EFFECTS OF RELIGION ON FIRST SEXUAL INTERCOURSE AMONG YOUTH AT A PUBLIC UNIVERSITY IN SOUTH AFRICA

Acheampong Yaw Amoateng

School of Research and Post-Graduate Studies

Faculty of Human and Social Sciences

North-West University (Mafikeng Campus),

South Africa.

Corresponding Author: Yaw.Amoateng@nwu.ac.za

And

Tim B. Heaton

Department of Sociology

Brigham Young University

Provo, Utah

Abstract

The aim of the study was to assess the impact of religion on the timing of youth transition to first sexual intercourse using a sample of undergraduate students from the North-West University in South Africa. Cox regression analysis showed that frequency of church attendance has a delaying effect on the age at which youth have first sexual intercourse. Besides religion, gender, ethnicity, race and substance were all significantly associated with age at sexual debut. Females, Afrikaans-speaking youth, and whites were all likely to delay sexual intercourse compared to males, English-speaking and Black African youths. Finally, high levels of substance use by youth were associated with early initiation of sexual intercourse. We conclude that while religion exerts a negative influence on the timing of transition to first sexual intercourse, there is a multiplicity of other socio-cultural factors that equally affect this youth behaviour.

Keywords: Youth, Sexual debut, Substance use, Religion, Survival Analysis, Socialisation.

Introduction

Besides facing the so-called triple challenge of unemployment, poverty and inequality following the country's transition to democracy some 22 years ago, South Africa's youth face the additional challenge of the burden of disease, especially, the high prevalence of sexually transmitted diseases such as HIV/AIDS (Pettifor et al., 2005; Shisana et al., 2009). Because of the implications of such a huge burden of disease for the youth's life chances in areas such as education, employment and health, naturally there have been concerns about their sexual behaviours by policy makers and academics in equal measure. These concerns are evidenced by the fact that in the last two decades, there has been a flurry of study in the country to investigate the sexual behaviours of the youth.

Specifically, many studies have sought to examine the effect of both individual-level and contextual factors such as gender, race, school, peer and community on such sexual behaviours as condom use, number of sexual partners, age at first sexual intercourse (e.g. Amoateng, Kalule-Sabiti and Narayanan, 2007; Amoateng and Kalule-Sabiti, 2016; Amoateng, Kalule-Sabiti and Arkaah, 2014; Hallman & Roca, 2011; Harrison et al., 2001; Shisana et al., 2009; Singh et al., 2000). However, unfortunately while some of the existing studies on youth anti-social behaviours have used religion--albeit mainly religious affiliation--as a control variable, they are bereft of any attempts to examine the effect of religion on such problem behaviours as the early onset of sexual intercourse in a systematic manner.

The aim of the current study is to examine the effect of religion on the timing of the transition to first sexual intercourse among undergraduate students at the North-West University in the North-West Province of South Africa. The importance of such a study cannot be overemphasized. Firstly, the existing literature on the role of religion in the development of positive youth behaviours in South Africa is incommensurate with the pace

of religious resurgence in the country and indeed elsewhere in the African continent. Even though youth's engagement with religious institutions has been one of the reasons for the move away from the *deficit model* of youth behaviours in the youth development literature, there has not been a systematic analysis of the effect of religiousness in South Africa; religion has more often than not been used as a control variable in many of the extant studies.

Second, and related to the above, most of the studies measure a single dimension of religion--religious affiliation--a situation which largely ignores the fact that religion is a multidimensional concept. Thirdly, a cursory look at the existing studies of youth in South Africa would readily reveal that a disproportionate proportion of the studies employ secondary and or high school samples. The current study seeks to add value to the existing body of knowledge on the effect of religion on the development of positive youth by first of all, examining the effects of two dimensions of religion on the age at first sexual intercourse.

