Umthente Uhlaba Usamila

The 1st South African National Youth Risk Behaviour Survey 2002

DEPARTMENT OF HEALTH

MRC
SOUTH AFRICA

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REPORT PREPARED FOR THE SOUTH AFRICAN NATIONAL DEPARTMENT OF HEALTH

Report prepared for the South African National Department of Health by the National Health Promotion Research and Development Group of the Medical Research Council, South Africa.

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Principal Investigator

Prof SP Reddy, PhD
Director: National Health Promotion Research and Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Project Coordinators

Ms S Panday, BPharm, MPH
National Health Promotion Research & Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505
(Ex-employee)

Mr D Swart, BSc(Med)Hons, HDE(PG)Sec, MPhil
National Health Promotion Research & Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Study Advisor

Prof HW Van den Borne, PhD
Professor: Patient Education
Department: Health Education and Health Promotion
Maastricht University
P O Box 616, MD
Maastricht
The Netherlands

Co-investigators

Ms S James, BSc(RN), Psychology(Hons)
National Health Promotion Research & Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Dr KD Monyeki, PhD
Chronic Disease of Lifestyle Unit
Medical Research Council
P O Box 19070
Tygerberg, 7505

Dr N Morojele, PhD
Deputy Director: Alcohol and Drug Abuse Research Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Prof M Seedat, PhD
Director: Crime, Violence and Injury Lead Programme
Medical Research Council
P O Box 19070
Tygerberg, 7505

Prof CC Jinabhai, PhD
Head: Department of Community Health & School of Family & Public Health Medicine
Nelson R Mandela School of Medicine
University of Natal
Private Bag 7
Congella 4013
Durban

Prof SL Amosun, PhD
Director: School of Health and Rehabilitation Sciences
Head: Department of Physiotherapy
University of Cape Town
Anzio Road
Observatory, 7925

Mr G Stevens, MPhil
Institute of Social Sciences
University of South Africa
PO Box 1087
Lenasia, 1820

Steering Committee

Dr K Swart, PhD
National Life Skills Coordinator
National Department of Health
Private Bag X828
Pretoria
0001

Ms Z Mthembu, BCurr, MPDM
Director: Health Promotion
National Department of Health
Private Bag X828
Pretoria
0001

Prof SP Reddy, PhD
Director: National Health Promotion Research and Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Ms S Panday, BPharm, MPH
National Health Promotion Research & Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Mr D Swart, BSc(Med)Hons, HDE(PG)Sec, MPhil
National Health Promotion Research & Development Group
Medical Research Council
P O Box 19070
Tygerberg, 7505

Mr A Seckle
Deputy-Director: Life Orientation
Department of Education
Private Bag X895
Pretoria
0001

Dr D Allen, MD, MPH
Centers for Disease Control and Prevention - Southern Africa: Director
P O Box 9536
Pretoria
0001

Statisticians

Mr N Kambaran, BSc(Hons)
ARCH Actuarial Consulting
P O Box 311
Newlands
7725

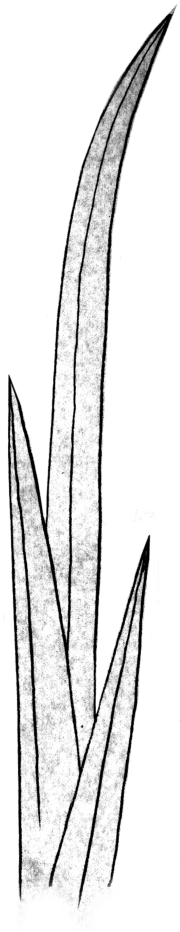
Mr R Omardien, BBusSc(Hons)
ARCH Actuarial Consulting
P O Box 311
Newlands
7725

Peer Review Committee

Prof R DiClemente, PhD
Charles Howard Candler Professor
Schools of Public Health and Medicine (Infectious Diseases and Pediatrics)
Associate Director: Center for AIDS Research
Emory University
1518 Clifton Rd., NE
Atlanta, GA 30322
USA

Prof F Wong, Ph.D
Associate Professor
International Health Program
School of Nursing & Health Studies
Georgetown University
3700 Reservoir Road NW
Washington, DC 20057-1107
USA

Dr R A C Ruiter, PhD
Assistant Professor: Applied Social Psychology
Department of Experimental Psychology
Maastricht University
PO BOX 616
6200 MD Maastricht
The Netherlands



Umthente Uhlaba Usamila

Umthente is an indigenous grass with a sharp pointed apex.

Uhlaba usamila means that this grass prickles one while it is in the early stages of development.

Umthente uhlaba usamila is an Nguni idiom which means that engaging in risk behaviour while still in the youthful stages of life does have consequences and is dangerous. These consequences have impact on health (disease), social roles (school failure), personal development (depression/suicide) and preparation for adulthood (limited work skills).

The youth of South Africa are constantly exposed to risks, which may promote substance use, unprotected sex, unhealthy eating habits and violence. These behaviours that are usually adopted during their youthful years and often persist into adulthood, are interrelated, and in most cases, are preventable.

In addition to resulting in morbidity and sometimes mortality, these behaviours simultaneously result in many of the social and educational problems that confront the nation, including failure to complete high school, unemployment, and crime.

In order to protect the youth from these risk behaviours, it is therefore necessary to educate them at an early age on the dangers and consequences, as well as to foster health promotive behaviours and environments.

Foreword from the Minister of Health

Adolescents make up a significant proportion of the South African population. Adolescence is a period that is generally associated with low mortality rates and a low incidence of disease. Adolescence is however also a time of exploration, opportunity and risk.

The consequences of risky behaviour are serious. These include: assaults; traffic accidents; suicides; teenage pregnancies; and infectious diseases such as sexually transmitted infections, including HIV and AIDS. In addition, the long-term effects of unhealthy lifestyle choices like smoking, the use of alcohol and other substances, the consumption of foods, and particularly fast foods, that contain high quantities of fat and sugar, and inactive lifestyles, often initiated during the youthful years, eventually translate into a range of chronic diseases in later life. Many risk behaviours also lead to psycho-social problems including depression and anxiety.

All of this causes human pain and suffering and places a significant financial burden on the public health system. And yet, we know that interventions aimed at prevention could yield great benefits for the young people concerned, as well as for the public health system and the country in general.

Existing data suggests that a high percentage of school pupils in South Africa use alcohol, tobacco and drugs; engage in unprotected sex and are both perpetrators and victims of violence. But these studies, conducted several years ago, were not broad-based, and as a result, their applicability to young people in South Africa generally was questionable. The Department of Health therefore identified the need for a broad-based and comprehensive national survey aimed at the whole adolescent population. It subsequently conducted the National Youth Health Risk Behaviour Survey in partnership with the Department of Education. The survey provides both national and provincial governments with objective data to define important health problems, to inform policy and to determine priorities for programme implementation.

We plan to repeat the survey every three years so that we can carefully determine current trends and problems associated with the health and well being of our young people. The information gained will allow programme managers to develop targeted interventions and to monitor the effectiveness of their work against a baseline.

This study would not have been possible without the involvement, cooperation and hard work of many people. I would therefore like to acknowledge all the learners who participated in the survey and to thank the many other role players and partners acknowledged elsewhere. I am grateful to the Centres for Disease Control (USA) for technical and financial support, and I would like to offer my congratulations to the Medical Research Council for spearheading the process. And finally, I would like to thank the officials from the Department of Health for their hard work and dedication.

DR MANTOMBAZANA TSHABALALA-MSIMANG

Minister of Health

Foreword from the Minister of Education

In 2002, my Department in partnership with the Department of Health, commissioned the Medical Research Council to undertake the Youth Risk Behaviour Survey. The survey was undertaken to provide us with data on the prevalence of the behaviour that places school going children at risk and to advise on programmes for intervention.

This is the first national survey of its kind that has been conducted in South Africa. Other countries, like the United States of America have been conducting such surveys since 1990.

In 1999 my Ministry launched a five-year plan, Tirisano, to transform the education system in South Africa. This programme aims to address educational, health and social needs of learners and includes programmes of sexuality, gender, school safety, health and skills. This programme, like everything else we do in the Ministry of Education is based on two key principles. Firstly, it is guided by the fundamental belief system laid down in the Constitution, and, in particular the principle of freedom, justice and democracy. Secondly, it is based on the principle of doing everything that is in the best interest of the child.

To do this, we have committed ourselves to working strenuously and in partnership with others towards achieving the mission of establishing a caring and responsive education and training system of the 21st Century. Our motto of Tirisano is not an empty slogan. We have witnessed increasing partnerships between the Department of Education and other role players in both the public and private sector and this report indicates the fruits of Tirisano. It is our belief that only in this way can we move towards an education and training system, which empowers children to reach the ideal promised in the Constitution to 'free the potential of all our people'.

You will note from the report that the survey focuses on a number of behavioural patterns which affect young people. These include suicide, substance abuse and sexual behaviour. The safety of schools and the prevention of crime and violence are enormous challenges facing schools and communities. The 'Safe Schools' initiative of the Department of Education is aimed, not only at freeing the community from fear of victimisation, but also at the realisation of the potential of all our youth. Its focused drive is aimed at developing an environment in which the sharing of knowledge is enabled. Schools can influence childrens' ideas about sex and relationships even before the onset of intimate encounters and they play an important role in imparting the fundamental values of our Constitution. Our Safe Schools initiative invites the inclusion of all those who believe in the normalisation of the learning environment as a place of freedom and respect, and as the nerve centre of a community at peace with itself.

It therefore gives me great pleasure to commend this report, which gives a detailed account of risk-taking behaviours that young people engage in. Most importantly, this report provides important data that will assist in the development of evidence-based intervention. As the Nguni idiom says, Ligotshwa lisemanzi. It is easier to bend a stick whilst it is still wet. Early intervention is the most cost effective and reliable way to support and guide young people to self- fulfilment through education. As the age at which young people experience their first intimate relations steadily falls, dealing with HIV/AIDS and nurturing a culture of sexual and social responsibility requires very serious and decisive intervention and attention from all of us.

PROF KADER ASMAL, MP

Minister of Education

"*A passion for the possible*"

(Søren Kierkegaard 1813 – 1855)

EXECUTIVE SUMMARY

This Youth Risk Behaviour Survey is one of the first studies undertaken in South Africa, and possibly in Africa, to establish the prevalence of key risk behaviours, namely: intentional and unintentional injuries, violence and traffic safety, suicide-related behaviours, behaviours related to substance abuse (tobacco, alcohol and other drugs), sexual behaviour, nutrition and dietary behaviours, physical activity and hygiene related behaviours.

The Medical Research Council was commissioned by the National Department of Health of South Africa to undertake the Youth Risk Behaviour Survey of 2002. It consisted of sampling 23 schools per province, within which 14 766 learners were sampled and 10 699 participated. The terms of reference were to provide nationally and provincially representative data on the prevalence of the above behaviours that place school-going learners at risk.

The South African Youth Risk Behaviour Survey was adapted from the youth risk behaviour surveillance system (YRBSS) which was developed by the Centers for Disease Control and Prevention (CDC), in the United States in 1990. Its aim is to monitor priority health risk behaviours that contribute to morbidity, mortality and social problems among youth and adults.

Children and adolescents below the age of 19 years make up half of the South African population of 44.8 million. [1] Following a history of marginalisation, South African youth are experiencing a transition in their political, social, demographic and economic environment as the country moves from an authoritarian to a democratic state. The transition to democracy has made schooling compulsory, which means large numbers of young people are now engaged in the process of education. [2] Almost 12 million children are enrolled in schools and they account for 28% of the total population. [3] The school setting therefore provides an ideal social context to obtain information about young people and their behaviours.

Over the last decade the South African Government adopted several global legislative and policy initiatives to promote the health and well-being of young people, firmly establishing a sound constitutional, legislative and policy foundation for the social development of youth. During this decade a substantial number of social and development programmes have been implemented. These provide the milieu within which school-based education relating to health and development issues might take place effectively. All these policies and programmes face critical challenges in terms of the risk transition that youth are undergoing.

It is therefore important to initiate systematic monitoring of behaviours that place young people at risk, so as to develop an evidence base for intervention planning. Additionally, such a database will contribute towards tracking the youth as the transition continues. The objectives of the study therefore were to provide provincially and nationally representative data, inform intervention development, inform health policy development and adaptation, establish baseline data to assess and project how risk behaviours change over time, and provide an early warning system for future epidemics related to risk behaviour.

The Health Promotion Matrix provides a basis for the various strategies and levels of impact of health promotion activities, and can be applied to any single behaviour or cluster of behaviours that place young people at increased risk of morbidity and mortality. The strategies include health education and health information, provisions and facilities, and legislation and biotechnological interventions, while the levels of impact range are the primary prevention level, the early detection level and the patient care level. Such a framework will contribute to a sustained package of interventions to promote behaviour change, including the management of research and capacity development activities.

This survey was a cross-sectional national prevalence study among secondary school learners in South Africa. The study sample comprised of grades 8, 9, 10 and 11 learners selected from Government schools in the nine provinces of South Africa. The survey was planned for all nine provinces of South Africa using a two-stage cluster sample design so as to ensure nationally and provincially representative data.

Data were collected through self-administered questionnaires as well as by taking measures of height and weight of each learner. The data collection period extended from August to October 2002. Before data collection commenced networking occurred with the schools, provincial Departments of Health and Education and other stakeholders to obtain their endorsement and support for the

study. A range of individuals from various sectors such as health, education and community structures, for example the Youth Commission and universities, were invited to undergo specialised training in order to be selected to work as survey administrators and anthropometric data collectors.

Standardised methods for conducting the study (preparing packages for schools, couriering the packages, couriering equipment for taking height and weight measurements, procedures for supervising the answering of the questionnaires in the schools, collecting the questionnaires and answer sheets, taking of anthropometric measures and couriering the data and anthropometric equipment back to MRC in Cape Town) were developed. Data analysis was undertaken using the Epi-info program and ethical approval for the study was obtained from the South African Medical Association.

The overall response rate was 68%. In summary, there were considerable variations across age, gender, grade, race and province for each of the risk behaviours, and in the absence of good-quality representative national data for this age cohort, it is difficult to comment on trends – besides providing the actual prevalence of each behaviour. This landmark study has established a baseline for future studies and analysis of risk behaviours among youth.

With regard to behaviours related to intentional and unintentional injuries, over 17% of learners carried weapons and 41% had been bullied in the past month, 14% belonged to gangs during the past six months, and 10% had been forced to have sex. On school property during the past month 9% of learners carried weapons, 15% were threatened or injured and 19% were injured in physical fights, while a third (32%) felt unsafe at school.

Over one-third of learners (35%) had ever been driven by someone who had been drinking, while 8% had ever driven after drinking.

In the past six months a quarter of learners (25%) had experienced feelings of sadness or hopelessness, 19% had considered suicide and 17% had attempted suicide; 28% of those who attempted suicide required treatment.

Substance abuse was also investigated. Alcohol consumption ranged from 49% for ever having used it, 32% for drinking in the past month, and 23% had engaged in binge drinking in the past month.

With regard to smoking 31% had ever smoked. Among current smokers, 84% had been exposed to passive smoking in the past week and 48% of them had a parent or guardian that smoked. Among never smokers, 56% had been exposed to passive smoking in the past week, and 30% of them had a parent or guardian that smoked. Drug consumption varied from 13% for ever having using dagga, 12% for heroin, 11% for inhalants and 6% for Mandrax.

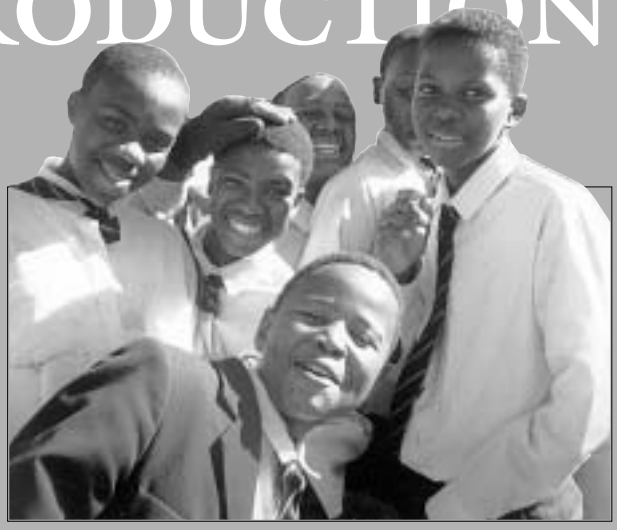
With regard to sexual behaviour, 41% of learners had had sex, and the age of initiation of sexual activity was under 14 years for 14% of them. Among the learners that had ever had sex, 54% had more than one past sexual partner, 70% had had sex in the past three months, 14% had had sex after consuming alcohol or drugs, only 29% practiced consistent condom usage, 16% had been pregnant, and overall 72% had received education regarding HIV and AIDS.

Anthropometric analysis of nutritional status with respect to undernutrition revealed stunting (low height for age) in 11% of learners, while 9% were underweight (low weight for age), and 4% had wasting (low weight for height). With regard to overnutrition, the prevalence of being overweight was 17% and the prevalence of obesity was 4%.

With regard to physical activity, 29% had no physical education classes in schools and 25% watched TV for over 3 hours per day. With regard to hygienic practices among learners, 89% brushed their teeth daily, 89% had their own toothbrushes and 76% washed their hands after going to the toilet.

The survey generated both general and specific recommendations. The key general recommendation acknowledged the need to repeat the Youth Risk Behaviour Survey on a triennial basis. This will provide a long-term mechanism to monitor the socio-demographic transition experienced by the youth, and the impact of youth-targeted interventions. Secondly, it is recommended that a Youth Development Programme (YDP) be set up. The YDP in collaboration with the National Youth Commission, Government departments and all other stakeholders will be responsible for the health and social development programming for youth across social clusters. Specific recommendations were made to address the clusters of behaviours covered in this survey, based on the concept of intersectoral intervention development to limit behaviours that place young people at risk.

SECTION A
INTRODUCTION



CHAPTER 1

Introduction and Background

1.1. Introduction

The Medical Research Council was commissioned by the National Department of Health of South Africa to undertake the Youth Risk Behaviour Survey in 2002. The terms of reference were to provide national and provincial representative data on the prevalence of behaviours that place school-going learners at risk. The Youth Risk Behaviour Survey is the first national survey of a cluster of behaviours conducted since the emergence of a single democratic school system in South Africa. It consisted of sampling 23 schools per province, within which 14 766 learners in grades 8, 9, 10 and 11 were sampled and 10 699 participated.

The Youth Risk Behaviour Surveillance System (YRBSS) was developed by the Centers for Disease Control (CDC) in the United States of America (USA) in 1990 with the aim of monitoring priority health risk behaviours that impact on the main causes of morbidity, mortality and social problems among youth and adults. In the USA the survey is conducted every two years among grade 9-12 learners. The data are used to design and evaluate programmes to combat the effects of high-risk behaviours. Examples are New York City, where data on unintentional injuries led to the development of the "Safety Makes Sense" programme, while in Tennessee state legislators used YRBSS data to support the School Health Improvement Act, and in Washington DC the data were used to raise funding for a school health clinic.[4]

Children and adolescents below the age of 19 years make up half of South Africa's population.[5] Following a history of marginalisation, South African youth are experiencing a transition in their political, social and economic environment as the country moves from an authoritarian to a democratic state. The transition to democracy has made schooling compulsory, which means large numbers of young people are now engaged in the process of education.[2] The school setting therefore provides an appropriate social context to obtain information about young people and their behaviours, and this setting is also ideal for future health interventions.

The objectives of the study were to:
- provide provincially and nationally representative data
- inform intervention development
- inform health policy development and adaptation
- establish baseline data to assess and project how risk behaviours change over time, and to provide an early warning system for future epidemics.

In this survey, data on the following behaviours were collected from school learners:
- Intentional and unintentional injuries: violence, traffic safety and suicide-related behaviours
- Substance abuse: tobacco, alcohol and other drugs
- Sexual behaviour
- Nutrition and dietary behaviours
- Physical activity and
- Hygiene-related behaviours.

1.2. Background

South Africa is an upper-middle-income developing country, with a mix of First World and Third World economies, and a large gap between rich and poor. These extremes of wealth and poverty

are due to 350 years of colonialism and apartheid[a]. Almost 78% of the population is "Black/African" and the prevalence of poverty is higher among the "Black/African" population with 72% of the poor living in rural areas. South Africa has rich cultural traditions with eleven official languages.[6]

Almost 12 million children are enrolled in schools and they account for 28% of the total population.[3] The South African Schools Act of 1996 makes schooling compulsory for all 7 to 15-year-olds.[2] The school therefore facilitates access to a large number of young people. Furthermore, schools in SA provide a relatively stable environment that can influence the lives of a wide array of people, such as learners, educators, parents and the community. In addition, many schools have the infrastructure to support health promotion interventions, making them ideal centres for community development.

Since 1994 the South African Government has undertaken several international legislative and country-level policy initiatives to promote the health and well-being of young people, for example, internationally the signing of the World Summit Declaration and the ratification of the Convention on the Rights of the Child,[7] and of the Framework Convention for Tobacco Control.[8] At a country level, the National Plan of Action for Children is a further illustration of existing commitments to improving the health of the youth in South Africa.[9] The Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) and Sexually Transmitted Infection (STI) Strategic Plan For South Africa 2000-2005 highlights youth and their sexual behaviour as a priority both for research and service delivery.[10] In particular, the Ministry of Education has also launched a five year plan entitled "The Tirisano programme" to transform the education and training system in South Africa from one of segregation and disparity to one of equal opportunity for all South Africans.[11] This programme spans both the educational and health needs of learners to include sexuality, gender, substance misuse and HIV and AIDS. Additionally, a Drug Policy that bans the use, distribution, and possession of both legal and illegal drugs has been implemented within the school system.[12] The above policies have established a constitutional and legislative foundation, which in turn creates the milieu needed to promote health and development interventions for young people.

Concomitant with the democratic transition affecting all sectors of society, South Africa is also undergoing an epidemiological transition. This is characterised by a triple burden of disease, namely infectious diseases underpinned by poverty and underdevelopment; chronic diseases associated with urbanisation and industrialisation, and intentional and unintentional injuries that are closely associated with high levels of violence. The growing HIV/AIDS and tuberculosis (TB) epidemics exacerbate this burden of disease. Furthermore, the top ten risks in the global burden of disease, namely underweight, unsafe sex, high blood pressure, tobacco consumption, alcohol consumption, unsafe water, sanitation and hygiene, iron deficiency, indoor smoke from solid fuels, high cholesterol and obesity, have links to both poverty and industrialisation, which co-exist in South Africa.[13]

Historically, public health decisions in South Africa focused mainly on reducing mortality rates. This can be problematic because such decisions miss important changes in risks for disease as well as changes in disease profiles, which precede mortality rate increases by decades: the time from which risk behaviours start to occur in a few individuals in a population to the time when changes in death rates become obvious, to ill health and disability. For example, the lag between exposure to risk and disease manifestation as in the case of smoking behaviour and lung cancer is 15 to 25 years. In the case of smoking in South Africa, age-standardised lung cancer death rates for 45 to 75-year-olds for the period of 1968 to 1988 show a 100% increase in lung cancer for "Coloured" men and 300% among "Coloured" women.[14] These sharp increases in lung cancer prevalence reflect the smoking pattern in this population of a decade or two previously. The Youth Risk Behaviour Survey therefore aims to provide data to help estimate the extent of *future* potential epidemics and contribute to the development of evidence-based interventions.

a. During the Apartheid years all South Africans were classified in accordance with the Population Registration Act of 1950 into "racial groups" viz. "Black/African" (people mainly of African descent), "Coloured" (people of mixed descent), "White" (people mainly of European descent) or "Indian" (people mainly of Indian descent). The provision of services occurred along these "racially" segregated lines. The disproportionate provision of services to different "race groups" led to inequities. Information is still collected along these "racial" divisions in order to redress these inequities. In no way do the authors subscribe to this classification.

While adolescence is a period associated with lower rates of morbidity and mortality due to disease, it is prone to a higher prevalence of risk taking behaviours, since adolescents may be exposed to high-risk environments and be vulnerable to experimentation.[15-18] An evaluation of existing South African data on behaviours which place young people at risk reveals that young people use alcohol, tobacco and other drugs, engage in unprotected sex, have unhealthy dietary behaviours and are both perpetrators and victims of violence.[19-34]

Unhealthy ways of living, for example smoking, alcohol and other drug use, high-fat diets and sedentary behaviours, often initiated during the youthful years, when practised for an extended period of time lead to a range of chronic diseases later in life. Conditions like cardiovascular disease, diabetes and cancer contribute to significant human and economic costs through premature death and increased expenditure on health care. Additionally, many risk-taking behaviours lead to psychological and social problems. For example, alcohol and drug use are often accompanied by violent behaviour and family instability.[13] Thus, focusing on the establishment of a healthy way of life among the youth will ensure healthier older people, with resultant financial and human benefits. However, a focus on health related education requires a systematic planned approach to intervention development, implementation and evaluation.[35-36]

1.3. Conceptual model for behaviour change interventions

Effective development, implementation and evaluation of behaviour change interventions involve a systematic, stepwise planning and evaluation process.

Application of the above model for planning and evaluation of interventions requires that several questions be addressed (see Figure I).

The planning questions are:

Step 1: How serious is the health, social or developmental problem?
Step 2: Which health related and social behaviours are involved?
Step 3: What are the determinants of those behaviours?
Step 4: Which interventions might change the behaviours?
Step 5: How can the intervention be implemented?

The evaluation questions are:

Step 6: Has the implementation been carried out as expected?
Step 7: Has the intervention been received as planned?
Step 8: Have the determinants of the behaviour changed?
Step 9: Has the behaviour changed?
Step 10: Has the problem been reduced?

With regard to applying the model for planning and evaluating interventions for the youth of South Africa, the Youth Risk Behaviour Survey contributes to the second step of planning, namely identifying which health related and social behaviours place young people at risk in the school context, and measuring the prevalence of these behaviours.

In addition to applying the model for planning and evaluating interventions, it is necessary to identify a variety of health promotion strategies that intervene at various levels of care and prevention. The various strategies and levels of impact of health promotion activities can be represented in the form of a Health Promotion Matrix. The strategies include health education and health information, provisions and facilities, legislation, and economic and biotechnological interventions, while the levels of impact range from the primary prevention level to the early detection level and the patient care level.

Such a framework will result in a sustained package of interventions that aim to promote behaviour change, including the management of research and capacity development activities. Figure II presents an example of applying the matrix to focus on one behaviour, namely tobacco use.[37] The Health Promotion Matrix may be applied to any single behaviour or cluster of behaviours that place young people at risk of morbidity and mortality.

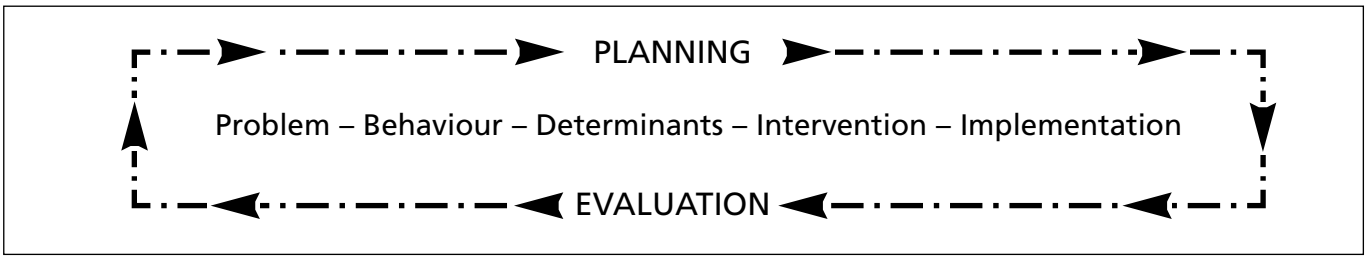


Figure I: A model for planning and evaluation of interventions

A FRAMEWORK FOR ACTION ON RISK-TAKING BEHAVIOURS

Health Promotion Strategies	LEVELS OF HEALTH PROMOTION IMPACT		
	Primary Prevention Level	**Early Detection Level**	**Patient Care Level**
Health Education and Information	Education to improve knowledge about the adverse effects of tobacco use, the development of refusal skills and the recognition of exposure to passive smoking, eg. School Programmes. Mass communication programmes that create an awareness of health threats and improve health literacy, thereby prompting pro-health actions. Telehealth education	Identify smokers and promote the development and uptake of smoking cessation programmes. Identify people at risk such as the unborn babies of pregnant smokers	Education for recognition of being a passive smoker. Education and skills to cope with: - cardiovascular disease - respiratory disease - cancer
Provisions and Facilities	Provision of smoke-free environments for the general public.	Access to medication such as: • Nicotene replacement therapy (NRT) • Bupropion	Provision of support, primary treatment and rehabilitation facilities.
Legislation • Global • International • Regional • National • Local	**Global** • Framework Convention on Tobacco Control **International** • Consensus on trade agreements for developed and developing countries **Regional** • Legislation to support consensus on trade agreements to promote health in neighbouring countries **National** • Legislation to protect public health such as banning tobacco advertising, promotion and sponsorship • Legislation on smoking in public places and work sites • Special legislation to protect children **Local** • Local legislation to ensure enforcement	• Regulations for mandatory screening of general public • Counselling toward smoking cessation	Medical care and psychosocial support
Economic Intervention • Taxation • Pricing	• Proportion of cigarette taxes should be increased annually • Annual price increase of cigarettes should be above inflation	• Use tobacco tax to reimburse the public health sector for screening programmes and for Health Promotion activities • Increase the affordability and thereby access to NRT and other medication	Use tobacco tax to reimburse the public health sector for primary care and rehabilitation.
Biotechnology • Pharmaceuticals • Vaccines • Pharmacogenetics	• Identify during childhood genetic predisposition to nicotine addiction • Nicotine vaccine • Improved workplace extractor fans	• Identifying genetic predisposition to pulmonary damage from smoking, e.g. alpha antitrypsin deficiency; or cardiovascular disease	Drugs and devices to treat the sequelae of smoking–related diseases

Figure II: The Health Promotion Matrix

CHAPTER 2

Methodology

2.1. Study design

This was a cross sectional national prevalence study among secondary school learners attending public schools in South Africa.

2.2. Ethical approval

Ethical Approval for the study was obtained from the South African Medical Association.

2.3. Sampling

2.3.1. STUDY POPULATION

The study population comprised of grades 8, 9, 10 and 11 public school learners in the nine provinces. The sampling frame was defined using learner enrolment numbers for each public school in the country, obtained from the national schools database of 1999 from the School Information Services Directorate, National Department of Education.

Independent or private schools were excluded from the study population. Learners in these schools accounted for 2.2% of South Africa's total learner population.[38] Grade 12 learners were excluded from the study as per the tender for the Youth Risk Behaviour Survey. This precaution was taken to avert a possible conflict between their busy examination schedule and the time required to complete the survey.

2.3.2. SAMPLING STRATEGY

The sampling strategy consisted of a stratified, two-stage cluster sample design to ensure the collection of nationally and provincially representative data from a population arranged into school and class-level clusters.

The sole stratum for sampling was the Province, which is consistent with the technique adopted by the CDC, where the key level for stratification is the State. At the first stage of sampling, schools were the primary sampling units (PSUs) and were selected with a probability proportional to school learner enrolment size in grades 8 to 11. At the second stage of sampling, classes within each participating school were selected systematically with equal probability sampling (with a random start). All learners in the selected classes were eligible to participate.

It was determined that 1200 learners in each province were to be selected, and it was assumed that each class would have approximately 40 learners. A school and learner participation rate of 80% was expected, based on the experience of a similar recent national school-based survey.[20] In order to achieve the desired sample size, 207 schools were selected in the first stage of sampling (see GIS Map in Appendix I), or 23 in each province, and on average 2 classes per school were selected in the second stage.

The Eastern Cape has a large number of schools of small size. Consequently, 18 of the 23 schools selected had enrolments below the target school sample size. Therefore, all of the classes in Eastern Cape schools were sampled to ensure an adequate sized sample of Eastern Cape learners.

2.4. Study instruments

2.4.1. QUESTIONNAIRE DEVELOPMENT AND ADAPTATION

The questionnaire was designed to obtain prevalence data from young people on behaviours that affect their health profile, such as intentional and unintentional injury, substance use, sexual behaviour, nutrition and weight perception, physical activity and hygiene. The South African Youth Risk Behaviour survey draws from the experience of the YRBSS of the CDC. However, the CDC questionnaire required varying degrees of adaptation, ranging from the addition of new questions, to questions being changed completely, to minor alterations in questions in order to ensure relevance to the South African learners' particular risk-taking behaviour and context of exposure, as well as comparability to surveys conducted locally and internationally.

Additional questions developed from the domains produced at the Mega-Country Initiative, a World Health Organisation (WHO) intended multi-risk survey for schools, were incorporated into the South African version of the questionnaire. Other questions that were added addressed specific issues regarding the use of contemporary drugs, and drugs specific to South Africa (e.g. Mandrax, "club drugs", over-the-counter and prescription drugs); physical inactivity during physical education class at school, as well as reported reasons for inactivity; prevalence and location of abortions; prevalence and treatment of sexually transmitted infections, and awareness of HIV and AIDS; and pedestrian and vehicular traffic safety.

The data collection began in August 2002, the eighth month of the academic year in South Africa. Questions from the CDC questionnaire referring to behaviour in the past 12 months were changed to refer to only the past 6 months so as not to confound the grade-specific results from the study with behaviour of learners moving through different grades. The pilot study, which is discussed below in Section 2.5, revealed problems with the understanding of some words and response options. In several cases questions were rephrased when the pilot study revealed confusion about the meaning of certain words. For example, there was some confusion about the meaning of the word "sex", and "school property" was taken by some learners to denote school furniture.

When asked about the frequency of certain behaviours, learners revealed through their answers in the pilot study that a combination of qualitative and quantitative response options for frequencies would be better understood. In other words, learners responded most clearly when the response option was for example "Often (6-7 times per week)".

The questionnaire included only close-ended questions, without skip patterns or multiple response questions. Long lists of response options were collapsed in some cases, where it was felt that the level of detail being captured could be reduced without material loss to the findings from the survey. The shortening of the list of response options also contributed to making the 96-question instrument easier to complete.

The questionnaire was developed in English and pre-tested for face and construct validity. Thereafter, groups of three first-language students translated the questionnaire into the remaining 10 official languages and back-translated it in preparation for the pilot study, after which the final adjustments to the questionnaire were made.

2.4.2. ANTHROPOMETRIC INSTRUMENTS

For measuring heights and weights appropriate equipment such as free-standing stadiometers for measuring heights and electronic scales for measuring weights had to be acquired. Each scale was calibrated using two 10 kg weights.

2.5. Pilot study

A pilot study was conducted in May 2002 among grade 8 learners in five provinces, namely the Western Cape, KwaZulu-Natal, Gauteng, Limpopo Province and Mpumalanga. The sample consisted of 534 learners in 11 schools, 49% of whom were male and 51% female. The selection of these five provinces enabled the full questionnaire to be tested in each of the 11 official languages, obtaining face and construct validity of the questionnaire. Additionally, the pilot study facilitated an assessment of the logistical and technical procedures for data collection.

The time taken for a class to complete a questionnaire ranged from 30 minutes to one hour. After this, a half an hour discussion was held between the learners and the survey administrators to provide information on the meaning and clarity of the questions from the learners' perspective, as well as to provide information on the learners' comprehension of the procedure of filling in the questionnaire.

The study instrument and procedural techniques were adapted and refined according to the findings of the pilot study. Changes to the questionnaire are described more fully in section 2.4.1.

2.6. Consent

Active informed consent to conduct the study was obtained from the National Department of Education, school principals, parents and learners. In addition, assent was also obtained from learners on the day of the study. Learners were requested not to write their names on the answer sheet to ensure their anonymity. To increase the confidentiality of the learners trained fieldworkers conducted the survey and educators were requested to leave the classroom during data collection. Further, learners were requested not to communicate with each other or to look at the answer sheets of their peers during the completion of the survey.

The consent forms were compiled, packaged and couriered to each of the selected schools. Schools were telephoned to confirm receipt of the consent forms. A letter was sent to the school principal confirming the classes that were selected for the study and requesting that the parent and learner consent forms be distributed to the learners in the selected classes. The principals were also requested to collect the completed consent forms and hand them to the survey administrator on the day that the survey was conducted.

2.7. Data collection

Data were collected through self-administered questionnaires as well as taking height and weight measures of each learner. The data collection period extended from August to October 2002. Before data collection commenced, networking occurred with the schools, Departments of Health and Education and other stakeholders to obtain their endorsement and support for the study. Additionally, data collectors had to be identified and trained.

2.7.1. PREPARATION FOR DATA COLLECTION

The selected schools were invited to participate in the study, both in writing and by telephone, and where this was not possible due to infrastructure limitations the Department of Education District Offices and the South African Police Services in the nearest towns and villages were approached to assist with establishing contact with the schools. Thereafter permission for participation was sought from principals and from learners in the selected classes as well as their parents. Also, numbers and language preference of the learners in each of the selected classes was ascertained.

A folder containing a covering letter to the principal, parent consent forms, learner consent forms, and labelled envelopes for completed consent forms was couriered to each school. The principal was requested to distribute the forms to learners in the selected classes and to collect all completed forms, place them in the labelled envelopes and hand the envelopes to the survey administrators on the day of data collection. Also, stadiometers and scales were couriered to each of the schools, along with two extra batteries, disinfecting solutions and black bags.

Clearly labelled folders for each class were sent to the survey administration teams, containing the questionnaires, answer sheets, 2 additional English questionnaires, a labelled envelope for answer sheets, a completed learner consent form envelope, a completed parent consent form envelope, pencils, a script for the survey administrator (in English), a script for the survey administrator in the language of the questionnaires, notes about taking height measurements and a class tracking form.

2.7.2. SELECTION AND TRAINING OF DATA COLLECTORS

A range of individuals from various sectors such as health, education and community structures, for example the Youth Commission, were invited to undergo specialised training in order to be

Province	No. of workshops
Western Cape	3 workshops
Eastern Cape	3 workshops
North West	2 workshops
Limpopo	2 workshops
Mpumalanga	2 workshops
Free State	2 workshops
Gauteng	2 workshops
Northern Cape	1 workshop
KwaZulu-Natal	1 workshop
Total	18 workshops

Figure III: Number of training workshops conducted in each of the nine provinces

selected to work as survey administrators. This training enabled them to become competent in taking anthropometric measures as well as co-ordinating and supervising the administration of the survey at school level.

Two MRC staff members were trained in taking height and weight measurements by an anthropometrist. They thereafter conducted a total of 18 training workshops across the country (see Figure III). In total, 510 survey administrators were trained and of them 377 were qualified as competent to work as data collectors (see Figure VI in Appendix I).

At the training workshops each person was allocated to serve either as a survey administrator or to measure the heights and weights of learners. Heights and weights were measured in all the provinces according to standard procedures suggested by the International Society for the Advancement of Kinanthropometry (ISAK). Where possible, nutritionists, dieticians and school nurses were allocated to measure heights and weights. Survey administrators gained practical experience in measuring the heights and weights by taking the measurements of twenty learners. In addition, the survey administrators' technical error of measurement (TEM), an indicator of the accuracy of height measurement, was established and monitored by a qualified kinanthropometrist, and only those survey administrators with a TEM percentage of 0.5% or lower were allowed to take height measurements.[39]

Following the training, teams with a minimum of 3 members were established for each school. The team was made up of 1 survey administrator, 1 person to adjust and maintain the posture of the learner for height and weight measurements, and 1 person to read and record the height and weight measurements. A member of the team was appointed as the team leader and was required to negotiate an appointment with the school and serve as the co-ordinator for school visits.

Standardised methods for conducting the study (preparing packages for schools, couriering the packages, couriering equipment for taking height and weight measurements, procedures for supervising the answering of the questionnaires in the schools, collecting the questionnaires and answer sheets, taking of anthropometric measures and couriering the data and anthropometric equipment back to MRC in Cape Town) were developed.

2.7.3. ADMINISTERING THE SURVEY

After ensuring that all the consent procedures were completed each learner was issued a questionnaire, an answer sheet and an HB pencil. To ensure anonymity the learners were instructed not to write their names on the questionnaires by the survey administrator. The learners completed the answer sheets, which were collected, placed in a sealed envelope, and couriered back to the MRC.

In addition, accurate height and weight measures had to be recorded for each learner. In order to ensure confidentiality, one learner was requested to come forward at a time to have their height and weight measurements taken. Learners were required to remove their socks, shoes, jacket, any heavy items and lower their hair, if necessary, before height and weight readings were taken. Height measurements were taken using the stretch technique, recording the maximum distance from the floor to the vertex of the head. Technically, the vertex is defined as the highest point on the skull when the head is held in the Frankfort plane, a position which corresponds almost

exactly to the visual axis when the subject is looking directly ahead. Two survey administrators took each height measurement, so that learners' posture, as well as heel and arm positions could be monitored while the height measurement was being read from the stadiometer. Two height readings were recorded for each learner. The height readings had to be within 0.005 m of each other, failing which the measurements had to be repeated. Weight was recorded to the nearest 0.01 kg and height to the nearest 0.001 m. The survey administrator recorded the height and weight measurements on the learner's answer sheet.

Extensive telephonic support was provided to the 377 survey administrators spread across the country during the data collection period.

2.7.4. DATA MANAGEMENT AND CAPTURING

This study provided an opportunity to develop local capacity in data management, data capturing and analysis. A local company was selected to design the answer sheet and capture the data. They also provided expert training to MRC staff in the utilisation of "Opscan" technology, which was used to capture the data from the answer sheets directly into a spreadsheet. Due to the electronic method of data capturing, an HB pencil with a white eraser was purchased for each respondent.

Each batch of completed answer sheets for each participating class was carefully checked against the information filled onto the class tracking form by the survey administrator (the number of learners enrolled per class, the number of learners present, number of learners who participated, number of learners who refused to participate). The number of completed answer sheets that were scanned was cross-checked against the number of completed answer sheets that were received.

2.8. Data Analysis

2.8.1. OVERVIEW OF DATA ANALYSIS

Epi-Info 2002 was used to analyse the data.[40] After capturing the data electronically, they were checked to ensure that all respondents in the same class reported the correct grade, date of fieldwork, school and province. The 150 respondents who had not identified their gender as male or female were removed from the analysis.

The data were analysed in such a way that national prevalence is representative of learners in grades 8-11 in public schools in the nine provinces of South Africa. To this end, a weighting factor was calculated for each learner record to adjust for different probabilities of selection, non-response and post-stratification by grade and gender. Weights were scaled so that the weighted count of students was equal to the total population size, and the weighted proportion of learners in each grade and gender combination matched the provincial population proportions. Each province was to be represented equally in the sample, though provinces are known to have different total learner populations. To account for this feature, respondents in highly populated provinces had to have higher weights than respondents from less populated provinces. For more detail on the calculation of weights, see section 2.8.2.

The data were recoded from question responses into meaningful prevalence variables. Prevalence rates and 95% confidence intervals were computed. Differences between prevalence estimates were considered statistically significant if the 95% confidence intervals did not overlap, that is, differences were considered significant at the $p<0.05$ level.

For undernutrition analysis, measures of height for age, weight for age, and weight for height were calculated and expressed as numbers of standard deviations away from the mean (Z-scores) as modelled in the United States National Health and Nutritional Examination Survey III (NHANES) samples using the Nutrition module of Epi-Info, due to lack of equivalent South African reference data.[41] Z-score values of less than –2 for weight-for-age, height-for-age and weight-for-height were used as thresholds to determine the prevalence of underweight, stunting and wasting respectively.[42]

For overnutrition analysis, body mass index (BMI) was calculated for each respondent, and the age-dependent BMI cut-off points recommended by Cole for overweight (25 kg/m^2 by the age of 18 years) and obesity (30 kg/m^2 by the age of 18 years) were used to determine whether a learner was overweight or overweight and obese.[43]

2.8.2. CALCULATION OF SAMPLING WEIGHTS

A weight has been associated with each respondent in the sample to allow for the likelihood of sampling that respondent, to reduce bias by compensating for non-response, and to post-stratify according to the grade and gender distributions of the study population in each province. The weight is given by:

$$W = W1 \times W2 \times F1 \times F2 \times F3 \times F4$$

W1 – school selection weight = Number of learners enrolled in province/ number of learners enrolled in school

The school selection weight is the inverse of the probability of selecting a school. Schools were selected with probability proportional to enrolment in grades 8, 9, 10 and 11. Each school therefore has a different school selection weight.

W2 – within-school weight = Number of learners enrolled in school/ number of learners selected in school

The within-school weight is the inverse of the probability of selecting a class within the school. Since all learners in a selected class are selected, this is the same as the probability of selecting a learner. Classes were selected randomly, so this weight is the same for all learners in the same school.

W1 x W2 is known as the school baseweight. Each selected school has a distinct school baseweight. However, assuming that the number of classes in a school is directly proportional to the school's enrolment, all schools in the same province have the same school baseweight.

F1: school non-response adjustment factor = Sum over the selected schools of (school baseweight x school enrolment)/ sum over the participating schools of (school baseweight x school enrolment)

Each of the nine provinces has a distinct value for F1.

F2: class non-response adjustment factor = Number of classes selected/ number of classes participated.

Each school that participated in the sample has a distinct value for F2.

F3: learner non-response adjustment factor = (School baseweight x class enrolment)/ (school baseweight x number of completed questionnaires from that class)

Each class that participated in the sample has a distinct value for F3.

W1 x W2 x F1 x F2 x F3 is known as the adjusted weight.

F4: post-stratification adjustment factor = Number of learners in grade-gender category in province/sum of adjusted weights in grade-gender category in the sample in that province.

Each combination of grade and gender and province has a distinct value for F4.

2.9. Limitations

While cluster sampling is substantially more cost-effective than simple random sampling and reduces the sampling frame data requirements, the main disadvantage is that estimates are less precise than from a simple random sample of the same size. In theory, clusters should be designed such that participants within each cluster are diverse and each cluster is somewhat representative of the population as a whole, so that a maximum amount of variability can be captured from sampling a small number of clusters. However, in practice the structure of the clusters is determined by cost- and time-efficiency factors.[44] Due to the unevenness of the geopolitical and social distribution of post-apartheid South Africa's population, clusters at both stages of sampling (schools and classes) do not show this desired property of being representative of the population as a whole.

Given a sample size that is sufficiently large, in terms of numbers of clusters and subjects selected, to attain the desired margin of error, the above limitations are allowed for.

SECTION B
RESULTS

CHAPTER 3

Response Rates and Socio-Demographic Characteristics

This chapter covers the survey response rates, the demographic characteristics of the sample obtained, and the presentation of findings by individual behaviour.

3.1. Response rates

The sample was stratified by province, and clusters of learners were selected in two stages – the first stage was school selection and the second stage was class selection.

Initially 207 schools, that is 23 schools from each province, formed the primary sampling units. The schools were selected without replacement, with probability proportional to the schools' size in terms of learner enrolment in grades 8, 9, 10 and 11. On physically contacting the selected schools, one was found not to exist, so the realised sample size was 206. Of the 206 schools so selected, 188 participated in the survey (Table 1). The national weighted school response rate was 94.2%.

	Number of schools		Number of learners		Unweighted Response Rates			Weighted Response Rates		
	SAMPLED	PARTICIPATED	SAMPLED	PARTICIPATED	SCHOOL	LEARNERS	OVERALL	SCHOOL	LEARNERS	OVERALL
NATIONAL	**206**	**188**	**14 766**	**10 699**	**91.3%**	**72.5%**	**66.1%**	**94.2%**	**72.5%**	**68.3%**
Eastern Cape	23	20	1 532	1 149	87.0%	75.0%	65.2%	93.3%	75.0%	70.0%
Free State	23	23	1 482	1 136	100.0%	76.7%	76.7%	100.0%	76.7%	76.7%
Gauteng	22	20	1 548	1 166	90.9%	75.3%	68.5%	96.3%	75.3%	72.5%
KwaZulu-Natal	23	20	1 818	1 200	87.0%	66.0%	57.4%	88.3%	66.0%	58.3%
Limpopo	23	21	1 378	1 079	91.3%	78.3%	71.5%	94.4%	78.3%	73.9%
Mpumalanga	23	21	1 708	1 269	91.3%	74.3%	67.8%	94.8%	74.3%	70.4%
Northern Cape	23	20	1 774	1 066	87.0%	60.1%	52.3%	86.8%	60.1%	52.2%
North West	23	21	1 709	1 202	91.3%	70.3%	64.2%	94.5%	70.3%	66.5%
Western Cape	23	22	1 817	1 432	95.7%	78.8%	75.4%	95.6%	78.8%	75.3%

Table 1: Unweighted and weighted response rates

At the second stage of cluster sampling, 364 classes in which 14 766 learners were enrolled (41 learners per class) were selected randomly from the grade 8-11 classes in the 188 participating schools. Of the learners selected, 10 699 in 345 classes submitted completed questionnaires. The weighted learner response rate was 72.5%, and hence the overall response rate was 68.3%.

The weighted school response rate for the nine provinces varied between 86.8% in the Northern Cape and 100.0% in the Free State. The weighted learner response rates ranged from 60.1% in the Northern Cape to 78.8% in the Western Cape. The weighted overall provincial response rate varied from 52.2% in the Northern Cape to 76.7% in the Free State.

A respondent was excluded from anthropometric analysis if any one of age, weight or height was missing, or if the respondent's age fell outside of the range 11 to 20 years, since the nutritional status analysis software being used was designed for this age range.

Each respondent's height was measured and recorded twice, and the exact weight was measured and recorded. The average of the two height measurements was used as the best indication of the learner's true height. However, where only one height measure was recorded, which was the case for 1025 respondents, the one measurement was used. In 582 cases learners' age could not be calculated because of missing data on date of birth, and a further 687 respondents were 20 years old and above, thus excluding them from nutritional status analysis. In 255 cases no height could be calculated and in 175 cases weight was not recorded. Of the 10 699 respondents, anthropometric analysis was in this way limited to 9 054 cases.

Of the 18 schools that did not participate, 14 schools either refused to participate, could not be contacted, or did not respond; the data of 3 schools could not be used due to lack of adherence to the data collection protocol, and one school that agreed to participate was not available due to examinations at the time the survey was conducted. The Northern Cape had the lowest school (86.8%) and the lowest learner (59.8%) response rates. It is noteworthy that 65% of the survey administrators for this province were community members who had to travel long distances to reach outlying schools (see Figure VII in Appendix I).

3.2. Socio-demographic characteristics

The socio-demographic data were analysed using weights that have not yet allowed for post-stratification, because using post-stratified weights would yield characteristics reflective of the population being modelled, as opposed to those of the sample respondents.

Overall, the sample consisted of 54.0% females and 46.0% males (Table 2). The majority of the sample classified themselves as "Black" (79.5%), 9.0% as "Coloured", 8.9% as "White", and 1.4% as "Indian".

Grade 8 and 9 learners constituted 61.6% of the sample. The majority of the sample (78.7%) was between the ages of 14 and 18 years inclusive, with 8.4% aged below this range, and 12.9% above; 93.1% of those 19 years and older were "Black". Notably, in grade 8 and 9 learners aged 19 years and older made up 5.8% of the sample.

3.3. Presentation of results by behaviour

The full results of the analysis are presented in tables in Appendix II at a national level and by "race", grade, age and province. These results are shown for the total population, as well as separately for males and females. The cell sample size, percentage prevalence estimate, and upper and lower confidence limits are presented in each instance. It is common scientific practice to exercise caution when making inferences based on cell sample sizes smaller than 35 respondents.[45] The cell sample sizes are labelled "*n*" in the Appendix II tables.

The chapters that follow present a synopsis of the results for each of the behaviours investigated by the Youth Risk Behaviour Survey, concentrating on those that show statistically significant differences between subpopulations. Both the estimated prevalence and the 95% confidence interval are shown. In particular, it should be noted that differences between the prevalence estimates of mutually exclusive subpopulations were considered statistically significant if the confidence intervals did not overlap, that is, differences were considered significant at the $p<0.05$ level. Section 2.8. (data analysis) gives more background detail to the analysis.

