, has no impact on his feelings of affection in relationship (Hill, Pepalu, & Rubin, 1977).

Concerning girls belief on virginity, as stated by Sallen & Stephenson (1989) at the time of first intercourse, the adolescent girl's first sexual partner is likely to be a person she describes as some one she was

"planning to marry" or was *"in love with"* at the time. There is a social meaning to losing one's virginity that is still today very different for young women and men, and women typically report feeling more love for a man if he was their first sexual partner by whom she lost virginity (Hill, Peplau & Rubin,1977).

After having intercourse for the first time, the typical adolescent girls is more likely to encounter disapproval or mixed feelings on the part of others in whom she confides (tell to others) such as peers than is the boys (Campbell, 1968). And he added that she is more likely to report feeling afraid, guilty, worried and embarrassed. Supporting this idea, Stenberg, stated that although young women are more likely today than they were fifteen years ago to admit to their friends that they have lost their virginity soon after the event has occurred boys still are more likely than women to tell their friends soon after having intercourse for the first time because it is easier to do so when the act has not been accompanied by emotional involvement (Stenberg, 1993).

Love

We commonly hear that when people say there is a difference between males' and females' pattern of love that may be the result of difference in their beliefs. With this regard, Stone and Church said that for boys' belief, sexual passion is initially quite separate from notions of love. According to Katchadourian (1990), although a boy would prefer a female sexual partner, he may not be too discriminating and may be willing to settle for release through masturbation or homosexual activity. When, however, a girl does invite a boy's favors, even though she yields herself only within sharply defined limits, he finds it very easy to fall in love with her. But, according Stone and Church, this love is quite different from the one he feels in later years as a husband and father (Stone and Church, 1957).

For girls, love takes priorit over sexuality. Stone and Church stated that young girls strive mightily fall in love, partly because it is the thing to do and partly because it eems the answer to some inner need. But the adolescent girl's visions of romance are as diffuse as her sexual stirrings. From our general experience, girls in many cultures are thought or easily assume an attitude of passive acceptance. According to Stone and Church, this passivity makes for greater insecurity as an individual. That is, girls more than boys, may tend to form an unstable identity that can not stand on its own and must be nourished on a stronger ideality-usually that of the male with whom a girls falls in love (Stone and Church, 1957).

This type of belief among the girls was also observed in the study of Katchadourian (1990). According to him, male is expected to be the dominant figure in romantic relationship. In the adolescent girl; Love is often expressed in a desire to surrender to some one stronger. Stone and Church said that it may be a need to merge her identify with stronger one. According to them, perhaps this one of the reason why so many young girls attracted to physically powerful males (Stone and Church, 1957).

For the adolescent girls, relations with opposite sex seem to be directed quite consciously toward finding love, specifically marital love (Stone and Church, 1957). Confirming this idea Furstenberg et al. (1987) stated that although boys are not always aware of it, she is usually finding a husband or practicing finding one. Going out with boys, of course, may also have a meaning in the competition with other females, as a kind of evidence of desirability. The boy, on the other hand, is concerned first with sexual stimulation and gratification, second with companionship, third with love, and only remotely, some time in the dim future, with marriage (Stone and Church, 1957).

Masturbation

Masturbation is process of giving oneself sexual pleasure by stimulating the sexual organs, especially by the hands. The most common form of a sexual outlet for adolescents is masturbation. According to some reports, 49 percent of all adolescents ages 13-19 have masturbated at least once (Lefrancois, 1993). Concerning the gender difference, males masturbate more frequently than females, reaching their peak sexual activity (peak is defined as frequency of orgasm), between ages 16 and 17 (Lefrancois, 1993). According to some early writers such as Stanley Hall, masturbation is abnormal, debilitating, and sinful. Hall provided parents with a number of suggestions for its avoidance, or cure (Hall, as cited in Lefrancois, 1993).

For adolescent males, masturbation is usually the first sign of pubescence. But unlike the girls' menarche, it is usually a secretive affair (Gross, 2001). Although current attitudes towards masturbation are that it is normal, pleasurable, and harmless, some adolescents continue to feel guilty and ashamed about masturbating. This is the case more among younger adolescents and female adolescents than among older adolescents and male adolescents (Hass, as cited in Lefrancois, 1993).

Sexual intercourse

Sexual practices and experiences, particularly sexual intercourse, that come with adolescence age is not the same for boys and girls (Stone and Church, 1957). In boys, sexual desire is highly specific and is clearly centered in the genitals. Supporting this idea Alexander et al.(1989) stated that it can be easily aroused by a variety of externals stimuli such as words, pictures, etc or by random thoughts or deliberate thoughts (Alexander et al., 1989). Stone and Church also asserted that sexual

desire in boys is urgent and aims toward rapid discharge of tension in orgasm (Stone and Church, 1957).

Some findings about girls' sexual intercourse indicated that there are wide normal individual differences. Some girls experience desire in much the way that boys do. Others may not experience direct sexual urges until later life (Billy et al., 1988). According to Stone and Church, many girls find, in fact, that sexual arousal comes about only when they are experiencing a generalized heightening of tension or excitement. Usually, in girls, specifically sexual arousal must be brought about by direct stimulation of the body, particularly of the erogenous zones (Stone and Church, 1957). They also added that although most teenage girls believe that sex equals love, other teens - especially boys - believe that sex is not the ultimate expression of the ultimate commitment, but a casual activity and minimize risks or serious consequences.

For lower intensity and specificity of sexual feelings in girls that in boys may be related to several factors. Stone and Church tried to list some of possible factors:

- Consistent repressive attitudes toward female sexuality in our society.
- Girl's genitals are les visible to her than are the boy's to him may reduce the clarity of genital sensations.

Early sexual experiences

Sexual activity begins during adolescence stage for the majority of young people in the world. As stated by Solomon (1990), different studies have shown that adolescents are sexually active with figures ranging from 17.3% to 83% and this trend is increasing. According to a report by Save the Children Fund (2000), a survey conducted among 4216 unmarried youth selected from different parts of Ethiopia for example showed that 47.4% of males and 57.2% females experienced sexual intercourse before marriage.

Adolescents' sexual activity differs between males and females in their early experiences. According to the study by Meckers & Calues as cited in Feben, 2005, P.13, in Cameroon, males become sexually active at an earlier age than females. Moreover, Adu Mireku's (2003) study among Ghanian School going adolescents showed that boys were more likely than girls to have ever had sexual intercourse. Unlike this findings, in Sub-Sahlan Africa, the study by Bankole as cited in Feben 2005, P.13, has reveled that large proportion of young women are sexually active in the region as compared to men who had sex.

Different findings, however, were shown by different researchers in Ethiopia that boys are considerably more sexually active than girls (Fisseha & et al, as cited in Feben 2005, P.12,). When giving explanation for the gender differences in sexual activity, they indicated that this may be because of the practices for cultural and social reasons. In Ethiopian culture girls are not encouraged to be involved in sexual activity, while it is acceptable for adolescent boys.

Sexually Transmitted Diseases (STDS)

The possible problem of sexuality that adolescents are likely to face is sexually transmitted diseases (STDs). Indeed, the highest rates of all the most prevalent STDs-gonorrhea, herpes, syphilis, and Chlamydia-occur in sexually active people between the age of 10 and 19 (Steinberg, 1993, Berger, 1994). According to DiClemente (1990), most cases of STDs are not serious, except AIDS, if promptly treated, but adolescents are less likely to obtain prompt medical care. Untreated, STDs are likely to cause sterility, and some, like gonorrhea and syphilis, can eventually result in life threatening complications (Berger, 1994).

Unpromisingly, the high rate of sexual disease among adolescents suggests that many teenagers are engaging in unprotected sex putting them at risk of exposure to another, always fetal disease, AIDS(Berger, 1994). Although the human immunodeficiency virus, or HIV, that causes AIDS can be spread through direct blood contact, the most common transmission is through sexual contact (Berger, 1994). Once a person contracts the virus, AIDS will eventually develop.

According to Berger, AIDS and HIV infection are now rising fastest among high school and college age boys and girls. As Berger's reason, unsafe practices, having several sexual partners and falling to use condoms are the main one by which every five teenagers is at high risk for AIDS.

2.3. Sources of sexual belief of adolescents

Young people get information about sexual issues from a wide range of sources including each other, through the media including advertising, television and magazines, as well as leaflets, books and websites (such as www.avert.org) which are intended to be the main sources of information about sex and sexuality. Some of these information are accurate and some may not be. Some of the sources are discussed in brief as follows:

2.3.1. Media

In the survey conducted by Kaiser Family Foundation (2004), 65 percent of 15 to 17-year-old youth said they got information about reproductive issue from advertising; 58 percent from television; 58 percent from magazine articles; and 39 percent from the Internet. In this study Teens ages 13 through 15 ranked entertainment media as their top source for information on sexuality and sexual health (Kaiser Family Foundation, 2004).

Among surveyed 15- to 17-year-old youth, 51 percent of females and 33 percent of males looked up online information on a sexual health topic (Kaiser Family Foundation, 2001). Among 15- to 24-year-old youth, 44 percent went online for information about pregnancy, birth control, HIV or sexually transmitted infections (STIs). The primary reason for searching online was confidentiality for 82 percent of young women and 88 percent of young men (Kaiser Family Foundation, 2001).

2.3.2. Parents

On one finding, among parents of children under age 18, 70% said that they had a conversation about sexual issues with their children because of something they saw on a television show. (Kaiser Family Foundation, 2001).

Another study found that 68 percent of parents went online to look up information related to child health or to general health. At follow-up, 66 percent reported using sites specifically recommended in information prescriptions from their pediatrician (D'Alessandro et al., 2004).

In the family mothers play significant role in teaching sexual issues when compared with other members of the family. This situation also differs in the two sexes. Some finding indicated that mothers are still a major sex source for females in America 1974 although less than in 1964 (Dickinson,1978)

2.3.4. School

Adolescents acquire information about sex in different ways such as through participation in anti HIV/AIDS and art club, educating in the class, discussion with classmates and reading different related materials (books, tracts, posters etc).

Educating children or youth is an ongoing process of communication with them. Like preschoolers, primary school-aged children need age-appropriate information about the biological processes of sex and reproduction. However, your conversations need to start broadening their scope to include topics such as puberty, sexual responsibility, feelings and relationships. (Australian Research Centre, 2008).

2.4. Factors affecting sexual belief of adolescents

Adolescents develop their belief through active interaction with the environment. The influenced by different biological and social agents. Among them some are listed below:

2.4.1. Sex

We should understand the sexual belief of adolescents from different perspectives including their biological (hormonal) difference by which the society operates differently on the two sexes. Finding by Smith, Udry and Morris (1985) suggested that a fuller understanding of adolescent sexual behavior comes from looking at biological and social influences in interaction rather than at either set of influences alone. They added, however, the why in which hormones and friends influences sexual behavior at adolescence appears to be different for males at than females (Smith, Udry and Morris (1985).

Because of their biological difference the society treats them differently by assigning different roles. Udry elaborated this idea more by stating

that the society plays significant role in the formation of sexual belief and identity that may varied among the two sexes. The variation resulted from socializing them differently (Udry, 1987).

2.4.2. Age

Adolescence stage is classified in to three age groups (early, middle and late adolescents). These three groups have different type of sexual beliefs due to developmental maturational level. Study by Droger shows that boys and girls shows different belief at different age. For example, early adolescent girls say *"boys are a sort of disease"* where as the boys say *"girls are a pin prick in the side"*. According to him, this age and sex difference on their beliefs still continuous across adolescence stage. At middle adolescence the boys have such belief of *"girls are the main objective"* where as the girls belief in such a way that *"boys are strange - they hate you if you are ugly and brainy but love you if you are pretty but dumb "* (Droger, as cited in Berger, 1994).

2.4.3. Culture

In culture we may find different societies that run cultures in different ways. Particularly in sexual socialization societies may varied according to their culture. Based on their way of sexual socialization different societies with their respective culture listed below:

Restrictive Societies

The sexual belief of adolescents is mainly societal construct from their early life. Adolescents' sexual activity is guided by the social norms, values, and rules. Due to this fact, pressure is exerted on youngsters and adolescents to refrain from sexual activity until they either have undergone a formal rite of passage or have married in restrictive society (Stenberg, 1993). In many such societies, adolescents are force to purse

sex in secrecy. Within the broad category of restrictive societies, of course, there are wide variations in the degree of restrictiveness and in the methods used to discourage sexual activity before marriage.

According to Stenberg, for example, in some societies, such as the Cheynne of Colorado and Montana, the sexual activity of young adolescents is controlled by separating the sexes throughout childhood and adolescence. Boys and girls are not permitted to play together and never associate with each other before marriage in the absence of chaperons. In other societies, such as the Ashanti of the Guinea coast in Africa, Sexual activity before the attainment of adult status in restricted through the physical punishment and public shaming of sexually active youngsters and adolescents (Ford and Beach, 1951). In relation to this adolescents also develop, form such societies, restrictive sexual belief than permissive societies.

