



**ADDIS ABABA UNIVERSITY
COLLEGE OF HEALTH SCIENCES
SCHOOL OF PUBLIC HEALTH**

**RISKY SEXUAL PRACTICES AND ASSOCIATED FACTORS AMONG
DAY TIME AND EVENING SHIFT OF POLYTECHNIC COLLEGE
STUDENTS IN ADDIS ABABA: THE CASE OF NIFAS SILK
POLYTECHNIC COLLEGE**

**A THESIS SUBMITTED TO ADDIS ABABA UNIVERSITY, COLLEGE OF
HEALTH SCIENCE, SCHOOL OF PUBLIC HEALTH IN PARTIAL
FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF
MASTERS IN PUBLIC HEALTH**

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Board of Examiner's (BE) Approval Sheet

As members of the examining board of the final MPH open defense, we certify that we have read and evaluated the thesis prepared by Wase Wale entitled, **risky sexual practices and associated factors among day/regular and evening/extension shift of polytechnic college students in Addis Ababa with the case of Nifas silk polytechnic college in 2019, Addis Ababa, Ethiopia** is accepted as fulfilling the thesis required for the degree of Masters of Public Health.

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Final approval and acceptance of the thesis is contingent upon the submission of the final copy of the thesis to the School of Graduate Council (SGC) of the candidate's Major Schools.

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Table of Contents

Contents page

Acknowledgment	ii
Table of Contents.....	i
Contents page	i
List of Tables	ii
List of Figures	iii
Abstract.....	iv
Abbreviations.....	v
1 Introduction	6
1.1 Back ground	6
1.2 Statement of the Problem	7
1.3 Significance of the study	9
2 Review of Literatures	10
2. Objective of the study	16
2.2. General Objective	16
2.3. Specific Objectives	16
3. Methods and Materials.....	17
4. Result	22
4.1. Socio-demographic characteristics among day and night shift students	22
4.2. Sexual practices among day and night shift students.....	23
4.3. Risky sexual Practices.....	25
4.4. Risk factors among day and night shift students	26
4.5. Association of risk factors with risky sexual practices	28
5. Discussion	30
6. Strengths and Limitations of the Study	33
7. Conclusion.....	34
8. Recommendation.....	35
9. References	36
10. Annexes.....	40

List of Tables

Table1:Socio -demographic characteristics of participants on survey of risky sexual practice and associated factors among day time and evening shift of Nifas Silk polytechnic college Students in Addis Ababa, April 2019.....	22
Table 2: Comparison of risky sexual practices among day and night shift students of Nifas silk Polytechnic College, Addis Ababa, April 2019	25
Table 3: Association of risky sexual practices with risk factors among Nifas Silk Polytechnic College students, Addis Ababa, April 2019	28

List of Figures

Figure 1: <i>Conceptual frame work of the risky sexual practices and associated factors adapted from various sources with modifications to suit the inquiry</i>	15
Figure 2: Schematic Presentation for sampling procedures among day time and night shift students of Nifas Silk Polytechnic college, Addis Ababa, Ethiopia, 2018/19.....	19
Figure 3: Major reason reported for first sexual initiation by day and night shift students of Nifas Silk polytechnic college in Addis Ababa, April 2019	23
Figure 4: Type of contraceptive method used among day and night shift students of Nifas Silk Polytechnic College in Addis Ababa, April 2019	24
Figure 5: Type of substances abuse used/consumed among day and night shift students of Nifas Silk Polytechnic College in Addis Ababa, April 2019	26
Figure 6: Type of social media used among day and night shift students of polytechnic College in Addis Ababa, April 2019.....	27

Abstract

Introduction: Risky sexual behaviors are any practices that increase the probability of adverse sexual and reproductive health. Most college adolescent and young aged 15–24 years are at particularly high risky sexual practices and often characterized by a new-found sense self-government, experimentation with sex and a feeling of invincibility.

Objective: To compare the magnitude of risky sexual practices and associated factors among day/regular and evening/extension shift of polytechnic college students in Addis Ababa with the case of Nifassilk polytechnic college.

Method and material: A comparative cross sectional study was conducted from March 27-April 15, 2019. A stratified sampling technique was used based on type of schooling (day and evening time) and then, allocation of sample was proportionally distributed to respected study levels based on number of students. Study participants were selected using simple random sampling technique. Two population proportion formulas were used to calculate a total sample size of 486 students (243 day/regular and 243 night/extension students). Data was summarized using descriptive statistics including mean, proportion and standard deviation and inferential statistics such as chi-square test and binomial logistic regression. Ethical clearance was obtained from Addis Ababa University School of Public health.

Result: A total of 442 students (227 regular/day time and 215 extension/evening shift) participated in the study making the response rate 90.9%. The prevalence of risky sexual practice among regular/day and extension/evening shift students were 34(15%) and 75(34.9%), respectively and the overall prevalence for both type schooling was 109(24.7%). The difference between the two categories is statistically significant ($p < 0.05$). In this study, among those students who had practiced premarital first sexual intercourse, 40(66.6%) and 58(61%) of them had not used condom respectively for day and night time shift students.

Conclusion: The study depicted that the prevalence of risky sexual practice among night/evening time students is more than twofold of the prevalence among day time students. The schools and other actors need to address both type of schooling with adolescent and youth friendly risk reduction interventions by giving due emphasis to evening/extension students.

Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
HB	Health Bureau
EDHS	Ethiopian Demographic and Health Survey
FSW	Female Sex Worker
HAPCO	HIV/AIDS Prevention and Control office
HIV	Human Immunodeficiency Virus
HTS	HIV Testing Services
IEC	Information and Education Communication
NGO	Non-governmental organization
RSP	Risky Sexual practices
SBC	Social and Behavioral Change Communication
SNNPR	South Nation and Nationalities people Region
SEM	Sexual Explicit Materials
SRH	Sexual and Reproductive Health
CSO	Civil Society Organization
STI	Sexually Transmitted Infection
SD	Standard Deviation
TVET	Technical and Vocational Education Training
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
WHO	World Health Organization

1 Introduction

1.1 Background

Nearly 50% of the global population is less than 25 years old and 90% of them lives in developing countries. In Sub-Saharan Africa youths constitute 20-30% of the population(1). Most college students are adolescents and young adults, a group often characterized by a new-found sense self-government, experimentation with sex and sometimes drugs and a feeling of invincibility(2).

Studies in Africa and elsewhere indicate that students of higher institutions are exposed to many risky behaviors including substance use, sexual coercion and unprotected sex which predispose them to STIs including HIV/AIDS, unwanted pregnancy and abortion(3)

Moreover, different literatures also show youths risky sexual practices are associated with various factors, including biological (like age & sex), social (gender, education, knowledge and attitude), economic status, environmental factors (exposure to sexual explicit sites through internet use) and going to school in the evening/night time are among the most common factors(4)

Ethiopia is the second most populous nation in Africa. About 83% of the population lives in rural areas, and one-fifth are aged 15-24 years. Risky sexual behaviors may be worsened by the fact that college students are subjected to wide spread substance use and peer-pressure that aggravate the risky behaviors. They are exposed to many risky behaviors including sexual coercion, STI including HIV/AIDS and abortion like other youths. Even though, little has been explored about the risky sexual practices in the context of polytechnic college students; it has been mostly focused on day time school class attendants and it rarely touched students who are going school at night/evening time in Ethiopia(5).

Therefore, conducting an assessment on this area will provide valuable information in comparing about risky sexual practices and its predisposing/risk factors among night/evening and day time school students in polytechnic college students in Addis Ababa with the case of Nifas Silk Polytechnic college. Based on the findings, the study will be recommended appropriate behavioral intervention strategies for night/ evening and day time school students.

1.2 Statement of the Problem

According to World Health organization data, there are more than 1 million STIs are acquired every day due to unsafe sexual practices. Each year, there are estimated 357 million new infections with 1 of 4 STIs and every year, an estimated 21 million girls aged 15 to 19 years and 2 million girls aged under 15 years become pregnant in developing regions and approximately 16 million girls aged 15 to 19 years and 2.5 million girls under age 16 years give birth in developing regions(5).

There is also another horrifying fact that stated in the UNICEF global report in 2017, about 1.8 million adolescents between the ages of 10 and 19 were living with HIV worldwide. Adolescents aged 15 to 19 accounts for an estimated 16 per cent of new adult HIV infections worldwide. Globally, in 2017, adolescent girls accounted for two thirds of all new HIV infections among adolescents. In sub-Saharan Africa that year, nearly three times as many adolescent girls were newly infected with HIV than adolescent boys(6).

In a school based study done in Brazil shows more than a quarter of the adolescents has had sexual intercourse in life and among which 20% did not use condom in the last intercourse. Of which whoever had sex without the use of condom at their last intercourse (7.9% among boys and 4.8% among girls) (7)

The same school based study in Argentina in city of Buenos Air shows that girls that attend the evening shift are between 17% and 21% more likely to have initiated sexually by the age of 18 relative to girls going to school at daytime. In this study, girls going to high school at night are between 7.5% and 8.5% more likely to have got an abortion relative to girls attending school during the day(6).

According to Ethiopian Demographic and Health Survey (EDHS 2016) among young female aged 15-24 years mean number 1.3 who ever had two or more sexual partners while for the same age group of male 2.4 had two or more life sexual partners. This survey also stated that 24 percent of women aged 15-24 and 39 percent of men aged 15-24 have comprehensive knowledge of HIV. Significant proportions of young women (40%) and men (12%) 15-24 have sex before age 18. Nine percent of young men and three percent of young women had intercourse with a non-marital, non-cohabiting partner in the last 12 months(8)

Several studies conducted in Ethiopia also documented certain common practices/behaviors that most likely place school adolescents and youth at greater risk of HIV infection and other SRH complications. These include early sexual initiation, sex with an infected person, inconsistent condom use, substance use, multiple sexual partners, exposure to sexual explicit sites through internet etc.(9).

Higher education institution including polytechnic college in Ethiopia mostly host young people aged between 16 -20 years. This age group is often sexually active and among the most vulnerable and at risk of HIV infection(10). Factors including surrounding hotspots, peer pressure, going school at night, formation of new social groups, lack of adequate information, intense academic pressures and the balancing of social activities with academic and other life responsibilities greatly contribute to the increased risk of these young people to the epidemic of HIV.

Prevention efforts in tackling the spread should focus on addressing gaps in programs and services and intensify efforts to reach both day time and night shift vulnerable college students. These efforts should also target many of the behavior-related riskfactors in youth friendly way for the HIV epidemic and other SRH problem(2,9,11)

In Ethiopia HIV/AIDS and Sexual reproductive health minumim intervention package has been designed and being implemented in primary and secondary level education. However, different studies showed that the trend for comprehensive knowlege on HIV prevention is still found at low er level. According to EDHS 2016, adolecents who correctly identify ways of preventing transm ission of HIV and reject major misconceptions about HIV transmission were 24 and 35 percent r espectively (12). The current HIV/AIDS strategic plan (2015- 2020) aslo stated that school HIV program is neither comprehensively guided as per the minimal school HIV prevention package nor performance is adequately tracked(13).

