

RESEARCH SUMMARY

Understanding Youth Sexuality: A Study of College Students in Mumbai City

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INTRODUCTION

Young girls and boys, in all cultures, experience sexuality in diverse ways. The construction of male and female sexuality is based on gender roles, on division of labour and on kinship arrangements which, in turn, are constructions of a patriarchal social structure. This paper describes the results of a study of sexuality among college going youth in the metropolitan city of Mumbai (formerly Bombay) in India. The study aims at understanding the social, cultural and ideological contexts within which the youth explore and experience sexuality and the various constructions of sexuality that the youth encounter, negotiate and reshape. The study also seeks to understand the consequences of the sexual behaviour of youth in terms of immediate and future health risks such as unwanted pregnancies, Sexually Transmitted Diseases (STDs) and Human Immuno deficiency Virus (HIV) infection for themselves as well as for their partners. Empirical data for the study was collected from a representative sample of urban, low-income, college going youth in Mumbai.

The growing literature on sexuality in the last few decades shows that sexuality is a complex concept as it encompasses not only the biological and psychological, but also the social and cultural dimensions of sexual identity and sexual behaviour (Kakar 1989; Weeks 1986). It embraces many aspects of human existence such as the economic, social, political and genetic (Horrocks 1997). Sexuality, being culturally defined and socio-historically evolved, has different connotations within different communities, societies and groups and even within

the same society the understanding of sexuality may differ with age, social class and gender (Vance, 1984). Sexuality has also been used as a powerful conceptual tool to explore power and gender relations (Dixon-Mueller, 1993).

Much of the literature on sexuality has arisen within the contexts of social and political movements such as the feminist and gay movements in the West with Christianity and capitalism as the backdrop. The contemporary significance of the study of sexuality stems mainly from three sources: the feminist and gay studies which emphasise the relation between gender and sexuality; the behavioural studies in AIDS research and family planning; and from studies in psychoanalysis. The present study, which is primarily motivated by concerns arising out of the spread of AIDS and contraceptive use, also deals with the gender dimensions of the construction and experience of sexuality.

The initial effort to control the spread of the HIV virus was dominated by an epidemiological approach and focussed on the identification of groups of potential victims or carriers, the so-called 'pool of infection' or 'conduit of infection'. In the early stages of research, such groups were thought to consist of homosexuals, intravenous drug users and prostitutes. They were referred to as 'high risk groups' in the HIV/AIDS literature. Subsequent research, which revealed the transmission of the virus through heterosexual routes in many countries including India, blurred the boundaries of the pools of infection and showed the entire population to be at risk. High-risk groups were then expanded to include adolescents, truckers, migrant workers, women, street children, and so on. It is in this context that adolescents, as a special category, emerged and gained currency in studies of sexuality.

The advent of AIDS and the threat of an epidemic that has the potential of wiping out social groups have thus brought adolescents/youth into focus especially because they constitute a large percentage of the total population in India. Recent research on adolescents has largely focussed on their sexual behaviour with a view to assess the extent of 'risk behaviour' as measured in terms of the potential for contracting and transmitting the HIV virus. The research carried out in India on this topic has been influenced by studies done in the Western countries. As a result, sexual behaviour of adolescents is understood largely within a framework that places the individual at its centre with an emphasis on informed choices. There is

considerably less emphasis on the analysis of societal and cultural factors. Recent research in different parts of the world shows that HIV infection cannot be tackled through medical interventions and information dissemination alone and that the norms governing sexuality that act as barriers to HIV protection need to be understood in order to design culturally appropriate policies and programmes.

In India, the experience of adolescence by boys is almost diametrically opposite to the experience of adolescence by girls. The experiences of girls and boys are largely shaped by the constructions of gender, caste, class and community norms. The institution of marriage underlies and strongly determines the gender differential norms that govern Indian youth, such as the taboo on premarital sex. With the onset of puberty, the norms of sexuality underlying the general social norms come to the forefront. The attempt to understand adolescent sexuality must engage itself with the changing constructions of sexuality in general and specifically, with the asymmetrical power relations of gender, caste, class and community within which sexualities are constructed and experienced.

