



Kingdom of Cambodia

National Religion King

Sexual and Reproductive Health of Adolescents and Youth in Cambodia

Analysis of 2000 - 2014 Cambodia Demographic and Health Survey Data



National Institution of Statistics
Ministry of Planning



Directorate General for Health
Ministry of Health

Phnom Penh, Cambodia

September 2016

This report presents findings from a secondary analysis of four waves of the Cambodia Demographic and Health Surveys, 2000 to 2014, with support from the United Nations Population Fund (UNFPA) and Australian in Cambodia. Additional information about the Cambodian Demographic and Health Survey (CDHS) can be obtained from the National Institute of Statistics; 386 Monivong Boulevard, Sangkat Beong Keng Kang 1, Chamkar Mon, Phnom Penh, Cambodia; Telephone: (855) 23-213650; E-mail: linahang@hotmail.com; Home Pages: www.nis.gov.kh

Suggested citation:

AUTHORS. “Sexual and Reproductive Health of Adolescents and Youth in Cambodia Analysis of 2000 - 2014 Cambodia Demographic and Health Survey Data.” 2015. Phnom Penh, Cambodia: UNFPA and National Institute of Statistics.

CONTENTS

1. INTRODUCTION

1.1 OVERVIEW OF ADOLESCENT AND YOUTH SEXUAL AND REPRODUCTIVE HEALTH

1.2 NATIONAL SEXUAL AND REPRODUCTIVE HEALTH POLICIES, PROGRAMS AND PRIORITIES FOR ADOLESCENTS AND YOUTH

1.3 ADOLESCENT AND YOUTH SEXUAL AND REPRODUCTIVE HEALTH

1.4 SEXUAL ACTIVITY

1.5 CHILD MARRIAGE

1.6 ADOLESCENT PREGNANCY AND CHILDBIRTH

1.7 ABORTION

1.8 FAMILY PLANNING

1.9 STI & HIV

1.10 CONDOM USE

1.11 SEXUAL AND REPRODUCTIVE HEALTH SERVICES FOR YOUNG PEOPLE

2. DATA AND METHODS

2.1 DATA

2.2 METHOD

2.3 DEFINITION OF INDICATORS OF SEXUAL AND REPRODUCTIVE HEALTH IN ADOLESCENTS AND YOUTH

3. RESULTS

3.1 CHARACTERISTICS OF THE FEMALE AND MALE POPULATION AGED 15 TO 24 YEARS

3.2 MARRIAGE AND SEXUAL BEHAVIOUR

3.2.1 Marital Status

3.2.2 Sexual intercourse by marital status

3.2.3 Age at first sexual intercourse

3.2.4 Age differences between sexual partners

3.2.5 Relationship to most recent sexual partner

3.2.6 Condom use during most recent sexual intercourse

3.2.7 Comprehensive knowledge of HIV and AIDS transmission

3.2.8 Had an STI or STI symptoms

3.3 FAMILY PLANNING AND CONTRACEPTION

- 3.3.1 Current use of modern contraceptives
- 3.3.2 Mix of currently used contraceptive methods
- 3.3.3 Reasons for changing contraceptive method
- 3.3.4 Unmet need for family planning

3.4 PREGNANCY AND MOTHERHOOD IN ADOLESCENTS AND YOUTH

- 3.4.1 Adolescent fertility
- 3.4.2 Childbearing among adolescents and youth
- 3.4.3 Timing of pregnancy
- 3.4.4 Abortion