Thus, the aim of this study will show magnitude of risky sexual practices among night and day time school students in comparative way. The study also identified associated factors of risky sexual practices which will be important for policymakers and programmers in designing evidence informed friendly interventions both for day time and night school programs.

1.3 Significance of the study

Many studies have been conducted on risky sexual practice among day time shift students of high school and college level in Ethiopia. However, risky sexual practice and associated factors among evening/night shift school students have not been studied and compared. Therefore, this study was tried to compare the prevalence of risky sexual practices in day time and evening/night shift of polytechnic college students in Addis Ababa with the case of Nifas Silk Polytechnic College. It was also tried to determine factors that affect risky sexual practice among Nifas Silk polytechnic college students.

The findings from this study will help to inform policy and decision makers to take relevant actions based on evidence. The final report of the study will be communicated with the college, Addis Ababa city administration Health bureaus/HIV/AIDS prevention and control office and TVET agency and other relevant stakeholders. In so doing, the study will be anticipated to contribute in designing better intervention strategies/programs. Moreover, the study adds to the existing body of knowledge on risky sexual practices for use of the scientific community.

2 Review of Literatures

The literature review discusses the concept of prevalence of risky sexual practices and associated factors.

2.1. Magnitude of risky sexual Practices

A systematic review and meta-Analysis conducted in developing Countries shows that of 19,148 male youths who reported having sexual intercourse in the 12-month period prior to the survey, 75.2% practiced higher-risk sex (93% and 67% in age of 15–19 years and 20–24 years, respectively.). The proportion of higher-risk sex among male youth aged 15–19 years was nearly 90% in all countries studied except Cambodia, Ethiopia, Nepal, Niger, and Vietnam(14).

Another systematic review and meta- analysis conducted in Ethiopia for a total of 43,695 participants reported 42.80% pooled prevalence of risky sexual practice. This analysis identified substance use, peer pressure and watching pornography as common factors associated with an increase in risky sexual practices(15).

2.2. Sexual Practice and Partners

Studies done on sexual practices of adolescents and youth in Ethiopia have revealed that significant number of young people practice unsafe sex. The studies have shown that initiation of first sex by Ethiopian young people to go as low as 16 years for both boys and girls. Some studies even indicate the sexual initiation for girls to be 6-7 years earlier than boys(12).

Research conducted on students in Jimma University showed, above quarter, 26.9% of respondents ever had sexual intercourse, among them 32.5% of them males and 12.7% of them were Females. Male respondents were found three times more likely to ever had sexual intercourse as compared to females (16).

Some studies have shown common predisposing factors comprising risk factors known as the drivers of HIV/AIDS that expose individuals to risky sexual behavior and HIV infection. A study conducted among Dilla University under graduate students identified unprotected sex, sexual experimentation on the campus and out-of campus, and multiple sexual partnerships as high risky sexual behaviors (17).

Study done in Addis Ababa University showed that 39% reported to have had sexual experience at the time of the survey with of which 13.5% of 39% were females. The mean age at first sexual intercourse was 17.6 (1.9) for males and 17.3 (2.0) for females. This study showed that proportion of early sexual initiation is 27.4%. Among the sexually active students, 70.4% had

their first sexual intercourse before the age of 18 years and 30.6% of the sexually active respondents had sexual experience after they join university. According to this study 40% of the sexually active respondents claimed that the main reason for the initiation of sexual intercourse was falling in love, 22% sexual desire and 19.1% had sexual initiation due to peer pressure. Almost half of sexually experienced students reported their first sexual partner with the same age while 19.6%, 16.4% had first sexual encounter with five years older and younger age partners, respectively. This study showed 86.3% of sexually experienced students, their first sexual partner was with their boy/girlfriend, 5.4% experienced sex with their future married or actually married spouse, 4% had sexual experience with commercial sex workers and the number of life time sexual partners they had, most sexually active participants, 54.6% had only one sexual partner while 45.4% had two or more life time sexual partners(18).

The study conducted in Gondar University, College of medical science students revealed that 56.1% were sexually active. Among the sexually active students, 37.1% ever used condom. Contact with commercial sex worker was reported by 8.1% students(19).

2.3. Sex for exchange of money/items

A meta-analysis study done in 28 third world countries demonstrated that women who were educated to secondary or above, living in urban areas and having better wealth were found 6 engaged in risky sexual practice than their counterparts irrespective of the geographic location of the studied countries (14).

However, different studies revealed that significant number of youth engaged in risky sexual behaviors for exchange of money/ items. Different studies done in high schools showed that significant proportion of sexually active young people ever had sexual intercourse with non-regular partner for the sake of money 46 (18.9%) and among those 22 (7.4%) had sex with sex workers(20,21).

In a study done at Mizan-Tepi University focus group discussions (FGDs), most of the study participants indicated, some of the female students that had multiple sexual partner had sex for the welfares of grade, economic support to be non-cafe and dormitory, and to satisfy their sexual pleasure were among the reasons(9).

In a study done at Haramaya University of 355 (28%; 95% CI 25.5-30.5) students who had had sexual experience half of the males had intercourse with a commercial sex worker and about 60% of them have not use condom consistently(10).

2.4. Factors associated with risky sexual practices

Different studies show that demographic factors (age, sex, religion, ethnicity, occupation, income, living attachment), risk factors Peer pressure, exposure to sexual explicit sites through internet, night clubs/day parties, substance use like alcohol, khat, shisha, tobacco and cigarette, and unfriendly youth sexual reproductive health service were identified as major predictors of risky sexual practices(7,16,22).

Besides to this, a study done in Bahir Dare University revealed Khat chewing, drinking alcohol, attending night clubs and watching porno videos independently associated with likely hood of ever had sex and having multiple sexual partners(22).

2.4.1. Socio-demographic

Different studies showed that socio-demographic characteristics influence risky sexual practices of adolescents. A meta-analysis of risky sexual behavior among male youth in twenty developing countries done shows that age, educational and economic status associate with male youth aged 15–19 were more likely to engage in higher-risk sexual activity than those aged 20–24 years. Among those, male youth living in urban areas who had completed secondary education and belonged to the middle to the highest economic status engage in risky sexual practice(14).

Another study done in Nigeria also shows that students between ages 10- 14 years were 1.5 more likely to practice risky sexual behavior than those between the ages of 15 - 19 years. Male students were found to be more likely to engage in risky sexual behavior than female students(21).

Another cross sectional school based study done at Gurage Zone, Ethiopia revealed that study participants whose age is between 15- 19 years were three times at risk of having risky sexual behavior than age group above 20 years(23).

2.4.2. Inconsistent use of condom

A review of studies done on sexual behavior of in-school youth in sub-Saharan Africa prevailed that high prevalence rates of sexual intercourse and significant proportions of adolescents who have two or more lifetime sexual partner are not use condoms and other contraceptives frequently. According this review, condom use during youths' most recent higher-risk sexual encounter was 40% and 51% among 15–19-year-olds and 20–24-year-olds, respectively(14).

A study done at Mizan- Tepi University revealed that among 304 students that ever had sex, 211 (69.4%) of them never used condom in the last 12 months of campus stay and being multiple sexual partner reduce the probability of using condom by half (9). The reason for having sex

without condom was trusting one's partner, 43(30.3%) followed by condom is not comfortable 30(21.1%) are among the leading reasons (16).

2.4.3. Substance Use

Studies show that substance use suppresses the ability of thinking and judgment that leads to risky sexual behaviors. A study done on alcohol use and risky sexual behavior among College students and youth in University of Missouri-Columbia, drinking was strongly related to the decision to have sex and to indiscriminate forms of risky sex (e.g., having multiple or casual sex partners), but was inconsistently related to protective behaviors like condom use(26).

A study done among preparatory students in Gurage zone SNNPR showed that Khat was the most dominant and familiar type of substance used by 86.7% of the students was used khat and about 13% of male students consume alcohol to arouse sexual intercourse(23). Jimma University students used to attend nightclub had two times more likely to ever have sexual intercourse as compared to non-attendants(16). According to study conducted in Gamo - Gofa zone, early sexual initiation also positively associate with being not employed, not having comprehensive knowledge on HIV/AIDS, alcohol and khat use(27).

A cross-sectional study done among high school students in Addis Ababa shows that students who use substance like alcohol, khat and cigarette/shisha were more likely to have risky sexual practice than those who didn't chewing Khat and alcohol consumption was significantly associated with a higher number of risky sexual practices (28).

In general the study done among college students about sexual initiation and associated factors is very important, because of the fact that college students are subjected to wide spread use of substance, peer-pressure, formation of new social groups and lack of adequate information that aggravate the problem. Unplanned sexual activity and its outcomes elicit more social stigma and disapproval for girls than for boys.

2.4.4. Exposure to sexual explicit site through Internet

A study conducted in Los Angeles Unified School District high schools showed that those who reported using the internet 40.54% reported having ever had sex including vaginal, anal or oral sex type. In this study those sexually active youth who reported using internet ,63.62% of them reported using a condom at last sex and over 15% reported having sex with someone they met online and of those 66.52% reported using a condom the last time they had sex with an internet-met partner(29).

An Assessment conducted on exposure to Internet Pornography and Associated Risky Sexual Behavior among Undergraduate Students of Benue State University in Nigeria found that 88.0% 71.4% and 56.4% of the participants practiced what they watched, became addicted to sex, and record the video and send to friends/colleagues respectively(30). Another cross sectional study done in Southwest Nigeria urban district revealed that 19.5% of the respondents practiced what was seen and of these 48.3%, 18.3%, 11.6% and 5.0% practiced oral sex, body tattoo, having multiple sexual partners and homosexuality respectively(31). A research done on internet and sexual risk behavior for HIV/AIDS in young people in north eastern Mexico indicated that among respondents who reported using the internet, 74.7%, 59% and 27.9% of them had had vaginal sex, oral sex, and anal sex respectively(32).

A study done among Addis Ababa University students also evidenced that respondents who did not view pornographic video were 1.598 times more likely to practice the main HIV prevention methods than those who viewed pornographic video(33).

2.4.5. Night clubs/day parties

Researches evidences show that attending night clubs/day parties associated with risky sexual behaviors. For instance, a cross sectional study carried out among students at Bahir Dar University shows that the proportion of study participants who attending night clubs are 130 (15.8%)(22).

Therefore, this study will provide information on the current sexual activities of students in Nifas silk polytechnic college and the results will be used to take appropriate measures by the different stakeholders and as first hand reference for those who need to further study in this area. The aim of this study is to assess risky sexual practice and predisposing factors for HIV and SRH problems among day time and evening /night shift of Nifas silk Polytechnic college students.