YOUTH AND HIV IN INDIA

The spread of HIV among young people in India is a growing cause for concern. It has been pointed out that a large number of reported AIDS patients in India are below the age of 24 years and have contracted the disease through sex (Goparaju, 1993). The surveillance data show that a large percentage of the infected persons is between the age of 20-40 years (National AIDS Control Organisation, 1994:16). Despite the limitations of the surveillance data, the trend shows that many of those infected have contracted the virus early in life. A study in Mumbai found the average age for men with HIV to be 28 years and for women to be 25 years (ARCON, 1995). In another study, data collected from 12 hospitals/blood banks between 1988 and 1994 revealed that nearly 34 per cent of HIV cases were within the age group of 16-25 years (Bharat, 1996). Hence, viewed from the perspective of public health alone, sexuality among Indian youth constitutes an important area for study.

Despite these alarming trends, sexual behaviour studies have rarely considered it important to include unmarried youth in their sample. In India, sexual behaviour was studied traditionally as part of demographic studies, in relation to family planning and birth control measures within marriage. In recent years, it has become part of the

HIV/AIDS research into sex related risk behaviour. Research into sexual behaviour from the perspective of family planning focuses mainly on married couples, and AIDS research focuses on specific groups-at-risk. Both kinds of research tend to leave out the adolescent/youth groups. The often unstated assumptions behind this exclusion are perhaps that, unlike in the West, adolescent sexual activity is low in India because parents and educational institutions exert greater control over their sexual behaviour, and that premarital sex is taboo.

STUDIES ON YOUTH SEXUALITY IN INDIA

The few studies on youth sexuality in India that are available have been reviewed in detail in Nag (1996) and Jejeebhoy (1996). These studies focus mainly on sexual behaviour and vary significantly in their objectives, approaches and methodologies. Nevertheless, they arrive at a common conclusion that sexual activity (in terms of sexual intercourse) among the youth is on the increase especially in urban areas (Goparaju, 1993; Rakesh, 1992; Savara and Sridhar, 1993; Watsa, 1993). This conclusion is not drawn on the basis of comparison with prior statistical data since no such data is available, nor are these longitudinal studies done over a span of few years to observe trends. The inference that sexual activity has increased is based largely on young people's attitudes towards premarital sex and data collected retrospectively on premarital sex. Jejeebhoy's review of literature on adolescent sexual and reproductive behaviour in India points out that studies on adolescent sexuality are rare, chiefly exploratory in nature, and lack methodological rigour. Most of these studies are restricted to the urban, educated upper class.

A survey conducted on sexual attitudes and behaviour among urban educated youth (15-29 years) found that about 28 per cent of the males and 6 per cent of the females had had sexual contact with someone (Watsa, 1993). Other studies reported that 25 per cent (Goparaju, 1993: 19-23 years), and 19 per cent (Savara, 1993: average age 19 years) of males in their sample were sexually active. A recent survey among college students in Mumbai showed similar trends in sexual behaviour (Rangaiyan, 1996). Some of these studies, Goparaju's for example, did not include females. In Savara's study, the unmarried females did not report having had sexual intercourse. An important finding of these studies is the age at which sexual activity is initiated. It ranges between 16-18 years among males and even earlier **among** females. Thus, it appears from these studies **that** sexual **activity**

among adolescents is much higher and begins at an earlier age than what is commonly believed.

