

Sexual Practice of Adolescents in a Sahelian Community Environment: Case of Five Health Zones in Mali

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Abstract

Original Research Article

Introduction: Sexuality is the set of behaviors relating to the satisfaction of the sexual instinct. It involves the personality as a whole in adolescence. According to the 2018 demographic and health survey in Mali, it appears that 36% of adolescents have started their reproductive life; 8% had their first sexual intercourse at 15 years old. In this work, we studied adolescent sexuality in five health zones in Mali in 2022. **Methodology:** This was a cross-sectional, analytical survey whose survey was conducted between March and April 2022 in five health zones in Mali and targeted single adolescents aged 15 to 19. The sampling was probabilistic. Data were collected using a structured questionnaire administered in an individual interview. **Results:** In total, 1287 adolescents were interviewed, 51.7% of whom were boys. The average age was 16.86 years for girls and 17.55 years for boys. They had secondary education in 31% of boys and 28% of girls. The average age of first sexual intercourse was 16 years for both girls and boys. In 10% of respondents had had early sexual intercourse between 10 and 14 years old. 80% of respondents had at least one sexual intercourse in the last 6 months, among which non-use of condoms was 70% among girls and 46% among boys. **Conclusion:** Sexual practice among unmarried adolescents was common. Precautions against the risks of sexual intercourse were weak. Sex education is necessary in order to provide adolescents with a set of measures aimed at protecting sexual practices.

Keywords: Practical, Sexual, Adolescents, Environment, Sahelian, Mali.

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INTRODUCTION

Sexuality is defined as all behaviors relating to the satisfaction of the sexual instinct [1, 2]. There are many factors that contribute to shaping the experience of sexuality in a differential and multiple way according to social groups [3]. Today we are wondering more about the health and social consequences of premarital sexuality. [2] Indeed, the spread of STIs, the multiplication of abortion attempts, school failures, family rejections, the care of children born from unwanted pregnancies are all recurrent consequences in the current health problem reproduction of young people [4]. Adolescence which is a period of transition between childhood and adulthood; corresponds to one of the fastest and most formative phases of human development

[5, 6]. It includes physical, cognitive, social, emotional and sexual development [3]. Sexuality, particularly during adolescence, involves the personality as a whole [1]. It appears in 2018 in Mali that 36% of adolescent girls have started their reproductive life; 8% had their first sexual intercourse at age 15 [7]. In the present work, the authors tried to study the sexuality of adolescents in five health zones in Mali in 2022. The main objective of our study was to determine the sexual practice of adolescents.

METHODOLOGY

This was a quantitative, cross-sectional, analytical survey over a period of 2 months from March to April 2022. The survey was carried out in the five

health zones of Mali, namely the circles of Sikasso, Kolokani, Baraouéli, Kayes and Bamako among adolescents in the villages/neighborhoods of health zones. The study concerned single adolescents (girls and boys) aged 15 to 19. In our study 1287 adolescents were concerned, selected in a probabilistic and mixed way. A structured questionnaire was developed and administered in an individual interview. Data was collected and entered on tablets/smartphones using the KoboCollect application. Data analysis using Excel and SPSS 22 software. The parameters studied were the socio-demographic characteristics, perceptions of sexuality and gender-related specificities of adolescents. The statistical significance threshold was set at 5%. Free and informed consent to participate from all targets was requested at the start of the survey. The confidentiality and anonymity of the data were explained to the targets of the investigation. The study protocol was approved by

the institutional ethics committee of the Faculty of Medicine, Pharmacy and Odontostomatology of the University of Sciences, Techniques and Technologies of Bamako (USTTB).

RESULTS

During our survey, 1287 young adolescents were targeted with a participation rate of 92% of cases with disparities between health zones which varied between 99 and 55% of cases.

Socio-Demographic Characteristics of Adolescents

In our study there was a male predominance with 51.7% of boys' cases compared to 48.3% of girls' cases. They were distributed between the five health zones including three rural zones and 2 urban zones (Table I).