2.5. Conceptual Framework of the study

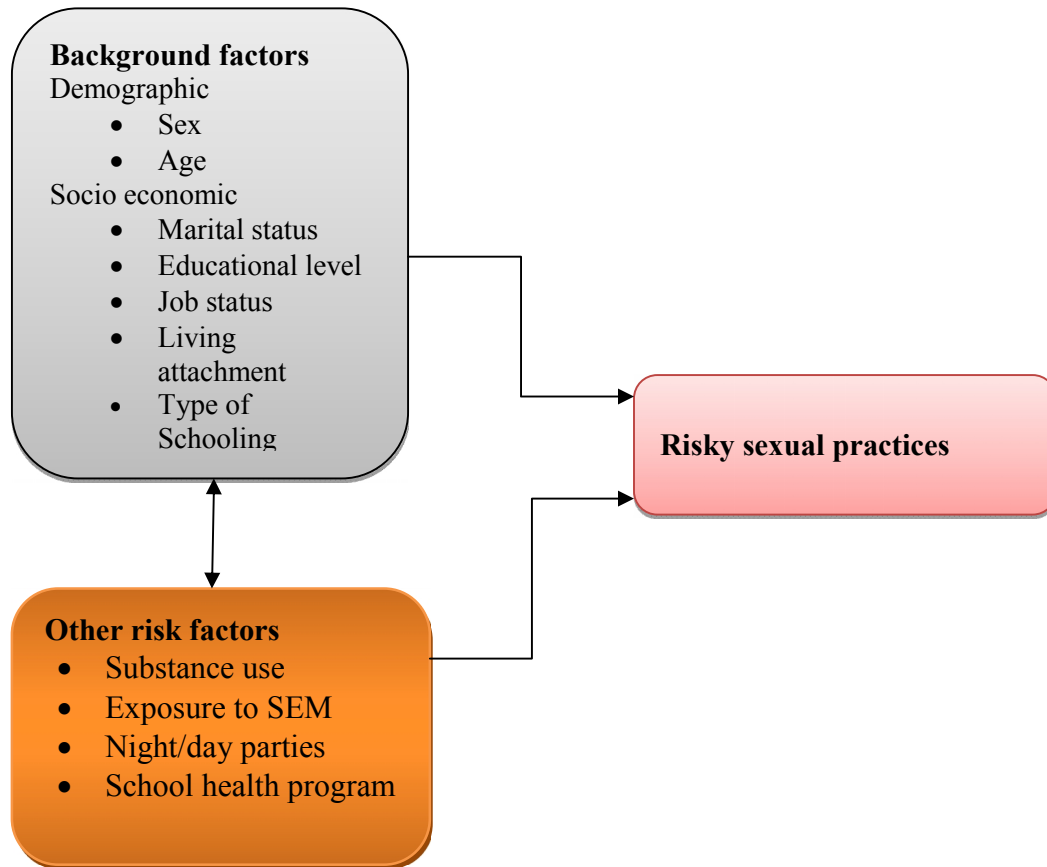


Figure 1: Conceptual frame work of the risky sexual practices and associated factors adapted from various sources with modifications to suit the inquiry

2. Objective of the study

2.2. General Objective

To assess the magnitude of risky sexual practices and associated factors among day and evening shift of polytechnic college students in Addis Ababa with the case of Nifas silk polytechnic college 2018/19.

2.3. Specific Objectives

- To compare level of risky sexual practice among day time and night shift students of Nifas silk polytechnic college.
- To identify factors associated with risky sexual practices for among day time and night shift students of Nifas silk polytechnic college

3. Methods and Materials

3.1. Study area and Period

The study was conducted in Nifas silk Polytechnic College from March 27 to April 15, 2019 which is located in Addis Ababa City Administration in Nifas silk Sub-city. According to CSA 2017 population projection, the total population of Addis Ababa is estimated to 3,434,000(34). There are a total of 30 TVET (6 are found at Polytechnic level and the rest are found at Institution level) in Addis Ababa city.

Nifas silk polytechnic college is relatively enrolled large number of students than others polytechnic. According recent data obtained from the registrar of the college, the total population of students is estimated around 4,669 (2,469 day time and 2,224 evening shift students). It is also surrounded relatively by high slum hot spot areas which most likely put the students at risky sexual practices.

3.2. Study Design

Comparative cross-sectional study design was employed by stratifying students (both for day time and night shift) in to level I to V for assessment of existing problem. The assessment depended on primary data collection method using structured questionnaire

3.3. Population of the study

3.3.1. Source population

The source population for this study was all regular/day time and night/evening shift students ranging from level I to V of Nifas silk polytechnic college

3.3.2. Study population

Selected regular/day time and night/evening shift students of Nifas Silk polytechnic college

3.4. Inclusion and Exclusion Criteria

3.4.1. Inclusion Criteria

- All night and day time shift students who were attending at Nifas Silk polytechnic college

3.4.2. Exclusion Criteria

- Students who were absent during data collection periods

3.5.Sample Size

The sample size for this study has determined using STATA statistical software and a decision has been made to detect a 10 % difference between day time and night/evening shift students where p_1 = the proportion of day time shift students who have inconsistent condom use is taken as 15.6% based on a recent study conducted among high school and preparatory students in Addis Ababa (35). Hence, p_2 = the proportion of night/evening shift students who have similar practice is taken as = 25.6 %, which means ($P_2 - P_1 = 10\%$). At 95 % confidence level and 80 % power and 10% nonresponse rate, the final sample size for each group is found to be **243**.

3.6.Sampling Technique

Using quantitative method, Students were stratified based on school attending shift (day and evening time) and then, allocation of sample will be proportionally distributed to respected study levels based on number of students. Finally students were selected from each level of study by simplerandom sampling method by taking list of students of each department of all levels from the office of the registrar.

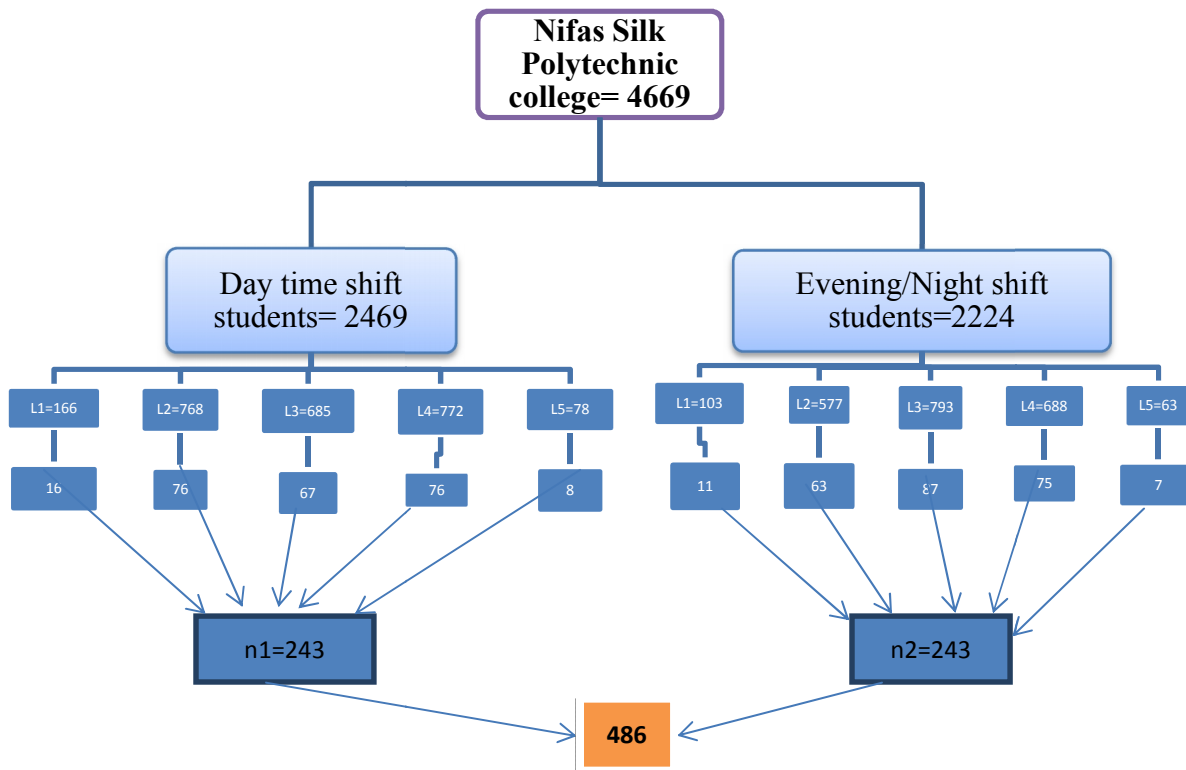


Figure 2: Schematic Presentation for sampling procedures among day time and night shift students of Nifas Silk Polytechnic college, Addis Ababa, Ethiopia, 2018/19.

3.7.Study Variables

3.4.1. Dependent variable

Risky sexual practice

3.4.2. Independent variables

- Demographic and socio-economic characteristics of the students (age, sex, religion, marital status, living condition, job status)
- Other associated factors including Substance abuse (alcohol, cigarette, khat, shisha, hashish), exposure to sexual erotic materials, visiting day/night party & use of social media (face book, you tube, instagram& twitter)

3.8.Operational definitions

Risky sexual practice: a student having any one of the following practices:

- Inconsistent condom uses with non-sexual partner,
- practice multiple sexual partner,
- Having sex with FSW &
- Having sex with nonsexual partner for getting money or other benefits

Early sexual initiation: According to this study, it is defined as having sexual intercourse before the age of 18 years or starting sexual practice.

Inconsistent condom use -report of having sex with irregular use of condom

Sex with FSW:ever making of sexual intercourse with a female who performs sex with any people in exchange for money or gift.

Multiple sexual partners: having +2 sexual partner

Substance abuse- According to this study, it is defined as ever use of psychoactive stimulants or being addicted with use of that substances like alcohol, Khat, cigarettes, Shisha, Hashish etc.

Polytechnic college: is an institution offering education from level one to level five in wide spectrum of subjects which are predominantly technical in nature. Students are mainly joining after completing grade 10 and some from preparatory schools.

Day time shift students: students who are attending school class and going back to their home in the part of the day when there is natural light.

Evening/night shift students: students who are attending school class and going back to their home in daily period of darkness specifically the period between sunset and bed time.

3.9.Data Collection procedures and data collection tools

The quantitative data was collected using structured self-administered questionnaire. It was prepared in English, then translated to local language Amharic and then translated back to English and checked for consistency. The questionnaire was pretested and Students who were selected to fill the questionnaire was assembled in separate rooms after permission obtained from the respected teachers and filled the questionnaire on similar day to avoid information contamination. One day training was given for 3 data collector facilitators.

During the time of data collection, data collection facilitators and supervisors was assigned on the selected sections. The students were requested to read the consent form carefully to get informed verbal consent before they will be enrolled in the study. After getting informed consent questionnaire was distributed to the students. The facilitators were oriented the students about how to fill the questionnaires properly, answering any inquires or difficulties from the respondents honestly without making any bias.

3.10. Data quality management

Data collectors were recruited and trained on the data collection tool and procedures by the researcher. The structured questionnaire was pre-tested in at different similar setting before the commencement of the actual data collection. The questionnaire was assessed for its consistency, clarity, understandability, completeness, reliability and adherence to the objective of the study. Then the questionnaire was self-administered by the data collectors after consent was assured. The participants were instructed to fill the questionnaire without writing their name. Instruction was given to fill the questionnaire honestly.