Also, unlike the bulk of existing studies in South Africa that have employed mainly high school samples, the current study uses a sample of undergraduate students at a public university in South Africa. We believe that the exposure of youth to the higher education system which engenders the reconfiguration of youth identities in the life course would be so meaningful in terms of youth behavioural outcomes as to warrant the examination of the role religion plays in youth development at this stage of their transition to adulthood. We also control for such factors as youth substance use, gender, race, ethnicity, household socioeconomic status, and family structure.

The Conceptual framework

For over 20 years now, the youth development literature has witnessed a proliferation of studies that are consistent with the view that the resurgence of religiousness and spirituality in the lives of people, especially the youth, has led to a new thinking about youth development. Specifically, this paradigm shift entails the notion that the increasing

engagement with such civil society institutions as religion by young people results in healthy youth development (Crompton, 1998; Lerner, 2002). At the centre of this new paradigm of how religion engenders positive behaviours in the youth are social control theories. According to social control theories of adolescent behaviour, religion functions to encourage adolescents to avoid actions that they might otherwise have taken (Rohrbaugh & Jessor, 1975; Delamater, 1981; Crockett, Bingham, Chopak & Vicary, 1996; Regnerus, 2003, 2007; Smith, 2003; Hardy & Raffaelli, 2003; Rostosky Wilcox, Wright & Randall, 2004). In this context, religion has been seen as a strong force contributing to the postponement, reduction or even restriction of such behaviours as premarital adolescent sexual activity.

As a social control mechanism against undesirable behaviours, religion may be directly mediated in at least three different ways. These include (1) creating sensitivity and awareness of norms, issues of moral order, and appropriate standards of behaviour in the individual; (2) embedding the individual in "conventional activities and in an organized sanctioning network" (p. 137); and (3) offering an ideology that is based on the nature of the deity as a source of punishment and wrath (Rohrbaugh & Jesso,r 1975). Moreover, some of the theories hold that the church is a socialization agent and in this context is responsible for the prescription of values and standards of sexual behaviour, while at the same time the church becomes responsible for playing important roles in shaping sexual decision-making among adolescents and young adults (Verona, 2011; Smith, 2003).

For instance, Smith (2003) suggests three pathways of religion's influence on behaviour, namely, moral directives, role models, and spiritual experiences. Specifically, Smith suggests that these factors promote particular normative ideas of what is good and bad, right and wrong, worthy and unworthy, and so on, and are believed to exist apart from and above human decisions, preferences, and desires. These ideas form a guide to human consciousness, choice and action. The first among these factors is defined as cultural moral

directives of self-control and personal virtue internalized by young adults; they use these to guide life choices and engage in appropriate conduct.

Most religious organizations articulate values and norms that help to distinguish desirable behaviour from undesirable ones, such as sexual promiscuity, substance use/abuse, and so on. This has posed major concerns for some churches, especially the Pentecostals, and Catholic charismatic communities in the demonstration of Christian values in secular society (Cleary, 2007). Such churches tend to place special emphasis on the sphere of intimacy, especially with regards to family, habits, and sexuality (Pierucci & Prandi, 2000). In most studies on Pentecostalism, emphasis is laid on pietism and conservative values. For instance, this theology, discountenanced a variety of types of secular pleasures like modern hairstyle or dress and usage of cosmetics and ornaments. Also on a more serious note, it places a ban on premarital sexual intercourse and pregnancy (Chesnut, 2003). On a similar premise, Catholic charismatic movement also frowns upon promiscuous sexual behaviour and offers support to young persons who desire to remain celibate until marriage (Cleary 2007).

Review of the Empirical Literature

The United States is one country in which there has been a long tradition of research on the relationship between religion and demographic phenomena. Among the social and demographic phenomena studies under this genre of research are such anti-social behaviours as drug, tobacco, and alcohol use and abuse (Cochran, 1993), youth delinquency and violence (Evans, Cullen, Dunaway & Burton, 1995), infant and adult mortality (Koenig, McCullough & Larson, 2001; Hummer, Ellison, Rogers, Moulton & Romero, 2004), while other studies have examined issues such as educational attainment and the labour market (Regnerus, 2000, Muller & Ellison, 2001; Glanville, Sikkink & Hernandez, 2008). Yet, other studies have looked at the relationship between religion and such sexual behaviours as sexual initiation, age at marriage, contraceptive use, abortion, and fertility (Westoff & Jones, 1979; Mosher &

Hendershot, 1984; Parkerson & Parkerson, 1988; Goldscheider & Mosher, 1988; McQuillan, 2004).