		GENDER		RACE					GRADE				AGE (YEARS)						
	TOTAL	M	F	"Black"	"Col'd"	"Indian"	Other	"White"	08	09	10	11	<=13	14	15	16	17	18	>=19
NATIONAL																			
n	10 699	4 929	5 620	7 740	1 571	136	99	904	2 926	3 618	2 433	1 722	816	1 601	1 829	1 962	1 614	909	1 288
%	100.0	46.0	54.0	79.5	9.0	1.4	1.3	8.9	31.4	30.2	22.6	15.9	8.4	15.3	17.7	20.1	16.5	9.1	12.9
Eastern Cape Province																			
n	1 149	486	652	807	86	5	3	229	379	413	161	196	87	168	233	255	180	77	84
%	100.0	42.9	57.1	69.9	7.5	0.5	0.3	21.8	31.0	36.8	15.3	16.9	7.2	14.8	21.9	24.1	17.0	7.0	8.0
Free State Province																			
n	1 136	549	582	1 018	25	3	11	71	445	189	359	143	101	142	184	217	185	115	172
%	100.0	48.1	51.9	84.2	2.2	0.3	1.0	12.3	38.3	16.7	32.9	12.1	8.5	11.8	18.1	21.7	16.1	9.9	13.9
Gauteng Province																			
n	1 166	538	622	945	94	39	8	64	198	477	133	358	44	171	235	215	213	115	136
%	100.0	46.5	53.5	85.0	7.3	2.8	0.7	4.2	18.3	40.1	9.6	32.0	4.6	15.7	20.3	18.2	18.1	10.1	13.0
Kwazulu-Natal Province																			
n	1 200	540	645	1 045	28	28	30	37	326	275	427	172	95	140	121	189	163	102	183
%	100.0	45.3	54.8	89.9	2.5	2.1	2.9	2.7	30.7	20.5	34.1	14.7	10.0	15.2	11.8	19.1	16.5	10.2	17.2
Limpopo Province																			
n	1 079	476	527	958	25	3	6	4	288	346	313	132	111	134	167	185	152	84	104
%	100.0	46.3	53.7	96.2	2.5	0.3	0.6	0.4	51.6	21.0	18.8	8.6	13.7	13.4	17.7	19.1	15.9	9.0	11.2
Mpumalanga Province																			
n	1 269	601	658	1 075	38	26	18	86	221	504	383	161	85	166	213	241	197	119	201
%	100.0	47.3	52.7	84.3	3.2	2.1	1.8	8.5	14.8	40.8	29.7	14.6	6.1	12.9	16.4	19.9	17.3	10.2	17.4
North West Province																			
n	1 066	483	577	497	436	8	11	97	336	311	248	171	78	170	156	165	153	96	158
%	100.0	44.2	55.8	40.5	44.6	0.8	1.1	13.0	30.2	28.1	24.4	17.2	7.5	18.0	15.8	17.3	19.0	8.7	13.7
Northern Cape Province																			
n	1 202	617	572	947	39	13	7	173	344	628	134	96	67	214	279	237	157	80	131
%	100.0	51.8	48.2	76.7	3.1	1.0	0.5	18.7	25.9	49.0	15.1	10.0	5.7	17.1	22.9	20.9	14.4	7.0	11.9
Western Cape Province																			
n	1 432	639	785	448	800	11	5	143	389	475	275	293	148	296	241	258	214	121	119
%	100.0	45.0	55.0	31.0	56.0	0.9	0.4	11.7	24.5	34.8	21.3	19.4	9.4	21.0	18.2	19.3	15.0	8.6	8.5

Table 2: Socio-demographic characteristics

CHAPTER 4

Behaviours related to intentional and unintentional injury

This chapter presents findings on intentional and unintentional injury related behaviours, in particular behaviours related to violence, road traffic safety, and suicide.

4.1. Violence

4.1.1. INTRODUCTION

This section reports on the following aspects of violence-related behaviours:

- Carrying a weapon in the past month – both in general and while on school property
- Carrying a gun in the past month
- Carrying a knife in the past month
- Having been bullied in the past month
- Having been involved in a physical fight in the past six months – both in general and while on school property
- Having sustained injuries requiring medical treatment in a physical fight in the past six months
- Gang membership over the past six months
- Ever having been assaulted by a girlfriend or boyfriend
- Ever having assaulted a girlfriend or boyfriend
- Ever having been forced to have sex
- Ever having forced someone else to have sex
- Having been threatened or injured by someone with a weapon at school over the past six months
- Having threatened or injured someone else with a weapon at school over the past six months
- Having felt unsafe while en route to or from school in the past six months
- Having felt unsafe while at school in the past six months

Violence can be described as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation. Violence is characterised by an uneven distribution by gender and age groups. The global homicide rate in 2000 showed that the rate for males was more than three times that of females and highest in the 15–29-year age category. Developing countries and economies in transition have shown an increase in their homicide rate, and these have been associated with increases in the use of guns as a method of attack. Globally, an average of 565 children, adolescents and young adults between the ages of 10–29 years die every day through interpersonal violence. It is also known that the severity of interpersonal violence increases with age, which poses the danger that children exposed to violence at younger ages are at greater risk of violence at later stages.[46]

Non-fatal violence, that is violence that does not result in death but in youth needing treatment at a hospital, is reported as being 20–40 times higher than homicide rates, and increases greatly in mid-adolescence and young adulthood. A South African study revealed that 3.5% of victims of violence were younger than 14 years compared to 21.9% aged 14-21 years.[47] Injuries resulting from non-fatal violence are less the result of firearm attacks, and more frequently involve

physical fights using fists and feet and weapons such as knives or clubs. Participating in physical fights, bullying and carrying of weapons are important risk behaviours for youth violence, with physical fighting and bullying being a common phenomenon among school-age children which can also lead to more serious forms of violence. Carrying weapons, in particular knives, is reported as a predominantly male activity among school-age children. A study in Cape Town reported that 9.8% of males and 1.3% of females in secondary schools reported carrying knives to school during the previous four weeks.[48-50] Another feature of violent behaviour is the association with gang membership that is again reported as a predominantly male and middle-teens phenomenon, with gang-violence accounting for approximately 10% of fatal assault cases.[51]

Another South African cross-sectional study revealed that more than 50% of all boys and girls had experienced violence, either as victims or perpetrators.[52] Additionally, a significant number of participants, especially males, believed that violence was a normal component of relationships, particularly those who had witnessed domestic violence. Substance use and abuse were also cited as significant reasons for experiencing violence as either victim or perpetrator. These are consistent with other findings that suggested that alcohol was a significant factor in different types of homicide in South Africa.[53]

4.1.2. RESULTS

Carried any weapon - See Table 3

Nationally 16.7% [15.2 - 18.2] of learners had carried a weapon such as a gun, knife, "panga" or "kierrie" (South African expressions for long knives or sticks respectively) on one or more days in the past month. Significantly more male learners (28.2% [26.2 - 30.3]) than female learners (7.6% [6.3 - 8.9]) had carried a weapon in the past month.

This feature of the data persisted within all the "race" groups. That is to say, significantly more "Indian" (45.8% [34.2 - 57.5]), "Coloured" (38.5% [33.7 - 43.3]), "White" (32.6% [25.7 - 39.5]) and "Black" (25.9% [23.4 - 28.4]) males than "Indian" (7.4% [2.7 - 12.0]), "Coloured" (7.0% [4.7 - 9.4]), "White" (8.0% [5.3 - 10.8]) and "Black" (7.6% [6.2 - 9.1]) females respectively had carried a weapon in the past month.

Significantly more "Coloured" (21.7% [18.3 - 25.2]) and "Indian" (26.2% [17.9 - 34.4]) learners than "Black" learners (15.6% [14.0 - 17.3]) had carried a weapon in the past month. Significantly more grade 9 learners (19.4% [17.3 - 21.4]) had carried a weapon in the past month than grade 10 (13.6% [10.3 - 16.9]) and grade 11 (13.5% [10.1 - 16.9]) learners.

There was an increase in the prevalence of learners who had carried a weapon as age increased. Significantly fewer learners 13 years of age and younger (11.0% [8.3 - 13.6]) had carried a weapon in the past month when compared to 16-year-olds (17.4% [14.6 - 20.2]), 17-year-olds (18.0% [14.2 - 21.7]), 18-year-olds (17.7% [14.4 - 21.1]), and those of 19 years and older (19.8% [16.1 - 23.5]).

Western Cape (20.2% [18.3 - 22.1]) had the highest provincial prevalence of learners who had carried a weapon in the past month, while Gauteng (12.9% [10.9 - 15.0]) had the lowest provincial prevalence (see Graph 1).

Carried a gun - See Table 3

The national prevalence of learners who had carried a gun on one or more days in the month preceding the survey was 8.5% [7.2 - 9.8]. Significantly more males (12.2% [10.5 - 13.9]) than females (5.5% [4.2 - 6.9]) had carried a gun in the past month. There was no significant variation in the prevalence of learners who had carried a gun in the past month by "race" or by grade.

Older learners had a higher prevalence of having carried a gun in the past month than younger learners. Significantly fewer learners ahead 13 years and younger (4.4% [2.8 - 6.0]) had carried a gun when compared to 17-year-olds (9.7% [7.1 - 12.4]), 18-year-olds (11.5% [8.1 - 14.9]) and those of 19 years and older (12.3% [9.7 - 15.0]).

Mpumalanga (11.2% [6.7 - 15.7]) had the highest provincial prevalence of learners who had carried a gun in the past month while Northern Cape (7.2% [6.1 - 9.1]) had the lowest provincial prevalence (see Graph 1).

Carried a knife - See Table 3

Nationally 17.8% [16.0 - 19.7] of learners had carried a knife on one or more days in the past

month. Significantly more males (25.9% [23.7 - 28.2]) than females (11.4% [9.3 - 13.5]) had carried a knife in the past month. There was no significant variation in the prevalence of learners who had carried a knife in the past month by "race" or by age.

Significantly fewer learners in grade 11 (11.4% [8.6 - 14.2]) than learners in grade 9 (21.5% [19.0 - 24.0]) and grade 8 (20.9% [17.7 - 24.1]) had carried a knife.

Eastern Cape (25.7% [19.4 - 31.9]) had the highest provincial prevalence of learners who had carried a knife in the past month, while Gauteng (12.5% [9.2 - 15.7]) had a significantly lower rate of learners who had carried a knife in the past month when compared to the national average of 17.8% [16.0 - 19.7] (see Graph 1).

Was bullied - See Table 4

During the 30 days preceding the survey (i.e. in the past month), 41.0% [38.4 - 43.6] of learners had been bullied. There were no significant differences in the prevalence of having been bullied in the past month between male and female learners, with the exception being that more "White" female learners (54.5% [49.4 - 59.6]) reported being bullied than "White" male learners (43.0% [36.7 - 49.3]). Significantly more "White" (49.4% [45.3 - 53.5]) and "Coloured" learners (49.5% [43.7 - 55.3]) had been bullied when compared to "Black" learners (39.2% [36.5 - 42.0]).

There was no significant variation in the prevalence of having been bullied in the past month by grades and by age.

The Northern Cape (56.7% [40.8 - 72.5]) and Free State (49.3% [46.2 - 52.4]) had the highest provincial prevalences of learners who had been bullied in the past month, while KwaZulu-Natal (35.6% [27.1 - 44.2]) had the lowest provincial prevalence (see Graph 1).

Was involved in a physical fight - See Table 4

Nationally 30.2% [28.5 - 31.8] of learners had been involved in a physical (e.g. punching or hitting) fight one or more times in the past six months. Significantly more males (37.3% [35.2 - 39.5]) than females (24.5% [22.5 - 26.5]) had been involved in a physical fight in the past six months. This feature of the data persisted within all the "race" groups. That is to say, significantly more "Indian" (52.9% [37.8 - 68.0]), "Coloured" (47.4% [40.3 - 54.6]), "White" (39.1% [30.7 - 47.4]) and "Black" (35.9% [33.5 - 38.3]) males than "Indian" (21.3% [11.7 - 31.0]), "Coloured" (28.1% [21.8 - 34.5]), "White" (19.9% [14.3 - 25.5]) and "Black" (25.0% [22.9 - 27.0]) females had been involved in a physical fight in the past six months. There was no significant variation in the prevalence of learners who had been involved in a physical fight in the past six months by "race" or by age.

Learners in lower grades were more likely to have been involved in a physical fight in the past six months than learners in higher grades. Significantly more learners in grade 8 (32.5% [29.3 - 35.6]) than in grade 11 (23.1% [19.7 - 26.5]) had been involved in a physical fight. There were no significant differences in the prevalence of having been involved in a physical fight in the past month between learners of different ages.

The high prevalence of learners in the Free State (36.2% [31.4 - 41.1]) who had been involved in a physical fight in the past six months was significant when compared to KwaZulu-Natal (25.1% [21.9 - 28.3]), which had the lowest provincial prevalence (see Graph 1).

Was injured in a physical fight - See Table 4

Nationally among those who were involved in a physical fight on one or more days in the six months preceding the survey, 29.3% [25.5 - 33.1] sustained consequential injuries that required treatment from a doctor or nurse (i.e. required medical treatment), with no significant variation by gender. Significantly fewer "White" learners (15.3% [9.1 - 21.6]) who were involved in a physical fight had required medical treatment when compared to "Black" learners (30.8% [26.5 - 35.0]).

There was no significant variation in the prevalence of learners who had required medical treatment after being injured in a physical fight in the past six months by grade. Significantly fewer learners who were 13 years and younger (18.5% [11.5 - 25.6]) had required medical treatment after being injured in a physical fight when compared to 18-year-olds (41.8% [30.9 - 52.6]) and those of 19 years and older (39.5% [33.3 - 45.6]).

Mpumalanga learners (39.5% [26.6 - 52.3]) reported the highest provincial prevalence of

having required medical treatment after being involved in a physical fight in the past six months, while significantly fewer learners in Gauteng (19.7% [16.1 - 23.4]) had required medical treatment after being involved in a physical fight when compared to the national average of 29.3% [25.5 - 33.1].

Member of a gang - See Table 4

During the six months preceding the survey, 14.3% [12.6 - 16.0] of learners had been members of a gang. Analysis by gender revealed that significantly more males (18.1% [16.2 - 19.9]) than females (11.4% [9.4 - 13.4]) had been members of a gang in the past six months. Significantly more "Coloured" (18.4% [13.1 - 23.8]) and "Black" males (18.0% [15.9 - 20.1]) had been members of a gang when compared to "Coloured" (7.8% [4.1 - 11.5]) and "Black" females (11.9% [9.4 - 14.4]) respectively.

There was no significant variation in the prevalence of having been a member of a gang in the past six months by age. There was a decrease in the prevalence of learners who had been members of a gang in the past six months with an increase in grade. Significantly more grade 8 learners (18.0% [15.1 - 21.0]) had been members of a gang when compared to grade 11 learners (11.8% [9.6 - 14.1]).

Mpumalanga (20.9% [16.4 - 25.4]) had a provincial prevalence of learners who had been members of a gang in the past six months that was significantly higher than the national average, while the Eastern Cape (9.0% [5.0 - 13.0]) had the lowest provincial prevalence (see Graph 1).

Was assaulted by boyfriend/girlfriend - See Table 5

Nationally 13.6% [11.8 - 15.4] of learners reported having been hit, smacked (slapped) or physically hurt by their boyfriend/girlfriend in the past six months. Note that males (14.4% [12.4 - 16.3]) and females (12.9% [10.8 - 15.1]) had no significant difference in reporting being assaulted by their partner. Significantly fewer "White" learners (5.8% [3.9 - 7.8]) had been assaulted by their boyfriend/girlfriend in the past six months when compared to "Black" (14.4% [12.4 - 16.4]) and "Coloured" learners (13.6% [10.7 - 16.5]).

There was no significant variation in the prevalence of learners who had been assaulted by their boyfriend/girlfriend in the past six months by grade.

There was an increase in the prevalence of learners who reported having been assaulted by their boyfriend/girlfriend in the past six months from age 15 years to 19 years or over. Significantly fewer 13 years and younger learners (11.9% [9.4 - 14.4]) had been assaulted by their boyfriend/girlfriend when compared to those of 19 years and older (20.2% [16.0 - 24.5]).

The highest provincial prevalence of learners who had been assaulted by their boyfriend/girlfriend in the past six months was observed in Limpopo Province (18.0% [11.9 - 24.0]), while North West Province (10.2% [6.7 - 13.8]) had the lowest provincial prevalence (see Graph 2).

Assaulted boyfriend/girlfriend - See Table 5

Nationwide, 13.2% [11.6 - 14.8] of learners reported ever hitting, smacking (slapping) or physically hurting their boyfriend/girlfriend, with no significant difference between male and female learners at the national level. However, among the "Black" learners, significantly more males (16.6% [14.6 - 18.7]) than females (12.3% [10.1 - 14.5]) reported assaulting their partner. Significantly fewer "White" learners (5.8% [3.5 - 8.1]) reported having assaulted their boyfriend/girlfriend in the past six months when compared to "Black" (14.2% [12.5 - 15.9]) and "Coloured" (11.7% [9.4 - 13.9]) learners.

Significantly more grade 9 male learners (17.2% [13.8 - 20.6]) reported having assaulted their partner in the past six months than grade 9 females (10.3% [7.7 - 12.9]). There was an increase in the prevalence of learners who had assaulted their partner in the past six months with age from 14 years to 19 years or over. Significantly fewer 14-year-old learners (9.2% [6.9 - 11.5]) assaulted their boyfriend/girlfriend when compared to 17-year-olds (14.9% [12.2 - 17.7]), 18-year-olds (16.6% [13.2 - 20.1]) and those of 19 years or older (19.1% [14.9 - 23.4]).

The highest provincial prevalence of learners who had assaulted their boyfriend/girlfriend was seen in Limpopo Province (19.1% [13.4 - 24.8]), while North West Province (9.5% [6.0 - 13.1]) had the lowest provincial prevalence (see Graph 3).

Coerced sex: Was ever forced to have sex - See Table 5

Nationally 9.8% [8.3 - 11.3] of learners reported ever having been forced to have sex. Significantly fewer "White" learners (5.0% [3.2 - 6.8]) reported having been forced to have sex than "Black" learners (10.4% [8.7 - 12.0]).

Nationally within "race" groups (apart from "Indian" learners), grades, and age groups (apart from 14-year-olds), more females reported being forced to have sex than males – this is significant for "White" male learners (2.4% [0.9 - 3.8]) and female learners (7.1% [4.1 - 10.2]), grade 11 males (3.7% [2.0 - 5.5]) and females (10.0% [7.3 - 12.6]), and 19 years and older males (8.1% [5.6 - 10.7]) and females (16.0% [12.6 - 19.3]). There was no significant variation in the prevalence of learners who had been forced to have sex by age or by grade.

Limpopo Province had the highest provincial prevalence of learners who had been forced to have sex (12.8% [7.1 - 18.5]), followed by Mpumalanga (12.2% [10.1 - 14.2]). North West Province (6.0% [3.1 - 8.9]) had the lowest provincial prevalence of learners who had been forced to have sex (see Graph 4).

Coerced sex: Ever forced someone else to have sex - See Table 5

Across the country, 8.3% [6.8 - 9.9] of learners reported having forced someone to have sex, with no significant difference in the prevalence between male and female learners at national level. Significantly fewer "White" learners (2.6% [1.0 - 4.2]) than "Black" learners (9.0% [7.3 - 10.8]) forced someone else to have sex. Three times more "Coloured" males (9.2% [5.7 - 12.7]) than "Coloured" females (3.1% [2.0 - 4.3]) had forced someone else to have sex.

There was an increase in the proportion of learners who forced someone to have sex with age from 15 years to 18 years – fewer of those learners aged 15 years (6.2% [4.3 - 8.1]) had forced someone to have sex than those aged 19 years and older (10.9% [8.9 - 12.9]).

Limpopo Province (13.0% [6.0 - 20.0]) had the highest provincial prevalence of learners who forced someone to have sex, while North West Province (5.1% [2.1 - 8.1]) had the lowest provincial prevalence (see Graph 5).

Note that the differences across grade, age and province, mentioned above regarding ever having forced someone else to have sex are not statistically significant using 95% confidence intervals.

VIOLENCE-RELATED BEHAVIOURS ON SCHOOL PROPERTY

Carried any weapon at school - See Table 6

Nationally 9.2% [8.0 - 10.5] of learners had carried a weapon such as a gun, knife, panga or kierrie on school property during the month preceding the survey. Significantly more males (13.0% [11.5 - 14.5]) than females (6.3% [4.8 - 7.7]) had carried a weapon on school property in the past month. Significantly fewer "White" learners (5.6% [3.3 - 7.9]) had carried a weapon on school property when compared to "Black" learners (9.4% [8.1 - 10.6]).

There was a decrease in the prevalence of learners who had carried a weapon on school property in the past month with an increase in grade. Significantly more grade 8 (11.5% [9.0 - 13.9]) and grade 9 (11.5% [9.3 - 13.6]) learners than grade 10 (6.4% [4.6 - 8.2]) and grade 11 (6.2% [4.4 - 7.9]) learners had carried a weapon on school property.

Older learners were more likely to have carried a weapon on school property in the past month than younger learners. Significantly fewer 15-year-olds (7.7% [5.9 - 9.4]) had carried a weapon on school property than those of 19 years and older (12.4% [9.7 - 15.2]).

Significantly fewer learners in Gauteng (5.8% [4.4 - 7.2]) had carried a weapon on school property when compared to the national average of 9.2% [8.0 - 10.5]. Mpumalanga (12.0% [7.4 - 16.6]) had the highest provincial prevalence.

Was threatened/injured by someone with a weapon at school - See Table 6

Nationally 14.9% [13.5 - 16.4] of learners had been threatened or injured by someone with a weapon such as a gun, knife, panga or kierrie on school property during the six months preceding the survey. Significantly more males (19.1% [17.0 - 21.2]) than females (11.6% [9.5 - 13.7]) had been threatened or injured by someone with a weapon.

Significantly fewer "White" learners (6.6% [3.9 - 9.2]) had been threatened or injured by

someone with a weapon when compared to "Black" (15.8% [14.4 - 17.3]) and "Coloured" learners (13.3% [10.4 - 16.2]). Significantly more "Coloured" males (18.8% [14.4 - 23.2]) and "Black" males (19.8% [17.5 - 22.1]) had been threatened or injured by someone with a weapon when compared to "Coloured" females (8.5% [6.1 - 10.8]) and "Black" females (12.8% [10.4 - 15.2]).

There was a decrease in the prevalence of learners who had been threatened or injured by someone with a weapon with an increase in grade. More grade 8 learners (16.7% [14.6 - 18.9]) than grade 11 learners (12.7% [10.0 - 15.4]) had been threatened or injured by someone with a weapon at school. However, there was an increase in the prevalence of learners who had been threatened or injured by someone with a weapon with an increase in age from 14 years. Significantly more learners aged 19 years and older (23.2% [17.3 - 29.1]) than those aged 14 years (11.4% [7.9 - 14.9]) had been threatened or injured by someone with a weapon.

Kwazulu-Natal (17.0% [13.9 - 20.0]) had the highest provincial prevalence of learners who had been threatened or injured by someone with a weapon while the Northern Cape (10.5% [7.4 - 13.5]) had the lowest provincial prevalence.

Threatened/Injured someone else with a weapon at school - See Table 6

The national prevalence of learners who had threatened or injured someone with a weapon such as a gun, knife, panga or kierrie on school property during the six months preceding the survey was 9.2% [7.6 - 10.8]. Significantly more male (11.9% [10.4 - 13.4]) than female learners (7.1% [5.0 - 9.1]) had threatened or injured someone with a weapon at school.

Significantly fewer "White" learners (3.9% [1.4 - 6.4]) had threatened or injured someone with a weapon when compared to "Indian" (18.6% [8.5 - 28.8]), "Coloured" (10.3% [7.4 - 13.2]) and "Black" (9.5% [7.9 - 11.2]) learners. There was no significant variation by gender among "White" learners. There was no significant variation by grade. However, significantly more learners aged 19 and older (12.9% [10.1 - 15.7]) had threatened or injured someone with a weapon at school than learners aged 13 and younger (6.9% [4.5 - 9.3]).

The highest provincial prevalence of learners who had threatened or injured someone with a weapon was observed in Mpumalanga (14.0% [8.0 - 20.0]), and the lowest in Gauteng (6.6% [4.0 - 9.2]).

Engaged in a physical fight at school - See Table 6

Nationally almost one-fifth of learners (19.3% [17.6 - 20.9]) had engaged in a physical fight such as punching or hitting on school property during the six months preceding the survey. Significantly more males (24.0% [22.2 - 25.7]) than females (15.5% [13.4 - 17.7]) had engaged in a physical fight at school during the past six months. There was no significant variation by "race".

There was a decrease in the prevalence of learners who had engaged in a physical fight at school with an increase in grade. Significantly more grade 8 learners (24.0% [21.2 - 26.8]) than grade 11 learners (12.8% [9.9 - 15.6]) had engaged in a physical fight at school in the past six months.

Mpumalanga (24.0% [18.1 - 29.9]) had the highest provincial prevalence of learners who had engaged in a physical fight at school in the past six months, while Northern Cape (15.1% [10.5 - 19.7]) had the lowest provincial prevalence.

Felt unsafe on the way to and from school - See Table 6

Nationally 22.3% [20.1 - 24.6] of learners had felt unsafe on the way to and from school during the past month, with no significant variation by gender. Significantly fewer "White" learners (5.7% [3.0 - 8.3]) had felt unsafe on the way to and from school when compared to "Indian" (24.9% [17.1 - 32.8]), "Black" (24.5% [22.3 - 26.7]) and "Coloured" (16.8% [13.6 - 20.0]) learners.

There was a decrease in the prevalence of learners who had felt unsafe on the way to and from school with an increase in grade. More grade 8 learners (24.8% [21.3 - 28.2]) than grade 11 learners (18.5% [14.3 - 22.7]) had felt unsafe on the way to and from school. However, there was an increase in the prevalence of learners who had felt unsafe on the way to and from school with an increase in age. Significantly more learners aged 19 and older (36.9% [31.0 - 42.7]) had felt unsafe on the way to and from school than learners aged 13 and younger (16.2% [11.1 - 21.3]).

Limpopo Province (27.9% [18.8 - 37.1]) had the highest provincial prevalence of learners who had felt unsafe to and from school while the Northern Cape (15.4% [12.4 - 18.4]) had the lowest provincial prevalence.

Felt unsafe at school - See Table 6

Almost one-third of learners (31.7% [28.6 - 34.8]) had felt unsafe at school during the past month, with no significant variation by gender. Significantly fewer "White" learners (9.2% [6.2 - 12.1]) had felt unsafe at school when compared to "Black" (33.6% [30.6 - 36.5]), "Coloured" (29.2% [22.2 - 36.1]) and "Indian" (25.3% [12.7 - 37.8]) learners.

Learners in lower grades were more likely to have felt unsafe at school than learners in higher grades. Significantly more grade 8 learners (36.8% [32.5 - 41.2]) and grade 9 learners (33.9% [29.4 - 38.5]) than grade 11 learners (23.1% [18.6 - 27.7]) had felt unsafe at school. However, significantly fewer 15-year-old learners (25.9% [21.7 - 30.0]) had felt unsafe at school than learners of 19 years and older (43.6% [39.4 - 47.8]).

The Northern Cape (38.3% [10.8 - 65.8]) had the highest provincial prevalence of learners who had felt unsafe at school while the Western Cape (23.4% [18.1 - 28.8]) had the lowest provincial prevalence.

4.1.3. OVERVIEW

In the month preceding the survey, 16.7% of learners reported having carried a weapon such as a gun, knife, panga or kierrie. Almost 1 in 10 learners (8.5%) reported carrying a gun, while 17.8% reported carrying a knife in the month prior to the survey.

In the six months preceding the survey, 2 in 5 learners (41.0%) were bullied, almost 1 in 3 (30.2%) were involved in a physical fight, and 14.3% had been members of gangs. Of those injured in a physical fight, 29.3% required medical treatment. In their lifetime, 13.6% of learners had been assaulted by either their boyfriend or girlfriend, 13.2% had assaulted their boyfriend or girlfriend, and 9.8% of learners had been forced to have sex, while 8.3% had forced someone else to have sex.

In terms of violence and aggressive behaviours on school property, in the month preceding the survey 9.2% of learners carried weapons on school grounds. In the past six months 14.9% were threatened or injured by someone with a weapon, 9.2% threatened someone else with a weapon, and 19.3% engaged in a physical fight. In the past month 22.3% felt unsafe in transit to and from school, and 31.7% of learners felt unsafe on school property.

Consistent with international findings, almost one-third of South African learners had been involved in a physical fight. Internationally males are 2-3 times more likely to have been involved in a physical fight, whereas in South Africa they are 1.6 times more likely.[46] In terms of gender involvement in physical fights, the results of this study are consistent with the above, with 1.5 times more males (37.3%) than females (24.5%) having been involved in a physical fight.

During the six months preceding the survey, a substantial number of learners reported being members of a gang. Learners in lower grades were more likely to be members of gangs than learners in higher grades. Perhaps gangs provide some degree of location and "safety" for those who are vulnerable, and such vulnerability may be greater among younger learners.

Older learners showed a higher prevalence of ever being injured by their partner, injuring their partner, being forced by someone to have sex, as well as forcing someone else to have sex. Even though the prevalence for males as perpetrators of partner violence and sexual coercive behaviours is higher than for females, the differences are not significant, indicating that the percentage of females engaged in these behaviours is not negligible.[46]

The apparently anomalous difference between the variations of certain violent behaviours with age and grade could be explained by older learners in the lower grades exhibiting a greater prevalence of certain risk behaviours. This feature was observed in terms of the following risk behaviours: having threatened or injured someone, having been threatened or injured by someone, feeling unsafe on the way to and from school, and feeling unsafe while at school.

Violence perpetrated on school property was consistent with patterns of violence-related behaviour in general, with respect to gender, grade and age.

An analysis of weapon-carrying by province showed that Gauteng has consistently lower prevalences of learners carrying weapons, guns or knives. Free State had the highest provincial prevalence of having been involved in a physical fight. Limpopo Province had the second highest prevalence of gang membership and having been injured in a physical fight, but the highest prevalence of coercive sex and intimate partner violence. Learners in Mpumalanga also reported high gang membership, coercive sex and intimate partner violence, as well as carrying of guns and being injured in a physical fight.

The Western Cape is commonly perceived as the province with the highest prevalence of gang membership. However, learners in Mpumalanga reported the highest prevalence of gang membership, and the Western Cape ranked 5th among the nine provinces. It must be borne in mind that this study was conducted among in-school youth, and it is likely that more out-of-school youth are engaged in gang activities.

4.2. Traffic safety

4.2.1. INTRODUCTION

This section focuses on the following behaviours associated with traffic safety:

- Wearing of seatbelts when driven by others
- Wearing of seatbelts when driving
- Alcohol consumption by driver, when driven by someone else in the past month
- Alcohol consumption when driving in the past month
- Walking alongside the road under the influence of alcohol in the past month

Road traffic injuries account for 1 million deaths each year and about 10 million people are injured or disabled in road traffic crashes throughout the world, particularly in low- and middle-income countries. In 1998 developing countries accounted for 85% of global deaths due to traffic injuries, and children accounted for 96% of all those killed. By 2020 it is estimated that road traffic injuries will rank third in terms of leading causes of disease burden.[54-55] South Africa is faced with a double burden of road-related injuries since they involve motor vehicle drivers and passengers as well as pedestrians. The sociocultural and geographical features of the country as well as driver, pedestrian and road infrastructure factors contribute to a high traffic crash rate. It is estimated that traffic crashes cost South Africa roughly 14 billion rand per year.[56-57]

In South Africa more than half (56.4%) of child transport-related deaths are the result of pedestrian injuries. Pedestrian deaths are ranked as the top external cause of death for children aged 5 to 14 years. The most common cause of unnatural death among 10-14-year-old children was motor vehicle crashes, in contrast to the 15-19-year-old age cohort where the three main external causes were firearms, sharp objects and motor vehicle crashes respectively.

The severity of road traffic injuries involving children is reduced in cases where seatbelts are worn.[58] Although there is limited information on seatbelt-wearing rates and related injuries, the results of a road-block survey estimated that 49.9% of front seat and 92.4% of back seat passengers travelling in light motor vehicles on South African roads do not wear seatbelts, despite the fact that their use is mandatory for drivers and all passengers.[59-60]

Adolescent pedestrian injuries are likely to present a similar profile to that of adults, where alcohol and other forms of substance abuse appear to be important contributory factors. Although no statistics are available specifically for adolescents, it is estimated that 11% of all pedestrians on South African roads exceed the breath alcohol limit of 0.24 mg/litre of breath.[56] Between 40% and 50% of vehicle-pedestrian collisions in urban areas and between 30% and 40% of vehicle-pedestrian collisions in rural areas involve pedestrians jaywalking or walking under the influence of alcohol or drugs. Among pedestrian deaths, 60% had elevated blood alcohol concentrations.[61] It was found that after office hours 16% of pedestrians had blood alcohol levels equal to or greater than the legal driving limit of 0.05 g/100 ml of blood, and that pedestrians account for 72% of adult transport-related deaths.[62] Young people under the age of 20 years appear to account for approximately 10% of all drivers on South African roads.[57] [60]

4.2.2. RESULTS

Always wear a seatbelt when driven by someone else - See Table 7

Nationally only 14.3% [12.7 - 15.9] of learners always wore a seatbelt when driven by someone else, with no significant variation by gender, by "race", by grade or by age.

Significantly fewer learners in Gauteng (10.2% [8.3 - 12.1]) always wore a seatbelt when driven by someone else when compared to the national average of 14.3% [12.7 - 15.9]. Limpopo (19.7% [14.0 - 25.3]) had the highest prevalence of learners who always wore a seatbelt when driven by someone else.

Always wear a seatbelt when driving - See Table 7

Nationally among those who had driven a vehicle, 21.4% [19.6 - 23.1] of drivers always wore a seatbelt when driving. Significantly more male drivers (25.0% [22.3 - 27.6]) than female drivers (17.9% [14.6 - 21.3]) always wore a seatbelt when driving. There was no significant variation in prevalence by grade or by age.

Significantly more drivers in the Western Cape (28.4% [18.3 - 38.5]) always wore a seatbelt when driving when compared to the national average of 21.4% [19.6 - 23.1]. Eastern Cape (15.3% [12.7 - 18.0]) had the lowest provincial prevalence.

Driven by someone who had been drinking alcohol - See Table 8

The national prevalence of learners who in the past month had been driven by someone who had been drinking alcohol was 34.5% [32.3 - 36.6]. Significantly more males (37.6% [35.2 - 39.9]) than females (32.0% [29.0 - 35.1]) reported being driven by someone who had been drinking alcohol in the past month. There was no significant variation by grade, or by age.

KwaZulu-Natal (40.9% [34.6 - 47.2]) had the highest prevalence among the provinces, with Northern Cape (27.9% [17.5 - 38.2]) having the lowest provincial prevalence. Note that this variation by province was not statistically significant using 95% confidence intervals (see Graph 6).

Drove after drinking alcohol - See Table 8

Nationally 7.8% [6.5 - 9.0] had driven after drinking alcohol in the past month. Significantly more males (10.2% [8.7 - 11.6]) than females (5.5% [3.7 - 7.2]) had driven after drinking alcohol. There was no significant variation by "race", grade and age.

North West Province (11.1% [6.5 - 15.8]) had the highest prevalence among the provinces of drivers who had driven after drinking alcohol. Limpopo (6.1% [3.5 - 8.7]) had the lowest provincial prevalence (see Graph 7).

Walked alongside a road after drinking alcohol - See Table 8

Nationally 10.6% [9.0 - 12.1] of learners had walked alongside a road after drinking alcohol in the past month. Significantly more males (14.9% [12.6 - 17.2]) than females (7.1% [5.8 - 8.4]) had walked alongside a road after drinking alcohol. Significantly more "White" (21.8% [15.8 - 27.8]), "Coloured" (20.3% [14.4 - 26.2]) and "Indian" (20.1% [11.9 - 28.4]) learners had walked alongside a road after drinking alcohol when compared to "Black" learners (8.2% [6.8 - 9.6]).

Significantly fewer grade 8's (7.7% [6.2 - 9.1]) than grade 11's (14.5% [10.0 - 18.9]) had walked alongside a road after drinking alcohol. Significantly fewer 13-year-old and younger learners (5.2% [3.0 - 7.4]) than 15-year-olds (10.1% [7.8 - 12.5]), 16-year-olds (12.1% [9.7 - 14.6]), 17-year-olds (10.6% [8.3 - 12.9]), 18-year-olds (13.5% [10.3 - 16.6]) and 19-year-olds and older (11.4% [9.3 - 13.5]) had walked alongside a road after drinking alcohol.

Western Cape (19.6% [12.2 - 27.0]) had a significantly higher prevalence of learners who had walked alongside a road after drinking alcohol when compared to the national average of 10.6% [9.0 - 12.1]. KwaZulu-Natal (5.6% [2.1 - 9.1]) had the lowest provincial prevalence of learners who had walked alongside a road after drinking alcohol (see Graph 8).

4.2.3. OVERVIEW

One in 10 learners (10.6%) walked along the roadside after drinking alcohol; 14.3% of learners always wore a seatbelt when driven by someone else; 21.4% always wore a seatbelt when driving themselves. An overwhelming majority of adolescents are not complying with the legal requirements of always using seatbelts.

In the month preceding the survey, more than 1 in 3 learners (34.5%) rode with a driver who had been drinking alcohol, and 7.8% drove after drinking alcohol themselves. This behaviour seriously jeapordises the health and welfare of young people by placing them at unnecessary risk of injury.

Northern Cape, KwaZulu-Natal, Eastern Cape and Gauteng had lower prevalences of learners who always wore a seatbelt when driven by others and when driving themselves.

The fact that learners under the legal driving age of 18 years did respond to questions regarding their driving behaviour implies that there are learners driving illegally.

4.3. Suicide-related behaviours

4.3.1. INTRODUCTION

This section focuses on prevalence of the following behaviours displayed by learners over the six months preceding the survey:

- Having feelings of sadness and hopelessness
- Contemplating suicide
- Making a plan to commit suicide
- Attempting suicide
- Requiring medical treatment following a suicide attempt

Suicidal behaviour has been described as ranging from merely thinking about ending one's life, through developing a plan to commit suicide and obtaining the means to do so, and attempting to kill oneself, to finally carrying out the act successfully. Although suicide rates tend to increase with age, global trends suggest that suicide is increasingly being reported among younger people.(46)

Deaths from self-inflicted injuries account for 1.3% of the global burden of disease. It is well known that availability of means to commit suicide, such as firearms, has a major impact on actual suicides.(63)

In South Africa suicides appear to be more common among young people than among old people, with almost half (46.5%) of the suicides involving young adults between 20-34 years. From 15 years of age suicides rise sharply and peak between the ages of 25 and 29 years.(51) Consistent with global trends, there were 4.7 male suicides for every female suicide. While male suicides peaked in the 25-29-year age group, female suicides peaked in the 15-19-year age group. The major forms of suicide among males were hanging (46%) and firearms (31%), and among females poisoning (36%) and hanging (23%).(64)

However, deaths from suicide are only the tip of the iceberg of all suicidal behaviours, as there are many suicide attempts each year where people survive. However, there is very little information on non-fatal suicidal behaviour among adolescents in South Africa. It is difficult to collect reliable data on non-fatal suicidal behaviour due to the social stigma attached to it, resulting in cases being under-reported. This is the first school-based study into non-fatal suicides providing data based on a representative national sample.

4.3.2. RESULTS

Had sad or hopeless feelings - See Table 9

Nationally 24.6% [23.2 - 25.9] of learners had felt so sad or hopeless during the past six months that they stopped doing some of their usual activities for two or more weeks in a row, with no significant variation in this prevalence by gender or by "race".

There was an increase in the prevalence of sad or hopeless feelings among learners with an increase in grade. Significantly more grade 11 learners (32.1% [28.0 - 36.2]) than grade 10 (24.3% [21.3 - 27.3]), grade 9 (22.7% [20.7 - 24.7]) and grade 8 (22.7% [20.2 - 25.1]) learners had sad or hopeless feelings. Significantly fewer 14-year-old learners (19.3% [16.4 - 22.3]) had sad or hopeless feelings than 16-year-olds (25.3% [22.5 - 28.0]), 17-year-olds (28.4% [24.8 - 32.0]), 18-year-olds (27.5% [22.8 - 32.1]) and those of 19 years and older (27.0% [24.0 - 29.9]).

Significantly more learners in Gauteng (34.1% [31.6 - 36.7]) had sad or hopeless feelings than the national average (24.6% [23.2 - 25.9]). Significantly fewer learners in the Eastern Cape (17.7% [14.0 - 21.5]) had sad or hopeless feelings than the national average (see Graph 9).

Ever considered attempting suicide - See Table 9

The national prevalence of learners who had ever considered attempting suicide in the past six months was 19.0% [16.8 - 21.1], with no significant variation by gender, "race" or grade.

Significantly fewer learners of 13 years or younger (13.7% [11.1 - 16.2]) had ever considered attempting suicide than 16-year-olds (20.9% [17.6 - 24.2]), 18-year-olds (20.2% [16.6 - 23.8]) and those of 19 years and older (24.7% [19.8 - 29.6]).

The Eastern Cape (13.9% [10.2 - 17.5]) had the lowest provincial prevalence of learners who had ever considered attempting suicide. Learners in Free State (22.8% [18.1 - 27.5]) had the highest provincial prevalence. In the Western Cape significantly more females (22.7% [19.3 - 26.1]) than males (15.1% [12.3 - 18.0]) had ever considered attempting suicide (see Graph 9).

Made a plan to commit suicide - See Table 9

Nationally 15.8% [14.1 - 17.4] of learners had made a plan to commit suicide in the past six months, with no significant variation by gender, "race", grade or age.

Free State had the highest provincial prevalence (20.3% [15.9 - 24.6]) of learners who had made a plan to commit suicide, while the Eastern Cape (11.4% [8.5 - 14.3]) had the lowest provincial prevalence. Among learners in the Western Cape, significantly more females (20.4% [15.5 - 25.2]) than males (11.8% [9.7 - 13.9]) had made a plan to commit suicide (see Graph 9).

Made one or more suicide attempts - See Table 9

Nationally 17.3% [15.1 - 19.4] of learners had made one or more suicide attempts in the past six months, with no significant variation in prevalence by gender, "race" or grade. Significantly fewer learners of 13 years or younger (13.4% [10.1 - 16.7]) had made one or more suicide attempts than those aged 19 and older (22.4% [17.9 - 26.9]).

Mpumalanga (23.1% [16.0 - 30.1]) had the highest provincial prevalence of learners who had made one or more suicide attempts in the past six months, while the Eastern Cape had the lowest provincial prevalence (12.8% [8.8 - 16.8]) (see Graph 9).

Made a suicide attempt requiring medical treatment - See Table 9

Nationally among those who had attempted suicide in the past 6 months, 27.8% [25.4 - 30.3] had made a suicide attempt which resulted in an injury, poisoning or overdose that had to be treated by a doctor or nurse (i.e. required medical treatment). There was no significant variation in this prevalence by gender, "race", grade or age, except that grade 8 learners (33.0% [29.2 - 36.9]) had a significantly higher prevalence of having made a suicide attempt that required medical treatment than grade 9 learners (24.5% [20.5 - 28.4]).

Limpopo Province (34.1% [29.0 - 39.2]) had the highest provincial prevalence of learners having made a suicide attempt in the past six months that required medical treatment, while the Free State (21.7% [14.2 - 29.1]) had the lowest provincial prevalence (see Graph 9).

4.3.3. OVERVIEW

In the six months preceding the survey, 1 in 4 learners (24.6%) had felt so sad or hopeless that they stopped doing some usual activities for two weeks or more in a row. One in 5 learners (19.0%) considered attempting suicide, 15.8% of learners made plans to commit suicide, and 17% attempted suicide on one or more occasions in the previous six months. Of those who attempted suicide, 27.8% had to have medical treatment as a consequence, with more learners in lower grades being treated. The data suggest that a large number of learners suffer from mental health problems.

There were no gender or "race" differences in the expression of sad or hopeless feelings by learners at a national level.

Older learners reported higher prevalences of experiencing sad or hopeless feelings, considering suicide, making a plan to commit suicide and attempting suicide, in the six months before the survey.

Learners in the Eastern Cape reported the lowest provincial prevalence of experiencing sad or hopeless feelings, considering suicide, making a plan to commit suicide and attempting suicide. Learners in Gauteng reported a significantly higher prevalence of feelings of sadness and hopelessness than the national rate. Free State had the highest provincial prevalence of considering suicide and of making a plan to commit suicide, and the second highest provincial prevalence of having sad or hopeless feelings, and of making at least one suicide attempt. Female learners in the Western Cape had significantly higher rates of ever considering suicide (22.7%) and making a plan to commit suicide (20.4%) when compared to their male counterparts.

CHAPTER 5

Substance Abuse

This chapter presents findings on substance using behaviours, in particular tobacco, alcohol, cannabis (dagga), inhalants, methaqualone and antihistamine (Mandrax), cocaine, heroin, "club drugs", and over-the-counter and prescription drugs.

5.1. Tobacco use

5.1.1. INTRODUCTION

This section focuses on:

- Ever having used cigarettes
- Age of initiation of cigarette use
- Use of cigarettes in the past month
- Frequent cigarette use in the past month
- Attempts to stop smoking cigarettes during the past year
- Use of smokeless tobacco products in the past month
- Exposure to environmental tobacco smoke during the past week
- Whether parents or guardians smoke

The use of tobacco products in adolescence usually leads to a lifelong addiction to nicotine. Also, recent European, American and Asian epidemiological evidence shows that about half of all persistent cigarette smokers who start young are eventually killed by their habit, unless they quit. There were 100 million deaths from tobacco in the 20th century, but if current smoking patterns continue, the number will increase ten-fold this century.[65]

When examining cancer mortality and morbidity rates in South Africa between 1993-1995, lung cancer, whose principal cause is tobacco smoking, was the second most common cancer among "Coloured" males, the third most common cancer among "Black" and "Indian" males, and fourth most common among "White" males. Tobacco-related disease appears to be increasing, since lung cancer among "White", "Black" and "Indian" South African women has only been listed among the top five cancers since 1995.[66] Furthermore, a sample taken from the recently implemented death notification system, which records smoking history of the deceased, shows significantly increased relative risk (RR) of death for those who had smoked in the 5 years prior to their death, due to oesophageal cancer (RR=4.1), lung cancer (RR=3.3), tuberculosis (RR=2.5), stomach cancer (RR=2.2), digestive diseases (RR=1.6), and other lung diseases (RR=1.6).[67]

There have been several studies collecting data on adult tobacco use. In 1993 it was reported that 31.5% of adults were current smokers.[68] Three surveys conducted in February 1995, February 1996 and October 1996 reported a current smoking rates of 34%, 31% and 34% respectively.[69-70] However, by 1998, amidst the implementation of the Tobacco Products Control Act,[71] only 24% of adults reported being current smokers.[31]

The first nationally representative study on tobacco-use among school-going learners found that 46.7% of learners in grades 8-10 reported ever having smoked cigarettes, 23.0% of them reported being current smokers (smoked cigarettes on one or more days in the past month) and

10.1% were frequent smokers (smoked on 20 or more days in the past month). Almost 1 out of 5 learners (18.5%) reported first smoking cigarettes before the age of 10 years, and among current smokers 76.6% had tried to quit smoking in the past year.[20]

5.1.2. RESULTS

Ever smokers - See Table 10

Almost one third of the sample (30.5% [27.5 - 33.5]) had ever smoked cigarettes in their lifetime. Significantly more male learners (40.0% [36.9 - 43.1]) than female learners (23.0% [19.6 - 26.4]) reported ever smoking cigarettes, although this significant gender difference was only found within "race" groups when comparing "Black" male learners (34.3% [31.3 - 37.3]) and "Black" female learners (15.8% [12.9 - 18.7]). Significantly more "White" (66.7% [61.7 - 71.7]), "Coloured" (56.6% [49.7 - 63.6]), and "Indian" (47.4% [32.2 - 62.6]) learners had ever smoked cigarettes when compared to "Black" learners (23.9% [21.3 - 26.4]).

Significantly more learners in grade 11 (40.1% [33.1 - 47.1]) than in grade 8 (27.6% [23.6 - 31.6]) had ever smoked cigarettes. Significantly fewer learners aged 13 and younger (20.4% [15.7 - 25.0]) had ever smoked cigarettes than 15-year-olds (31.1% [27.2 - 35.1]), 16-year-olds (35.2% [30.9 - 39.6]) and 17-year-olds (32.6% [27.7 - 37.6]).

Significantly more learners in the Western Cape (51.1% [37.6 - 64.7]) and Gauteng (41.4% [35.2 - 47.5]) had ever smoked when compared to the national average (30.5% [27.5 - 33.5]). Significantly fewer learners in KwaZulu-Natal (18.2% [12.6 - 23.8]) had ever smoked cigarettes when compared to the national figure.

Age of initiation < 10 years - See Table 10

Nationally 6.2% [5.4 - 7.0] of learners had smoked their first cigarette before the age of 10 years. Male learners (8.7% [7.6 - 9.9]) were twice as likely as female learners (4.2% [3.4 - 5.1]) to have smoked their first cigarette before the age of 10 years.

Significantly more "White" (13.5% [11.1 - 15.9]) and "Coloured" (9.5% [7.3 - 11.7]) learners had smoked their first cigarette before age 10 when compared to "Black" learners (5.1% [4.2 - 6.0]). There was no significant variation in the prevalence of learners having smoked their first cigarette before age 10 by grade, age, or province.

Mpumalanga (9.2% [5.3 - 13.0]) and the Northern Cape (9.2% [5.1 - 13.4]) had the highest provincial prevalences of learners having smoked their first cigarette before age 10, while KwaZulu-Natal (4.9% [3.1 - 6.6]) and Limpopo (4.9% [2.5 - 7.4]) had the lowest provincial prevalences (see Graph 10).

Current smokers - See Table 10

Nationally about 1 in 5 learners (21.1% [19.5 - 22.8]) were classified as current smokers, i.e. they had smoked cigarettes on one or more days in the past month. Significantly more males (29.0% [27.2 - 30.7]) than females (14.9% [13.0 - 16.9]) were current smokers. However, this significant gender difference was only found within "race" groups when comparing "Black" male (26.4% [24.5 - 28.3]) and "Black" female learners (10.3% [8.7 - 11.9]).

Significantly more "Coloured" (39.5% [33.2 - 45.9]), "White" (37.8% [32.3 - 43.4]) and "Indian" (26.9% [19.2 - 34.7]) learners were current smokers when compared to "Black" learners (17.3% [15.8 - 18.9]). There was no significant variation in the prevalence of learners who were current smokers by grade. Learners in the 13 years and under age category (11.2% [8.5 - 13.8]) had significantly lower rates of current smoking when compared to 14-year-olds (18.0% [14.9 - 21.1]), 15-year-olds (21.3% [18.5 - 24.0]), 16-year-olds (24.3% [21.3 - 27.2]), 17-year-olds (23.2% [19.9 - 26.5]), 18-year-olds (24.6% [19.9 - 29.3]) and those of 19 years and older (22.6% [19.4 - 25.7]).

The Western Cape (37.7% [27.7 - 47.6]), Free State (29.4% [23.5 - 35.3]) and Gauteng (28.5% [25.0 - 32.1]) had significantly higher rates of current smoking than the national average of 21.1% [19.5 - 22.8]. Limpopo Province (14.0% [10.8 - 17.2]) and KwaZulu-Natal (13.7% [10.8 - 16.5]) had a significantly lower rate of current smoking than the national average.

Current frequent cigarette use - See Table 10

Nationally 6.5% [5.5 - 7.4] of learners had smoked cigarettes on 20 or more days in the past month. Significantly more males (10.0% [8.7 - 11.2]) than females (3.7% [2.8 - 4.6]) were current frequent smokers, although this significant gender difference was only found within "race" groups when comparing "Black" male learners (8.1% [6.9 - 9.2]) and "Black" female learners (1.5% [1.0 - 1.9]). Significantly more "White" (18.2% [13.5 - 23.0]) and "Coloured" (16.0% [11.7 - 20.4]) learners were current frequent smokers than "Indian" (4.8% [1.6 - 7.9]) and "Black" learners (4.4% [3.7 - 5.0]).

Significantly more grade 11 learners (8.9% [6.4 - 11.5]) were classified as current frequent smokers when compared to grade 8 learners (4.3% [3.3 - 5.3]). Learners in the 14-year-old age category (3.3% [2.1 - 4.5]) had significantly lower rates of current frequent smoking when compared to 15-year-olds (5.9% [4.7 - 7.1]), 16-year-olds (8.1% [5.9 - 10.4]), 17-year-olds (7.4% [5.7 - 9.0]), 18-year-olds (10.8% [7.6 - 14.0]) and those aged 19 and older (7.2% [5.7 - 8.8]).

The Western Cape (16.3% [10.6 - 21.9]) had significantly higher rates of current frequent smoking than the national average of 6.5% [5.5 - 7.4], while KwaZulu-Natal (3.1% [2.3 - 3.9]) and Limpopo (3.1% [1.9 - 4.2]) had significantly lower rates of current frequent smoking than the national average.

Tried to quit cigarettes - See Table 10

Nationally 47.4% [43.9 - 50.9] of current smokers had tried to stop smoking in the past year. There was no significant difference in the prevalence of having tried to quit smoking in the past year between male (47.0% [43.3 - 50.6]) and female current smokers (48.1% [43.9 - 52.3]). Significantly more "Coloured" (63.2% [58.6 - 67.7]) and "White" learners (59.0% [52.7 - 65.4]) had tried to quit smoking in the past year when compared to "Black" learners (40.7% [37.1 - 44.3]).

There was an increase in the prevalence of learners who had tried to quit smoking in the past year from grade 8 to grade 10. Significantly more learners in grade 10 (54.4% [49.1 - 59.7]) had tried to stop smoking when compared to learners in grade 8 (37.5% [30.6 - 44.3]).

The Western Cape (63.6% [61.3 - 65.9]) and Northern Cape (59.6% [52.6 - 66.5]) had significantly more learners who had tried to quit smoking in the past year than the national average of 47.4% [43.9 - 50.9], while Limpopo Province (27.6% [14.8 - 40.4]) and KwaZulu-Natal (34.3% [27.8 - 40.8]) had significantly lower rates when compared to the national average.

Used smokeless tobacco - See Table 10

The national average for smokeless tobacco use (for example chewing tobacco, or snuff) in the month preceding the survey was 10.5% [9.2 - 11.8]. There was no significant variation in this prevalence of having used smokeless tobacco in the past month by gender, "race", grade and age.

Eastern Cape (7.6% [4.7 - 10.6]) had the lowest provincial prevalence of learners who had used smokeless tobacco in the past month, while Limpopo (14.4% [9.6 - 19.3]) had the highest provincial prevalence.

Exposed to Environmental Tobacco Smoke - See Table 11

Nationally significantly more current smokers 84.0% [81.6 - 86.3] than those who had never smoked 56.0% [52.7 - 59.3] had someone smoke in their presence in the week preceding the survey. Among the current smokers, significantly more "White" current smokers (94.3% [91.4 - 97.3]) than "Coloured" (84.8% [80.9 - 88.7]) and "Black" (80.9% [77.9 - 83.9]) current smokers had someone smoke in their presence in the week preceding the survey.