3.11. Data Processing and Analysis

Prior to data entry, questionnaire was checked for completeness and consistency, coded and next data was entered in to epi data version 3.1 then imported to SPSS version 22 software package. Data cleaned by doing simple frequency and cross tabulation. A composite variable for measuring risky sexual practices was computed by combining having more than one sexual partner, inconsistent use of condom, sexual act with FSW and having sex with nonsexual partner for getting money or other benefits. Cross-tabulation and correlation analysis was carried out to gain more specific information about the relationship between these variables using multivariate logistic regression. Unadjusted and adjusted (AOR) odds ratios were used as indicators of the strength of association. Bivariate logistic regression analysis was done and variables with p-value less than 0.05 were included in the multiple logistic regression analysis.

3.12. Ethical consideration

Ethical approval of this study was obtained from Addis Ababa University College of Health Science School of Public health, Ethical Reviewing Committee. Informed verbal consent was also obtained or secured from the study participant prior to the administration of the questionnaire, and confidentiality was strictly kept.

3.13. Dissemination of results

After validation, the study result will be disseminated for all behavioral intervention stakeholders in the college and published national and international journals.

4. Result

4.1.Socio-demographic characteristics among day and night shift students

A total of 442 students, both from day time and night/evening shift students completed the questionnaire yielding a total response rate of 90.9%. Among these respondents, both day time and nightshift students, a larger proportion (247 (55.9%) and 389 (88) are females by sex and single by marital status respectively. The mean age of the study population was 20.8 years (+SD 3.4), ranging from 15 to 32 years. Orthodox Christianity was the dominant religion consisting of 77.8%. Among the respondents 61.5% of the students were living with their parents (**Table 1**).

Table1:Socio-demographic characteristics of participants on survey of risky sexual practice and associated factors among day time and evening shift of Nifas Silk polytechnic college Students in Addis Ababa, April 2019

Socio demographic		Type of Schooling		Total n (%)
Variables (n =442)		Day time shift students (n=227)	Night time shift students (n=215)	
Sex	Male	103 (45.4%)	92 (42.8%)	195 (44.1%)
	Female	124 (54.6%)	123 (57.2%)	247 (55.9%)
Age	15-19 years	161 (70.9%)	47 (21.9%)	208 (47.1%)
	20-24 years	62 (27.3%)	96 (44.7%)	158 (35.7%)
	>24 years	4 (1.8%)	72 (33.5%)	76 (17.2%)
Your marital status	Single	220 (96.9%)	169 (78.6%)	389 (88.0%)
	Married	3 (1.3%)	40 (18.6%)	43 (9.7%)
	Others	4 (1.8%)	6 (2.8%)	10 (2.3%)
Religion	Orthodox	180 (79.3%)	164(76.3%)	344 (77.8%)
	Muslim	17 (7.5%)	14 (6.5%)	31 (7.0%)
	Protestant	21 (9.3%)	24 (11.2%)	45 (10.2%)
	Others	9 (0.4%)	13 (6.0%)	22 (5.0%)
Educational status of mother	Illiterate	34(15%)	33(15.3%)	67(15.2%)
	Read & Write	45(19.8%)	107(48.9%)	152(34.4%)
	Grade 1-8	66(29.1%)	34(15.8%)	100(22.6%)
	Secondary & above	82(18.6%)	41(9.3%)	123(27.8%)
Educational status of father	Illiterate	7(3.1%)	13(6%)	20(4.5%)
	Read & Write	48(21.1%)	74(34.4%)	122(27.6%)
	Grade 1-8	54(23.8%)	58(27%)	112(25.3%)
	Secondary & above	118(52%)	70(32.5%)	188(42.5%)
Living circumstances	Living with family	168 (74.0%)	104(48.4%)	272 (61.5%)
	Living away from family	59(26%)	111(51.3%)	170(38.5%)

4.2. Sexual practices among day and night shift students

Sixty (26.4%) and 95 (44%) of the day and night time shift students ever had sexual intercourse respectively by excluding those students who had first sex due to marriage for both type of schooling. Sexual initiation of day and night time shift students ranged between the age of 12 to 22 and 10 to 26 respectively. The mean age (+SD) for sexual initiation for day time shift students was 16.9 (SD±1.73) whereas for night time shift students was 20 (SD± 2.) years. Among the respondents from both groups who reported to have first sexual intercourse, 88 (47.6%) claimed with girls/boyfriends, 12 (6.5%) with female sex workers and 18 (9.7%) with non-regular sexual partner. The major reason reported to initiate sex was fell in love which accounted about 60 (32.4%) (Figure 3).

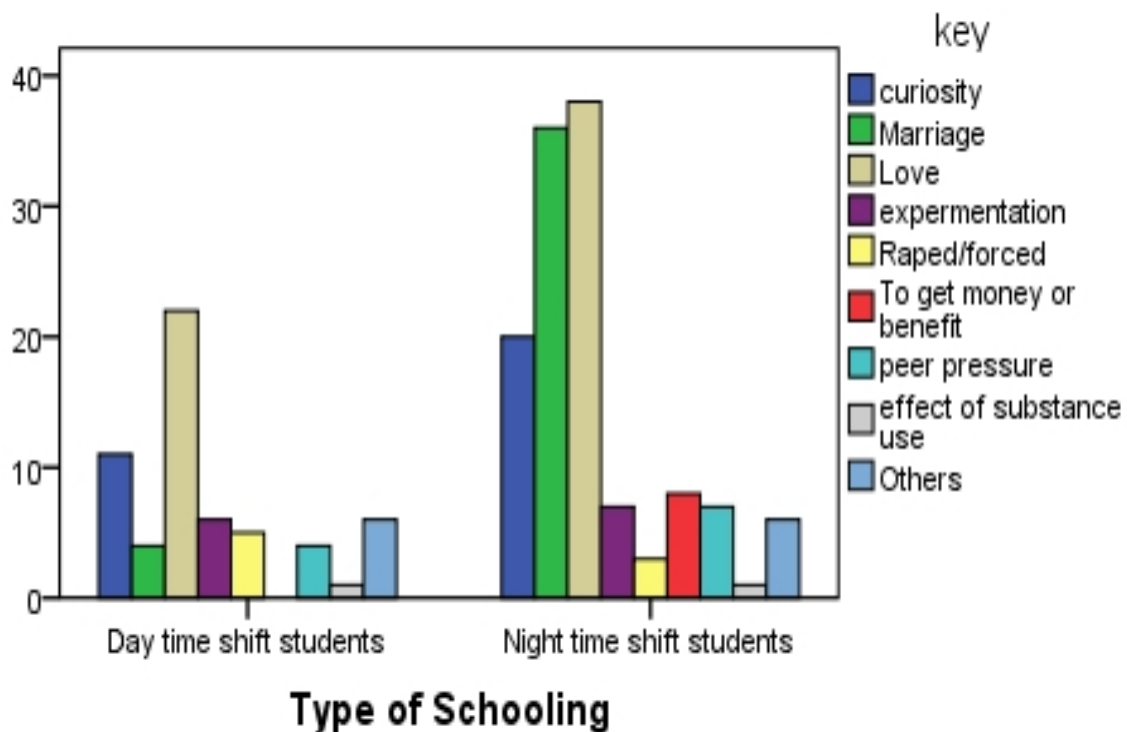


Figure 3: Major reason reported for first sexual initiation by day and night shift students of Nifas Silk polytechnic college in Addis Ababa, April 2019

Of those students who had had sex for the first time, 22 (11.9%) and 60 (32.4%) of them had performed sex with older people with average age difference of 5 years respectively for day and night shift students. Among those students who ever had sexual intercourse, 45 (19.8%) of day time shift students and 69 (32%) of night time shift students had sexual intercourse during the last 12 months prior to data collection period and of these about 132 (83%) of the respondents

performed vaginal sex and less amount 19 (11.9%) of the study participants practiced mixed type of sex including anal and oral type of sex for both type of schooling. Fifty two (11%) of the study participants from both type of schooling (12(5%) of day time and 40 (18%) of night time) were self-reported at least one of the major symptoms of STI including bad smelling/abnormal discharge from penis/vaginal 10(19.2%), genital ulcers 10(19.2%), swelling in groin area 1(1.9%) and itching around genital 31 (59.6%) during the last 12 months prior to data collection time. Among the study participants that reported for itching around genital during the last 12 months before the study period, 27 (67.5%) and 4 (33.3%) were night and day time shift students respectively.

About thirteen (3%) of the respondents have had history of rape and 11 (2.6%) of the respondents from both groups reported as they engaged in homosexual practices. Among those female students who were reported for the type of contraceptive method they used, 29 (40.3%) and 7(53.8%) of them were utilized post pill and condom to prevent unwanted pregnancy while having sex with their male partners respectively for night and day time shift female students (Figure 4).

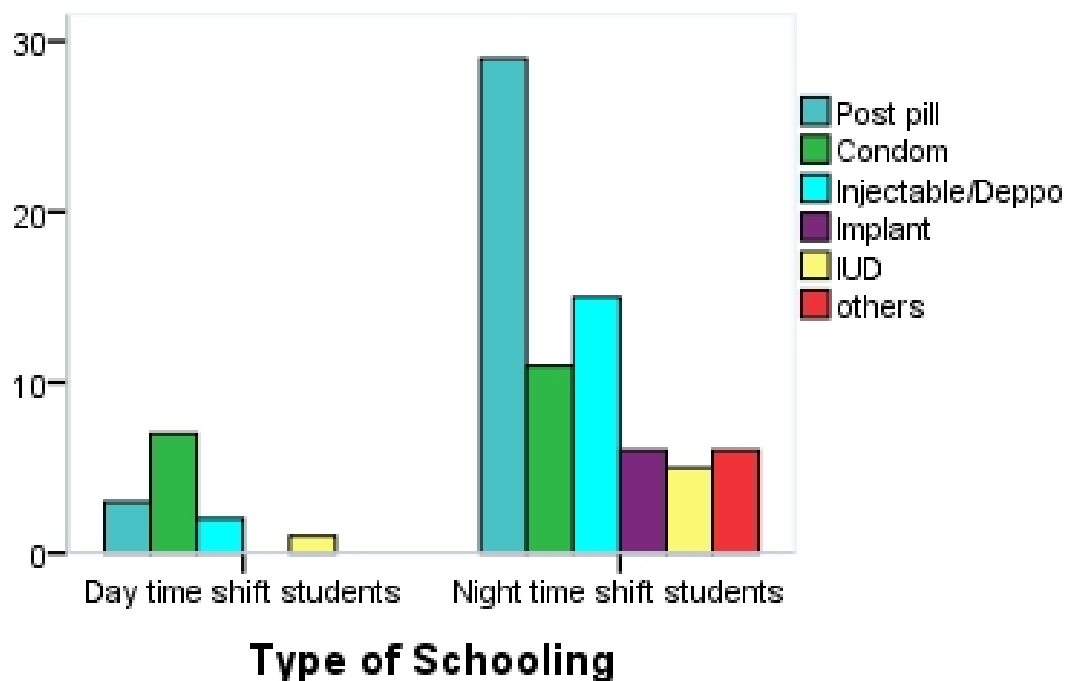


Figure 4: Type of contraceptive method used among day and night shift students of Nifas Silk Polytechnic College in Addis Ababa, April 2019

4.3. Risky sexual Practices

Risky sexual practice was calculated from four points using SPSS computes command under the transform button by considering sexual practice (having more than one sexual partner, inconsistent use of condom, sexual act with FSW and having sex with nonsexual partner for getting money or other benefits) of study participants.