The need to understand adolescent youth sexuality gains importance not only in the context of increasing abortions, STDs and HIV/AIDS, but also with regard to other health problems such as Reproductive Tract Infections (RTIs). The data (again very limited) available on abortions, STDs and RTIs among young people indicate that their sexual activity could be on the rise. For instance, the incidence of teenage unwanted pregnancies and abortions has shown a steady increase in recent years. In 1987-88 there were 24,091 reported Medical Termination of Pregnancies in the age group of 15-19 years and by 1989-90 the figure increased to 41,846 (India, 1992). An increase of one and a half times within a span of two years is certainly alarming. Unsafe abortions are a major source of reproductive mortality and morbidity in India. Many abortions in India are done illegally and often without adequate professional support, which often lead to serious reproductive morbidities. It is estimated that around 5 million abortions occur annually in India and out of these, 4.5 million are done illegally (UNICEF, 1991). An earlier study observed that adolescents constitute a sizeable proportion of the abortion seekers and the typical adolescent abortion seeker is unmarried (Divekar and others, 1979).

In India, STDs rank third among the major communicable disease groups. Of concern, however, is the fact that around 12-25 per cent of the total STD cases are teenage boys (according to studies cited in Ramasubban, 1995:218). A study conducted among the clients of a STD clinic in Pune (a city close to Mumbai) found that three-fourths of the clients were in the age group of 18-19 years (Urmil and others, 1989).

Studies on reproductive health have shown that women, especially those from the lower socioeconomic strata, who suffer RTIs and Sexually Transmitted Infections (STIs), contracted these infections early in their lives (Bhang and others, 1989; George and Jaswal, 1995; Ramasubban, 1992). The RTIs and STIs are closely related to sexual practices and behaviour, and their role in making a person vulnerable to HIV infection has now been well established. These facts indicate that sexual behaviour of the youth have serious health implications. They also indicate that the adolescent/youth in India are perhaps not sufficiently informed about the consequences of unprotected sex, **the importance of contraception and the social and health implications of their sexual behaviour.**

The urban adolescent/youth in India are sexually initiated at an early age due to crowded living conditions, changing aspirations and role models, the influence of mass media and the reduced age at menarche of urban girls (Watsa, 1993). As the available data indicate, the incidence of STDs and the process of urbanisation appear to go together. Maharashtra state, with a high rate of urbanisation has the highest percentage of reported STDs in India (32.6 per cent of the national total) and Mumbai, the capital of Maharashtra, is called the AIDS capital of India. Exposure to mass media, decline in the control over youth traditionally exercised by institutions such as family and schools, increase in age at marriage, changes in social values and aspirations are some of the features of a modern society and an exaggeration of these may be seen in urban centres such as Mumbai.

PROGRAMMES FOR YOUTH

Taking cognisance of the need to target youth and the role of educational institutions in providing sex/AIDS education, the Ministry of Human Resource Development of the Government of India initiated a project in 1991 called 'The Universities Talk AIDS' in various colleges throughout the country. This project is still current and is undertaken by the National Service Scheme (NSS), an all-India organisation of college student volunteers. The project attempts to improve AIDS awareness among college students through discussions, debates, seminars and exhibitions but is still not fully implemented in many colleges. The NSS officer, who is also a teacher from the college, is responsible for conducting these programmes. The success of these programmes relies heavily on the enthusiasm of the individual NSS officers and the support given by the college authorities.

There are other programmes organised at the initiative of local self-governments and by various non-government agencies. The Brihanmumbai Municipal Corporation (BMC) has introduced AIDS awareness programmes in some of its schools in Mumbai, at the secondary school level. The Government of Maharashtra, too, has introduced similar awareness programmes in rural schools. An evaluation of these programmes shows them to be ineffective in raising awareness among the students (Verma and others, 1997). The evaluations attributed the failure of the programmes mainly to the manner in which teachers implemented them. An additional reason could be that the programmes were designed on the basis of inadequate information on students' knowledge, their attitudes and behaviours.

No detailed study of sexuality among unmarried young adults exists in India, so the study reported in this paper aims to bridge the gap and contribute towards a general understanding of youth sexuality in India. The present study focuses on unmarried youth and specifically on the low income urban college students who belong to the age group of 16-22 years. We envisage that the findings of this study may be of use in implementing relevant programmes that are especially aimed at such groups.

