Adolescents in Uganda

HOME AND LIFE
• 90% of Ugandan adolescents aged 12–19* live in rural areas.
• Nearly 1 in 3 adolescents have lost one or both parents.
• 99% of adolescents have a religious affiliation; of these, 9 in 10 feel that religion is very important to them and attend a religious service at least once a week.
• Half or more of adolescents report that their parents or guardians always know where they go out at night, what they do with their free time or who their friends are.
• More than 9 in 10 of all adolescents are unmarried; however, almost 1 in 5 young women aged 15–19 are married.
• Of the 22% of 15–19-year-old women who have given birth, one-third did not want their last birth at all, and an additional one-fifth wanted the birth at a later time.

SCHOOL
• 7 in 10 young women and 8 in 10 young men are currently in school, and more than 7 in 10 adolescents expect to complete secondary or higher education.
• Of those adolescents who stop schooling, nearly two-thirds cite financial difficulty— inability to pay school fees or lack of school materials—as the main reason for leaving; 1 in 10 females cite pregnancy.
• 42% of females and 34% of males have attended sex education classes or talks; of these, more than three-quarters did so before they first had sex.
• 4 out of 5 adolescents who have attended school believe it is important for sex education to be taught in schools.

WORRIES
• 76% of young women and 63% of young men are worried about getting HIV/AIDS.
• Nearly 7 in 10 young women and half of young men are worried about getting pregnant or getting someone pregnant.
• Nearly half of adolescents are worried about their health, and at least 4 in 10 are worried about getting enough to eat.

SEX
• Nearly 70% of 12–14-year-olds have never had sex, never had a boyfriend or girlfriend, and never experienced kissing or fondling, but more than half have heard of each of these activities.
• Half of 15–19-year-olds have had sex.
• More than 8 in 10 adolescents think that both young women and young men should remain virgins until they marry.
• 34% of adolescent females and 15% of adolescent males have been touched, kissed, grabbed or fondled in an unwanted sexual way.

FIRST SEX†
• 9 in 10 female adolescents and 8 in 10 males had sex for the first time with a boyfriend, girlfriend or spouse. Most say the main reason for having sex for the first time was that they “felt like it” or were married.
• Nearly 7 in 10 adolescents did not use any contraceptive method the first time they had sex.
• 23% of females and 4% of males reported that they were not at all willing at the time of their first sexual intercourse.

---

* “Adolescents” refers to 12–19-year-olds unless otherwise specified.
† Among sexually experienced adolescents (those who have ever had sexual intercourse).
CONTRACEPTION

• The condom is the most commonly used method among sexually active adolescents who are using a contraceptive method.

• 2 in 5 sexually active young men and unmarried sexually active young women currently use no contraceptive method; about half of each of these groups uses the male condom.

• The two main reasons adolescents did not use a condom the last time they had sex were that they did not have one and that they “felt safe.”

• Only 11% of married young women use the condom; 71% use no contraceptive method.

HIV/AIDS AND OTHER SEXUALLY TRANSMITTED INFECTIONS (STIS)

• 99% of all adolescents have heard of AIDS. Of these, about 9 in 10 are familiar with ways to avoid transmission of the AIDS virus, such as not having sex at all, being monogamous with an uninfected partner, or using a condom consistently and correctly;

—nearly 90% have personally known someone who has died of AIDS; and

—three-quarters would be willing to care for a family member infected with HIV, but about 6 in 10 would want the infection kept secret.

• Nearly half of all adolescents have never heard of any STIs apart from HIV/AIDS.

• 26% of sexually experienced 15–19-year-old women and 6% of such men have had an STI.

INFORMATION AND SERVICES

• About two-thirds of adolescents who know of HIV/AIDS have received HIV information from teachers, health providers or the mass media; these are also the sources adolescents prefer.

• Among those who know of any source, adolescents overwhelmingly prefer to obtain contraceptives and STI treatment from government clinics and hospitals.

• Nearly half of those who have had an STI did not seek treatment—mostly because they were embarrassed, did not want other people to know, did not know where to go or thought it cost too much.

• About 60% of all adolescents know about HIV, know about testing and know a place where testing is done; about 4% have ever been tested.

• Among adolescents who know about testing and have never been tested, at least two-thirds want to be tested.

• The most common reasons given by those who want to be tested but have not been are that they are not sexually active or they do not consider themselves to be at risk for other reasons; however, about 1 in 3 adolescents say that they do not know where to go or that it costs too much.

MISPERCEPTIONS

• 4 in 10 adolescents either do not know or do not think that a woman can get pregnant the first time she has sex, and half or more do not know whether or do not think that a woman can get pregnant if she has sex standing up or if she washes herself thoroughly immediately after sex.

• Fewer than 1 in 5 adolescents who have heard of AIDS believe that the AIDS virus can be transmitted by sharing food or by witchcraft or supernatural means, but 4 in 10 think that the virus can be transmitted by mosquito bites.

• About 1 in 5 adolescents who have heard of AIDS are unsure about whether or believe that a man infected with the AIDS virus can be cured if he has sex with a virgin.

SOURCES OF DATA

These data are from a nationally representative, household-based survey of 5,112 youth aged 12–19. The survey was conducted in February–July 2004 and had an overall response rate of 87%. This survey was conducted as part of the project Protecting the Next Generation: Understanding HIV Risk Among Youth, undertaken in Uganda by the Guttormer Institute and the Makere Institute for Social Research in conjunction with ORC Macro, the Uganda Bureau of Statistics and Panos Eastern Africa. The full set of results are published in the report Neema, S et al., “Adolescent Sexual and Reproductive Health in Uganda: Results from the 2004 National Survey of Adolescents.”

This project is supported by The Bill & Melinda Gates Foundation, the Rockefeller Foundation and the U.S. National Institute of Child Health and Human Development (grant no. 5 R24 HD043610). It is being carried out in Burkina Faso, Ghana, Malawi and Uganda, and contributes to the global fight against the growing HIV/AIDS epidemic among adolescents by raising awareness of young people’s sexual and reproductive health needs with regard to HIV/AIDS, STIs and unintended pregnancy; communicating the new knowledge to a broad audience; and stimulating the development of improved youth-serving policies and programs.

Guttmacher Institute
120 Wall Street
New York, NY 10005
Phone: 212.248.1111
Fax: 212.248.1951
info@guttmacher.org
1301 Connecticut Avenue, N.W.
Suite 700
Washington, DC 20036
Phone: 202.296.4012
Fax: 202.223.5756
policyinfo@guttmacher.org
Web site: www.guttmacher.org

Additional copies may be purchased for $0.25 each. Volume discounts are available.