Semi-restrictive Societies

According to Ford and Beach 1951, in these societies the adults' attitudes and beliefs towards premarital affaires and adolescent sexual activity are characterized by formal prohibition that are not very serious and in fact are not entered. For example, among the Slorese of Indonesia, Sexual activity among adolescents is formally prohibited; but children playing together often imitate the sexual behavior or their elders, and unless this play is brought explicitly to the attention of adults, little is done about it.

In many semi restrictive societies, it is premarital pregnancy, rather than premarital sex, that is objectionable, and unmarried adolescents whose sexual activity has resulted in pregnancy are often forced to marry.

Permissive Societies

In permissive societies, the transition of young adolescents in to adult sexual activity is highly continuous and usually begins in childhood. In these societies, adolescents have free sex play and also allow them opportunity to observe adult sexual behavior and to participate in discussions of sexual matters (Ford and Beach, 1951). In relation to this, their example is, Ponape children (In Caroline Island) are given careful instruction in sexual intercourse form the 4th or 5th years. Another finding of them is that children of Trobriandrs begin their sexual life at six to eight years for girls, ten to Twelve for boys. Both sexes receive explicit instruction form older companions whom they imitate in sex activities. In permissive societies parents approve any sexual activities of their children and adolescents.

Generally speaking, the sexual socialization of children and adolescents in different societies can be restrictive, semi-restrictive or permissive pattern, depending on the particular historical period and social group.

2.5. Summary and implications

The situation of adolescents' sexual belief requires serious attention as it affects the adolescents' health, social and psychological well being premarital sexual activities such as love, intimacy, sexual intercourse etc of young people are absolute with increasing evidence of reproductive health related problems which mainly relies on what they believe and the attitude they do have.

In different societies adolescent boys and girls have different sexual beliefs due to variation in their sexual socialization among the boys and girls. The variation in sexual beliefs among both sexes may result in inconsistent relationship among opposite sex partners, but the magnitude of variation in their belief matters a lot. According to

Stenberg, the society that adolescents grow up plays significant role in the development of different sexual beliefs.

In multi-cultural Ethiopia, though there are different studies on adolescents' sexuality, there is still a need of study on sexual beliefs of adolescents in relation to social environment (sexual socialization). As long as sexual beliefs are different among adolescents across different culture and tradition, it is important to asses where the difference relies on for further knowledge and for interventions.

III. Methods and Procedures

3.1. Study site

The study was conducted on Wolaita community which is found in SNNPR and located 390 Kilometers SW of Addis Ababa. This Wolaita Zone consists of 12 Woredas and its total population is estimated to be 1.57 million (CSA, 2007). This area is equipped with different and unique cultural activities such as way of dressing, dancing, socialization and celebrating ritual ceremonies. Especially the community known by its sexy dances by which adolescents/youths are astonished and practice in these stage highly. From ritual ceremonies, 'Mesqel' is the most known holiday by which adolescents start dating and love. Thus children or adolescents socialized differently so as to maintain this culture and norms of the community. In this study area, the target population was the adolescents of the community.

3.2. Population and Sampling

The participants of this study are adolescents who are learning in secondary and high school level. The total population of five high schools (in five Woredas) was 13,450 males and 8,871 females, totally 22,321students. From this total population 540 students were randomly selected. The sample size includes 355 students from grade 7th to 10th and 185 students from preparatory (11th and 12th) level. Males are 270 and Females were also 270. This was done deliberately for statistical purpose.

In Wolaita Zone there are 12 Woredas. In each Woreda in average one high school and two secondary cycle schools. From the available 12 Woredas, 5 Woredas were selected randomly, as a cluster. Again from 5 these Woredas one school (from each Woredas) was selected randomly, lastly from each 5 schools in average 71 students were taken from grade

7th to 10th. Thus, the total students from 5 schools (from different five Woredas) were 355 (5x71). Additionally, 185 preparatory students from 5 high schools those are found in the five Woredas.

Table 1: Number of participants taken from each school

Name of Woreda	Town	Total population			Number of selected students			Total
		Male	Female	Total	7th &8th	9th &10th	11th&12th	
Soddo Zuria	Soddo	3105	1873	4978	35	39	37	**111**
Offa	Gesuba	2180	1392	3572	34	36	35	**105**
Damot Gale	Boditi	3092	2248	5340	32	37	35	**104**
Boloso	Areka	3150	2031	5181	33	38	38	**109**
Humbo Tabla	Humbo	1923	1327	3250	33	39	39	**111**
Total		**13450**	**8871**	**22321**	**166**	**189**	**185**	***540***

3.3. Instruments

Questionnaire was prepared by the researcher and used for data collection. The *first part* of the questionnaire assesses the background information of the subjects, and it has 5 items. The *second part* consists of 6 items that examine the sexual experiences of adolescents. The items present multiple choice options from which respondents select one (may be more for some items) to indicate their opinion. The *third part* of the questionnaire involves 16 scale items and 2 supplementary open ended questions that measure adolescents' beliefs on dating, virginity and love (pre-erotic sexual activities). The scale presented in Likert scale form (from Strongly Agree to Disagree).

The *forth part* consists of items that ask about beliefs on sexual intercourse and masturbation (erotic sexual activities) and it includes 11 scale items and 2 supplementary open ended questions. The *fifth part* of the questionnaire measures adolescents' belief on unwanted pregnancy and STDs. It was also presented in the form of Likert scale (10 items). The last and *six part* assesses the sources of sexual information in forming beliefs. This part totally includes 18 scale items and 3 supplementary open ended questions.

The total number of the questionnaire is 66 (53 scale type, 6 choices and 7 items are open ended questions).

Some of the items are adopted from R. Lefrancois, (1993, P. 426) and the others (most of) are developed by the researcher based on the literatures. Lefrancois's items mainly focus on sexual intercourse and romantic relationships. The available only 8 items of him are included in the questionnaire. The reliability of his instrument was not indicated. But in this study it was subjected to test. Relating to this, validity and reliability of the instruments were checked through pilot study. Detail information about the instrument is presented in detail in the pilot study.

3.4. Procedure

3.4.1. Construction

Most of the items are developed based on previous findings (literatures). It is prepared in Amharic language by which adolescents effectively communicate next to native (Wolaitigna) language. The questionnaire consists of multiple choices, ratings and open ended items. Some of the items (8) in rating part adapted from Lefrancois (1993, P. 426) that measure belief of only sexual intercourse and romantic relationships and presented in Likert scale form (from Strongly Agree to Strongly Disagree). All the 8 items of him were included in the questionnaire with minor

modification. The other items were developed by the researcher based on literatures.

Multiple choice options are used to identify how many respondents had sexual intercourse, with whom (*sexual experience*), why they did it (*their reasons*) etc are described in terms of percentage. Open ended items are included so as to supplement the other information (data) in such a way that providing subjective opinions and reasons of the respondents.

At the last, it is important to check whether the instrument exactly measures or not what supposed to measure and at the same time its consistence across time and situation. To confirm this idea pilot study was conducted.

3.4.2. Validation (Pilot Study)

The main purpose of this pilot study in the study area was 1) to test and get the instrument that enable to collect reasonably valid and reliable information, 2) it was also important to observe critically the situations especially the willingness of students to respond about sexual issues freely and openly 3) and lastly to identify some possible challenges and problems. This is because, most of the time, what we frequently observe among adolescent is that they may not be transparent and free to talk about sexual issues with unfamiliar individuals and situation.

It is true that the instrument (questionnaire) should be subject to pilot testing before it is used for data collection. So, the questionnaire was pre tested by using test-retest reliability method on some selected 30 students from Ligaba Beyene primary & secondary school and High school in Wolatita Soddo.

Thus, according to the observation during the pilot study, it is important to make little adjustment on the questionnaire and the instruction giving process before their response. Instruction process, including the way of subjects' response and the purpose of the study should be clear to the extent that makes them free and honest.

Table 2: Background Characteristics of participants involved in pilot study

Grade level	Number of Students			Drop case	Remark
	Males	Females	Total		
Grade 7th	3	4	7	1 (F)*	Half response
Grade 8th	4	4	8	-	
Grade 9th	4	4	8	1 (M)*	Missing many items
Grade 10th	4	3	7	_	
Total	**15**	**15**	**30**	**2**	

*(F) and (M) for Female and Male respectively

Thus, from total 30 students 28 were taken to check the reliability. Totally, the reliability testing process consists of 14 females and 14 males.

Concerning the reliability index of the instrument, the scale and its sub part computed and presented in the table as follows:

Table 3: Reliability coefficient of the instrument (questionnaire)

No	Major Scales	Sub scales	Number of items	Reliability index	Total Reliability index	Remark
1	***Sexual belief***	Dating	4	.78	**.79**	- 2 items on sexual intercourse were improved so as to avoid ambiguity - 1 item was discarded because not necessary - 1 item also discarded because of redundancy
		Love	6	.83		
		Virginity	5	.81		
		Masturbation	5	.79		
		Sexual intercourse	5	.69		
		Unwanted pregnancy	5	.79		
		STDs	5	.85		
2	***Source of information in forming sexual belief***	Family	5	.78	**.84**	- To avoid confusion 1 item was changed (improved) - 2 items discarded because of redundancy and similarity
		Medias	5	.83		
		Peers	4	.87		
		School	4	.89		

As indicated in the Table 3, the total number of items of the scale part was 53. Among these items, 3 items were improved through the feedback of the respondents during the pilot study. The respondents were well informed to indicate confusing or not clear items. In such a way some items were observed and subjected to change and some of them were discard. These items might influence the reliability of the instrument adversely during test-retest process. Test-retest method was used to

check the reliability in such a way that by administering the questionnaire in one day and redistributing the same questionnaire on the next day for same students. As indicated in the table the coefficient correlation shows that items that measure sexual belief of dating, love, virginity, masturbation, sexual intercourse and STDs were 0.79. The remaining part of the scale that tries to assess the source of information indicated 0.88.

3.5.2. Administration

The questionnaire was administered while the students attending their regular class. With the cooperation of unit leaders of the schools, students were selected from each class and collected in one free class. On the average 18 students from each grade level (7^{th}, 8^{th}, 9^{th} and 10^{th}) were randomly selected. These selected students were given the questionnaire to fill, after informing and instructing clearly about the purpose of study and the way of giving response.

3.5.3. Analysis

The main purpose of this study was to examine gender and age based difference and similarities among adolescents' sexual beliefs. To do this, different statistical techniques was used. First, the obtained information (responses) was systematically coded (number assigned). Secondly, obtained scores were employed to different appropriate statistical techniques. For instance, sexual belief difference of adolescent boys and girls was observed by computing independent sample t-test. One-way ANOVA was also used to analyze different variables such as love, virginity, sexual intercourse, dating and STDs against another variables of early, middle and late adolescents. Alpha value of 0.05 was used for all significance tests carried out in the study. All statistical computations were done by using Statistical Package for Social Science (SPSS - Version 15).

The appropriateness of each statistical technique explained as follows:

1. Percentage is used for items presented in multiple choices that assess the sexual experience of adolescents. More specifically, it is used to identify how many respondents had sexual intercourse, with whom, why they did etc are described in terms of percentage.
2. t-test was employed to examine the statistical difference between two variables particularly between two sexes. In this study, significant difference is observed between the two mean scores of sexual belief, and difference on source of information.
3. One way ANOVA is also used to examine the statistical difference between more than two variables. In this study, it is used to investigate the significant difference between the three age groups (early, middle and late adolescents).
4. Statistical Package for Social Science (SPSS - Version 15) used for the accuracy and for speed.

IV. Analysis and Interpretation

In this section, data that were collected through questionnaire are analyzed and interpreted by using different descriptive and inferential statistics techniques. To answer the basic research questions raised in this study, first, descriptive statistics is presented. This is followed by the gender difference analysis in the variables by computing t-test and then, finally, used analysis of variance (one-way of analysis) to observe differences among the three age groups of early, middle and late adolescents.