The main objectives of the study were to:

- ascertain the knowledge, understanding and perception of low-income college students of Mumbai regarding reproductive physiology, sex, STDs and contraception;
- understand the nature and extent of premarital sexual activity among the students;
- analyse the personal and social contexts in which sexual activity among students takes place and to understand the influence of gender, social and cultural factors; and
- understand educators' viewpoints on adolescent sexual behaviour and the role of educational institutions in influencing adolescent sexual behaviour.

The exploration of sexuality, thus, covers a range of areas such as social interaction among students, knowledge of and attitude towards matters concerning sex, sexual behaviour and sexual experiences, contraceptive use, sexual health and sex education. Finally, the views of students are juxtaposed with the views of educators.

METHODOLOGY

In general, studies on sexuality or sexual behaviour have used either qualitative methods or the survey method to gather data and have not combined the two. The studies using qualitative methods have tried to gather in depth information on the difficult and sensitive topic of sexuality. Their attempt is to discover structures and meaning systems that underlie sexual behaviour. Those using the survey method mainly provide the extent of sexual activity among students, their partners and frequency of sex. While the latter set of studies informs us of the general trends, the former provide in depth information about perceptions, ideas, reasons associated with the behaviour patterns. In this study we have combined qualitative and survey methods to gather data on the varied dimensions of youth sexuality. It was necessary to combine the two methods to meet the objectives of the study.

Study Design

The study was carried out in two phases. In the first phase, qualitative data was gathered and analysed. Qualitative data was gathered first in order to gain a general overview of students' behaviour and to identify certain dominant trends. The information thus gathered was used in designing the second phase of the study. The first phase of the study was carried out during the year 1995-1996. The second phase of the study consisted of designing and conducting a survey, which was completed during the year 1997.

SELECTION OF COLLEGES

The study was conducted among the students of four colleges selected from the city zone of Mumbai. The criteria used for selecting the colleges were:

- students must be drawn mainly from the low socio-economic strata of society,
- the colleges must be coeducational; and
- the colleges must offer both higher secondary (Junior College) and undergraduate courses (Senior College) in Arts, Science and Commerce streams.

These criteria were employed in order to have adequate representation in the sample of boys and girls from various streams such as Arts, Science and Commerce. The study was designed to cover students who had just entered college and those who were about to leave college, and therefore colleges having Junior and Senior colleges were selected. It was assumed that by choosing both kinds of students, the study sample may include both students without sexual experience and those with experience. The low-income group was specifically chosen for the following reasons:

- The existing studies are mainly of students who speak in English and/or those from elite' colleges.
- It is likely that the family may exercise greater control over the behaviour of students from low-income groups when compared to students from higher income groups.
- Students from higher income groups are likely to have more resources and opportunities to explore **their** sexuality **than the** lower income group students.

- Some elite' colleges have been organising sex education apart from the regular NSS programmes for their students, while such programmes are rare if not absent in non-elite' colleges.

Out of the four colleges thus selected, two colleges were selected for collecting qualitative data and the remaining two colleges for the survey.

RESEARCH METHODS

Qualitative Methods

The Qualitative Methods included observation, Focus **Group** Discussions (FGDs) and in-depth Interviews.

Observation

This method was used to gain a general idea of the nature of social interaction among the students and to assess the level of participation of students in the curricular and extracurricular activities held within and outside the college. Students' behaviour was observed in the college canteen, premises of college, restaurants, parks and beaches near the college. The research team also attended some of the health/sex/AIDS education programmes organised by the NSS programme officers in these colleges.

Focus Group Discussions

At the beginning of the qualitative data collection, members of the research team first addressed students from different streams (Arts, Science and Commerce) in their classes and briefly introduced the research project. Students who volunteered to participate in the group discussions were contacted subsequently and separate groups were formed. The FGD participants were, hence, self-recruited.