Table 1: Distribution of participants according to gender and geographic area of recruitment

Sanitary zone	Féminine		Male		effective Total
	n	%	n	%	
Urbun1	181	50,1%	180	49,9%	361
Rural1	114	46,9%	129	53,1%	243
Rural2	137	48,9%	143	51,1%	280
Urbun2	155	49,5%	158	50,5%	313
Rural3	34	37,8%	56	62,2%	90
Total	621	48,3%	666	51,7%	1287

Urban zone 1 had more numbers, i.e. 361 adolescents, including 50.1% of cases of boys versus 49.9% of cases of girls

Although an equitable distribution between girls and boys was planned in the present survey, boys outnumbered girls.

In terms of level of education

- 31% of boys reached secondary level and 28% of girls
- 34% of girls have reached the second primary cycle level and 28% of boys.
- 20% of girls and boys did not have any level in conventional school (Quranic level, literate and none met).

The average age of adolescents was 16.86 years for girls and 17.55 years for boys. Those under 18 years of age accounted for 62% of cases among girls and 38% of cases among boys ($p < 0.001$).

Adolescent Sexuality:

The age of onset of first sexual intercourse was 16 years for both girls and boys. Early sexual relations also existed, in fact 10% of adolescents had their first sexual intercourse at an age between 10 and 14 years old. (Figure1).

Age of onset of first sexual intercourse by sex.

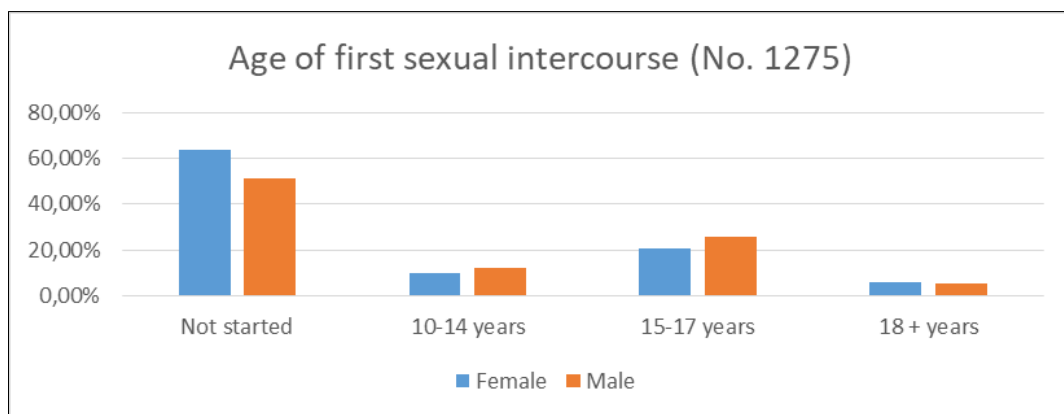


Figure 1: Distribution of respondents according to sex and age of onset of first sexual intercourse

The age group between 15-17 years old was the most common with 20.6% of boy cases and 25.5% of girl cases for the onset of sexuality.

In our study, 60.93% of cases of boys had a sexual partner compared to 39.07% of cases of girls. (**Figure 2**).