4.1. Demographic characteristics respondents

Table 4: Background Characteristics of the respondents

Variables and groups		Responses	
		Frequency	**%**
Sex:	A) Male	270	50%
	B) Female	270	50%
	Total	**540**	**100%**
Age	A) 12-14 years	137	25.4%
	B) 15-17 years	192	35.5%
	C) 18-24 years	211	39.1%
	Total	**540**	**100%**
Grade:	A) 7th	82	15%
	B) 8th	84	15.6%
	C) 9th	93	17%
	D)10th	96	17.8%
	E)11th	94	17.4%
	F) 12th	91	16.9%
	Total	**540**	**100%**
Marital Status:	A) Married	62	11.5%
	B) Unmarried	477	88.4%
	C) Divorced	1	0.01%
	Total	**540**	**100%**
Nation Nationality:	A) Wolaita	378	70%
	B) Gamo	51	9.4%
	C) Oromo	27	5%
	D) Amahara	41	7.6%
	E) Tigre	9	1.7%
	F) Others	34	6.3%
	Total	**540**	**100%**

As show in the Table 4, among total 540 adolescent students, 270 were males and 270 were females. This was done deliberately to statistical purpose. Concerning their age, about 137 (25.4%) were between age 12 to 14 years, about 192 (35.5 %) lies between the age 15-17 years and the reaming that is the majority 211 (39.1%) were between the age 18 to 24 years. This shows that largest proportion of the respondents was found in late adolescent stage. Students at early adolescent stages were relatively small in number. They were among those selected from grade 7th and 8th. These grades were included so as to incorporate early adolescents in the study despite their limited number.

Concerning their grade level, relatively equal proportion of respondents was taken from each grade level in order to include equally the three age group of adolescent stage i.e. early, middle, and late adolescents. As shown in the table, 7th grade 81(15%), 8th grade 84(15.6%), 9th grade 92(17%), 10th grade 96(17.8%), 11th grade 94(17.4%) and 12th grade 91(16.9%).

Regarding the ethnicity, most of the respondents about 378 (70%) were from Wolaita community. This group shares largest pr of the proportion from the total respondents. It is followed by more related community with Wolaita in terms of boundary and sharing some cultures is that Gamo community, which accounts 9.4% (51) of the respondents. The remaining groups such as Oromo, Amhara, and Tigre account about 5%, 7.6%, 1.7% respectively. Respondents from different ethnic groups all together consist 6.3% (34).

4.2. Sexual experience and practice of the adolescents

Adolescents' previous exposure is important to be seen, because it influences somehow their current belief. Most of the time belief formed through learning and practicing. In this part their sexual experience and practices analyzed in terms of percentage. First the obtained data

presented in table form in terms of percentage and then followed by interpretation and analysis on each items.

Table 5: Sexual experience of adolescent boys and girls

Items	Options	Responses					
		Males		Females		Total	
		Freq	%	Freq.	%	Freq	%
Have you ever had sexual intercourse?	A. Yes	122	45.2	89	33	211	39.1
	B. No	148	54.8	181	67	329	60.9
	Total	**270**	**100%**	**270**	**100%**	**540**	**100%**
If *'yes'*, how old were you when you had sexual intercourse for the first time?	A. Before age 15	-	-	1	1.1	1	0.55
	B. 15-17	57	46.7	36	40.5	93	43.6
	C. 18-20	63	51.6	51	57.3	114	54.5
	D. After age 20	2	1.7	1	1.1	3	1.4
	Total	**122**	**100%**	**89**	**100%**	**211**	**100%**
Who was your first sexual partner?	A. Whom they call boy/girl friend	86	70.5	53	59.6	139	65.8
	B. Commercial sex worker	7	5.7	1	1.1	8	3.8
	C. Housemaid	3	2.5	-	-	3	1.4
	D. Husband/wife	26	21.3	35	39.3	61	28.9
	Total	**122**	**100%**	**89**	**100%**	**211**	**100%**
What was your reason for sexual intercourse for the first time you has sex?	A. Physical Pleasure	6	4.9	2	2.2	8	3.8
	B. Love affair	102	83.6	79	88.8	181	85.7
	C. I was forced	-	-	3	3.3	3	1.4
	D. To get money	-	-	-	-	-	-
	E. B/c all my friends were doing it	2	1.6	-	-	2	0.9
	F. B/c intoxication with alcohol	3	2.5	-	-	3	1.4
	G. Pleasure and love	7	5.7	5	5.7	12	5.7
	H. Pleasure and intoxication	2	1.6	-	-	2	0.9
	Total	**122**	**100%**	**89**	**100%**	**211**	**100%**
Since your first sexual experience, how many sexual partners have you had so far?	A. only one	102	83.6	82	92.1	184	87.2
	B. Two	18	14.8	7	7.9	25	11.9
	C. Three to Five	2	1.6	-	-	2	0.9
	Total	**122**	**100%**	**89**	**100%**	**211**	**100%**

As indicated in Table 5, large number of respondents, about 60.9% (54.8% males and 67% females) was not involved in sexual intercourse where as the remaining 39.1% (45.2% males and 33 females) have had sexual intercourse with other sexes. Most of these adolescents who did sexual intercourse found in the age range of 18-24 when they involve in the first intercourse. They account 54.5% (114) from the total respondents who had the intercourse. In this age range, females (57.3%) are more involved than males (51.6%). But males (46.7%) are actively involved in the age range between 15 and 17 than females (40.5). In average about 43.6% (93) of both sexes were in the age range Of 15-17 when they had their first sexual intercourse. This is still less compared with the figure (54.5%) that they did in the age range between 18 and 20 years. The remaining 1.5% and 0.5% account for after age 20 and before age 12 respectively.

Most of the respondents about 65.8% (139) reported that they did the first sexual intercourse with their boy fiend/girl friend. About 28.9% (61) said that they did with their husband or wife. There were some respondents who did their first intercourse with commercial sex workers and housemaid these group accounts 3.8% (8) and 1.4 (3) from the total respondents who involved sexual intercourse respectively.

The respondents reasoned out why they did sexual intercourse at first time. Most of them (about 85.7%) agree with that of due to love affairs. Pleasure and love together account 5.7% (12) but only physical pleasure accounts 3.8%. Very few respondents did their first sexual intercourse due to alcohol intoxication (1.4%), forced (1.4%), and peer conformity (1%). Another related issue is that the number of partners with whom they did sexual intercourse. Most of the respondents about 87.2% (184) had sex with only one partner. 11.9% of the respondents (who did sexual

intercourse) indicated that they had two sexual partners. The remaining 1% (2) did sexual intercourse with more than 3 partners.

Table 6: Reason of participants for not involving in sexual intercourse

Items and responses	Response					
	Male		Female		Total	
	Freq.	%	Freq.	%	Freq.	%
If you have not involved in sexual intercourse, what is (are) the main reason for you not to have sexual intercourse?						
A. Fear of STDs/AIDS	27	18.2%	29	16%	56	17%
B. Fear of parents	15	10.1%	18	10%	33	10%
C. Want to wait until marriage	41	27.7%	62	34.2%	103	31.3%
D. I feel that it is wrong	4	2.7%	5	2.8%	9	2.7%
E. No desire	1	0.7%	2	1.1%	3	0.9%
F. No opportunity to get friends who fit	-	-	4	24.3%	4	1.2%
G. Culture does not allow to do so	2	1.4%	4	24.3%	6	1.8%
H. Fear of STDs and wait until marriage	24	16.2%	37	20.4%	61	18.4%
I. Fear of Parents and wait until marriage	12	8.1%	25	13.8%	37	11.2%
J. Culture and wait until marriage	8	5.4%	9	5%	17	5.5%
Total	**148**	**100%**	**181**	**100%**	**329**	**100%**

As indicated in the previous Table 5, the largest proportion, about 60%, of the total respondents was not involved in sexual intercourse. And they forwarded their reasons why they desist from sex. Most of them (31.3%) reported that they want to stay until marriage. This situation is not the same among two sexes. Girls (34.2%) are more in favor of waiting until marriage compared with boys (27.7%) Still there are others who also in favor of waiting until marriage even though the idea incorporated with other reasons. For example, waiting until marriage and fear of STDs both

together account 18.4% (18.2). With this regards, girls are still greater in percentage (16.2% = boys and 20.4 % = girls). Fear of parents and waiting until marriage account 11.2% (37) for the two sexes. Another relatively significant number of respondents observed in the reason of fear of STDs/AIDS (17%).

4.3. Gender difference on sexual belief

The major purpose of this study is to compare the mean scores of adolescent boy's and girls' sexual belief. More specifically, the study aimed at observing their sexual belief differences and similarities on love, dating, virginity, sexual intercourse, masturbation, unwanted pregnancy and sexually transmitted disease. For the sake of simplicity, we can categorize these basic elements of sexual activities in to three groups. They are called *pre-erotic* (dating, virginity and love), *erotic* (sexual intercourse and masturbation) and *post-erotic* (unwanted pregnancy and sexually transmitted disease) sexual activities.

4.3.1. Gender difference on the belief of pre-erotic sexual activities (dating, love and virginity)

Under this topic pre-erotic sexual activities such as dating, virginity and love were analyzed on gender base. To attain this objective, *t-test* was computed and the result is presented in the following table:

Table 7: Descriptive statistics of dating, virginity and love scores of adolescent boys and girls

	Sex	N	Mean	Std. Deviation	Std. Error Mean
Dating	Female	270	15.45	1.95946	.43815
	Male	270	13.85	2.30046	.51440
Virginity	Female	270	16.35	1.98083	.44293
	Male	270	14.75	2.24488	.50197
Love	Female	270	17.40	2.28035	.50990
	Male	270	16.20	2.30788	.51606

Table 8: Comparison of the mean scores of adolescents' belief on dating, virginity, and love

	t-test				
	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Dating	2.368	538	.023	1.60	.67571
Virginity	2.390	538	.022	1.60	.66945
Love	1.654	538	.106	1.20	.72548

*$p<0.05$

As indicated in table 9, the t-test shows that there is statistically significant difference between the mean scores of dating among the two sexes. ($t(538)= 2.368$; $p<0.05$). This statistical difference may tell us, adolescent boys and girls have difference in their belief of dating. Furthermore, the greater mean score of females shows that females are relatively more conservative than males in their belief of dating.

Another significant difference was observed on their belief of virginity. There is statistical difference in the mean sores of virginity as indicated

in the table (t(538)= 2.390; or p=0.022, p<0.05). From the observed difference we can say females were more in favour of keeping virginity than males, because relatively greater mean scores of female adolescents indicate that they have greater rigidity in their belief than adolescent males.

On the other way round, although adolescent girls' higher mean score indicate that they are relatively restrictive in love affairs than boys, the t-test shows that no statistically significant difference was observed between the two sexes (t(538)= 1.654; or p=0.106, p>0.05).

4.3.2. Gender difference on the belief of erotic sexual activities (masturbation and sexual intercourse)

Gender difference on the mean scores of adolescent boy's and girls' sexual belief is also the main concern of this study especially on the three sexual issues (pre-erotic, erotic and post-erotic sexual issues). In the previous topic we observed difference on pre-erotic sexual activities (dating, virginity and love). Under this topic erotic sexual activities were analyzed by employing t-test statistic techniques. Erotic sexual activities are sexual acts that performed to satisfy directly erotic feelings. This situation critically observed between two sexes. To attain this objective, t-test was computed and the result is presented in the following table.

Table 9: Descriptive statistics of sexual belief on masturbation and sexual intercourse scores

	Sex	N	Mean	Std. Deviation	Std. Error Mean
Masturbation	Female	270	16.40	1.84676	.41295
	Male	270	14.75	1.83174	.40959
Sexual intercourse	Female	270	17.85	1.98083	.44293
	Male	270	16.05	2.76205	.61761

Table 10: t-test Comparison of mean scores of adolescents' belief on masturbation and sexual intercourse

	t-test				
	t	**df**	**Sig. (2-tailed)**	**Mean Difference**	**Std. Error Difference**
Masturbation	2.837	538	.007	1.65000	.58163
Sexual intercourse	2.368	538	.023	1.80000	.76002

*p<0.05

As shown in the table 11, in the belief of masturbation, adolescent boys and girls are different. The computed statistical data indicate that there is significant difference among the mean scores of boys and girls (t(538)= 2.837; p<0.05). As indicated in the descriptive statistics, the girls' mean score is greater than boys' mean score. This may show that girls have restrictive belief than boys on the issues of masturbation.

Another related issue that observed significantly different was that belief on sexual intercourse (t(538)= 2.368; or p=0.023 p<0.05). Adolescent boys were less conservative about sexual intercourse when compared with girls, because the mean score of boys is less than girls.