Separate FGDs were held for students of standard XI (first year of the Junior College) and Third year (final year of the Senior College) and for boys and girls. A total of 10 groups (75 students) participated in the FGDs. A series of discussions were held with each group ranging from two to six sessions. The sessions were of 45 minutes to one and a half hours duration. Reports of all sessions were prepared separately by at least two members of the research team irrespective of whether the session was being taped or not. The individual reports of each session were checked for consistency and were also checked with the transcriptions of the recordings wherever possible.

The sessions were conducted in the local languages, Marathi and Hindi. The verbatim reports were prepared in the language in which it was conducted and later translated into English. The English terms used by the students were retained, while the local terms and phrases were translated into English depending on the context. For instance, boys used the Marathi phrase 'khali jaayache', which literally means going down, but in this context means visiting commercial sex workers.

In Depth Interviews

In depth individual interviews of 87 students (46 boys and 41 girls) were conducted. They were contacted individually by members of the research team at random.

A few of the FGD participants were interviewed in depth while others were newly recruited. The FGD participants chosen for interviews were those who appeared to be more informed about students' activities or had had some personal experiences of relevance to the study. Others were approached by the staff directly. Each participant was informed about the objectives of the study, confidentiality of the data collected and the non-requirement of their identity. They were informed that their participation was voluntary and they could discontinue the interview if they wished to do so. A few students, especially girls, refused to be interviewed.

Survey

The total number of students in each of the two colleges selected for the survey ranged from 2000-3000 students. The sample size planned for the survey was 1000 to be equally distributed among standard XI and Third year students. The sub sample of 500 students was selected based on the principle of sample proportional to the distribution of boys and girls in the different streams of Arts, Science and Commerce in the two colleges. However, the final sample consists of only 966 students (625 boys and 341 girls). This is roughly proportional to the distribution of boys and girls in these colleges, which is around 65 per cent boys to 35 per cent girls. As a result of high rates of absenteeism among the Third year students in these colleges, especially among the Arts and Commerce students, the sample size for Commerce boys fell short by 29 and Arts boys by 5.

The survey in each college was completed in a single day. The sample was randomly selected from those who attended college on

that particular day . A structured self-administered questionnaire was used for the survey. The qualitative data gathered during the first phase of the research was used in designing and structuring the questionnaire. The questionnaires, both in English and Marathi, were pilot tested with students of two colleges different from the four colleges chosen for the study.

The teachers and the college authorities were not involved in the administration of the questionnaire. The students were informed that their participation was voluntary, yet none refused to participate. The introductory talk given by the research team about the significance of the study, confidentiality of the data collected and also the non-requirement of their identity seems to have helped in achieving high rate of student participation. The absence of teachers and college authorities during the survey was equally important in eliciting student cooperation.

Topics Covered

Combining different research methods enabled us to gather information on a wide range of topics ranging from general awareness to specific individual sexual experiences. The FGDs were used to explore general views of students on topics such as male-female interaction among the students, types of friendships, qualities sought in partners/spouses, views on marriage, virginity, premarital and extramarital sex, physical intimacy among the students, what actions are considered to be sexual acts, extent of sexual activity among students in their college and the sources of information on topics related to sex. These topics were explored in detail in the interviews.

Topics such as same sex and heterosexual peer interactions, erotic exposure and language used in describing sex and related topics were also explored in detail during the FGDs and interviews. It is difficult to gather such information through a survey using a structured questionnaire that is self-administered. However, topics such as students' hobbies, habits, their perception of family atmosphere and some information on peer interaction, social networking, exposure to erotic materials and sources of information were covered in the survey. Thus, not all the topics covered in the discussions and interviews were included in the survey.