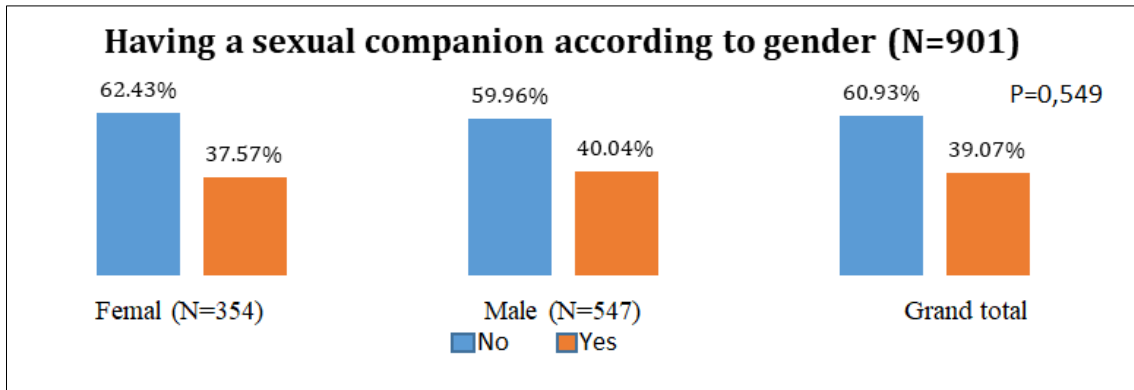


Figure 2: Distribution of subjects according to the presence of a sexual companion according to gender.

Among the 464 adolescents who had had sexual intercourse with a partner or partners in the last six months; There was a male predominance with 255 boys

versus 209 girls. And 37.3% of boys' cases had more than one partner compared to 12.4% of girls' cases (**Figure 3**).

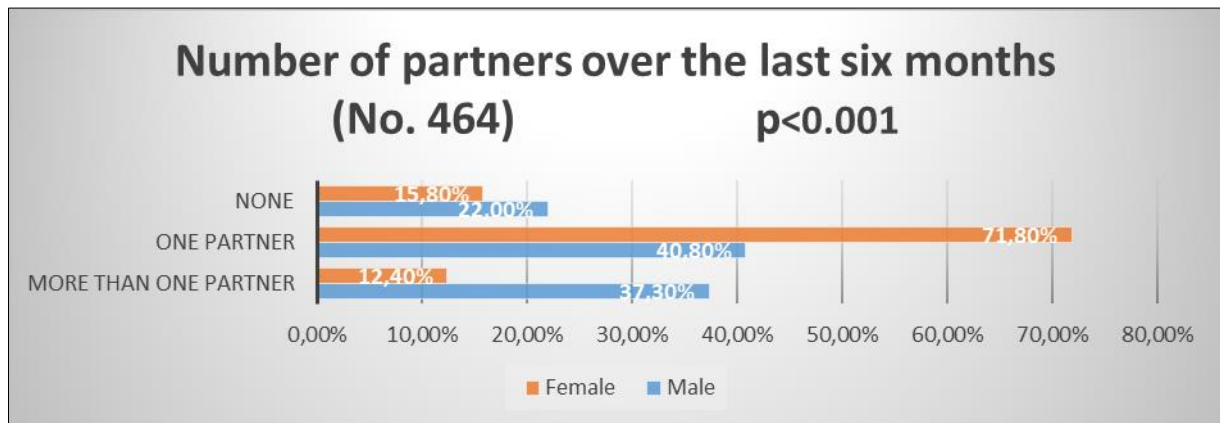


Figure 3: Number of partners in the last six months by gender

In our series, we found 69.9% of cases of boys who had never used condoms with sexual partners

compared to 46.2% of cases of girls out of a total of 375 subjects.