4.3.3. Gender difference on the belief of post-erotic sexual activities (Unwanted pregnancy and STDs)

Post-erotic sexual issues are the issues that happen after erotic sexual intercourse. In other word the issue that come after the occurrence of sexual intercourse that end up with some consequences such as unwanted pregnancy, sexually transmitted disease, contraception etc. It is a fact that adolescents are more vulnerable to these issues than any other age group. In this study, adolescents' belief towards these post-

erotic sexual issues analyzed on gender and age bases so as to examine the difference and similarities. Under this topic, only gender difference observed. Hence, t-test was used. Total scores that obtained from items of unwanted pregnancy and sexually transmitted disease computed as follows:

Table 11: Descriptive statistics of sexual belief of unwanted pregnancy and STDs scores

	Sex	N	Mean	Std. Deviation	Std. Error Mean
Unwanted pregnancy	Female	270	14.15	1.26803	.28354
	Male	270	12.50	2.78152	.62197
STDs	Female	270	15.55	2.18789	.48923
	Male	270	15.00	2.20048	.49204

Table 12: Comparison of mean scores of adolescents' belief on unwanted pregnancy and STDs

	t-test				
	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Unwanted pregnancy	2.414	538	.021	1.65000	.68355
STDs	.793	538	.433	.55000	.69386

*p<0.05

Belief on unwanted pregnancy was observed between the two sexes by computing t-test. The statistical data in the above Table 12 shows that there is statistically significant difference between the two mean scores of boys and girls (t(538)=2.414; or p=0.021, p<0.05). The greater mean score of girls implies that girls were more concerned or rigid belief about unwanted pregnancy than boys (Girls=14.15, Boys=12.50).

Another observed post-erotic sexual issue among the two sexes was sexually transmitted diseases. As indicated in the table ( ), the computed mean scores are not significantly different ($t(538)=0.793$ or $p=0.433$, $p>0.05$). This may indicate that there is no significant difference between adolescent boys' and girls' belief on STDs. In other way, the two sexes may have similar belief on sexually transmitted diseases.

4.4. Age Difference on sexual belief

4.4.1. Sexual belief on dating, love and virginity among the three groups (early, middle and late adolescents)

To check whether there is significant difference or not among the three groups on the belief of dating, virginity and love, one-way-ANOVA was used. The following tables show that the computed results of both descriptive and inferential statistics between the three groups.

Table 13: Descriptive statistics of dating, virginity and love scores of the three groups

Age	Descriptive stat.	Number	Dating	Virginity	Love
Early adolescent	Mean	137	16.6364	16.9091	18.6364
	Std. Deviation	137	1.43337	1.57826	1.74773
Middle adolescent	Mean	192	14.4286	15.7857	17.1429
	Std. Deviation	192	1.86936	1.67233	1.70326
Late adolescent	Mean	211	13.4000	14.3333	15.1333
	Std. Deviation	211	2.16465	2.55417	2.16685
Total	Mean	540	14.6500	15.5500	16.8000
	Std. Deviation	540	2.25945	2.24122	2.34466

Table 14: One-way-ANOVA (belief of dating, virginity and love)

		Sum of Squares	**df**	**Mean Square**	**F**	**Sig.**
Dating	Between Groups	67.526	2	33.763	**9.495**	.000
	Within Groups	131.574	537	3.556		
	Total	199.100	539			
Virginity	Between Groups	43.300	2	21.650	**5.249**	.010
	Within Groups	152.600	537	4.124		
	Total	195.900	539			
Love	Between Groups	80.407	2	40.203	**11.102**	.000
	Within Groups	133.993	537	3.621		
	Total	214.400	539			

As shown in the above table, the three age groups of adolescents were critically observed whether there is significant difference between them regarding their beliefs on dating, virginity and love. The data shows that there is significant difference between early, middle and late adolescents in their belief of dating ((F 2,537)= 9.495; or p=0.021, p<0.05). This may implies that there is difference in the three age groups concerning their belief on dating. As the table shows the mean scores of the three groups is significantly different. The mean score of early adolescent is greater than the rest of two.

Another significant difference observed among the three groups was the mean scores of belief on virginity ((F 2,537)= 5.249; p<0.05). From the observed mean difference, we can say that early adolescents' belief more in favor of maintaining virginity than middle and late adolescents. Middle adolescents are also relatively conservative in the belief of virginity when compared with late adolescents.

Concerning belief on love issues, statistically significant difference was observed among the three groups ((F 2,537) = 11.102; p<0.05). From the observed mean difference, it can be concluded that early adolescents are more rigid in love affairs than middle and late adolescents. When we compare the mean scores of middle and late adolescents, they are different. There is significant difference as indicated in the Scheff test (p=0.026, p<0.05). The greater mean score middle adolescents indicate that they are relatively more serious or rigid on the issue of love than late adolescents.

Table 15: Multiple comparisons of the mean difference in the three age groups (belief of dating, love and virginity)

Dependent variable	(I) age	(J) age	Mean Difference (I-J)	Std. Error	Sig.
Dating	Early adolescent	Middle adolescent	2.20779*	.75979	.022*
		Late adolescent	3.23636*	.74856	.001*
	Middle adolescent	Early adolescent	-2.20779*	.75979	.022*
		Late adolescent	1.02857	.70077	.351
	Late adolescent	Early adolescent	-3.23636*	.74856	.001*
		Middle adolescent	-1.02857	.70077	.351
Virginity	Early adolescent	Middle adolescent	1.12338	.81825	.399
		Late adolescent	2.57576*	.80616	.011*
	Middle adolescent	Early adolescent	-1.12338	.81825	.399
		Late adolescent	1.45238	.75468	.171
	Late adolescent	Early adolescent	-2.57576*	.80616	.011*
		Middle adolescent	-1.45238	.75468	.171
Love	Early adolescent	Middle adolescent	1.49351	.76674	.164
		Late adolescent	3.50303*	.75541	.000*
	Middle adolescent	Early adolescent	-1.49351	.76674	.164
		Late adolescent	2.00952*	.70718	.026*
	Late adolescent	Early adolescent	-3.50303*	.75541	.000*
		Middle adolescent	-2.00952*	.70718	.026*

** The mean difference is significant at the .05 level.*

As show in table 15, the three groups showed that there is statistically significant differences concerning belief on dating (F 2,537)= 9.495; p<0.05). As indicated in the Scheffe test of the three groups (table16), early and middle showed statistically significant difference on their belief of dating. (P=0.022 which less than x=0.05). The same is true for early and late adolescents (p=0.001, p<0.05).The difference between them is significant. But, there is no statistical difference between middle and late adolescents (p=0.351, p>0.05).

Another significant difference was observed between early and late adolescents (p<0.05) as far as their belief on virginity concerned. This may indicate that early and late adolescents have relatively different belief on virginity. More specifically, the observed highest mean score of early adolescents indicate that they are more conservative on the issue of virginity than late adolescents. But, there is no statistically significant difference between middle and late adolescents (p=0.399, p>0.05) as well as between early and middle adolescents (p=0.171, p>0.05).

In other way, late adolescents tend to be less conventional (traditional) on the issue of love as compared with early and middle adolescents. This can be observed from the data indicated in Table 15. The mean score of late adolescents is lower than the two scores of early and middle adolescents, and at the same time statistically different when compared with both of them (p=0.026 & p=0.00, p<0.05). But there is no statistical difference between the scores of early and middle adolescents (p=0.164, p>0.05).

4.4.2. Sexual belief of masturbation and sexual intercourse among early, middle and late adolescent

Here also one-way-ANOVA was used in order to check the significant difference among the three groups on the belief of sexual intercourse and masturbation. The following tables show that the computed results of the three groups.

Table 16: Descriptive statistics of belief of masturbation and sexual intercourse scores of the three groups

Age	Descriptive Statistic	Number	Sexual intercourse	Masturbation
Early adolescent	Mean	137	18.7273	17.2727
	Std. Deviation	137	2.10195	1.19087
Middle adolescent	Mean	192	17.4286	15.9286
	Std. Deviation	192	1.55486	1.63915
Late adolescent	Mean	211	15.2000	14.0000
	Std. Deviation	211	2.56905	1.60357
Total	Mean	540	16.9500	15.5750
	Std. Deviation	540	2.54145	1.99856

Table 17: One-way-ANOVA (belief of masturbation and sexual intercourse)

		Sum of Squares	df	Mean Square	F	Sig.
Sexual intercourse	Between Groups	83.890	2	41.945	**9.237**	.001
	Within Groups	168.010	537	4.541		
	Total	251.900	539			
Masturbation	Between Groups	70.665	2	35.332	**15.360**	.000
	Within Groups	85.110	537	2.300		
	Total	155.775	539			

As indicated in the above table (18), both belief on sexual intercourse and masturbation are statistically different among the three groups. The statistical data (F 2,537) = 9.237; p<0.05) shows that there is statistical difference between the three groups regarding sexual intercourse. There is still significant difference on the belief of masturbation (F 2,537) = 15.360; p=0.00, p<0.05). Multiple comparisons among the three groups presented below to show which group is significantly different when compared with one another.

Table 18: Multiple comparisons of mean difference in the three age groups (on the belief of sexual intercourse and masturbation)

Dependent variable	(I) age	(J) age	Mean Difference (I-J)	Std. Error	Sig.
Sexual intercourse	Early adolescent	Middle adolescent	1.29870	.85857	.330
		Late adolescent	1.29870	.84589	.001*
	Middle adolescent	Early adolescent	-1.29870	.85857	.330
		Late adolescent	2.22857	.85857	.028*
	Late adolescent	Early adolescent	-3.52727	.84589	.001*
		Middle adolescent	-2.22857	.79187	.028*
Masturbation	Early adolescent	Middle adolescent	1.34416	.61108	.103
		Late adolescent	3.27273	.60205	.000*
	Middle adolescent	Early adolescent	-1.34416	.61108	.103
		Late adolescent	1.92857	.56361	.006*
	Late adolescent	Early adolescent	-3.27273	.60205	.000*
		Middle adolescent	-1.92857	.56361	.006*

** The mean difference is significant at the .05 level.*

As indicated in the Scheffe test of the three groups (table 19), early and late showed statistically significant difference on their belief of sexual intercourse. (P=0.01 which less than x=0.05). The same is true between middle and late adolescents (p=0.028, p<0.05).The difference between them is significant. But, there is no statistical difference between early and middle adolescents (p=0.330, p>0.05). The greater mean score of early adolescents may indicate that they are more conventional in their belief of sexual intercourse when compared with middle and late adolescents.

Another significant difference was observed between early and late adolescents (p<0.05) as far as their belief on masturbation concerned. This may indicate that early adolescents have relatively different belief on the issue of masturbation when compared with late adolescents. The observed highest mean score of early adolescents indicate that they are more conservative on the issue of masturbation than late adolescents. There is still significant difference exist among middle and late adolescents (p=0.006, p<0.05). These groups are relatively different in their belief of masturbation.

4.4.3. Sexual belief on unwanted pregnancy and STDs of early, middle and late adolescent

To check whether there is significant difference or not among the three groups on the belief of unwanted pregnancy and STDs, one-way-ANOVA was used. The following tables show that the computed results of both descriptive and inferential statistics between the three groups.

Table 19: Descriptive statistics of unwanted pregnancy and STDs scores of the three groups

Age	Descriptive statistics	Number	Pregnancy	STDs
Early adolescent	Mean	137	12.6364	16.7273
	Std. Deviation	137	2.20330	2.10195
Middle adolescent	Mean	192	11.7143	15.2143
	Std. Deviation	192	2.46291	1.88837
Late adolescent	Mean	211	12.7333	14.2667
	Std. Deviation	211	1.75119	2.01660
Total	Mean	540	12.3500	15.2750
	Std. Deviation	540	2.14297	2.18371

Table 20: One-way-ANOVA (belief of unwanted pregnancy and STDs)

		Sum of Squares	df	Mean Square	F	Sig.
Unwanted Pregnancy	Between Groups	8.764	2	4.382	**.952**	.395
	Within Groups	170.336	537	4.604		
	Total	179.100	539			
STDs	Between Groups	38.503	2	19.251	**4.830**	.014
	Within Groups	147.472	537	3.986		
	Total	185.975	539			

As shown in table 21, the computed mean scores indicate that there is no significant difference between the three groups as far as unwanted pregnancy concerned ((F 2,537) = 0.952; or P=0.395, p>0.05). However, significant difference observed on the belief of sexually transmitted diseases ((F 2,537) = 4.83; or P=0.014, p<0.05). From this we can infer

that the three groups have different beliefs on STDs but they may have similar belief on unwanted pregnancy.

Table 21: Multiple comparisons of mean difference in the three groups (on the belief of unwanted pregnancy and STDs)

Dependent variable	(I) age	(J) age	Mean Difference (I-J)	Std. Error	Sig.
Unwanted pregnancy	Early adolescent	Middle adolescent	.92208	.86449	.571
		Late adolescent	-.09697	.85172	.994
	Middle adolescent	Early adolescent	-.92208	.86449	.571
		Late adolescent	-1.01905	.79734	.450
	Late adolescent	Early adolescent	.09697	.85172	.994
		Middle adolescent	1.01905	.79734	.450
STDs	Early adolescent	Middle adolescent	1.51299	.80439	.185
		Late adolescent	2.46061	.79250	.014*
	Middle adolescent	Early adolescent	-1.51299	.80439	.185
		Late adolescent	.94762	.74190	.450
	Late adolescent	Early adolescent	-2.46061	.79250	.014*
		Middle adolescent	-.94762	.74190	.450

In the above table, Scheff test specifically shows that there is significant difference only between early and late adolescents ($p=0.14$, $p<0.05$) concerning their belief on unwanted pregnancy. But not either between early and middle or middle and late adolescents the difference (on STDs belief) was seen ($p=0.185$, $p>0.05$) and ($p=0.45$, $p>0.05$) respectively. From this we can infer that early and late adolescents are different in their belief of STDs and early adolescents have rigid belief when compared with late ones. But they have relatively similar belief on unwanted pregnancy.