It was necessary to extensively train the research team in the methods of data gathering and more importantly to sensitise them to the various issues that were likely to come up during data collection. The

young staff (age 23-29 years) themselves carried prejudices, lacked basic information, which was being gathered from students, were inhibited in using local terminology some of which were generally considered vulgar or obscene. Extensive discussions and numerous training sessions were necessary to get the staff to overcome some of these difficulties and to accustom themselves to the use of informal, local language. A deliberate attempt was made to include ex-students of those colleges from where qualitative data was gathered, among the staff. This proved to be immensely useful as they were familiar with the working of the college and the student subculture, and their inputs were useful in preparing probe questions.

The qualitative data was analysed with the help of a word processing package and no other specific software was used. Analysis of the data was done by going over the manuscripts repeatedly. Besides a summary of each interview that was prepared, the data was organised according to emergent themes such as sexual experience, condom use, information of specific topics, misconceptions, and so on. The survey data was analysed using the SPSS package for bivariate and multivariate analyses.

FINDINGS

Sexual Experience

The study showed that college students, especially boys, are sexually active while girls have reported low rates of sexual activity. Non-penetrative sexual experiences (kissing, hugging, touching sex organs) were reported by a large number of boys and girls, while sexual intercourse was reported only by 26.1 per cent of the boys and 3 per cent of the girls. The survey data showed that sexual activity among boys increased with age and work status and more significantly with increase in the level of peer socialisation and erotic exposure. Sexual behaviour among girls was not positively correlated with their work status. However, it was higher among those with higher erotic exposure and social interaction.

Qualitative data showed that male students explored their sexuality more than female students, through multiple partners such as commercial sex workers, 'time pass' friends and older women. The 'time pass' friendships (serial, monogamous, casual sexual relationships) with friends and relationships with older women whom boys refer to

as 'aunties' are of shorter duration and those who reported such relationships had had multiple partners.

Levels of Knowledge and Attitude to Sex

The general level of knowledge regarding anatomy, physiology, contraception and STDs among the students was very low resulting in various myths and misconceptions. Although overall knowledge levels were low, very striking gender differences were observed. Girls were poorly informed about both the male and female anatomy, conception and contraception.

The findings regarding the association between knowledge and sexual experience are specifically interesting. The bivariate analysis showed statistically significant association between knowledge and sexual behaviour. However, in the multivariate analysis, knowledge exhibits an inconsistent relation with sexual experience indicating that higher levels of knowledge need not necessarily lead to increased premarital sex (for details see Abraham and Kumar, 1999).

The qualitative data show that those with sexual experience not only discussed their experience with peers but showed keen interest in gaining more knowledge and clarifying their doubts about sex, contraception and STDs. They are also more motivated to attend the sex education classes. Experience may, therefore, form the basis of seeking knowledge and may become the instrumental reason in seeking and retaining knowledge. Thus, it may not be the case, as is commonly believed by policy makers, college authorities, educators and more so by parents, that sex education leads to increase in premarital sex.

Boys were more liberal in their attitude towards premarital sex than girls. While they held liberal attitudes with regard to male sexual behaviour, their attitudes to female sexual behaviour was conservative. Such double standards regarding sexuality was strong even among the younger group of boys.

Contraception, HIV and Health Risks

Although there were misconceptions, nearly all boys in the sample knew about condoms and their function. Girls, however, had little or no information about condoms. Even the few girls who knew about condoms had only incorrect information. They also had no access to detailed information on other contraceptive methods. Abortion and sterilisation, commonly practised among women from low-income

families and communities, were the most commonly reported methods of preventing pregnancy.

Despite their knowing about condoms, less than 50 per cent of the boys who had reported sexual intercourse had used condoms. Condom use was inconsistent and almost never occurred in the first few instances of commercial sex. The findings show that basic AIDS awareness although widespread among the students, did not prevent boys from engaging in unsafe sexual practices.

While the AIDS awareness campaigns have been successful in providing basic information on HIV/AIDS among the students, they left students with no knowledge about STDs. Lack of information, unsafe sex practices and poor risk perception clearly indicate that the risk of contracting STDs, including HIV, is high among boys. Even though most girls refrain from premarital sex, they may still risk being infected by STDs because of the unsafe premarital sexual practices of boys and also because of their own level of ignorance about STDs and preventive measures.