There was an increase in the prevalence of current smokers and those who had never smoked who had someone smoke in their presence in the week preceding the survey with increase in grade. Significantly more grade 11 current smokers (90.2% [86.6 - 93.8]) than grade 8 (79.7% [75.6 - 83.8]) and grade 9 (80.8% [77.1 - 84.5]) current smokers had someone smoke in their presence in the past week. Significantly more grade 11 learners (64.7% [59.0 - 70.3]) who had never smoked had someone smoke in their presence in the week preceding the survey when compared to those in grade 8 (50.3% [44.6 - 56.0]).

Northern Cape had the highest provincial prevalences of current smokers (89.9% [84.9 - 94.9]) and those who had never smoked (74.2% [60.8 - 87.6]) who had someone smoke in their presence in the week preceding the survey, while Limpopo Province current smokers (78.6% [65.4 - 91.9]) and those who had never smoked (45.6% [40.3 - 50.9]) had the lowest provincial prevalences (see Graph 11).

At least one parent/guardian smokes - See Table 11

Significantly more current smokers (47.9% [45.2 - 50.7]) than those who had never smoked (30.4% [28.2 - 32.6]) had one or more parent/guardian who smokes. Significantly fewer "Black" current smokers (41.0% [38.0 - 44.0]) had at least one parent/guardian who smokes when compared to "Coloured" (64.1% [58.2 - 70.0]) and "White" (61.4% [53.6 - 69.2]) current smokers. Significantly more "Coloured" (56.4% [45.9 - 66.9]) than "White" (32.2% [25.1 - 39.4]) and "Black" learners (28.5% [25.7 - 31.2]) who had never smoked had at least one parent/guardian who smokes.

Significantly more current smokers in the Western Cape (64.2% [60.3 - 68.1]) and Northern Cape (63.4% [53.9 - 72.8]) had at least one parent/guardian who smokes when compared to the national average of 47.9% [45.2 - 50.7]. Significantly fewer current smokers in Limpopo Province (32.4% [22.6 - 42.1]) and Mpumalanga (38.8% [34.8 - 42.8]) had at least one parent/guardian who smokes compared to the national average.

Significantly more learners who had never smoked in the Western Cape (42.0% [39.2 - 44.7]), North West Province (39.5% [34.9 - 44.1]), Northern Cape (59.7% [33.7 - 85.8]) and Free State (46.8% [41.6 - 52.0]) had at least one parent/guardian who smokes when compared to the national average (30.4% [28.2 - 32.6]). Significantly fewer learners in KwaZulu-Natal (22.7% [18.9 - 26.5]) who had never smoked had at least one parent/guardian who smokes, when compared to the national average.

5.1.3. OVERVIEW

Almost 1 in 3 learners (30.5%) reported ever having smoked cigarettes in their lifetime, and 1 in 5 learners (21.1%) were current smokers; 6.5% of learners were frequent smokers, and 10.5% had used a smokeless tobacco product in the past month. Of the current smokers, 47.4% had tried to stop smoking cigarettes in the year preceding the survey. With regard to age of initiation, 6.2% of learners had first tried smoking a cigarette before reaching the age of 10 years. Exposure to environmental tobacco smoke in the week preceding the survey was 84.0% among current smokers and 56.0% among learners who had never smoked. The prevalence of smoking among parents and/or guardians of learners was 47.9% among learners who were current smokers, and 30.4% among learners who had never smoked.

"Black" learners, especially females, had significantly lower ever-smoking and current-smoking rates than their "White" and "Coloured" counterparts. There was a significant gender difference for ever- and current-smoking rates among the "Black" learners, but not among the other "race" groups. Even though "Black" learners have a significantly lower prevalence of ever and current smoking when compared to all other "race" groups, "Black" current smokers report a significantly lower rate of having tried to quit than "Coloured" and "White" current smokers.

Tobacco use in South Africa is commonly assumed to involve only cigarette smoking. However, over 10% of learners are using smokeless tobacco products. This form of tobacco use is high among the "Black" learners (11.3%). While "Black" females have low rates of cigarette smoking, they have similar rates of smokeless tobacco use (11.0%) as "Black" males (11.6%).

While ever smoking and current smoking increased with grade and age, the inverse was true for smokeless tobacco usage with grade. While ever smoking was highest in Western Cape and Gauteng, and current smoking was highest in Western Cape, Free State and Gauteng, smokeless tobacco use was highest in the Limpopo, followed by Free State and Mpumalanga.

5.2. Alcohol use

5.2.1. INTRODUCTION

This section focuses on:

- Ever having drunk one "drink" of alcohol (e.g. a beer, a glass of wine, or a 'tot' of brandy)
- Age at which first alcoholic drink was consumed
- Consumption of alcoholic drinks on one or more days in the past month
- Alcohol binging (5 or more drinks in succession) on one or more days in the past month

Alcohol use is ranked fifth among the leading causes of death, and consumption has increased over time, with the greatest increase occurring in developing countries. Worldwide, alcohol is responsible for 3.2% of all deaths per annum (1.8 million), with a higher percentage for males than for females. Besides the direct effects of intoxication and addiction resulting in alcohol use disorders, alcohol was estimated to have caused worldwide 20-30% of oesophageal cancer, liver disease, epilepsy, motor vehicle crashes and homicide [13]

Alcohol is the drug most commonly used by South Africans of all ages. The use of alcohol has been relatively well researched, with a variety of studies focusing on both the extent and determinants of use. More than 1 in 4 South Africans (28%) aged 15 years and over currently acknowledge consuming alcohol, 45% of males and 17% of females. Among adolescents aged 15-19 years, 11% are current drinkers, with 25.3% of males having ever drunk alcohol and 14.5% being current drinkers, while 15.0% of females have ever drunk alcohol and 7.1% are current drinkers. For "White" adolescents the rates are much higher, with ever-drinking rates of 70.1% and 65.1% for males and females respectively. Adolescents from Western Cape and Gauteng had the highest rate of ever having used alcohol, while Northern Province had the lowest rate.[31]

5.2.2. RESULTS

Ever used alcohol - See Table 12

Nationally 49.1% [46.2 - 52.0] of learners had drunk one or more drinks of alcohol (e.g. a beer, a glass of wine, or a 'tot' of brandy) in their lifetime (i.e. had ever used alcohol). Significantly more males (56.1% [52.6 - 59.6]) than females (43.5% [40.1 - 47.0]) had ever used alcohol, although this significant gender difference was only found within the "race" groups when comparing "Black" male learners (52.0% [48.2 - 55.9]) and "Black" female learners (37.8% [34.4 - 41.3]). Significantly more "White" (86.0% [82.4 - 89.5]) and "Coloured" learners (66.0% [59.8 - 72.2]) had ever used alcohol when compared to "Black" (44.0% [41.1 - 47.0]) and "Indian" learners (39.7% [27.6 - 51.7]). Significantly more "White" learners than "Coloured" learners had ever used alcohol.

Significantly more grade 11 (62.2% [55.1 - 69.4]) and grade 10 learners (54.5% [47.6 - 61.4]) compared to grade 8 learners (39.3% [34.9 - 43.7]) had ever used alcohol. Learners in the 13 years and under age category (32.8% [27.3 - 38.3]) had significantly lower rates of ever using alcohol than 14-year-olds (43.4% [39.1 - 47.8]), 15-year-olds (48.1% [44.1 - 52.1]), 16-year-olds (53.4% [48.6 - 58.2]), 17-year-olds (56.0% [51.6 - 60.4]), 18-year-olds (46.6% [40.9 - 52.3]) and learners aged 19 and older (50.2% [45.3 - 55.0]).

Northern Cape (71.5% [65.5 - 77.5]) and Gauteng (62.1% [57.4 - 66.8]) had significantly higher percentages of learners who had ever used alcohol when compared to the national average of 49.1% [46.2 - 52.0]. Limpopo Province (36.5% [27.4 - 45.6]) had a significantly lower prevalence of learners who had ever used alcohol than the national prevalence.

Age of initiation < 13 years - See Table 12

Nationally almost 1 in 8 learners (12.0% [10.4 - 13.6]) had drunk their first drink of alcohol before the age of 13 years. Significantly more male (15.8% [13.5 - 18.0]) than female learners (9.0% [7.6 - 10.4]) had used alcohol before the age of 13 years.

Significantly more "White" (25.7% [20.8 - 30.6]) and "Coloured" learners (19.4% [15.7 - 23.0]) had used alcohol before the age of 13 years when compared to "Black" learners. Significantly more "White" (25.7% [20.8 - 30.6]) than "Indian" learners (14.5% [9.6 - 19.4]) had used alcohol before the age of 13 years. There were no significant differences in the prevalence of using alcohol before the age of 13 years among learners in different grades. However, significantly more learners who were 13 years old and younger (16.5% [12.7 - 20.2]) than 17-year-olds (8.6% [6.8 - 10.5]), 18-year-olds (8.1% [4.8 - 11.3]) and learners aged 19 and older (6.4% [4.7 - 8.0]) had used alcohol before the age of 13 years.

There was no significant variation in the prevalence of learners using alcohol before age 13 by province. Limpopo Province (8.2% [5.4 - 10.9]) had the lowest provincial prevalence of having used alcohol before the age of 13 years, while the Western Cape (18.6% [12.1 - 25.1]) had the highest provincial prevalence.

Used alcohol in the past month - See Table 12

Nationally 31.8% [29.3 - 34.3] of learners had drunk alcohol on one or more days in the past month. Significantly more males (38.5% [35.5 - 41.5]) than females (26.4% [23.7 - 29.1]) had drunk alcohol in the past month, although this significant gender difference was only found within the "race" groups when comparing "Black" male learners (34.3% [31.3 - 37.3]) and "Black" female learners (15.8% [12.9 - 18.7]). Significantly more "White" (61.4% [54.2 - 68.6]) and "Coloured" learners (46.4% [38.6 - 54.3]) had used alcohol in the past month when compared to "Indian" (29.4% [21.7 - 37.0]) and "Black" (27.3% [25.0 - 29.6]) learners.

There was an increase in the prevalence of use of alcohol in the past month by learners from grade 8 to grade 11. Significantly more learners in grade 11 (39.9% [34.8 - 45.0]) than learners in grade 8 (25.9% [22.6 - 29.3]) had used alcohol in the past month. Learners in the 13 years and under age category (21.7% [18.7 - 24.7]) had significantly lower rates of alcohol use in the past month when compared to the 15-year-olds (30.1% [26.8 - 33.5]), 16-year-olds (33.7% [29.8 - 37.7]), 17-year-olds (33.8% [28.6 - 39.1]), 18-year-olds (36.3% [31.8 - 40.7]) and the learners aged 19 years and older (36.1% [31.6 - 40.6]).

Northern Cape (54.4% [42.3 - 66.5]) and Western Cape (44.3% [35.1 - 53.6]) had significantly higher percentages of alcohol use in the past month when compared to the national average of 31.8% [29.3 - 34.3]. KwaZulu-Natal (24.2% [18.1 - 30.2]) had the lowest provincial prevalence (see Graph 12).

Past month binge drinking - See Table 12

Nationally 23.0% [20.9 - 25.0] of learners had drunk five or more drinks of alcohol within a few hours on one or more days in the past month (binge drinking in the past month). Significantly more males (29.3% [26.7 - 31.9]) than females (17.9% [15.6 - 20.3]) had engaged in binge drinking in the past month, although this significant gender difference was only found within the "race" groups when comparing "Black" male (27.1% [24.1 - 30.0]) and "Black" female learners (15.7% [13.3 - 18.1]). Significantly more "White" (35.9% [29.7 - 42.1]) and "Coloured" learners (32.3% [25.8 - 38.8]) had engaged in binge drinking in the past month when compared to "Black" learners (20.7% [18.5 - 22.8]).

Significantly more grade 11 learners (29.0% [24.7 - 33.3]) than grade 8 learners (19.6% [16.7 - 22.5]) had engaged in binge drinking in the past month. Learners in the 13 years and under age category (16.1% [13.9 - 18.2]) had significantly lower rates of past month alcohol use when than the 15-year-olds (21.9% [18.9 - 24.9]), 16-year-olds (23.0% [19.9 - 26.1]), 17-year-olds (23.9% [20.1 - 27.6]), 18-year-olds (27.7% [22.2 - 33.3]) and those learners aged 19 and older (28.0% [24.4 - 31.5]).

Significantly more learners in the Western Cape (33.9% [27.7 - 40.2]) had engaged in binge drinking in the past month when compared to the national average of 23.0% [20.9 - 25.0]. Limpopo Province (17.5% [12.6 - 22.5]) had the lowest percentage of learners who had engaged in binge drinking in the past month (see Graph 13).

5.2.3. OVERVIEW

Nationally 1 in 2 learners (49.1%) had drunk at least one drink of alcohol in their lifetime. With regard to age of initiation, 12.0% of learners reported having had their first drink before the age of 13. In the 30 days preceding the survey, 31.8% used alcohol on one or more days, while 23.0% had had five or more drinks within the space of a few hours on one or more days.

Significantly higher percentages of "White" (86.0%) and "Coloured" learners (66.0%) had ever drunk alcohol compared to "Black" learners. Males had significantly higher rates than females in all of the measures of alcohol use. However, this gender difference was not found among "White" and "Coloured" learners.

Rates of ever using alcohol, alcohol use in the past month and binge drinking in the past month increased with age and grade. However, in some cases the oldest group or those in the highest grade had lower rates. More learners in younger age groups had their first drink of alcohol before the age of 13 years than learners in older age groups, suggesting that the initiation of alcohol use is occurring at younger ages.

Provincial alcohol consumption prevalences were wide-ranging, with Gauteng, Western Cape and Northern Cape reporting the highest rates. The Northern Cape was the only province where

more females than males had used alcohol in their lifetime and in the past month. Additionally, it was the only province where there was a significantly greater proportion of past month drinkers than of past month binge drinkers, which suggests that there was a large proportion of learners in this province who had drunk alcohol during the previous month but whose drinking did not constitute binge drinking. However, in all the other provinces the rates of past month use and past month binging were not significantly different from one another, raising a concern because past month alcohol binging was no less common than past month use.

5.3. Use of illegal and other drugs

This section focuses on:

- Ever having used cannabis (dagga)
- Age of initiation of using cannabis (dagga)
- Use of cannabis (dagga) in the past month
- Ever having used other specified drugs: inhalants, methaqualone (Mandrax), cocaine, heroin club drugs, over-the-counter and prescription drugs

5.3.1. INTRODUCTION

Cannabis (Dagga)

Cannabis is the most widely used illegal drug globally with an estimated 144 million annual users, and is described as the main problem drug in Africa.[72] In South Africa cannabis is sometimes smoked in combination with tobacco and Mandrax, and is called a "white pipe". The use of these drugs results in a variety of negative consequences ranging from dependence to property crime and interpersonal violence. While data from national surveys are limited, the South African Community Epidemiology Network on Drug Use has demonstrated that the proportion of patients with cannabis as their primary drug of abuse has fluctuated across treatment sites, ranging from 5-30% of the total demand for substance abuse treatment. A similar trend has been seen for Mandrax in certain parts of the country, for example the Western Cape. [73-74]

Inhalants

Inhalants, or volatile substances, commonly used among young people in South Africa include glue, paint thinners, benzine and petrol. Their use is often considered to be most common among children who live on the streets, but it is not confined to this group. A study among "Black" youth aged 10-21 years revealed that 7.4% had used inhalants in their lifetime.[75] However, until now there have been no national studies on the extent of their use among learners in schools.

Mandrax

The use of Mandrax, a drug consisting of methaqualone and antihistamine, is illegal in South Africa. This drug appears in the form of a tablet that is typically smoked in combination with dagga in a pipe known as a "white pipe". More than 80% of Mandrax use is confined to the Southern Africa region, and South Africa in particular.[73] However, until now there have been no national studies on the extent of their use among learners in schools.

Cocaine and heroin

The widespread availability and use of cocaine and heroin by South African youth has increased in the past decade. There is a dearth of studies concerning the use of these drugs by learners in schools in South Africa, but various indicators reveal steady increases in rates of use, particularly among young people, since the monitoring of drug use trends began in 1996.[76] Again, until now there have been no national studies on the extent of their use among learners in schools.

"Club drugs"

A range of drugs, including ecstasy, amphetamines ("speed") and lysergic acid ("LSD"), is associated with the rave culture, and little research is available on the extent of their use among learners in South Africa. There is evidence that "club drugs", like cocaine and heroin, have been increasing in availability and use in South Africa since studies on their use have been initiated.[76] Once again, until now there have been no national studies on the extent of their use among learners in schools.

Over-the-counter and prescription drugs

The main drugs in this category include benzodiazepines and analgesics. Some are easily available from pharmacies, while others can only be obtained through a prescription or illegally. There are indications that young people's access to these drugs has been increasing, but research has not extensively examined their use in South Africa.(76)

5.3.2. RESULTS

Cannabis (Dagga)

Ever used dagga - See Table 13

Nationally 12.8% [11.4 - 14.2] of learners reported ever using dagga in their lifetime. Significantly more males (20.2% [18.4 - 22.1]) than females (7.0% [5.6 - 8.4]) had ever used dagga. Significantly more "Coloured" (21.0% [15.8 - 26.2]) and "White" learners (19.5% [14.3 - 24.6]) than "Black" learners (11.2% [9.9 - 12.6]) had ever used dagga. "Coloured" males (27.9% [22.0 - 33.9]) and "Black" males (18.5% [16.6 - 20.5]) had significantly higher prevalences of lifetime dagga use than "Coloured" females (15.1% [9.6 - 20.5]) and "Black" females (5.6% [4.3 - 6.8]) respectively.

Lifetime dagga use increased with increase in grade. Significantly more grade 11 learners (18.9% [15.1 - 22.7]) than grade 9 learners (11.8% [9.9 - 13.7]) and grade 8 learners (10.1% [8.3 - 11.8]) had ever used dagga. Significantly fewer learners who were 13 years and younger (4.2% [2.9 - 5.6]) and 14 years old (7.6% [5.3 - 9.8]) had ever used dagga compared to 16-year-olds (16.4% [13.3 - 19.4]), 17-year-olds (16.1% [12.8 - 19.3]), 18-year-olds (16.7% [12.8 - 20.5]) and those 19 years and older (15.1% [11.8 - 18.4]).

Learners in the Western Cape (18.6% [11.8 - 25.4]) and Gauteng (17.8% [14.2 - 21.5]) had the highest provincial rates of dagga use in their lifetime, even though neither was significantly higher than the national rate of 12.8% [11.4 - 14.2]. Limpopo Province (9.2% [6.2 - 12.1]) had the lowest provincial prevalence of learners ever using dagga.

Age of initiation < 13 years - See Table 13

Nationally 4.2% [3.4 - 5.1] used dagga for the first time before 13 years of age, with no significant variation by gender at a national level. "White" male learners (4.7% [1.6 - 7.8]) had a significantly higher prevalence of using dagga before the age of 13 compared to "White" female learners (0.8% [0.0 - 1.6]). There was no significant variation in the prevalence of using dagga before the age of 13 years by grade.

The prevalence of using dagga before the age of 13 years varied for different ages. Eighteen-year-olds (9.3% [1.5 - 17.0]) had the highest prevalence, followed by those aged 13 and under (6.5% [4.7 - 8.2]). Those that were 13 years old and younger had a significantly higher prevalence of using dagga before age 13 than 14-year-olds (2.7% [1.7 - 3.8]), 15-year-olds (3.3% [2.4 - 4.3]), 16-year-olds (3.4% [2.3 - 4.6]) and 17-year-olds (2.6% [1.6 - 3.7]).

The prevalence of ever using dagga before age 13 in KwaZulu-Natal (6.1% [5.1 - 7.1]) was significantly higher when compared with the national prevalence of 4.2% [3.4 - 5.1], while the Northern Cape (2.0% [1.0 - 3.1]) had a significantly lower provincial prevalence than the national rate.

Used dagga in the past month - See Table 13

Nationally 9.1% [7.7 - 10.5] of learners had used dagga on one or more days in the past month. "Coloured" males (16.2% [12.0 - 20.5]) and "Black" males (13.4% [11.4 - 15.4]) had significantly higher prevalences of using dagga in the past month than "Coloured" females (8.3% [5.2 - 11.4]) and "Black" females (5.3% [3.4 - 7.1]) respectively. There was no significant variation in the prevalence of using dagga in the past month by "race" or by grade.

There was an increase in the prevalence of lifetime dagga use from the age category of 13 years and younger to the 18-year-old category. Thereafter, past month dagga use of school-going learners seems to plateau. Significantly fewer learners who were 14 years old (4.6% [2.8 - 6.3]) used dagga in the past month than 16-year-olds (9.3% [7.4 - 11.2]), 17-year-olds (11.6% [8.9 - 14.3]), 18-year-olds (13.2% [9.9 - 16.5]) and those aged 19 and older (10.8% [8.6 - 13.1]).

Gauteng (12.0% [9.6 - 14.4]) had the highest provincial prevalence, while Northern Cape had the lowest provincial prevalence (5.4% [1.9 - 9.0]).

Other drugs

Ever used inhalants - See Table 14

Nationally 11.1% [9.9 - 12.3] of learners had ever used inhalants such as glue, aerosols, paint thinners, petrol or benzene. Significantly more males (13.1% [11.2 - 14.9]) than females (9.5% [8.2 - 10.9]) had ever used inhalants. More, but not significantly more, "White" learners (17.6% [11.8 - 23.4]) had ever used inhalants than "Black" learners (10.6% [9.4 - 11.8]).

There was no significant variation in the prevalence of ever using inhalants by grade. Significantly fewer learners aged 13 younger (5.2% [3.4 - 7.0]) had ever used inhalants compared to 15-year-olds (11.2% [8.1 - 14.2]), 16-year-olds (13.0% [10.1 - 15.9]), 17-year-olds (11.2% [8.2 - 14.2]), 18-year-olds (16.7% [9.2 - 24.1]) and learners aged 19 and older (10.8% [7.8 - 13.8]).

KwaZulu-Natal (17.8% [14.8 - 20.7]) had the highest provincial prevalence of learners ever using inhalants, and it was significantly higher than the national average of 11.1% [9.9 - 12.3]. Significantly fewer learners in North West (5.9% [2.8 - 9.1]) and the Northern Cape (5.3% [0.8 - 9.7]) had ever used inhalants compared to the national prevalence.

Ever used Mandrax - See Table 14

Nationally 6.0% [4.8 - 7.2] of learners had ever used Mandrax. More, but not significantly more, males (7.6% [6.3 - 8.9]) than females (4.8% [3.2 - 6.3]) had ever used Mandrax. There was no significant variation in the prevalence of ever using Mandrax by grade, by age or by province.

Limpopo Province had the highest provincial rate of ever using Mandrax (8.2% [3.2 - 13.2]), while the Eastern Cape had the lowest provincial prevalence (3.6% [2.3 - 4.9]).

Lifetime cocaine use - See Table 14

The national prevalence of ever using cocaine was 6.4% [5.1 - 7.6], with no significant variation in this prevalence by gender. "White" learners (2.4% [1.2 - 3.7]) reported a significantly lower prevalence of ever using cocaine compared to "Black" (6.6% [5.1 - 8.1]) and "Coloured" learners (6.3% [4.0 - 8.5]).

There was a decrease in the prevalence of ever using cocaine with an increase in grade. Significantly more grade 8 learners (8.9% [6.1 - 11.7]) reported ever using cocaine than grade 11 learners (3.5% [1.2 - 5.7]). The prevalence of ever using cocaine varied with age, with the only significant difference arising with the comparison of 15-year-olds (5.1% [3.8 - 6.3]) with those 13 years and younger (8.0% [6.5 - 9.6]).

Limpopo (10.7% [5.1 - 16.3]) reported the highest provincial prevalence of learners ever using cocaine, while Gauteng (3.2% [2.5 - 3.9]) reported a significantly lower prevalence of learners ever using cocaine than the national average of 6.4% [5.1 - 7.6].

Ever used heroin - See Table 14

The national prevalence of learners reporting having ever used heroin was 11.5% [9.8 - 13.2], with no significant variation in this prevalence by gender. "White" learners (2.9% [1.4 - 4.4]) reported a significantly lower prevalence of ever using heroin compared to "Coloured" learners (6.9% [4.5 - 9.3]), who in turn reported a significantly lower prevalence of ever using heroin than "Black" learners (12.8% [10.9 - 14.6]).

There was a decrease in the prevalence of ever using cocaine with an increase in grade. Significantly more grade 8 learners (14.7% [11.9 - 17.5]) reported ever using cocaine compared to grade 11 learners (5.7% [3.1 - 8.2]). There was no significant variation in the prevalence of ever using heroin by age.

KwaZulu-Natal (15.2% [11.2 - 19.2]) reported the highest provincial prevalence of learners ever using heroin, while the Northern Cape (5.6% [2.6 - 8.7]), Western Cape (5.8% [3.6 - 8.0]) and Gauteng (7.6% [5.7 - 9.5]) learners reported prevalences significantly lower than the national average of 11.5% [9.8 - 13.2].

Ever used "club drugs" - See Table 14

The national average for ever using "club drugs" was 5.8% [4.8 - 6.8]. Significantly more males (7.6% [6.5 - 8.8]) than females (4.4% [3.1 - 5.6]) ever used these drugs, although this significant gender difference was only found within the "race" groups when comparing "Black" male (6.9% [5.7 - 8.1]) and "Black" female learners (4.2% [2.8 - 5.6]).

There was a decrease in the prevalence of ever using "club drugs" with an increase in grade, although this tendency was not significant. There was an increase in the prevalence of the use of these drugs with an increase in age. Eighteen-year-olds (8.4% [5.6 - 11.1]) and learners aged 19 and older (6.9% [4.6 - 9.1]) reported a significantly higher rate of ever using "club drugs" than those aged 13 and younger (2.3% [1.5 - 3.2]). There was no significant difference in the prevalence of ever using "club drugs" by province.

Ever used over-the-counter or prescription drugs - See Table 14

Nationally the prevalence of ever using over-the-counter or prescription drugs "to get high" was 15.5% [13.8 - 17.2]. There was no significant variation in this prevalence by gender. The prevalence of ever using over-the-counter or prescription drugs among "Black" learners (16.3% [14.5 - 18.1]) was significantly higher than that among "Coloured" (8.8% [6.1 - 11.6]) and "White" learners (8.6% [5.2 - 11.9]). There was no significant variation in the prevalence of ever using over-the-counter or prescription drugs by grade or by age.

Learners in KwaZulu-Natal (24.8% [20.2 - 29.4]) had a significantly higher prevalence of ever using over-the-counter or prescription drugs than the national average of 15.5% [13.8 - 17.2]. The prevalences of ever using over-the-counter or prescription drugs in the Eastern Cape (11.2% [8.7 - 13.6]), Western Cape (9.5% [7.0 - 12.0]), Northern Cape (6.4% [4.0 - 8.7]) and Gauteng (9.0% [7.4 - 10.5]) were significantly lower than the national average.

5.3.2. OVERVIEW

Cannabis (Dagga)

The percentage of learners who reported ever having used dagga was 12.8%, while 9.1% of learners had used dagga in the month preceding the survey. With respect to age of initiation, 4.2% of learners had used dagga for the first time at the age of 13 or younger. Dagga use varied according to "race" and gender. "White" and "Coloured" learners showed significantly higher prevalences than "Black" learners with respect to all measures of dagga use. Males showed a higher prevalence than females for ever having used and current use of dagga. As with alcohol use, rates of lifetime dagga use and past month dagga use increased with age and grade, except for the in the highest grade and age groups. The Western Cape and Gauteng reported the highest rates of ever using and using it in the month prior to the survey.

Illegal and other drugs

The percentage of learners who reported ever having used inhalants was 11.1%, Mandrax 6.0%, cocaine 6.4%, heroin 11.5%, club drugs 5.8%, and over-the-counter or prescription drugs" 15.5%. This suggests that the proportion of illicit drug use is not negligible, and places young people at risk of negative health and legal consequences that may impact on their education.

5.4. Substance abuse on school property

5.4.1. INTRODUCTION

This section focuses on:

- Use of alcohol on school property over the past month
- Use of cannabis (dagga) on school property over the past month
- Whether learners had been offered, sold or given illegal drugs on school property over the past 6 months

The Department of Education has implemented a policy that bans the possession, use and distribution of illegal drugs as well as alcohol and tobacco on school property.[12]

5.4.2. RESULTS

Used alcohol on school property - See Table 15

The national average of learners who had used alcohol (e.g. a beer, a glass of wine or a "tot" of

brandy) on school property in school time during the month preceding the survey was 9.1% [7.6 - 10.6]. Significantly more males (12.5% [10.6 - 14.4]) than females (6.4% [4.7 - 8.0]) had used alcohol on school property in school time during the past month.

Significantly fewer "White" learners (5.2% [3.0 - 7.3]) had used alcohol on school property in school time during the past month when compared to "Black" learners (9.5% [7.9 - 11.0]). Significantly more "Black" (12.8% [10.9 - 14.7]) and "Coloured" males (11.9% [8.4 - 15.3]) had used alcohol on school property in school time during the past month when compared to "Black" (6.8% [4.9 - 8.8]) and "Coloured" females (5.8% [3.5 - 8.1]).

There was no significant variation by grade or by age.

Significantly fewer learners who were 14 years old (6.0% [4.0 - 7.9]) had used alcohol on school property in school time during the past month when compared to 18 year olds (13.4% [9.6 - 17.1]) and 19 years and older learners (12.4% [9.5 - 15.3]).

Mpumalanga learners (12.1% [9.0 - 15.2]) reported the highest provincial prevalence of having used alcohol on school property in school time during the past month and learners in the Northern Cape (6.9% [3.8 - 10.1]), the lowest.

Used cannabis (dagga) on school property - See Table 15

Nationally 6.1% [5.1 - 7.2] of learners had used cannabis on school property in school time during the month preceding the survey, with male learners (9.1% [7.4 - 10.7]) reporting a significantly higher prevalence than female learners (3.8% [2.6 - 5.0]).

There was no significant variation by "race" or by grade.

Significantly more learners aged 18 years (15.2% [7.1 - 23.3]) than learners aged 13 years or under (2.5% [1.0 - 4.0]), 14 years (4.0% [1.6 - 6.4]) and 15 years (3.5% [2.2 - 4.8]) had used cannabis on school property in school time during the past month.

KwaZulu-Natal learners (9.1% [6.2 - 12.0]) had the highest, and Northern Cape learners (2.7% [0.5 - 4.9]) the lowest provincial prevalence of having used cannabis on school property in school time during the past month.

Was offered, sold or given an illegal drug on school property - See Table 15

The national prevalence of learners who had been offered, sold or given an illegal drug on school property during the six months preceding the survey was 17.2% [15.4 - 18.9]. Significantly more males (20.2% [18.5 - 21.9]) than females (14.8% [12.5 - 17.0]) had been offered, sold or given an illegal drug on school property.

There was no significant variation by "race", grade or age.

Northern Cape learners (26.8% [0.0 - 53.6]) had the highest provincial prevalence of having been sold or given an illegal drug on school property during the past six months, and KwaZulu-Natal learners (14.5% [9.4 - 19.6]), the lowest.

5.4.3. OVERVIEW

In the month preceding the survey, 9.1% of learners reported having used alcohol on school grounds and 6.1% reported having used dagga. During the six months before the survey, 17.2% of learners had been offered, sold or given an illegal drug while at school. As in the case of alcohol and dagga usage in general, more males than females used alcohol and dagga on school property. Even though "White" learners reported significantly higher rates of alcohol use in general, significantly fewer "White" learners used alcohol on school property than "Black" learners. While there are "race" differences in alcohol and dagga usage on school property, these differences do not manifest in learners being offered, sold or given an illegal drug on school property.

CHAPTER 6

Sexual Behaviour

This chapter presents results on behaviours related to sexuality, namely sexual practices, partner pattern, contraceptive use, pregnancy experience, abortion, and sexually transmitted infections.

6.1. Introduction

The chapter focuses on the following specific aspects of sexual behaviour:

- Whether learners have ever had sex
- Age of first sexual encounter
- Number of sexual partners
- Sexual activity in the past month
- Use of alcohol and drugs before sex
- Choice of contraception method
- Consistent condom use (always using a condom)
- Pregnancy experience
- Abortion experience
- Where abortions took place
- Sexually transmitted infections experience
- Knowledge about protection against HIV

Heightened sexual awareness is part of adolescent development. While this is a normal process, it is often characterised by experimentation, which has the potential of placing adolescents at risk of unprotected sexual activity, unplanned pregnancy, and sexually transmitted infections including HIV.

Literature on studies of sexual behaviour of African students reflects that for a sample of 14- and 15-year-olds, between 10% and 24% of girls and 18% and 63% of boys have had sexual intercourse. There is at least a one-year difference in initiation age by gender, with boys reporting an earlier age of first having had sex than girls.[77] Large-scale South African studies on young people aged 13-19 years are limited and where data do exist the samples appear to have grossly unequal representations of males and females.[31] [51]

The South African Demographic and Health Survey of 1998 presented findings about female sexual behaviour. It reported that among women aged 15-19 years, 8.5% have had sex by the age of 15, and of those who have ever had sex, 21.2% report using a condom when they last had sex with an unmarried partner. On the other hand, among currently sexually active women aged 15-19 years, 51% use injectables as contraception, 33.6% use no method, and 4% report using a condom. Similar figures for males were not presented in the report.[31] In a more recent study of 15-24-year-olds, 57.1% of men and 46.1% of women reported using a condom at last sexual intercourse.[78] In addition, a study has shown that gender was found to be a predictor of condom use, with more males than females reporting having used condoms. Past sexual behaviour was found to be a predictor of intention to have sex; i.e. once learners have had sex they are much more likely to have sex again.[79]

Recent data on South African women attending antenatal clinics indicate that women in their 20s represent the group with the highest number of individuals with HIV infection.[80] A substantial number of young people are engaging in unprotected sex. Furthermore, by the age of 19 years at least 1 in 3 of all teenagers have been pregnant or had a child. Also, 11% of termination of pregnancies

was by women under 18 years old.[81] From the above it is clear that a substantial number of young people, as a result of the sexual choices they make or situations they find themselves in, are at risk in terms of their sexual health and subsequently their physical and mental health.

With regard to sexuality education within the school, there have been several attempts to include it in school curricula, and various reasons have been cited for the discrepancy in implementation in different schools.[82]

6.2. Results

Ever had sex - See Table 16

The national prevalence for learners who reported ever having had sex (where the penis enters the vagina or anus) was 41.1% [38.6 - 43.7], with significantly more male learners (50.1% [47.0 - 53.2]) than female learners (34.1% [31.1 - 37.1]) reporting ever having had sex.

Significantly fewer "White" learners (25.9% [20.2 - 31.5]) reported ever having had sex compared to "Black" learners (43.6% [41.2 - 46.0]). Significantly more "Black" (53.9% [50.6 - 57.1]) and "Coloured" male learners (41.2% [34.4 - 48.0]) than "Black" (35.6% [32.7 - 38.5]) and "Coloured" female learners (30.9% [18.5 - 43.4]) respectively, reported ever having had sex.

When comparing ever having had sex by grade, there was an increase in the prevalence from grade 8 to grade 11, with significantly more learners reporting having had sex in grade 11 (54.2% [48.4 - 60.1]) than in grade 8 (32.6% [29.5 - 35.7]) and grade 9 (40.9% [37.8 - 43.9]). In each of the grades significantly more males reported ever having had sex than females.

Significantly more learners aged 17 years (49.8% [43.3 - 56.3]), 18 years (59.8% [53.7 - 66.0]) and 19 years or older (60.2% [54.7 - 65.7]) reported ever having had sex than learners aged 13 years or under (21.8% [18.7 - 24.9]), 14 years (26.2% [22.6 - 29.9]) and 15 years (33.6% [30.0 - 37.1]). In all of the age groups aged 17 years and under there was a significant difference between the genders, with more males than females reporting ever having had sex.

North West Province (35.2% [30.0 - 40.4]) had the lowest provincial prevalence of learners who reported ever having had sex, while Gauteng (47.0% [42.0 - 52.0]) and the Free State (47.0% [43.6 - 50.5]) had the highest provincial prevalences.

Age of initiation < 14 years - See Table 16

Nationally the prevalence of learners who reported having first had sex before the age of 14 years was 14.4% [13.1 - 15.7]. Significantly more males (25.4% [23.1 - 27.7]) than females (5.6% [4.6 - 6.6]) reported having had their first sexual experience at less than 14 years of age.

Significantly fewer "White" (6.4% [3.8 - 9.0]) than "Black" (15.6% [14.1 - 17.1]) and "Coloured" (12.0% [9.6 - 14.4]) learners reported first having sex before the age of 14 years. The gender difference was significant for all "race" groups except "White" learners. Grade 8 (14.5% [12.2 - 16.7]) learners were just as likely to have had their first sexual encounter before the age of 14 years as their fellow learners in grade 9 (14.9% [13.6 - 16.3]), grade 10 (13.1% [9.3 - 16.9]) and grade 11(15.6% [13.1 - 18.2]) (see Graph 14). There was no significant variation by age.

Sexual initiation at less than 14 years of age varied in the provinces, from lowest in North West Province (9.9% [6.5 - 13.3]) to highest in Gauteng (19.1% [15.3 - 22.9]).

Had two or more sexual partners in lifetime - See Table 16

Of the learners who reported ever having had sex in their lifetime, 54.0% [51.3 - 56.7] reported having had two or more sexual partners. Significantly more male (66.4% [63.5 - 69.3]) than female (38.1% [34.4 - 41.8]) learners reported having had two or more sexual partners in their lifetime. There was no significant difference between the different "race" groups in the prevalence of having had two or more partners among learners who had ever had sex.

The percentage reporting two or more sexual partners in their lifetime increased with grade. Significantly more grade 11 learners (61.6% [56.6 - 66.5]) reported having had two or more sexual partners when compared to grade 8 learners (52.4% [47.5 - 57.4]). There was no significant variation by age.

Learners in the Western Cape (48.1% [31.4 - 64.9]) had the lowest prevalence of having had two or more sexual partners in their lifetime, and learners in Gauteng had the highest (61.3% [55.8 - 66.9]).

Had one or more sexual partners in the past 3 months - See Table 16

Among those who have ever had sex, the national prevalence for having had one or more sexual partners in the past 3 months was 70.2% [67.7 - 72.8]. There was no significant variation by gender, "race" group or grade. However, learners aged 19 years or older (76.3% [72.5 - 80.1]) had a significantly higher prevalence than learners aged 13 years old or younger (46.8% [30.5 - 63.2]).

The provincial prevalence of having had one or more sexual partners in the past 3 months among learners who have ever had sex was lowest in the Free State (62.0% [57.1 - 66.9]) and highest in KwaZulu-Natal (77.8% [72.4 - 83.1]).

Used alcohol or drugs before sex - See Table 16

Among those learners who had ever had sex, the national prevalence of learners who reported having used alcohol or drugs before sex was 13.8% [12.0 - 15.6]. Significantly more male (17.9% [15.8 - 20.1]) than female learners (8.7% [6.6 - 10.8]) reported using alcohol or drugs before sex.

Significantly fewer "Black" (12.1% [10.3 - 13.9]) than "White" (25.7% [15.0 - 36.4]) and "Coloured" learners (23.6% [16.8 - 30.3]) who had ever had sex reported having used alcohol or drugs before sex. Significantly more "Black" male learners (17.0% [14.5 - 19.4]) than "Black" female learners (6.2% [4.6 - 7.9]), who had ever had sex reported having used alcohol and drugs before sex. There was no significant variation by grade or by age.

KwaZulu-Natal learners (15.2% [10.5 - 20.0]) who have had sex reported the highest prevalence of having used alcohol or drugs before sex, and those in Limpopo (10.7% [4.4 - 17.1]) reported the lowest.

Methods of contraception mostly used - See Table 17

Learners were asked to report a method that they or their partner mostly used to prevent pregnancy. The options were "no method", birth control pills, condoms, injection e.g. depo-provera, withdrawal (removal of the penis from the vagina before ejaculation), morning-after pill and some "other methods".

Of those who had sex, significantly more learners mostly used condoms 44.8% [41.5 - 48.2] as a method of contraception as compared to any of the other methods. There was no significant variation by gender, "race", grade or age.

The use of condoms as a contraceptive method was significantly higher in Gauteng (58.6% [54.5 - 62.8]), Free State (54.0% [48.7 - 59.3]) and the North West Province (55.0% [49.7 - 60.4]) compared to the national prevalence (44.8% [41.5 - 48.2]). The Eastern Cape (30.6% [24.2 - 36.9]) followed by KwaZulu-Natal (32.3% [24.1 - 40.4]) had the lowest provincial prevalence of learners who used condoms as a method of contraception.

"No method was used to prevent pregnancy" (28.1% [25.1 - 31.2]) was the second most common answer when learners who have had sex were asked which method of contraception they mostly used. There was no significant variation by gender. Significantly fewer "White" (11.0% [6.2 - 15.8]) and "Indian" learners (8.6% [-0.3 - 17.5]) who have had sex preferred no method of contraception than "Black" (29.6% [26.2 - 33.0]) and "Coloured" learners (25.3% [18.7 - 31.9]).

The choice of no method of contraception was significantly higher among learners who have had sex in grade 8 (34.5% [28.7 - 40.3]) compared to those in grade 11 (22.5% [17.2 - 27.8]) (see Graph 15). The percentage of learners who used no method of contraception also decreased with an increase in age from 14 to 18 years. Significantly more 14-year-old learners (44.6% [37.9 - 51.2]) did not use any method of contraception when compared to 15-year-old (26.2% [20.6 - 31.8]), 16-year-old (25.6% [21.6 - 29.6]), 17-year-old (23.4% [19.6 - 27.2]), 18-year-old (33.4% [20.9 - 45.9]) and the 19 years and older (25.1% [19.5 - 30.7]) learners.

Significantly more learners in KwaZulu-Natal (47.1% [37.6 - 56.6]) did not use any method of contraception compared to the national prevalence, and the Northern Cape (20.9% [14.3 - 27.5]) had the lowest provincial prevalence.

Similar percentages of learners in the 14-year age group used condoms (39.6% [31.2 - 48.0]) as used no method of contraception.

The prevalences of other methods of contraception mostly used among learners who have had sex were as follows: injection 10.6% [7.8 - 13.3], birth control pills 7.3% [6.1 - 8.6], withdrawal

method 4.8% [3.7 - 6.0], some other methods 2.9% [2.2 - 3.6], and the morning-after pill 1.4% [0.9 - 1.9]. A significantly lower proportion of males (5.2% [3.5 - 6.8]) reported that their partners mostly used the injection as a method of contraception females (17.2% [13.0 - 21.4]) who reported that they mostly used the injection to prevent pregnancy. There was no significant variation by grade.

Eastern Cape learners (24.8% [12.5 - 37.2]) who have had sex had the highest provincial prevalence of mostly using the injection as a method of contraception, and those in KwaZulu-Natal (3.2% [0.9 - 5.6]) had the lowest.

Significantly more "White" (11.9% [6.7 - 17.1]) and "Coloured" (11.9% [7.3 - 16.4]) learners who have had sex mostly used withdrawal as a method of contraception than "Black" learners (3.7% [2.4 - 4.9]). There was no significant variation by gender, grade or age.

Always use a condom during sex - See Table 18

Among those who ever had sex, learners who responded that they "always use a condom" when they have sex were taken to be consistent condom users. The national prevalence for consistent condom use was 28.8% [26.0 - 31.5]. There was no significant variation by gender.

Significantly more "White" (49.8% [41.7 - 57.9]) and "Coloured" learners (39.5% [33.6 - 45.3]) than "Black" learners (26.9% [24.1 - 29.7]) reported using condoms consistently. Consistent condom use increased with grade. Significantly more grade 11 (32.6% [26.2 - 38.9]) than grade 8 (24.3% [20.4 - 28.3]) learners reported using condoms consistently (see Graph 16). Significantly more 15-year-old learners (37.0% [30.0 - 44.0]) who have had sex consistently use condoms than 14-year-old (22.8% [16.2 - 29.4]) and 18-year-old learners (23.2% [17.5 - 28.9]) who have had sex.

North West Province learners (38.8% [30.0 - 47.6]) who have had sex had the highest consistent condom use. Consistent condom use was significantly lower than the national average for learners in KwaZulu-Natal (14.5% [10.4 - 18.6]) who have had sex.

Have been pregnant or made someone pregnant - See Table 18

Learners were asked whether they had been a partner in a pregnancy, that is whether they had either made someone pregnant (male) or been pregnant (female). Nationally 16.4% [13.9 - 18.8] of learners who have had sex have either been pregnant or made someone pregnant. Among those who have had sex, there was no significant difference between the proportion of male learners that have made someone pregnant and the proportion of female learners that have been pregnant.

A significantly smaller percentage of "White" learners (8.5% [3.5 - 13.5]) reported having made someone pregnant or having been pregnant than "Black" learners (17.0% [14.1 - 19.8]). Significantly more grade 8 learners (26.4% [20.1 - 32.7]) who have had sex reported having made someone pregnant or having been pregnant compared to grade 9 (13.3% [10.7 - 15.9]), grade 10 (12.6% [9.9 - 15.4]) and grade 11 (13.3% [10.4 - 16.1]) learners. The prevalence of having made someone pregnant or been pregnant, among learners aged 13 years or under (38.0% [28.9 - 47.2]) who have had sex was significantly higher than for learners of all older ages who have had sex.

Significantly fewer learners in Gauteng (10.6% [8.8 - 12.4]) who have had sex have made someone pregnant or been pregnant compared to the national prevalence. The provincial prevalence for learners who have had sex reporting having made someone pregnant or having been pregnant was highest in Mpumalanga (21.5% [13.6 - 29.5]) (see Graph 17).

Had an abortion or partner had an abortion - See Table 19

Learners were asked if they or their partner had had an abortion and about the place where the abortion took place. The national prevalence of learners who had had an abortion was 8.1% [5.7 - 10.6], with more males (8.2% [6.2 - 10.2]) reporting that their partners had had an abortion than females (8.1% [4.0 - 12.2]) reporting that they had had an abortion. Among those who have had sex, significantly fewer "White" learners (3.2% [1.1 - 5.2]) reported an abortion than "Black" (8.5% [5.6 - 11.3]) learners.

Reported abortions were significantly higher for grade 8 learners (17.9% [10.6 - 25.3]) who have had sex than for grade 9 (7.4% [5.3 - 9.5]), grade 10 (3.1% [1.6 - 4.7]) and grade 11 (5.1% [1.3 - 8.8]) learners who have had sex. Among those learners who have had sex, the prevalence of abortion for learners aged 13 years or under (29.7% [21.7 - 37.7]) was significantly higher than for learners aged 19 years or over (9.2% [4.6 - 13.8]).

Abortion prevalence among those that have ever had sex for the Northern Cape (3.1% [1.0 - 5.3]) was significantly lower than for the nation as a whole; Gauteng (4.2% [2.6 - 5.9]) and the Western Cape (4.3% [2.2 - 6.4]) also had comparatively low rates of abortion among learners that had ever had sex.

Where the abortion took place - See Table 19

Among learners who reported an abortion, 62.5% [52.7 - 72.2] reported that the abortion took place at a hospital/clinic and 16.3% [8.8 - 23.8] reported using a traditional doctor/healer, with no significant variation between male and female learners or between learners of different "race" groups.

Significantly more grade 8 learners (74.5% [64.9 - 84.1]) who had had abortions used a hospital/clinic than grade 10 learners (32.3% [3.2 - 61.5]). Among learners who have had abortions, significantly more aged 13 years or under (88.0% [81.6 - 94.3]) and 14 years (80.5% [72.1 - 89.0]) used a hospital/clinic than learners aged 18 years (49.9% [29.8 - 70.0]) and 19 years or under (43.0% [23.4 - 62.6]).

Limpopo Province learners (80.5% [66.0 - 95.1]) who have had abortions reported the highest provincial prevalence of using a hospital/clinic, and KwaZulu-Natal learners (51.5% [30.7 - 72.2]) who have had abortions had the highest provincial prevalence of using a traditional doctor/healer.

Sexually transmitted infections - See Table 20

Received treatment for a sexually transmitted infection - See Table 20

The national prevalence of ever having had a sexually transmitted infection (STI) was 7.4% [6.0 - 8.7]. Of those who have had an STI, 63.6% [54.4 - 72.8] reported receiving treatment for an STI. There were no significant differences between male and female learners.

Significantly fewer "White" (1.2% [-0.8 - 3.3]) and "Coloured" learners (3.2% [1.0 - 5.5]) who have had sex reported having had an STI compared to "Black" learners (7.7% [6.3 - 9.1]) who have had sex. There was no significant variation by grade, but learners aged 19 years or over that have had sex reported a significantly higher rate of having had an STI than all learners aged 17 years and under.

The reported prevalence of having had an STI among KwaZulu-Natal learners (14.6% [11.0 - 18.2]) who have had sex was significantly higher than the national prevalence, while Gauteng learners (3.4% [2.7 - 4.1]) who have had sex reported the lowest prevalence.

Think they could get HIV in lifetime - See Table 21

The national prevalence of learners who responded that they thought they could "get the HIV infection" in their lifetime was 12.2% [10.4 - 13.9], with no significant difference between male and female learners. Significantly more "Black" (12.9% [11.0 - 14.8]) than "White" learners (6.9% [3.2 - 10.5]) reported that they thought they could get HIV infection in their lifetime.

Significantly more grade 8 (14.5% [11.8 - 17.3]) than grade 10 learners (9.3% [6.9 - 11.7]) reported that they thought they could get HIV infection in their lifetime. Significantly more learners aged 19 or over (17.7% [14.3 - 21.2]) than 17-year-olds (10.5% [7.9 - 13.1]), 15-year-olds (9.1% [7.2 - 10.9]) and 14-year-olds (10.9% [8.2 - 13.6]) reported that they thought they could get HIV infection in their lifetime.

Mpumalanga learners (16.7% [12.3 - 21.1]) had the highest and Northern Cape learners (6.6% [1.9 - 11.3]) the lowest prevalence of reporting that they thought they could get HIV infection in their lifetime.

Able to protect themselves from getting HIV - See Table 21

Nationally learners' response to whether they thought they were able to protect themselves against HIV infection was 65.9% [63.4 - 68.3], with no significant difference between male and female learners. For "White" learners (78.3% [75.3 - 81.2]) this finding was significantly higher than for "Black" learners (64.8% [61.7 - 67.8]).

Significantly more grade 11 (73.0% [68.4 - 77.5]) than grade 8 (60.0% [56.2 - 63.9]) and grade 9 learners (64.8% [61.6 - 67.9]) reported that they thought they were able to protect themselves against HIV infection. There was no significant variation by age.

Prevalences of thinking they were able to protect themselves against HIV infection among learners in Gauteng (76.3% [72.6 - 80.1]) and the Northern Cape (76.1% [68.6 - 83.6]) were significantly higher than the national average, while learners in the Eastern Cape (60.2% [54.9 - 65.5]) and KwaZulu-Natal (60.8% [54.9 - 66.7]) had the lowest provincial prevalences.

Ever received HIV/AIDS education in school - See Table 21

The national prevalence for learners indicating that they were taught about HIV and/or AIDS in school was 72.3% [69.4 - 75.2], with no significant difference between male and female learners. Significantly more "White" (85.0% [81.2 - 88.8]) and "Coloured" learners (84.5% [81.2 - 87.7]) than "Black" learners (70.1% [67.0 - 73.2]) reported being taught about HIV and/or AIDS at school. There was no significant variation by grade or by age.

Northern Cape learners (86.7% [80.9 - 92.4]) reported a significantly higher prevalence of having been taught about HIV and/or AIDS than the national prevalence, while Limpopo learners (60.7% [51.8 - 69.6]) reported the lowest provincial prevalence.

6.3. Overview

Nationally 41.1% of learners in grades 8 to 11 reported having had sex; 14.4% of learners had their first sexual encounter at age 13 or younger. Among learners that have had sexual intercourse, 54.0% had more than one sexual partner in their lifetime, 70.2% had sexual intercourse in the month preceding the survey, 13.8% used alcohol or drugs before sexual intercourse, and 28.1% used no method of contraception most of the time. While 44.8% of learners who have had sex usually used condoms, 28.8% reported always using condoms, 16.4% had been pregnant or had made someone pregnant, and 8.1% had been involved in an abortion; 62.5% of learners who had been involved in an abortion had used a hospital or clinic, while 16.3% used traditional healers. Of learners who had sex, 7.4% had experienced a sexually transmitted infection, and 63.6% of learners who had had an infection had received treatment for their infection. These findings show that substantial numbers of school-going learners are engaging in unprotected sexual activity.

Among all grade 8-11 learners, 12.2% felt that they could get HIV in their lifetime; 65.9% felt they were able to protect themselves against contracting HIV, and 72.3% had received some form of HIV education at school.

Significantly more male than female learners reported ever having had sex, having first had sex before age 14, and having had two or more partners in their lifetime.

When compared to the other "race" groups "White" learners had lower rates of ever having had sex, and a lower proportion who have had sex before the age of 14. Those of them that have had sex had higher rates of using alcohol or drugs before sex and of always using a condom, and lower rates of having been pregnant or having made a partner pregnant. However, as a proportion of only those learners who have had sex, there are no significant "race" differences in having had more than one partner in their lifetime, and having had sex in the past three months.

Learners in lower grades who engaged in sexual activity appeared to be inadequately prepared for the responsibility that goes with it. This is evidenced in the statistically different findings of grade 8 learners compared to other grades with regard to questions on condom use, pregnancy, abortion and contraception. Sexually active grade 8 learners reported lower rates of consistent condom use, and higher rates of pregnancies, abortions and unprotected sex than the sexually active learners in the higher grades. Grade 8 learners also reported feeling less able to protect themselves against HIV, and felt it was more likely that they might get HIV in their lifetime than learners in higher grades. This finding is important when considering that perception of vulnerability is fundamental to understanding precautionary behaviour.