3.5 MATERNAL CARE

- 3.5.1 Antenatal care
- 3.5.2 Delivery attendant
- 3.5.3 Abortion attendant

4. DISCUSSION / CONCLUSION

4.1 TRENDS IN AGE, MARRIAGE AND SEXUAL ACTIVITY

4.2 PREGNANCY AND MOTHERHOOD IN ADOLESCENTS AND YOUTH

4.3 STIs, HIV AND CONDOM USE

4.4 FAMILY PLANNING AND CONTRACEPTION

4.5 MATERNAL HEALTH

5. REFERENCES

LIST OF TABLES

Table 3.1	Characteristics of female adolescents and youth aged 15-24 years
Table 3.2	Characteristics of male adolescents and youth aged 15-24 years
Table 3.3	Marital status
Table 3.4	Marital status by exact age
Table 3.5	Sexual activity by marital status
Table 3.6	First sexual intercourse by exact age
Table 3.7	Relationship to most recent sexual partner
Table 3.8	Condom use during last sex
Table 3.9	Knowledge about HIV and AIDS
Table 3.10	Contraception methods
Table 3.11	Percent of females aged 15-24 who have stopped using a contraception method and the reason they stopped using that method: CDHS 2014
Table 3.12:	Characteristics of female adolescents and youth aged 15-24 years with unmet need for family planning
Table 3.13	Adolescent childbearing
Table 3.14	Percent distribution of married female adolescents and youth aged 15-24 years who gave birth before marriage, within 9 months of marriage (near) and at least 9 months after marriage by background characteristics and year of survey, Cambodia DHS 2000-2014
Table 3.15	The percent and number of young women 20-24 who have had one or more abortions in their lifetime: CDHS 2010-2014
Table 3.16	Amongst young women 20-24 who had an pregnancy that was aborted in the previous five years, the percent and number of each method of abortion: CDHS 2010-2014
Table 3.17	Antenatal care
Table 3.18	Number of antenatal care visits during the last pregnancy amongst female adolescents and youth aged 15-24 years
Table 3.19	The month of pregnancy in which young women 15-24, who received antenatal care during their last pregnancy, attended their first antenatal care visit: CDHS 200-2014
Table 3.20	Delivery attendant
Table 3.21	Abortion attendant

LIST OF FIGURES

- Figure 3.1 Percent of young women aged 15 to 24 years who had been married by exactly 15, 18 and 20 years of age
- Figure 3.2 Mean age of last sexual partner of young women by age group: 2010-2014
- Figure 3.3 Mean age difference between young women and their last sexual partner: 2010-2014
- Figure 3.4 Percent of sexually active young men aged 18 to 24 years who used a condom at last sexual intercourse by year of survey
- Figure 3.5 Percent of young men aged 15 to 24 years who have a comprehensive knowledge about the risk factors for HIV
- Figure 3.6 Percent of young women aged 15 to 24 years who have a comprehensive knowledge about the risk factors for HIV
- Figure 3.6 Percent distribution of sexually active adolescent and young people aged 15-24 reporting an STI and/or symptoms of STI in the last 12 months, CDHS 2000-2014
- Figure 3.7 Percent distribution of sexually active adolescent and young females aged 15-24 by method of contraception and survey, CDHS 2000-2014
- Figure 3.8 The distribution of contraception methods used by young women aged 15-24 who have had sex: CDHS 2014

EXECUTIVE SUMMARY

Cambodia has the youngest population in Southeast Asia, with 22 % aged 15 and 24 years. Young people face many sexual and reproductive health concerns such as sexually transmitted infections, unwanted pregnancies, unsafe abortion, STIs, HIV and AIDS. These health concerns are exacerbated by the lack of sexual and reproductive health information, knowledge, youth friendly services, poor education attainment (i.e. low school enrolment, high dropout rates, and high repetition rates), and rural to urban migration for employment often placing young people at a social and economic disadvantage, especially those living in rural areas. Limited information is available about the sexual and reproductive health of adolescents and youth in Cambodia, and information that is available generally relates to sub-populations.

One aim of this report was to describe the current state of the sexual and reproductive health of adolescents and youth in Cambodia and this was achieved through the analysis of data on young women aged 15-24 years from the four Cambodian Demographic and Health Surveys (CDHS) conducted in 2000, 2005, 2010 and 2014. Descriptive analyses of key areas of sexual and reproductive health; namely marriage and sexual behaviour, family planning and contraceptive use, adolescent pregnancy and motherhood, knowledge of HIV and AIDS, and the occurrence of symptoms of sexually transmitted infections (STIs); allowed trends over a fifteen year period to be examined. Each of these key areas were stratified by age, urban/rural location, province or region of Cambodia, education, socio-economic status and where appropriate gender and religion. As the DHS are cross-sectional surveys it is not possible to establish causal relationships among variables.

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_19512