In their study which examined the causal interconnections between adolescent sexuality and the religious affiliation and participation of adolescents, Thornton and Camburn (1989) corroborated previous research which showed a strong correlation between religious involvement and adolescent sexual attitudes and behaviour. Specifically, young people who attended church frequently and who valued religion in their lives had the least permissive attitudes and were less experienced sexually. However, while the study's findings supported the traditional hypothesis of an effect of religious participation on adolescent sexuality, it also supported the theoretical argument of sexual behavior affecting religious behaviour.

In a study that used pooled data from two national surveys conducted in 1982 and 1988, Brewster et al. (1998) found that affiliation had modest, but stable, effects among black teens. However, among whites, the impact of a fundamentalist Protestant affiliation increased. White fundamentalists were less likely to be sexually active in 1988 than in 1982. Zaleski and Schiaffino (2000) studied 430 investigated sexual risk-taking among 230 first year college students and found that greater intrinsic and extrinsic religiosity were associated with less sexual activity and condom use among them. Similar studies have been conducted in contexts other than the United States (Hill, Cleland & Ali, 2004; Wood, Williams & Chijiwa, 2007; McKinnon, Potter & Garrard-Burnett, 2008; Verona, Hummer, Dias Junior & Lima, 2010).

In their study in Brazil, Hill, Cleland and Ali (2004), examined the relationship between religious affiliation and extramarital sex among men. They found that non-evangelical men were significantly more likely to report having had extramarital partners as well as unprotected extramarital sex when compared with members of evangelical religions.

Also, McKinnon, Potter and Garrard-Burnett (2008) examined the relationship between Protestantism, fertility and family formation among adolescents aged 15 to 17 years living in the Rio de Janeiro Metropolitan Region. The study found that the odds of ever had a live birth were substantially lower among adolescent women in the mainline Protestant and Pentecostal Protestant churches than among those in the Catholic denomination.

Thus, overall research that has accumulated for the past three decades in contexts like the United States has frequently shown religion to promote positive outcomes in lifestyles among religiously engaged people (Ellison and Levin, 1998; Regnerus, 2003). However, some other studies have reported negative impacts (e.g. Krause, Ellison and Wulff, 1998; Krause & Ellison, 2009). In terms of gender, Wellings *et al*. (2001) in a study of the onset of heterosexual sex in Britain among both men and women found a relationship between family structure and parent's socioeconomic status after adjusting for all variables. Specifically, early intercourse was more commonly reported by women and men whose parents were manual workers. As far as family structure was concerned, they found that the prevalence of early intercourse was 6.8% and 11.0% for those who lived with both parents and others at age 16 years respectively.

Many studies have found a relationship between family structure and youth sexual behaviour in diverse contexts (e.g. Blum *et al*., 2000; Klavs *et al*., 2006; Lenciauskiene and Zaborskis, 2008). For example, in a study of nine European countries, Lenciauskiene and Zaborskis (2008) found that adolescents living in intact families were less likely to be engaged in early sexual intercourse than those who lived in one parent families or families with a step-parent. In fact, apart from adolescents from Greenland, in all the remaining countries, adolescents living in disrupted families were at significantly higher risk for engagement in early sexual behaviour.

However, other studies have found that family structure was not associated with adolescents' sexual behaviour (e.g. Ekundayo *et al*., 2000; Felton and Bartoces, 2002; Browning *et al*., 2004). The use of substance by youth has been seen as a reflection of problem behaviour that violates social norms of appropriate adolescent behaviour (Jessor and Jessor, 1977). This view of adolescent behaviour has received empirical support in many studies. For example, in a study of the North West Province of South Africa, Amoateng *et al*. (2014) found that the use of alcohol and substance like tobacco and marijuana all affected sexual risk behaviours like lifetime sex, recent sexual activity and involvement with multiple sexual partners.