It has been observed that for males the prevalences of ever having sex, initiating sex before the age of 14, having two or more sexual partners, and using alcohol or drugs before sexual intercourse were significantly higher than for females.

CHAPTER 7

Nutrition, Dietary Behaviours and Physical Activity

Both being underweight and overweight feature in the top ten risks in terms of the global burden of disease. Changes in consumption and production of food, alcohol, tobacco and other substances have pervaded societies around the world as a result of globalisation. Dietary changes are also accompanied by changes in working and living patterns, resulting in greater levels of physical inactivity. Together these factors have resulted in a "risk transition" where there is an increase in non-communicable diseases such as cancer, diabetes, cardiovascular disease and obesity.[13]

7.1. Nutrition and dietary behaviours

7.1.1. INTRODUCTION

The nutritional status of learners in terms of both under- and overnutrition was objectively measured. This anthropometric survey was complemented by the collection of self-reported data on perception of body weight and food consumption behaviours.

Anthropometric measures obtained were:

- Undernutrition
  - Underweight (low weight for age)
  - Stunting (low height for age)
  - Wasting (low weight for height)
- Overnutrition
  - Overweight
  - Obesity

Self-reported measures obtained were:

- Perceptions of being underweight and overweight
- Consumption of various food types on 4 days or more during the past week:
  - Fresh fruit and vegetables
  - Dairy products
  - Maize products
  - Meat
  - Fast food, cakes, biscuits, sweets and sweetened non-alcoholic beverages

Undernutrition, characterised by poor anthropometric status, is often a consequence of inadequate diet and frequent infection, and leads to calorie, protein, vitamin and mineral deficiency.[13] In particular, stunting is a consequence of chronic poor nutrition, while wasting is a reflection of an acute poor nutritional condition. Calculation of the prevalence of undernutrition was based on the National Centre for Health Statistics recommendations using a Z-score threshold

of –2 in respect of weight for age (WAZ) height for age (HAZ) and weight for height (WHZ).

Overweight and obesity measures used in this study were those derived from the body mass index (BMI) projections developed by Cole et al. for children aged 2-18 years, based on the adult overweight and obesity cut-offs of 25 kg/m2 and 30 kg/m2 respectively.[33]

It has been estimated that worldwide approximately 27% of children under the age of 5 years are underweight.[11] The global prevalence of being overweight is estimated at 5-18%, and of obesity at 0.1-4.0%.[33] The prevalence of stunting in SA has been declining from 48.8% in 1980 to 39.9% in 1995.[32]

Among South Africans aged 15-24 years, 21.3% of men and 9.5% of women are underweight, while 8.4% of men and 20.0% of women are overweight.[31]

7.1.2. RESULTS
NUTRITION

Underweight – weight for age - See Table 22

The national average for being underweight, as indicated by weight for age, was 9.0% [7.8 - 10.2]. Significantly more males (15.6% [13.6 - 17.6]) than females (3.9% [3.1 - 4.7]) were underweight. Significantly more "Black" (9.5% [8.1 - 10.9]) and "Coloured" (10.6% [8.3 - 12.8]) learners were underweight compared with "White" (1.9% [0.8 - 3.0]) and "Indian" (4.8% [2.0 - 7.7]) learners. Significantly more "Black" (17.0% [14.6 - 19.3]) and "Coloured" males (15.5% [12.3 - 18.8]) were undernourished when compared to "Black" (3.9% [3.1 - 4.8]) and "Coloured" females (6.2% [3.8 - 8.5]). Although there was no significant variation by age, significantly fewer grade 11 (7.5% [5.7 - 9.3]) and grade 10 learners (5.4% [3.7 - 7.1]) were undernourished compared to grade 8 learners (11.3% [9.5 - 13.1]).

The lowest provincial prevalence of being underweight was found in the Western Cape (6.0% [4.0 - 8.0]), and the highest prevalences were found in the Northern Cape (14.3% [9.9 - 18.7]) and North West Province (14.2% [10.0 - 18.5]) (see Graph 18).

Stunting – height for age - See Table 22

Nationally 11.4% [10.1 - 12.7] of learners were stunted as indicated by height for age. Significantly more males (15.6% [13.9 - 17.4]) than females (8.1% [6.6 - 9.7]) were stunted. Significantly more "Coloured" (13.8% [11.3 - 16.3]) and "Black" learners (11.8% [10.3 - 13.3]) were stunted compared to "White" learners (3.9% [2.2 - 5.7]). Significantly more "Black" males (16.4% [14.5 - 18.2]) than "Black" females (8.4% [6.7 - 10.1]) were stunted. While there was no significant variation by age, significantly fewer grade 11 (8.1% [5.8 - 10.4]) than grade 8 (15.1% [13.1 - 17.0]) and grade 9 learners (13.1% [11.5 - 14.7]) were stunted.

Mpumalanga (9.3% [6.0 - 12.6]) and the Western Cape (9.5% [7.3 - 11.7]) had the lowest provincial prevalence of stunting, while Northern Cape (15.6% [11.1 - 20.2]) had the highest (see Graph 19).

Wasting – weight for height - See Table 22

The national prevalence of wasting as indicated by weight for height was 4.0% [3.3 - 4.7]. Significantly more males (7.6% [6.3 - 8.8]) than females (1.3% [0.9 - 1.6]) were wasted. Significantly more "Black" (4.1% [3.3 - 4.9]) and "Coloured" learners (5.3% [3.8 - 6.8]) were wasted compared to "White" learners (1.4% [0.2 - 2.7]). While there was no significant variation by age, fewer grade 11 (3.0% [2.1 - 3.9]) than grade 8 (4.5% [3.7 - 5.4]) and grade 9 learners (5.4% [4.0 - 6.8]) were wasted.

Significantly more learners in the Northern Cape (8.6% [5.7 - 11.4]) and the North West Province (7.0% [4.7 - 9.4]) were wasted compared to the national average of 4.0% [3.3 - 4.7]. The Eastern Cape (2.4% [1.2 - 3.7]) had the lowest provincial prevalence (see Graph 20).

Overweight - See Table 22

Nationally 17.2% [14.3 - 20.1] of learners were overweight. Significantly more females (25.0% [20.1 - 29.9]) than males (6.9% [5.5 - 8.4]) were overweight. Significantly more "Indian" learners (25.3% [20.1 - 30.5]) were overweight when compared to "Black" (16.6% [13.8 - 19.4]) and "Coloured" (13.0% [10.7 - 15.4]) learners. Significantly more "White" learners (23.4% [19.3

- 27.4]) were overweight when compared to "Coloured" learners. Significantly more "White" males (20.2% [14.0 - 26.3]) were overweight when compared to "Coloured" (8.5% [5.5 - 11.6]) and "Black" males (5.2% [4.0 - 6.3]). Significantly more "Black" (25.1% [20.5 - 29.8]) and "Coloured" females (16.9% [12.9 - 20.9]) were overweight when compared to "Black" (5.2% [4.0 - 6.3]) and "Coloured" males (8.5% [5.5 - 11.6]).

The prevalence of being overweight is significantly higher among grade 10 (25.1% [16.6 - 33.7]) and grade 11 learners (18.7% [15.8 - 21.7]) than among grade 8 (12.8% [10.7 - 15.0]) and grade 9 learners (13.6% [11.5 - 15.7]). Although the variation by age was not significant, the highest prevalence of being overweight was in the 19 years and older age group (20.7% [14.2 - 27.3]), and the lowest prevalence in the 13 years and younger age group (12.8% [9.8 - 15.7]).

KwaZulu-Natal (22.9% [11.7 - 34.1]) had the highest provincial prevalence of learners who were overweight. Significantly fewer learners in Limpopo Province (10.5% [7.3 - 13.7]) were overweight compared to the national average (see Graph 21).

Obesity - See Table 22

The national average of obesity was 4.0% [3.3 - 4.7]. Significantly more females (5.3% [4.3 - 6.4]) than males (2.2% [1.5 - 2.9]) were obese. Significantly more "Indian" learners (10.2% [6.0 - 14.5]) were obese compared to "Black" (3.8% [3.1 - 4.5]) and "Coloured" learners (3.3% [1.6 - 5.1]). Significantly more "Black" females (5.3% [4.1 - 6.4]) than "Black" males (1.9% [1.2 - 2.5]) were obese, while there were no significant gender differences among "Coloured" , "White" and "Indian" learners. There was no significant variation by grade or by age.

The highest provincial prevalence of obesity was in the Western Cape (7.1% [5.3 - 8.9]), and the lowest was in KwaZulu-Natal (2.2% [1.2 - 3.3]) (see Graph 22).

PERCEPTIONS OF BODY WEIGHT

Perception of underweight - See Table 23

Nationally 23.8% [21.9 - 25.6] of learners described themselves as being underweight. Significantly more males (27.8% [25.5 - 30.1]) than females (20.5% [17.5 - 23.6]) perceived themselves to be underweight.

Significantly fewer "White" learners (15.2% [12.2 - 18.3]) considered themselves to be underweight compared to "Black" (24.5% [22.6 - 26.3]) and "Coloured" learners (26.7% [19.6 - 33.9]). There was no significant difference between "Coloured" female (28.1% [15.6 - 40.6]) and "Coloured" male learners (25.2% [21.4 - 28.9]). While there was no significant variation by age, significantly more grade 8 learners perceived themselves as being underweight compared to grade 10 (19.7% [16.1 - 23.3]) and grade 11 learners (21.1% [17.8 - 24.3]).

Northern Cape (32.5% [6.4 - 58.7]) had the highest provincial prevalence of learners who considered themselves to be underweight while the Eastern Cape (19.5% [13.7 - 25.2]) had the lowest prevalence.

Perception of overweight - See Table 23

Nationally 14.1% [12.7 - 15.4] of learners considered themselves to be overweight. Significantly more females (17.5% [15.8 - 19.2]) than males (9.7% [8.1 - 11.3]) considered themselves overweight.

Significantly more "White" learners (29.0% [26.2 - 31.9]) considered themselves overweight than "Black" (12.3% [11.0 - 13.6]) and "Coloured" learners (16.4% [13.4 - 19.3]). Significantly more "White" (39.6% [34.2 - 45.0]) and "Black" females (15.2% [13.8 - 16.6]) described themselves as overweight compared to "White" (15.9% [11.4 - 20.3]) and "Black" males (8.6% [6.9 - 10.3]). There was no significant variation by grade or by age.

The Western Cape (18.5% [14.8 - 22.1]) had the highest provincial prevalence of learners who considered themselves overweight, while Eastern Cape (11.6% [6.4 - 16.8]) had the lowest prevalence.

FOOD CONSUMPTION

Fresh fruit - See Table 24

Nationally 57.8% [55.5 - 60.1] of learners had eaten fresh fruit frequently (4 or more days) during the week preceding the survey. There were no significant variations by gender, grade or age. Significantly

fewer "Coloured" (46.5% [40.8 - 52.3]) and "White" learners (51.1% [45.5 - 56.6]) had eaten fresh fruit frequently in the past week when compared to "Black" learners (59.4% [56.9 - 61.9]).

Significantly fewer learners in the Eastern Cape (39.5% [33.6 - 45.4]) had eaten fresh fruit frequently in the week preceding the survey compared to the national average. KwaZulu-Natal (66.4% [60.1 - 72.7]) had a prevalence of learners who had eaten fresh fruit in the past week that was significantly higher than the national average.

Fresh vegetables - See Table 24

Across the country 58.2% [55.6 - 60.7] of learners had eaten fresh vegetables that were cooked or were in a salad frequently (4 or more days) during the week preceding the survey. There were no significant gender differences. Significantly more "White" learners (67.2% [62.9 - 71.6]) had eaten fresh vegetables frequently in the week preceding the survey compared to the national average and compared to "Black" (57.4% [54.6 - 60.2]) and "Coloured" learners (53.0% [47.4 - 58.6]). There were no significant variations by grade or by age.

Significantly fewer learners in the Eastern Cape (41.6% [33.9 - 49.3]) had eaten fresh vegetables frequently in the week preceding the survey compared to the national average. Gauteng (69.2% [65.6 - 72.8]) had the highest provincial prevalence of learners who had eaten fresh vegetables frequently in the week preceding the survey and it was significantly higher than the national average.

Milk - See Table 24

Nationally 44.9% [42.7 - 47.1] of learners had drunk milk/'amasi' frequently (4 or more days) during the week preceding the survey. "Had drunk milk" included milk drunk in a glass, in a cup, from a carton, or with cereal. There were no significant gender differences.

Significantly more "White" (70.2% [65.2 - 75.1]) and "Indian" learners (74.0% [65.5 - 82.5]) had drunk milk frequently in the week preceding the survey compared to "Coloured" (46.7% [40.5 - 52.8]) and "Black" learners (41.7% [39.2 - 44.1]). The percentage of learners who had drunk milk frequently in the week preceding the survey decreased with an increase in grade. Significantly more grade 8 learners (49.8% [46.5 - 53.1]) had drunk milk frequently in the week preceding the survey compared to grade 11 learners (38.4% [33.8 - 43.1]). Significantly more 13-year-old or younger learners (51.2% [45.7 - 56.8]) had drunk milk frequently in the week preceding the survey, compared to 19 year old and over learners (39.4% [33.4 - 45.5]).

Significantly fewer learners in Limpopo Province (37.5% [32.4 - 42.7]) had drunk milk frequently in the week preceding the survey compared to the national average of 44.9% [42.7 - 47.1]. North West Province (53.5% [46.2 - 60.8]) had the highest prevalence.

Maize - See Table 24

Across the country almost two-thirds of learners (64.7% [61.8 - 67.5]) had eaten maize in any form, e.g. pap or porridge, frequently (4 or more days) during the week preceding the survey, with no significant difference between male and female learners. Significantly fewer "Indian" (40.3% [24.5 - 56.2]), "White" (51.3% [44.0 - 58.7]) and "Coloured" learners (55.4% [50.0 - 60.9]) had eaten maize frequently in the week preceding the survey when compared to "Black" learners (67.1% [63.3 - 70.8]). There were no significant variations by grade or by age.

Significantly fewer learners in the Eastern Cape (47.1% [40.1 - 54.1]) and Western Cape (52.6% [46.4 - 58.7]) had eaten maize frequently in the week preceding the survey compared to the national average. More learners in the Free State (73.4% [66.3 - 80.5]) had eaten maize frequently in the week preceding the survey than in any other province.

Meat - See Table 24

Nationally 63.2% [60.0 - 66.4] of learners had eaten meat frequently (4 or more days) during the week preceding the survey, with no significant differences between male and female learners. Significantly more "White" learners (79.5% [75.0 - 83.9]) had eaten meat frequently during the week preceding the survey compared to "Black" (60.7% [57.1 - 64.3]), "Coloured" (68.2% [61.5 - 74.9]) and "Indian" (60.5% [48.8 - 72.1]) learners. While there were no significant variations by grade, significantly fewer 14-year-old learners (68.4% [64.7 - 72.1]) had eaten meat in the previous week than learners aged 19 or older (53.5% [47.2 - 59.8]).

Significantly more learners in Gauteng (76.4% [73.3 - 79.6]) had eaten meat frequently during

the week preceding the survey compared to the national average. Significantly fewer learners in the Eastern Cape (41.3% [29.7 - 52.9]) had eaten meat frequently during the week preceding the survey than the national rate.

Fast food - See Table 24

Nationally 38.8% [36.9 - 40.8] of learners had eaten fast foods or 'luxuries' like a hamburger, fried chicken, boerewors roll, hotdog, hot chips, 'gatsby', pies, vetkoek or polony roll frequently (4 or more days) during the week preceding the survey. There were no significant differences between male and female learners.

Significantly fewer "White" learners (21.9% [17.6 - 26.3]) had eaten fast foods frequently during the week preceding the survey compared to "Black" (40.0% [37.6 - 42.5]) "Coloured" (43.9% [38.2 - 49.6]) and "Indian" learners (49.2% [39.6 - 58.8]). The proportion of learners who had eaten fast foods frequently during the week preceding the survey fell with an increase in grade.

Significantly fewer learners in the Eastern Cape (27.8% [23.1 - 32.6]) had eaten fast foods frequently in the week preceding the survey compared to the national average (38.8% [36.9 - 40.8]). KwaZulu-Natal (46.5% [41.6 - 51.4]) had a significantly higher prevalence than the national average.

Cakes and/or biscuits - See Table 24

Nationally 47.4% [45.0 - 49.7] of learners had eaten cakes and/or biscuits frequently (4 or more days) during the week preceding the survey. There were no significant differences between male and female learners. Significantly fewer "White" learners (26.0% [21.8 - 30.3]) had eaten cakes and/or biscuits frequently compared to "Coloured" (44.5% [38.1 - 50.8]), "Black" (49.8% [47.3 - 52.3]) and "Indian" learners (50.0% [35.4 - 64.7]). While there was no significant variation by grade, learners aged 13 years or under (52.1% [46.8 - 57.3]) had a significantly higher prevalence of having eaten cakes and/or biscuits frequently in the past week compared to learners aged 16 (39.9% [36.5 - 43.2]).

Significantly fewer learners in the Eastern Cape (34.3% [27.4 - 41.2]) had eaten cakes and/or biscuits frequently in the week preceding the survey compared to the national average of 47.4% [45.0 - 49.7]. The Northern Cape (55.6% [37.2 - 74.1]) and KwaZulu-Natal (55.1% [50.3 - 59.9]) had the highest provincial prevalences of having eaten cakes/biscuits, with KwaZulu-Natal's prevalence being significantly higher than the national average.

Cooldrinks and sweets - See Table 24

Nationally 52.0% [50.0 - 54.0] of learners had eaten chocolates or sweets or drank cooldrinks such as Coca-cola ('Coke') frequently - i.e. on 4 or more days during the 7 days preceding the survey. There were no significant differences between male and female learners. Significantly more "Indian" learners (63.2% [53.7 - 72.7]) drank cooldrinks and had eaten sweets frequently compared to "Black" learners (51.1% [48.7 - 53.5]). The variation by grade was not significant, although significantly more learners in the 13 years or under age group (58.8% [54.1 - 63.6]) drank cooldrinks and had eaten sweets frequently than learners in the 18-year (45.5% [39.0 - 51.9]) and 19 years and over (45.8% [40.5 - 51.1]) age groups.

Significantly fewer learners in the Eastern Cape (39.4% [34.0 - 44.8]) had sweets and/or cooldrinks frequently in the week preceding the survey compared to the national average. Significantly more learners in Gauteng (61.6% [57.3 - 65.8]) had eaten sweets and/or drunk cooldrinks frequently in the week preceding the survey compared to the national average. The Western Cape (56.4% [53.5 - 59.4]) also had a high proportion of learners who had eaten cakes and biscuits in the week preceding the survey.

7.1.3. OVERVIEW
ANTHROPOMETRIC FINDINGS

The prevalence of underweight (weight for age) was 9.0%; stunting (height for age) was 11.4%; and wasting (weight for height) was 4.0%; 17.2% of learners were found to be overweight and 4.0% of learners were classified as obese (Table 22).

These findings show the co-existence of stunting and being overweight as a public health problem among adolescents in SA. The high prevalence of stunting reflects the levels of poverty

and underdevelopment especially in the "Black" communities; while the rising prevalence of overweight suggests increased consumption of fatty foods and increased levels of physical inactivity. [83] While the prevalence of wasting and obesity appear to be low, it must be noted that in the context of South Africa's "obesogenic" environment, the rate of obesity is expected to increase. [84]

With regard to the gender distribution, males demonstrated higher levels of undernutrition compared to females in the "Black" and "Coloured" groups. For overnutrition, females demonstrated a higher prevalence of being overweight or obese in general. Among males, "White" males demonstrated a higher level of being overweight than males in all other "race" groups.

Levels of undernutrition decrease with increasing age. Overnutrition is evenly distributed across all age ranges.

The Northern Cape, North West, Limpopo and Free State, the less urbanised and industrialised provinces in South Africa, displayed higher levels of undernutrition. The Western Cape, KwaZulu-Natal and Gauteng, the more industrialised provinces, had learners with higher levels of being overweight and obesity. [6]

PERCEPTION OF BODYWEIGHT

With regard to perceptions of bodyweight, 23.8% of learners described themselves as underweight, and 14.1% as overweight.

The comparison between learners' reported prevalence of perceiving themselves to be overweight and their measured prevalence of being overweight showed that fewer females perceived themselves to be overweight (17.5%) than were actually measured to be overweight (25.0%). "Black" females underestimated being overweight, and overestimated being underweight five-fold when compared to their actual body weight. There was also a four-fold overestimation of being underweight compared to their actual body weight among "Coloured" females. In contrast to these findings, "White" females by far overestimated their level of being overweight compared to their measured body weight. In contrast, males' perception of being underweight (27.8%) was significantly higher than their actual measured underweight prevalence (15.6%). More "White" learners perceived themselves to be overweight (29.0%) than their true body measurements (23.4%).

This is consistent with the "obesogenic" environment, which promotes the stereotypical image of the "slim" female and "macho" male figure, in which adolescents are growing up.

DIETARY BEHAVIOUR

Food consumption behaviour reflected that, during the week preceding the survey, learners had frequently consumed fresh fruit (57.8%), fresh vegetables (58.2%), milk (44.9%), maize (64.7%) and meat (63.2%). On the other hand, the frequency of consumption of other foods ranged from fast foods (38.8%), cakes and biscuits (47.4%) to cooldrinks and sweets (52.0%).

7.2. Physical activity

7.2.1. INTRODUCTION

This section focuses on the following aspects of physical activity:

- Participation in at least 20 minutes of activity which constitutes vigorous physical exercise on at least 3 days in the past week
- Participation in at least 30 minutes of activity which constitutes moderate physical exercise on at least 5 days in the past week
- Participation in levels of exercise that are insufficient to gain any health benefit in the past week
- Physical education (PE) classes allocated in the school timetable
- Types of activities performed during PE classes
- Reasons for abstaining from physical activity in the past week
- Watched television or played computer games for more than three hours per day

Physical activity has been defined as all movements in everyday life, including work, recreation, exercise and sporting activities. This encompasses activities that range in intensity from taking the

stairs regularly, dancing and walking briskly, to jogging, biking and practicing sports. The level of physical activity needed to obtain a health benefit does not have to be strenuous. It has been recommended that regular physical activity of moderate intensity practiced at least five days a week has the equivalent positive effect on health as vigorous exercise performed three times a week.[13]

Vigorous physical exercise comprises participation in activities for at least 20 minutes that would make the participant sweat and breathe hard. For the purposes of this survey, learners are taken to have participated in sufficient vigorous physical activity if they reported having engaged in activities such as soccer, netball, rugby, basketball or running for 20 minutes or more on at least three of the seven days preceding the survey. Moderate physical exercise comprises participation in activities for at least 30 minutes that would not make the participant sweat or breathe hard. Learners are taken to have participated in sufficient moderate physical activity if they reported having engaged in activities such as walking, slow bicycling, skating, pushing a lawn mower, mopping, polishing or sweeping the floors for 30 minutes or more on at least five of the seven days preceding the survey.[85] Insufficient physical activity is not participating in enough vigorous or moderate physical exercise as defined above. For the purposes of this report, for individuals who were involved in different combinations of both moderate and vigorous physical activity the frequencies were aggregated.

Physical inactivity has become a major public health problem, contributing to the chronic, non-communicable disease epidemic. Physical activity is necessary to maintain good emotional and physical health as well as to prevent disease. Individual behaviours which feature recommended levels of physical activity, especially if practised from childhood, can improve self-esteem and reduce the risk of obesity, which is closely associated with diabetes and certain types of cancer, anxiety, stress, high blood pressure and elevated cholesterol, which contribute to heart disease and stroke.[86-88]

This Youth Risk Behaviour Survey is the first nationally representative study about the prevalence of physical activity and inactivity among high school learners in South Africa.

7.2.2. RESULTS

Participated in sufficient vigorous physical activity - See Table 25

The national average for learners who had participated in sufficient vigorous activity in the week preceding the survey was 44.6% [42.3 - 46.8]. Significantly more males (57.1% [54.6 - 59.6]) than females (34.7% [31.7 - 37.6]) participated in sufficient vigorous physical activity. Significantly fewer "Coloured" learners (38.8% [34.3 - 43.2]) participated in sufficient vigorous physical activity than "White" learners (56.7% [50.1 - 63.2]). "Coloured" female learners (24.8% [19.8 - 29.9]) had a significantly lower prevalence than "White" female learners (50.3% [41.4 - 59.2]).

Grade 11 learners (38.6% [34.4 - 42.8]) had a significantly lower prevalence of learners who participated in sufficient vigorous physical activity when compared to grade 8 (46.9% [43.5 - 50.3]) and grade 9 (48.3% [45.8 - 50.9]) learners. Learners aged 13 years or under (50.0% [45.4 - 54.6]) had a significantly higher prevalence than learners aged 19 years or over (39.8% [36.8 - 42.9]).

Free State (52.0% [46.5 - 57.5]) had the highest provincial prevalence of learners who participated in sufficient vigorous physical activity, while KwaZulu-Natal (38.3% [32.4 - 44.2]) had the lowest.

Participated in sufficient moderate physical activity - See Table 25

Nationally 33.5% [32.2 - 34.8] of learners had engaged in sufficient moderate activity in the past week, with male learners (57.1% [54.6 - 59.6]) showing a significantly higher prevalence than female learners (34.7% [31.7 - 37.6]).There was no significant difference in participation in moderate physical activity among male learners in the different "race" groups, but "Coloured" female learners (25.4% [19.0 - 31.9]) had a significantly lower prevalence of engaging in sufficient moderate physical activity than "Black" females (35.0% [33.1 - 36.9]). Significantly more grade 10 (36.7% [33.6 - 39.9]) than grade 8 learners (29.9% [27.1 - 32.7]) participated in sufficient moderate physical activity. There was no significant variation by age.

Limpopo Province (37.9% [34.8 - 40.9]) had the highest prevalence of learners who participated in sufficient moderate physical activity, while the Eastern Cape (28.3% [23.2 - 33.3]) had the lowest.

Insufficient or no physical activity - See Table 25

Nationally 37.5% [36.0 - 39.0] of learners participated in insufficient or no physical activity. Significantly more females (43.0% [41.0 - 45.0]) than males (30.5% [28.5 - 32.6]) participated in insufficient or no physical activity. This higher prevalence of insufficient or no physical activity for females compared with males was significant within the "Black" and "Coloured" groups. Significantly more "Coloured" learners (45.6% [39.7 - 51.4]) participated in insufficient or no physical activity compared to "Black" (34.1% [32.7 - 35.5]) and "White" learners (33.0% [29.2 - 36.8]).

Gauteng (31.2% [28.0 - 34.4]) had the lowest provincial prevalence of learners who participated in insufficient or no physical activity, while the Northern Cape (46.2% [28.4 - 64.1]) had the highest.

PE classes on timetable - See Table 26

Nationally 54.3% [50.5 - 58.0] of learners had physical education on their school timetable on one or more days in the week preceding the survey, with no significant difference between male and female learners. Significantly fewer "White" learners (37.6% [29.0 - 46.3]) had physical education on their school timetable compared to "Black" learners (56.7% [52.9 - 60.5]). Significantly more grade 8 (61.6% [57.6 - 65.6]) than grade 10 (42.6% [34.7 - 50.6]) and grade 11 learners (50.6% [44.3 - 56.8]) had physical education on their school timetable. Learners aged 13 years or younger (62.4% [58.1 - 66.7]) had a lower prevalence than learners aged 16 years (49.8% [44.1 - 55.5]) and 17 years (49.8% [42.7 - 56.9]).

Northern Cape (40.6% [30.5 - 50.8]) had the lowest provincial prevalence of physical education on their school timetable. KwaZulu-Natal (59.7% [48.8 - 70.6]) had the highest provincial prevalence.

Activities during Physical Education classes - See Table 27

Engaged in vigorous activity

The national average of learners who engaged in vigorous activity during an average physical education class (such as soccer, running, rugby, netball, basketball or cricket) was 52.8% [48.8 - 56.7]. Significantly more males (60.8% [57.6 - 63.9]) than females (46.5% [41.4 - 51.5]) engaged in vigorous activity during an average physical education class. Significantly fewer "White" learners (24.4% [16.3 - 32.5]) engaged in vigorous activity during an average physical education class compared to "Black" (56.9% [53.0 - 60.7]) and "Coloured" learners (42.6% [36.0 - 49.2]). Significantly more grade 8 (60.3% [56.4 - 64.3]) and grade 9 learners (60.5% [56.5 - 64.6]) engaged in vigorous activity in physical education classes than grade 10 (42.8% [33.2 - 52.5]) and grade 11 learners (42.8% [37.7 - 47.8]), while there was no significant variation by age.

Western Cape (42.9% [35.3 - 50.5]) and Gauteng (44.3% [36.4 - 52.2]) had the lowest percentages of learners who engaged in vigorous activity during an average physical education class. Eastern Cape (60.7% [50.0 - 71.3]) had the highest provincial prevalence.

Engaged in lifeskills education/class discussion

Nationally 7.8% [6.8 - 8.8] of learners engaged in lifeskills education/class discussion during an average physical education class. Significantly more females (10.7% [9.3 - 12.1]) than males (4.2% [3.3 - 5.1]) engaged in lifeskills education/class discussion during an average physical education class. Significantly more "Coloured" learners (14.4% [9.6 - 19.1]) engaged in lifeskills education/class discussion during an average physical education class compared to "Black" learners (6.7% [5.9 - 7.6]). Significantly more "Black" females (9.4% [8.1 - 10.8]) than "Black" males (3.3% [2.4 - 4.1]) engaged in lifeskills education/class discussion during an average physical education class. There was no significant variation by grade or by age.

Eastern Cape (4.9% [2.5 - 7.3]) had the lowest prevalence of learners who engaged in lifeskills education/class discussion during an average physical education class. Significantly more learners in the Western Cape (13.7% [9.1 - 18.3]) engaged in lifeskills education/class discussion during an average physical education class compared to the national average.

Reasons why learners did not take part in physical activity - See Table 28

Did not want to take part in physical activity

Among those who did not take part in physical activity in the week preceding the survey, 25.9% [24.4 - 27.3] of learners reported that they had not wanted to take part in physical activity, with no significant difference between male and female learners. Significantly more "Coloured" (35.3% [31.8 - 38.8]) than "Black" learners (25.1% [23.4 - 26.8]) reported that they did not want to take part in physical activity. There was no significant variation by grade or by age.

Limpopo Province (22.2% [17.8 - 26.6]) had the lowest provincial prevalence of learners who reported that they did not want to take part in physical activity, while the Northern Cape (32.4% [27.9 - 37.0]) had the highest.

Was ill

Among those who did not take part in physical activity in the week preceding the survey, 19.1% [17.1 - 21.0] of learners reported that they had been ill, with no significant gender difference. There was no significant variation by "race", grade or age.

Mpumalanga (15.9% [10.9 - 20.9]) had the lowest provincial prevalence of learners who reported that they did not take part in physical activity because they were unwell, while the North West Province (23.8% [19.4 - 28.2]) had the highest.

Felt unsafe

Among those who did not take part in physical activity in the week preceding the survey, 7.0% [6.0 - 8.1] reported that they had felt unsafe, frightened and/or scared to go out to the ground or gym. Significantly more males (8.8% [7.5 - 10.0]) than females (6.0% [4.6 - 7.3]) felt unsafe, frightened and/or scared to go out to the ground or gym. Significantly fewer "White" learners (1.6% [0.6 - 2.6]) felt unsafe, frightened and/or scared to go out to the ground or gym compared to "Black" (7.4% [6.3 - 8.6]) and "Coloured" learners (7.3% [5.3 - 9.2]).There was no significant variation by grade or by age.

Western Cape (4.7% [3.3 - 6.1]) had the lowest prevalence of feeling unsafe and Eastern Cape (9.1% [4.8 - 13.3]) the highest.

No access to equipment

Among those who did not take part in physical activity in the week preceding the survey, 15.7% [12.9 - 18.4] reported not having equipment or grounds or a gym to take part in physical activity. Significantly more "Black" learners (17.0% [14.7 - 19.3]) reported not having equipment or grounds or a gym to take part in physical activity compared to "White" (5.6% [2.7 - 8.6]), "Indian" (6.1% [-1.7 - 13.9]) and "Coloured" learners (7.5% [5.8 - 9.2]). There was an increase in the prevalence of learners who reported not having equipment or grounds or a gym to take part in physical activity with an increase in grade. Significantly more grade 10 (20.8% [13.1 - 28.5]) and grade 11 learners (18.7% [15.3 - 22.0]) than grade 8 learners (10.2% [8.0 - 12.4]) reported not having equipment or grounds or a gym to take part in physical activity. Significantly more learners aged 19 years or over (20.6% [13.7 - 27.6]) reported not having equipment, grounds or a gym than learners aged 13 years or under (8.8% [5.6 - 12.0]) and 14 years (9.7% [6.9 - 12.4]).

KwaZulu-Natal (18.6% [10.3 - 26.9]) had the highest prevalence and Northern Cape (8.6% [5.8 - 11.4]) the lowest prevalence of learners whose reason for taking part in no physical activity in the past week was lack of access to equipment.

Don't know the reason for inactivity

Among those who did not take part in physical activity in the week preceding the survey, 32.3% [30.0 - 34.7] reported not knowing the reason for their inactivity, with no significant gender difference. Significantly more "White" learners (42.6% [36.5 - 48.7]) reported not knowing the reason for their inactivity compared to "Black" learners (31.6% [29.2 - 34.1]). There was no significant variation by grade, but learners aged 19 years or older (22.4% [18.2 - 26.6]) reported a significantly lower prevalence of not knowing the reason for their inactivity than learners aged 13 years or under (37.6% [31.5 - 43.7]), 14 years (39.0% [34.7 - 43.4]), 15 years (32.7% [28.2 - 37.3]) and 16 years (32.2% [28.2 - 36.2]).

Eastern Cape (28.8% [20.6 - 37.0]) had the lowest provincial prevalence of learners who did not know the reason for their inactivity, while learners in the Western Cape (34.9% [28.1 - 41.6]) had the highest prevalence.

Watched TV for more than 3 hours per day - See Table 29

Nationally 25.2% [22.7 - 27.7] of learners watched television or played video or computer games for more than 3 hours per day, with no significant difference between male and female learners at a national level.

Significantly more "Coloured" learners (29.6% [25.7 - 33.4]) watched television or played video or computer games for more than 3 hours per day compared to "White" learners (20.4% [16.0 - 24.7]).

While there was no significant variation by grade, there was a decrease in the prevalence of learners who watched TV or played video or computer games for more than 3 hours per day with an increase in age. Significantly fewer learners in the 19 years and older age group (17.1% [13.8 - 20.4]) than in the 14-year age group (28.9% [25.1 - 32.8]), 15-year group (25.4% [22.7 - 28.1]) and 16-year group (25.9% [21.3 - 30.6]) watched TV or played video or computer games for more than 3 hours per day.

Significantly more learners in Gauteng (34.1% [30.0 - 38.2]) and Western Cape (31.2% [28.2 - 34.3]) watched TV or played video or computer games for more than 3 hours per day compared to the national average of 25.2% [22.7 - 27.7]. Significantly fewer learners in the Eastern Cape (17.2% [13.7 - 20.6]) watched TV or played video or computer games for more than 3 hours per day than the national average.

7.2.3. OVERVIEW

Almost 1 out of 2 learners (44.6%) reported having participated in sufficient levels of vigorous activity, and 1 out of 3 (33.5%) participated in sufficient moderate activity. However, more than a third (37.5%) performed too little physical activity to gain any health benefit. Just over half (54.3%) of the learners had physical education on their school timetable on one or more days per week; and with regard to activities during PE classes, 52.8% of learners participated in vigorous activities, and 7.8% engaged in life skills education or class discussion during this time. The reasons given for not taking part in physical activity were: 32.3% had no reason, 25.9% did not want to participate, 19.1% were ill, 15.7% reported a lack of equipment and facilities, and 7.0% felt unsafe or too frightened to go to the grounds. In terms of sedentary behaviour, 1 in 4 learners (25.2%) watched television for 3 hours or more per day, and more than 1 in 3 (37.5%) did not participate in sufficient physical activities to promote a health benefit.

With regard to the scheduling of physical education classes, 29% of learners did not have such classes allocated on their timetables at all. Over 7% of the learners spent physical education classes in the classroom, receiving lifeskills education or taking part in classroom discussions. Significantly more grade 8 learners than grade 10 and 11 learners had physical education on their school timetable.

Sedentary lifestyle is both a matter of individual choice and a function of an environment that promotes inactivity. The outcomes of this survey reflect the choices made by the learners relating to their participation in physical activity, as well as the environmental factors which may influence these choices. It is not impossible that the substantial group of learners who chose not to take part in physical activity are unaware of the health benefits of participating.

CHAPTER 8

Hygiene

8.1. Introduction

This chapter focuses on four components of hygiene:

- Brushing of teeth at least once per day
- Ownership of a toothbrush
- Always washing hands after using the toilet
- Always washing hands before eating

Unsafe water, sanitation and hygiene are among the top ten risk factors in terms of the global burden of disease.[13] It is estimated that 2 million children die each year from diarrhoeal diseases in developing countries, making it the second most serious cause of death for children under the age of 5 worldwide.[89] In South Africa diarrhoeal diseases are the fifth largest contributor to the burden of premature mortality.[90] Hand-washing has been shown to be an effective preventative measure against transmitting bacteria and viruses, which are causative agents for diseases such as cholera. The provision of clean water is vital for effective hygiene.

In South Africa it is estimated that 26 million or 66% of the population have access to an infrastructure for clean water.[91] Currently 71.2% of schools are reported to have access to drinkable water. With regard to ablution facilities, 15.5% of schools lack operational toilets and 9.2% do not have access to toilets.[92]

Oral health disease is relatively common and takes the form of pain, tooth loss, disfigurement, loss of function and even death. It has been reported that 62% of South Africans have lost some of their natural teeth.[31] Brushing of teeth is considered the single most important measure to prevent periodontal disease, hence much of the burden of disease due to oral health problems can be drastically reduced by the promotion of regular brushing. Cogently, brushing one's teeth is closely linked to other hygiene factors such as bathing and hair washing. Research among school children shows that the primary reason for brushing teeth is related to personal appearance rather than the prevention of periodontal disease, and that brushing varies by gender and social class.[93] Regular dental hygiene behaviours are started in the formative years and are in all likelihood related to the social and cultural practices of the society.[94] However, these practices are determined by the availability and accessibility of clean water.

8.2. Results

Brush teeth at least once a day - See Table 30

Nationally 88.9% [87.1 - 90.7] of learners brushed their teeth at least once a day, with no significant difference between male and female learners. Significantly more "White" (97.3% [95.4 - 99.1]) learners brushed their teeth at least once a day compared to "Black" learners (88.2% [86.8 - 89.6]). There was an increase in the prevalence of learners who brushed their teeth at least once a day with an increase in grade. Significantly fewer grade 8 (85.4% [82.8 - 88.0]) than grade 10 (89.6% [85.3 - 94.0]) and grade 11 (93.1% [90.9 - 95.3]) learners brushed their teeth at least once a day. However, there was no significant variation between learners of different ages.

Significantly more learners in Gauteng (94.7% [93.0 - 96.4]), Free State (93.9% [91.3 - 96.4]), Western Cape (93.7% [91.1 - 96.3]) and Northern Cape (95.3% [93.5 - 97.0]) brushed their teeth at least once a day compared to the national average of 88.9% [87.1 - 90.7]. Eastern Cape (79.7% [73.3 - 86.0]) had a significantly lower provincial prevalence.

Own toothbrush that is not shared - See Table 30

The national average of learners who have their own toothbrush that is not shared was 88.8% [87.2 - 90.4], with no significant difference between the genders. Significantly more "White" (96.3% [94.6 - 98.1]) than "Black" (88.2% [86.8 - 89.6]) and "Coloured" learners (91.9% [89.8 - 94.1]) have their own toothbrush that is not shared. There was an increase in the prevalence of learners who have their own toothbrush that is not shared with an increase in grade. Significantly fewer grade 8 learners (85.4% [82.8 - 88.0]) than grade 11 learners (93.1% [90.9 - 95.3]) have their own toothbrush that is not shared. However, there was no significant variation by age.

Significantly more learners in Gauteng (94.2% [92.5 - 95.9]) and the Northern Cape (94.6% [92.5 - 96.6]) have their own toothbrush that is not shared compared to the national average of 88.8% [87.2 - 90.4]. Eastern Cape (83.3% [79.3 - 87.2]) had the lowest prevalence.

Always wash their hands after going to the toilet - See Table 31

The national average of learners who always wash their hands after going to the toilet was 75.5% [73.7 - 77.2], with no significant difference between the genders. Significantly fewer "White" learners (58.8% [54.6 - 63.0]) always wash their hands after going to the toilet compared to "Black" (78.4% [76.6 - 80.3]) and "Indian" learners (79.2% [64.8 - 93.5]) (see Graph 23). There was no significant variation by age or by grade.

The Free State (78.6% [74.7 - 82.5]) had the highest prevalence of learners who always wash their hands after going to the toilet. Northern Cape (56.8% [38.5 - 75.2]) had the lowest prevalence.

Always wash their hands before eating - See Table 31

Nationally 66.8% [64.3 - 69.4] of learners always wash their hands before eating, with no significant difference between the genders. Significantly fewer "White" learners (45.0% [39.1 - 51.0]) compared to "Black" (70.6% [67.8 - 73.5]) and "Indian" learners (71.5% [61.3 - 81.8]) always wash their hands before eating (see Graph 24). There was no significant variation by age or by grade.

Limpopo Province (73.6% [67.5 - 79.7]) had the highest prevalence of learners who always wash their hands before eating. Significantly fewer learners in the Northern Cape (47.5% [33.5 - 61.6]) always wash their hands before eating when compared to the national average.

8.3. Overview

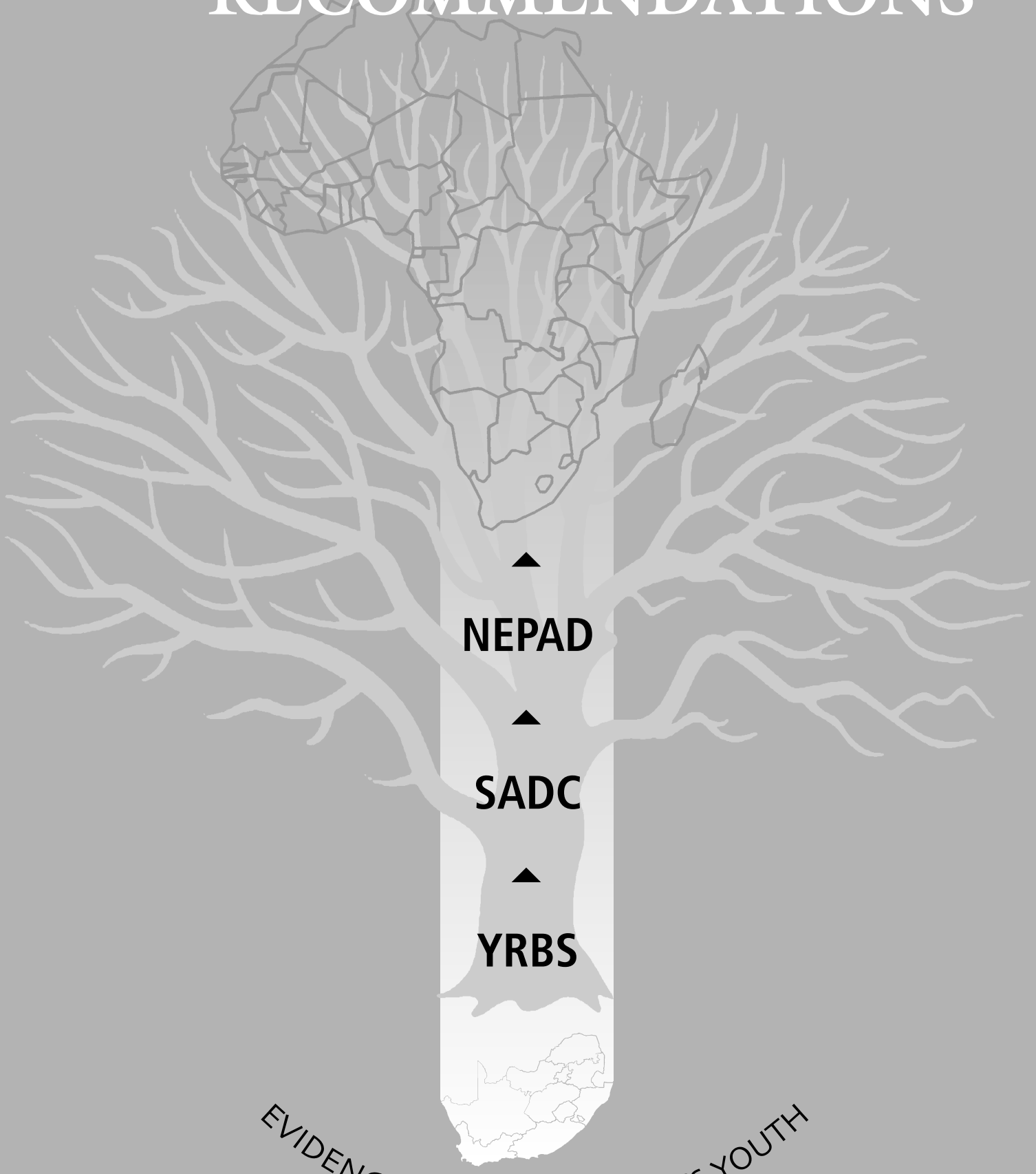
The national prevalence of the four components of hygiene investigated in this study found that 88.9% of learners brushed their teeth at least once a day; 88.8% had their own toothbrushes; 75.5% of learners always washed their hands after going to the toilet; and 66.8% always washed their hands before eating.

More than 11% of learners reported sharing their toothbrushes or not having access to one at all. Older learners were more likely to brush their teeth once a day as well as to possess their own toothbrush.

"White" learners reported lower rates of hand-washing than "Indian" and "Black" learners, both before eating and after going to the toilet. This is possibly due to cultural practices, such as using cutlery rather than fingers to eat. However the low rate of hand-washing after going to the toilet, particularly among "White" learners and learners in the Northern Cape, is a point for intervention as these learners are more prone to epidemics related to unsafe hygiene.

Eastern Cape, KwaZulu-Natal, Mpumalanga and Limpopo Province showed consistently lower rates of learners brushing their teeth at least once per day as well as of owning their own toothbrush that is not shared. Learners in the Western Cape, Eastern Cape and Northern Cape displayed lower levels of hand washing before eating and after using the toilet.

SECTION C
RECOMMENDATIONS



CHAPTER 9

Recommendations

9.1. Introduction

The behaviours that place young people at risk investigated in this national study account for a large proportion of the burden of disease and injury and social problems experienced among youth. [8] [13] [31] This Youth Risk Behaviour Survey contributes to the second step in the planning framework namely identifying which health related and social behaviours place young people at risk in the school context, and measuring the prevalence of these behaviours (see Chapter One, Figure I). The next steps are to identify the determinants of the behaviours, map out the interventions, and implement and evaluate recommended changes that are identified. For designing interventions the Health Promotion Matrix (Chapter One, Figure II) can serve as a framework for implementation. Based on both of these models, this chapter presents a set of general and specific recommendations from the survey as a whole, and for each of the risk behaviours individually.

There is a need for more specific analyses of the determinants of the risk behaviours, and training of health education professionals in interpreting these findings and translating them into objectives for future interventions, followed by designing interventions, the need for pilot testing these interventions before considering large-scale implementation, and then evaluation of the effects of the interventions.[36]

9.2. General Recommendations

These general recommendations are structured to provide a national and African framework for action aimed at developing the Youth Risk Behaviour Survey into a powerful policy development and planning tool for the social development of youth in Africa.

It is important to recognise that the constitutional, legislative, policy and programme foundations underpinning the health and social development of youth have been firmly established over the last decade of democratic government in South Africa. However, over the next few decades the broad contours of specific programme implementation targeting youth that have already been outlined, [95-96] need to be refined and tailored based on the evidence provided by the Youth Risk Behaviour Survey Report. The optimum utilisation of available resources is likely to have maximal impact on the health, welfare and social development of youth in South Africa. For this reason it is important to improve the interdepartmental collaboration within government.

Furthermore, African governmental planning around the issues of health and development has become more important to ensure sustainable programmes for youth and others. It will therefore augur well to establish an African Youth Risk Behaviour Surveillance System both for South Africa and her neighbours, thereby making a contribution to the policy for youth within the NEPAD initiative.

IT IS RECOMMENDED THAT:

9.2.1.

The Youth Risk Behaviour Survey be repeated on a triennial basis. This timeframe is sufficient to complete, disseminate and act on survey results, while still being short enough to be informative. The survey will enable:

- Monitoring of the socio-demographic transition affecting youth risk behaviour
- Evaluation of the impact of interventions targeting youth

- Evaluation of the distribution of resource allocation
- Evaluation of the refining and sharpening of focused interventions by identifying gaps in current policies and programmes
- Deepening participatory democracy by placing youth at the vanguard of leadership and development
- Paving the way for other African countries to conduct similar research, thus enabling school-based surveillance and comparison across borders in the spirit of NEPAD.

9.2.2.

A revision of existing structures so as to create a Youth Development Programme (YDP) which would be responsible for the social development and programming for youth across social clusters. This potential line function department would work across government departments consisting of a multi-disciplinary, multi-sectoral, multi-departmental team. One of the government departments, or possibly the Office of the President, would need to take the lead role in this initiative. The Youth Risk Behaviour Survey would then provide an evidence-based scientific foundation for programming and monitoring, with systematic planning and evaluation. Currently different risk behaviours affecting the health of learners are usually studied in isolation, making it difficult to co-ordinate a coherent, holistic plan for behaviour change. The synergies arising from doing this are manifold, largely because of the way risk behaviours are known to be interrelated. [97-100] This would allow the large numbers of vertically targeted single-behaviour interventions to be replaced with inter-departmental interventions aimed at addressing clusters of behaviours that place young people at risk.

9.2.3.

Adequate resource allocation across a cluster of YDP should be made available. These would allow optimum synergy between and among multiple interventions, avoid duplication, and create multiple implementation sites such as communities and schools.

9.2.4.

Full involvement and empowerment of youth in taking charge of their own destiny as part of the process of participatory democracy should be facilitated. The National Youth Commission needs to be centrally involved as the primary vehicle for mobilisation and organisation of youth.

9.2.5.

A well resourced and planned strategy for the dissemination of the results of the Youth Risk Behaviour Survey findings needs to be facilitated across social clusters in all nine provinces, to all stakeholders including local communities.

9.2.6.

The Youth Risk Behaviour Surveillance System could provide a platform for the development of a single integrated database in government for policy, planning and resource allocation with regard to motor vehicle crashes, sexual abuse, nutritional status, school surveys, child grants, etc. for policy and planning functions and resource allocation.

9.2.7.

The findings from this survey identify which determinant studies should be undertaken, and these will in turn inform the development of comprehensive intersectoral interventions which will reduce the prevalence of health-related and social behaviours that place learners at risk.

9.2.8.

The stakeholders involved in youth health and development should participate in the future Youth Risk Behaviour Surveillance Systems and in the ensuing programmes and interventions. The stakeholders and their respective roles, contributions, responsibilities and potential beneficial outputs are outlined in figure IV.

Stakeholder	Role/contribution	Responsibility	Benefits/outputs
South African Government - national - provincial - local government - district	Primary authority, Parliamentary/constitutional accountability	Governmental co-ordination in South Africa, Inter-governmental co-ordination in Africa	Policy and planning, resource allocation, programme implementation
E.g. Medical Research Council - health promotion group - YRBS unit	Research & development lead agency	Overall scientific co-ordination - Planning & conducting research	Participation in the essential national health research agenda
National Youth Commission	Mobilise youth for development	Youth participation	Optimum youth development, preparation for leadership
International Research Agencies	External reference panel, benchmarking evaluation of SA YRBS, scientific and technical support, methodological training, peer review	Creating opportunities for networking in Africa and internationally	Global database, NEPAD and SADC database

Figure IV: Proposed roles, responsibilities and contributions of stakeholders

9.2.9. THE RESEARCH AGENDA FOR YOUNG PEOPLE SHOULD BE EXPANDED.

The following specific research and development recommendations aim to complement the primary recommendation of a longitudinal triennial national Youth Risk Behaviour Survey, with sentinel site surveys for specialised studies.

9.2.9.1.

The first African versions of the CDC YRBS methodology and questionnaire developed by the research team need to be further adapted and validated both for conditions at district level in South Africa, as well as for other African countries. The Youth Risk Behaviour Survey research team from the MRC and the participating universities need to support an African initiative to develop, train, support and co-ordinate a continent-wide study.

9.2.9.2.

Determinant studies need to be undertaken of all the behaviours that place young people at risk, to complement this national prevalence study. These studies will provide critical information for development of socio-psychological interventions.

9.2.9.3.

Intervention studies to test hypotheses generated from these prevalence studies are required to deepen the evidence base for programme development and to further refine and validate the study methodology and instruments.

9.2.9.4.

Nested localised cluster studies which focus on districts are required because while the national studies and data are useful for macro-level policy and planning, they are not sufficiently sensitive or specific for local and district level variations or for designing provincial and district level intervention programmes.

9.2.9.5.

Creative methodologies including questionnaire development to obtain indigenous, culturally sensitive, valid and reliable data from young men and women living in the African context need to be developed.

