ried adults in Lomé perceive adolescent behaviors, and are not necessarily representative of all adults. Moreover, the male ATBEF sample is less likely to be Muslim than the general male population of Lomé.

Results

Adult Attitudes on Adolescent Behaviors

• Bivariate analyses. In the ATBEF adult sample, only 21% of women and 25% of men said they approved of young people having sex before marriage, and an additional 22% of women and 27% of men somewhat approved (Table 2). Thus, women were significantly more likely than men to hold disapproving attitudes toward adolescents engaging in premarital sex (58% vs. 48%).

A specific question on whether an adolescent female or male should have sex before marriage (yes or no) assessed whether adults' attitudes varied by the adolescent's gender. Although slightly smaller proportions of adults stated that sex before marriage would be acceptable for an adolescent female (27–32%) than for an adolescent male (32–35%), the difference is not significant.*

Overall, just 27% of women disapproved of family planning use among married couples, while the proportion disapproving of use among unmarried couples was far higher (40%, Table 2). Adult women's rates of disapproval were highest for young people using contraceptives (48%), and for one's own son or daughter using contraceptives (46% and 48%, respectively). Women's relatively low approval rates of young people's contraceptive use likely reflects their reluctance to approve of young people having sex before marriage at all. Among men, roughly 23–25% disapproved of contraceptive use among both married and unmarried couples, and a slightly higher proportion disapproved of young people practicing contraception (31%).

Men were significantly more likely than women to approve of contraceptive use in general. It is interesting to note that the level of approval of condom use by people of all ages for STI/HIV prevention is high among both men and women, and even exceeds that of approval for married couples using family planning. The high level of approval for condom use in this population (79% of women and 85% of men) suggests that HIV and AIDS messages have been well understood in Lomé. These condom use messages, however, appear to not always be linked to family planning messages.

• Multivariate analyses. Net of all social and demographic variables, older women (those aged 45 and older) were significantly less likely than 30–34-year-old women to approve of adolescent females having premarital sex, as were Muslim women compared with women who reported no religion or a traditional one (Table 3, page 182). Married women were similarly less likely to approve of young women having premarital sex than were unmarried women. The converse of this association—the greater likelihood of approval among unmarried women—may stem from these women's tendency to rationalize their own sexual activity.

As with women, the factors among men that significantly reduced their likelihood of approving of adolescent females having premarital sex included older age and being Muslim. Additionally, educated men were significantly more likely to approve than were uneducated men. (Although we do not present results of the multivariate model of attitudes toward young men having premarital sex, that model showed the same significant associations as the model for approval of adolescent women having premarital sex.)

Lomé women aged 45 and older were significantly less likely than those aged 30–34 to approve of unmarried couples' contraceptive use. (While married women were similarly less likely than unmarried women to approve, that association was only marginally significant, at p=.054.) Additional factors associated with women's approval of unmarried couples' contraceptive use included socioeconomic status and religion. For example, women living in households with 3–6 of the items measured were more likely to approve than were those living in households that had none, and Muslim women were significantly more likely than those of either no religion or a traditional religion to indicate that contraceptive use would be permissible among unmarried couples. (Muslim women were also significantly more likely to approve than were Protestant women, results not shown.)

Similar factors were associated with women's approval of young people practicing contraception. The data from the multinomial logistic regression comparing approval with disapproval indicate that age and number of household items significantly affected the likelihood that women would approve of young people's contraceptive practice. However, in this model, women's schooling also emerged as a significant predictor, with better-educated women being significantly more likely to approve than women who had received no schooling.

Among men, the only factors associated with their attitudes toward unmarried