Of those students who had practiced premarital first sexual intercourse, 40(66.6%) and 58(61%) of them had not used condom respectively for day and night time shift students. Among those students who were reported for condom use, only 18 (17%) and 13 (12.3%) of them were used condom every time they have sex with their sexual partners respectively for day and night shift students. Twenty three (10.1%) of day time students and about 20 (9.3%) night time shift students reported that they had two or more sexual partners during the last 12 months before the study period. On the other hand, among those students who had been engaged in sexual practice, 7(4.6%) and 9 (5.9%) of them ever had sex with person who were not their sexual partner but for the sake of money or benefit respectively for day and night shift type of schooling. Seventeen (10.8%) and 5 (3.2%) study participants from both type of schooling reported that they had had sexual intercourse with non-regular sexual partner and FSW respectively in the last 12 months before the study period.

The prevalence of risky sexual practices among sexually active students of day time and night time shift students were 15% and 34.9% respectively and the overall prevalence for both type of schooling was 109(24.7%). The difference between the two groups was statistically significant ($p < 0.05$) (Table 2).

Table 2: Comparison of risky sexual practices among day and night shift students of Nifas silk Polytechnic College, Addis Ababa, April 2019

Variables		Type of schooling		P Value*
		Day time shift students	Night time shift students	
In consistent condom use	Yes	25 (58.1%)	50(79.4%)	0.016
	No	18(41.9%)	13(20.6%)	
Had sex with Female sex workers	Yes	3 (1.3%)	2 (0.9%)	0.697
	No	224 (98.7%)	213(91.7%)	
Risky sexual practices	Yes	34(15.0%)	75 (34.9%)	0
	No	193(85.0%)	140(65.1%)	
Had multiple sexual partners	Yes	23(10.1%)	20 (9.3%)	0.447
	No	204(89.9%)	195 (90.7%)	
Ever had sex with a person who is	Yes	7 (4.6%)	9 (5.9%)	

not sexual partner but for the sake of money or benefit	No	37 (24.2%)	100 (65.4%)	0.135
Type of contraceptive method used to prevent unwanted pregnancy	Post pill	3 (9.4%)	29(90.6%)	0
	Others	224(54.6%)	186(45.4%)	

**p-value for Pearson chi-square*

4.4. Risk factors among day and night shift students

Forty four (19.4%) and 60(27.9%) of day and night time shift students had ever used substance abuse respectively and of these 16 (30.8%) from day and 15 (34.9%) from night time shift students were practiced sex after using certain type of substance abuse including alcohol, khat, shisha, hashish and drug. Alcohol consumption took the major share for both day and night shift students who were reported for substance use (**Figure 5**).

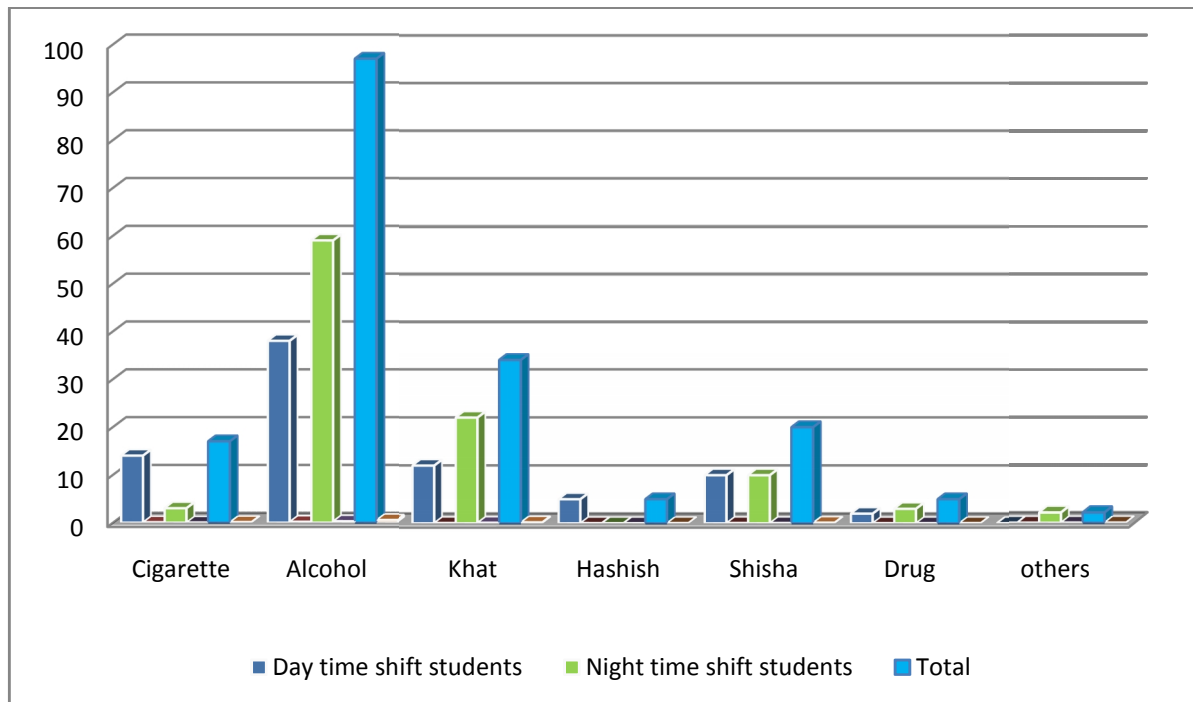


Figure 5: Type of substances abuse used/consumed among day and night shift students of Nifas Silk Polytechnic College in Addis Ababa, April 2019

In both type of schooling, small amount of students 16 (3.7%) were used IV drug for non-medical reason during the last 12 months from the study period. Thirty five (15.9%) and 27(12.9%) of day and night time shift students had visited night/day party during the last 12 months from the study period respectively and of these 19 (48.7%) from day and 21 (53.8%) from night time shift students were practiced sex after visiting the night/day party. In both type

of schooling larger amount 195 (85.9%) of day and 163 (75.8%) of night time shift students were used social media/internet and out of these 141 (48.8%) and 138 (49.6%) of them were used facebook respectively from day and night time shift students (**Figure 6**).

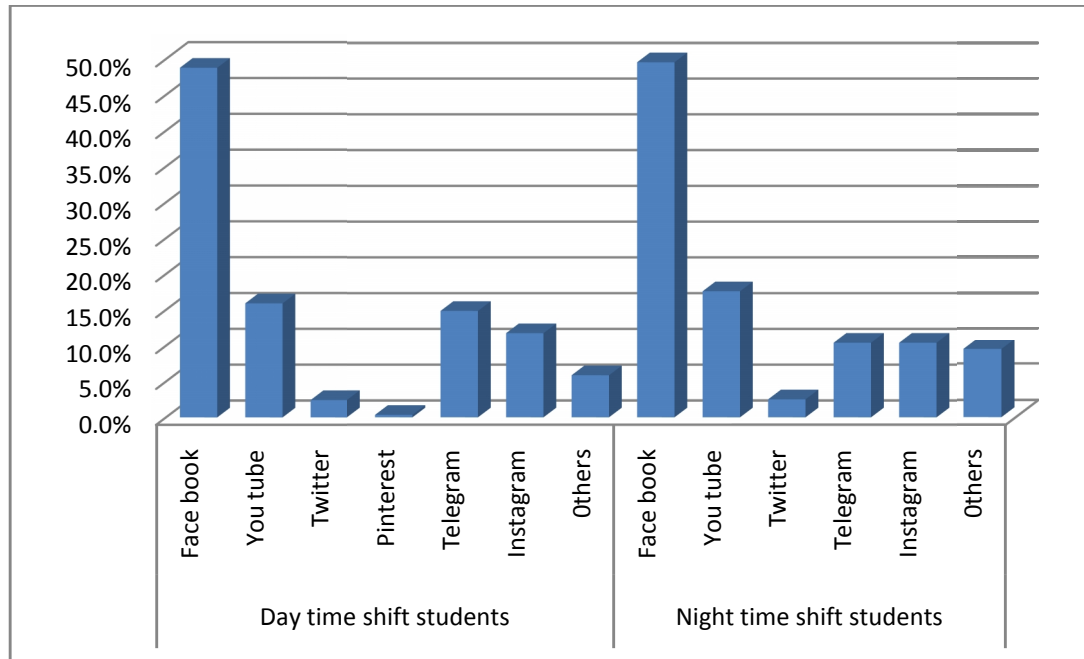


Figure 6: Type of social media used among day and night shift students of polytechnic College in Addis Ababa, April 2019

Significant number 150 (29.1% and 267 (51.8%) of day and night shift students were used social media/internet for academic purpose and to get updated information respectively and small amount of 18(3.5%) and 17(3.3%) of them were used social media/internet to seek sex partners and to watch sex related videos respectively.

Out of those students exposed to watch sex related video/pictures, small amount 21 (10.9%) and 3 (2.3%) them were practiced sex after seeing any erotic materials on social media/internet respectively for day and night shift students during the last 12 months from the study period.

In both type of schooling larger amount 140(59.6%) of day and 178 (81.7%) night time shift students had not accessed any risky reduction interventions including HTS, peer education, life skill based education and mass awareness creation during the last 12 months from the study period at their school.

4.5. Association of risk factors with risky sexual practices

The study participants who drank alcohol were [AOR = 2.891(95% CI: 1.298, 6.438)] times more likely to engage in risky sexual practice than nonusers. Students who had sexual intercourse after exposure to sexual erotic materials were also [AOR = 3.025(95% CI: 1.471-7.231)] times likely to had higher risky sexual practices than non-exposed respondents.