9.3. Specific recommendations

In addition to applying conceptual and theoretical models for planning and evaluating interventions and strategies targeting specific levels of impact during implementation, a coherent mechanism for government departments and intersectoral solutions for youth health and development needs to be articulated (Figure V). Pivotal to having an impact on the behaviours that place young people at risk is the combined effort of all the government departments, each with their own paradigm towards problem solving. The recommendations are made to address the cluster of behaviours covered in this survey.

9.3.1. INTENTIONAL AND UNINTENTIONAL INJURY

9.3.1.1. Violence

It is essential that the school environment be safe and supportive of learning. To reduce the prevalence of violence-related behaviours it is necessary to improve the implementation of existing legislation and regulation of the laws governing under-age possession and access to firearms. Violence prevention programmes should be developed and should target all high school learners. Programmes focusing on conflict resolution should have a greater emphasis on learners in lower grades and older learners in each grade. The abhorrence of coercive sexual behaviours should be stressed from an early age, targeting both male and female learners. In addition, there should be a strong partnership between the law enforcement agencies and the educators to discourage learners from coming to school armed with weapons. Greater attention needs to be paid to male learners. With regard to gang membership, interventions targeting young learners in lower grades need special attention, for example, creating positive alternatives to joining gangs.

9.3.1.2. Traffic safety

Existing road safety education programmes for primary schools place an emphasis on road safety skills for pedestrians and passengers. These programmes should be extended to include aspects targeting all high school learners, emphasising skills and behaviours that will improve the learners' safety, not only as pedestrians and passengers but also as drivers. They also need to highlight the link between substance abuse and road traffic injuries.

9.3.1.3. Suicide and related behaviours

There are many stressful challenges faced by learners of both genders inside and outside of the schools in all provinces, thereby compromising their mental health status. It is therefore necessary to develop programmes that empower learners of all ages to cope with these challenges, and reduce the tendency towards suicidal behaviours when learners feel overwhelmed. There is a need to identify the determinants that influence the relatively low prevalence of suicide and related behaviours in the Eastern Cape, thus learning about the resilience factors and using this information to better inform the development of relevant programmes that will enhance the mental health of learners in all provinces.

9.3.2. SUBSTANCE ABUSE

Multiple strategies, such as legislative, behavioural and biomedical interventions, are required to deal with the health and economic consequences of substance abuse.

9.3.2.1. Tobacco

Responsible public health legislation such as banning the advertising of tobacco and the creation of smoke-free environments, are already in place. There is, however, a need to develop tailored interventions reinforcing existing cultural resilience factors among non-smoking learners. Also, suitable and sustainable cessation programmes particularly geared towards the youth should be developed to reduce the prevalence of current and frequent tobacco use.

9.3.2.2. Alcohol

It is necessary to control the advertising of alcoholic products as well as to introduce meaningful warning labels with the aim of protecting children and young people from the mass advertising

Figure V: Government departments and intersectoral solutions for youth health and development

An example of a comprehensive approach to intersectoral solutions: Violence prevention

Health: medical solutions, both preventive and curative

Education: solutions to promote knowledge and skills, development of courses for conflict resolution

Housing: solutions for prevention of overcrowding

Police: solutions to protect civil society and assist in enforcing legislation

Transport: solutions to provide safe travel environments

Sports & Recreation: solutions to create opportunities for utilisation of free time

Communication: solutions to set the mainstream agenda, for example, promoting the social norm for a non-violent society

of alcohol. It is also important to investigate the impact of alcohol abuse on school-related outcomes such as academic performance and school attendance.

9.3.2.3. Illegal and other drugs

The Departments of Safety and Security, Police, Defence and Education should collaborate to curb the supply and demand of illegal drugs in the learners' extended environment.

9.3.2.4. Substance abuse on school property

Through co-operation with the law enforcement agencies, programmes should aim to curb the supply and demand of prohibited substances on school property to ensure that the learning environment does not become a breeding ground for substance abuse of any kind.

9.3.3. SEXUAL BEHAVIOUR

Unsafe sex practices, associated with high prevalence of sexually transmitted infections and unplanned pregnancies, combined with the use of alcohol and drugs before sex, require a concerted national programme that goes beyond awareness to targeted and tailored behaviour change. Programmes need to be developed to target male learners, to encourage delaying their first sexual encounter, and to reduce their number of sexual partners. In addition to informing all learners about safe sexual practices, it is necessary to improve the negotiating skills, particularly of females, to reduce unplanned pregnancies.

9.3.4. NUTRITION, DIETARY AND PHYSICAL ACTIVITY

9.3.4.1. Nutrition and dietary behaviour

The co-existence of under- and overnutrition has been identified in this survey. Programmes should therefore be put in place to facilitate early diagnosis and urgent preventive measures aimed at preventing a chronic disease epidemic in adulthood. Further investigations are therefore required to establish the relationship between over- and under-consumption of foods and nutritional status outcomes. Through partnerships with local health facilities, schools need to create opportunities for male and female learners to measure appropriate anthropometric parameters on a regular basis so that dietary and physical activity decisions are made on a factual basis rather than on perceptions of body weight.

9.3.4.2. Physical activity

Co-ordinated efforts between all departments of government are required to further reduce physical inactivity and promote physical activity. It is believed that schools can help to counter the alarming trend of physical inactivity among learners through quality physical education programmes including recreation and sports. However, data suggest that physical education is being marginalised in schools, particularly in the higher grades.

The overarching goal of physical education programmes should be preparing the learners to adopt active lifestyles and discouraging excessive sedentary habits. Therefore the content of the physical education programme must be meaningful, and sufficient time must be provided for the daily physical activity that learners need as well as for instruction related to achieving and maintaining physical fitness.

9.3.5. HYGIENE

Learners should be encouraged to reach the optimum of brushing their teeth at least two times in a day. It is necessary to raise awareness among learners on the joint impact of high sugar intake, as seen in the food consumption patterns in this survey, and lack of regular tooth brushing. Access to preventive oral health care, such as regular dentist check-ups, should be examined.

Current interventions should be strengthened to improve the prevalence of hand-washing after using the toilet among learners.[91]

CHAPTER 10

References

(1) Statistics South Africa. *Statistics South Africa* - Census 2001. 2001.

(2) *Government Gazette*. South African Schools Act 84 of 1996. Ref: 1867. 1996.

(3) Central Statistical Services. *RSA Statistics in Brief*. 1997. Pretoria: Government Printers.

(4) National Centers for Chronic Disease Prevention and Health Promotion. Youth Risk Behavior Surveillance System. 2003.

(5) Statistics South Africa. No:03-01-11[1996]. 1999. Pretoria.

(6) May J. *Poverty and Inequality in South Africa. Meeting the Challenge*. Cape Town, London: David Phillip and Zed Press, 2000.

(7) United Nations Children's Foundation. Convention on the Rights of the Child. 2003.

(8) World Health Organisation. WHO Framework Convention on Tobacco Control. Fifty-Sixth World Health Assembly. 2003.

(9) National Programme of Action Steering Committee. National Plan of Action for Children in South Africa. 1996.

(10) Department of Health. HIV/AIDS/STD strategic plan for South Africa 2000-2005. 2000. Department of Health.

(11) Department of Education. Implementation plan for Tirisano 2001-2002. Pretoria: Department of Education.

(12) *Government Gazette*. School Drugs Policy. 450[24172]. 13-12-2002.

(13) World Health Organisation. *The World Health Report 2002. Reducing Risks, Promoting Healthy Life*. 2002. Geneva: World Health Organisation.

(14) Trends in deaths from tobacco related lung diseases in South Africa. Proceedings of the 9th World Conference on Tobacco or Health. Paris, France: 1994.

(15) Perry CL, Stone EJ, Parcel GS, Ellison RC, Nader PR, Webber LS *et al*. School-based cardiovascular health promotion: the child and adolescent trial for cardiovascular health (CATCH). *Journal of School Health* 1990; 60(8): 406-412.

(16) Sampson RJ, Lauritsen JL. Violent victimisation and offending: Individual, situational and community level risk factors. In: In Reis AJRJE, ed. *Understanding and preventing violence.* Washington DC: National Academy Press, 1994.

(17) Carnegie Council on adolescent development. Task force on education of young adolescents: turning points, preparing American youth for the 21st century. 1989. Washington.

(18) Actuarial Society of South Africa. *Report of the Continuous Statistical Investigations Committee - Mortality Investigation 1991-1994*. 1996.

(19) Parry CDH, Bhana A, Pluddemann A, Myers B, Siegfried N, Morojele NK *et al. The South African Community Epidemiology Network on Drug Use (SACENDU): description, findings (1997-99) and policy implications.* Ref: 969-976. 1997. Society for the Study of Addiction to Alcohol and other Drugs. 1997.

(20) Swart D, Reddy P, Pitt B, Panday S. *The prevalence and determinants of tobacco-use among Grade 8-10 learners in South Africa.* 2001. Medical Research Council, Cape Town. 2001.

(21) Swart D, Reddy P, Ruiter RAC, de Vries H. Cigarette use among male and female grade 8-10 students of different ethnicity in South African schools. *Tobacco Control* 2002; 11: 1-4.

(22) Panday S, Reddy SP, Bergstrom E. A qualitative study on the determinants of smoking behaviour among adolescents in South Africa. *Scandanavian Journal of Public Health* 2002; 30: 1-7.

(23) Madu SN, Matla MQP. Illicit drug use, cigarette smoking and alcohol drinking behaviour among a sample of high school adolescents in the Pietersburg area of the Northern Province, South Africa. *Journal of Adolescence* 2003; 26: 121-136.

(24) Morojele NK, Flisher AJ, Muller M, Ziervogel CF, Reddy P, Lombard CJ. Measurement of Risk and Protective Factors for Drug Use and Anti-Social Behavior among high school students in South Africa. *Journal of Drug Education* 2002; 32(1): 25-39.

(25) Burnett C. School Violence in an Impoverished South African Community. *Child Abuse and Neglect* 1998; 22(8): 789-795.

(26) Swart LA, Seedat M, Stevens G, Ricardo I. Violence in adolescents' romantic relationships: findings from a survey amongst school-going youth in a South African community. *Journal of Adolescence* 2002; 25: 385-395.

(27) Jewkes RK, Levin JB, Loveday A, Kekana P. Gender inequalities, intimate partner violence and HIV preventive practices: findings of a South African cross-sectional study. *Social Science and Medicine* 2003; 56: 125-134.

(28) Flisher AJ, Reddy P, Muller M, Lombard C. Sexual behaviour of Cape Town high-school students. *South African Medical Journal* 2003; 93(7): 537-541.

(29) James S, Reddy SP, Taylor M, Jinabhai CC. Young people, HIV/AIDS/STIs and sexuality in South Africa: GAPS between awareness and behaviour. *Acta Paediatrica* (In press).

(30) Reddy P, James S, McCauley A. *Programming for HIV Prevention in South African schools: A Report on Programme Implementation.* 2003. Medical Research Council.

(31) Department of Health. *South African Demographic and Health Survey*. 1998.

(32) Jinabhai CC, Taylor M, Coutsoudis A, Coovadia HM, Tomkins AM, Sullivan KR. A health and nutritional profile of rural school children in Kwa-Zulu Natal, South Africa. *Annals of Tropical Paediatrics* 2001; 21: 50-58.

(33) Monyeki KD, Cameroon N, Getz B. Growth and nutritional status of rural South African children 3-10 years old: The Ellisras Growth Study. *American Journal of Human Biology 2000*; 12: 42-49.

(34) Frantz J, Phillips JS, Amosun SL. The national policy framework on sport and recreation in South Africa. *African Journal of Physical, Health Education, Recreation and Dance* 2000; 6(2): 112-128.

(35) Reddy SP, Meyer-Weitz A. *Sense and Sensibilities. The psychosocial and contextual determinants of STD-related behaviours.* Medical Research Council, South Africa, 1999.

(36) Reddy P, Kok G, Van Den Borne B, Yach D. Unravelling Health Promotion: in Pursuit of more Successful Interventions. *CHASA Journal of Comprehensive Health* 1995; 6(3): 110-114.

(37) Reddy P, Swart D. Unravelling Health Promotion: A Framework for Action: Tobacco Control. *American Journal of Health Promotion, Global Perspectives* 2000; 3(4).

(38) Department of Education. *Education Statistics in South Africa at a Glance in 2000*. 2002. Department of Education.

(39) Norton K, Olds T. *Anthropometrica*. Sydney: University of New South Wales Press, 1996.

(40) Epi Info 2002 User's Manual. 2003.

(41) Frisancho AR. Anthropometric standards for the assessment of growth and nutritional status. The University of Michigan Press, 1990.

(42) Gibson RS. *Principles of Nutritional Assessment*. Oxford: Oxford University Press, 1990.

(43) Cole TJ, Bellizi MC, Flegal KM, Dietz WH. Establishing a standard definition for child overweight and obesity world-wide: International survey. British Medical Journal 2000; 320: 1240-1250.

(44) Hoshaw-Woodard S. *Description and Comparison of the Methods of Cluster Sampling and Lot Quality Assurance Sampling to Assess Immunization Coverage*. 2001. Geneva: World Health Organisation.

(45) SPSS User's Manual. 2003.

(46) World Health Organisation. *World Report on Violence and Health*. 2002. Geneva: World Health Organisation.

(47) Cooper PN, Milroy CM. The coroner's system and underreporting of suicide. *Medicine, Science and the Law* 1995; 35: 319-326.

(48) Waern M, Beskow J, Runesbon B, Skoog I. Suicidal feelings in the last year of life in elderly people who commit suicide. *Lancet* 1999; 354: 917-918.

(49) World Health Organisation. *Primary prevention of mental, neurological and psychosocial disorders*. 1998. Geneva: World Health Organisation.

(50) Blumenthal SJ. Suicide: a guide to risk factors, assessment, and treatment of suicidal patients. *Medical Clinics of North America* 1988; 72: 937-971.

(51) Hirschowitz R, Orkin M. *A National Household Survey of Health Inequalities in South Africa.* The Henry J. Kaiser Family Foundation, 1994.

(52) Swart L, Seedat M, Stevens G. *The prevalence of violence in teenage dating relationships and associated factors.* [2]. 2000. ISHS Monograph Series. 2000.

(53) Butchart A. *Fatal Injuries in South Africa* 1999. 2000. Department of Arts, Culture, Science and Technology.

(54) Murray C, Lopez A. *The Global Burden of Disease.* Cambridge: Harvard University Press, 1996.

(55) Krug E, ed. Injury: *A leading cause of global burden of disease.* 1999. Geneva: World Health Organisation.

(56) National Department of Transport, South Africa. *The Road to Safety - 2001-2005*. 2001.

(57) Department of Transport. Contract Report - *An estimate of the unit cost of road traffic collisions in South Africa for 1998.* 2000. Department of Transport.

(58) Halman SI, Chipman M, Parkin PC, Wright JG. Are seat belt restraints as effective in school age children as in adults? A prospective crash study. *British Medical Journal* 2002; 324.

(59) *Government Gazette*. National Road Traffic Act, 1996. 1996.

(60) ITP Consortium. *Arrive Alive - Monitoring and Reporting.* Report on a Selection of Road Traffic Offences 2001/2002. 2002.

(61) Matzopoulos R, ed. *A Profile of Fatal Injuries in South Africa 2001.* Third Annual Report of the National Injury Mortality Surveillance System (NIMSS). Medical Research Council, University of South Africa. 2002.

(62) Van der Spuy J. The trauma impact of alcohol and other substances. *Trauma Review*. 1[8], 1-3. 2000. Cape Town: South African Medical Research Council.

(63) World Health Organisation. *The World Health Report 2000* - Health Systems: improving performance. 2000.

(64) DeLeo D, Bertolote J, Lester D. Self-directed violence. In: Krug EG, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, eds. *World Report on Violence and Health.* 183-212. Geneva: World Health Organisation. 2002.

(65) Peto R, Lopez AD, Boreham J, Thun M, Heath C Jr. *Mortality from Smoking in Developed Countries*. Oxford: Oxford University Press, 1994.

(66) Sitas F, Madhoo J, Wessie J. Cancer in South Africa, 1993-1995. South African Institute for Medical Research. 1998. Johannesburg: National Cancer Registry of South Africa.

(67) Vital Registration Reports. Tobacco attributed mortality in black and mixed race South Africans. 2002.

(68) Martin G, Steyn K, Yach D. Beliefs about smoking and health attitudes toward tobacco control measures. *South African Medical Journal* 1992; 82.

(69) Reddy P, Meyer-Weitz A, Yach D. Smoking Status, Knowledge of Health effects and attitudes towards tobacco control in South Africa. *South African Medical Journal* 1996; 86(11): 1389-1393.

(70) Reddy P, Meyer-Weitz A, Levin J. Smoking prevalence among adult smokers in South Africa. Unpublished report. 1998. Cape Town, National Health Promotion Research and Development Office, Medical Research Council.

(71) *Government Gazette*. Tobacco Products Control Act No. 83. Gazette No. 14916. Vol. 337. 1993.

(72) United Nations Office for Drug Control and Crime Prevention. World Drug Report 2000. 2000. New York: Oxford University Press.

(73) Bhana A, Parry CDH, Myers B, Pluddemann A, Morojele NK, Flisher AJ. The South African Community Epidemiology Network on Drug Use (SACENDU) Project, Phases 1-8 - Cannabis and Mandrax. *South African Medical Journal* 2002; 92(7).

(74) Rocha-Silva L. *The Nature and Extent of Drug Use and the Prevalence of Related Problems in South Africa.* 1998. Pretoria: Human Sciences Research Council.

(75) Rocha-Silva A, de Miranda S, Erasmus R. *Alcohol, tobacco and other drug use among black youth*. 1996. Pretoria; Human Sciences Research Council, 1996.

(76) Alcohol and Drug Abuse Research Group MRC. South African Community Epidemiology Network on Drug Use (SACENDU) - Phase 1 - 12. 2002. Parowvallei: Medical Research Council.

(77) Kaaya SF, Flisher AJ, Mbwambo JK, Schaalma H, Aaro LE, Klepp KI. A review of studies of sexual behaviour of school students in sub-Saharan Africa. Scandanavian Journal of Public Health 2002; 30: 148-160.

(78) Shisana O. *Nelson Mandela HSRC Study of HIV/AIDS. South African National HIV Prevalence, Behavioural Risks and Mass Media. Household Survey 2002*. 2002. Cape Town: Human Sciences Research Council.

(79) Klepp KI, Ndeki SS, Thuen F. Predictors of intention to be sexually active among Tanzanian school children. *East African Medical Journal* 1996; 73(4): 218 – 224.

(80) Department of Health SA. *National HIV and Syphilis Antenatal Sero-prevalence Survey in South Africa*. 2002. Department of Health.

(81) Dickson-Tetteh K, Ladha S. Youth Health. South African Health Review. 2000. Health Systems Trust.

(82) Varga C, Shongwe B. *School-based reproductive health education.* 1999. Durban: Health Systems Trust.

(83) Jinabhai CC, Taylor M, Sullivan KR. Implications of the prevalence of stunting, overweight and obesity amongst South African primary school children: a possible nutritional transition? *European Journal of Clinical Nutrition* 2003; 57: 358-365.

(84) Chopra M, Galbraith S, Darnton-Hill I. A global response to a global problem: the epidemic of overnutrition. *Bulletin of the World Health Organisation* 2002; 80(12): 952-958.

(85) Centers for Disease Control and Prevention - *Morbidity and Mortality Weekly Report*. Youth Risk Behavior Surveillance-United States, 2001. 2002. Vol. 51, No. SS – 4.

(86) Sallis FS. Overcoming inactivity in young people. *The Physician and Sportsmedicine* 2000; 28(10).

(87) Centers for Disease Control and Prevention. *Guidelines for school and community programs. Promoting lifelong physical activity.* 2000.

(88) Scully D, Kremer J, Meade MM, Graham R, Dudgeon K. Physical exercise and psychological well being: a critical review. *British Journal of Sports Medicine* 1998; 32: 111-120.

(89) World Health Organisation. *Reducing mortality from major killers of children* - Fact Sheet. 1998. WHO; Fact Sheet.

(90) Bradshaw D, Groenewald P, Laubscher R, Nannan N, Nojilana B, Norman R et al. Initial estimates from the South African National Burden of Disease Study. 2003. Medical Research Council.

(91) Minister of Water Affairs and Forestry. *WASH - Water, Sanitation, and Hygiene for all.* 2002.

(92) Department of Education. *Report on the School Register of Needs 2000 Survey.* 2000.

(93) Macgregor IDM, Balding J, Regis D. Toothbrushing schedule, motivation and 'lifestyle' behaviours in 7,770 young adolescents. *Community Dental Health* 1996; 13: 232-237.

(94) Naidoo S, Chikte UME, Moola H, Steyn K. Perceptions of oral health: The South African Demographic and Health Survey of 1998. *South African Dental Journal* 2001; 56: 505-510.

(95) *Government Gazette*. National Youth Commission Act 19 of 1996. 1996.

(96) Office of the President. Speech by President Nelson Mandela on South African Youth Day. 1996.

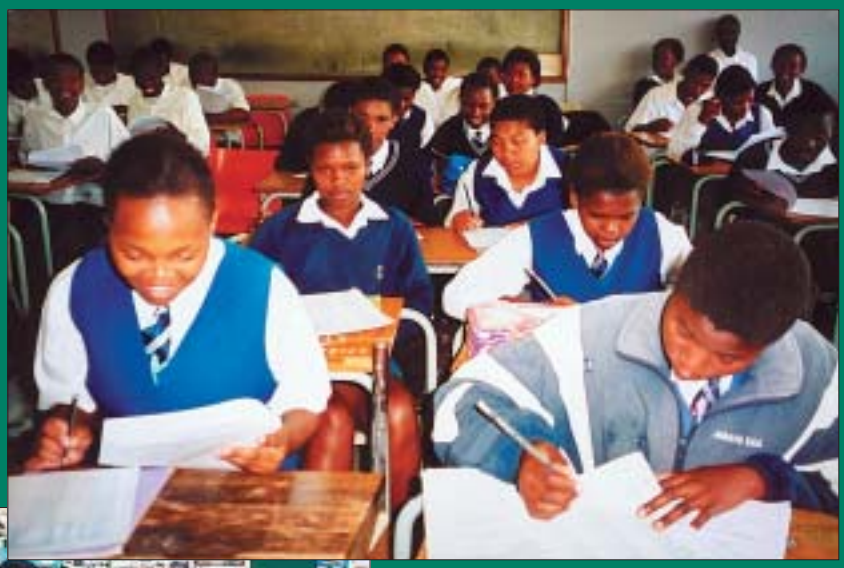
(97) Burke, Milligan RAK, Beilin LG, Dunbar D, Spencer M, Balde E et al. Clustering of Health Related Behavior Among 18yr old Australians. *Preventive Medicine* 1997; 26: 724-733.

(98) Prattala R, Karisto A, Berg MA. Consistency and Variation in Unhealthy Behavior among Finnish Men. *Social Science and Medicine* 1994; 39: 115-122.

(99) Jessor R. Risk Behavior in Adolescence, A Psychosocial Framework for Understanding and Action. *Journal of Adolescent Health* 1991; 12: 597-605.

(100) Richard R, Swartz MD. Lets help young smokers quit. 45-51. 1996. Patient Care/April 30, 1996.

SECTION D
APPENDICES



APPENDIX I

HEALTH PROMOTION		MOTHER & CHILD		SCHOOL NURSE		NUTRITION		WELFARE		LIFE SKILLS		COMMUNITY MEMBERS		TOTAL PER PROVINCE	
T	P	T	P	T	P	T	P	T	P	T	P	T	P	T	P
Eastern Cape Province															
16	10	9	6	1	1	5	5	3	3	13	7	-	-	47	32
Free State Province															
27	25	-	-	-	-	28	22	-	-	3	3	14	-	72	50
Gauteng Province															
33	26	-	-	10	6	5	1	-	-	3	2	4	4	55	39
Kwazulu-Natal Province															
15	10	-	-	18	15	14	14	-	-	5	3	6	3	58	45
Limpopo Province															
19	13	-	-	1	1	18	18	-	-	12	11	20	8	70	51
Mpumalanga Province															
18	13	-	-	9	7	11	8	-	-	6	5	11	1	55	34
North West Province															
-	-	-	-	-	-	14	13	-	-	1	-	32	24	47	37
Northern Cape Province															
17	17	-	-	13	13	7	7	-	-	9	9	20	8	66	54
Western Cape Province															
19	17	-	-	10	8	1	1	-	-	7	6	3	3	40	35
TOTAL															
164	131	9	6	62	51	103	89	3	3	59	46	110	51	510	377

T = Trained P = Participated

Figure VI: Survey Administrators who were trained and who participated in conducting the survey by Government Department and Province

APPENDIX II

(Tables of results by individual behaviour)

List of Tables

Table 3: Percentage of high school learners who carried a weapon by gender, race, grade, age and province

		CARRIED ANY WEAPON[3,4]			CARRIED A GUN[4]			CARRIED A KNIFE[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,851	5,543	10,394	4,786	5,460	10,246	4,872	5,571	10,443
	%	28.2	7.6	16.7	12.2	5.5	8.5	25.9	11.4	17.8
	LCL[1]	26.2	6.3	15.2	10.5	4.2	7.2	23.7	9.3	16.0
	UCL[2]	30.3	8.9	18.2	13.9	6.9	9.8	28.2	13.5	19.7
EASTERN CAPE	n	473	638	1,111	469	629	1,098	481	647	1,128
	%	38.7	5.2	19.6	14.2	3.2	7.9	42.4	12.9	25.7
	LCL	29.9	2.5	14.8	7.7	1.6	4.6	33.5	7.8	19.4
	UCL	47.5	7.9	24.3	20.6	4.8	11.2	51.4	18.0	31.9
FREE STATE	n	542	576	1,118	532	568	1,100	540	573	1,113
	%	29.5	10.2	19.2	10.9	6.6	8.6	31.7	15.4	23.1
	LCL	25.2	6.8	15.9	7.1	2.8	6.1	29.0	10.2	19.0
	UCL	33.8	13.6	22.6	14.7	10.3	11.1	34.4	20.6	27.1
GAUTENG	n	527	613	1,140	521	606	1,127	528	620	1,148
	%	21.1	5.6	12.9	11.7	3.8	7.6	17.2	8.2	12.5
	LCL	17.8	2.3	10.9	8.7	2.2	6.1	13.7	4.7	9.2
	UCL	24.5	8.9	15.0	14.8	5.5	9.1	20.7	11.7	15.7
KWAZULU-NATAL	n	533	630	1,163	527	622	1,149	535	638	1,173
	%	29.0	6.4	16.3	10.9	5.7	8.0	23.0	9.6	15.4
	LCL	23.7	3.5	12.1	6.8	2.0	4.6	17.6	5.4	11.4
	UCL	34.3	9.3	20.5	15.0	9.4	11.4	28.3	13.9	19.5
LIMPOPO	n	470	521	991	468	516	984	467	524	991
	%	19.4	8.7	13.2	10.6	6.5	8.2	17.9	15.7	16.6
	LCL	14.9	4.3	9.1	6.1	2.5	4.1	10.6	6.0	9.0
	UCL	24.0	13.0	17.4	15.0	10.5	12.3	25.2	25.4	24.3
MPUMALANGA	n	595	649	1,244	581	625	1,206	595	650	1,245
	%	24.2	11.3	17.2	13.8	9.0	11.2	24.4	13.2	18.3
	LCL	19.9	7.9	13.9	10.0	3.3	6.7	21.6	9.7	15.3
	UCL	28.5	14.8	20.5	17.7	14.6	15.7	27.3	16.7	21.4
NORTHERN CAPE	n	474	570	1,044	466	562	1,028	475	573	1,048
	%	32.9	7.9	17.3	15.0	2.8	7.3	31.6	7.0	16.2
	LCL	25.0	2.3	9.3	9.0	-0.1	2.3	25.7	3.4	10.0
	UCL	40.8	13.5	25.4	21.0	5.7	12.4	37.4	10.6	22.5
NORTH WEST	n	610	566	1,176	601	563	1,164	614	567	1,181
	%	28.7	9.6	18.7	13.7	6.5	9.9	25.4	10.3	17.5
	LCL	24.0	4.4	14.7	7.4	1.4	4.6	20.3	5.3	13.1
	UCL	33.5	14.7	22.7	20.0	11.7	15.3	30.4	15.2	21.9
WESTERN CAPE	n	627	780	1,407	621	769	1,390	637	779	1,416
	%	38.2	7.7	20.2	14.0	5.5	9.0	33.0	8.8	18.8
	LCL	35.4	4.7	18.3	9.9	0.6	6.9	28.7	5.2	16.6
	UCL	40.9	10.8	22.1	18.1	10.5	11.1	37.2	12.4	21.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Such as a gun, knife, panga or kierrie
4. On one or more days in the month preceding the survey

		CARRIED ANY WEAPON[3, 4]			CARRIED A GUN[4]			CARRIED A KNIFE[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,851	5,543	10,394	4,786	5,460	10,246	4,872	5,571	10,443
	%	28.2	7.6	16.7	12.2	5.5	8.5	25.9	11.4	17.8
	LCL[1]	26.2	6.3	15.2	10.5	4.2	7.2	23.7	9.3	16.0
	UCL[2]	30.3	8.9	18.2	13.9	6.9	9.8	28.2	13.5	19.7
RACE: BLACK	n	3,588	4,035	7,623	3,549	3,974	7,523	3,608	4,062	7,670
	%	25.9	7.6	15.6	11.9	5.9	8.5	24.6	12.2	17.6
	LCL	23.4	6.2	14.0	10.2	4.4	7.2	22.2	9.8	15.6
	UCL	28.4	9.1	17.3	13.7	7.4	9.8	27.0	14.6	19.6
COLOURED	n	694	859	1,553	680	851	1,531	692	864	1,556
	%	38.5	7.0	21.7	14.4	4.5	9.1	31.1	8.8	19.1
	LCL	33.7	4.7	18.3	10.8	2.8	6.9	25.9	5.9	15.6
	UCL	43.3	9.4	25.2	18.0	6.1	11.3	36.4	11.7	22.5
WHITE	n	407	493	900	405	484	889	408	492	900
	%	32.6	8.0	18.9	9.6	1.9	5.3	29.8	8.6	18.0
	LCL	25.7	5.3	15.4	4.5	0.5	2.8	23.2	5.3	14.2
	UCL	39.5	10.8	22.5	14.7	3.3	7.8	36.3	11.9	21.8
INDIAN	n	65	67	132	61	66	127	66	67	133
	%	45.8	7.4	26.2	22.8	7.7	14.8	37.8	10.8	24.0
	LCL	34.2	2.7	17.9	3.1	-0.8	3.1	26.8	5.7	16.7
	UCL	57.5	12.0	34.4	42.5	16.3	26.5	48.7	15.9	31.4
OTHER	n	49	48	97	46	47	93	49	47	96
	%	40.1	6.3	25.5	14.7	8.9	12.2	25.2	5.1	16.6
	LCL	20.9	-0.2	17.5	3.7	0.2	6.0	1.1	-0.8	5.1
	UCL	59.3	12.8	33.6	25.7	17.6	18.3	49.3	11.0	28.1
GRADE 08	n	1,340	1,459	2,799	1,321	1,443	2,764	1,355	1,467	2,822
	%	29.1	9.8	19.0	13.7	6.6	10.0	27.8	14.6	20.9
	LCL	25.6	7.6	16.9	10.4	4.1	7.7	23.0	10.2	17.7
	UCL	32.5	11.9	21.1	17.0	9.0	12.2	32.6	18.9	24.1
GRADE 09	n	1,678	1,854	3,532	1,650	1,816	3,466	1,682	1,863	3,545
	%	30.9	8.9	19.4	11.2	6.7	8.8	31.3	12.7	21.5
	LCL	27.0	6.3	17.3	8.7	4.1	6.6	28.3	9.7	19.0
	UCL	34.8	11.5	21.4	13.7	9.2	11.0	34.2	15.7	24.0
GRADE 10	n	1,131	1,229	2,360	1,115	1,211	2,326	1,131	1,237	2,368
	%	26.3	6.2	13.6	11.1	4.6	7.0	23.2	9.7	14.6
	LCL	22.0	3.9	10.3	8.6	2.1	4.9	19.5	6.1	11.2
	UCL	30.6	8.5	16.9	13.7	7.1	9.1	26.8	13.2	18.0
GRADE 11	n	702	1,001	1,703	700	990	1,690	704	1,004	1,708
	%	24.6	4.3	13.5	12.5	3.8	7.7	16.7	7.0	11.4
	LCL	18.6	2.3	10.1	8.5	1.8	5.1	11.8	5.0	8.6
	UCL	30.7	6.3	16.9	16.4	5.8	10.3	21.5	9.1	14.2
AGE: 13 OR UNDER	n	285	520	805	283	512	795	287	522	809
	%	19.4	6.5	11.0	5.5	3.8	4.4	20.7	17.5	18.6
	LCL	13.6	3.3	8.3	2.8	1.9	2.8	14.7	13.6	15.9
	UCL	25.3	9.8	13.6	8.3	5.7	6.0	26.8	21.4	21.3
14	n	631	946	1,577	628	941	1,569	637	949	1,586
	%	30.7	7.3	16.5	11.3	5.1	7.5	30.9	12.0	19.4
	LCL	26.1	4.4	13.5	7.9	2.5	5.1	26.1	7.6	15.7
	UCL	35.4	10.2	19.6	14.7	7.7	10.0	35.8	16.4	23.1
15	n	813	990	1,803	804	980	1,784	818	998	1,816
	%	26.5	6.4	14.5	8.3	5.1	6.4	24.4	9.8	15.7
	LCL	22.2	4.2	11.9	6.1	3.1	4.9	20.5	6.4	13.2
	UCL	30.7	8.7	17.0	10.6	7.1	7.9	28.3	13.3	18.1
16	n	919	1,021	1,940	913	1,003	1,916	926	1,021	1,947
	%	29.9	6.9	17.4	10.6	5.3	7.8	28.4	9.9	18.4
	LCL	26.2	4.5	14.6	8.3	2.5	5.8	23.9	6.9	15.1
	UCL	33.7	9.4	20.2	12.9	8.1	9.7	32.9	12.9	21.6
17	n	797	797	1,594	783	782	1,565	801	800	1,601
	%	30.1	7.8	18.0	15.5	4.9	9.7	26.9	9.4	17.3
	LCL	24.6	5.2	14.2	11.9	2.6	7.1	23.5	6.1	14.4
	UCL	35.5	10.5	21.7	19.1	7.2	12.4	30.2	12.7	20.3
18	n	475	414	889	471	408	879	475	418	893
	%	26.9	9.1	17.7	15.9	7.4	11.5	23.9	13.7	18.6
	LCL	22.8	5.7	14.4	11.9	3.4	8.1	18.4	9.4	14.4
	UCL	31.1	12.5	21.1	20.0	11.5	14.9	29.4	17.9	22.8
19 OR OVER	n	706	556	1,262	688	546	1,234	707	561	1,268
	%	27.2	10.7	19.8	14.5	9.7	12.3	25.0	13.7	19.8
	LCL	20.6	6.0	16.1	11.0	5.3	9.7	19.8	9.1	16.8
	UCL	33.7	15.5	23.5	18.0	14.1	15.0	30.2	18.3	22.9

Table 4: Percentage of high school learners who engaged in violence-related behaviours by gender, race, grade, age and province

		WAS BULLIED[3]			WAS IN A PHYSICAL FIGHT[4]			WAS INJURED IN A PHYSICAL FIGHT[4,5]			MEMBER OF A GANG[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,869	5,578	10,447	4,848	5,557	10,405	1,911	1,377	3,288	4,784	5,491	10,275
	%	39.5	42.3	41.0	37.3	24.5	30.2	29.2	29.3	29.3	18.1	11.4	14.3
	LCL[1]	37.4	38.5	38.4	35.2	22.5	28.5	26.1	23.0	25.5	16.2	9.4	12.6
	UCL[2]	41.6	46.0	43.6	39.5	26.5	31.8	32.3	35.7	33.1	19.9	13.4	16.0
EASTERN CAPE	n	478	647	1,125	476	643	1,119	198	166	364	470	636	1,106
	%	30.8	43.3	37.9	42.2	27.5	33.8	24.4	20.3	22.5	13.9	5.3	9.0
	LCL	24.2	33.9	32.7	36.2	19.4	27.5	12.3	12.0	14.7	8.1	2.3	5.0
	UCL	37.3	52.7	43.2	48.2	35.7	40.2	36.6	28.5	30.3	19.8	8.3	13.0
FREE STATE	n	543	577	1,120	544	578	1,122	245	143	388	532	572	1,104
	%	48.4	50.1	49.3	45.7	27.9	36.2	35.7	32.3	34.3	18.5	11.8	14.9
	LCL	44.8	44.2	46.2	40.9	22.6	31.4	28.4	21.6	27.8	13.3	8.6	11.3
	UCL	51.9	56.0	52.4	50.4	33.2	41.1	42.9	43.0	40.7	23.7	15.1	18.6
GAUTENG	n	528	617	1,145	526	616	1,142	210	142	352	523	613	1,136
	%	45.1	44.0	44.5	41.9	25.0	33.0	18.8	21.1	19.7	19.9	6.1	12.6
	LCL	42.4	39.4	41.6	35.5	21.8	30.3	13.3	16.7	16.1	14.9	3.6	9.0
	UCL	47.8	48.6	47.4	48.4	28.1	35.7	24.4	25.5	23.4	24.8	8.5	16.2
KWAZULU-NATAL	n	535	640	1,175	530	635	1,165	150	137	287	513	625	1,138
	%	36.6	34.8	35.6	27.4	23.3	25.1	32.3	31.8	32.0	16.8	14.3	15.4
	LCL	30.3	23.4	27.1	24.0	18.8	21.9	24.5	9.9	18.5	11.9	10.1	11.2
	UCL	43.0	46.2	44.2	30.8	27.8	28.3	40.1	53.6	45.6	21.7	18.6	19.6
LIMPOPO	n	472	525	997	469	526	995	167	128	295	463	518	981
	%	37.8	39.9	39.0	36.1	23.2	28.6	36.1	39.2	37.6	19.5	15.8	17.4
	LCL	33.0	34.3	34.6	29.3	18.3	24.1	27.8	20.5	27.0	14.9	6.6	11.0
	UCL	42.6	45.4	43.4	42.8	28.0	33.2	44.4	58.0	48.1	24.1	25.0	23.7
MPUMALANGA	n	592	656	1,248	588	645	1,233	232	174	406	587	638	1,225
	%	43.2	45.3	44.4	39.7	29.0	33.9	35.0	44.5	39.5	23.1	19.0	20.9
	LCL	38.4	37.2	38.5	33.8	20.8	27.4	24.9	26.4	26.6	17.7	14.0	16.4
	UCL	48.1	53.3	50.2	45.6	37.2	40.4	45.1	62.6	52.3	28.6	24.0	25.4
NORTHERN CAPE	n	480	573	1,053	477	573	1,050	218	171	389	474	564	1,038
	%	50.8	60.2	56.7	49.2	18.8	30.3	18.6	29.5	22.9	16.5	10.0	12.5
	LCL	44.1	34.3	40.8	39.9	12.7	22.0	11.8	16.5	15.1	12.5	-1.5	3.7
	UCL	57.6	86.2	72.5	58.4	24.9	38.5	25.4	42.6	30.7	20.5	21.6	21.2
NORTH WEST	n	612	569	1,181	607	564	1,171	218	123	341	597	557	1,154
	%	42.5	45.1	43.8	37.4	19.6	28.1	30.1	23.5	27.6	17.1	7.6	12.1
	LCL	39.8	39.9	40.5	30.7	13.7	22.7	19.4	7.6	15.9	12.5	5.1	9.1
	UCL	45.1	50.2	47.2	44.1	25.5	33.5	40.8	39.3	39.3	21.6	10.2	15.2
WESTERN CAPE	n	629	774	1,403	631	777	1,408	273	193	466	625	768	1,393
	%	36.6	45.7	41.9	39.8	24.6	30.9	27.5	20.1	24.0	18.3	8.7	12.7
	LCL	30.6	41.8	38.6	33.7	20.4	26.0	19.6	6.4	17.3	13.4	4.5	9.6
	UCL	42.6	49.6	45.3	46.0	28.8	35.8	35.4	33.9	30.8	23.2	12.9	15.8

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. During the month preceding the survey
4. One or more times during the 6 months preceding the survey
5. Of those who were involved in a physical fight during the 6 months preceding the survey
6. During the 6 months preceding the survey

		WAS BULLIED[3]			WAS IN A PHYSICAL FIGHT[4]			WAS INJURED IN A PHYSICAL FIGHT[4,5]			MEMBER OF A GANG[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,869	5,578	10,447	4,848	5,557	10,405	1,911	1,377	3,288	4,784	5,491	10,275
	%	39.5	42.3	41.0	37.3	24.5	30.2	29.2	29.3	29.3	18.1	11.4	14.3
	LCL[1]	37.4	38.5	38.4	35.2	22.5	28.5	26.1	23.0	25.5	16.2	9.4	12.6
	UCL[2]	41.6	46.0	43.6	39.5	26.5	31.8	32.3	35.7	33.1	19.9	13.4	16.0
RACE: BLACK	n	3,598	4,065	7,663	3,585	4,050	7,635	1,354	994	2,348	3,540	4,002	7,542
	%	38.2	40.1	39.2	35.9	25.0	29.8	30.9	30.7	30.8	18.0	11.9	14.6
	LCL	35.7	36.3	36.5	33.5	22.9	28.1	27.5	23.5	26.5	15.9	9.4	12.6
	UCL	40.6	43.9	42.0	38.3	27.0	31.4	34.3	38.0	35.0	20.1	14.4	16.6
COLOURED	n	695	865	1,560	693	860	1,553	315	250	565	686	850	1,536
	%	45.7	52.7	49.5	47.4	28.1	37.1	26.2	26.0	26.1	18.4	7.8	12.7
	LCL	38.8	44.5	43.7	40.3	21.8	31.4	19.1	18.2	19.8	13.1	4.1	9.3
	UCL	52.6	61.0	55.3	54.6	34.5	42.7	33.2	33.7	32.4	23.8	11.5	16.1
WHITE	n	408	492	900	411	490	901	175	99	274	410	490	900
	%	43.0	54.5	49.4	39.1	19.9	28.5	16.9	12.9	15.3	15.9	10.3	12.8
	LCL	36.7	49.4	45.3	30.7	14.3	22.2	8.3	4.8	9.1	11.7	5.8	9.4
	UCL	49.3	59.6	53.5	47.4	25.5	34.7	25.4	21.1	21.6	20.1	14.9	16.2
INDIAN	n	67	67	134	66	67	133	34	19	53	63	68	131
	%	38.3	39.4	38.8	52.9	21.3	36.8	30.0	41.8	33.5	25.5	12.6	18.5
	LCL	27.0	27.0	28.8	37.8	11.7	27.2	-0.1	7.0	5.7	10.7	2.7	12.7
	UCL	49.5	51.8	48.9	68.0	31.0	46.3	60.1	76.6	61.3	40.3	22.5	24.4
OTHER	n	50	48	98	49	46	95	19	12	31	45	47	92
	%	47.0	54.4	50.2	24.8	19.7	22.6	22.7	26.3	24.1	17.5	8.0	13.3
	LCL	33.1	33.6	36.5	9.5	10.4	15.0	5.6	-5.0	12.1	4.8	-0.3	6.2
	UCL	60.8	75.3	63.9	40.1	28.9	30.2	39.7	57.6	36.2	30.3	16.2	20.3
GRADE 08	n	1,359	1,478	2,837	1,350	1,471	2,821	560	410	970	1,308	1,432	2,740
	%	39.9	39.1	39.5	39.2	26.4	32.5	32.3	32.0	32.2	20.4	15.9	18.0
	LCL	35.6	35.5	36.3	34.6	23.0	29.3	26.9	24.4	26.8	17.7	11.1	15.1
	UCL	44.2	42.7	42.6	43.8	29.8	35.6	37.8	39.6	37.6	23.2	20.6	21.0
GRADE 09	n	1,687	1,865	3,552	1,671	1,855	3,526	689	472	1,161	1,658	1,837	3,495
	%	43.1	45.8	44.5	40.8	27.5	33.8	29.2	26.9	28.2	16.6	9.9	13.1
	LCL	39.7	41.4	41.3	36.4	24.2	31.2	24.3	18.6	22.2	13.6	7.4	10.6
	UCL	46.6	50.2	47.7	45.1	30.9	36.4	34.1	35.2	34.2	19.6	12.3	15.6
GRADE 10	n	1,127	1,231	2,358	1,126	1,228	2,354	420	316	736	1,118	1,222	2,340
	%	34.3	40.9	38.5	36.0	23.5	28.1	23.5	33.6	28.9	18.6	9.7	13.0
	LCL	30.2	30.5	31.1	31.2	20.3	24.9	18.6	20.6	21.1	15.3	6.1	10.4
	UCL	38.5	51.3	45.9	40.7	26.6	31.2	28.5	46.6	36.8	21.9	13.4	15.6
GRADE 11	n	696	1,004	1,700	701	1,003	1,704	242	179	421	700	1,000	1,700
	%	39.7	45.2	42.7	29.4	18.0	23.1	30.9	16.4	24.7	15.0	9.2	11.8
	LCL	32.9	40.3	38.1	23.4	14.4	19.7	22.0	5.9	16.6	11.1	6.2	9.6
	UCL	46.5	50.0	47.3	35.3	21.6	26.5	39.7	26.9	32.8	19.0	12.1	14.1
AGE: 13 OR UNDER	n	287	524	811	288	523	811	127	134	261	283	517	800
	%	41.7	38.0	39.3	43.3	26.9	32.5	19.7	17.5	18.5	13.3	15.2	14.6
	LCL	35.0	30.5	33.4	35.8	20.4	27.2	10.3	7.4	11.5	8.7	11.2	11.6
	UCL	48.4	45.4	45.1	50.8	33.3	37.8	29.0	27.6	25.6	17.9	19.3	17.5
14	n	638	954	1,592	635	948	1,583	261	223	484	630	933	1,563
	%	41.6	38.7	39.8	37.0	24.1	29.2	23.6	28.3	26.0	20.0	11.3	14.8
	LCL	35.2	33.7	35.7	32.6	18.7	25.4	17.1	18.1	18.5	15.8	6.7	11.1
	UCL	47.9	43.7	43.9	41.4	29.6	33.1	30.1	38.6	33.5	24.3	15.9	18.4
15	n	817	998	1,815	810	996	1,806	328	239	567	799	982	1,781
	%	40.8	46.2	44.0	39.4	24.7	30.6	23.1	24.7	23.9	16.6	9.9	12.6
	LCL	35.7	40.8	40.0	35.0	20.8	27.6	17.9	17.5	20.0	13.3	7.1	10.2
	UCL	45.8	51.5	48.0	43.7	28.7	33.6	28.2	32.0	27.7	19.9	12.6	14.9
16	n	926	1,018	1,944	917	1,018	1,935	372	248	620	902	1,011	1,913
	%	39.3	45.9	42.9	37.6	23.8	30.1	30.2	27.7	29.1	17.0	10.7	13.6
	LCL	35.5	40.0	39.8	33.4	18.9	26.8	25.3	17.9	23.8	14.2	7.9	11.3
	UCL	43.2	51.9	46.1	41.8	28.6	33.4	35.1	37.5	34.4	19.8	13.6	15.9
17	n	798	802	1,600	798	795	1,593	300	176	476	790	786	1,576
	%	39.9	39.7	39.8	37.5	23.5	29.9	34.6	27.8	31.7	18.8	12.3	15.2
	LCL	35.6	30.5	34.3	32.9	17.6	25.9	26.9	13.5	22.8	15.7	4.5	11.1
	UCL	44.2	49.0	45.3	42.1	29.5	34.0	42.2	42.2	40.5	21.9	20.0	19.4
18	n	475	419	894	480	417	897	183	112	295	470	415	885
	%	40.7	38.4	39.5	35.5	23.5	29.3	35.3	50.5	41.8	22.5	7.6	14.7
	LCL	32.7	28.6	32.7	29.7	16.6	24.5	25.5	35.2	30.9	16.6	4.0	11.3
	UCL	48.7	48.2	46.4	41.2	30.4	34.2	45.2	65.7	52.6	28.4	11.2	18.1
19 OR OVER	n	705	561	1,266	699	558	1,257	245	147	392	692	549	1,241
	%	39.1	46.2	42.3	32.8	23.2	28.4	37.1	43.6	39.5	17.2	11.9	14.8
	LCL	31.8	39.2	37.5	28.1	18.0	25.0	29.2	33.2	33.3	13.3	7.8	11.8
	UCL	46.3	53.2	47.1	37.4	28.4	31.8	44.9	54.0	45.6	21.2	16.0	17.8

Table 5: Percentage of high school learners who perpetrated or suffered partner violence and coerced sex by gender, race, grade, age and province

		WAS ASSAULTED BY BOYFRIEND/ GIRLFRIEND[3]			ASSAULTED BOYFRIEND/ GIRLFRIEND[3]			WAS EVER FORCED TO HAVE SEX[4]			EVER FORCED SOMEONE ELSE TO HAVE SEX[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,462	10,202	4,812	5,540	10,352	4,786	5,530	10,316	4,736	5,472	10,208
	%	14.4	12.9	13.6	15.2	11.7	13.2	8.1	11.1	9.8	9.8	7.2	8.3
	LCL[1]	12.4	10.8	11.8	13.3	9.7	11.6	6.7	8.9	8.3	8.0	5.3	6.8
	UCL[2]	16.3	15.1	15.4	17.1	13.7	14.8	9.5	13.3	11.3	11.6	9.0	9.9
EASTERN CAPE	n	461	623	1,084	471	637	1,108	463	635	1,098	464	630	1,094
	%	15.6	10.6	12.7	15.1	6.7	10.3	8.0	10.1	9.2	8.9	4.6	6.4
	LCL	11.0	6.2	9.2	7.2	4.1	5.7	2.3	7.6	5.8	3.9	1.8	2.9
	UCL	20.2	14.9	16.2	23.1	9.3	14.9	13.7	12.6	12.6	13.9	7.3	9.9
FREE STATE	n	527	573	1,100	537	579	1,116	533	576	1,109	533	573	1,106
	%	13.0	14.1	13.6	13.7	13.1	13.4	6.9	15.0	11.3	8.4	7.3	7.8
	LCL	8.8	9.4	9.5	10.8	9.7	11.2	4.5	10.4	8.0	4.8	4.4	5.8
	UCL	17.3	18.8	17.7	16.7	16.4	15.6	9.2	19.6	14.5	12.0	10.3	9.9
GAUTENG	n	519	614	1,133	524	613	1,137	522	613	1,135	524	606	1,130
	%	14.7	12.4	13.5	16.4	8.7	12.4	8.9	10.6	9.8	8.8	5.4	7.0
	LCL	12.2	8.7	10.7	11.6	6.1	9.7	7.0	7.5	8.0	4.9	3.7	4.5
	UCL	17.3	16.2	16.3	21.3	11.3	15.1	10.8	13.7	11.5	12.7	7.0	9.5
KWAZULU-NATAL	n	518	625	1,143	525	629	1,154	517	629	1,146	506	615	1,121
	%	12.4	11.3	11.8	14.8	10.6	12.4	7.3	9.7	8.7	10.7	7.8	9.1
	LCL	6.8	5.8	6.6	10.8	5.3	8.5	4.6	3.3	4.5	6.0	3.7	5.3
	UCL	18.0	16.9	17.0	18.8	15.9	16.3	10.0	16.1	12.9	15.5	11.9	12.9
LIMPOPO	n	459	515	974	466	523	989	463	524	987	458	521	979
	%	17.9	18.0	18.0	18.6	19.4	19.1	8.9	15.6	12.8	13.4	12.7	13.0
	LCL	12.3	9.8	11.9	13.0	11.0	13.4	3.8	7.1	7.1	7.8	3.2	6.0
	UCL	23.4	26.3	24.0	24.2	27.8	24.8	13.9	24.0	18.5	18.9	22.2	20.0
MPUMALANGA	n	576	632	1,208	583	653	1,236	587	646	1,233	573	639	1,212
	%	13.5	14.9	14.3	14.2	14.5	14.3	10.9	13.2	12.2	11.5	8.8	10.0
	LCL	6.6	11.1	9.4	7.0	10.1	9.0	8.6	10.3	10.1	5.8	4.8	5.5
	UCL	20.4	18.7	19.1	21.4	18.8	19.7	13.2	16.1	14.2	17.3	12.9	14.6
NORTHERN CAPE	n	471	564	1,035	474	570	1,044	472	568	1,040	471	560	1,031
	%	13.2	11.3	12.0	13.9	8.7	10.7	7.1	7.2	7.2	10.8	3.2	6.1
	LCL	10.1	5.2	7.8	8.6	5.0	7.1	4.2	1.9	3.9	5.9	0.5	2.7
	UCL	16.3	17.4	16.3	19.3	12.4	14.2	10.1	12.4	10.4	15.7	5.8	9.4
NORTH WEST	n	595	556	1,151	605	563	1,168	605	566	1,171	595	562	1,157
	%	13.3	7.4	10.2	12.3	7.0	9.5	5.7	6.3	6.0	6.8	3.6	5.1
	LCL	7.5	4.6	6.7	7.0	4.4	6.0	2.3	2.9	3.1	3.0	1.4	2.1
	UCL	19.2	10.2	13.8	17.7	9.6	13.1	9.1	9.8	8.9	10.7	5.8	8.1
WESTERN CAPE	n	614	760	1,374	627	773	1,400	624	773	1,397	612	766	1,378
	%	15.1	14.7	14.9	14.5	12.8	13.5	9.2	9.5	9.4	6.5	4.7	5.4
	LCL	9.0	10.1	10.3	9.8	8.9	9.7	2.1	7.1	6.1	3.5	3.1	3.9
	UCL	21.2	19.3	19.4	19.2	16.7	17.3	16.2	12.0	12.7	9.5	6.3	7.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. During the 6 months preceding the survey
4. Coerced sex (when the penis enters the vagina or anus)