Specifically, they observed that adolescents who reported lifetime use of tobacco were more likely than their counterparts who have never used the substance to report sexual activity in the three months preceding the survey. The odds of those who had ever smoked cigarette were 98% higher than the odds of those who had never smoked cigarette. Also, in their study in the US, Crockett et al. (1996) found support for this problem behaviour perspective. They found that for both males and females, frequent substance use was significantly associated with an earlier sexual debut.

As far as race and ethnicity are concerned, a vast amount of published data has accumulated on the subject of sexual debut in the US and suggests that African-Americans tend to initiate sexual intercourse at an earlier age than Caucasian, Hispanic and Asian youth, while Asians experience sexual debut at a later age when compared with these racial/ethnic groups (e.g. Meston and Ahrold, 2008; Upchurch and Levy-Storms, 1998). In a study of US adolescents' transition to first sexual debut, Cavazos-Rehg *et al*. (2009) observed that African-American males experienced sexual debut earlier than all other groups, while Asian males and females experienced sexual debut later than all groups. Specifically, by their 17th birthday, the probability for sexual debut was less than 35% for Asians and less than 60% for

Caucasians. However, the probability for sexual debut by their 17th birthday was greatest for African-Americans and Hispanic males (69%). In the present study, we use data from a sample of undergraduate students at the North-West University in the North West Province of South Africa to assess the effect of religion on the timing of youth transition to first sexual intercourse.

Data and Methods

The data for the current study come from the *Religion and Positive Youth Development Project* an initiative of Population Studies Department of the North-West University (Mafikeng Campus). Both probability and non-probability sampling methods were used to interview a total of 1430 undergraduate students across the three campuses of the University (i.e. Mafikeng, Potchefstroom and Vaal campuses). In the probability sampling method, stratified random sampling design was employed by disaggregating the samples from each campus by faculties using proportional allocation to size based on the population of students by faculties. In the non-probability sampling method, each faculty samples were disaggregated by year of study.

The sample numbers allocated to each year of study were random. Generally, the least sample numbers were allocated to the first year students, while the greatest sample numbers were allocated to the fourth year students. Finally, in selecting the students to be included in the sample, convenience sampling was used whereby trained students interviewed the numbers of students in each faculty, school, and gender as determined a priori through the stratified random sampling procedure. Out of the target sample of 1430 students, 1144 students completed the interview, yielding a response rate of 80%. Students responded to a battery of questions relating to issues such as religious affiliation, religiosity, spirituality, and

belief in God, sexuality, political and civic participation. Data collection took place between September 2015 and April, 2016[1].

Measures of Variables

The dependent variable in this analysis is youth transition to first sexual intercourse which is measured by the age at which they first had sexual intercourse. Two questions were used to measure the timing of transition to first sexual intercourse. Firstly, respondents were asked: (1) "*Are you sexually experienced*?" The responses were 1='Yes' 2='No', and the second question was: (2) "*If yes, at what age did you first become sexually active*?" Respondents were asked to indicate actual age at which they first had sexual intercourse, so age was measured as a continuous variable.

To examine the effect of religion in the transition to first sexual intercourse, we examined four dimensions of religion: (1) Religious affiliation which is measured by: "What is your religious affiliation?" The responses are categorised as Christian (Protestant), Christian (Catholic) and other; (2) *Self-rated religiosity.* This is measured by asking the respondent: *"How religious do you consider yourself to be?"* The response was a five-point Likert scale ranging from "Not at all religious" to "Extremely religious" and (3) *Frequency of church attendance,* was measured by a five-point Likert scale ranging from "Never" to "Fairly regularly" and (4) "How important is religion is in your life"? This was a five-point scale with responses ranging from 1'Not at all important" to 5 "Extremely important". The respondent's family structure, race, ethnicity, and family's socioeconomic status were used as control variables.