Table 3: Association of risky sexual practices with risk factors among Nifas Silk Polytechnic College students, Addis Ababa, April 2019

Variables		Risky sexual practices		COR (95%CI)*	AOR(95%CI)**
		No	Yes		
Sex	Male	145	50	1.092(0.700,1.703)	0.995(0.465, 2.128)
	Female	188	59	1	
Age	15-19 years	190	18	0.044(0.022, 0.087)	0.054(0.015,0.203)
	20-24 years	119	39	0.151(0.083,0.277)	0.197(0.068,0.571)
	>24 years	24	52	1	
Marital status	Single	321	68	0.062(0.031, 0.124)	0.105(0.032,0.342)
	Married	12	41	1	
Having job	Yes	116	74	3.900(2.420,6.284)	0.530 (0.236, 1.189)
	No	211	33	1	
Living circumstances	Living with family	226	46	1	
	Living away family	107	63	3.142(1.990,4.960)	1.159(0.609,2.207)
Alcohol drink	Yes	42	50	5.839(3.577, 9.529)	2.891(1.298, 6.438)
	No	287	53	1	
Sexual intercourse after exposure to SEM	Yes	9	13	3.845 (1.65,8.959)	3.025(1.471,7.231)
	No	23	67	1	
Chewing Khat	Yes	15	19	4.735(2.308, 9.713)	1.498 (0.586,5.237)
	No	314	84	1	
Taking shisha	Yes	8	12	5.291(2.099,13.336)	1.933(0.321,7.670)
	No	321	91	1	
Visiting night club/day parties	Yes	28	32	4.810(2.723, 8.532)	1.816 (0.710,5.033)
	No	291	69	1	

*COR=Crude odds ratio

**AOR=Adjusted odds ratio

1 = reference

Table3 continued...

Variables		Risky sexual practices		COR (95%CI)*	AOR(95%CI)**
		No	Yes		
Use facebook	Yes	216	63	0.742(0.472,1.154)	0.383(0.164, 0.896)
	No	117	46	1	
Watch You tube	Yes	70	25	1.118(0.666, 1.878)	1.215 (0. 519, 2.843)
	No	263	84	1	
Use Twitter	Yes	10	4	1.230(0.378, 4.005)	0.314(0.045, 2.201)
	No	323	105	1	
Use Telegram	Yes	59	13	0.629(0.330,1.197)	0.547 (0. 209, 1.429)
	No	274	96	1	
Use Instagram	Yes	45	18	1.266 (0.698 ,2.296)	0.563 (0.214, 1.477)
	No	288	91	1	
Smoke Cigarette	Yes	9	8	2.851(1.072, 7.584)	4.072 (0. 854, 19.429)
	No	324	101	1	
Take Hashish	Yes	3	2	2.056(0.339,12.469)	0.697 (0. 054, 9.033)
	No	330	107	1	

*COR=Crude odds ratio

**AOR=Adjusted odds ratio

1 = reference

5. Discussion

This study examined risky sexual practices and associated factors among day/regular and night/evening time shift students of Nifas Silk Polytechnic College in Addis Ababa.

The leading information contained in the finding is that statically significant difference was observed in terms of risk sexual practices between day time and night shift students. The prevalence of risky sexual practice among night/evening time students (34.9%) is 2.33 times higher than the prevalence among day/regular time students (15%). The overall prevalence of risky sexual practice (24.7%) for both type of schooling is more or less consistent with previous studies conducted among school adolescents in Addis Ababa, Bahirdar private college, Jimma University and Mekele college (16,42,43). However, the prevalence for each type of schooling is not comparable with previous study done in Addis Ababa, but it is in line with previous study done in Humera secondary school and Mizan tape college for the prevalence among day and night shift students respectively (9).

In this study, among those students who had practiced premarital first sexual intercourse, 40 (66.6%) and 58 (61%) of them had not used condom respectively for day and night time shift students. This finding was consistent with the study conducted among Unmarried First Year Undergraduate Students in Alkan University college students in Addis Ababa (40). Low utilization of condom is an indication of the fact that high-risk behaviors are still widely practiced among Nifas Silk polytechnic college students.

Having multiple sexual partners is one of the risky sexual behaviors that likely put students at risk of sexual practices. In the current study, in both type of schooling 28.9% of students reported that they had two or more sexual partners during the last 12 months before the study period. This finding was lower than the studies done among secondary school adolescents in Addis Ababa (16). This might be due to different sample size and study area.

In this study 17 (10.8%) and 5 (3.2%) study participants from both type of schooling reported that they had had sexual intercourse with non-regular sexual partner and FSW respectively in the last 12 months before the study period. The finding was not comparable with the previous study done in Addis Ababa college students. The variation might be occurred due to different in study design and sample size.

Around 60 (26.4%) of regular and 95 (44%) extension/night shift students of polytechnic college students have already begun sexual intercourse and of these about 25 % of them had been practicing it. The finding for first sexual initiation of regular/day time shift students was consistent with the study done among students of Addis Ababa public preparatory school(39). But, the prevalence of sexual initiation for extension students is higher than the study done in Brazil(6).

In this study, 19 (11.9%) of the study participants practiced mixed type of sex including anal and oral type of sex for both type of schooling. This finding was lower than the previous study done among high school students in Ibadan, Nigeria. The variation might be occurred due to different in study area and cultural dissimilarity.

Sexually transmitted infections (STI) are among the most well-established risk factors for HIV infection. This study found that 11% of the study participants were self-reported at least one of the major symptoms of STI including bad smelling/abnormal discharge from penis/vaginal, itching around genital, swelling in groin area and genital ulcers during the last 12 months prior to data collection time. Self-reported STI prevalence among night shift students (18.4%) was more than 3 times higher than day time shift students. The total self-reported STI prevalence was lower than the previous study conducted among wolaita Sodo university (19.5%), but it was very comparable for night shift students(41). The disparity may be due to different sample size characteristics and study area.

In this study, among female night shift students those who reported for the type of contraceptive method they used, larger amount 29 (40.3%) of them had used emergency contraceptive (post pill) to prevent unwanted pregnancy than female day time shift students. This might be aggravating risky sexual practices among female night shift students.

The study revealed that larger amount 140(59.6%) of day and 178 (81.7%) night time shift students had not accessed any type of risk reduction interventions including HTS, peer education, life skill based education and mass awareness creation during the last 12 months from the study period at their school. This might be one of the factors that aggravate risky sexual practice among students in the school.

In this study, drinking alcohol and having sexual intercourse after exposure to sexual erotic materials were the predictors that significantly associated with risky sexual practices. However, others socio-demographic/economic and behavioral factors including sex, marital status, job

status, living circumstances, use of social media/internet (face book, telegram, you tube, instagram and twitter), smoking cigarette, taking hashish/shisha and having sex after visiting night clubs/day parties were found to be not significant predictor of risky sexual practices.

The finding of this study also showed that study participants who had sexual intercourse after exposed to any erotic materials 3.025 times more likely to have higher risky sexual practices compared to nonuser. This finding was nearly comparable with the previous study which was 3.964 times likely to have higher risky sexual practices compared to non-watcher) done among school adolescent in Addis Ababa (37)

6. Strengths and Limitations of the Study

6.1.Strengths

- The study comprised population group (night shift students)which was not adequately covered before.
- The study utilized a comparative study design

6.2.Limitations

- The study was not done triangulation with qualitative data
- Probability sampling was not used for study area selection and due to this the finding of this study might be limited to the study area only.

7. Conclusion

The study depicted that there is statistically significant difference in the prevalence of risky sexual practices between regular/day time and extension/evening time shift students of Nifas Silk polytechnic college in Addis Ababa. The prevalence of risky sexual practice among night/evening time students is more than two fold of the prevalence among day/regular time students. In other words, out of 10 night shift students, 3 of them were engaged in risky sexual practices.

What is already known on this topic?

- The magnitude of risk sexual behavior among university/colleges students is high in Ethiopia;
- Risk sexual practices such as multiple sexual partner, casual sexual partner and inconsistent condom use among Ethiopian university/college students is significantly high.

What this study adds

- The study was compared the magnitude of risky sexual practices among day time and night shift students
- Night/evening shift polytechnic college students are more vulnerable to risk sexual practices compared to regular/day time college students.
- Even though, significant number of polytechnic college students use social media/internet (face book, telegram, you tube, instagram and twitter), it has found to be not significant predictor of risky sexual practices.

8. Recommendation

The findings of this study indicated that both regular/day time and night/evening time shift students were practicing risky sexual behavior that requires actionable interventions to minimize their risky sexual practices by giving special emphasis to night shift students. Therefore; based on the findings the following recommendations are given to specific government bodies which are highly mandated to coordinate or work on the area.

- Addis Ababa city Administration HB/HAPCO and other concerned NGOs need to address both type of schooling with School based IEC/BCC through different media including print and audio video materials like mini-media.
- Addis Ababa city Administration HB/HAPCO need to ensure availability of youth friendly reproductive health services including STI, counseling, HIV testing in the school.
- Addis Ababa city Administration TVET agency need to implement life skill based education as a supplementary subject at the school and reach students with comprehensive life skills by giving due attention to evening/extension students.
- Universities & other research institutions need to conduct further research to develop effective interventions for this segment of population to reduce sexual risk practices.

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10. Annexes

11.1. Questionnaires (English Version)

Code-----

Information sheet

Greetings!, my name is _____ and I am working with researcher from Addis Ababa University College of Health Sciences, School of Public Health who is currently carrying out survey of risky sexual practice and associated factors among day time and evening shift of Nifas Silk polytechnic college for the partial fulfillment of Master in Public Health. The survey mainly assesses sexual behaviors of students. There may be no direct benefit from the study however the results obtained from this survey will be used to design evidence based policies, strategies, guidelines, manuals and interventions for the reduction of risky sexual practices among school adolescents and there will no payment for participating in the study. Participating to this study may require 30 minutes. Participating to the study does not introduce any risk to the participants.

I would like to assure you that privacy will be strictly be maintained throughout. There is no need to put your name or roll number on the format. It is your full right to participate or refuse in the study. If there is anything that require clarification please don't hesitate to ask the investigator or facilitator for clarification.

Do you wish to participate in the study?