		WAS ASSAULTED BY BOYFRIEND/ GIRLFRIEND[3]			ASSAULTED BOYFRIEND/ GIRLFRIEND[3]			WAS EVER FORCED TO HAVE SEX[4]			EVER FORCED SOMEONE ELSE TO HAVE SEX[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,462	10,202	4,812	5,540	10,352	4,786	5,530	10,316	4,736	5,472	10,208
	%	14.4	12.9	13.6	15.2	11.7	13.2	8.1	11.1	9.8	9.8	7.2	8.3
	LCL[1]	12.4	10.8	11.8	13.3	9.7	11.6	6.7	8.9	8.3	8.0	5.3	6.8
	UCL[2]	16.3	15.1	15.4	17.1	13.7	14.8	9.5	13.3	11.3	11.6	9.0	9.9
RACE: BLACK	n	3,504	3,981	7,485	3,562	4,049	7,611	3,541	4,036	7,577	3,503	3,995	7,498
	%	15.3	13.7	14.4	16.6	12.3	14.2	8.8	11.5	10.4	10.3	8.1	9.0
	LCL	12.9	11.5	12.4	14.6	10.1	12.5	7.1	9.1	8.7	8.5	5.9	7.3
	UCL	17.7	15.9	16.4	18.7	14.5	15.9	10.5	14.0	12.0	12.1	10.3	10.8
COLOURED	n	679	849	1,528	687	852	1,539	684	858	1,542	676	845	1,521
	%	13.3	13.8	13.6	12.9	10.5	11.7	6.2	11.6	9.1	9.2	3.1	5.9
	LCL	10.0	8.9	10.7	10.0	7.4	9.4	3.7	7.7	6.5	5.7	2.0	4.1
	UCL	16.5	18.7	16.5	15.9	13.7	13.9	8.6	15.5	11.7	12.7	4.3	7.8
WHITE	n	407	487	894	408	489	897	408	488	896	406	487	893
	%	5.9	5.8	5.8	4.7	6.7	5.8	2.4	7.1	5.0	3.2	2.1	2.6
	LCL	3.0	3.6	3.9	2.0	4.2	3.5	0.9	4.1	3.2	1.0	0.5	1.0
	UCL	8.8	8.1	7.8	7.5	9.1	8.1	3.8	10.2	6.8	5.3	3.7	4.2
INDIAN	n	61	66	127	63	65	128	64	66	130	62	66	128
	%	5.7	9.8	7.9	7.0	14.0	10.7	4.3	3.5	3.9	6.8	6.9	6.8
	LCL	-0.3	-0.6	0.3	0.1	-0.9	1.1	-0.8	-2.2	-0.3	-3.9	-1.1	-0.5
	UCL	11.7	20.2	15.5	13.8	29.0	20.3	9.5	9.2	8.2	17.4	14.9	14.1
OTHER	n	48	44	92	47	46	93	48	47	95	48	45	93
	%	12.6	8.9	11.1	10.2	5.2	8.0	12.0	14.5	13.0	16.0	11.5	14.1
	LCL	3.2	0.5	5.4	1.1	-0.7	3.0	2.8	0.0	5.1	1.0	-0.6	2.3
	UCL	22.0	17.3	16.7	19.3	11.1	13.1	21.1	29.0	21.0	31.0	23.7	26.0
GRADE 08	n	1,289	1,432	2,721	1,333	1,454	2,787	1,320	1,457	2,777	1,303	1,439	2,742
	%	17.1	11.5	14.1	15.1	12.8	13.9	10.2	11.8	11.1	12.8	8.9	10.8
	LCL	13.6	7.1	11.1	11.7	8.5	11.0	7.2	7.4	8.2	9.5	4.6	7.8
	UCL	20.6	15.9	17.2	18.4	17.1	16.8	13.3	16.3	14.0	16.2	13.2	13.7
GRADE 09	n	1,639	1,821	3,460	1,660	1,856	3,516	1,652	1,847	3,499	1,631	1,824	3,455
	%	14.6	14.2	14.4	17.2	10.3	13.5	9.0	10.6	9.9	10.5	7.1	8.7
	LCL	11.7	11.4	12.1	13.8	7.7	11.0	7.1	8.1	8.1	8.1	5.0	6.8
	UCL	17.4	17.0	16.7	20.6	12.9	16.0	10.9	13.1	11.6	12.9	9.2	10.7
GRADE 10	n	1,116	1,214	2,330	1,120	1,233	2,353	1,121	1,225	2,346	1,108	1,216	2,324
	%	12.9	13.2	13.1	13.1	12.3	12.6	7.0	11.3	9.8	6.2	6.6	6.4
	LCL	9.0	9.6	9.9	9.5	8.0	9.1	4.3	7.6	7.2	4.0	3.5	3.9
	UCL	16.8	16.9	16.3	16.6	16.5	16.1	9.8	15.1	12.3	8.5	9.6	9.0
GRADE 11	n	696	995	1,691	699	997	1,696	693	1,001	1,694	694	993	1,687
	%	10.7	12.8	11.9	15.2	10.5	12.6	3.7	10.0	7.2	7.5	5.3	6.3
	LCL	6.9	9.8	9.0	11.8	8.4	10.5	2.0	7.3	5.5	5.0	2.9	4.4
	UCL	14.5	15.8	14.7	18.5	12.6	14.6	5.5	12.6	8.9	9.9	7.6	8.2
AGE: 13 OR UNDER	n	278	518	796	283	520	803	281	519	800	281	513	794
	%	10.1	12.8	11.9	8.3	12.6	11.2	7.8	12.0	10.6	3.9	9.6	7.6
	LCL	5.7	10.3	9.4	4.8	9.8	9.0	3.0	8.9	8.0	1.1	7.3	5.7
	UCL	14.4	15.3	14.4	11.8	15.4	13.3	12.6	15.1	13.2	6.7	12.0	9.6
14	n	627	935	1,562	635	938	1,573	633	939	1,572	622	936	1,558
	%	13.5	8.3	10.4	11.4	7.8	9.2	7.6	7.1	7.3	9.4	4.5	6.4
	LCL	9.5	6.1	7.9	8.3	5.2	6.9	4.7	4.0	4.7	6.4	2.6	4.5
	UCL	17.5	10.6	12.8	14.6	10.3	11.5	10.4	10.3	9.9	12.5	6.4	8.4
15	n	796	976	1,772	809	992	1,801	808	992	1,800	797	980	1,777
	%	11.6	9.4	10.3	10.7	8.7	9.5	6.7	9.4	8.3	8.7	4.5	6.2
	LCL	8.7	7.4	8.5	7.9	6.9	7.8	4.4	6.9	6.5	5.6	2.6	4.3
	UCL	14.5	11.4	12.1	13.6	10.5	11.2	9.0	11.9	10.2	11.8	6.5	8.1
16	n	897	1,002	1,899	905	1,015	1,920	910	1,016	1,926	897	998	1,895
	%	13.5	12.5	12.9	15.1	11.4	13.0	7.7	11.8	9.9	10.1	5.8	7.7
	LCL	10.2	9.6	10.5	12.1	8.9	11.0	5.5	8.2	7.4	7.5	4.1	5.8
	UCL	16.8	15.4	15.4	18.0	13.9	15.1	9.9	15.3	12.4	12.8	7.5	9.7
17	n	770	782	1,552	792	797	1,589	782	793	1,575	777	787	1,564
	%	15.5	15.5	15.5	18.5	12.0	14.9	8.4	10.8	9.7	11.1	7.3	9.0
	LCL	12.3	11.3	13.0	13.6	7.6	12.2	6.4	7.1	7.7	8.7	2.5	5.7
	UCL	18.8	19.6	18.0	23.3	16.3	17.7	10.5	14.4	11.7	13.4	12.0	12.3
18	n	467	413	880	469	421	890	464	419	883	455	415	870
	%	19.7	16.4	18.0	20.8	12.8	16.6	13.6	14.0	13.8	12.1	11.0	11.5
	LCL	14.2	11.2	14.3	15.9	9.4	13.2	8.8	7.9	9.7	7.8	5.7	7.9
	UCL	25.2	21.7	21.7	25.7	16.3	20.1	18.3	20.1	18.0	16.5	16.3	15.1
19 OR OVER	n	686	540	1,226	698	557	1,255	689	554	1,243	689	549	1,238
	%	18.1	22.9	20.2	18.6	19.8	19.1	8.1	16.0	11.7	10.0	12.0	10.9
	LCL	13.2	16.5	16.0	14.1	12.9	14.9	5.6	12.6	9.4	7.5	8.9	8.9
	UCL	23.0	29.3	24.5	23.1	26.7	23.4	10.7	19.3	14.0	12.4	15.1	12.9

Table 6: Percentage of high school learners who engaged in violence-related behaviours on school property by gender, race, grade, age and province

		CARRIED ANY WEAPON AT SCHOOL[3]			WAS THREATENED/ INJURED BY SOMEONE WITH A WEAPON AT SCHOOL[4]			THREATENED/ INJURED SOMEONE ELSE WITH A WEAPON AT SCHOOL[4]			ENGAGED IN A PHYSICAL FIGHT AT SCHOOL[5]			FELT UNSAFE ON WAY TO AND FROM SCHOOL[6]			FELT UNSAFE AT SCHOOL[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,867	5,565	10,432	4,864	5,573	10,437	4,810	5,517	10,327	4,881	5,581	10,462	4,885	5,584	10,469	4,815	5,512	10,327
	%	13.0	6.3	9.2	19.1	11.6	14.9	11.9	7.1	9.2	24.0	15.5	19.3	24.0	21.0	22.3	31.7	31.7	31.7
	LCL[1]	11.5	4.8	8.0	17.0	9.5	13.5	10.4	5.0	7.6	22.2	13.4	17.6	21.3	18.3	20.1	28.5	28.1	28.6
	UCL[2]	14.5	7.7	10.5	21.2	13.7	16.4	13.4	9.1	10.8	25.7	17.7	20.9	26.7	23.8	24.6	34.9	35.3	34.8
EASTERN CAPE	n	478	644	1,122	482	646	1,128	469	640	1,109	482	645	1,127	481	645	1,126	470	642	1,112
	%	16.9	3.7	9.4	16.0	10.3	12.7	13.1	4.5	8.2	25.3	13.5	18.6	25.1	22.5	23.6	41.9	32.8	36.7
	LCL	12.2	0.7	5.5	10.4	4.5	8.4	8.6	0.3	4.2	20.2	8.6	13.9	17.3	14.8	16.1	29.5	19.0	25.2
	UCL	21.7	6.6	13.2	21.5	16.1	17.1	17.6	8.8	12.2	30.4	18.4	23.2	33.0	30.1	31.1	54.3	46.6	48.3
FREE STATE	n	543	576	1,119	542	579	1,121	542	575	1,117	545	579	1,124	544	580	1,124	539	575	1,114
	%	11.2	7.9	9.5	18.3	11.3	14.6	10.9	8.9	9.8	26.3	15.8	20.7	22.5	17.4	19.8	28.4	24.5	26.3
	LCL	7.8	3.7	6.0	14.7	8.2	11.5	8.4	4.9	6.8	20.0	11.9	15.1	16.3	14.7	15.7	21.2	21.8	21.8
	UCL	14.7	12.1	12.9	21.9	14.4	17.6	13.3	13.0	12.9	32.6	19.6	26.2	28.8	20.2	24.0	35.6	27.2	30.8
GAUTENG	n	530	620	1,150	529	618	1,147	523	615	1,138	531	619	1,150	534	619	1,153	524	606	1,130
	%	8.2	3.7	5.8	20.7	6.2	13.1	9.9	3.6	6.6	26.7	14.2	20.1	19.1	22.7	21.0	28.2	24.3	26.2
	LCL	6.1	2.1	4.4	16.8	4.7	11.2	6.0	1.4	4.0	22.1	11.3	17.1	15.6	18.8	17.7	24.2	22.2	23.3
	UCL	10.2	5.3	7.2	24.6	7.7	15.0	13.8	5.8	9.2	31.3	17.1	23.1	22.6	26.6	24.2	32.1	26.5	29.0
KWAZULU-NATAL	n	534	635	1,169	529	638	1,167	525	632	1,157	535	641	1,176	534	640	1,174	533	628	1,161
	%	14.5	7.2	10.4	20.1	14.6	17.0	11.1	8.1	9.4	18.4	14.9	16.4	29.2	18.9	23.4	34.0	36.4	35.4
	LCL	10.5	3.1	7.2	13.9	8.0	13.9	6.9	1.7	4.8	14.9	9.6	12.9	22.7	10.6	18.4	28.6	27.8	28.9
	UCL	18.6	11.4	13.6	26.4	21.2	20.0	15.2	14.6	14.0	21.8	20.1	19.9	35.7	27.1	28.3	39.5	45.1	41.9
LIMPOPO	n	470	523	993	470	524	994	467	522	989	473	525	998	469	522	991	465	521	986
	%	11.9	7.3	9.2	21.4	12.4	16.2	12.7	9.1	10.6	24.0	18.6	20.9	29.0	27.1	27.9	34.6	36.4	35.7
	LCL	8.0	2.9	5.5	16.9	6.5	10.9	9.2	2.9	5.8	18.3	10.2	14.6	18.3	18.7	18.8	22.5	26.2	25.3
	UCL	15.8	11.7	13.0	25.9	18.4	21.5	16.3	15.2	15.4	29.7	27.1	27.3	39.8	35.4	37.1	46.7	46.6	46.0
MPUMA-LANGA	n	594	651	1,245	596	653	1,249	581	641	1,222	592	652	1,244	596	653	1,249	586	639	1,225
	%	14.6	9.8	12.0	17.4	16.1	16.7	15.8	12.6	14.0	26.1	22.2	24.0	20.1	21.8	21.0	29.3	30.5	29.9
	LCL	9.7	5.1	7.4	12.2	9.2	11.1	9.7	6.2	8.0	21.9	14.2	18.1	13.2	12.6	13.3	19.4	21.6	20.9
	UCL	19.5	14.5	16.6	22.6	22.9	22.2	22.0	18.9	20.0	30.2	30.3	29.9	26.9	31.1	28.8	39.2	39.3	38.9
NORTHERN CAPE	n	473	571	1,044	476	572	1,048	470	567	1,037	478	574	1,052	478	576	1,054	468	569	1,037
	%	14.4	2.9	7.2	16.4	6.9	10.5	12.3	3.8	6.9	25.5	8.7	15.1	18.3	13.6	15.4	26.9	45.1	38.3
	LCL	9.7	1.2	4.5	12.4	5.0	7.4	7.8	2.1	4.3	17.7	5.3	10.5	14.2	9.9	12.4	20.3	6.2	10.8
	UCL	19.0	4.7	9.9	20.4	8.8	13.5	16.7	5.4	9.6	33.4	12.2	19.7	22.5	17.3	18.4	33.5	84.0	65.8
NORTH WEST	n	608	569	1,177	608	567	1,175	610	560	1,170	615	569	1,184	614	569	1,183	602	560	1,162
	%	13.6	8.7	11.1	19.2	12.1	15.5	12.8	7.1	9.8	27.2	16.6	21.7	22.4	18.2	20.2	28.5	29.0	28.8
	LCL	8.9	3.6	6.4	11.6	7.8	9.7	7.9	2.6	5.2	22.0	10.1	16.1	13.4	11.2	12.4	16.9	17.7	17.6
	UCL	18.4	13.9	15.7	26.8	16.4	21.2	17.8	11.6	14.5	32.5	23.2	27.3	31.5	25.2	28.0	40.0	40.3	40.0
WESTERN CAPE	n	637	776	1,413	632	776	1,408	623	765	1,388	630	777	1,407	635	780	1,415	628	772	1,400
	%	12.2	3.7	7.2	17.5	9.0	12.5	10.8	4.4	7.0	25.1	12.4	17.6	15.3	19.5	17.8	21.4	24.8	23.4
	LCL	8.6	1.5	5.5	12.9	6.9	9.5	7.0	2.8	4.7	17.8	9.4	13.1	10.3	14.0	13.5	15.7	18.6	18.1
	UCL	15.7	5.9	8.9	22.0	11.1	15.4	14.5	6.0	9.3	32.4	15.4	22.1	20.3	24.9	22.0	27.1	31.0	28.8

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. During the month preceding the survey (for example a gun, knife, panga or kierrie)
4. During the month preceding the survey (for example with a gun, knife, panga or kierrie)
5. During the month preceding the survey (for example punching or hitting)
6. During the month preceding the survey

		CARRIED ANY WEAPON AT SCHOOL[3]			WAS THREATENED/ INJURED BY SOMEONE WITH A WEAPON AT SCHOOL[4]			THREATENED/ INJURED SOMEONE ELSE WITH A WEAPON AT SCHOOL[4]			ENGAGED IN A PHYSICAL FIGHT AT SCHOOL[5]			FELT UNSAFE ON WAY TO AND FROM SCHOOL[6]			FELT UNSAFE AT SCHOOL[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,867	5,565	10,432	4,864	5,573	10,437	4,810	5,517	10,327	4,881	5,581	10,462	4,885	5,584	10,469	4,815	5,512	10,327
	%	13.0	6.3	9.2	19.1	11.6	14.9	11.9	7.1	9.2	24.0	15.5	19.3	24.0	21.0	22.3	31.7	31.7	31.7
	LCL[1]	11.5	4.8	8.0	17.0	9.5	13.5	10.4	5.0	7.6	22.2	13.4	17.6	21.3	18.3	20.1	28.5	28.1	28.6
	UCL[2]	14.5	7.7	10.5	21.2	13.7	16.4	13.4	9.1	10.8	25.7	17.7	20.9	26.7	23.8	24.6	34.9	35.3	34.8
RACE: BLACK	n	3,602	4,060	7,662	3,601	4,071	7,672	3,554	4,024	7,578	3,606	4,070	7,676	3,610	4,075	7,685	3,565	4,021	7,586
	%	12.8	6.7	9.4	19.8	12.8	15.8	12.0	7.6	9.5	23.5	17.1	19.9	26.3	23.1	24.5	34.6	32.8	33.6
	LCL	11.3	5.2	8.1	17.5	10.4	14.4	10.4	5.4	7.9	21.5	14.5	18.0	23.4	20.3	22.3	31.4	29.4	30.6
	UCL	14.3	8.3	10.6	22.1	15.2	17.3	13.6	9.8	11.2	25.4	19.6	21.7	29.2	26.0	26.7	37.7	36.3	36.5
COLOURED	n	699	862	1,561	696	857	1,553	690	856	1,546	699	864	1,563	698	861	1,559	685	852	1,537
	%	15.5	5.9	10.4	18.8	8.5	13.3	14.7	6.5	10.3	27.2	12.7	19.4	19.9	14.0	16.8	25.6	32.3	29.2
	LCL	11.9	3.6	7.9	14.4	6.1	10.4	10.5	3.5	7.4	21.0	9.1	15.7	15.4	10.7	13.6	21.5	20.3	22.2
	UCL	19.1	8.2	12.8	23.2	10.8	16.2	18.9	9.4	13.2	33.3	16.3	23.2	24.4	17.4	20.0	29.6	44.3	36.1
WHITE	n	410	491	901	407	491	898	410	491	901	411	492	903	410	491	901	407	489	896
	%	9.2	2.7	5.6	9.0	4.7	6.6	4.7	3.3	3.9	22.7	6.4	13.7	4.1	6.9	5.7	7.8	10.3	9.2
	LCL	5.4	0.1	3.3	4.8	2.1	3.9	1.2	0.3	1.4	15.2	3.5	8.9	1.7	3.2	3.0	3.9	6.4	6.2
	UCL	12.9	5.3	7.9	13.3	7.2	9.2	8.2	6.2	6.4	30.2	9.4	18.4	6.6	10.5	8.3	11.6	14.3	12.1
INDIAN	n	60	67	127	66	67	133	66	64	130	66	68	134	66	66	132	63	66	129
	%	20.1	6.6	12.8	22.3	4.4	13.1	26.7	10.4	18.6	36.8	14.1	25.2	18.2	31.3	24.9	22.8	27.6	25.3
	LCL	5.5	-0.5	4.5	12.4	-2.1	6.6	13.7	-2.8	8.5	26.7	5.7	17.6	10.0	19.6	17.1	6.1	14.2	12.7
	UCL	34.6	13.8	21.2	32.1	11.0	19.6	39.7	23.7	28.8	47.0	22.5	32.8	26.4	43.1	32.8	39.6	41.0	37.8
OTHER	n	49	47	96	48	48	96	49	45	94	49	48	97	50	47	97	50	47	97
	%	10.8	5.6	8.6	20.7	18.0	19.5	10.4	6.8	8.9	16.8	8.7	13.3	22.6	21.7	22.2	36.1	56.1	44.7
	LCL	1.5	-0.8	3.0	5.9	4.9	7.6	2.0	-0.8	3.7	3.8	0.2	6.5	3.7	6.2	11.2	21.3	33.1	28.0
	UCL	20.1	12.1	14.2	35.5	31.1	31.5	18.9	14.5	14.2	29.8	17.2	20.1	41.5	37.2	33.2	50.9	79.1	61.3
GRADE 08	n	1,352	1,465	2,817	1,360	1,476	2,836	1,338	1,460	2,798	1,359	1,474	2,833	1,362	1,476	2,838	1,342	1,455	2,797
	%	15.0	8.2	11.5	20.8	12.9	16.7	14.2	9.2	11.6	30.0	18.5	24.0	26.1	23.6	24.8	37.7	36.1	36.8
	LCL	12.3	5.1	9.0	17.7	10.2	14.6	11.1	6.4	9.0	26.9	15.2	21.2	21.8	20.0	21.3	32.1	31.1	32.5
	UCL	17.7	11.3	13.9	23.9	15.7	18.9	17.2	11.9	14.1	33.2	21.7	26.8	30.4	27.2	28.2	43.2	41.1	41.2
GRADE 09	n	1,683	1,860	3,543	1,679	1,860	3,539	1,662	1,837	3,499	1,688	1,868	3,556	1,687	1,868	3,555	1,664	1,841	3,505
	%	14.4	8.8	11.5	19.9	12.5	16.0	13.6	8.3	10.8	24.2	17.4	20.6	25.9	22.0	23.8	35.3	32.7	33.9
	LCL	12.0	6.0	9.3	17.0	9.7	13.5	11.1	5.7	8.7	20.9	13.8	17.6	22.0	17.9	20.2	31.4	27.0	29.4
	UCL	16.9	11.6	13.6	22.8	15.3	18.5	16.1	10.9	13.0	27.5	20.9	23.6	29.8	26.2	27.5	39.2	38.5	38.5
GRADE 10	n	1,126	1,238	2,364	1,124	1,235	2,359	1,116	1,224	2,340	1,130	1,234	2,364	1,131	1,232	2,363	1,119	1,223	2,342
	%	11.3	3.6	6.4	19.3	9.7	13.2	9.7	5.8	7.2	20.1	14.2	16.4	21.7	19.6	20.4	25.3	30.7	28.8
	LCL	8.4	2.1	4.6	13.2	5.8	10.9	7.6	2.2	4.7	16.9	10.5	13.7	15.4	13.6	16.9	19.6	25.0	24.2
	UCL	14.2	5.2	8.2	25.3	13.6	15.5	11.9	9.4	9.8	23.4	18.0	19.1	28.1	25.6	23.9	31.0	36.5	33.3
GRADE 11	n	706	1,002	1,708	701	1,002	1,703	694	996	1,690	704	1,005	1,709	705	1,008	1,713	690	993	1,683
	%	8.8	3.9	6.2	14.0	11.6	12.7	7.3	3.8	5.4	16.4	9.7	12.8	19.5	17.7	18.5	22.0	24.0	23.1
	LCL	5.5	2.2	4.4	10.2	7.9	10.0	4.8	1.5	3.4	12.0	7.1	9.9	13.0	14.1	14.3	16.2	19.1	18.6
	UCL	12.1	5.7	7.9	17.9	15.3	15.4	9.9	6.1	7.4	20.9	12.4	15.6	25.9	21.4	22.7	27.9	28.9	27.7
AGE: 13 OR UNDER	n	287	521	808	288	524	812	284	523	807	287	524	811	288	524	812	286	521	807
	%	10.6	6.3	7.8	21.2	9.7	13.7	8.0	6.3	6.9	29.0	17.0	21.1	18.3	15.1	16.2	27.6	26.4	26.8
	LCL	5.9	3.2	5.0	14.4	6.3	10.3	4.2	3.8	4.5	22.7	11.2	15.8	11.1	9.8	11.1	18.6	18.5	19.6
	UCL	15.4	9.4	10.6	28.0	13.0	17.1	11.8	8.8	9.3	35.2	22.8	26.4	25.4	20.4	21.3	36.7	34.4	34.0
14	n	639	945	1,584	640	948	1,588	634	939	1,573	639	950	1,589	641	953	1,594	634	942	1,576
	%	9.7	6.1	7.5	13.4	10.0	11.4	8.7	8.9	8.8	25.0	13.8	18.2	18.9	17.6	18.1	29.1	28.7	28.9
	LCL	6.8	2.0	4.7	10.2	5.0	7.9	6.2	3.9	5.3	21.0	9.9	14.9	14.5	13.5	14.5	23.4	22.5	24.1
	UCL	12.7	10.2	10.3	16.6	15.0	14.9	11.2	13.9	12.3	29.1	17.6	21.5	23.4	21.7	21.7	34.9	34.8	33.6
15	n	816	1,000	1,816	815	1,001	1,816	806	995	1,801	817	1,001	1,818	823	998	1,821	806	986	1,792
	%	10.6	5.7	7.7	15.7	11.8	13.4	12.5	6.7	9.0	22.3	15.8	18.4	19.5	17.7	18.4	27.0	25.1	25.9
	LCL	7.9	3.7	5.9	12.3	8.8	10.7	8.8	4.4	6.9	18.7	12.9	16.0	15.4	14.6	15.6	22.1	20.1	21.7
	UCL	13.2	7.7	9.4	19.2	14.8	16.0	16.3	9.0	11.1	25.9	18.7	20.9	23.7	20.8	21.3	31.8	30.2	30.0
16	n	924	1,019	1,943	925	1,020	1,945	914	1,006	1,920	927	1,021	1,948	924	1,024	1,948	918	1,007	1,925
	%	13.6	6.0	9.5	19.5	10.6	14.7	13.7	6.2	9.6	25.9	13.9	19.4	20.1	20.9	20.5	29.7	30.2	30.0
	LCL	10.9	3.7	7.5	16.6	6.8	11.9	10.2	2.9	6.6	22.3	9.9	16.2	16.1	16.6	16.9	24.1	23.2	24.6
	UCL	16.4	8.3	11.5	22.4	14.4	17.4	17.2	9.5	12.7	29.4	17.9	22.5	24.1	25.2	24.2	35.2	37.2	35.3
17	n	797	798	1,595	797	797	1,594	789	790	1,579	800	802	1,602	799	799	1,598	787	793	1,580
	%	13.7	5.0	8.9	19.5	10.9	14.8	9.8	5.0	7.2	24.0	19.5	21.6	24.4	20.6	22.3	33.0	37.3	35.4
	LCL	10.7	2.4	6.8	15.3	6.6	11.5	7.3	2.4	5.2	19.2	12.5	16.8	20.4	15.3	18.4	28.1	29.1	29.9
	UCL	16.6	7.6	11.1	23.6	15.1	18.1	12.4	7.6	9.2	28.8	26.6	26.4	28.3	25.8	26.2	37.8	45.6	40.8
18	n	479	423	902	477	422	899	466	412	878	478	422	900	478	424	902	471	417	888
	%	16.2	8.9	12.4	18.9	12.5	15.6	13.2	8.2	10.6	23.8	13.3	18.4	25.5	29.1	27.4	34.0	36.3	35.2
	LCL	12.2	4.4	8.7	14.2	7.4	11.3	8.6	4.1	7.8	19.3	8.5	14.2	19.9	18.7	21.5	28.8	27.6	30.0
	UCL	20.2	13.3	16.0	23.7	17.7	19.8	17.8	12.3	13.3	28.4	18.2	22.5	31.1	39.4	33.3	39.2	45.0	40.4
19 OR OVER	n	704	557	1,261	701	561	1,262	696	554	1,250	708	561	1,269	707	560	1,267	694	553	1,247
	%	15.4	8.9	12.4	27.5	18.1	23.2	15.0	10.5	12.9	20.4	17.0	18.9	38.9	34.4	36.9	41.8	45.7	43.6
	LCL	11.5	5.7	9.7	18.2	14.8	17.3	11.2	6.4	10.1	16.0	12.6	15.9	30.5	27.8	31.0	35.5	38.3	39.4
	UCL	19.2	12.1	15.2	36.8	21.3	29.1	18.8	14.6	15.7	24.8	21.4	21.8	47.4	41.0	42.7	48.2	53.2	47.8

Table 7: Percentage of high school learners who always wear seatbelts by gender, race, grade, age and province

		ALWAYS WEAR A SEAT BELT WHEN DRIVEN BY SOMEONE ELSE			ALWAYS WEAR A SEAT BELT WHEN DRIVING[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,830	5,496	10,326	3,470	3,047	6,517
	%	15.9	13.0	14.3	25.0	17.9	21.4
	LCL[1]	14.2	11.0	12.7	22.3	14.6	19.6
	UCL[2]	17.7	15.1	15.9	27.6	21.3	23.1
EASTERN CAPE	n	474	640	1,114	355	361	716
	%	11.5	14.2	13.0	15.0	15.6	15.3
	LCL	6.7	9.6	9.1	9.4	10.8	12.7
	UCL	16.4	18.7	17.0	20.6	20.5	18.0
FREE STATE	n	540	576	1,116	337	277	614
	%	16.6	12.3	14.3	25.5	24.4	25.0
	LCL	12.8	9.6	11.4	21.4	17.4	20.9
	UCL	20.4	15.1	17.3	29.6	31.4	29.0
GAUTENG	n	529	615	1,144	352	273	625
	%	8.4	11.8	10.2	17.1	15.7	16.5
	LCL	6.3	9.5	8.3	9.9	12.6	11.8
	UCL	10.6	14.1	12.1	24.4	18.8	21.3
KWAZULU-NATAL	n	522	623	1,145	434	474	908
	%	14.7	8.8	11.4	26.9	11.2	18.1
	LCL	9.3	4.2	7.0	18.9	5.8	15.7
	UCL	20.1	13.3	15.7	34.9	16.7	20.6
LIMPOPO	n	464	516	980	330	287	617
	%	21.6	18.3	19.7	26.8	29.1	28.0
	LCL	16.6	10.4	14.0	22.2	18.8	21.8
	UCL	26.6	26.2	25.3	31.3	39.5	34.1
MPUMALANGA	n	589	630	1,219	439	382	821
	%	20.1	14.1	16.8	25.7	16.7	21.3
	LCL	16.0	10.2	12.9	21.6	10.8	17.8
	UCL	24.2	18.0	20.8	29.7	22.7	24.8
NORTHERN CAPE	n	479	568	1,047	337	296	633
	%	15.4	10.9	12.7	31.4	11.1	19.0
	LCL	10.1	4.9	8.5	20.5	3.6	9.3
	UCL	20.8	16.9	16.8	42.3	18.5	28.7
NORTH WEST	n	612	559	1,171	433	317	750
	%	21.5	15.8	18.5	31.9	22.6	27.7
	LCL	18.2	11.6	15.7	28.3	16.9	24.4
	UCL	24.8	19.9	21.4	35.6	28.3	30.9
WESTERN CAPE	n	621	769	1,390	453	380	833
	%	17.2	13.2	14.9	31.4	25.3	28.4
	LCL	14.5	8.9	12.3	23.3	11.6	18.3
	UCL	20.0	17.5	17.4	39.5	39.1	38.5

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who had indicated that they drive a vehicle

		ALWAYS WEAR A SEAT BELT WHEN DRIVEN BY SOMEONE ELSE			ALWAYS WEAR A SEAT BELT WHEN DRIVING[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,830	5,496	10,326	3,470	3,047	6,517
	%	15.9	13.0	14.3	25.0	17.9	21.4
	LCL[1]	14.2	11.0	12.7	22.3	14.6	19.6
	UCL[2]	17.7	15.1	15.9	27.6	21.3	23.1
RACE: BLACK	n	3,572	4,006	7,578	2,570	2,323	4,893
	%	16.2	13.2	14.5	25.3	17.8	21.4
	LCL	14.1	10.9	12.7	22.0	14.3	19.4
	UCL	18.3	15.5	16.4	28.6	21.3	23.4
COLOURED	n	696	856	1,552	482	402	884
	%	13.9	14.3	14.1	22.8	17.4	20.3
	LCL	11.0	9.9	11.4	19.2	10.1	16.3
	UCL	16.9	18.6	16.8	26.4	24.7	24.3
WHITE	n	404	483	887	293	229	522
	%	14.7	11.5	12.9	24.9	22.0	23.5
	LCL	8.9	6.6	8.8	18.1	15.8	18.9
	UCL	20.5	16.4	17.0	31.6	28.2	28.2
INDIAN	n	68	68	136	47	26	73
	%	15.7	13.9	14.8	29.7	19.9	25.8
	LCL	8.6	5.1	10.1	16.3	-5.1	14.1
	UCL	22.7	22.7	19.5	43.2	44.9	37.5
OTHER	n	49	47	96	43	37	80
	%	15.9	8.5	12.7	13.1	16.9	14.7
	LCL	2.0	-0.3	2.6	-1.2	2.5	2.8
	UCL	29.8	17.2	22.8	27.3	31.3	26.5
GRADE 08	n	1,337	1,444	2,781	994	894	1,888
	%	18.4	16.5	17.4	25.6	20.9	23.3
	LCL	15.2	11.8	14.2	22.8	14.3	19.7
	UCL	21.7	21.2	20.6	28.4	27.4	26.8
GRADE 09	n	1,675	1,836	3,511	1,227	1,062	2,289
	%	13.8	11.3	12.5	19.7	15.9	17.9
	LCL	11.3	9.5	10.8	17.4	13.1	15.8
	UCL	16.3	13.0	14.2	22.1	18.8	20.0
GRADE 10	n	1,117	1,222	2,339	793	652	1,445
	%	16.2	12.8	14.1	30.0	17.7	22.8
	LCL	12.9	9.0	10.9	22.3	9.3	18.1
	UCL	19.4	16.7	17.3	37.7	26.1	27.4
GRADE 11	n	701	994	1,695	456	439	895
	%	14.2	9.9	11.8	26.2	15.5	21.0
	LCL	9.7	7.7	9.2	20.4	11.2	16.9
	UCL	18.7	12.1	14.5	31.9	19.9	25.0
AGE: 13 OR UNDER	n	285	516	801	188	297	485
	%	11.7	16.4	14.8	15.3	19.8	18.2
	LCL	6.7	13.2	11.7	9.3	15.2	14.5
	UCL	16.8	19.7	17.9	21.2	24.3	21.8
14	n	635	940	1,575	450	479	929
	%	14.7	10.2	12.0	23.4	14.6	18.7
	LCL	10.4	7.6	9.1	18.9	9.8	15.1
	UCL	18.9	12.9	14.8	27.8	19.4	22.2
15	n	814	989	1,803	539	516	1,055
	%	15.1	14.1	14.5	20.4	18.5	19.3
	LCL	12.3	10.9	12.2	16.1	13.3	15.6
	UCL	18.0	17.3	16.8	24.7	23.7	23.1
16	n	908	1,005	1,913	661	534	1,195
	%	14.5	13.3	13.8	22.2	19.2	20.8
	LCL	11.4	10.3	11.5	18.5	14.8	17.8
	UCL	17.7	16.2	16.2	26.0	23.7	23.8
17	n	791	791	1,582	586	430	1,016
	%	17.1	11.9	14.3	24.4	19.0	21.7
	LCL	14.1	8.2	11.8	20.4	10.9	17.1
	UCL	20.2	15.5	16.8	28.3	27.0	26.3
18	n	473	409	882	357	259	616
	%	19.7	11.7	15.5	28.0	15.6	21.9
	LCL	14.6	7.3	12.1	20.2	9.0	16.3
	UCL	24.8	16.1	19.0	35.9	22.3	27.6
19 OR OVER	n	703	552	1,255	518	354	872
	%	19.1	14.8	17.2	34.5	14.8	26.4
	LCL	15.6	11.0	14.7	23.5	9.8	18.1
	UCL	22.6	18.6	19.6	45.4	19.9	34.8

Table 8: Percentage of high school learners who were driven by a driver who had been drinking alcohol, who drove after drinking alcohol, and who walked along a roadside after drinking alcohol by gender, race, grade, age and province

		DRIVEN BY SOMEONE WHO HAD BEEN DRINKING ALCOHOL[3]			DROVE AFTER DRINKING ALCOHOL[4]			WALKED ALONGSIDE A ROAD AFTER DRINKING ALCOHOL[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,856	5,526	10,382	3,982	3,723	7,705	4,878	5,566	10,444
	%	37.6	32.0	34.5	10.2	5.5	7.8	14.9	7.1	10.6
	LCL[1]	35.2	29.0	32.3	8.7	3.7	6.5	12.6	5.8	9.0
	UCL[2]	39.9	35.1	36.6	11.6	7.2	9.0	17.2	8.4	12.1
EASTERN CAPE	n	474	639	1,113	381	395	776	477	646	1,123
	%	32.1	29.1	30.4	9.8	2.8	6.3	11.5	5.0	7.8
	LCL	28.7	24.3	27.0	4.6	1.7	3.1	5.7	0.9	3.0
	UCL	35.4	33.9	33.8	15.0	4.0	9.5	17.3	9.1	12.6
FREE STATE	n	544	576	1,120	409	359	768	545	579	1,124
	%	37.4	31.3	34.1	12.0	7.9	10.0	19.2	13.2	16.0
	LCL	32.6	24.0	29.3	8.3	5.0	7.3	12.3	6.4	10.2
	UCL	42.2	38.6	38.9	15.8	10.8	12.7	26.1	20.1	21.8
GAUTENG	n	526	612	1,138	429	362	791	535	617	1,152
	%	39.8	28.4	33.8	13.2	2.7	8.5	19.9	7.5	13.4
	LCL	36.2	24.9	31.3	9.5	0.2	6.2	16.2	4.0	10.2
	UCL	43.4	32.0	36.3	17.0	5.1	10.8	23.6	11.0	16.6
KWAZULU-NATAL	n	530	631	1,161	466	500	966	532	636	1,168
	%	39.4	42.1	40.9	7.7	6.5	7.1	9.1	2.9	5.6
	LCL	31.6	33.7	34.6	4.3	0.8	3.7	2.6	1.0	2.1
	UCL	47.3	50.4	47.2	11.2	12.3	10.5	15.5	4.8	9.1
LIMPOPO	n	471	520	991	388	377	765	471	521	992
	%	31.5	26.8	28.8	7.3	5.1	6.1	11.6	5.9	8.3
	LCL	26.5	20.7	24.7	4.0	2.8	3.5	7.1	2.8	5.1
	UCL	36.4	32.8	32.9	10.7	7.4	8.7	16.1	9.0	11.6
MPUMALANGA	n	592	640	1,232	494	448	942	598	652	1,250
	%	36.4	33.6	34.8	11.5	5.6	8.5	14.4	7.6	10.7
	LCL	29.1	29.7	31.0	9.2	3.2	6.8	10.9	5.3	8.3
	UCL	43.7	37.4	38.7	13.8	8.0	10.3	17.9	9.9	13.1
NORTHERN CAPE	n	476	569	1,045	402	406	808	475	567	1,042
	%	36.4	22.7	27.9	11.4	4.9	7.4	18.2	8.4	12.1
	LCL	30.6	9.2	17.5	4.2	0.9	1.7	12.4	5.3	7.8
	UCL	42.1	36.2	38.2	18.7	8.9	13.2	23.9	11.5	16.4
NORTH WEST	n	610	567	1,177	488	381	869	616	570	1,186
	%	42.0	32.3	36.9	14.7	7.3	11.1	18.0	8.1	12.9
	LCL	34.9	26.7	31.2	8.4	3.6	6.5	10.4	5.3	8.1
	UCL	49.1	37.9	42.6	21.0	11.1	15.8	25.7	11.0	17.6
WESTERN CAPE	n	633	772	1,405	525	495	1,020	629	778	1,407
	%	43.6	25.7	33.1	10.2	5.6	7.9	25.4	15.6	19.6
	LCL	39.7	15.8	25.2	6.8	2.6	4.9	17.6	8.3	12.2
	UCL	47.5	35.6	41.1	13.6	8.6	10.8	33.2	22.8	27.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. In the month preceding the survey
4. In the month preceding the survey (and only of those who had indicated that they drive a vehicle). Positive responses to this question, from those who (earlier in the questionnaire) had answered that they had never drunk, were excluded
5. In the month preceding the survey. Positive responses to this question, from those who (earlier in the questionnaire) had answered that they had never drunk, were excluded

		DRIVEN BY SOMEONE WHO HAD BEEN DRINKING ALCOHOL[3]			DROVE AFTER DRINKING ALCOHOL[4]			WALKED ALONGSIDE A ROAD AFTER DRINKING ALCOHOL[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,856	5,526	10,382	3,982	3,723	7,705	4,878	5,566	10,444
	%	37.6	32.0	34.5	10.2	5.5	7.8	14.9	7.1	10.6
	LCL[1]	35.2	29.0	32.3	8.7	3.7	6.5	12.6	5.8	9.0
	UCL[2]	39.9	35.1	36.6	11.6	7.2	9.0	17.2	8.4	12.1
RACE: BLACK	n	3,589	4,027	7,616	2,914	2,690	5,604	3,606	4,059	7,665
	%	36.8	30.0	33.0	9.5	5.3	7.3	12.5	4.9	8.2
	LCL	34.2	27.1	30.7	7.9	3.0	5.9	10.1	3.9	6.8
	UCL	39.4	32.9	35.2	11.2	7.6	8.8	14.8	5.9	9.6
COLOURED	n	697	860	1,557	588	601	1,189	697	859	1,556
	%	41.4	32.7	36.7	12.5	6.0	9.3	24.2	16.8	20.3
	LCL	37.1	25.7	32.3	8.6	2.8	6.2	17.1	10.8	14.4
	UCL	45.7	39.7	41.2	16.4	9.2	12.4	31.3	22.8	26.2
WHITE	n	408	491	899	351	324	675	410	491	901
	%	38.0	43.2	40.9	15.0	8.5	11.8	26.1	18.3	21.8
	LCL	30.4	37.3	35.2	10.1	5.3	8.8	18.3	11.9	15.8
	UCL	45.6	49.2	46.6	19.9	11.6	14.8	34.0	24.6	27.8
INDIAN	n	66	64	130	54	41	95	66	68	134
	%	33.5	24.9	29.2	6.7	3.8	5.4	27.4	13.3	20.1
	LCL	23.4	15.0	20.9	-3.4	-1.2	-0.9	14.5	2.7	11.9
	UCL	43.7	34.9	37.4	16.9	8.8	11.6	40.4	23.8	28.4
OTHER	n	51	47	98	40	39	79	51	48	99
	%	44.7	56.3	49.7	4.2	1.4	3.1	12.3	5.3	9.3
	LCL	30.4	35.3	41.9	-0.7	-1.5	-0.1	1.0	-1.4	3.0
	UCL	59.1	77.3	57.4	9.2	4.2	6.2	23.6	11.9	15.6
GRADE 08	n	1,360	1,454	2,814	1,132	1,047	2,179	1,360	1,464	2,824
	%	39.3	32.5	35.8	10.3	5.2	7.8	9.8	5.7	7.7
	LCL	34.2	27.5	32.3	7.3	3.4	6.1	7.6	3.8	6.2
	UCL	44.3	37.5	39.2	13.2	6.9	9.5	12.0	7.6	9.1
GRADE 09	n	1,670	1,842	3,512	1,394	1,245	2,639	1,683	1,860	3,543
	%	39.7	33.9	36.6	10.9	6.2	8.7	13.4	8.3	10.8
	LCL	36.3	29.5	33.2	8.7	4.0	7.0	10.7	5.9	8.4
	UCL	43.0	38.3	40.0	13.1	8.5	10.5	16.2	10.7	13.1
GRADE 10	n	1,125	1,232	2,357	907	813	1,720	1,131	1,235	2,366
	%	33.8	30.8	31.9	10.9	6.4	8.3	18.8	7.1	11.4
	LCL	29.6	22.6	26.8	8.2	1.2	5.4	14.2	4.0	7.7
	UCL	37.9	38.9	36.9	13.7	11.5	11.2	23.4	10.1	15.0
GRADE 11	n	701	998	1,699	549	618	1,167	704	1,007	1,711
	%	35.7	30.7	33.0	7.3	2.9	5.0	22.4	8.0	14.5
	LCL	30.8	25.5	28.9	4.4	1.4	3.3	13.8	5.3	10.0
	UCL	40.7	35.9	37.0	10.2	4.4	6.8	31.0	10.7	18.9
AGE: 13 OR UNDER	n	288	520	808	228	347	575	288	519	807
	%	30.9	26.8	28.2	7.4	2.7	4.5	6.8	4.4	5.2
	LCL	24.2	19.5	23.3	3.5	0.7	2.2	3.6	1.0	3.0
	UCL	37.6	34.2	33.1	11.4	4.8	6.7	9.9	7.8	7.4
14	n	638	943	1,581	525	623	1,148	641	946	1,587
	%	38.6	27.9	32.2	8.0	4.1	5.8	8.3	5.6	6.7
	LCL	33.3	22.3	28.7	5.4	1.9	4.1	6.1	3.8	5.1
	UCL	44.0	33.5	35.6	10.7	6.3	7.5	10.5	7.4	8.2
15	n	812	981	1,793	652	644	1,296	817	997	1,814
	%	34.4	32.9	33.5	7.3	5.1	6.1	12.0	8.8	10.1
	LCL	30.5	28.5	30.2	4.2	2.8	4.4	9.3	6.0	7.8
	UCL	38.2	37.2	36.7	10.4	7.3	7.9	14.8	11.7	12.5
16	n	918	1,016	1,934	756	661	1,417	920	1,023	1,943
	%	37.4	37.5	37.4	10.3	5.2	7.8	16.8	8.2	12.1
	LCL	32.6	31.4	32.8	7.8	3.2	6.2	13.1	5.7	9.7
	UCL	42.2	43.5	42.1	12.9	7.1	9.4	20.6	10.8	14.6
17	n	796	801	1,597	657	530	1,187	803	799	1,602
	%	40.5	28.2	33.8	11.3	9.1	10.2	17.2	5.0	10.6
	LCL	36.3	21.1	29.3	8.8	-1.5	4.6	14.3	3.2	8.3
	UCL	44.6	35.2	38.3	13.8	19.8	15.8	20.1	6.9	12.9
18	n	477	413	890	400	302	702	476	419	895
	%	43.0	39.4	41.1	18.0	5.9	12.6	20.7	6.7	13.5
	LCL	37.6	24.8	32.9	13.3	2.8	9.2	16.0	3.9	10.3
	UCL	48.3	54.0	49.3	22.7	9.0	15.9	25.4	9.6	16.6
19 OR OVER	n	704	557	1,261	571	396	967	709	562	1,271
	%	36.3	31.8	34.3	8.7	4.1	6.8	15.0	6.9	11.4
	LCL	30.7	26.3	29.8	5.9	1.7	4.8	11.6	5.1	9.3
	UCL	41.8	37.4	38.8	11.6	6.6	8.8	18.5	8.8	13.5

Table 9: Percentage of high school learners who had sad or hopeless feelings, and who exhibited certain suicide-related behaviours by gender, race, grade, age and province

		HAD SAD OR HOPELESS FEELINGS[3]			EVER CONSIDERED ATTEMPTING SUICIDE[4]			MADE A PLAN TO COMMIT SUICIDE[4]			MADE ONE OR MORE SUICIDE ATTEMPTS[4]			MADE A SUICIDE ATTEMPT REQUIRING MEDICAL TREATMENT[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,855	5,573	10,428	4,756	5,494	10,250	4,819	5,541	10,360	4,899	5,599	10,498	814	1,078	1,892
	%	25.0	24.3	24.6	16.9	20.6	19.0	13.8	17.3	15.8	16.2	18.1	17.3	28.0	27.7	27.8
	LCL[1]	23.1	22.7	23.2	14.8	17.8	16.8	12.4	14.9	14.1	14.3	15.4	15.1	24.6	24.7	25.4
	UCL[2]	26.8	26.0	25.9	19.0	23.5	21.1	15.2	19.7	17.4	18.2	20.7	19.4	31.3	30.8	30.3
EASTERN CAPE	n	476	646	1,122	466	636	1,102	471	642	1,113	475	648	1,123	73	92	165
	%	20.2	15.9	17.7	14.3	13.6	13.9	13.3	10.0	11.4	13.4	12.4	12.8	28.4	34.5	31.9
	LCL	15.8	11.3	14.0	8.4	9.3	10.2	8.8	6.7	8.5	8.5	8.0	8.8	10.6	24.8	16.5
	UCL	24.6	20.5	21.5	20.3	17.8	17.5	17.8	13.3	14.3	18.3	16.8	16.8	46.1	44.1	47.3
FREE STATE	n	540	580	1,120	530	576	1,106	541	576	1,117	547	581	1,128	109	123	232
	%	30.9	26.3	28.5	18.0	26.9	22.8	17.9	22.3	20.3	22.0	22.2	22.1	21.9	21.5	21.7
	LCL	25.6	23.5	25.4	13.9	19.4	18.1	13.5	15.8	15.9	17.2	17.7	18.3	14.6	13.5	14.2
	UCL	36.2	29.1	31.6	22.1	34.4	27.5	22.3	28.8	24.6	26.8	26.6	25.9	29.3	29.4	29.1
GAUTENG	n	532	618	1,150	520	610	1,130	522	620	1,142	537	622	1,159	68	117	185
	%	32.2	35.9	34.1	15.8	23.4	19.8	15.0	20.4	17.9	13.2	18.7	16.1	35.6	26.8	30.2
	LCL	29.0	32.2	31.6	12.0	19.5	17.1	11.3	17.5	16.5	9.5	16.1	14.3	27.5	18.5	23.9
	UCL	35.4	39.5	36.7	19.5	27.3	22.4	18.8	23.4	19.3	17.0	21.2	17.8	43.7	35.1	36.4
KWAZULU-NATAL	n	528	638	1,166	515	626	1,141	527	634	1,161	537	643	1,180	74	113	187
	%	22.8	21.0	21.8	17.2	18.3	17.9	13.8	14.4	14.2	14.6	16.5	15.6	21.3	26.7	24.6
	LCL	17.0	18.7	18.6	11.1	10.0	10.9	10.3	7.2	9.2	9.2	7.3	8.6	12.7	20.1	20.0
	UCL	28.7	23.2	25.0	23.4	26.6	24.8	17.3	21.7	19.1	19.9	25.6	22.7	29.9	33.2	29.2
LIMPOPO	n	468	525	993	459	512	971	467	521	988	473	526	999	90	110	200
	%	28.3	25.5	26.7	21.6	23.5	22.7	13.6	21.1	17.9	18.9	20.1	19.6	32.6	35.1	34.1
	LCL	24.8	18.8	22.6	16.4	12.9	15.6	10.1	14.1	13.0	14.4	14.0	14.7	23.2	24.8	29.0
	UCL	31.7	32.2	30.8	26.9	34.1	29.8	17.2	28.0	22.8	23.4	26.2	24.4	42.0	45.4	39.2
MPUMA-LANGA	n	593	652	1,245	573	641	1,214	590	647	1,237	598	653	1,251	115	162	277
	%	22.9	28.5	25.9	19.0	25.2	22.4	16.4	19.4	18.0	22.3	23.7	23.1	25.9	32.6	29.7
	LCL	19.3	21.2	21.1	12.0	19.6	16.6	11.2	14.7	14.8	15.6	15.8	16.0	18.9	27.5	25.2
	UCL	26.5	35.7	30.8	26.0	30.8	28.2	21.6	24.2	21.3	29.1	31.5	30.1	32.8	37.7	34.3
NORTHERN CAPE	n	477	574	1,051	469	562	1,031	474	568	1,042	482	575	1,057	81	108	189
	%	27.7	20.5	23.2	13.3	17.5	15.9	11.7	19.0	16.3	13.4	13.6	13.5	24.4	26.8	25.9
	LCL	21.7	7.0	14.1	10.1	4.1	7.2	8.8	0.7	5.2	9.2	6.5	8.1	17.3	18.0	17.7
	UCL	33.7	34.0	32.3	16.6	30.9	24.6	14.5	37.4	27.3	17.6	20.8	19.0	31.6	35.7	34.2
NORTH WEST	n	609	563	1,172	605	557	1,162	605	563	1,168	613	569	1,182	105	106	211
	%	22.2	21.8	21.9	13.1	17.5	15.4	9.5	14.6	12.1	16.4	18.4	17.5	21.8	24.9	23.6
	LCL	19.0	16.9	18.3	8.2	12.8	11.7	5.6	11.8	9.3	8.0	12.4	10.9	15.4	16.8	17.2
	UCL	25.3	26.6	25.6	18.0	22.2	19.0	13.3	17.3	15.0	24.8	24.5	24.0	28.2	33.1	29.9
WESTERN CAPE	n	632	777	1,409	619	774	1,393	622	770	1,392	637	782	1,419	99	147	246
	%	19.1	26.0	23.2	15.1	22.7	19.6	11.8	20.4	16.9	14.7	19.0	17.2	42.1	16.3	25.4
	LCL	14.5	21.7	19.5	12.3	19.3	17.4	9.7	15.5	13.5	10.9	15.8	14.5	30.8	10.4	20.4
	UCL	23.6	30.3	26.8	18.0	26.1	21.8	13.9	25.2	20.2	18.5	22.3	20.0	53.3	22.2	30.4