4.5. Source of sexual information

As we know, belief is a result of learning. This learning may be take place in school, in the family, through media etc. These agents can be taken as sources of learning. For the interest of this study, these sources are well thought-out as agents in forming beliefs.

4.5.1. Difference by gender

Under this topic, difference in source of sexual information especially between two sexes was observed by computing t-test.

Table 22: Descriptive statistics of source of sexual information among adolescent boys and girls

	Sex	N	Mean	Std. Deviation	Std. Error Mean
Parents	Female	270	7.5000	1.96013	.43830
	Male	270	9.0000	2.05196	.45883
Medias	Female	270	8.5000	1.84961	.41359
	Male	270	10.6500	2.47673	.55381
Peers	Female	270	7.7000	1.78001	.39802
	Male	270	8.7000	1.49032	.33325
School	Female	270	8.3000	1.30182	.29110
	Male	270	9.1000	1.80351	.40328

Table 23: Comparison of the mean scores of males' and females' source of sexual information

Variables	t-test				
	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Parents	-2.364	538	.023	-1.50000	.63453
Medias	-3.111	538	.004	-2.15000	.69120
Peers	-1.926	538	.062	-1.00000	.51911
School	-1.608	538	.116	-.80000	.49736

Regarding the source of information about sexual issues, the two sexes showed statistical difference on the first three agents (parents, medias and peers). As indicated in the table (24), adolescent boys and girls may not equally benefited from parents as far as sexual information concerned. This is because, the statistical data in the table shows that there is statistical difference between the two sexes concerning parents as source of information ($t(538)= -2.364$; or $p=0.023$, $p<0.05$). From the observed higher mean score of boys, it can be concluded that boys get sexual information from parents more than girls.

Another significant difference observed between the two sexes is that medias as source of information. The statistical data shows that boys and girls are not equally acquiring information from medias ($t(538) = -3.111$; or $p=0.004$, $p<0.05$). Boys tend to acquire information about sexual issues from medias more than girls.

There is no statistically significant difference on the two mean scores of peers as a source of information ($t(538)=-1.926$; or $p=0.062$, $p>0.05$). There is also no statistically significant difference on the mean score of school as a source of information ($t(538) =-1.608$; $p>0.05$). This may

indicate that both sexes may have equal access to the information obtained from school and peers. In other words, both sexes may be equally benefited from these two sources.

4.5.2. Difference by age

The difference on the source of information about sexuality between the three groups (early, middle and late adolescents) was computed by using one-way ANOVA and presented in the table as the follows:

Table 24: Descriptive statistics of source of sexual information among early, middle and late adolescent

Age	Descriptive statistics	Number	Parents	Medias	Peers	School
Early adolescents	Mean	137	6.8182	8.7273	6.7273	7.8182
	Std. Deviation	137	1.25045	1.73729	1.55505	1.32802
Middle adolescents	Mean	192	8.2143	9.0714	8.6429	8.3571
	Std. Deviation	192	2.15473	2.36852	1.54955	1.49908
Late adolescents	Mean	211	9.3333	10.6667	8.8667	9.6667
	Std. Deviation	211	2.05866	2.60951	1.30201	1.44749
Total	Mean	540	8.2500	9.5750	8.2000	8.7000
	Std. Deviation	540	2.12132	2.41669	1.69766	1.60448

Table 25: One-way ANOVA (source of information)

		Sum of Squares	df	Mean Square	F	Sig.
Parents	Between Groups	40.173	2	20.087	**5.492**	.008
	Within Groups	135.327	537	3.657		
	Total	175.500	539			
Medias	Between Groups	29.331	2	14.666	**2.734**	.078
	Within Groups	198.444	537	5.363		
	Total	227.775	539			
Peers	Between Groups	33.271	2	16.635	**7.778**	.002
	Within Groups	79.129	537	2.139		
	Total	112.400	539			
School	Between Groups	24.216	2	12.108	**5.880**	.006
	Within Groups	76.184	537	2.059		
	Total	100.400	539			

As shown in the above table (26), computed mean scores of both parents and peers as the source of information indicated that significant difference (F 2,537) = 5.492; or p=0.008, p<0.05) and (F 2,537) = 7.778; or p=0.002, p<0.05) respectively. This may imply that the three groups are different in acquiring information from parents and peers. In other way round, may be parents treat their children differently at different age time concerning sex. These groups may not equally benefit from their peers in obtaining information about sexual issues.

Medias may have equal access to the three age groups in acquiring information about sexual issues. They may equally benefit from media. This idea can be supported by the data presented in the table that indicates there is no statistical difference between the mean scores of

media as the source of information (F 2,537) = 2.734; or p=0.078, p>0.05).

Another significant difference is observed in the mean scores of school as the source of information (F 2,537) = 5.588; or p=0.006, p<0.05). This may indicate that children treated differently at different age in school.

Table 26: Multiple comparisons of mean differences in the three groups on the source of information

Dependent variable	(I) age	(J) age	(I-J) Mean Difference	Std. Error	Sig.
Parents	Early adolescent	Middle adolescent	-1.39610	.77055	.208
		Late adolescent	-2.51515	.75916	.008*
	Middle adolescent	Early adolescent	1.39610	.77055	.208
		Late adolescent	-1.11905	.71069	.301
	Late adolescent	Early adolescent	2.51515	.75916	.008*
		Middle adolescent	1.11905	.71069	.301
Media	Early adolescent	Middle adolescent	-.34416	.93310	.934
		Late adolescent	-1.93939	.91931	.122
	Middle adolescent	Early adolescent	.34416	.93310	.934
		Late adolescent	-1.59524	.86061	.193
	Late adolescent	Early adolescent	1.93939	.91931	.122
		Middle adolescent	1.59524	.86061	.193
peers	Early adolescent	Middle adolescent	-1.91558	.58922	.010*
		Late adolescent	-2.13939	.58051	.003*
	Middle adolescent	Early adolescent	1.91558	.58922	.010*
		Late adolescent	-.22381	.54345	.919
	Late adolescent	Early adolescent	2.13939	.58051	.003*
		Middle adolescent	.22381	.54345	.919
Schools	Early adolescent	Middle adolescent	-.53896	.57815	.651
		Late adolescent	-1.84848	.56961	.010*
	Middle adolescent	Early adolescent	.53896	.57815	.651
		Late adolescent	-1.30952	.53324	.061
	Late adolescent	Early adolescent	1.84848	.56961	.010*
		Middle adolescent	1.30952	.53324	.061

As indicated in Table 26, there is significant difference between the three groups as far as their mean scores of parents as a source of information ($F=5.492$; $p<0.05$). This is specifically observed between early and late adolescents ($p=0.008$, $p<0.05$). From the observed mean scores of the three groups, late adolescents tend to obtain information more from parents than early adolescents. But, no significant difference was observed between early and middle adolescents ($p=0.208$, $p>0.05$) and still no significant difference between middle and late adolescents ($p=0.301$, $p>0.05$).

Regarding peer as the source, there is significant difference between early and middle adolescents ($p=0.010$, $p<0.05$). Still there is significant difference between early and late ($p=0.003$, $p<0.05$). Lower mean score of early adolescents may shows that they obtain lesser information from their peers compared with middle and late adolescents (mean scores = 8.7, 9.1 & 10.7; early, middle and late adolescents respectively). In other words, higher mean score of late adolescents indicate that they obtain more information from their peers when compared with early and middle adolescents.

Another significant difference is observed in the mean scores of school as the source of information (F 2,537) = 5.588; or $p=0.006$, $p<0.05$). Specifically, this difference exist only between early and late adolescents ($p=0.010$, $p<0.05$). This may indicate that early and late adolescents are not equally benefited from the school in obtaining information. The higher mean score of late adolescents tells us that they are more benefited from school as far as sexual information concerned.

There is no statistically significant difference between the three groups' mean scores concerning medias as a source of information (F 2,537) = 2.734; or $p=0.078$, $p>0.05$).

4.5.3. The main source for the three groups

Here the main source of information among the three groups observed by using percentage. The three groups were asked to list their main sources and rank according to their magnitude. The obtained information are categorized in to four sources and presented below.

Table 27: Main source of information on sexual issues among the three age groups

Groups	Parents		Media		Peers		School		Total	
	Number	%	Number	%	Number	%	Number	%	Number	%
Early	32	23.4	42	30.5	39	28.5	24	17.5	**137**	**25.4**
Middle	43	22.4	52	27	58	30.3	39	20.3	**192**	**35.5**
Late	45	21.3	67	31.8	62	29.4	37	17.5	**211**	**39.1**
Total	**120**		**161**		**159**		**100**		**540**	**100**

As indicated in the table, early adolescents obtain information more from media (30.5%) compared with other means of source. This is followed by peers (28.5%). But they gain less information from school. For middle adolescents, peers (30%) are the main source of information. It followed by media (27%). Late adolescents obtain large information from media (31.8%), and next from peers (29.4). But still both middle and late obtain less information from the school.

V. Summary and Discussion

In this section the major findings are treated against previous findings and findings from other culture. Discussions were made with main findings by comparing with other previous studies.

Adolescents' previous sexual history (experience) manipulates their current belief somehow. In addition, it is also undeniable fact that beliefs formed through learning. In this study, their sexual experience and practices analyzed in terms of percentage.

As the study shows that large numbers of adolescents (about 60.9%) are not involved in sexual intercourse where as the remaining 39.1% (211) have had sexual intercourse with other sexes; boys 45.2% (122) and 33% (89). This figure is even exaggeratedly different from the study conducted in Addis Ababa by Feben Demissie (2005) who indicated that only 22.5 % experienced sexual intercourse.

According to a report by Save the Children Fund (2000), a survey conducted among 4216 unmarried adolescent/youth selected from different parts of Ethiopia for example showed that 47.4% of males and 57.2% females experienced sexual intercourse before marriage. The average percentage of total adolescent who did intercourse (about 52.2%) exceeds this new finding (i.e. 39.1%). Even the variation is observed in the two sexes (45.2% of males and 33% females) reversibly. This is because the data of Save the Children Fund shows that females are more experienced than males, but in current study it is the reverse. Most of these adolescents who did sexes with other sex (about 65.8%) reported that they did the first sexual intercourse with their boy/girl friends) and about 28.9% said that they did with their husband or wife.

As observed in the study, the mean scores of adolescent boys and girls on sexual belief were compared by computing t-test. Specifically, important sexual elements such as love, dating, virginity, sexual intercourse, masturbation, unwanted pregnancy and sexually transmitted disease critically observed on gender bases. The above elements were categorized in to three groups in order to ease the analysis by separately discussing. They are grouped as pre-erotic, erotic and post-erotic.

Pre-erotic refers the activities and issues that happen before erotic sexual satisfaction activities and it consists the elements like dating, virginity and love. *Erotic* refers direct involvement in erotic sexual satisfaction such as sexual intercourse and masturbation and *post-erotic* refers the sexual issues that happen after erotic sexual gratification. In other word the issue that come after the occurrence of sexual intercourse that end up with some consequences such as unwanted pregnancy, sexually transmitted disease, contraception etc.

First let us see the pre-erotic sexual activities (dating, virginity and love) whether they are significantly different or not among the two sexes. The t-test shows that there is statistically significant difference between the mean scores of boys' and girls' belief on dating ($t(538) = 2.368$; $p<0.05$). Based on this difference it can be said that the greater mean score of females shows that females are relatively more conservative in their belief of dating than males.

Adolescent boys and girls are different in their belief on virginity. There was significant difference observed ($t(538)= 2.390$; or $p=0.022$, $p<0.05$). From the observed difference we can say females were more in favour of keeping virginity than males, because relatively greater mean scores of female adolescents indicate that they have greater rigidity in their belief than adolescent males.

This ideas share with the previous finding of Sallen & Stephenson stated that girls' belief is more planned and limited to some specific preconditions than boys (Sallen & Stephenson, 1989). Campbell suggested some points that could be the reason for their restrictions. He said that girls are more afraid, feel guilty, embarrassed and worried than boys after once they loose their virginity (Campbell, 1968). In addition, Hill, Pepalu, & Rubin indicated that boys' loss of virginity has no impact on his feelings of affection or relationship when compared with girls (Hill, Pepalu, & Rubin, 1977).