Yes

☐☐

Section I: Socio demographic factors		
Q#	Question	Response
101.	What is Your TVET level of study?	1. Level I 2. Level II 3. Level III 4. Level IV 5. Level V
102.	What is your age?	_____ year
103.	What is your sex?	1. Male 2. Female
104.	Your marital status	1. Unmarried 2. Married 3. Divorced 4. Widowed 5. Separated
105.	What is Your religion?	1. Orthodox 2. Muslim 3. Protestant 4. Catholic Other (specify) _____
106.	Currently have you a Job?	1. Yes 2. No
107.	Currently with whom do you live?	1. I live with my family 2. I live with my relatives/Custodians 3. I live alone 4. I live with my friends 5. I live with employer/s 88. Others,specify /_____
108.	What is your parent's income when you divided to total no. of family members?	1. _____ birr 2. I don't know/ I don't want to mention
Section II: Questions related to Sexual practice		
201.	Have you ever had sexual intercourse?	1. Yes 2. No
202.	If yes, at what age did you first have sex?	Age at 1st sexual intercourse _____ years
203.	If yes, with whom did you first have sex?	1. Husband/wife 2. Boyfriend/girlfriend 3. Non regular sexual partner 4. Female sex worker (for male) 5. Older age 88. Other (specify)_____

204.If yes, what was your major reason to start sexual intercourse? (Circle all possible reasons).	1. Curiosity 2. Marriage 3. Love 4. For experimentation 5. Raped/forced 6. To get money/gift/ benefit 7. Boyfriend or girlfriend pressure 8. Due to the effect of alcohol or other substance use 9. I don't remember 88. Other (specify)_____
205.Did you use condom when you had sex for the first time?	1. Yes 2. No
206.How old were your partner when you had sex for the first time?	1. Older than me 2. Younger than me 3. Equal with me
207.If there was age difference how many was it in year/s?(give estimated age or ages if not sure)	_____ year/s
208. If yes, with how many persons you had sexual experience so far?	_____ partner/s
209.Have you had sexual intercourse last 12 months?	1.Yes 2.No
210.If yes with whom did you make sexual intercourse? [multiple answers are possible]	1. Husband/wife 2. Steady boy/girl friend 3. Casual/unknown person 4. Sex worker (for males only) 5. Older age 88.Others,specify / _____ /
211.If yes for Q. No. 209, what type of sexes are you performed	1. Vaginal sex 2. Oral sex 3. Anal sex 4. Mixed 5. Group sex
212.The last time you had sexual intercourse with this person was a condom used?	1.Yes 2.No
213.Was a condom used every time you had sexual intercourse with this person in the last 12 months?	1.Yes 2.No
214.If you use condom, from where did you get?	1. school condom out let 2. health institutions including pharmacy 3. Non specific shop 88. Other (specify)_____
215.If you use condom, have you ever had sex without condom in the past 12 months?	1.Yes
216.In the past 12 months with how many sexual partners	1.Yes

did you have sex?	2.No
217.Have you ever had sex with a person who is not your sexual partner but for the sake of money or benefit?	_____ sexual partners
218.Have you ever been raped? Have you history of unwanted Pregnancy? (for female)	1.Yes 2.No
219.Have you history of abortion? (for female)	1.Yes 2.No
220. If yes for Q. No. 218 what type of contraceptive method/s were used to prevent unwanted pregnancy before marriage	1.Yes 2.No
221. Have you ever practiced homosexuality?	1. Post pill 2. Condom 3. Injectable (Deppo) 4. Implant 5. IUD 88. Other (specify_____)
222. Have you had one or more of the following during the past 12 months?? (Circle all possible answers)	1.Yes 2.No
	1. Bad smelling/abnormal discharge from penis 2. Genital ulcers/sores 3. Swellings in groin area 4. Itching on the genital area
Section III. Questions related to Predisposing factors for risky sexual practices	
301. Have you ever use one or more of these substances [Cigarette, Khat or ‘chat’, Hashish, shisha, Drug, Alcohol including wine, bottled beer, draft beer, ‘tella’ or other)] ?	1.Yes 2.No
302.If yes for question number 301, have you used one or more of these[Cigarette, Khat or ‘chat’, Hashish, shisha, Drug, Alcohol including wine, bottled beer, draft beer, ‘tella’ or other)] in the last one month? (Circle all possible answers)	1. Cigarette 2. Alcohol (wine, bottled beer, draft beer, ‘tella’ or other) 3. Khat or ‘chat’ 4. Hashish 5. Shisha 6. Drug (pethidine, diazepam, epinephrine, chlorpromazine or other) 88. Other (specify_____)
303.If yes, did you have sex after using one or more these substance (Cigarette, Hashish, shisha, Khat or ‘chat’, Drug , Alcohol including wine, bottled beer, draft beer, ‘tella’ or other)?	1.Yes 2.No
304.Have your partner/friend ever use one or more of the following substance [Cigarette, Hashish, shisha, Khat or ‘chat’, Drug , Alcohol including wine, bottled beer, draft beer, ‘tella’ or other)?	1.Yes 2.No

305. Have you ever used IV-drugs (injectable) in the past 12 months for non-medical reason?	1. Yes 2. No
306. Have you visited night clubs/day parties in the last 12 months?	1. Yes 2. No
307. If yes, did you have sex after visiting night clubs/day parties?	1. Yes 2. No
308. Are you using social media/internet?	1. Yes 2. No
309. If yes, which type of Social media/internet are you using actively?	1. Face book 2. You tube 3. Twitter 4. Twitter 5. Instagram 88. Other (specify) _____
310. For what purpose you mainly use social media/internet?	1. To seek sex partner 2. To watch sex related video/films/photos 3. For academic purpose 4. To get updated information 5. To exchange sex for money 88. Other (specify) _____
311. In the last 12 months have you practiced sexual intercourse after exposure to any erotic or sexually explicit materials like photos, videos, stories?	1. Yes 2. No
Section IV: Utilization of risk reduction interventions	
401. Which risk reduction prevention services you had received in the last 12 months?	1. HIV Testing and counseling services 2. Awareness creation mass education 3. Peer or life skill education 4. Condom promotion and distribution services 5. Nothing

We thank you so much for your Participation

10.1. Questionnaire (Amharic Version)

መለያቁጥር: _____

የጥናቱ መግለጫ

ጤናይስጥልኝስሜ: _____ ይባላልበጥናቱውስጥበመረጃሰብሳቢነትነውየምሠራው።

የጥናቱርዕስአደገኛዎሲባዊግንኙነትእናሌሎችወሲባዊግንኙነትጋርየተያያዙየጤናችግሮችንለማወቅከአ/አዩንሸርስቲዩህ/ስብጤናክፍልየድህረ-ምረቃኘሮግራምማሟያየሚሆንነው። ጥናቱየወጣቶችንአደገኛወሲባዊልምምዶችምክንያትየሚያደርሱትንየሞትናየህመም ሁኔታለመቀነስይረዳል። ተሳትፎአችሁበፈቃደኝነትላይየተመሠረተነው። በመጠይቁውስጥሚስጢራዊየሆኑእናግላዊየሆኑጉዳዮችተካተዋል።

ያላችሁንተሞክሮብታካፍሉንየጠቀስናቸውንናሌሎችንምየወጣቶችእናታዳጊዎችችግርለመፍታትእጅግበጣምጠቃሚነው።

ጥያቄውንለመሙላትሰላሳደቂቃያህልሊወስድይችላል።

ጥናቱንአስመልክቶእርስዎሚሰጡትማንኛውምመረጃበሚስጢርየሚጠበቅበመሆኑበማንኛውምመንገድለሶስተኛአካልተላልፎአይሰጥምወይምአይጋለጥም፤ ማንነትዎእንዳይታወቅምስምዎበጥያቄውወረቀትላይአይመዘገብምይሁንእንጂበጥናቱላይበመሳተፍዎየተለየጥቅምአይኖርምነገርግንበጥናቱላይበመሳተፍዎእናለሚጠየቁትጥያቄበዕውቀትላይየተመሠረተናተገቢየሆነመረጃመስጠትዎበወጣቶችስነ-

ተዋልዶዙሪያላይለሚወጡፖሊሲዎች፤

ስትራቴጂዎችናመመሪያዎች/ማኑዋሎችለማሻሻልብሎምየአገልግሎቶችንተደራሽነትለማሳደግከፍተኛአስተዋጽኦያበረክታሉ።

በመጨረሻምለሚሰጡትለየትኛውምአይነትምላሽከፍተኛምስጋናችንንእናቀርባለን። ግልጽነው? ያልገባህ/ሽነገርአለ? ወይምመጠየቅ(ማነጋገር)

የምትፈልጉትነገርካለኢ-ሜል: sewawase@gmail.com

በመሆኑምከላይየቀረበውንየጥናቱንአላማናጥቅሙንምተረድቼአለሁ፤ ሚስጥርእንደሚጠበቅለሶስተኛአካልእንደማይተላለፍተገንዝቤአለሁ።

ስለዚህበጥናቱ፡-

እሳተፋለሁአልሳተፍም

☐☐

ትምህርት/ህንጻዎች/መደበኛ ትምህርት/ኤክስፔሪንስ

ተ/ቁ	መጠይቅ	ምላሽ (ትክክለኛውን በማንበብ ይምረጡ ታላይ በመመላት የሚመለስ)
	ክፍል 1: ማሃበራዊ እና እኩኛ ሚናዊ ሁኔታዎች	
101	በቴክኒክና ሙያ የደረጃስንት ተማሪ ህ/ነሽ?	1. ደረጃ I 2. ደረጃ II 3. ደረጃ III 4. ደረጃ IV 5. ደረጃ V
102	እድሜሽ/ህስንት ነው?	_____ ዓመት
103	ፆታ	1. ወንድ 2. ሴት
104	የጋብቻ ሁኔታ	1. ያላገባ/ች 2. ያገባ/ች 3. የፈታ/ች 4. የሞተበት/ባት 5. የተለያዩ
105	ሐይማኖትሽ/ህምንድን ነው?	1. ኦርቶዶክስ 2. እስልምና 3. ፕሮቴስታንት 4. ካቶሊክ 88. ሌላ ከሆነ ይገለጽ/_____
106	አሁን የሚትኖረው/ሪው ከማንኛው?	1. ከቤተሰቦቼ ጋር 2. ከዘመድ/አሳዲ ጊዬ ጋር 3. ለብቻዬ 4. ከጓደኛዬ ጋር 5. ከትዳር አጋሬ ጋር 6. ከአስሪዬ/ዎቼ ጋር 88. ሌላ ከሆነ ይገለጽ/_____
	ክፍል 2: የወሲብ ተጋላጭነት/ልምዶች/የተመለከቱ መጠይቆች	
201	በሕይወት ዘመንሽ/ህ የግብረሰጋግንኙነት ፈፅመህ/ሽታውቃለህ/ሽ?	1. አዎ 2. አልፈፀምኩም
202	የተ.ቁ 201 መልስሽ እዎ ከሆነ ለመጀመሪያ ጊዜ ግብረሰጋግንኙነት/ወሲብ የፈፀምሽ/ከ ጊዜ ፅድሜሽ/ህስንት ነበረ?	በ----- ዓመት ነበርኩ
203	ለመጀመሪያ ጊዜ ግብረሰጋግንኙነት የፈፀምሽው/ከው ከማንኛው ነበር ?	1. ከትዳር አጋሬ ጋር 4. ከሴተኛ አዳሪ ጋር (ለወንዶች የቀረበ አማራጭ) 2. ከወንድ/ሴት ጓደኛዬ 5. በእድሜ ብዙኩ ሚብልጠኝ /ከምትብልጠኝ 3. በአጋጣሚ ከተዋወኩት/ኋት ሰው 88. ሌላ ከሆነ ይገለጽ/_____
204	ለመጀመሪያ ጊዜ ግብረሰጋግንኙነት ለመፈፀም የገፋፋ ሽዋነኛ ምክንያት ምንድን ነው?	1. ከፍተኛ ፍላጎት ስለነበረኝ 6. ገንዘብ/ስጦታ/ጥቅም ለማግኘት 2. ስላገባሁ 7. በአቻ/በጓደኛ ግፊት 3. አፍቅፊ 8. በመጠጥ፣ ጫት፣ አደንዛሽና ሌሎች ፋፍቼ