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. That stopped them from doing some usual activities for two or more weeks in a row, during the 6 months preceding the survey
4. During the 6 months preceding the survey
5. Of those who made one or more suicide attempts during the 6 months preceding the survey

		HAD SAD OR HOPELESS FEELINGS[3]			EVER CONSIDERED ATTEMPTING SUICIDE[4]			MADE A PLAN TO COMMIT SUICIDE[4]			MADE ONE OR MORE SUICIDE ATTEMPTS[4]			MADE A SUICIDE ATTEMPT REQUIRING MEDICAL TREATMENT[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,855	5,573	10,428	4,756	5,494	10,250	4,819	5,541	10,360	4,899	5,599	10,498	814	1,078	1,892
	%	25.0	24.3	24.6	16.9	20.6	19.0	13.8	17.3	15.8	16.2	18.1	17.3	28.0	27.7	27.8
	LCL[1]	23.1	22.7	23.2	14.8	17.8	16.8	12.4	14.9	14.1	14.3	15.4	15.1	24.6	24.7	25.4
	UCL[2]	26.8	26.0	25.9	19.0	23.5	21.1	15.2	19.7	17.4	18.2	20.7	19.4	31.3	30.8	30.3
RACE: BLACK	n	3,589	4,063	7,652	3,514	4,005	7,519	3,565	4,050	7,615	3,620	4,086	7,706	631	788	1,419
	%	25.2	24.6	24.8	17.3	20.2	18.9	14.0	16.7	15.5	16.3	18.4	17.5	28.4	28.1	28.2
	LCL	23.0	22.8	23.4	14.9	17.1	16.5	12.5	14.2	13.8	14.3	15.5	15.2	24.3	24.6	25.5
	UCL	27.3	26.4	26.3	19.8	23.3	21.4	15.4	19.3	17.3	18.4	21.2	19.8	32.5	31.6	31.0
COLOURED	n	694	865	1,559	684	852	1,536	687	855	1,542	699	867	1,566	103	188	291
	%	25.1	23.4	24.2	14.4	21.6	18.3	11.9	20.5	16.6	17.0	19.8	18.5	35.3	22.5	27.7
	LCL	20.7	18.1	20.6	10.6	16.3	14.9	8.7	15.0	13.0	12.2	15.2	14.7	24.9	15.4	21.6
	UCL	29.5	28.7	27.8	18.3	26.8	21.6	15.2	26.1	20.1	21.7	24.5	22.3	45.7	29.7	33.8
WHITE	n	409	492	901	407	491	898	410	487	897	411	491	902	47	74	121
	%	20.5	24.2	22.5	15.3	24.3	20.3	13.8	19.9	17.2	11.9	15.7	14.0	15.4	24.6	21.1
	LCL	15.4	18.2	17.9	11.1	17.8	16.2	9.5	14.0	13.1	5.9	9.9	9.4	5.9	16.6	12.7
	UCL	25.6	30.1	27.2	19.5	30.7	24.4	18.2	25.8	21.3	17.8	21.5	18.6	24.8	32.6	29.5
INDIAN	n	65	67	132	64	65	129	64	66	130	67	66	133	13	12	25
	%	40.1	23.8	31.8	19.0	25.3	22.2	19.4	20.8	20.1	28.4	14.9	21.6	6.6	54.4	24.9
	LCL	27.4	14.5	23.1	0.6	12.0	9.1	-0.5	11.9	8.9	5.7	7.3	11.0	-3.4	24.9	8.1
	UCL	52.9	33.2	40.5	37.5	38.7	35.4	39.2	29.6	31.3	51.2	22.6	32.2	16.6	83.8	41.6
OTHER	n	48	48	96	47	45	92	50	47	97	51	48	99	10	7	17
	%	29.2	17.6	24.1	18.0	23.6	20.5	15.2	19.4	17.0	14.2	13.1	13.7	10.5	48.9	26.3
	LCL	17.2	6.7	17.0	0.6	10.5	7.6	4.5	11.1	8.7	2.5	4.6	8.1	0.8	4.9	3.4
	UCL	41.2	28.5	31.2	35.3	36.8	33.3	25.8	27.6	25.2	25.9	21.6	19.4	20.3	92.9	49.1
GRADE 08	n	1,341	1,470	2,811	1,310	1,433	2,743	1,332	1,452	2,784	1,365	1,481	2,846	263	268	531
	%	23.8	21.6	22.7	19.5	19.2	19.4	16.0	16.2	16.1	20.2	17.1	18.6	32.3	33.8	33.0
	LCL	21.3	17.7	20.2	16.0	14.7	16.2	13.3	11.5	13.2	16.6	13.6	15.5	26.1	27.5	29.2
	UCL	26.3	25.5	25.1	22.9	23.8	22.5	18.6	20.8	18.9	23.8	20.6	21.7	38.5	40.1	36.9
GRADE 09	n	1,684	1,864	3,548	1,638	1,831	3,469	1,665	1,856	3,521	1,695	1,870	3,565	316	365	681
	%	24.1	21.4	22.7	16.5	21.1	18.9	13.9	17.1	15.6	17.6	18.5	18.1	23.9	25.0	24.5
	LCL	21.8	18.7	20.7	13.0	17.0	15.4	11.0	14.4	13.1	14.2	15.3	15.1	17.5	20.9	20.5
	UCL	26.4	24.2	24.7	20.1	25.1	22.4	16.8	19.8	18.1	21.0	21.7	21.1	30.3	29.1	28.4
GRADE 10	n	1,126	1,233	2,359	1,108	1,228	2,336	1,122	1,234	2,356	1,133	1,241	2,374	148	282	430
	%	22.9	25.1	24.3	14.5	20.9	18.6	11.8	18.7	16.2	11.5	19.1	16.4	22.9	27.0	26.0
	LCL	19.5	21.6	21.3	10.9	15.1	14.5	9.5	13.8	13.0	9.0	13.7	12.7	14.7	21.1	18.5
	UCL	26.3	28.6	27.3	18.1	26.8	22.7	14.0	23.7	19.4	14.0	24.6	20.0	31.2	33.0	33.5
GRADE 11	n	704	1,006	1,710	700	1,002	1,702	700	999	1,699	706	1,007	1,713	87	163	250
	%	31.7	32.4	32.1	15.6	21.6	18.9	12.1	16.8	14.7	12.3	16.8	14.8	30.5	23.1	25.9
	LCL	24.2	27.5	28.0	11.9	16.3	14.8	8.7	13.0	11.5	8.4	12.9	11.4	18.8	17.3	19.2
	UCL	39.1	37.3	36.2	19.3	26.9	23.0	15.5	20.6	17.8	16.3	20.7	18.1	42.2	29.0	32.6
AGE: 13 OR UNDER	n	284	522	806	279	515	794	283	514	797	288	525	813	36	78	114
	%	20.7	21.4	21.2	9.1	16.1	13.7	12.5	15.3	14.3	13.3	13.4	13.4	30.5	27.6	28.6
	LCL	14.1	17.6	17.5	5.3	12.7	11.1	8.1	11.7	11.7	8.2	9.7	10.1	10.8	16.6	15.6
	UCL	27.4	25.2	24.8	12.9	19.5	16.2	16.9	18.9	17.0	18.4	17.2	16.7	50.2	38.5	41.6
14	n	635	948	1,583	627	928	1,555	629	944	1,573	637	952	1,589	82	152	234
	%	18.3	20.0	19.3	13.6	16.7	15.5	12.5	13.8	13.3	14.1	14.3	14.2	33.6	23.2	27.2
	LCL	13.9	16.4	16.4	9.2	12.4	11.7	9.5	9.8	10.6	10.1	10.9	11.1	21.2	15.4	21.7
	UCL	22.6	23.7	22.3	18.0	21.0	19.2	15.6	17.7	15.9	18.0	17.7	17.3	45.9	31.0	32.8
15	n	814	996	1,810	797	987	1,784	808	995	1,803	823	1,003	1,826	125	179	304
	%	21.3	21.5	21.4	14.7	19.7	17.7	11.1	18.1	15.3	14.1	16.9	15.8	31.2	38.2	35.8
	LCL	18.0	18.9	19.5	11.8	17.0	15.6	7.8	15.7	13.1	11.4	14.7	14.1	22.7	30.6	28.3
	UCL	24.6	24.0	23.3	17.6	22.5	19.9	14.3	20.5	17.5	16.8	19.2	17.5	39.8	45.8	43.2
16	n	921	1,020	1,941	898	1,011	1,909	912	1,017	1,929	926	1,026	1,952	152	225	377
	%	25.5	25.1	25.3	17.7	23.6	20.9	14.4	19.5	17.2	15.7	20.7	18.4	24.3	25.4	25.0
	LCL	22.2	21.0	22.5	14.6	18.1	17.6	11.8	15.4	14.6	12.4	15.6	14.8	15.1	17.0	17.8
	UCL	28.8	29.2	28.0	20.9	29.0	24.2	17.1	23.6	19.8	19.1	25.8	22.1	33.4	33.7	32.1
17	n	792	800	1,592	778	793	1,571	791	790	1,581	805	804	1,609	143	150	293
	%	29.1	27.8	28.4	17.5	20.1	18.9	12.8	16.6	14.8	16.0	16.8	16.4	34.5	25.9	29.6
	LCL	25.2	21.6	24.8	13.9	14.4	14.8	10.0	11.4	11.5	13.0	12.4	13.5	26.4	18.4	24.4
	UCL	33.1	34.0	32.0	21.2	25.7	23.0	15.5	21.8	18.1	19.0	21.3	19.4	42.6	33.4	34.8
18	n	473	424	897	460	416	876	471	420	891	481	424	905	108	99	207
	%	25.2	29.6	27.5	22.8	17.8	20.2	16.2	16.5	16.3	25.1	18.6	21.7	25.8	16.1	21.3
	LCL	20.3	21.1	22.8	16.2	11.9	16.6	10.4	11.3	12.6	18.3	12.7	16.5	17.7	7.9	15.0
	UCL	30.1	38.1	32.1	29.5	23.7	23.8	22.0	21.7	20.0	32.0	24.6	27.0	33.8	24.4	27.6
19 OR OVER	n	711	560	1,271	700	550	1,250	702	561	1,263	713	563	1,276	131	134	265
	%	27.5	26.4	27.0	21.1	29.1	24.7	17.2	20.3	18.6	18.0	27.7	22.4	22.2	30.0	26.6
	LCL	23.5	21.9	24.0	16.4	21.2	19.8	13.1	14.7	14.8	13.6	21.7	17.9	14.5	22.3	19.2
	UCL	31.4	30.8	29.9	25.8	37.0	29.6	21.3	25.9	22.4	22.4	33.8	26.9	29.9	37.6	34.0

Table 10: Percentage of high school learners who used tobacco by gender, race, grade, age and province

		EVER SMOKERS[3]			AGE OF INITIATION < 10 YEARS[4]			CURRENT SMOKERS[5]			CURRENT FREQUENT SMOKERS[6]			TRIED TO QUIT CIGARETTES[7]			USED SMOKELESS TOBACCO[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,852	5,550	10,402	4,796	5,498	10,294	4,845	5,553	10,398	4,845	5,553	10,398	1,503	1,040	2,543	4,784	5,525	10,309
	%	40.0	23.0	30.5	8.7	4.2	6.2	29.0	14.9	21.1	10.0	3.7	6.5	47.0	48.1	47.4	10.8	10.3	10.5
	LCL[1]	36.9	19.6	27.5	7.6	3.4	5.4	27.2	13.0	19.5	8.7	2.8	5.5	43.3	43.9	43.9	9.6	8.4	9.2
	UCL[2]	43.1	26.4	33.5	9.9	5.1	7.0	30.7	16.9	22.8	11.2	4.6	7.4	50.6	52.3	50.9	12.1	12.2	11.8
EASTERN CAPE	n	474	647	1,121	470	644	1,114	471	646	1,117	471	646	1,117	148	96	244	465	641	1,106
	%	40.3	18.0	27.5	8.9	3.8	6.0	27.7	9.6	17.3	8.9	2.7	5.4	47.6	36.4	44.1	10.8	5.3	7.6
	LCL	28.2	7.8	17.3	6.1	3.0	4.4	22.1	5.8	13.4	4.5	-0.2	2.8	33.5	26.0	33.3	5.6	3.1	4.7
	UCL	52.4	28.2	37.7	11.7	4.7	7.6	33.4	13.4	21.2	13.3	5.7	7.9	61.8	46.7	54.9	15.9	7.6	10.6
FREE STATE	n	545	574	1,119	539	566	1,105	540	575	1,115	540	575	1,115	207	93	300	538	578	1,116
	%	50.7	31.3	40.4	9.9	4.4	7.0	40.8	19.4	29.4	12.9	6.5	9.5	55.6	56.0	55.7	12.5	15.3	14.0
	LCL	42.6	20.2	32.0	7.8	2.3	5.1	33.2	11.4	23.5	8.0	0.7	4.8	48.5	45.9	48.9	8.7	11.3	10.8
	UCL	58.8	42.4	48.9	12.1	6.5	8.9	48.5	27.4	35.3	17.9	12.4	14.2	62.7	66.0	62.5	16.3	19.4	17.2
GAUTENG	n	528	618	1,146	525	613	1,138	530	618	1,148	530	618	1,148	190	157	347	520	615	1,135
	%	49.8	33.7	41.4	8.5	4.3	6.3	35.7	22.1	28.5	12.9	5.0	8.7	54.6	44.3	50.4	9.1	10.0	9.6
	LCL	43.7	25.4	35.2	5.4	2.4	4.1	31.1	17.8	25.0	9.1	2.0	5.5	45.4	32.2	40.6	6.8	6.4	7.0
	UCL	55.9	42.1	47.5	11.6	6.1	8.5	40.2	26.5	32.1	16.8	7.9	12.0	63.8	56.4	60.3	11.4	13.7	12.2
KWAZULU-NATAL	n	534	634	1,168	529	629	1,158	532	634	1,166	532	634	1,166	118	67	185	522	632	1,154
	%	28.0	10.6	18.2	7.1	3.2	4.9	20.9	8.0	13.7	5.7	1.1	3.1	35.4	32.1	34.3	10.3	9.6	9.9
	LCL	21.4	4.1	12.6	4.8	1.0	3.1	18.6	4.2	10.8	4.3	0.2	2.3	27.1	21.6	27.8	8.0	4.8	6.6
	UCL	34.6	17.1	23.8	9.3	5.4	6.6	23.3	11.8	16.5	7.1	1.9	3.9	43.6	42.6	40.8	12.6	14.5	13.3
LIMPOPO	n	469	521	990	462	510	972	471	524	995	471	524	995	87	45	132	469	524	993
	%	28.8	16.3	21.6	6.8	3.6	4.9	20.9	8.9	14.0	5.7	1.1	3.1	25.0	32.2	27.6	13.4	15.2	14.4
	LCL	20.7	9.9	15.2	3.3	1.5	2.5	16.2	5.8	10.8	4.2	0.0	1.9	9.2	26.6	14.8	9.1	7.4	9.6
	UCL	37.0	22.8	28.1	10.3	5.6	7.4	25.6	11.9	17.2	7.3	2.2	4.2	40.8	37.8	40.4	17.7	23.1	19.3
MPUMA-LANGA	n	594	649	1,243	588	644	1,232	593	653	1,246	593	653	1,246	165	106	271	584	640	1,224
	%	41.7	29.8	35.2	9.2	9.2	9.2	29.7	17.2	22.9	8.6	3.4	5.8	43.7	50.0	46.4	12.8	12.8	12.8
	LCL	33.1	21.2	27.5	6.3	3.5	5.3	25.0	13.2	19.2	5.9	0.9	3.6	31.2	35.5	33.3	7.1	7.7	7.8
	UCL	50.2	38.4	43.0	12.0	14.9	13.0	34.4	21.2	26.7	11.4	5.8	7.9	56.2	64.6	59.5	18.4	18.0	17.8
NORTHERN CAPE	n	476	570	1,046	471	563	1,034	472	570	1,042	472	570	1,042	151	115	266	467	561	1,028
	%	52.6	29.8	38.4	13.7	6.6	9.2	29.5	16.5	21.4	11.9	3.7	6.8	57.5	61.9	59.6	7.5	7.8	7.7
	LCL	44.8	7.9	21.4	9.6	2.7	5.1	23.3	4.5	11.0	7.7	0.0	2.3	50.4	50.2	52.6	3.6	3.4	4.4
	UCL	60.3	51.6	55.4	17.7	10.4	13.4	35.7	28.5	31.7	16.0	7.4	11.2	64.6	73.6	66.5	11.3	12.3	11.0
NORTH WEST	n	607	566	1,173	592	563	1,155	611	562	1,173	611	562	1,173	152	71	223	601	564	1,165
	%	38.5	25.1	31.5	11.6	3.1	7.1	28.9	16.6	22.5	10.6	4.3	7.3	44.2	52.7	47.5	10.9	7.8	9.3
	LCL	27.2	14.2	20.7	5.1	1.4	4.1	23.4	10.5	17.8	6.0	0.6	3.8	34.3	30.3	34.9	8.4	4.2	6.9
	UCL	49.9	36.1	42.3	18.1	4.8	10.2	34.4	22.7	27.1	15.3	7.9	10.8	54.0	75.1	60.1	13.5	11.5	11.8
WESTERN CAPE	n	625	771	1,396	620	766	1,386	625	771	1,396	625	771	1,396	285	290	575	618	770	1,388
	%	62.6	43.1	51.1	11.1	4.9	7.5	44.6	32.9	37.7	23.0	11.6	16.3	64.0	63.3	63.6	8.0	7.7	7.8
	LCL	54.9	26.0	37.6	8.5	2.8	5.8	38.6	20.5	27.7	16.9	6.0	10.6	61.0	59.5	61.3	5.7	4.9	5.8
	UCL	70.4	60.2	64.7	13.7	7.1	9.1	50.5	45.4	47.6	29.1	17.3	21.9	66.9	67.2	65.9	10.3	10.4	9.8

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Ever tried smoking cigarettes
4. Tried a cigarette before age 10
5. Smoked cigarettes on one or more days during the month preceding the survey
6. Smoked on 20 or more days during the month preceding the survey
7. Of current smokers, during the year preceding the survey
8. During the month preceding the survey (for example chewing tobacco or snuff)

		EVER SMOKERS[3]			AGE OF INITIATION < 10 YEARS[4]			CURRENT SMOKERS[5]			CURRENT FREQUENT SMOKERS[6]			TRIED TO QUIT CIGARETTES[7]			USED SMOKELESS TOBACCO[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,852	5,550	10,402	4,796	5,498	10,294	4,845	5,553	10,398	4,845	5,553	10,398	1,503	1,040	2,543	4,784	5,525	10,309
	%	40.0	23.0	30.5	8.7	4.2	6.2	29.0	14.9	21.1	10.0	3.7	6.5	47.0	48.1	47.4	10.8	10.3	10.5
	LCL[1]	36.9	19.6	27.5	7.6	3.4	5.4	27.2	13.0	19.5	8.7	2.8	5.5	43.3	43.9	43.9	9.6	8.4	9.2
	UCL[2]	43.1	26.4	33.5	9.9	5.1	7.0	30.7	16.9	22.8	11.2	4.6	7.4	50.6	52.3	50.9	12.1	12.2	11.8
RACE: BLACK	n	3,590	4,048	7,638	3,542	4,010	7,552	3,588	4,048	7,636	3,588	4,048	7,636	1,011	482	1,493	3,543	4,035	7,578
	%	34.3	15.8	23.9	7.0	3.6	5.1	26.4	10.3	17.3	8.1	1.5	4.4	42.7	36.7	40.7	11.6	11.0	11.3
	LCL	31.3	12.9	21.3	5.8	2.6	4.2	24.5	8.7	15.8	6.9	1.0	3.7	38.6	32.7	37.1	10.2	9.0	9.9
	UCL	37.3	18.7	26.4	8.2	4.5	6.0	28.3	11.9	18.9	9.2	1.9	5.0	46.8	40.7	44.3	13.0	13.0	12.7
COLOURED	n	689	859	1,548	685	849	1,534	689	859	1,548	689	859	1,548	287	353	640	683	853	1,536
	%	61.8	52.2	56.6	12.5	6.9	9.5	42.3	37.1	39.5	19.0	13.5	16.0	61.1	65.2	63.2	5.7	9.1	7.5
	LCL	56.0	42.3	49.7	9.1	4.9	7.3	36.3	28.8	33.2	13.9	8.6	11.7	54.4	59.2	58.6	3.6	5.2	5.1
	UCL	67.6	62.1	63.6	15.9	9.0	11.7	48.3	45.4	45.9	24.1	18.4	20.4	67.8	71.1	67.7	7.8	13.0	9.9
WHITE	n	409	487	896	409	484	893	406	491	897	406	491	897	152	164	316	406	487	893
	%	68.2	65.5	66.7	19.4	8.7	13.5	38.1	37.6	37.8	20.5	16.4	18.2	54.6	62.6	59.0	8.9	5.4	6.9
	LCL	60.8	59.2	61.7	13.9	6.0	11.1	31.3	30.1	32.3	14.6	10.4	13.5	43.4	54.2	52.7	4.6	2.2	3.7
	UCL	75.7	71.8	71.7	24.9	11.4	15.9	45.0	45.2	43.4	26.4	22.4	23.0	65.8	71.0	65.4	13.2	8.6	10.2
INDIAN	n	68	68	136	66	67	133	66	67	133	66	67	133	17	20	37	64	65	129
	%	48.8	46.1	47.4	15.8	4.3	10.0	27.9	26.0	26.9	5.7	3.9	4.8	73.6	45.9	59.3	2.3	6.2	4.3
	LCL	32.9	27.6	32.2	7.0	1.7	4.9	19.0	15.8	19.2	1.9	-1.7	1.6	46.1	22.3	40.8	-0.4	-1.9	-0.7
	UCL	64.6	64.7	62.6	24.6	7.0	15.2	36.7	36.3	34.7	9.5	9.4	7.9	101.0	69.6	77.8	5.0	14.4	9.4
OTHER	n	51	48	99	50	48	98	51	47	98	51	47	98	18	10	28	45	47	92
	%	35.5	18.2	28.1	2.6	4.0	3.2	30.3	12.9	22.8	3.6	2.7	3.2	35.8	51.0	40.0	8.0	5.8	7.0
	LCL	21.4	3.9	20.2	-1.8	-1.1	0.0	16.7	2.2	15.6	0.5	-1.4	0.7	8.7	12.3	16.9	-3.0	-1.1	1.3
	UCL	49.5	32.5	35.9	7.1	9.1	6.5	43.9	23.6	30.1	6.7	6.9	5.8	63.0	89.7	63.1	18.9	12.8	12.7
GRADE 08	n	1,350	1,472	2,822	1,328	1,451	2,779	1,351	1,467	2,818	1,351	1,467	2,818	372	233	605	1,316	1,451	2,767
	%	35.1	20.8	27.6	9.9	5.5	7.6	26.0	13.0	19.2	7.0	1.9	4.3	36.6	39.0	37.5	13.0	13.5	13.3
	LCL	30.5	16.5	23.6	8.0	4.2	6.5	22.2	10.2	16.6	5.1	1.1	3.3	30.3	29.2	30.6	10.6	8.8	10.3
	UCL	39.7	25.1	31.6	11.8	6.9	8.8	29.9	15.8	21.9	8.8	2.6	5.3	43.0	48.8	44.3	15.4	18.3	16.2
GRADE 09	n	1,667	1,850	3,517	1,645	1,830	3,475	1,676	1,854	3,530	1,676	1,854	3,530	501	342	843	1,656	1,843	3,499
	%	37.3	25.0	30.8	8.5	3.6	6.0	28.7	17.0	22.5	8.1	4.7	6.3	50.4	44.2	47.9	11.1	10.2	10.6
	LCL	32.8	19.9	26.9	6.8	2.5	4.8	25.6	13.5	20.1	6.4	3.1	5.1	44.7	38.3	43.4	9.1	7.2	8.7
	UCL	41.7	30.0	34.7	10.3	4.8	7.1	31.7	20.5	24.9	9.7	6.3	7.5	56.2	50.0	52.5	13.1	13.2	12.6
GRADE 10	n	1,129	1,230	2,359	1,120	1,222	2,342	1,123	1,229	2,352	1,123	1,229	2,352	369	221	590	1,116	1,226	2,342
	%	41.1	20.5	28.0	8.5	3.3	5.2	30.3	14.4	20.2	13.6	4.1	7.6	52.8	56.3	54.4	9.9	8.3	8.9
	LCL	35.2	13.2	21.0	5.6	2.0	3.6	26.0	9.4	15.2	10.2	1.9	4.8	46.7	49.2	49.1	7.0	5.8	6.6
	UCL	47.0	27.8	35.1	11.5	4.6	6.8	34.7	19.3	25.1	17.0	6.4	10.3	58.9	63.4	59.7	12.9	10.8	11.2
GRADE 11	n	706	998	1,704	703	995	1,698	695	1,003	1,698	695	1,003	1,698	261	244	505	696	1,005	1,701
	%	53.2	29.2	40.1	6.9	4.9	5.8	33.8	16.3	24.2	14.3	4.5	8.9	50.3	53.1	51.3	7.2	8.6	8.0
	LCL	44.3	22.3	33.1	4.2	1.7	3.6	27.7	12.3	20.1	10.2	2.3	6.4	39.9	43.9	42.9	4.7	6.4	6.3
	UCL	62.0	36.2	47.1	9.7	8.1	8.0	40.0	20.2	28.2	18.5	6.7	11.5	60.6	62.4	59.7	9.8	10.7	9.6
AGE: 13 OR UNDER	n	289	520	809	283	508	791	289	523	812	289	523	812	52	70	122	280	517	797
	%	26.4	17.1	20.4	8.5	5.3	6.4	15.2	9.0	11.2	3.2	1.4	2.0	42.0	35.4	38.5	7.3	18.6	14.8
	LCL	19.0	11.4	15.7	4.2	2.6	4.4	10.3	5.6	8.5	1.3	0.3	1.0	29.3	21.8	26.4	3.2	10.6	9.1
	UCL	33.8	22.9	25.0	12.9	8.0	8.5	20.1	12.4	13.8	5.2	2.5	3.0	54.7	49.0	50.6	11.3	26.7	20.5
14	n	639	950	1,589	631	942	1,573	637	946	1,583	637	946	1,583	142	175	317	632	936	1,568
	%	35.2	24.6	28.8	10.1	4.5	6.7	21.5	15.7	18.0	4.3	2.6	3.3	42.6	47.2	45.0	9.7	9.0	9.3
	LCL	30.2	19.5	24.5	7.1	2.9	5.1	17.6	11.8	14.9	2.2	1.3	2.1	31.7	36.7	36.4	6.9	5.3	6.5
	UCL	40.2	29.6	33.0	13.1	6.0	8.3	25.4	19.6	21.1	6.4	3.9	4.5	53.6	57.7	53.6	12.6	12.8	12.2
15	n	811	993	1,804	788	971	1,759	809	992	1,801	809	992	1,801	237	200	437	802	987	1,789
	%	37.0	27.2	31.1	10.8	4.5	7.0	27.6	17.0	21.3	7.5	4.8	5.9	43.4	50.4	46.7	9.2	7.7	8.3
	LCL	32.2	22.3	27.2	8.4	2.8	5.5	23.6	13.9	18.5	5.5	3.4	4.7	35.4	42.8	40.6	6.6	4.8	6.3
	UCL	41.8	32.1	35.1	13.2	6.2	8.6	31.6	20.1	24.0	9.5	6.3	7.1	51.4	57.9	52.9	11.9	10.5	10.3
16	n	916	1,016	1,932	897	1,006	1,903	911	1,014	1,925	911	1,014	1,925	291	216	507	907	1,014	1,921
	%	42.9	28.8	35.2	9.7	4.7	7.0	30.4	19.2	24.3	10.7	6.0	8.1	48.8	50.9	49.7	10.4	7.9	9.0
	LCL	37.3	23.7	30.9	6.7	2.1	5.1	26.2	15.5	21.3	7.8	3.5	5.9	42.5	42.6	43.9	7.8	6.0	7.4
	UCL	48.4	34.0	39.6	12.7	7.3	8.9	34.5	22.9	27.2	13.6	8.5	10.4	55.0	59.1	55.4	12.9	9.8	10.7
17	n	795	797	1,592	795	797	1,592	797	798	1,595	797	798	1,595	271	173	444	784	793	1,577
	%	47.5	20.2	32.6	8.4	3.4	5.7	33.0	14.9	23.2	11.9	3.6	7.4	51.4	51.0	51.3	10.8	8.4	9.5
	LCL	42.8	14.5	27.7	5.5	1.8	4.1	29.2	11.3	19.9	9.8	2.0	5.7	44.5	43.2	45.9	8.4	5.8	7.5
	UCL	52.1	25.8	37.6	11.4	5.1	7.4	36.9	18.5	26.5	14.0	5.2	9.0	58.3	58.8	56.6	13.3	11.0	11.5
18	n	474	420	894	474	420	894	474	418	892	474	418	892	188	80	268	463	421	884
	%	41.3	14.0	27.1	7.8	2.4	5.0	38.2	12.2	24.6	18.8	3.6	10.8	38.6	44.0	40.0	13.9	13.0	13.4
	LCL	35.8	9.5	23.0	4.8	0.8	3.3	32.4	7.6	19.9	13.6	1.3	7.6	29.7	29.4	32.2	10.0	7.5	9.8
	UCL	46.8	18.5	31.3	10.8	4.0	6.7	43.9	16.9	29.3	23.9	5.8	14.0	47.6	58.7	47.8	17.7	18.6	17.1
19 OR OVER	n	706	555	1,261	706	555	1,261	705	561	1,266	705	561	1,266	257	74	331	699	556	1,255
	%	38.2	14.7	27.7	5.0	3.4	4.3	33.5	9.4	22.6	12.3	1.2	7.2	51.1	44.2	49.8	13.1	13.2	13.1
	LCL	33.7	11.3	24.9	3.2	1.6	2.8	28.3	6.7	19.4	9.6	-0.1	5.7	43.2	32.2	42.5	9.1	9.6	10.6
	UCL	42.6	18.2	30.4	6.8	5.2	5.8	38.7	12.2	25.7	14.9	2.5	8.8	59.0	56.2	57.1	17.0	16.8	15.7

Table 11: Percentage of high school learners who were exposed to environmental tobacco smoke and parental smoking by gender, race, grade, age and province

		CURRENT SMOKERS[3] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[4]			NEVER SMOKERS[5] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[4]			CURRENT SMOKERS[3]: AT LEAST ONE PARENT/GUARDIAN SMOKES			NEVER SMOKERS[5]: AT LEAST ONE PARENT/GUARDIAN SMOKES		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	1,513	1,047	2,560	2,738	3,940	6,678	1,502	1,045	2,547	2,727	3,933	6,660
	%	83.5	84.7	84.0	59.8	53.7	56.0	44.7	52.8	47.9	27.5	32.2	30.4
	LCL[1]	80.7	81.7	81.6	55.5	50.5	52.7	41.3	49.7	45.2	25.4	29.4	28.2
	UCL[2]	86.2	87.8	86.3	64.1	56.9	59.3	48.2	55.9	50.7	29.6	35.0	32.6
EASTERN CAPE	n	145	93	238	250	458	708	147	95	242	251	457	708
	%	82.0	81.6	81.9	53.6	46.3	48.8	36.0	52.1	41.0	25.8	31.7	29.6
	LCL	74.6	71.5	75.7	45.5	41.0	43.7	21.7	44.7	29.1	20.7	24.9	24.4
	UCL	89.4	91.6	88.0	61.6	51.6	54.0	50.3	59.5	53.0	30.9	38.5	34.8
FREE STATE	n	209	94	303	274	435	709	208	94	302	276	436	712
	%	86.6	87.1	86.8	64.7	59.5	61.5	54.2	58.3	55.7	45.8	47.4	46.8
	LCL	81.8	82.9	82.0	59.3	53.8	56.8	47.3	41.5	48.2	40.1	40.7	41.6
	UCL	91.5	91.4	91.7	70.0	65.3	66.2	61.2	75.1	63.2	51.6	54.0	52.0
GAUTENG	n	192	161	353	258	376	634	188	160	348	254	376	630
	%	84.5	89.8	86.7	63.4	56.2	59.1	45.1	44.9	45.0	32.6	32.8	32.7
	LCL	76.2	87.1	81.8	55.1	54.1	56.2	39.9	36.3	39.9	27.7	26.6	27.8
	UCL	92.8	92.5	91.6	71.8	58.3	62.0	50.4	53.5	50.1	37.5	39.1	37.7
KWAZULU-NATAL	n	119	68	187	389	534	923	120	68	188	389	533	922
	%	85.4	87.0	85.9	70.0	62.8	65.6	37.8	49.9	41.7	19.3	24.8	22.7
	LCL	77.1	76.9	79.6	56.8	55.6	56.4	28.6	40.2	35.7	14.4	20.9	18.9
	UCL	93.8	97.1	92.2	83.2	70.1	74.8	47.0	59.5	47.8	24.3	28.7	26.5
LIMPOPO	n	86	45	131	349	447	796	86	45	131	346	442	788
	%	77.5	80.6	78.6	49.7	43.1	45.6	31.6	33.7	32.4	20.2	28.3	25.2
	LCL	69.7	57.7	65.4	44.9	35.7	40.3	19.1	26.3	22.6	16.9	19.7	19.5
	UCL	85.3	103.4	91.9	54.5	50.4	50.9	44.1	41.0	42.1	23.5	36.9	30.9
MPUMALANGA	n	171	106	277	355	487	842	168	103	271	355	486	841
	%	83.8	80.2	82.3	56.4	49.1	52.1	39.9	37.2	38.8	24.0	28.8	26.8
	LCL	78.0	71.5	76.3	48.2	43.6	46.4	32.2	27.8	34.8	18.0	25.2	23.1
	UCL	89.5	88.9	88.3	64.7	54.6	57.8	47.7	46.7	42.8	29.9	32.4	30.6
NORTHERN CAPE	n	150	116	266	238	374	612	147	115	262	236	373	609
	%	86.6	93.6	89.9	64.5	78.2	74.2	60.7	66.3	63.4	46.8	65.0	59.7
	LCL	80.8	89.3	84.9	58.2	61.8	60.8	51.5	55.1	53.9	38.0	34.7	33.7
	UCL	92.5	97.9	94.9	70.8	94.6	87.6	70.0	77.5	72.8	55.7	95.3	85.8
NORTH WEST	n	154	70	224	398	453	851	153	74	227	393	456	849
	%	82.7	80.4	81.8	53.4	54.1	53.8	52.2	56.2	53.8	36.4	41.8	39.5
	LCL	73.0	69.0	72.6	46.4	45.7	46.3	43.3	46.0	45.6	29.6	37.1	34.9
	UCL	92.3	91.8	91.0	60.4	62.5	61.3	61.1	66.3	61.9	43.2	46.5	44.1
WESTERN CAPE	n	287	294	581	227	376	603	285	291	576	227	374	601
	%	82.7	83.4	83.1	53.3	43.6	46.7	58.4	69.6	64.2	49.3	38.6	42.0
	LCL	76.7	78.4	78.4	42.1	26.2	30.9	52.6	63.9	60.3	43.4	35.5	39.2
	UCL	88.7	88.5	87.7	64.5	61.1	62.5	64.2	75.3	68.1	55.3	41.7	44.7

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Smoked cigarettes on one or more days during the month preceding the survey
4. Who had someone smoke in their presence in the week preceding the survey
5. Never smoked cigarettes

		CURRENT SMOKERS[3] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[4]			NEVER SMOKERS[5] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[4]			CURRENT SMOKERS[3]: AT LEAST ONE PARENT/GUARDIAN SMOKES			NEVER SMOKERS[5]: AT LEAST ONE PARENT/GUARDIAN SMOKES		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	1,513	1,047	2,560	2,738	3,940	6,678	1,502	1,045	2,547	2,727	3,933	6,660
	%	83.5	84.7	84.0	59.8	53.7	56.0	44.7	52.8	47.9	27.5	32.2	30.4
	LCL[1]	80.7	81.7	81.6	55.5	50.5	52.7	41.3	49.7	45.2	25.4	29.4	28.2
	UCL[2]	86.2	87.8	86.3	64.1	56.9	59.3	48.2	55.9	50.7	29.6	35.0	32.6
RACE: BLACK	n	1,020	487	1,507	2,258	3,311	5,569	1,012	486	1,498	2,253	3,305	5,558
	%	81.6	79.5	80.9	59.6	52.6	55.3	39.2	44.4	41.0	25.7	30.1	28.5
	LCL	78.5	74.0	77.9	54.9	49.3	51.8	35.2	40.4	38.0	23.5	26.6	25.7
	UCL	84.7	85.0	83.9	64.4	55.9	58.7	43.3	48.4	44.0	28.0	33.6	31.2
COLOURED	n	287	355	642	265	353	618	285	353	638	263	352	615
	%	82.4	87.1	84.8	59.8	59.8	59.8	59.2	68.8	64.1	57.4	55.7	56.4
	LCL	76.7	82.0	80.9	51.5	44.6	50.4	51.7	62.0	58.2	50.5	39.0	45.9
	UCL	88.0	92.2	88.7	68.1	75.1	69.2	66.7	75.6	70.0	64.4	72.4	66.9
WHITE	n	152	164	316	134	181	315	153	166	319	134	180	314
	%	93.3	95.2	94.3	59.5	51.1	54.7	61.4	61.4	61.4	28.2	35.2	32.2
	LCL	89.5	92.7	91.4	46.8	41.9	47.1	51.5	50.7	53.6	20.7	25.5	25.1
	UCL	97.1	97.7	97.3	72.3	60.2	62.3	71.3	72.1	69.2	35.7	44.9	39.4
INDIAN	n	17	20	37	34	36	70	16	20	36	33	36	69
	%	86.1	91.4	88.8	54.9	64.1	59.7	63.9	46.6	54.8	39.4	33.0	36.0
	LCL	67.5	85.1	75.4	27.0	44.7	40.3	48.9	29.6	41.1	22.2	11.4	20.5
	UCL	104.7	97.7	102.3	82.9	83.5	79.1	78.8	63.7	68.6	56.5	54.5	51.5
OTHER	n	19	10	29	26	34	60	19	9	28	24	34	58
	%	97.0	87.2	94.4	73.9	79.2	76.5	40.1	52.8	43.1	10.2	26.0	18.3
	LCL	90.9	69.6	87.7	53.7	64.1	60.6	10.9	17.8	20.0	-0.7	2.1	3.2
	UCL	103.0	104.8	101.0	94.0	94.3	92.3	69.3	87.7	66.3	21.2	49.9	33.4
GRADE 08	n	376	237	613	814	1,092	1,906	370	238	608	805	1,090	1,895
	%	76.0	86.5	79.7	53.8	47.7	50.3	46.5	57.1	50.3	29.7	33.2	31.7
	LCL	70.9	80.8	75.6	47.1	41.3	44.6	40.0	51.0	44.8	25.5	27.9	28.2
	UCL	81.0	92.2	83.8	60.5	54.1	56.0	53.0	63.2	55.7	33.9	38.5	35.3
GRADE 09	n	509	341	850	984	1,318	2,302	503	339	842	981	1,315	2,296
	%	78.9	83.8	80.8	61.9	55.5	58.3	43.5	47.6	45.1	27.6	31.9	30.0
	LCL	74.0	79.6	77.1	56.1	49.9	52.9	37.9	41.0	40.2	23.2	27.7	26.3
	UCL	83.7	88.0	84.5	67.8	61.1	63.7	49.1	54.3	50.1	31.9	36.1	33.8
GRADE 10	n	369	225	594	627	918	1,545	367	225	592	628	920	1,548
	%	90.8	83.6	87.5	60.1	54.5	56.2	43.9	54.9	48.9	24.3	31.3	29.2
	LCL	87.6	78.1	84.1	52.6	47.9	50.2	36.8	47.0	42.9	19.0	25.3	24.2
	UCL	93.9	89.1	90.9	67.5	61.1	62.1	51.1	62.7	54.9	29.6	37.4	34.2
GRADE 11	n	259	244	503	313	612	925	262	243	505	313	608	921
	%	92.8	85.9	90.2	71.2	61.1	64.7	44.8	51.5	47.3	27.3	32.7	30.7
	LCL	89.1	78.1	86.6	63.9	55.2	59.0	36.7	40.9	39.4	21.3	27.8	26.4
	UCL	96.4	93.6	93.8	78.4	66.9	70.3	53.0	62.1	55.2	33.4	37.5	35.1
AGE: 13 OR UNDER	n	52	70	122	194	399	593	52	70	122	193	398	591
	%	86.2	82.1	84.0	56.7	51.0	52.8	37.4	59.7	49.2	23.6	39.0	34.1
	LCL	78.7	72.1	77.0	47.2	42.6	45.7	24.9	45.9	35.8	16.1	32.0	28.1
	UCL	93.8	92.1	91.0	66.2	59.4	60.0	49.8	73.6	62.6	31.1	46.0	40.2
14	n	142	175	317	394	645	1,039	141	177	318	388	644	1,032
	%	66.1	90.1	78.8	55.5	47.4	50.3	51.6	56.6	54.3	30.6	29.2	29.7
	LCL	56.1	86.1	73.1	49.6	40.4	44.5	40.1	50.6	47.2	24.6	23.5	24.9
	UCL	76.2	94.1	84.5	61.5	54.4	56.1	63.1	62.5	61.3	36.5	34.9	34.4
15	n	238	202	440	465	684	1,149	234	202	436	462	683	1,145
	%	81.7	85.0	83.3	55.2	52.1	53.3	48.6	50.1	49.4	27.7	31.9	30.4
	LCL	74.1	77.1	76.7	48.6	44.9	47.8	40.6	43.1	43.7	22.8	25.7	25.9
	UCL	89.2	92.9	89.8	61.8	59.3	58.7	56.6	57.1	55.0	32.7	38.1	34.9
16	n	299	219	518	502	682	1,184	295	218	513	502	683	1,185
	%	84.0	88.5	86.0	59.7	54.7	56.7	45.7	55.7	50.0	33.1	36.0	34.9
	LCL	79.6	83.9	82.5	54.5	46.9	51.3	39.1	48.6	43.8	27.8	28.6	29.7
	UCL	88.5	93.1	89.4	64.9	62.5	62.1	52.3	62.8	56.2	38.5	43.5	40.0
17	n	274	176	450	403	559	962	273	174	447	404	558	962
	%	86.8	78.7	84.0	67.7	54.5	59.1	43.0	48.7	45.0	30.6	31.8	31.3
	LCL	82.5	70.6	79.9	60.2	47.1	53.6	34.8	40.2	38.3	24.3	20.0	23.3
	UCL	91.2	86.9	88.1	75.2	61.8	64.7	51.3	57.3	51.7	36.8	43.6	39.4
18	n	188	80	268	255	323	578	185	80	265	258	325	583
	%	87.0	84.9	86.5	56.3	60.3	58.8	45.1	54.5	47.5	21.8	29.3	26.4
	LCL	82.9	73.2	81.7	47.1	50.5	51.4	35.1	39.8	38.9	16.5	21.5	21.1
	UCL	91.2	96.5	91.3	65.6	70.2	66.2	55.2	69.2	56.0	27.1	37.1	31.7
19 OR OVER	n	253	73	326	405	452	857	254	71	325	402	447	849
	%	86.8	79.2	85.3	67.5	58.0	62.5	39.2	54.3	42.0	19.7	29.5	24.9
	LCL	81.8	70.5	80.7	59.6	52.1	56.9	31.6	42.3	34.7	14.4	24.3	21.2
	UCL	91.7	87.9	89.9	75.4	64.0	68.1	46.9	66.3	49.3	25.1	34.7	28.5

Table 12: Percentage of high school learners who used alcohol by gender, race, grade, age and province

		EVER USED ALCOHOL[3]			USED ALCOHOL IN THE PAST MONTH[4]			PAST MONTH BINGE DRINKING[5]			AGE OF INITIATION < 13 YEARS[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,897	5,584	10,481	4,799	5,484	10,283	4,904	5,592	10,496	4,811	5,508	10,319
	%	56.1	43.5	49.1	38.5	26.4	31.8	29.3	17.9	23.0	15.8	9.0	12.0
	LCL[1]	52.6	40.1	46.2	35.5	23.7	29.3	26.7	15.6	20.9	13.5	7.6	10.4
	UCL[2]	59.6	47.0	52.0	41.5	29.1	34.3	31.9	20.3	25.0	18.0	10.4	13.6
EASTERN CAPE	n	483	646	1,129	468	631	1,099	483	647	1,130	475	639	1,114
	%	52.9	39.6	45.4	36.6	23.2	28.9	29.1	16.5	21.9	11.0	6.5	8.4
	LCL	45.8	29.3	37.7	30.1	17.3	24.1	23.8	14.0	19.1	4.0	3.3	3.7
	UCL	59.9	50.0	53.0	43.1	29.0	33.7	34.3	19.1	24.8	18.0	9.6	13.1
FREE STATE	n	546	580	1,126	534	569	1,103	548	581	1,129	541	567	1,108
	%	63.3	54.7	58.7	45.3	34.7	39.6	32.9	19.9	26.0	18.4	11.7	14.8
	LCL	55.9	46.1	51.3	36.8	24.6	31.0	26.4	12.8	19.7	12.1	8.1	10.4
	UCL	70.6	63.3	66.1	53.7	44.8	48.2	39.4	27.0	32.2	24.7	15.3	19.3
GAUTENG	n	530	619	1,149	530	612	1,142	535	621	1,156	525	604	1,129
	%	67.6	57.2	62.1	42.8	29.0	35.6	33.1	19.8	26.1	18.0	12.0	14.9
	LCL	61.0	52.9	57.4	36.6	22.3	29.7	29.0	13.7	21.2	13.3	8.7	11.6
	UCL	74.2	61.4	66.8	49.1	35.6	41.4	37.2	25.9	31.0	22.8	15.4	18.2
KWAZULU-NATAL	n	538	640	1,178	527	616	1,143	538	643	1,181	533	631	1,164
	%	50.9	29.4	38.8	36.3	14.3	24.2	29.4	10.9	19.0	12.9	6.9	9.6
	LCL	40.7	23.9	32.4	27.4	9.4	18.1	20.7	5.9	13.2	6.8	3.5	5.5
	UCL	61.0	34.9	45.2	45.2	19.2	30.2	38.0	15.9	24.7	19.0	10.4	13.6
LIMPOPO	n	471	527	998	466	519	985	472	527	999	459	518	977
	%	42.6	32.0	36.5	26.4	23.2	24.6	17.7	17.4	17.5	10.5	6.5	8.2
	LCL	34.0	18.5	27.4	20.7	15.3	18.7	15.0	9.6	12.6	6.9	3.1	5.4
	UCL	51.2	45.6	45.6	32.0	31.1	30.4	20.3	25.3	22.5	14.2	9.8	10.9
MPUMALANGA	n	597	653	1,250	586	636	1,222	597	656	1,253	583	643	1,226
	%	56.8	48.7	52.4	36.1	29.9	32.7	29.3	21.3	24.9	20.0	8.5	13.7
	LCL	46.7	38.9	43.3	30.0	26.0	29.1	23.8	18.2	21.3	13.6	5.1	9.2
	UCL	66.9	58.4	61.5	42.3	33.8	36.4	34.7	24.5	28.6	26.3	11.8	18.2
NORTHERN CAPE	n	480	572	1,052	467	565	1,032	483	573	1,056	467	564	1,031
	%	68.8	73.2	71.5	46.4	59.2	54.4	33.7	22.6	26.8	19.6	9.5	13.3
	LCL	60.3	64.8	65.5	33.0	43.0	42.3	26.4	3.5	12.7	11.6	2.5	6.3
	UCL	77.3	81.5	77.5	59.8	75.3	66.5	40.9	41.6	40.9	27.6	16.5	20.2
NORTH WEST	n	616	571	1,187	605	562	1,167	612	569	1,181	605	564	1,169
	%	56.4	50.7	53.4	42.5	30.4	36.2	30.1	17.1	23.3	18.7	11.4	14.9
	LCL	43.5	37.1	40.7	31.5	21.2	26.9	22.3	12.4	17.6	12.5	7.5	10.6
	UCL	69.4	64.2	66.1	53.5	39.6	45.4	38.0	21.7	29.0	24.9	15.3	19.1
WESTERN CAPE	n	636	776	1,412	616	774	1,390	636	775	1,411	623	778	1,401
	%	69.1	59.5	63.5	51.1	39.7	44.3	38.0	31.0	33.9	25.1	14.0	18.6
	LCL	60.3	46.5	52.0	44.3	28.5	35.1	30.6	24.3	27.7	17.5	8.0	12.1
	UCL	77.9	72.6	75.0	57.9	50.9	53.6	45.5	37.8	40.2	32.8	20.1	25.1

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Ever had one or more drinks of alcohol (a beer, a glass of wine, or a 'tot' of brandy)
4. Had a drink of alcohol on one or more days in the month preceding the survey
5. Had five or more drinks of alcohol within a few hours on one or more days in the month preceding the survey
6. Had one or more drinks of alcohol before age 13

		EVER USED ALCOHOL[3]			USED ALCOHOL IN THE PAST MONTH[4]			PAST MONTH BINGE DRINKING[5]			AGE OF INITIATION < 13 YEARS[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,897	5,584	10,481	4,799	5,484	10,283	4,904	5,592	10,496	4,811	5,508	10,319
	%	56.1	43.5	49.1	38.5	26.4	31.8	29.3	17.9	23.0	15.8	9.0	12.0
	LCL[1]	52.6	40.1	46.2	35.5	23.7	29.3	26.7	15.6	20.9	13.5	7.6	10.4
	UCL[2]	59.6	47.0	52.0	41.5	29.1	34.3	31.9	20.3	25.0	18.0	10.4	13.6
RACE: BLACK	n	3,622	4,081	7,703	3,554	3,994	7,548	3,625	4,081	7,706	3,558	4,014	7,572
	%	52.0	37.8	44.0	34.4	21.7	27.3	27.1	15.7	20.7	13.0	7.4	9.8
	LCL	48.2	34.4	41.1	31.3	19.2	25.0	24.1	13.3	18.5	10.7	5.9	8.3
	UCL	55.9	41.3	47.0	37.6	24.2	29.6	30.0	18.1	22.8	15.2	8.8	11.3
COLOURED	n	699	857	1,556	686	853	1,539	700	865	1,565	686	852	1,538
	%	67.2	65.1	66.0	49.1	44.1	46.4	38.5	26.9	32.3	24.1	15.3	19.4
	LCL	60.9	56.8	59.8	42.2	32.2	38.6	31.7	18.5	25.8	19.3	11.0	15.7
	UCL	73.5	73.4	72.2	56.1	56.0	54.3	45.2	35.3	38.8	29.0	19.6	23.0
WHITE	n	409	488	897	404	486	890	410	491	901	408	489	897
	%	88.4	84.1	86.0	65.3	58.3	61.4	38.8	33.6	35.9	33.6	19.4	25.7
	LCL	83.0	79.3	82.4	57.3	49.8	54.2	31.3	26.8	29.7	27.0	14.8	20.8
	UCL	93.7	88.8	89.5	73.4	66.7	68.6	46.3	40.5	42.1	40.3	23.9	30.6
INDIAN	n	66	68	134	63	66	129	67	68	135	65	65	130
	%	40.1	39.3	39.7	37.3	21.9	29.4	31.8	16.1	23.7	20.8	8.4	14.5
	LCL	26.3	23.9	27.6	24.0	14.1	21.7	19.8	4.9	15.2	13.7	1.2	9.6
	UCL	53.9	54.7	51.7	50.6	29.7	37.0	43.7	27.3	32.2	28.0	15.6	19.4
OTHER	n	50	48	98	49	44	93	50	48	98	50	46	96
	%	45.8	40.0	43.3	39.7	20.5	31.7	28.0	18.7	24.0	14.5	11.2	13.1
	LCL	27.7	17.1	32.5	25.3	3.6	18.6	16.3	-1.1	12.5	3.1	0.4	4.9
	UCL	63.9	62.9	54.0	54.2	37.3	44.7	39.6	38.6	35.5	25.9	21.9	21.3
GRADE 08	n	1,368	1,472	2,840	1,330	1,449	2,779	1,369	1,476	2,845	1,338	1,452	2,790
	%	42.9	36.1	39.3	28.4	23.6	25.9	22.0	17.4	19.6	15.6	11.4	13.4
	LCL	38.0	30.9	34.9	24.5	19.2	22.6	18.5	13.3	16.7	12.1	8.8	10.9
	UCL	47.7	41.2	43.7	32.4	28.0	29.3	25.6	21.5	22.5	19.0	14.1	15.9
GRADE 09	n	1,691	1,870	3,561	1,660	1,829	3,489	1,694	1,872	3,566	1,655	1,847	3,502
	%	54.0	40.7	47.0	37.7	25.5	31.3	29.2	19.3	24.0	14.2	9.8	11.9
	LCL	50.3	34.9	42.9	34.1	21.3	28.1	26.4	15.9	21.7	11.4	7.2	9.5
	UCL	57.7	46.5	51.2	41.2	29.7	34.5	32.1	22.8	26.4	16.9	12.5	14.3
GRADE 10	n	1,134	1,237	2,371	1,111	1,219	2,330	1,134	1,238	2,372	1,119	1,222	2,341
	%	66.7	47.4	54.5	44.5	28.1	34.1	31.6	17.0	22.3	15.4	6.1	9.5
	LCL	60.1	38.4	47.6	38.8	20.7	27.5	26.9	11.7	17.1	12.0	3.7	6.9
	UCL	73.2	56.4	61.4	50.1	35.5	40.8	36.3	22.2	27.5	18.7	8.5	12.1
GRADE 11	n	704	1,005	1,709	698	987	1,685	707	1,006	1,713	699	987	1,686
	%	72.1	54.1	62.2	52.2	29.6	39.9	41.4	18.8	29.0	19.5	9.2	13.9
	LCL	63.9	46.0	55.1	44.1	24.2	34.8	33.9	14.4	24.7	11.7	6.2	10.0
	UCL	80.3	62.2	69.4	60.2	35.1	45.0	48.8	23.2	33.3	27.2	12.2	17.7
AGE: 13 OR UNDER	n	289	523	812	283	513	796	290	526	816	286	515	801
	%	41.0	28.5	32.8	21.2	21.9	21.7	15.6	16.3	16.1	20.9	14.1	16.5
	LCL	34.3	21.7	27.3	16.1	18.2	18.7	11.2	13.5	13.9	14.2	9.5	12.7
	UCL	47.7	35.3	38.3	26.2	25.6	24.7	20.0	19.2	18.2	27.5	18.7	20.2
14	n	641	951	1,592	633	940	1,573	641	953	1,594	621	929	1,550
	%	46.1	41.7	43.4	26.6	22.7	24.2	18.4	14.9	16.3	19.8	14.1	16.3
	LCL	39.9	36.1	39.1	21.3	18.2	20.5	14.7	11.4	13.6	15.5	10.9	13.5
	UCL	52.3	47.2	47.8	31.9	27.1	27.9	22.2	18.3	18.9	24.0	17.3	19.2
15	n	820	999	1,819	811	984	1,795	821	999	1,820	812	993	1,805
	%	52.8	45.0	48.1	34.0	27.5	30.1	24.7	20.0	21.9	15.8	12.2	13.7
	LCL	47.1	39.6	44.1	29.2	23.3	26.8	20.1	16.4	18.9	12.0	8.9	10.8
	UCL	58.5	50.4	52.1	38.9	31.7	33.5	29.4	23.6	24.9	19.6	15.5	16.6
16	n	926	1,023	1,949	905	1,008	1,913	928	1,021	1,949	906	1,006	1,912
	%	58.8	48.9	53.4	41.3	27.4	33.7	30.2	17.0	23.0	16.8	6.6	11.3
	LCL	52.9	42.2	48.6	36.5	22.2	29.8	26.0	13.4	19.9	13.2	4.7	9.2
	UCL	64.6	55.5	58.2	46.2	32.6	37.7	34.4	20.6	26.1	20.5	8.4	13.3
17	n	802	803	1,605	790	789	1,579	803	801	1,604	775	788	1,563
	%	61.4	51.5	56.0	41.6	27.3	33.8	31.0	17.8	23.9	13.8	4.3	8.6
	LCL	56.7	45.5	51.6	36.3	19.2	28.6	26.4	12.5	20.1	11.3	2.2	6.8
	UCL	66.0	57.4	60.4	46.8	35.3	39.1	35.6	23.1	27.6	16.3	6.5	10.5
18	n	480	422	902	465	410	875	480	424	904	476	421	897
	%	60.0	34.2	46.6	46.0	26.5	36.3	38.5	17.8	27.7	11.6	4.9	8.1
	LCL	53.8	25.9	40.9	40.5	20.5	31.8	33.0	11.0	22.2	8.0	0.8	4.8
	UCL	66.1	42.5	52.3	51.4	32.4	40.7	44.1	24.5	33.3	15.1	9.0	11.3
19 OR OVER	n	715	563	1,278	692	548	1,240	717	565	1,282	711	557	1,268
	%	59.4	38.9	50.2	43.5	26.9	36.1	34.9	19.5	28.0	8.9	3.3	6.4
	LCL	53.6	32.0	45.3	36.5	21.2	31.6	29.6	15.2	24.4	6.7	1.4	4.7
	UCL	65.3	45.7	55.0	50.4	32.6	40.6	40.2	23.9	31.5	11.2	5.1	8.0

