CHAPTER - VI

CONCLUSION

The study corroborated the fact that favourable family interactions and experiences reduce the chance of risky sexual behaviour during teenage and adulthood. It is a common belief that children go astray in their teenage and early adulthood due to the influence of peers and friends. This suggests that the proper child rearing involving the inculcation or the instilling of moral values by parents and teachers also contribute significantly to the behaviour in adulthood. Nevertheless in this study most of the respondents reported not having received any moral teaching from parents (91%) and teachers (98%). The study reveals that the most important source of knowledge about sex is peers. (Books do not play a major role in acquisition of knowledge about sex. Combined with the fact that parents and teachers do not impart any sexual education whatsoever, it is evident that the respondents had no authoritative source for knowledge about sexuality. Knowledge passed on by peers would be merely hearsay, myths and misconceptions.)

Risky sexual behaviour among the respondents is found to be not an isolated phenomenon but is concomitant of other undesirable health risk behaviours like smoking and drinking. About 80% of the respondents were smoking and consuming alcohol even in their teenage. Seeing sex movies in teenage too has an impact on one's sexual behaviour as many respondents reported visiting CSWs after seeing sex movies. All the above risky behaviours are predominately indulged in as part of a group of friends and not alone. In
many instances drinking and sexual activities have taken place during picnics/ outings with friends. Thus lack of parental control or wholesome interaction with their parents had given way to undue dependence on peers and increased risk of being coerced by peers to indulge in risky behaviours.

(The naive impression that the mass media is doing adequately in terms of promoting the use of condoms as a safe sex behaviour is belied by the fact that 99% of the respondents in the study had not used condoms during their first sex experience (FSE) which occurred at an average age of 18. This is a strong indication of the need for sexual and other health matters to be taught even at the school level. Over 76% revealed that they never used condom during sexual intercourse. This correlates highly with the high proportion (percentage) who are not aware that condoms can prevent transmission of HIV and other STDs. Inadequate access to knowledge on sexuality and the prevailing lack of openness about sexual matters in our culture is underscored. The findings reveal that the act of sex was pursued by most of the respondents in a compulsive and depersonalized manner as evidenced by the fact that 29% of respondents had initiated sex as fun, 41% wanted to gratify their desire for new experience, 60% had sex to give company to friends, 54% had sex as they were unable to control sex feelings and the commercial sex workers were the predominant sexual partners.)

Findings of the study brought out certain important gender related issues of mores and expectations of sexuality and marriage in this cultural context. While in Indian culture the bride is expected to be a virgin at marriage the same is not true for the bridegroom. 88% of respondents had
indulged in teenage sex about which the bride and her family would most likely have been ignorant.

While in Indian culture chastity of the wife is a paradigm of the marital union, unchaste behaviour of the husband is often condoned. In this study, 76% of married men had extramarital sexual relations. Further the reasons offered for their behaviour are in most instances indefensible. Only 27% said that they had an unhappy married life whereas 41% had extra marital sex as they had to stay away from home on business/work. About 19% were compelled by neighboring women to indulge in sex and 14% of respondents had late marriage and chose to continue their entrenched premarital promiscuous behaviour. Most of the respondents were married at a very young age and their wives were on an average 5 years younger than them. An adequate level of emotional maturity is unlikely to be attained at this young age leading to problems of adjustments after marriage in emotional and sexual terms. There is a high degree of correlation between lack of awareness of sexual needs of the wife and the respondents claiming to have an unhappy married life.

It is traditionally expected that the wife would become pregnant soon after marriage with the majority conceiving within a year of marriage. It is also expected that the wife will be sent to her parent’s home for the period of confinement. This cultural practice cuts down on the time that husband and wife have to get to know each other and make the necessary adjustments. With the advent of the child their attention for each other is no more exclusive. For the husbands this is a heightened period of temptation for extramarital sex while their wives were away at her parent’s house for confinement.
The salient features mentioned above thus bring into focus the paradoxical way in which established socio-cultural norms affect the behavioural patterns of persons.

The shift from the joint family system to the nuclear family with the resultant lack of adult supervision of children and lack of interest in passing on of moral and spiritual values seem to have influenced the behaviour of the respondents leading to promiscuity.

On the other hand conservative attitudes about sexuality and the discriminatory attitudes towards women still persist in our society and are brought out by the promiscuous behaviour of the males in the study before and after marriage.