Sources of Information and Role of Sex Education Programmes

For the boys, the main sources of information on the topics of sex were peers, blue films, mass media campaigns and advertisements. For girls, the main sources were peers, Hindi films, media campaigns and advertisements. Some of these sources reinforced the existing stereotypes, myths and misconceptions, while others appear to have generated newer myths and stereotypes. For instance, some of the AIDS campaign messages reinforce notions of male sexuality as uncontrollable and aggressive while emphasising the need to protect their lives. In another instance it was found that advertisements of condoms had led to a general belief among the girl students that these are tablets to be consumed by both male and female partners. Such misconceptions arose because such campaigns assume a certain level of information to be universal and focus only on the marketing strategies. In the absence of other sources of reliable information, girls had tried to make some inferences about condoms from these advertisements.

The study clearly established that the sex education programmes have not yet reached most of the college going youth of the lower socioeconomic strata in Mumbai. This is in spite of the efforts by the State Government, the BMC, the Ministry of Youth Affairs, Mumbai University, the NSS programme and the widespread media campaign. It may be important to evaluate the existing sex education

programmes and to find out why they have failed to reach a majority of the students and to what extent these programmes succeed in providing useful information to students.

The study shows that educational institutions have failed to be an effective agency for providing information to students. These institutions are caught in a conflict of values wherein they perform their traditional role of being moral guardians and agents of discipline and social control, while sex education demands an openness to discuss tabooed topics. The situation is compounded by the conservative attitudes of the educators in discussing the topic of sex with students. The programmes that are currently followed rely on technical or medical language in order to convey information and are not favoured by the students.

There is a strong belief among educators that sex education will increase promiscuity among the students. This is in contrast with the views of the students themselves and the findings of this study.

Gender Differences

The study revealed the extent of gender differences in every sphere of youth sexuality—in the level of knowledge and access to information, in their sexual experiences and their consequences. While the study provides insights into the gender differences in the construction of sexuality, it shows the operation of sexual ideology derived from a patriarchal social order through the sexual and cultural norms.

Not only do the social and cultural norms, but also the myths and misconceptions act in a manner that subordinate female sexuality. Family socialisation, rigid sexual norms centred around virginity and marriage, inadequate information and differential access to information place girls at a greater disadvantage than boys. The fact that they are urban dwellers and educated up to college level does not enable them to overcome these barriers in order to protect themselves from unwanted pregnancies, STDs and sexual exploitation.

The study found that the influence of religion, family and educational institutions on morality and regulation of sexuality was weakening for males while for females, it continues.

RECOMMENDATIONS

The existing studies, few as they are, provide only glimpses into youth sexual behaviour. The present study, by combining qualitative and quantitative methods, has explored different dimensions of sexuality

among the urban unmarried college students in an Indian metropolis. While the FGDs provided a general overview of students' awareness, attitudes and behaviour patterns, the in depth interviews provided details of the individual's knowledge, attitudes, beliefs and the context of their sexual experiences. The survey attempted to find out the general level of knowledge, attitudes to premarital sex and sexual behaviour and its correlates. The study has led to both findings that can be generalised and findings that are contextual and specific. On the basis of the findings, the following recommendations are suggested.

1. More innovative sex education programmes with a high degree of student involvement at all stages of its planning and implementation are needed. These programmes need to be carefully designed taking into account the adolescent subculture, their language, their anxieties and above all, the myths and misconceptions they hold.
2. Sex education programmes should be introduced at the school and integrated with the curriculum, wherever possible.
3. The scope of the current AIDS awareness campaigns needs to be broadened to include general sex and reproductive health education.
4. Efforts should be made to reorient educators and parents to understand adolescents' need for sex education especially in the context of the growing threat of AIDS and other STDs.
5. There is a need to create platforms and occasions that facilitate open discussions on sex among students as well as between students and teachers.