[1] Data collection was halted towards the end of 2015 due to the student unrest on campuses around the country.

Statistical Analysis

Because measures of religiosity are highly interrelated, we use a factor score including how often the respondent attends Church, Mosque, Synagogue or Temple, how religious they consider themselves to be and how important religion is in their lives. Factor loadings are all greater than 0.70. Control variables in the analysis include gender, ethnicity, household structure and household socioeconomic status. Household structure is categorized as living with both parents, a single parent, relative and other types of living arrangements (guardian/foster/alone).

Household socioeconomic status (SES) is the respondent's perception of his or her family's socioeconomic position relative to those of their neighbour's. This is derived from a factor analysis including parental education and socioeconomic status compared to other families in the area. Substance use is categorised as high and low split at the median of the summated scores of ever use cigarette and ever use alcohol. Race is categorised as Black African, white, coloured, and Asian/Indian, while ethnicity is categorised as English, Afrikaans, Isizulu/Isixhosa/Isindebele/Seswati, Tshivenda, Xitsonga and other African languages.

The dependent variable is measured in two ways for both bivariate and multivariate analyses. In the bivariate analysis, we look at the relationship between the independent variables and whether they have ever had sexual intercourse. In the survival analysis, the dependent variable is the time to event, which is the age at which they first had sexual intercourse. Because age at first sexual intercourse is a time dependent variable, we use Cox proportional hazards regression to examine the effects of the covariates on the age at first sexual intercourse in the model. Following Cox (1972) and Clark et al. (2003), the Cox model is written as:

$$h(t) = h_0(t) \times \exp\{b_1 x_1 + b_2 x_2 + ... + b_p x_p\}$$

where the hazard function $h(t)$ is the dependent variable, which is dependent on a set of p covariates $(x_1, x_2, ..., x_p)$ whose impact is measured by the size of the respective coefficients $(b_1, b_2, ..., b_p)$. The term h_0 is the baseline hazard, which gives the value of the hazard if all the x_i are equal to zero. Empirically, estimating Cox regression involves the status, time and covariate variables. The status variable is the dependent variable, $h(t)$ in the regression which is expected to be binary responses, that is the sexual experience of a youth. The dependent variable is therefore whether or not youth have ever had sex. The responses are coded 0 for those youth who indicate that they have never had sex, while those that indicate that they have ever had sex are coded 1.

Results

Table 1 shows the distribution of the sample characteristics. Forty percent of the sample was male, while females constituted 60%. Black Africans constitute 69% of the total sample, while whites make up one-quarter (25%) of the sample; coloureds and Asians/Indians constitute 4.2% and 0.06% respectively. In terms of ethnicity or home language, more than four out of ten respondents (44%) speak the Sesotho/SeTswana/Sepedi group of languages, followed by Afrikaans speakers (27%). This is not surprising given the fact that the North West Province is home to the Batswana ethnic group, while the North-West University used to be Afrikkaans language only institution until 2005. Sixty percent of the youth live with both parents at home during university holidays, 29% live with a single parent, 8% live with other relatives, while only 4% live either with a guardian, foster parent or alone. One the question of family's socioeconomic status, over two-thirds (68%) of the youth perceive their families as having about the same socioeconomic status as their

neighbours, while slightly under one-fifth (19%) perceive their families as being higher in socioeconomic status; only 13% of the youth perceive their families as being lower in socioeconomic status. As far as our main independent variable—religion--goes, over two-thirds (68%) of the youth are Protestant, while one-fifth (20%) are Catholic; only 12% belong to other faiths. One-third (33%) of the respondents report that they never attend church services or only attend on special occasions, 44% indicate that they attend church services occasionally or frequently, while just under one-quarter (23.1%) report regular church attendance. Almost one-fifth (17%) of the youth report that they are either not religious at all or are somewhat religious compared with 84% who report that they are either moderately religious or extremely religious. Moreover, over three-quarters (76%) of the youth report that religion is either very important or extremely important in their lives, while only 7% report that religion is not at all important in their lives.

