

**KNOWLEDGE AND ATTITUDE ON SEXUAL RISK BEHAVIOURS AND  
SELF-REPORTED SEXUAL PRACTICE AMONG RURAL YOUTH OF MON  
STATE**

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**ABSTRACT**

Sexual risk behaviours are the roots of sexually transmitted diseases, including HIV/AIDS, teen pregnancies and other related health and socio-economic consequences.

A community based cross-sectional descriptive study, was conducted in 2016. The objective of the study was to find out the knowledge and attitudes on sexual risk behaviours and self-reported sexual practice among rural youth of Mon State. A total of systematically selected 215 youths from eight villages of Mon State were included. Data were collected through pre-tested semi-structured interview questionnaires and self-assessment questions. To fulfil the study objectives, descriptive and chi-square analysis were done.

Mean age of respondents was 20.75 years. Male female ratio was 1:4, majorities of the respondents were single or never married persons, all were Buddhists and 96.7% were Mon. More than half (59.5%) of respondents were educated up to secondary and high school level, dominant with manual workers.

Knowledge on reproductive health; general reproduction, contraception and sexually transmitted diseases and sexual risk behaviours were low. The knowledge score ranged from 4 to 28 and the mean scores (SD) was 14.13 (4.44) among respondents. The attitudes of the respondents were positive. The attitude score ranged from 21 to 40 and the mean score (SD) was 29.41 (4.37) among respondents. There were evidences of pre-marital sex and low rate of condom usage, majority had sex when the age 20. More than half of them chose Facebook and internet for communication channel.

Gender difference and literacy have effects on knowledge of the population. In addition, attitude was also influenced by literacy. Higher knowledge level related to positive attitude was seen in this study.

The study revealed that the education plays major role in sexual reproductive health. Reinforcing the collaboration with other non-health sectors, especially education sector is needed. Information, education and communication activities concerning reproductive health should be expanded.