"Thus it is important to uphold useful traditional values of the past while at the same time fervently working towards uprooting harmful traditional attitudes and ways of life. The study also reveals that sex has been very poorly understood and practised without dignity by many promiscuous males. Though sex with a prostitute is termed as "masturbatory gratification" many males continue to patronize CSWs for mere satisfaction of sexual urge."

**Intervention strategies**

The following intervention strategies are specifically suggested to reduce the risk of HIV transmission and methods of risk reduction during teenage itself. Nevertheless it is very evident that transmission of mere knowledge without focusing on the need for changing behavioural patterns would be inadequate. Persuasive methods which focus towards changing behaviour
integrated with redefinition of cultural and societal values in our society regarding gender issues and sexuality is urgent in the era of HIV/AIDS.

1. **Family**

Parents should realize that the first model to whom the child is exposed is parents themselves and other relatives with whom they come into contact while they grow. The type of environment which the child experiences (smoking/non smoking parents, having common food timings/participation in family chores/arriving promptly after school/play) during early life (<13 years) is an important factor. Therefore:

1. Parents need to be assertive to make their children return home promptly after school/play.
2. Parents should try to have their meals/food as a family, so that the family spirit can blossom as the child grows.
3. Parents should oversee whether the children complete the chores given to them.
4. Parents should realize that smoking / drinking / quarrelling might affect their children’s personality.
5. Parents should continue to provide guidance until their children are independent and responsible.
6. Education should be given to children both by parents and teachers right from late childhood/early teens about the choice of friends, as the influence of friends seems to have a greater impact on the development of personal habits and value system.
7. Parents should also be aware that children's stay away from home on education/work/business/etc, might have an impact on their attitudes, behaviours and value system.

8. Parents/Adults should realize that long term separation of husbands and wife for the sake of confinement should be reduced to a very minimum period and certain related cultural norms should be redefined.

2. Role of school/Educational agencies

The role that the school/college plays in moulding the personality of the individual is important. Therefore the educational authorities should try to

1. Reform the educational system and restructure it in such a way that value based education is given to students aiming at behavioural change.

2. Family/sex education should be given within our own cultural restrictions.

3. It should be the responsibility of our parents and teachers to enable our children/wards to understand that there is equal sharing in the act of sex for both male and female to be mutually sexually satisfied.

4. The common belief that male is the active partner and the female is a passive partner in sex should be changed.

5. The use of condoms and how it facilitates safe sex need to be informed and understood.
6. The paramount importance of peer influence and friends in determining the future of one's life should be dealt with in schools/colleges.

7. Importance should be given to Moral/Religious/Ethics teaching to be a part of the curriculum.

3. (Education through Mass Media/other media)

1. Mass media can be used to educate the youth that sex is not merely a short time interaction, but the culmination of a long time process of sharing and exchange of love and emotional feelings.

2. The value of our long established cultural norm that 'one man one woman' may be emphasized through drama/cinema.

3. The realization of 50-50 responsibility of both husband and wife in the sexual act should be emphasized through electronic media.

4. Many males still are ignorant that their wives too have a desire and need for climaxing in a sexual experience. This aspect may be brought out through electronic media.

5. A special channel on family education/a slot in daily TV programs can also be thought of under the PG (parental guidance) or adults only category.

6. The communication skills required for women to negotiate with their husbands and the need for use of condoms need to be stressed.
4. Law enforcement/Rehabilitation authorities

1. There is a need to check the operation of commercial sex workers in hotels/lodges/national high ways etc and steps should be taken to prevent them from such unlawful activities.

2. Need to rehabilitate the CSW and their families who may otherwise need monetary help and health care.

5. Empowerment of women

1. Women need to realize their power to say ‘no’ for sex if the partner doesn’t adopt safe sex practice. It is needless to say that intercourse will be possible only by the consent of the female sex partner.

2. Use of condom during intercourse should be emphasized by female sex partner.

3. Female spouses should also facilitate the sex process to prosper by keeping their spouses in good mood so that males listen to them.

It is the responsibility of every adult to take part in the task of redefinition of our societal mores and the education of our children and youth to understand sexuality in real terms. Sex is not merely an indulgence isolated from other aspects of individual’s interaction but has impact on other members of society as well. Responsibility to safeguard the health, emotional well-being and consequences related to sexual union need to be understood by all concerned.
Parents have to rear their children with care keeping in mind the consequences of their outlook and values in the future behavioural pattern of their children. It is also the responsibility of the educators and the educational authorities to restructure the curriculum so that there is enough scope for imparting value based knowledge which inculcates wholesome behaviour in the present and future.