In this study the respondents who are virgin assumed to be about 60%. This is totally different from the finding of Katchadourian (1990) on American adolescents. He figured out that in average only 25% were abstained from sex until age 20 (80%-boys and 70%-girls)

Probably, adolescent boys and girls have similar belief on love affairs, because, statistically no significant difference was observed between their mean scores ($t(538)= 1.654$; or $p=0.106$, $p>0.05$). This situation does not confirm the finding of Stone and Church who stated that young girls strive mightily to fall in love and less straight, partly because they belief that it is the thing to do and partly because it seems the answer to some inner need (Church and Stone, 1957).

Erotic sexual activities are sexual acts that performed to satisfy directly erotic feelings. This situation critically observed between two sexes. As observed in the t-test, adolescent boys and girls are relatively different in their belief of masturbation. For this, the computed statistical data indicates that there is significant difference between the mean scores ($t(538)= 2.837$; $p<0.05$). The mean score of girls is greater than boys. This may show that girls have restrictive belief than boys on the issues of

masturbation. According to Lefrancois' finding, adolescent females feel more guilty and ashamed about masturbating than males. He also added that males masturbate more frequently than females, (Lefrancois, 1993). Probably, this frequent action of males may indicate that they are less restrictive in masturbation when compared with girls.

Adolescent boys were less conservative about sexual intercourse when compared with girls, because the mean score of boys is less than girls and at the same time significantly different ($t(538)= 2.368$; $p<0.05$). This idea confirms the finding of Araujo, Feldman & Turner. They said that adolescent males are active and less traditionalist than females and also the males are one year ahead than females on their onset of sexual intercourse (Araujo, Feldman & Turner, 1999). Another supporting finding by Stone and Church proves that girls are more serious about sex to the extent of believing that sex equals love (Stone and Church, 1957).

Post-erotic sexual issues (unwanted pregnancy and sexually transmitted disease) were also observed on the two sexes. The statistical data shows that there is significant difference between the two mean scores of boys and girls ($t(538)=2.414$; or $p=0.021$, $p<0.05$) concerning their belief on unwanted pregnancy. The greater mean score of girls implies that girls have more conventional belief about unwanted pregnancy than boys. In line with this finding Dryfoos indicated that girls have more fear and restrict on the issue of unwanted pregnancy than boys (Dryfoos, 1990).

But there is no significant difference had been observed between adolescent boys' and girls' belief on sexually transmit diseases ($t(538)=0.793$ or $p=0.433$, $p>0.05$). This is because; they might have been almost similar belief on STDs. But some studies indicated that there is a difference between two sexes. For example Berger explained that unsafe practices, having several sexual partners and falling to use condoms are

the main one by which every five teenagers is at high risk for AIDS. Concerning gender difference, he stated that boys are more vulnerable and exposed to the risks when compared with girls. This is because boys are sexually active and less conservative on the issue than girls (Berger, 1994, Hill, Pepalu, & Rubin, 1977).

In this study another important independent variable was age. The three sexual activities (pre-erotic, erotic and post-erotic sexual activities) were investigated among the three groups by using One-way-ANOVA. Concerning pre-erotic sexual activities, important elements such as dating, virginity and love were observed among the three groups.

The computed data shows that there is significant difference between early, middle and late adolescents in their belief of dating ((F 2,537)= 9.495; or p=0.021, p<0.05). This may implies that there is difference in the three age groups as far as their belief on dating concerned. More specifically, when we see the difference in detail among the three groups, Scheffe test indicate that early and middle showed statistically significant difference on their belief of dating. (P=0.022, p<0.05). The same difference was observed between early and late adolescents (p=0.001, p<0.05).The mean score of early adolescent is greater than the rest of two. This may indicate that early adolescents tend to be more conservative in connection with other sexes, especially in dating.

Early and late adolescents are different in their belief of virginity (p=0.011, p<0.05). The observed highest mean score of early adolescents indicate that they are more conservative on the issue of virginity than late adolescents. But, there is no statistically significant difference between middle and late adolescents (p=0.399, p>0.05) similarly no significant difference between early and middle adolescents (p=0.171, p>0.05). This may show that early and middle adolescents have similar beliefs on the issue of virginity.

Late adolescents tend to be less conventional (traditional) on the issue of love as compared with early and middle adolescents

The statistical data (F 2,537) = 9.237; $p<0.05$) shows that there is statistical difference between the three groups regarding sexual intercourse. More specifically, early and late showed statistically significant difference on their belief of sexual intercourse. Similar difference also exist between middle and late adolescents ($p=0.028$, $p<0.05$). The greater mean score of early adolescents may indicate that they are more conventional in their belief of sexual intercourse when compared with middle and late adolescents.

Late adolescents have relatively different belief on the issue of masturbation when compared with early and middle adolescents ($p=0.00$, $p<0.05$) and ($p=0.006$, $p<0.05$) respectively. The observed lowest mean score of late adolescents indicate that they are less conservative on the issue of masturbation than early and middle adolescents.

The computed mean scores indicate that there is no significant difference between the three groups as far as unwanted pregnancy concerned ((F 2,537) = 0.952; or $P=0.395$, $p>0.05$). But, significant difference observed on the belief of sexually transmitted diseases ((F 2,537) = 4.83; or $P=0.014$, $p<0.05$). From this we can infer that the three groups have different beliefs on STDs but they may have similar belief on unwanted pregnancy. More specifically, there is significant difference only between early and late adolescents ($p=0.14$, $p<0.05$). But not either between early and middle or middle and late adolescents the difference was seen ($p=0.185$, $p>0.05$) and ($p=0.45$, $p>0.05$) respectively. Therefore, it can be said that early adolescents have more restrictive belief on STDs than late adolescents.

Adolescent boys and girls may not equally benefit from family/parents as far as sexual information concerned. This is because, the statistical data shows that there is statistical difference between the two sexes concerning parents as source of information ($t(538)= -2.364$; or $p=0.023$, $p<0.05$). From the observed higher mean score of boys, it can be concluded that boys get sexual information from parents more than girls. Surprisingly, the study conducted by Karcher and Lee (2002) in Taiwan go up against this finding. Their study indicated that girls obtain more information on sexual issues from their parents than boys. But, the study in America (US) by Markham et al's (2003) confirms the finding and they

The statistical data shows that boys and girls are not equally acquiring information from medias ($t(538) = -3.111$; or $p=0.004$, $p<0.05$). Boys tend to acquire more information about sexual issues from media than girls.

There is no statistically significant difference on the two mean scores of boys and girls peers as a source of information and school as a source of information ($t(538)=-1.926$; or $p=0.062$, $p>0.05$) and ($t(538) =-1.608$; $p>0.05$) respectively. This may indicate that both sexes may have equal access to the information obtained from school and peers.

When we see the sources information against the three age groups, the mean scores of both parents and peers as the source of information indicated significant difference ($F\ 2,537) = 5.492$; or $p=0.008$, $p<0.05$) and ($F\ 2,537) = 7.778$; or $p=0.002$, $p<0.05$) respectively. This may imply that the three groups are different in acquiring information from parents and peers. In this study, early adolescents less benefited in obtaining information from both parents and peers. But, this idea is in opposition to the findings of Feben Demissie (2005) & Bartholome, Meschkeand zentall (2000) who stated that adolescents, especially early, acquire large

amount of information on sexual issues from peers and parents compared with late ones.

Unlike parents and peers, medias may have equal access to the three age groups in acquiring information about sexual issues, because, no statistical difference was seen (F 2,537) = 2.734; or p=0.078, p>0.05). But in the study of Kaiser Family Foundation (2004), early adolescents ranked entertainment media as their top source for information on sexuality and sexual health.

More specifically in other way obtained information (Ranking) indicates that early adolescents obtain information more from media (30.5%) compared with other means of source. This is followed by peers (28.5%). Confirming this, in the survey Kaiser Family Foundation (2004) by teens ages 13 through 15 ranked entertainment media as their top source for information on sexuality and sexual health (Kaiser Family Foundation, 2004). But they gain less information from school (17.5%).

For middle adolescents, peers (30%) are the main source of information. It followed by media (27%). But still the survey (Kaiser Family Foundation, 2004) indicates that media is in the first place for middle adolescents (51 percent of females and 33 percent of males). Late adolescents obtain large information from media (31.8%), and next from peers (29.4). But still both middle and late obtain less information from the school.

Generally, from the above discussions, the following findings are summarized:

- As the study shows that large numbers of adolescents (about 60.9%) are not involved in sexual intercourse where as the remaining 39.1% (211) have had sexual intercourse with other sexes.

- Most of the adolescents about 64.4% (136) reported that they did the first sexual intercourse with there fiancé (boy fiend/girl friend). About 30.3% (64) said that they did with their husband or wife.

- The statistical difference between two sexes may tell us that they are different in their belief of dating. Furthermore, the greater mean score of females shows that females are relatively more conservative than males in their belief of dating.

- There was statistically no significant difference on sexual belief of love. That was observed by computed mean difference test..
- Adolescent females have greater conventional belief about sexual inter-course than male adolescents. This is because, the observed mean scores between two sexes statistically different.

- In the belief of masturbation, adolescent boys and girls have different beliefs. The computed statistical data indicate that there is significant difference among the mean scores of boys and girls. More explicitly, the girls' mean score is greater than boys' mean score. This may show that girls have restrictive belief than boys on the issues of masturbation.

- There is statistically significant difference between the two mean scores of boys' and girls' belief on unwanted pregnancy. The greater mean score of girls implies that girls were more conformist or rigid belief about unwanted pregnancy than boys.

- The computed mean scores are not significantly different on the belief of STDs. This may indicate that there is no significant difference between adolescent boys' and girls' belief on STDs. In other way, the two sexes may have similar belief on sexually transmitted diseases.

- Early and middle adolescents showed that statistically significant difference on their belief of dating. The same is true for early and late adolescents. But, there is no statistical difference between middle and late adolescents.

- Early and late adolescents have relatively different belief on virginity. More specifically, the observed highest mean score of early adolescents indicate that they are more conservative on the issue of virginity than late adolescents.

- Late adolescents tend to be less conventional (traditional) on the issue of love as compared with early and middle adolescents.

- Early and late showed statistically significant difference on their belief of sexual intercourse. The same is true between middle and late adolescents. From this and the mean scores difference we can conclude that early adolescents are more conventional in their belief of sexual intercourse when compared with middle and late adolescents.

- Statistically significant difference was observed between the two sexes concerning family influence on their sexual belief. Boys are more influenced by parents than girls in the development of sexual belief.

- Adolescent boys have greater access to current media and information than adolescent girls as far as source of information concerned.

- Statistically significant difference in family influence on sexual belief between early, middle and late adolescents. Late adolescents are more influenced by parents and followed by middle adolescents as their mean scores difference observed.

- But there was no significant difference in scores of school and peers as a source of information among the three groups. Schools and peers may equally influence on both sexes.

- Late adolescents were more exposed to current information and media than middle and early adolescents. The difference between the three groups concerning source of information about sexuality was statistically significant.

VI. Conclusion and Recommendation

5.1. Conclusion

The major purpose of this study was to investigate the gender difference and developmental stage difference among early, middle and late adolescents' sexual belief. In other words it was the main concern of this study to explore the statistical difference between adolescent males and females concerning their sexual belief (such as dating, virginity, love, sexual intercourse, masturbation, unwanted pregnancy and STDs). In addition, the study seeks to find out whether there is significant difference among the three adolescent groups of early, middle and late as for as their sexual belief and source of sexual belief concerned.

To achieve the above objective the following basic research questions were formulated:

1. *What is their sexual belief about dating, love, masturbation, virginity, sexual intercourse, and STDs?*
2. *Do these beliefs differ between male and female adolescents?*
3. *Are these differences in the beliefs among early, middle, late adolescents?*
4. *What are the sources of these sexual beliefs?*
5. *Do the sources of sexual beliefs differ for the two sexes?*
6. *Do the sources of sexual belief differ for early, middle, and late adolescents?*

In order to find out answers for the above questions, secondary cycle and high School students were the participants of the study. From the available total (12) Woredas, five Woredas were randomly included in the study. In average 18 students were taken from each grade level. From each Woreda, 7th to 12th grade students were included in equal proportion. This was to involve the three groups of adolescent stages of

early, middle and late. Thus, totally 540 students from five Woredas were randomly selected.

In order to gather the required information for the study, questionnaire was used. It was constructed to measure adolescents' sexual belief on pre-erotic, erotic and post-erotic sexual issues and their source of information in forming sexual belief.

Initially, this instrument was subjected to pilot study. Based on this, item analysis was carried out and the instruments were improved some extent.