Tables 1 and 2 about here

Table 2 shows the results of the bivariate analyses. All the religion variables and every one of the control variables in the model are significantly associated with lifetime sexual intercourse. Youth who are Catholic (72%) and those who belong to other religious faiths (70%) are more likely to report lifetime sexual intercourse than Protestant youth (55%). Youth who never attend church services or only attend occasionally are more likely to report lifetime sexual intercourse (67%) than those who report regular attendance (54%). A similar observation is made for importance of religion and self-rated religiosity, whereby youth do not perceive religion as important in their lives and those who report that they are less religious, are more likely to report lifetime sexual intercourse than their other counterparts.

Males Black Africans, and high scores of substance use are all positively associated with lifetime sexual intercourse. Seventy-three percent of males and only 51% of females report lifetime sexual intercourse. Almost three-quarters (73%) of Black African youth report lifetime sexual intercourse compared with 57% and 25% respectively of coloured and white youth. Only 28% of youth who speak Afrikaans as a home language report lifetime sexual intercourse compared with 62% of English-speaking youth and a range of 55% to 84% for youth who speak the various African languages. As far as substance use is concerned, almost three-quarters (71%) of youth with high levels of substance use report lifetime sexual intercourse compared with only 54% of youth with low levels of lifetime use of the two substances. Youth who live with either relatives or either with a foster, guardian or alone report higher prevalence of lifetime sexual intercourse (76%) than youth who live with both parents at home (53%), while youth who report lower socioeconomic status of their families also have higher lifetime sexual intercourse prevalence rate (65%) than youth who report higher family socioeconomic status (50%).

Table 2 about here

Table 3 shows the coefficients in a Cox regression model predicting the rate at which people have their first sexual experience. Negative numbers indicate that people wait longer, while positive numbers indicate they initiate at a younger age. The variables that are significant in determining the timing of transition to first sexual intercourse are substance use, religion, gender, ethnicity as measured by home language, and race. The pattern is very clear: youth who attend church services more frequently wait longer to initiate sexual activity; neither religious affiliation, self-rated religiosity nor the importance of religion in the youth's life affects the timing of sexual debut.

Females wait longer than males. Specifically, the median age at first sex is 17.74 years for males and 20.34 years for females. Black African youth initiate sexual intercourse earlier than their white counterparts. Also, in table 3, we find that youth who report higher levels of lifetime substance use (i.e. alcohol and tobacco), initiate sexual intercourse earlier than their counterparts who report lower levels of lifetime substance use. White and Afrikaans-speaking youth wait longer than Black African and English-speaking youth (the comparison groups respectively) to initiate sexual intercourse. Also, even though youth who live with both biological parents at home tend to wait a little longer, the coefficient is not statistically significant. A similar situation is observed for household socioeconomic status. While there is a tendency for youth from higher socioeconomic status to delay their transition to first sexual intercourse, the coefficient is not statistically significant.

Table 3 about here

Discussion and Conclusion

While there is growing concern worldwide regarding early sexual intercourse among adolescents because of its impact on such outcomes as premarital births and truncated education, in South Africa, the additional problem of a huge burden of disease among the country's youth makes such a concern even more profound. The aim of the present study was to assess the effect of religion on the timing of youth transition to first sexual intercourse using a sample of undergraduate students from a public university in South Africa. To answer the central question of whether religion has an effect on youth transition to first sexual intercourse, we found that while religious affiliation, self-rated religiosity or importance of religion in the youth's life did not affect age at first sexual intercourse, frequency of church attendance had a delaying effect on first sexual intercourse.

This finding corroborates many existing studies that have found a delaying effect of religion on age at first sexual intercourse (Brewster et al., 1998; Ellison & Levin, 1998; Regnerus, 2003). This delaying effect of religion with regard to timing of first intercourse has been attributed to the fact that religion functions to encourage adolescents to avoid actions that they might otherwise have taken (Crockett, Bingham, Chopak & Vicary, 1996; Regnerus, 2003, 2007; Smith, 2003; Rostosky Wilcox, Wright & Randall, 2004). Frequency of church attendance may not only occupy the youth's time which otherwise could be used to engage in anti-social activities, but may also function to ensure the inculcation of the teachings and doctrines of particular religious organisation.