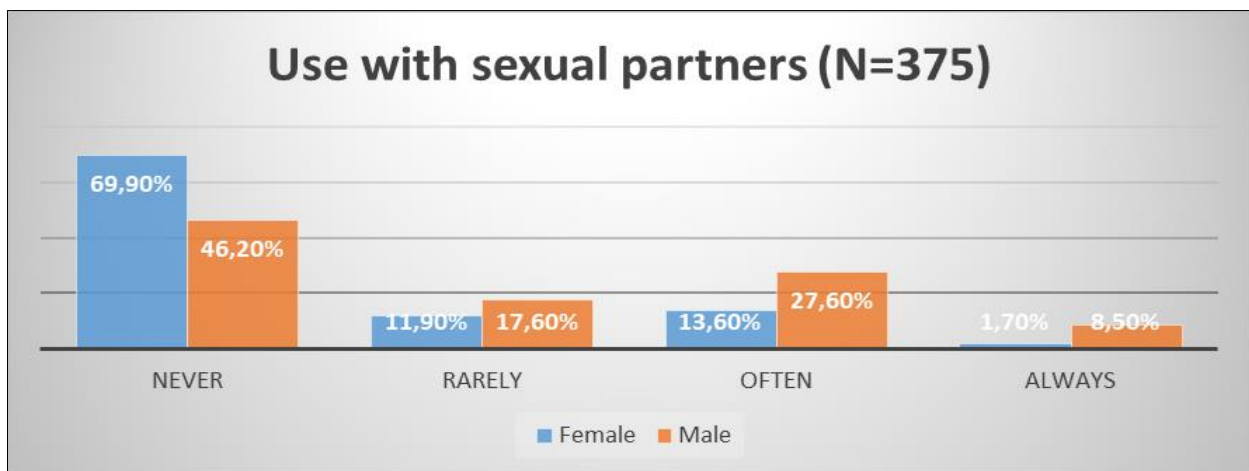


Figure 4: Condom use with sexual partners by gender

DISCUSSIONS

During our survey, 1287 young adolescents were targeted with a participant rate of 92% of cases with disparities between health zones which varied between 99 and 55%. The main reasons given for not reaching the targets were the difficulty of reaching adolescents due to the period of the survey coinciding with that of the rural exodus of young people (girls and boys) in large cities, the criterion of “unmarried” eligibility limiting the reach of girls given that early marriage exists in all these localities.

Sociodemographic Characteristics of Adolescents

Although an equitable distribution between girls and boys was planned within the framework of the present survey, boys were more numerous than girls (51.7% vs 48.3%) for different reasons: girls marry young people while the eligibility criterion for adolescents was that they were not married. In terms of educational level, there was no significant difference between girls and boys ($p=0.304$). In fact, 31% of boys had reached secondary level compared to 28% of girls. In 20% of cases, girls and boys had no level in conventional school (Koranic level, literate and none met). The average age of adolescents included in our study was 16.86 years for girls and 17.55 years for boys.

The girls surveyed were younger than the boys: 62% of girls were under 18 years old compared to only 38% of boys ($p<0.001$). These results could be explained by the fact that the majority of girls aged 18 and over were already married.

Adolescent Sexuality

In our work, 39% of adolescent cases were sexually active. In Mali, according to EDS VI in 2018, 36% of adolescents were sexually active [7], compared to 45.2% in 2020 by Diallo A in Conakry [8]. The average age of sexual debut was 16 for both girls and boys. This result is similar to that of Khemakhem R. 16.15% for boys and 15.83 for girls [9]. Early sexual relations (between 10-14 years old) also existed in 10% of cases. We see an increase compared to 2018 in Mali which was 8% [7]. This sexuality of young people could be explained by the lack of sex education. The average number of partners was one partner, however there was a significant difference between girls and boys in terms of multiple partnerships. Over the last 6 months, 37% of boys had had more than one sexual partner compared to 12% of girls ($p<0.001$). This tendency of multiple partners among boys than more among girls is observed in 1.1% in Niger and 22.6% in Côte d'Ivoire [10]. In 39% of cases the adolescents were sexually active. Among which 80% have had at least one sexual partner in the last 6 months. However, condom use does not follow the same pace. 70% of girls who had sexual partners never used a condom compared to 46% of boys. This difference observed was statistically significant

($p<0.001$). Adolescents used condoms often in 28% of cases for boys and 14% of cases for girls. Systematic use of condoms was in 9% of cases among boys and 2% of cases among girls.

CONCLUSION

It appears from our work that sexuality was a common practice among adolescents. The precocity of sexuality among adolescents requires the implementation of a sex education program for this vulnerable group.

Conflict of Interest: The authors declare no conflict of interest related to this work.

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