

The effect of gender norms on adolescents' perception and attitude to sexual and reproductive health: The case of the Kassena-Nankana District

Abstract: This paper tests the widely held, but seldom tested, assumption that adolescent gender norms affect the onset of sexual relations. Longitudinal data from 3739 interviews of adolescents aged 10 to 24 years are linked with biomarkers data. Data are based on observations of an experimental study in Kassena-Nankana District, a rural isolated locality of northern Ghana. Baseline survey data are marshaled to examine the predictive power of baseline indicators of adolescent gender norms on subsequent sero-conversion of Herpes-Simplex Virus-2 (HSV-2), a biomarker for exposure to unprotected sexual relations. Maximum likelihood regression incidence rate ratios are estimated for the effect of 17 indicators of gender norms and the conditional effect of norms by gender of adolescent. Findings will show how influence of gender norms affect subsequent sero-conversion. Implications for policy will be reviewed and discussed.

Extended abstract:

Gender norms are widely assumed to affect adolescent attitudes, perceptions, and behavior regarding sexual and reproductive health. Gender norms structure roles of both men and women through their impact on social interactions. Though norms are specific to cultural groups, the fact still remains that across most societies different attributes are assigned to men and women, such as; men are expected to be aggressive in their sexual pursuit while women are expected to be submissive and not to show any signs of interest or knowledge on sexual issues; men's open sexuality is encouraged and women's submissiveness is expected (Schueller J. and Best K., 2005, Gupta, 2000). Norms are learnt from infancy to adulthood; within the home and the society in which one lives. Adolescence is a critical period when one is expected to learn and inculcate the defined norms and roles that is expected to form the individual's values within a given society. Studies carried out in most parts of the world reveal that gender norms have an effect on people's perceptions, attitude and behavior in general (Barnett B.1997).

Studies equally reveal that gender norms influence adolescents' attitude to sexual and reproductive health issues as well as their response to intervention activities. Eggleton et al. 1999 on sexual attitudes and behavior among young adolescents in Jamaica report that the sexual attitudes and behavior of young adolescents in Jamaica have already been significantly shaped by sociocultural and gender norms that send mixed messages about sexuality and impose different standards of behavior for boys and girls. Bacon et al. 2002, carrying out a study among adolescents reveal that reported norms favor early intercourse, not necessarily protected and gender stereotypes are prominent among all participants even the youngest participants. They conclude that social norms have been widely shown to relate to sexual risk-taking among teenagers. A survey of about 7056 adolescents in the Kassena-Nankana District of Ghana in 2003, suggest that condom use among adolescents is not common. This study therefore seeks to assess existing gender norms among male and female adolescents and their effects on adolescent behavior in the

Kassena Nankana district. It also seeks to evaluate the effect of gender norms on male and female adolescents assessing sexual and reproductive health interventions.

Rationale/purpose of the study

Studies have been carried out on the sexual and reproductive health situation of adolescents in Ghana but very few studies have attempted to assess the relationship between gender norms and adolescents' sexual attitudes and behavior and their acceptance of modern sexual and reproductive health interventions. The Africa Youth Alliance (AYA,) states that rigid gender norms hinder access to quality services and undermine the reproductive health of young people. In an effort to improve the reproductive health of adolescents and young adults, many organizations that work with youth are incorporating a gender perspective into sex education, service delivery and provider training programs (Barnett B., 1997). Mensch et al, 1998 writing on the situation of adolescents in the KND indicate that the social environment has changed and institutions, system and practices that previously structured the lives of adolescents have eroded leading to an increase in premarital activity.

Thus knowledge in existing gender norms among adolescents in the KND would help to inform policy on preferred strategies for intervention on adolescent sexual and reproductive health. This study therefore seeks to assess the effect of gender norms on the sexual attitudes and behaviour of adolescents. It also seeks to evaluate the effect of gender norms on male and female adolescents assessing sexual and reproductive health interventions.

Results from this study will inform policy and future interventions aimed at changing gender norms that militate against the success of innovations channeled towards adolescents.

Methodology

The study uses data from a baseline survey that was conducted among adolescents between the ages of 15 and 17 in Kassena-Nankana District in 2005. The survey was carried out among about three thousand five hundred adolescents, 50% of them were males and 50% females. The survey centered on the sexual and reproductive health knowledge, attitude and practices of adolescents and issues on gender norms were given significant amount of attention. The study tests the hypothesis that a biomarker for sexual exposure, "Herpes Simplex Virus-2" (HSV-2) will convert from negative to positive status. Thus, to evaluate the effect of gender norms on the onset of sexual relations among male and female adolescents as indicated by sero-conversion of HSV-2 status over the 2003 to 2005 period, we estimate the poisson regression model:

$$\ell n(\mu_{ijk}) = \beta_0 + \sum_{i=1}^I \beta_i X_i + \sum_{j=1}^J \gamma_j Z_j + \sum_{m=1}^m \delta_k G + \sum_{k=1}^I \eta \cdot G \cdot X_i$$

where

μ_{ijk} is the probably of seroconversion for observation i individual exposed to characteristic j of individual with gender k

β_0	an intercept
X_i	an indicator of gender norms on the onset of sexual activity for observation i
Z_j	is the j^{th} baseline background characteristic of respondents in 2003, such as age and schooling
G	is a dummy variable for the gender of the respondent
β	estimates the effect of a vector of indicators of gender norms on the onset of sexual activity.
γ	estimate the effects of gender norms on sero-conversion
δ	estimates the conditional effect of norms among girls on sero-conversion
ε	defines error.

Gender norms comprising \mathbf{X} are defined as follows as respondents were asked whether they agreed or not with whether:

- unmarried girls and boys of that age should have sex,
- it is all right for boys and girls of that age to kiss, hug and touch each other,
- a girl/boy of that age can not refuse sex if his/her partner asks him for sex,
- a girl/boy of that age can not refuse if a woman/man who has already given him/her a gift ask him/her for sex,
- sometimes a boy has to force a girl to have sex if he loves her,
- a boy would not respect a girl who agrees to have sex,
- most girls who have sex before marriage regret it afterwards,
- a boy and a girl should have sex before they marry to see whether they are suited to each other,
- the adolescent believes that a boy/girl stops growing after he/she has had sex for the first time,
- girls should remain virgins until they marry,
- it is sometimes justifiable for a boy to beat his girlfriend,
- most of the boy/girl's friends who have sex with someone use condoms regularly
- the adolescent is confident that he/she can insist on condom use every time he/she has sex,
- the adolescent would never contemplate having an abortion for herself or his/her friend,
- it is mainly the girl's responsibility to ensure that contraception is used regularly
- the adolescent feels he/she knows how to use a condom properly
- the adolescent would refuse to have sex with someone who is not prepared to use a condom
- the adolescent thinks that he/she must be in love with someone before having sex with the person
- men need sex more frequently than women
- most of the adolescent's friends have had sexual intercourse and many of his/her friends have had an abortion