The present study also found that the use of substances like alcohol and tobacco and being male are the most important factors that affect youth transition to first sexual intercourse. The negative effect of substance use on age at first sexual intercourse is consistent with many studies in the existing literature (Amoateng *et al*., 2014; Crockett *et al*., 1996; Jessor and Jessor, 1977). There is a very high rate of alcohol and cigarette use, especially, the former among South Africa's youth[2]. Therefore, the finding about the relationship between substance use and early sexual debut suggests that any efforts to intervene in the prevention of teen pregnancies in the country should include measures to discourage the use of substances such as alcohol and tobacco.

The present study found that Black Africans initiate sexual intercourse earlier than both white youth, while Afrikaans-speaking youth wait longer than their English counterparts to initiate sexual intercourse. This finding also corroborates findings in other multiracial contexts like the US (e.g. Cavazos-Rehg *et al*., 2009; Meston and Ahrold, 2008; Upchurch and Levy-Storms, 1998). In the South African context, this finding is hardly surprising given the historical discrimination against the Black African majority and linguistic groups other

[2] For example, Amoateng et al. (2016) observed that 68% of the youth reported lifetime alcohol use, while 17% and 11%, respectively of males and females reported current use of tobacco.

than Afrikaans in terms of access to the society's resources through apartheid-induced legislation. The fact that most Black African youth tend to be poor and therefore live in poor and unsafe neighbourhoods largely explains why they are involved in such unconventional behaviours as substance use and early sexual activity. Thus, the lack of socioeconomic resources by Black African youth largely explains their tendency to "rebel" against the norms of conventional society through such acts of deviance. On the other hand, whites and especially, Afrikaans-speaking whites were a protected group in terms of access to social and economic resources in the society. Moreover, because Afrikaners who mainly speak the Afrikaans language are descendants of German and Dutch settlers in South Africa, they appear to have retained the conservative religious and authoritarian traits of the two original European cultures.

In terms of gender, we found that males were more likely to initiate sexual intercourse earlier than their female counterparts. It is needless to say that in most cultures communication and sex between a man and a woman are negotiated within the context of culture-based beliefs about sexual functioning. It is something of an irony that perhaps because of the existence of early and universal marriage in many African societies, some observers of African cultures tend to characterise these societies as sexually permissive.

But, most African societies are rather very conservative with regards to sexual mores and norms; to a large extent, the early and universal of marriage norm ensure that women avoid premarital sex and pregnancy. As a matter of fact, among the Zulus of South Africa and Swazis of the Kingdom of Swaziland of Southern Africa, the virginity test and reed dance customs respectively are a practical manifestation of this preference for female premarital chastity in most African societies. In inculcating such norms and beliefs in new members of society, especially females, members are socialised to accept and maintain a higher standard of this sexual chastity relative to their menfolk. This situation therefore largely explains the

tendency among males to not only be involved in such unconventional behaviours as substance use and premarital sex. In conclusion, while the present study found empirical support for the positive role religion plays in youth development in as far as it exerts negative pressure on their early debut of sexual intercourse it is hardly the only factor that protects youth from this behaviour. The study found support for the role of processes such as cultural beliefs through socialisation.