The obtained data were analyzed using descriptive statistics (mean and standard deviation), independent sample t-test and one-way of analysis of variance (ANOVA). Analysis of the collected data brought about the following conclusions:

1. Sexual belief on dating and virginity among adolescent boys and girls is relatively different. Girls' sexual belief is more conventional in both cases. Thus, it can be concluded that females have more probability to be kept from premarital sex when compared with boys.
2. Adolescent boys and girls have different belief on both masturbation and sexual intercourse (erotic sexual activities). In particular, girls have restrictive belief than boys on the issues of masturbation and sexual intercourse.
3. Both sexes have still different belief on unwanted pregnancy. The greater mean score of girls implies that girls are more concerned or rigid belief about unwanted pregnancy than boys. But, they have similar beliefs on STDs.
4. The three age groups of adolescents showed that there is a difference among them concerning belief on dating, virginity and love. More particularly, early and middle showed difference on their belief of

dating. The same is true between early and late adolescents, but, no difference between middle and late adolescents.

5. Early and late adolescents have relatively different belief on virginity. More specifically, early adolescents are more conservative on the issue of virginity than late adolescents. But, there is no significant difference between middle and late adolescents as well as between early and middle adolescents.
6. Late adolescents tend to be less traditional on the issue of love as compared with early and middle adolescents. But there is similar belief among early and middle adolescents.
7. Both belief on sexual intercourse and masturbation (erotic sexual activities) are different among the three groups. Especially, early and late showed difference on their belief of sexual intercourse as well as masturbation. The same is true between middle and late adolescents
8. In present study early and late adolescents obtain large information from medias where as middle ones from peers.
9. In general, early adolescents and female adolescents have conventional beliefs on most of the sexual activities when compared with their counter parts.

5.2. Recommendation

Based on the findings of the present study, the following suggestions are forwarded:

1. Medias and parents should be targeted when reproductive health intervention plan are set and implemented. Both medias and parents need to be aware of treating adolescent boys and girls equally and positively. In the study both sexes are not equally benefited from parents and medias.
2. From the study, it seems that adolescents from the very beginning needs sex education which is sufficiently included in curriculum.

This is because early adolescents are least beneficiary from the school when compared to late ones.

3. The study also indicates that early adolescents and females tend to have conventional beliefs and with some miss-concepts on sexual issues when compared with their counter parts. Thus, parents, medias and school should play significant role in balancing the information across all age and sex groups accordingly.
4. Any plans and actions in reproductive health should take in to account the age and gender difference that resulted from sexual socializing.

Reference

Adu-Mireku, S. (2003). ***Family communication about HIV/AIDS and sexual behavior among secior secondary High school Students in Gahana, Accra. African***. Journals of Health development B (1) 7-14

Alexander, C., Ensminger, M., Kim, Y., Smith, B. and Johonsen, K. (1989). ***Early sexual activity among adolescents in small towns and rural areas***: Race and Gender patterns. Family planning perspectives, 21, 261-266.

Asnake Hailu (2001). ***Attitudinal surrey on High risk sexual behavior Televant to HIV/AIDS with respect to Gender, age and educational level***. Unpublished MA thesis Addis Ababa.

Australian Research Centre in Sex (2008). ***Health and Society***- La Trobe University –

Bartholome, S., Meschke, L., & Zentall, R. (2000). ***Adolescent Sexuality and parent-adolescent process.*** Promoting Healthy Teen Choices. Family Relation, 47,143-154.

Berger, S. (1994). ***The developing person through the life span***. (3rd ed.). Bronx community college city university; worth publishers, New York

Billy, J., Landale, N.,Grady, W., & Zimmerle,D. (1988). ***Effects of sexual activity on adolescent social and psychological development. Social Psychology Quarterly,*** 51,190-212.

Central Statistics Agency (CSA). (2007). ***Summary of Population and Housing Census in Ethiopia in 2007.***

Chilman, F. (1986). ***Adolescent Reproductive Health***. New York: McGraw Hill Inc

Church, J. & Stone, J. (1957). ***Childhood and Adolescence***. Columbia University, Random House print New York.

Compbell, A. (1968). ***The role of family Planning in the reduction of poverty.*** Journal of Marriage and the family, 30,320-330

Conger, J. (1981). ***Freedom and Commitment***: Families, Youth, and Social changes. American Psychologist 36, 1475-1484.

D'Alessandro, M., Kreiter, D., Kinzer, L. *et al.* (2004). ***A randomized, controlled trial of an information prescription for pediatric patient education on the Internet.*** *Archives of Pediatric & Adolescent Medicine*; 158:857-862.

DiClemente, R.(1990). ***The emergency of adolescents as a risk group for Human Immunodeficiency Virus Infection***. Journal of adolescent Research, 5, 7-17.

Fabes, R. & Martian, L. (2000). ***Exploring child development***: Transaction and Transformations. A Pearson Education Company. Inc.

Feben Demissie (2005). ***The relationship between Family characteristics and adolescents' sexual risk-taking behavior***: Unpublished Ma thesis Addis Ababa.

Fink, R. (2001). ***Adolescence***: Change and Continuity. New York: McGraw Hill Inc

Furstenberg, F., et al. (1987). ***Race differences in the timing of adolescents intercourse.*** American Soiological Review,52, 511-518.

Getachew Tasses (2006). ***Adolescents' attitude towards seeking counseling and its relations with self concealment, self esteem and gender.*** Unpublished MA thesis. A.A. University

Gross, R. (2001).***Psychology***: the science of mind and behavior (4th ed.) London: Green Gate Publishing Service.

Haste, H. (1993). ***The sexual Metaphor***. Great Britain: T.J press (Padstow) Ltd.

Hayes, C. (1987). ***Risking the future Adolescent sexuality, pregnancy and child bearing.*** Washington DC, National Academy press Inc.

Kaiser Family Foundation & Seventeen (2004). ***Birth Control and Protection*** [Sex Smarts]. Menlo Park, CA: The Foundation, July 2004.

Kaiser Family Foundation (2001). ***Teens and Sex:*** The Role of Popular TV [Fact Sheet]. Menlo Park, CA: The Foundation,.

Katchadourian, H. (1990). ***Sexuality***. In S. Feldman and G. Elliot (Eds), At the threshold: The developing adolescent. Pp.330-351. Cambrige : Harvard University Press.

Kimmel, D. & Weiner, I. (1995). ***Adolescence, A developmental Transition.*** New York: Johan Wiley and Sons Inc.

Kuhlen, R. (1952). ***The psychology of Adolescent development***. Syracuse University. Harper and Row publishers New York

Lefrancois, G. (1993). ***The Lifespan*** (4th ed) California. A divisions of wadsworht, Inc.

Lefton, L. (2000). ***Psychology*** (7th ed.) Boston: Allyn and Bacon

Sallen, S. & Stephenson R. (1989). ***Adolescence***. New York: McGraw Hill Inc

Sclus, F. (2000). ***Baseline surrey report on adolescent reproductive Health in Government High Schools of A.A***. Save the Children, USA, Addis Ababa, Ethiopia

Silverman, J. & Decker, M. (2006). ***Urban Health Social Norms and Beliefs Regarding Sexual Risk and pregnancy Involvement among Adolescent Males Treated for Dating Violence perpetration*** . 83(4) 723-735 New York

Solomon Getachew (1990). ***Sexual behavior and knowledge of AIDS and other STDS:*** A survey of senior High school students.

Steinberg, L. (1993). ***Adolescence*** (3rd ed. Me Graw-Hill –New York

Udry, J. (1987). ***Hormonal and social determinants of adolescent sexual initiation.*** Adolescence and Puberty. New York: Oxford University Press.

Wana Wagesho (1998). ***History of Wolaita People***. Historical book.

Appendix

አዲስ አበባ ዩኒቨርስቲ

የድህረ ምረቃ ትምህርት

ሳይኮሎጂ ዲፓርትመንት

የዚህ መጠይቅ ዋና ዓላማ በወላይታ አከባቢ ያሉ ወጣትና የሁለተኛ ደረጃ ት/ቤት ተማሪዎች ስለያታ ግንኙነት ያላቸውን ግንዛቤ ለማወቅ ነው። በመሆኑም መላሾች በዚህ መጠይቅ ለተካተቱ ጥያቄዎች በግልጽነት የሚትሰጡት መልስ የጥናቱን ዓላማ ይወስናል።

ስለዚህ ውድ የጥናቱ ተሳታፊዎች ይህን ከግንዛቤ በማስገባት ቀናና ግልፅ መልስ በመስጠት እድትተባበሩ እንጠይቃችኋለን። ከተሰጡት ጥያቄዎች ውስጥ ትክክለኛ ወይም ስህተት የሚባል መልስ የለዉም።

ማሳሰቢያ:- - ማንኛውም ዓይነት ሚስጥር የተጠበቀ ነው።
- ስም መጻፍ አስፈላጊ አይደለም።
- ምርጫ ላላቸዉ ጥያቄዎች አማራጭ መልሶችን በማክበብና ባዶ ቦታ ለተሰጣቸዉ ደግሞ የራሳችሁን ሃሳብ (መልስ) በመስጠት መልሱ
- በቅድሚያ ከልብ እናመሰግናለን

1. <u>የግል መረጃ</u>

<u>ትዕዛዝ 1</u> :- *ከዝህ በታች ያሉት ጥያቄዎች ስለግል መረጃ የሚጠይቁ ስለሆኑ ምርጫ ላላቸዉ አማራጭ መልሶችን በማክበብና ባዶ ለተቀመጡት ቦታዎች ደግሞ ትክክለኛዉን ቁጥር ወይም መልስ በመሙላት መልሱ።*

1.1. **ዕድሜ** _____

1.2. **ያታ** _____

1.3. **የክፍል ደረጃ** _____

1.4. **ብሔረሰብ**:- ሀ. ወላይታ ለ. ጋሞ ሐ. ኦሮሞ መ. አማራ ሠ. ትግሬ
ረ. ሌላ ከሆነ ይጠቀስ _____

1.5. **የጋብቻ ሁኔታ**:- ሀ. የጋባ/ች ለ. ያላገባ/ች ሐ. አግብቶ/ታ የፈታ/ች

2. <u>የፆታ ግንኙነት ልምድ</u>

<u>ትዕዛዝ 1</u> :- *ከዝህ በታች ያሉት ጥያቄዎች ስለወሲባዊ ግንኙነት ያላችሁን ልምድና ተሳትፎ የሚጠይቁ ስለሆኑ በግልጸኝነት ምርጫ ላላቸዉ አማራጭ መልሶችን በማክበብና ባዶ ለተቀመጡት ቦታዎች ደግሞ ትክክለኛዉን ቁጥር በመሙላት መልሱ:: ጥያቄ 2.4. እና 2.6. ከአንድ በላይ መልስ ሊኖራቸዉ ይችላሉ::*

2.1. እስካሁን ድረስ ከሌላ ፆታ ጋር ወሲብ ፈፅመህ/ሽ ታዉቃለህ/ቂያለሽ?

ሀ. ፈጽምያለሁ ለ. አልፈጸምኩም ሐ. ጥያቄዉን ለመመለስ ፍቃደኛ አይደለሁም

<u>ፆታዊ ወሲብ በፈጸሙት ብቻ የሚመለስ (2.2. - 2.5.)</u>

2.2. ከሌላ ፆታ ጋር ወሲብ ፈፅመህ/ሽ ከሆነ ፅድሜ በስንት ዓመት አከባቢ ነው ወሲብ ለመጀመሪያ ጊዜ የፈፀምሽው/ ከው? ዓመቱ በቁጥር ይገለፅ _____

2.3. ከማንስ ጋር ነበር ይህንን የመጀመሪያ ወሲብ ያደረከው/ሽው?

ሀ. ፍቅረኛዬ ከምለው ሰው ጋር ለ. ከሴተኛ አዳሪ ጋር

ሐ. ከቤት ሠራተኛ ጋር መ. ሌላ ካለ ይገለፅ _____

2.4. ለመጀመሪያ ጊዜ ወሲብ ለመፈጸም ያነሳሳህ/ሽ ምክንያትህ/ ሽ ምንድ ነው?

ሀ. በፍቅር ምክንያት ለ. ተገድጄ ሐ. በአልኮል ተገፋፍቼ

መ. ገንዘብ ለማግኘት ሠ. ጓደኞቼ ሁሉ ስለሚያደርጉ

ረ. ለማወቅ ጓጉቼ ሰ. ሌላ ምክንያት ካለ ይገለፅ_____

2.5. ከመጀመሪያ ወሲባዊ ግንኙነት ጀምሮ እስካሁን ድረስ ከስንት ተቃራኒ (ሌላ) ፆታ ጋር ወሲብ ፈፅመሃል/ሻል? በቁጥር ይገለፅ _____

<u>ፆታዊ ወሲብ ባልፈጸሙት ብቻ የሚመለስ (2.6)</u>

2.6. ወሲባዊ ግንኙነት እስካሁን ካልፈፀምክ/ሽ ምክንያትህ/ሽ ምንድ ነው?