ተ/ቁ	መጠይቅ	ምላሽ (ትክክለኛውን መግለጫ በወይም ባደረጉት ላይ በመመላለስ የሚመለስ)
		4. ለመሞከር 9. ምክንያቱን ማስታወስ አልቻልኩም 5. ተገድጄ/ተደፍሬ 88. ሌላ ካለ ይገለጽ/_____
205	ለመጀመሪያ ጊዜ ግብረሰጋ ግንኙነት ስትፈጽሟ/ምኮን ይምተጠቅ መሽ/ህነበር ወይ?	1. አዎ 2. አልተጠቀምኩም
206	ለመጀመሪያ ጊዜ ግብረሰጋ ግንኙነት የፈፀምሽው/ሰው የእድሜ ሁኔታ እንዴት ነበር?	1. ከእኔ ይበልጣል/ትበልጣልች 2. ከእኔ ያንሳል/ታንሳልች 3. ከእኔ እኩ ያይሆናል/ትሆናልች
207	የተ.ቁ. 206 መልስሽ/ህ 1 ወይም 2 ከሆነ ልዩነቶች ሁለቱንም አሳውቅህ/ሁሉንም አሳውቅህ?	_____ ዓመት
208	በህይወት ዘመንሽ/ህስንት የወሲብ ያደርግህ/ህ?	_____ የወሲብ ያደርግህ/ህ
209	ባለፈው 12 ወራት ውስጥ ወሲብ ፈጽመሽ/ህታው ቂያለሽ/ህ ወይ?	1. አዎ 2. አልፈፀምኩም
210	የተ.ቁ. 209 መልስ አዎ ከሆነ ግብረሰጋ ግንኙነት የፈፀምሽው/ከው ከማን ጋር ነበር?	1. ከትዳር አጋሬ ጋር 4. ከሴተኛ አዳሪ ጋር (ለወንዶች የቀረበ አማራጭ) 2. ከወንድ/ሴት ጓደኛዬ 5. በእድሜ ብዙ ከሚበልጠኝ /ከምትበልጠኝ 3. በአጋጣሚ ከተዋወኩት/ኪት ሰው 88. ሌላ ካለ ይገለጽ/_____
211	የተ.ቁ. 210 መልስ አዎ ከሆነ የፈጸምሽው/ከው የትኛውን የወሲብ ዓይነት ነው?	1. የብልት (Vaginal sex) 4. ድብልቅ (Mixed) 2. የአፍ (Oral sex) 5. የቡድን ወሲብ (Group sex) 3. የፊንጢጣ (Anal sex))
212	ባለፈው 12 ወራት ውስጥ ግብረሰጋ ግንኙነት ስትፈጽሟ/ምኮን ይምተጠቅ መሽ/ህነበር ወይ?	1. አዎ 2. አልተጠቀምኩም
213	የተ.ቁ. 212 መልስ አዎ ከሆነ ባለፉት 12 ወራት ውስጥ ግብረሰጋ ግንኙነት ስትፈጽሟ/ምኮን ይምተጠቅ መሽ/ህነበር?	1. አዎ 2. አይደለም
214	ኮንዶምን የሚትጠቀም/ሚከሰብ የትኛው ኮንዶም ነው/የትኛው ነው?	1. ከትምህርት ቤቱ ኮንዶም ማሰራጫ ሳጥን 3. ከማንኛውም ሱቅ/የሽቀጣሽ ቀጥመደብ 2. ከጤና ተቋማት/ፋርማሲያዎችን 88. ሌላ ካለ ይገለጽ/_____
215	ባለፉት 12 ወራት ውስጥ ከስንት የወሲብ አጋር ጋር ግብረሰጋ ግንኙነት ፈጽመሽ/ህነበር?	_____ የወሲብ አጋር ጋር
216	ባለፉት 12 ወራት ውስጥ ያለ ኮንዶም ግብረሰጋ ግንኙነት ፈጽመሽ/ህነበር?	1. አዎ 2. አልፈጸምኩም
217	ባለፉት 12	1. አዎ

ተ/ቁ	መጠይቅ	ምላሽ (ትክክለኛውን በማክበብ ወይም ባደረጉት ላይ በመመላት የሚመለስ)
	ወራት ውስጥ የወሲብ አጋር ካልሆነሰው ጋር ገንዘብ ወይም ጥቅም ለማግኘት ብለሽ/ህግብረስጋግንኙነት/ወሲብ ፈጽመሽ/ህታውቃለሽ/ህ	2. አልፈጸምኩም
218	የመደፈር አደጋ አጋጥሞሽ/ህያውቃል	1. አዎ 2. አላገጠመኝም
219	ያልተፈለገ እርግዝና አጋጥሞሽ/ህያውቃል?	1. አዎ 2. አላገጠመኝም
220	ጥያቄቁ. 218 አዎ ከሆነ፡ ወርጃ አጋጥሞሽ/ህያውቃል?	1. አዎ 2. አላገጠመኝም
221	ጥያቄቁ. 219 አዎ ከሆነ ባለፉት 12 ወራት ውስጥ ዳግም ከጋብቻ በፊት ያልተፈለገ እርግዝና እንዳይከሰት ብሽ የትኛው ንዩኒቨርሲቲ መከላከያት ጠቀሚ ነበር	1. ፖስት-ፒ.ል 4. ኢምፕላንት 2. ኮንዶም 5. ሉፕ 3. በመርፌ የሚሰጥ/ዲፖ/ 88. ሌላ ካለ ይገለጽ/_____
222	ከተመሳሳይ የታጋር ወሲባዊ ልምድ/ድርጊት ፈጽመሽ/ህታውቃለሽ/ህ?	1. አዎ 2. አልፈጸምኩም
223	ባለፉት 12 ወራት ውስጥ ከሚከተሉት ውስጥ የትኛው አንድን/አንተ ህንገጥም ያውቃል? (ከአንድ በላይ መምረጥ ይቻላል)	1. መጥፎጠረን ያለው ያልተለመደ የብልት ፈሳሽ 3. በመራቢያ አካባቢ እብጠት 2. በመራቢያ አካባቢ የመቁሰል ወይም የህመም ሰሜት 4. መራቢያ አካባቢ ማሳክክ
ክፍል 3: ለወሲብ አጋለጭ ሁኔታዎች የተመለከቱ መጠይቆች		
301	አልኮል መጠጦችን (ወይን፣ ቢራ፣ ድራፍት፣ አረቄ፣ ጠጅ ወዘተ)፣ ጫት፣ ሲጋራ፣ ማሪጋና ሃሺሽ እና የመሳሰሉት አደንዛዥ ዕቃዎችን ብቻ መሰላጠን/ህታውቃለህ/ሽ?	1. አዎ 2. አልጠቀምም
302	ጥያቄቁ. 301 አዎ ከሆነ ባለፉት 1 ወር ውስጥ የትኛውን ብቻ መለስ/ሻል? (ከአንድ በላይ ማክበብ ይቻላል)	1. ሲጋራ 5. ሺሻ 2. አልኮል መጠጥ 6. አደንዛዥ መደኃኒት 3. ጫት 4. ሃሽሽ 88. ሌላ ካለ ይገለጽ/_____ /
303	ከነዚህ ማለትም ሲጋራ፣ አልኮል መጠጥ፣ ጫት፣ ሃሽሽ፣ ሺሻ እና አደንዛዥ መደኃኒት አንዱን ወይም ከዚህ በላይ ከተጠቀምሽ/ህ በኋላ የግብረስጋግንኙነት ፈጽመሽ/ህታውቃለህ/ሽ?	1. አዎ 2. አልፈጸምኩም
304	የአንቺ/አንተ ህጎች ሲጋራ፣ አልኮል መጠጥ፣ ጫት፣ ሃሽሽ፣ ሺሻ እና አደንዛዥ መደኃኒት አንዱን ወይም ከዚህ በላይ ይጠቀማል/ትጠቀማለች?	1. አዎ 2. አይትጠቀምም/አይጠቀምም
305	ባለፉት 12 ወራት ውስጥ ለህክምና አገልግሎት የማይወልን ገርግን በመርፌ የሚወሰድ መድኃኒት ወስደሽ/ህታውቃለሽ/ህ	1. አዎ 2. አልወሰድኩም
306	አንቺ/አንተ ባለፉት 12 ወራት ውስጥ የቀን ወይም የምሽት ጭፈራ ቤቶች ገብተሽ/ህታውቂያለሽ/ህ ወይ?	1. አዎ 2. አልገባሁም
307	ጥያቄቁ. 306 አዎ ከሆነ የቀን ወይም የምሽት ጭፈራ ቤቶች ከገባሽ/ህ በኋላ የግብረስጋግንኙነት ፈጽመሽ/ህ ነበር?	1. አዎ 2. አልፈጸምኩም
308	ማህበራዊ ሚዲያ/ኢንተርኔት ብቻ ጠቀማለህ/ሽ	1. አዎ 2. አልጠቀምም
309	ጥያቄቁ. 308 አዎ ከሆነ የትኛውን ማህበራዊ ሚዲያ/ኢንተርኔት ብብላት ብቻ ጠቀማለሽ/ህ (ከአንድ በላይ ማክበብ ይቻላል)	1. Face book

ተ/ቁ	መጠይቅ	ምላሽ (ትክክለኛውን በማክበብ ወይም ባደረጉት ላይ በመመላለስ የሚመለስ)
		5. Twitter 2. You tube 6. Instagram 3. Twitter 88. ሌላ ካለ ይገለጽ/_____
310	ማህበራዊ ሚዲያውን/ኢንቴርኔት ለምን አግልግሎት በብዛት ተጠቀሟል ሽ/ህ	1. የወሲብ ንደኛ ለመፈለግ 2. የወሲብ ፊልሞች/ቪዲዮችን/ምስሎችን ካየሽ/ህ በኋላ ወሲብ ፈጽመሽ/ህ ታውቃለሽ/ህ 3. ለትምህርት (ተጨማሪ ማጣቀሻዎችን ለማግኘት) 4. የተለያዩ ወቅታዊ መረጃዎችን ለማግኘት 5. በገንዘብ ወሲብ ለመፈጸም 88. ሌላ ካለ ይገለጽ/_____
311	ባለፉት 12 ወራት ውስጥ ለወሲብ ቀስቃሽ የሆኑ ፊልሞችን/ቪዲዮችን/ምስሎችን ካየሽ/ህ በኋላ ወሲብ ፈጽመሽ/ህ ታውቃለሽ/ህ	1. አዎ 2. አልጠቀምም
ክፍል 4: የአደገኛ ወሲባዊ ልምዶችን ለመከላከል አግልግሎት መጠቀም ጋር የተያያዙ መጠይቆች		
401	በትምህርት ቤት/ህባሉት 12 ወራት ውስጥ አደገኛ ወሲባዊ ልምዶችን መከላከል አንጻር ያገኘሽ/ህ የገኘው አግልግሎት/ቶች የትኛው ነው	1. የኤች.ኤስ.ቪ. ምርመራና ምክር አግልግሎት 2. የግንዛቤ ማስጨበጫ ትምህርት 3. የአቻለ አቻ/የህይወት ክዕሎት ትምህርት 4. የኮንዶም ማስተዋወቅና አቅርቦት 5. ምን አግልግሎት አለገኘውም

ስለተሳትፎዎ ከልብ እና መሰግናለን!