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Table 1: Distribution of sample characteristics

Variable	Number	%
Gender:		
Male	448	39.6
Female	682	60.4
Race:		
Black African	779	69.2
White	291	25.0
Coloured	47	4.2
Asian/Indian	7	0.6
Ethnicity:		
English	129	11.5
Afrikaans	302	26.8
IsiZulu/IsiXhosa/IsIndebele/Seswati	147	13.1
SeSotho/SeTswana/Sepedi	494	43.9
Tshivenda	28	2.5
Xitsonga	14	1.2
Other African languages	9	.8
Family structure:		
Living with two parents	676	59.8
Living with single parent at a time	324	28.6
Living with Other relatives (aunt, uncle, grandparent)	88	7.8
Living with guardian/foster parent or living alone	43	3.8
Family Socioeconomic status:		
A lot/a little poorer than most	215	19.0
About the same amount of money as most	768	67.8
a little/a lot richer than most	149	13.2
Religious Affiliation:		
Christian (Protestant)	678	68.0
Christian (Catholic)	203	20.4
Other	116	11.6
Frequency of religious attendance:		
Never/only on special occasions	351	33.0
Occasionally/frequent attendance	465	43.8
Fairly regularly/regularly	246	23.2
Religiosity		
Not religious at all/Somewhat religious	187	16.5
Moderately religious	458	40.5
Very religious/Extremely religious	487	43.1
Importance of Religion:		
Not at all important/not very	78	6.9

important		
Somewhat important	146	12.9
Very important/Extremely important	857	75.6
Don't know/refused to answer	53	4.7

Table 2: Bivariate analysis of lifetime sexual intercourse

Variable	**Ever had sex**		
Gender:	**Yes**	**No**	χ^2
Male	73.0	27.0	**51.16*****
Female	51.3	48.7	
Race:			
Black African	73.1	26.9	**206.06*****
White	24.8	75.2	
Coloured	57.8	42.2	
Asian/Indian	16.7	83.3	
Home language:			
English	62.4	37.6	**180.86*****
Afrikaans	28.0	72.0	
IsiZulu/IsiXhosa/IsIndebele/Siswati	69.9	30.1	
Sesotho/Setswana/Sepedi	74.3	25.7	
Tshivenda	78.6	21.6	
Xitsonga	84.6	15.4	
Other African language	55.6	44.4	
Family Structure:			
Both parents	53.0	47.0	**31.11*****
Single parent	67.1	32.9	
Relative	75.9	24.1	
Others	71.4	28.6	
Household SES:			
Low	65.2	34.8	**22.76*****
High	49.9	50.1	
Substance use:			
Low	54.3	45.7	**28.34*****
High	71.4	28.6	
Religious affiliation:			
Christian (Protestant)	54.7	45.3	**23.95*****
Christian (Catholic)	71.8	28.2	
Other	70.2	29.8	
Frequency of church attendance:			
Never/Special occasions	67.2	32.8	**24.34*****
Occasionally/Frequent attendance	51.3	48.7	
Fairly regularly/Regularly	54.3	45.7	
Importance of religion:			
Not at all important/Not very	74.3	25.7	**19.24*****

important			
Somewhat important	71.1	28.9	
Very important/Extremely important	52.3	47.7	
Religiosity:			
Not religious at all	68.5	31.5	**22.17*****
Somewhat religious	66.7	33.3	
Very religious/Extremely religious	45.0	55.0	

Table 3: Cox regression analysis of determinants of age at first sexual intercourse

Variable	Exp(B)	Prob.	C.I
Male (Female)	1.804	0.000	(1.528, 2.130)
Afrikaans (English)	0.575	0.012	(0.374, 0.886)
White (Black African)	0.412	0.000	(0.266, 0.640)
Coloured	1.090	0.735	(0.662, 1.794)
Substance Use	1.651	0.000	(1.390, 1.961)
Single (Both parents)	1.083	0.391	(0.902, 1.301)
Relative	1.198	0.199	(0.909, 1.579)
Other	1.029	0.892	(0.681, 1.555)
Household SES (High SES)	0.945	0.529	(0.792, 1.128)
Catholic (Protestant)	0.927	0.473	(0.755, 1.140)
Other Religion	0.789	0.077	(0.608, 1.026)
How often do you attend church/mosque/synagogue/temple?	0.913	0.001	(0.864, 0.964)
How religious do you consider yourself to be?	1.037	0.461	(0.941, 1.143)
How important is religion in your life?	0.970	0.345	(0.910, 1.034)

( )=Reference category