ሀ. ኤች አይ ቪንና ሌላን በሽታ በመፍራት

ለ. ቤተሰቦቼን በመፍራት

ሐ. እስክ ጋብቻ ድረስ ስለምጠብቅ

መ. ባሕሉንና እምነቱን ስለምፈራ

ሠ. አስፈላጊ ነዉ ብዬ ስለማምን

ረ. ሌላ ምክንያት ካለ _____

3. ስለፆታዊ ግንኙነት ስለ ድንግልና እና ስለ ፍቅር ያላቸው እምነት

ትዕዛዝ 3 ፡- *ቀጥለዉ በጥያቄ መልክ ከተቀመጡት ሀሳቦች ጋር ምን ያህል እንደምትስማሙና አንደማትስማሙ ከተቀመጡት አማራጮች ዉስጥ በማክበብ አሳዩ ::*

3.1. በእኔ ዕድሜ ማንኛዉም ፆታዊ ግንኙነት አስፈላጊ ነው ብዬ አላምንም፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.2. ከተቃራኒ (ከሌላ) ጾታ ጋር መጫወትም ሆነ አብሮ መሆን በእኔ ዕድሜ ያሳፍራል፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.3. ሴት እና ወንድ አብረው ሲጫወቱ ሳይ እቀናለሁ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.4. ስለጾታዊ ግንኙነት ከጓደኞቼ ጋር ማዉራት ይከብደኛል፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛ

3.5. ከሌላ ጾታ ጋር ከመዝናናት ይልቅ ተመሳሳይ ጾታ መዝናናት ይመቻል (ይቀላል)፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.6. የማገባው ሰው ድንግል ቢሆን ቅድሚያ ሰጥቼ እመርጣለሁ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.7. አንድን ሰው ለማፍቀር ድንግልና እንደመስፈርት (ቅድመ ሁኔታ) መቀመጥ አለበት ብዬ አምናለሁ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.8. ድንግልናን ለመጠበቅ ሲባል ከጋብቻ በፊት ወሲባዊ ግንኙነት ማድረግ አያስፈልግም፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.9. ድንግልናን ጠብቆ ለጋብቻ መድረስ ለቤተሰቦቼ ክብር ነዉ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.10. ድንግል ሆንኩ አልሆንኩ አያስጨንቀኝም፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.11. ፍቅር ሁለቱን ፆታ ወደ ጋብቻ የሚመራ መንገድ ነው ብዬ አምናለሁ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.12. አንድን ሰው ካፈቀሩ በኃላ ፍቅርን በግልፅ ለተፈቀረው ሰው መናገር የሚከብድ ነገር ነዉ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.13. ለማፈቅረው/ራት ሰው ማንኛውንም መስዋዕትነት እከፍላለሁ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.14. የፍቅር ግንኙነት ከትዳር በፊት አስፈላጊነቱ ለጋብቻ ብቻ ነዉ፡፡

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.15. ፍቅርና ወሲብ ልዩነት የላቸዉም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

3.16. ስለሚሰማኝ የፍቅር ስሜት ሁሉ ለጓደኞቼ አወራለሁ ብዬ አላስብም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

<u>ትዕዛዝ 4</u> ፡ የሚከተሉትን ጥያቄዎች ካነበባችሁ በኃላ በበተሰጡት ክፍት ቦታዎች የራሳችሁን ሃሳብ ስጡ።

1. ድንግል መሆን አስፈላጊ ነዉ ብለህ/ሽ ታምናለህ/ሽ? ለምን? _____

_____

_____

2. ከትዳር በፊት የፍቅር ግንኙነት ከሌላ ዖታ ጋር አስፈላጊ ነው ብለህ/ሽ ታምናለህ/ሽ? ለምን? _____

_____

_____

4. <u>ስለ ግለ ወሲብ (ማስተርበሽን) እና ለወሲብ ያላቸው እምነት</u>

<u>ትዕዛዝ 5</u> ፡- *ቀጥለዉ በጥያቄ መልክ ከተቀመጡት ሀሳቦች ጋር ምን ያህል እንደምትስማሙና አንደማትስማሙ ከተቀመጡት አማራጮች ዉስጥ በማክበብ አሳዩ ።*

<u>ማስተርበሽን ወይም ግለ ወሲብ</u> የሚለዉ ቃል በተደጋጋሚ ቀጥሎ ስለተቀመጠ ትርጉሙም አንድ ሰዉ ሌላ ዖታ ሳይኖር ራሱ በራሱ የወሲብ እርካታን የመግኘት ዘዴ ነዉ።

4.1. ጓደኞቼ ቢሆኑም እንኳን ወሲብ የሚፈፅሙትን እጠላለሁ

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛ

4.2. ምንም የወሲብ ሥሜት ቢኖረኝም መደበቅ አለብኝ ብዬ አምናሁ

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.3. ወሲብን ለመፈጸም ፍቅር ወይም ጋብቻ የግድ አስፈላጊ ነዉ ብዬ አምናለሁ

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.4. በማንኛው ሰዓት የወሲብ ስሜት ቢቀሰቀስ ወሲብን መፈጸም የለብኝም ብዬ አምናለሁ

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.5. በእኔ ዕድሜ ወሲብን መፈፀም ለእኔ የሚያስደንቅ ነገር ነዉ።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.6. እኔ ከጋብቻ በፊት ወሲብን መፈጸም ተገቢ ነዉ ብዬ አላምንም

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.7. ማስተርበሽን (ግለ ወሲብ) መፈጸም ሃጥያት ነው

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.8. *ካጋብቻ በፊት ማስተርበሽን (ግለ ወሲብ) ጥሩ የወሲብ ስሜት መቆጣጠሪያ መንገድ ነው* የሚባለዉን ነገር እኔ አልቀበለዉም

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.9. ማስተርበሽን (ግለ ወሲብ) ካደረግኩ የጥፋተኝነትና የሐፍረት ስሜት ይሰማኛል።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.10. ግለ ወሲብ ልክ እንደ እዉነተኛ ወሲብ ስሜትን ያረካል ብዬ አላስብም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

4.11. ማስተርበሽን (ግለ ወሲብ) ከባሕል ዉጪ ስለሆነ ማድረግ አልፈልግም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5. ያልተፈለገ እርግዝናና ከወሲብ ጋር ተያያዥ ለሆኑ በሽታዎች ያላቸው እምነት

ትዕዛዝ 6 :- ***ቀጥለዉ በጥያቄ መልክ ከተቀመጡት ሀሳቦች ጋር ምን ያህል እንደምትስማሙና አንደማትስማሙ ከተቀመጡት አማራጮች ዉስጥ በማክበብ አሳዩ ::***

5.1. ያልተፈለገ እርግዝና የተወገዘ ነገር ነዉ።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.2. ዋናዉ የወጣቶች ዓላማ መሰናክል ምክንያት ያልተፈለገ እርግዝና ነዉ ብዬ አምናለሁ።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.3. ያልተፈለገ እርግዝናን ስለምፈራ ብቻ ወሲብን አልፈፅምም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.4. ያልተፈለገ እርግዝና የሚያስደንቅ ነገር አይደለም ምክንያቱም ሁሉም ወጣት የሚያደርገዉ ነዉ

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.5. ወሲብን መፈጸም ዋነኛው የኤች አይ ቪ መተላለፊያ መንገድ ነው ብዬ አምናለሁ።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.6. ወሲብን ከመፈጸም በፊት የደም ምርመራ ማድረግ ዋናና አስፈላጊ ነገር ነው ብዬ አስባሁ።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.7. ከወሲብ ጋር ተያይዞ ከሚመጣ በሽታ ወሲብን ጨርሶ ሳይፈፅሙ መኖር ይሻለኛል።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.8. ከወሲብ ግንኙነት ጋር ተያይዞ የሚመጣ በሽታን ለመከላከል ዋነኛዉ መንገድ መቆጠብ ነዉ (ከ "መ" ሐሳች ወስጥ) ::

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

5.9. ከወሲብ ጋር ተያይዞ ከሚመጣ በሽታን ስለምፈራ ብቻ ወሲብን አልፈፅምም።

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. ለመወሰን ይከብደኛል

<u>ትዕዛዝ 7</u> ፡ የሚከተሉትን ጥያቄዎች ካነበባችሁ በኃላ በበተሰጡት ክፍት ቦታዎች የራሳችሁን ሃሳብ ስጡ።

1. ወሲባዊ ግንኙነት ከጋብቻ በፊት መፈቀድና መኖር አለበት ብለህ/ሽ ታምናለህ/ሽ? ለምን?_____

_____

_____

2. ማስተርበሽን (ግለ ወሲብ) ጥሩ ነዉ ወይስ መጥፎ ነዉ? ለምን? _____

_____

_____

6. <u>የመረጃ ምንጮች</u>

<u>ትዕዛዝ 8</u> ፡- ስለፆታዊ ግንኙነት የመረጃ ምንጭ በተመለከተ ቀጥለዉ የተቀመጡትን ሀሳቦችን (ድርጊቶችን) ለምን ያህል ጊዜ እነደምታዘወትሩ ከተቀመጡት አማራጮች ዉስጥ በማክበብ አሳዩ ።

5.1. ከአባቴ ጋር ስለፆታዊ ግንኙነት እነጋገራለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.2. ከእናቴ ጋር ስለፆታዊ ግንኙነት እወያያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.3. ከወንድሜ ጋር ስለፆታዊ ግንኙነት እነጋገራለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.4. ከእህቴ ጋር ስለፆታዊ ግንኙነት እወያያለሁ ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.5. ፆታዊ ጉዳይን በተመለከተ ከአያቶቼ ጋር እወያያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.6. በቲቪ ፆታዊና ስለስነተዋልዶ ጉዳዮችን እከታተላለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.7. በሬዲዮ ስለፆታዊ ግንኙነት እከታተላለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.8. በኢንተርኔት ስለፆታዊ ግንኙነት እከታተላለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.9. በተቃራኒ ጾታ ላይ የሚያተኩሩ ፊልሞችን አያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.10. ጋዜጣና መፅሔት ስለፆታዊ ግንኙነት ጉዳዬች አነባለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.11. በትም/ቤት በኤች አይ ቪ. ክበብ እሳተፋለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.12. በትም/ቤት ከመምህራን ጋር በጉዳዩ ዙርያ እወያያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.13. የተለያዩ መፅሐፍትን በጉዳዩ ዙሪያ አነባለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.14. በክፍል ውስጥ ስለፆታዊ ግንኙነት በትምህርት መልክ አገኛለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.15. ከጓደኞቼ ጋር ስለፆታዊ ግንኙነት እወያያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.16. በክፍል ውስጥ ካሉ እኩዮቼ ጋር ስለፆታዊ ግንኙነት እወያያለሁ።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.17. ከሰፈር ልጆች ጋር በጉዳዩ ዙርያ እንነጋገራለን።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

5.18. በጣም ቅርብ ከሆነ ጓደኛዬ ጋር ስለፆታዊ ግንኙነት እንነጋገራለን።

ሀ. ሁል ጊዜ ለ. አልፎ አልፎ ሐ. ፈፅሞ አላደርግም

<u>ትዕዛዝ 9</u> ፡ የሚከተሉትን ጥያቄዎች ካነበባችሁ በኃላ በበተሰጡት ክፍት ቦታዎች የራሳችሁን ሃሳብ ስጡ።

1. ሃይማኖት ስለፆታዊ ግንኙነት ያለህን/ሽን አመለካከት ሁሌም ተፅኖ ያደርጋል ብለህ/ሽ ታስባለህ/ሽ? አንዴት? _____

_____

_____

2. ስለፆታዊ ግንኙነት መረጃ የምታገኙበትን 3 ዋና ዋና ቦታዎችን ወይም መንገዶችን በቅደም ተከተል ዘርዝራቸዉ።

1._____ 2._____ 3._____

17. ያለህበት/ሽበት ባሕል ሴትና ወንድ በጋር እንዲጫወቱና እንዲዝናኑ ይፈቅዳል? ለምን?

_____

_____

_____

Declaration

I, undersigned, declare that this thesis is my original work and that all sources of material used for this thesis have been duly acknowledged.

Name TEMESGEN LEA

Signature

Place Addis Ababa University

Date of submission 14/07/2009

I, undersigned, declare that this thesis has been submitted for examination with my approval as a university advisor.

Name Belay Tefera

Signature

Place Addis Ababa Univ.

Date 14/7/2009