Table 13: Percentage of high school learners who used cannabis (dagga) by gender, race, grade, age and province

		EVER USED DAGGA[3]			USED DAGGA IN THE PAST MONTH[4]			AGE OF INITIATION < 13 YEARS[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,807	5,525	10,332	4,884	5,587	10,471	4,876	5,589	10,465
	%	20.2	7.0	12.8	13.7	5.5	9.1	5.4	3.3	4.2
	LCL[1]	18.4	5.6	11.4	11.9	3.9	7.7	4.6	1.8	3.4
	UCL[2]	22.1	8.4	14.2	15.4	7.1	10.5	6.3	4.7	5.1
EASTERN CAPE	n	471	644	1,115	476	649	1,125	481	651	1,132
	%	18.1	4.6	10.3	11.3	2.7	6.4	6.2	1.2	3.3
	LCL	12.2	2.5	6.8	4.6	1.7	3.0	4.0	0.4	2.3
	UCL	24.1	6.6	13.8	18.0	3.7	9.7	8.3	2.0	4.3
FREE STATE	n	537	574	1,111	546	581	1,127	544	581	1,125
	%	26.3	7.0	16.0	15.6	4.0	9.4	6.3	0.8	3.4
	LCL	19.6	1.8	10.7	10.3	2.0	5.9	4.0	0.2	2.0
	UCL	33.0	12.3	21.3	21.0	5.9	12.9	8.5	1.5	4.7
GAUTENG	n	519	612	1,131	532	622	1,154	531	619	1,150
	%	26.9	9.8	17.8	18.3	6.2	12.0	5.9	1.2	3.4
	LCL	20.2	6.5	14.2	14.4	3.3	9.6	2.8	0.3	1.7
	UCL	33.5	13.1	21.5	22.3	9.2	14.4	9.1	2.1	5.2
KWAZULU-NATAL	n	522	629	1,151	534	636	1,170	533	642	1,175
	%	19.9	5.6	11.8	13.6	4.4	8.4	6.6	5.8	6.1
	LCL	15.8	1.7	8.3	8.7	1.7	4.9	4.3	3.4	5.1
	UCL	23.9	9.5	15.3	18.5	7.1	11.9	8.9	8.2	7.1
LIMPOPO	n	464	517	981	472	525	997	469	523	992
	%	12.7	6.5	9.2	10.2	8.7	9.3	2.8	6.2	4.7
	LCL	8.7	3.9	6.2	6.9	0.4	4.0	1.7	-1.9	0.0
	UCL	16.8	9.1	12.1	13.5	17.0	14.7	3.9	14.2	9.5
MPUMALANGA	n	587	638	1,225	597	654	1,251	593	654	1,247
	%	17.2	6.1	11.2	14.1	7.7	10.6	6.0	2.1	3.9
	LCL	12.4	3.5	8.3	10.1	3.3	6.8	2.9	0.1	1.5
	UCL	22.0	8.7	14.0	18.1	12.1	14.4	9.1	4.2	6.2
NORTHERN CAPE	n	476	566	1,042	481	574	1,055	477	574	1,051
	%	18.2	4.0	9.4	10.0	2.6	5.4	4.0	0.8	2.0
	LCL	10.7	1.3	3.9	5.4	0.2	1.9	1.6	0.5	1.0
	UCL	25.6	6.7	14.8	14.6	5.1	9.0	6.4	1.1	3.1
NORTH WEST	n	608	569	1,177	613	569	1,182	612	567	1,179
	%	17.5	5.9	11.4	11.1	5.0	7.9	3.3	1.7	2.5
	LCL	13.3	2.6	8.8	6.6	1.0	4.1	0.7	0.1	0.7
	UCL	21.8	9.3	14.0	15.6	9.0	11.7	6.0	3.3	4.2
WESTERN CAPE	n	623	776	1,399	633	777	1,410	636	778	1,414
	%	26.6	13.1	18.6	17.0	6.7	10.9	6.2	2.1	3.8
	LCL	20.1	6.0	11.8	12.1	4.8	8.1	3.6	0.9	2.1
	UCL	33.1	20.1	25.4	21.8	8.6	13.8	8.8	3.3	5.5

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Ever used cannabis, commonly known in South Africa as dagga
4. Used dagga on one or more days in the month preceding the survey
5. Used dagga before age 13

		EVER USED DAGGA[3]			USED DAGGA IN THE PAST MONTH[4]			AGE OF INITIATION < 13 YEARS[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,807	5,525	10,332	4,884	5,587	10,471	4,876	5,589	10,465
	%	20.2	7.0	12.8	13.7	5.5	9.1	5.4	3.3	4.2
	LCL[1]	18.4	5.6	11.4	11.9	3.9	7.7	4.6	1.8	3.4
	UCL[2]	22.1	8.4	14.2	15.4	7.1	10.5	6.3	4.7	5.1
RACE: BLACK	n	3,557	4,024	7,581	3,611	4,076	7,687	3,605	4,073	7,678
	%	18.5	5.6	11.2	13.4	5.3	8.8	5.2	3.5	4.2
	LCL	16.6	4.3	9.9	11.4	3.4	7.3	4.3	1.6	3.2
	UCL	20.5	6.8	12.6	15.4	7.1	10.3	6.2	5.4	5.3
COLOURED	n	690	861	1,551	700	864	1,564	698	866	1,564
	%	27.9	15.1	21.0	16.2	8.3	12.0	6.5	4.1	5.2
	LCL	22.0	9.6	15.8	12.0	5.2	8.9	3.8	1.4	2.9
	UCL	33.9	20.5	26.2	20.5	11.4	15.1	9.3	6.8	7.5
WHITE	n	402	489	891	411	492	903	407	491	898
	%	27.6	13.0	19.5	10.2	5.3	7.5	4.7	0.8	2.5
	LCL	20.5	6.9	14.3	5.9	2.9	4.7	1.6	0.0	0.8
	UCL	34.8	19.0	24.6	14.4	7.7	10.2	7.8	1.6	4.2
INDIAN	n	67	66	133	67	66	133	67	68	135
	%	19.1	13.4	16.2	25.3	7.4	16.3	6.5	2.1	4.2
	LCL	2.5	0.5	4.8	5.0	-0.3	4.5	-1.9	-0.7	0.1
	UCL	35.8	26.3	27.6	45.7	15.0	28.1	14.9	4.9	8.4
OTHER	n	47	47	94	50	48	98	47	48	95
	%	24.6	0.9	13.9	18.5	3.0	11.7	9.5	1.9	6.1
	LCL	8.4	-0.5	1.8	9.6	-1.6	5.6	0.9	-1.9	0.9
	UCL	40.7	2.2	26.0	27.4	7.6	17.9	18.1	5.6	11.2
GRADE 08	n	1,341	1,465	2,806	1,363	1,474	2,837	1,367	1,475	2,842
	%	16.1	4.6	10.1	12.4	6.6	9.4	6.7	4.2	5.4
	LCL	13.5	2.8	8.3	9.8	2.3	6.8	5.0	0.0	3.0
	UCL	18.8	6.3	11.8	15.0	10.9	12.0	8.5	8.5	7.9
GRADE 09	n	1,658	1,842	3,500	1,689	1,871	3,560	1,684	1,874	3,558
	%	16.5	7.6	11.8	11.3	6.2	8.6	5.1	2.5	3.7
	LCL	13.6	5.4	9.9	9.0	4.2	6.8	3.7	1.4	2.9
	UCL	19.5	9.8	13.7	13.6	8.3	10.4	6.4	3.5	4.5
GRADE 10	n	1,114	1,226	2,340	1,130	1,237	2,367	1,123	1,235	2,358
	%	23.4	7.7	13.4	15.8	4.6	8.7	4.1	3.4	3.6
	LCL	19.7	4.7	9.9	12.5	2.8	6.3	2.2	-0.3	1.3
	UCL	27.0	10.7	16.8	19.2	6.3	11.0	6.0	7.1	6.0
GRADE 11	n	694	992	1,686	702	1,005	1,707	702	1,005	1,707
	%	30.8	9.1	18.9	17.5	4.3	10.2	5.4	2.5	3.8
	LCL	23.9	6.5	15.1	13.4	2.8	7.9	2.8	-0.4	1.7
	UCL	37.7	11.7	22.7	21.5	5.8	12.5	8.0	5.3	5.9
AGE: 13 OR UNDER	n	286	520	806	288	524	812	286	521	807
	%	8.9	1.8	4.2	6.6	8.5	7.8	4.4	7.5	6.5
	LCL	5.5	0.1	2.9	3.8	6.5	6.0	1.8	5.8	4.7
	UCL	12.4	3.4	5.6	9.3	10.4	9.6	7.0	9.3	8.2
14	n	630	945	1,575	640	948	1,588	633	947	1,580
	%	10.2	5.9	7.6	5.7	3.8	4.6	4.1	1.9	2.7
	LCL	7.3	3.1	5.3	3.5	1.5	2.8	2.7	0.5	1.7
	UCL	13.0	8.7	9.8	7.9	6.2	6.3	5.4	3.2	3.8
15	n	806	992	1,798	817	998	1,815	820	1,001	1,821
	%	16.5	7.4	11.0	11.0	5.0	7.4	5.6	1.8	3.3
	LCL	13.0	5.4	9.2	7.9	3.4	5.9	4.0	0.7	2.4
	UCL	19.9	9.4	12.8	14.0	6.5	8.9	7.2	3.0	4.3
16	n	911	1,009	1,920	926	1,026	1,952	916	1,024	1,940
	%	23.7	10.3	16.4	13.9	5.4	9.3	5.8	1.5	3.4
	LCL	19.4	7.1	13.3	11.0	3.8	7.4	3.4	0.5	2.3
	UCL	28.0	13.5	19.4	16.8	7.0	11.2	8.1	2.5	4.6
17	n	789	797	1,586	803	804	1,607	803	806	1,609
	%	26.5	7.3	16.1	18.9	5.5	11.6	3.6	1.8	2.6
	LCL	22.5	4.5	12.8	15.0	3.3	8.9	2.2	0.7	1.6
	UCL	30.6	10.1	19.3	22.7	7.7	14.3	5.1	2.9	3.7
18	n	467	418	885	474	423	897	480	425	905
	%	27.7	6.9	16.7	19.8	7.3	13.2	8.5	10.0	9.3
	LCL	21.9	4.2	12.8	14.7	3.5	9.9	4.8	-4.5	1.5
	UCL	33.5	9.5	20.5	25.0	11.1	16.5	12.3	24.4	17.0
19 OR OVER	n	701	547	1,248	712	566	1,278	714	564	1,278
	%	22.7	5.8	15.1	15.4	5.2	10.8	5.4	4.2	4.9
	LCL	17.0	3.5	11.8	11.9	2.8	8.6	2.9	0.8	2.5
	UCL	28.3	8.0	18.4	19.0	7.6	13.1	7.9	7.7	7.2

Table 14: Percentage of high school learners who used other drugs by gender, race, grade, age and province

		EVER USED INHALANTS[3]			EVER USED MANDRAX[4]			EVER USED COCAINE[5]			EVER USED HEROIN[6]			EVER USED "CLUB DRUGS" [7]			EVER USED OVER-THE-COUNTER OR PRESCRIPTION DRUGS[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,904	5,587	10,491	4,888	5,584	10,472	4,848	5,544	10,392	4,892	5,585	10,477	4,848	5,531	10,379	4,901	5,584	10,485
	%	13.1	9.5	11.1	7.6	4.8	6.0	7.3	5.6	6.4	11.8	11.3	11.5	7.6	4.4	5.8	16.4	14.8	15.5
	LCL[1]	11.2	8.2	9.9	6.3	3.2	4.8	6.0	3.9	5.1	9.8	8.9	9.8	6.5	3.1	4.8	14.1	12.9	13.8
	UCL[2]	14.9	10.9	12.3	8.9	6.3	7.2	8.6	7.3	7.6	13.8	13.7	13.2	8.8	5.6	6.8	18.7	16.6	17.2
EASTERN CAPE	n	484	647	1,131	478	645	1,123	476	641	1,117	483	650	1,133	473	645	1,118	486	645	1,131
	%	11.5	7.5	9.2	5.4	2.3	3.6	5.3	2.1	3.5	15.7	10.5	12.8	7.5	3.2	5.0	9.4	12.5	11.2
	LCL	3.4	3.4	4.3	1.8	0.8	2.3	2.7	0.4	1.8	9.1	6.2	8.0	3.6	1.8	3.1	7.8	8.5	8.7
	UCL	19.7	11.5	14.2	8.9	3.7	4.9	8.0	3.9	5.2	22.4	14.8	17.5	11.4	4.5	6.9	10.9	16.6	13.6
FREE STATE	n	546	582	1,128	547	581	1,128	543	580	1,123	543	578	1,121	541	573	1,114	547	580	1,127
	%	15.3	6.1	10.4	6.9	3.3	5.0	4.1	4.2	4.2	9.7	8.9	9.3	7.1	3.9	5.4	14.1	15.7	14.9
	LCL	8.4	0.7	4.7	3.8	1.2	2.9	2.3	2.1	2.6	6.6	5.4	6.8	4.5	1.0	3.9	10.3	11.1	12.7
	UCL	22.3	11.5	16.1	10.0	5.4	7.1	5.9	6.4	5.8	12.8	12.3	11.7	9.8	6.8	6.9	18.0	20.3	17.2
GAUTENG	n	535	619	1,154	530	619	1,149	530	620	1,150	534	617	1,151	525	617	1,142	530	620	1,150
	%	17.1	6.4	11.5	6.4	1.7	3.9	4.0	2.5	3.2	8.1	7.2	7.6	5.3	2.6	3.9	9.0	8.9	9.0
	LCL	13.7	4.0	9.1	5.0	1.0	3.0	2.9	1.3	2.5	5.8	4.5	5.7	3.3	1.2	2.5	6.4	6.2	7.4
	UCL	20.6	8.8	13.9	7.8	2.5	4.9	5.1	3.6	3.9	10.4	9.9	9.5	7.4	4.1	5.3	11.6	11.6	10.5
KWAZULU-NATAL	n	535	639	1,174	536	635	1,171	530	635	1,165	534	641	1,175	533	630	1,163	533	639	1,172
	%	15.9	19.2	17.8	10.1	5.1	7.3	9.2	8.2	8.6	12.8	17.0	15.2	8.9	5.6	7.0	31.6	19.6	24.8
	LCL	11.4	15.5	14.8	6.2	2.1	4.1	5.4	4.6	5.9	7.5	9.7	11.2	5.9	1.6	4.0	24.9	14.7	20.2
	UCL	20.4	22.9	20.7	14.0	8.1	10.5	13.1	11.7	11.4	18.1	24.3	19.2	11.9	9.6	10.1	38.2	24.4	29.4
LIMPOPO	n	473	526	999	475	526	1,001	470	520	990	471	524	995	467	520	987	474	525	999
	%	11.3	4.8	7.6	6.3	9.5	8.2	9.5	11.6	10.7	15.5	13.1	14.1	6.9	5.6	6.2	14.2	21.6	18.5
	LCL	7.5	2.4	5.2	4.0	1.4	3.2	5.1	3.4	5.1	10.1	5.7	8.0	3.5	1.9	2.7	9.3	14.2	13.4
	UCL	15.2	7.3	10.0	8.7	17.6	13.2	13.9	19.9	16.3	20.9	20.5	20.3	10.4	9.4	9.6	19.1	29.0	23.6
MPUMA-LANGA	n	596	654	1,250	595	652	1,247	589	644	1,233	596	650	1,246	588	645	1,233	598	654	1,252
	%	10.2	12.8	11.6	8.5	6.2	7.2	9.7	5.8	7.6	12.6	12.7	12.7	8.5	5.4	6.8	14.8	12.4	13.5
	LCL	6.6	5.8	7.3	3.9	2.5	3.6	5.7	2.2	4.5	7.6	6.7	7.5	5.1	3.4	4.4	8.8	9.0	9.7
	UCL	13.9	19.7	15.9	13.2	9.8	10.9	13.6	9.5	10.7	17.7	18.7	17.8	11.9	7.3	9.2	20.9	15.9	17.3
NORTHERN CAPE	n	482	573	1,055	481	576	1,057	477	569	1,046	481	576	1,057	480	568	1,048	483	574	1,057
	%	7.0	4.2	5.3	9.3	4.7	6.4	5.8	1.9	3.4	7.7	4.3	5.6	6.8	3.0	4.4	7.2	5.9	6.4
	LCL	2.5	-0.7	0.8	4.0	1.3	2.4	1.9	-0.5	0.4	2.5	1.3	2.6	1.5	0.5	0.7	3.7	3.7	4.0
	UCL	11.5	9.0	9.7	14.6	8.1	10.4	9.7	4.4	6.3	12.9	7.3	8.7	12.1	5.4	8.2	10.8	8.1	8.7
NORTH WEST	n	615	569	1,184	613	570	1,183	608	566	1,174	613	570	1,183	612	566	1,178	616	568	1,184
	%	6.8	5.1	5.9	6.8	3.7	5.2	7.4	2.5	4.9	11.2	7.8	9.4	6.2	3.8	4.9	10.7	11.5	11.1
	LCL	3.8	1.5	2.8	3.8	0.4	2.2	3.2	0.0	1.7	4.5	3.4	4.1	3.2	0.1	1.7	7.5	6.8	7.6
	UCL	9.8	8.8	9.1	9.8	6.9	8.2	11.6	5.1	8.0	17.8	12.2	14.7	9.1	7.5	8.1	13.8	16.2	14.7
WESTERN CAPE	n	638	778	1,416	633	780	1,413	625	769	1,394	637	779	1,416	629	767	1,396	634	779	1,413
	%	12.8	4.7	8.1	7.8	4.0	5.6	7.0	2.5	4.3	6.0	5.7	5.8	10.5	3.2	6.2	11.8	7.9	9.5
	LCL	9.4	1.9	5.5	4.7	2.7	4.2	4.0	1.2	3.0	3.3	2.2	3.6	6.7	1.9	4.2	7.6	5.9	7.0
	UCL	16.1	7.6	10.6	10.9	5.3	6.9	10.0	3.7	5.7	8.8	9.2	8.0	14.2	4.5	8.3	15.9	9.9	12.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Ever used inhalants in their lifetime (for example glue, aerosols, paint thinners, petrol, or benzene)
4. Ever used Mandrax (methaqualone and diazepam, also known as buttons or a white pipe) in their lifetime
5. Ever used cocaine (powder, crack or rocks) in their lifetime
6. Ever used heroin (horse, brown sugar or white Thai) in their lifetime
7. Ever used "club drugs" in their lifetime (for example ecstasy, LSD, speed or magic mushrooms)
8. Ever used over-the-counter or prescription drugs to get high in their lifetime (for example pain killers, cough mixtures and diet pills)

		EVER USED INHALANTS[3]			EVER USED MANDRAX[4]			EVER USED COCAINE[5]			EVER USED HEROIN[6]			EVER USED "CLUB DRUGS" [7]			EVER USED OVER-THE-COUNTER OR PRESCRIPTION DRUGS[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,904	5,587	10,491	4,888	5,584	10,472	4,848	5,544	10,392	4,892	5,585	10,477	4,848	5,531	10,379	4,901	5,584	10,485
	%	13.1	9.5	11.1	7.6	4.8	6.0	7.3	5.6	6.4	11.8	11.3	11.5	7.6	4.4	5.8	16.4	14.8	15.5
	LCL[1]	11.2	8.2	9.9	6.3	3.2	4.8	6.0	3.9	5.1	9.8	8.9	9.8	6.5	3.1	4.8	14.1	12.9	13.8
	UCL[2]	14.9	10.9	12.3	8.9	6.3	7.2	8.6	7.3	7.6	13.8	13.7	13.2	8.8	5.6	6.8	18.7	16.6	17.2
RACE: BLACK	n	3,623	4,075	7,698	3,614	4,070	7,684	3,588	4,035	7,623	3,610	4,074	7,684	3,588	4,029	7,617	3,621	4,070	7,691
	%	12.1	9.4	10.6	7.1	4.7	5.8	7.0	6.3	6.6	12.6	12.9	12.8	6.9	4.2	5.4	17.6	15.3	16.3
	LCL	10.5	7.9	9.4	5.7	2.9	4.4	5.5	4.1	5.1	10.5	9.9	10.9	5.7	2.8	4.3	15.1	12.8	14.5
	UCL	13.7	11.0	11.8	8.5	6.6	7.1	8.5	8.5	8.1	14.7	16.0	14.6	8.1	5.6	6.5	20.0	17.8	18.1
COLOURED	n	701	867	1,568	700	866	1,566	695	859	1,554	700	866	1,566	697	856	1,553	698	865	1,563
	%	13.3	6.4	9.6	10.0	5.4	7.5	9.0	3.8	6.3	8.8	5.3	6.9	10.1	5.1	7.5	10.4	7.5	8.8
	LCL	8.8	3.8	6.9	6.4	2.9	5.2	5.1	1.5	4.0	4.9	2.9	4.5	5.7	2.8	4.8	6.4	4.6	6.1
	UCL	17.7	9.1	12.4	13.6	7.9	9.9	12.9	6.2	8.5	12.7	7.6	9.3	14.6	7.4	10.1	14.4	10.3	11.6
WHITE	n	411	491	902	410	491	901	405	492	897	410	491	901	407	491	898	411	492	903
	%	20.7	15.0	17.6	5.1	4.7	4.9	2.8	2.1	2.4	4.0	1.9	2.9	8.3	4.2	6.0	7.0	9.8	8.6
	LCL	12.8	9.2	11.8	2.2	2.6	2.9	1.2	0.3	1.2	1.5	0.5	1.4	4.9	1.5	3.8	3.8	4.5	5.2
	UCL	28.6	20.9	23.4	8.1	6.8	6.8	4.4	3.9	3.7	6.6	3.4	4.4	11.6	6.9	8.2	10.1	15.1	11.9
INDIAN	n	68	68	136	68	67	135	67	68	135	68	66	134	62	68	130	68	67	135
	%	16.0	15.4	15.7	18.5	4.9	11.7	23.5	6.8	15.0	10.6	17.9	14.3	13.4	7.1	10.0	16.0	8.7	12.3
	LCL	2.2	4.6	5.6	3.3	-0.8	2.7	4.6	-1.5	3.3	0.1	0.5	2.2	1.8	0.8	3.4	6.9	2.5	6.3
	UCL	29.8	26.2	25.8	33.7	10.5	20.7	42.4	15.1	26.7	21.1	35.4	26.3	24.9	13.4	16.7	25.2	14.8	18.4
OTHER	n	50	48	98	50	48	98	50	47	97	51	48	99	50	46	96	51	48	99
	%	13.5	4.7	9.7	11.2	2.8	7.6	12.4	0.6	7.3	18.8	8.8	14.5	12.7	11.3	12.1	39.4	22.4	32.1
	LCL	1.6	-1.9	3.4	2.2	-1.6	1.9	2.9	-0.6	1.6	4.9	0.8	7.4	2.6	2.7	5.1	21.3	8.5	19.0
	UCL	25.3	11.3	16.0	20.2	7.2	13.3	21.8	1.7	13.1	32.7	16.9	21.6	22.7	19.9	19.1	57.5	36.3	45.3
GRADE 08	n	1,373	1,476	2,849	1,363	1,476	2,839	1,351	1,463	2,814	1,366	1,478	2,844	1,349	1,456	2,805	1,369	1,473	2,842
	%	12.5	7.6	10.0	10.1	6.7	8.3	10.2	7.8	8.9	15.9	13.6	14.7	10.1	4.7	7.3	17.3	17.3	17.3
	LCL	10.2	4.8	7.8	7.3	2.4	5.6	7.6	3.4	6.1	12.4	10.4	11.9	7.2	3.1	5.5	13.0	12.3	13.4
	UCL	14.9	10.4	12.1	12.9	10.9	11.0	12.7	12.1	11.7	19.3	16.8	17.5	12.9	6.3	9.1	21.6	22.3	21.2
GRADE 09	n	1,694	1,870	3,564	1,691	1,868	3,559	1,675	1,854	3,529	1,694	1,864	3,558	1,673	1,854	3,527	1,694	1,869	3,563
	%	12.6	10.6	11.6	7.3	5.4	6.3	6.8	4.8	5.7	12.7	12.1	12.4	6.9	6.1	6.5	16.3	14.7	15.5
	LCL	10.3	7.0	9.0	5.3	3.5	4.7	4.9	2.4	3.9	9.9	8.4	9.6	5.2	3.9	4.9	12.7	12.1	13.0
	UCL	15.0	14.3	14.2	9.2	7.2	7.8	8.7	7.2	7.6	15.6	15.8	15.2	8.7	8.3	8.1	19.8	17.3	17.9
GRADE 10	n	1,129	1,237	2,366	1,129	1,236	2,365	1,121	1,227	2,348	1,126	1,236	2,362	1,124	1,223	2,347	1,130	1,236	2,366
	%	13.3	9.8	11.1	5.5	3.5	4.2	5.9	5.8	5.8	8.2	11.7	10.4	6.5	3.3	4.5	15.3	12.0	13.2
	LCL	9.8	6.1	8.2	3.8	1.8	2.8	4.1	2.2	3.5	6.0	5.0	6.1	4.4	1.2	2.6	9.1	9.2	9.7
	UCL	16.9	13.5	14.1	7.1	5.3	5.7	7.7	9.3	8.1	10.4	18.5	14.8	8.5	5.4	6.3	21.5	14.8	16.7
GRADE 11	n	708	1,004	1,712	705	1,004	1,709	701	1,000	1,701	706	1,007	1,713	702	998	1,700	708	1,006	1,714
	%	14.7	10.7	12.5	6.0	2.6	4.2	4.3	2.8	3.5	6.9	4.6	5.7	5.6	3.1	4.2	16.2	15.8	16.0
	LCL	10.9	6.2	9.4	3.7	0.9	2.3	1.8	0.4	1.2	3.6	2.2	3.1	3.2	1.3	2.5	8.4	11.4	11.6
	UCL	18.5	15.2	15.7	8.2	4.4	6.0	6.8	5.2	5.7	10.2	7.0	8.2	8.0	4.8	5.9	23.9	20.1	20.4
AGE: 13 OR UNDER	n	289	524	813	288	524	812	286	519	805	287	523	810	286	518	804	289	524	813
	%	6.7	4.4	5.2	3.4	8.2	6.6	7.3	8.4	8.0	9.5	8.8	9.1	1.8	2.6	2.3	11.7	15.6	14.3
	LCL	3.6	2.0	3.4	1.1	6.8	5.3	2.8	6.8	6.5	4.9	5.0	5.6	0.3	1.3	1.5	7.0	12.0	11.3
	UCL	9.7	6.9	7.0	5.7	9.7	7.8	11.9	10.0	9.6	14.2	12.7	12.5	3.3	3.9	3.2	16.4	19.3	17.3
14	n	642	953	1,595	640	951	1,591	635	953	1,588	641	954	1,595	633	945	1,578	638	954	1,592
	%	10.7	8.7	9.5	5.6	3.8	4.5	5.2	5.9	5.6	7.5	11.2	9.8	7.0	5.2	5.9	14.5	11.4	12.6
	LCL	7.0	5.2	6.9	2.2	1.6	2.4	2.4	2.3	2.9	4.7	7.2	6.7	4.8	2.7	4.2	10.5	7.7	9.4
	UCL	14.5	12.3	12.2	8.9	6.0	6.6	8.1	9.5	8.3	10.2	15.2	12.8	9.2	7.6	7.6	18.5	15.1	15.8
15	n	821	1,000	1,821	822	996	1,818	813	994	1,807	821	998	1,819	815	994	1,809	819	994	1,813
	%	12.5	10.2	11.2	5.5	4.4	4.9	6.3	4.3	5.1	11.5	12.8	12.3	4.8	3.7	4.2	12.9	14.1	13.6
	LCL	8.8	5.6	8.1	3.5	2.7	3.4	4.0	2.4	3.8	8.7	8.9	9.6	3.0	2.4	3.0	9.4	11.3	11.5
	UCL	16.3	14.9	14.2	7.5	6.2	6.3	8.5	6.1	6.3	14.3	16.8	15.0	6.7	5.1	5.3	16.5	16.8	15.8
16	n	926	1,019	1,945	924	1,022	1,946	916	1,009	1,925	921	1,024	1,945	916	1,008	1,924	928	1,023	1,951
	%	14.9	11.3	13.0	7.3	4.8	5.9	6.9	4.1	5.4	14.0	8.6	11.1	8.3	4.2	6.1	14.5	17.6	16.2
	LCL	11.5	7.4	10.1	5.3	3.2	4.5	4.6	2.1	3.5	10.7	6.1	8.6	6.1	2.2	4.4	11.6	10.4	12.3
	UCL	18.4	15.1	15.9	9.2	6.5	7.4	9.2	6.1	7.2	17.3	11.2	13.5	10.5	6.1	7.7	17.4	24.8	20.0
17	n	806	805	1,611	802	805	1,607	797	799	1,596	803	802	1,605	797	795	1,592	807	804	1,611
	%	15.8	7.3	11.2	9.1	3.7	6.2	8.9	3.5	6.0	11.4	11.0	11.2	9.3	3.9	6.3	16.9	11.8	14.1
	LCL	12.1	4.4	8.2	6.1	2.1	4.6	6.2	1.9	4.2	7.9	3.3	7.1	6.5	2.1	4.7	13.8	9.0	11.7
	UCL	19.6	10.2	14.2	12.1	5.4	7.8	11.5	5.1	7.7	14.9	18.7	15.3	12.1	5.7	8.0	20.0	14.7	16.6
18	n	477	423	900	476	423	899	474	421	895	480	421	901	473	419	892	481	422	903
	%	15.1	18.1	16.7	12.0	5.8	8.7	9.8	12.8	11.4	10.8	23.1	17.2	11.7	5.3	8.4	17.5	14.4	15.9
	LCL	9.9	4.4	9.2	7.8	1.4	4.9	6.0	-1.5	3.7	7.3	9.3	9.1	7.8	2.7	5.6	12.5	9.7	12.6
	UCL	20.4	31.7	24.1	16.1	10.1	12.6	13.5	27.1	19.0	14.4	36.9	25.3	15.6	8.0	11.1	22.4	19.1	19.1
19 OR OVER	n	718	563	1,281	714	561	1,275	708	553	1,261	714	564	1,278	708	555	1,263	718	564	1,282
	%	12.6	8.7	10.8	7.6	3.0	5.6	6.8	5.7	6.3	15.5	11.1	13.5	7.7	5.8	6.9	19.8	18.7	19.3
	LCL	8.2	5.5	7.8	5.1	1.4	4.1	4.4	2.4	3.9	11.3	7.5	10.4	5.3	2.9	4.6	10.4	14.3	14.1
	UCL	16.9	11.8	13.8	10.1	4.7	7.1	9.2	9.1	8.7	19.7	14.6	16.6	10.1	8.8	9.1	29.2	23.1	24.5

Table 15: Percentage of high school learners who engaged in substance use on school property by gender, race, grade, age and province

		USED ALCOHOL ON SCHOOL PROPERTY[3]			USED CANNABIS (DAGGA) ON SCHOOL PROPERTY[4]			WAS OFFERED, SOLD OR GIVEN AN ILLEGAL DRUG ON SCHOOL PROPERTY[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,867	5,580	10,447	4,852	5,549	10,401	4,818	5,526	10,344
	%	12.5	6.4	9.1	9.1	3.8	6.1	20.2	14.8	17.2
	LCL[1]	10.6	4.7	7.6	7.4	2.6	5.1	18.5	12.5	15.4
	UCL[2]	14.4	8.0	10.6	10.7	5.0	7.2	21.9	17.0	18.9
EASTERN CAPE	n	477	645	1,122	469	639	1,108	471	640	1,111
	%	15.7	4.7	9.4	7.4	1.5	4.0	20.8	13.6	16.7
	LCL	10.3	2.4	5.5	3.8	0.2	1.8	15.1	10.0	13.1
	UCL	21.1	7.0	13.3	11.0	2.7	6.2	26.5	17.3	20.2
FREE STATE	n	547	580	1,127	540	580	1,120	540	580	1,120
	%	12.3	6.3	9.1	8.1	1.6	4.6	19.5	12.4	15.7
	LCL	9.8	3.9	6.9	5.6	0.6	3.5	16.1	10.0	13.8
	UCL	14.9	8.8	11.4	10.6	2.6	5.8	23.0	14.8	17.7
GAUTENG	n	528	618	1,146	527	617	1,144	526	615	1,141
	%	9.5	4.9	7.1	9.6	2.2	5.7	22.6	16.3	19.3
	LCL	5.9	2.9	5.7	6.7	1.1	4.7	19.7	14.1	17.2
	UCL	13.2	6.8	8.4	12.6	3.3	6.8	25.5	18.5	21.4
KWAZULU-NATAL	n	534	636	1,170	536	635	1,171	523	631	1,154
	%	15.0	5.0	9.4	12.2	6.7	9.1	17.1	12.5	14.5
	LCL	9.4	1.9	5.4	6.9	3.0	6.2	12.4	6.3	9.4
	UCL	20.6	8.2	13.4	17.6	10.4	12.0	21.8	18.7	19.6
LIMPOPO	n	470	524	994	466	521	987	466	513	979
	%	9.3	9.7	9.5	7.4	4.0	5.4	22.1	14.6	17.9
	LCL	4.8	1.3	4.0	4.4	1.3	2.6	18.2	10.4	13.9
	UCL	13.9	18.0	15.1	10.4	6.8	8.3	25.9	18.8	21.8
MPUMALANGA	n	594	654	1,248	591	649	1,240	589	646	1,235
	%	16.7	8.3	12.1	10.4	5.4	7.7	20.8	16.1	18.3
	LCL	12.0	5.0	9.0	6.1	1.6	3.8	15.0	11.5	13.5
	UCL	21.4	11.5	15.2	14.6	9.3	11.5	26.6	20.8	23.1
NORTHERN CAPE	n	478	571	1,049	478	569	1,047	475	566	1,041
	%	12.1	3.8	6.9	4.3	1.6	2.7	16.5	33.1	26.8
	LCL	7.3	2.6	3.8	1.5	-0.6	0.5	13.9	-7.8	0.0
	UCL	16.8	5.0	10.1	7.2	3.9	4.9	19.1	73.9	53.6
NORTH WEST	n	610	571	1,181	613	566	1,179	608	563	1,171
	%	11.1	5.0	7.9	8.8	3.2	5.9	17.4	14.8	16.0
	LCL	5.3	2.0	3.7	3.7	0.2	2.1	12.6	10.7	11.6
	UCL	16.9	8.1	12.1	13.9	6.1	9.6	22.1	18.8	20.4
WESTERN CAPE	n	629	781	1,410	632	773	1,405	620	772	1,392
	%	9.7	8.6	9.1	5.9	2.8	4.1	25.1	15.7	19.6
	LCL	5.4	5.5	6.8	3.0	1.5	2.7	20.2	13.0	17.0
	UCL	14.1	11.8	11.3	8.7	4.2	5.5	29.9	18.5	22.2

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. During school time in the month preceding the survey (for example a beer, a glass of wine, or a "tot" of brandy)
4. During school time in the month preceding the survey
5. During the 6 months preceding the survey

		USED ALCOHOL ON SCHOOL PROPERTY[3]			USED CANNABIS (DAGGA) ON SCHOOL PROPERTY[4]			WAS OFFERED, SOLD OR GIVEN AN ILLEGAL DRUG ON SCHOOL PROPERTY[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,867	5,580	10,447	4,852	5,549	10,401	4,818	5,526	10,344
	%	12.5	6.4	9.1	9.1	3.8	6.1	20.2	14.8	17.2
	LCL[1]	10.6	4.7	7.6	7.4	2.6	5.1	18.5	12.5	15.4
	UCL[2]	14.4	8.0	10.6	10.7	5.0	7.2	21.9	17.0	18.9
RACE: BLACK	n	3,598	4,065	7,663	3,584	4,043	7,627	3,566	4,026	7,592
	%	12.8	6.8	9.5	9.2	4.2	6.4	20.4	14.2	16.9
	LCL	10.9	4.9	7.9	7.4	2.6	5.2	18.4	12.3	15.2
	UCL	14.7	8.8	11.0	11.1	5.8	7.6	22.5	16.1	18.7
COLOURED	n	696	866	1,562	698	862	1,560	684	857	1,541
	%	11.9	5.8	8.6	9.0	3.0	5.8	20.9	24.5	22.8
	LCL	8.4	3.5	6.5	5.6	0.9	3.6	17.0	11.4	15.3
	UCL	15.3	8.1	10.7	12.3	5.1	8.0	24.7	37.6	30.4
WHITE	n	409	491	900	407	491	898	409	491	900
	%	8.1	2.8	5.2	4.7	1.4	2.8	17.1	10.8	13.6
	LCL	4.3	0.9	3.0	0.8	0.1	0.7	10.0	7.8	9.9
	UCL	12.0	4.7	7.3	8.5	2.6	5.0	24.3	13.8	17.3
INDIAN	n	67	67	134	68	66	134	67	64	131
	%	9.9	7.5	8.7	16.4	3.8	10.1	16.9	16.5	16.7
	LCL	-0.1	0.3	4.1	2.8	-1.0	2.6	10.0	10.1	12.2
	UCL	20.0	14.8	13.3	30.0	8.7	17.6	23.9	23.0	21.3
OTHER	n	51	48	99	49	47	96	47	48	95
	%	18.6	3.1	11.9	10.0	1.9	6.5	17.9	18.5	18.1
	LCL	7.9	-1.5	4.7	1.7	-1.9	1.3	7.5	-2.7	9.5
	UCL	29.3	7.7	19.1	18.3	5.7	11.6	28.2	39.7	26.8
GRADE 08	n	1,358	1,472	2,830	1,346	1,469	2,815	1,331	1,453	2,784
	%	13.4	7.3	10.2	10.4	3.7	6.9	23.2	15.7	19.3
	LCL	9.7	3.0	7.3	7.6	2.4	5.0	20.2	13.6	17.5
	UCL	17.0	11.5	13.1	13.2	5.0	8.7	26.2	17.8	21.1
GRADE 09	n	1,682	1,870	3,552	1,677	1,854	3,531	1,666	1,845	3,511
	%	12.6	6.9	9.6	7.1	3.9	5.4	19.4	16.3	17.8
	LCL	9.5	4.9	7.7	5.6	2.1	4.0	17.0	13.6	15.5
	UCL	15.6	8.9	11.4	8.6	5.7	6.8	21.8	19.0	20.0
GRADE 10	n	1,124	1,232	2,356	1,124	1,226	2,350	1,122	1,226	2,348
	%	11.2	4.6	7.0	8.7	5.0	6.4	19.7	12.9	15.4
	LCL	8.2	2.6	4.9	5.6	1.4	4.0	15.8	7.5	11.2
	UCL	14.2	6.6	9.1	11.7	8.6	8.7	23.6	18.3	19.5
GRADE 11	n	703	1,006	1,709	705	1,000	1,705	699	1,002	1,701
	%	12.7	7.5	9.9	10.4	1.5	5.6	16.5	14.4	15.3
	LCL	8.1	4.6	6.8	6.8	-0.1	3.3	12.0	11.1	12.2
	UCL	17.3	10.5	12.9	14.0	3.1	7.8	20.9	17.7	18.4
AGE: 13 OR UNDER	n	288	524	812	287	520	807	287	518	805
	%	6.3	9.1	8.1	5.3	1.0	2.5	18.0	14.8	15.9
	LCL	2.9	7.6	6.5	1.5	0.1	1.0	12.8	10.9	12.8
	UCL	9.8	10.6	9.7	9.2	2.0	4.0	23.2	18.6	19.0
14	n	639	948	1,587	633	947	1,580	629	945	1,574
	%	9.0	4.0	6.0	5.0	3.3	4.0	18.7	15.1	16.5
	LCL	6.0	1.9	4.0	2.1	1.0	1.6	14.4	12.2	14.0
	UCL	12.1	6.1	7.9	8.0	5.6	6.4	23.1	18.0	19.1
15	n	817	997	1,814	813	996	1,809	809	992	1,801
	%	9.4	5.0	6.7	5.1	2.4	3.5	20.2	13.1	15.9
	LCL	6.3	3.4	5.1	3.0	1.1	2.2	15.6	10.7	13.4
	UCL	12.6	6.5	8.4	7.1	3.8	4.8	24.8	15.4	18.4
16	n	921	1,023	1,944	915	1,013	1,928	913	1,010	1,923
	%	11.7	4.1	7.6	9.6	2.7	5.9	19.9	12.2	15.7
	LCL	8.9	2.7	5.9	6.8	1.2	4.0	16.5	9.5	13.7
	UCL	14.6	5.6	9.3	12.5	4.1	7.7	23.2	14.9	17.7
17	n	798	806	1,604	797	801	1,598	791	796	1,587
	%	15.2	5.4	9.9	11.3	3.1	6.9	18.0	18.6	18.3
	LCL	11.5	3.4	7.5	8.3	1.4	4.9	15.3	9.4	13.1
	UCL	18.9	7.4	12.3	14.3	4.8	8.8	20.7	27.7	23.5
18	n	474	420	894	473	423	896	466	415	881
	%	16.7	10.3	13.4	16.0	14.4	15.2	27.2	12.5	19.5
	LCL	12.8	5.0	9.6	12.2	-0.9	7.1	20.7	7.8	15.2
	UCL	20.6	15.7	17.1	19.9	29.7	23.3	33.7	17.1	23.8
19 OR OVER	n	706	563	1,269	712	555	1,267	703	554	1,257
	%	13.4	11.2	12.4	9.5	4.9	7.4	21.4	17.9	19.9
	LCL	9.6	8.1	9.5	5.2	2.0	4.4	16.5	14.3	16.4
	UCL	17.2	14.3	15.3	13.8	7.7	10.4	26.4	21.5	23.3

Table 16: Percentage of high school learners who engaged in sexual behaviour by gender, race, grade, age and province

		EVER HAD SEX[3]			AGE OF INITIATION < 14 YEARS[4]			HAD 2 OR MORE SEXUAL PARTNERS IN LIFETIME[5]			HAD 1 OR MORE SEXUAL PARTNERS IN THE PAST 3 MONTHS[5,6]			USED ALCOHOL OR DRUGS BEFORE SEX[5,7]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,447	10,187	4,799	5,467	10,266	2,062	1,437	3,499	1,861	1,357	3,218	2,025	1,451	3,476
	%	50.1	34.1	41.1	25.4	5.6	14.4	66.4	38.1	54.0	67.9	73.1	70.2	17.9	8.7	13.8
	LCL[1]	47.0	31.1	38.6	23.1	4.6	13.1	63.5	34.4	51.3	64.8	69.5	67.7	15.8	6.6	12.0
	UCL[2]	53.2	37.1	43.7	27.7	6.6	15.7	69.3	41.8	56.7	71.0	76.7	72.8	20.1	10.8	15.6
EASTERN CAPE	n	460	632	1,092	479	629	1,108	209	195	404	195	186	381	200	192	392
	%	53.4	36.4	43.6	22.6	4.6	12.5	53.6	38.3	46.2	70.5	78.1	74.3	20.8	7.1	14.1
	LCL	40.7	26.2	33.0	15.2	2.9	8.4	44.8	30.3	38.2	61.6	70.3	65.7	15.1	1.4	9.8
	UCL	66.1	46.6	54.3	29.9	6.3	16.6	62.3	46.2	54.2	79.4	86.0	83.0	26.5	12.8	18.5
FREE STATE	n	536	571	1,107	536	565	1,101	272	151	423	237	139	376	270	147	417
	%	58.2	37.3	47.0	34.8	4.6	18.8	70.9	37.8	57.8	63.1	60.4	62.0	17.7	11.5	15.3
	LCL	53.7	30.6	43.6	30.0	3.2	15.7	63.2	31.0	54.4	55.5	53.3	57.1	11.2	7.6	8.6
	UCL	62.6	44.1	50.5	39.6	6.1	21.9	78.5	44.6	61.3	70.7	67.6	66.9	24.2	15.4	21.9
GAUTENG	n	517	605	1,122	523	606	1,129	284	193	477	240	181	421	278	194	472
	%	60.8	34.5	47.0	35.0	4.7	19.1	71.2	42.9	61.3	61.9	67.0	63.8	13.8	8.9	12.0
	LCL	52.3	29.5	42.0	27.5	3.0	15.3	65.8	35.3	55.8	53.9	62.4	58.1	9.3	2.5	8.1
	UCL	69.3	39.5	52.0	42.5	6.4	22.9	76.6	50.5	66.9	70.0	71.7	69.6	18.2	15.3	16.0
KWAZULU-NATAL	n	514	618	1,132	526	625	1,151	204	132	336	193	123	316	196	133	329
	%	47.5	29.2	37.1	25.4	8.0	15.6	73.2	29.7	54.6	77.2	78.5	77.8	18.8	10.5	15.2
	LCL	39.9	22.9	31.2	20.0	5.1	12.5	63.6	21.1	48.1	71.6	65.2	72.4	12.2	3.2	10.5
	UCL	55.1	35.6	43.0	30.9	10.9	18.8	82.7	38.2	61.0	82.9	91.9	83.1	25.4	17.8	20.0
LIMPOPO	n	457	513	970	459	505	964	195	136	331	165	123	288	179	144	323
	%	49.9	36.9	42.4	21.8	3.8	11.5	65.4	40.9	53.6	69.3	73.8	71.5	18.1	3.9	10.7
	LCL	43.9	28.6	37.3	15.7	1.3	8.8	58.6	32.2	47.8	57.7	69.1	63.7	12.6	1.3	4.4
	UCL	55.9	45.1	47.5	28.0	6.4	14.2	72.2	49.5	59.5	81.0	78.5	79.3	23.5	6.4	17.1
MPUMA-LANGA	n	569	635	1,204	581	639	1,220	244	203	447	229	196	425	253	205	458
	%	44.0	38.0	40.7	25.4	7.5	15.7	63.3	46.4	55.0	62.0	77.3	69.8	14.3	13.2	13.8
	LCL	35.9	32.6	36.0	20.5	4.8	12.8	58.5	40.0	49.9	52.2	73.0	64.3	9.4	6.5	9.3
	UCL	52.1	43.4	45.4	30.3	10.2	18.5	68.2	52.7	60.0	71.8	81.6	75.4	19.2	19.9	18.2
NORTHERN CAPE	n	468	559	1,027	472	569	1,041	212	126	338	194	119	313	215	129	344
	%	45.0	45.6	45.4	22.5	3.6	10.8	67.0	46.1	59.2	67.4	65.8	66.8	22.5	7.0	16.6
	LCL	36.7	9.5	21.4	15.5	1.0	7.1	60.2	33.2	53.3	55.8	56.5	57.6	15.3	3.0	11.7
	UCL	53.3	81.7	69.3	29.6	6.2	14.5	73.8	58.9	65.1	79.0	75.2	76.0	29.7	11.0	21.6
NORTH WEST	n	603	553	1,156	599	563	1,162	196	112	308	171	102	273	194	121	315
	%	40.7	30.1	35.2	14.8	5.5	9.9	58.9	40.8	51.1	69.8	61.9	66.3	17.1	11.3	14.5
	LCL	35.3	24.4	30.0	9.4	3.1	6.5	52.8	29.2	43.5	61.7	52.8	60.1	12.9	5.8	11.6
	UCL	46.1	35.7	40.4	20.3	7.8	13.3	64.9	52.5	58.8	77.9	71.1	72.6	21.3	16.8	17.5
WESTERN CAPE	n	616	761	1,377	624	766	1,390	246	189	435	237	188	425	240	186	426
	%	45.1	32.7	37.8	23.2	4.8	12.5	62.9	34.5	48.1	58.3	76.4	67.7	24.1	8.0	15.8
	LCL	33.7	24.8	28.6	17.1	3.4	9.2	54.7	14.5	31.4	50.8	67.8	61.7	19.1	2.7	10.8
	UCL	56.5	40.6	47.0	29.3	6.3	15.8	71.0	54.5	64.9	65.9	85.0	73.6	29.0	13.4	20.8

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. When the penis enters the vagina or anus
4. Had sex before the age of 14
5. Of those who ever had sex
6. In the 3 months preceding the survey
7. Drank alcohol or used drugs (for example mandrax, dagga, ecstasy) before the last time they had sex

		EVER HAD SEX[3]			AGE OF INITIATION < 14 YEARS[4]			HAD 2 OR MORE SEXUAL PARTNERS IN LIFETIME[5]			HAD 1 OR MORE SEXUAL PARTNERS IN THE PAST 3 MONTHS[5,6]			USED ALCOHOL OR DRUGS BEFORE SEX[5,7]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,447	10,187	4,799	5,467	10,266	2,062	1,437	3,499	1,861	1,357	3,218	2,025	1,451	3,476
	%	50.1	34.1	41.1	25.4	5.6	14.4	66.4	38.1	54.0	67.9	73.1	70.2	17.9	8.7	13.8
	LCL[1]	47.0	31.1	38.6	23.1	4.6	13.1	63.5	34.4	51.3	64.8	69.5	67.7	15.8	6.6	12.0
	UCL[2]	53.2	37.1	43.7	27.7	6.6	15.7	69.3	41.8	56.7	71.0	76.7	72.8	20.1	10.8	15.6
RACE: BLACK	n	3,503	3,967	7,470	3,544	3,968	7,512	1,689	1,166	2,855	1,494	1,087	2,581	1,645	1,176	2,821
	%	53.9	35.6	43.6	28.1	5.9	15.6	67.2	38.1	54.3	69.1	74.0	71.3	17.0	6.2	12.1
	LCL	50.6	32.7	41.2	25.6	4.4	14.1	64.1	34.1	51.4	65.4	69.9	68.4	14.5	4.6	10.3
	UCL	57.1	38.5	46.0	30.5	7.3	17.1	70.3	42.1	57.3	72.7	78.0	74.2	19.4	7.9	13.9
COLOURED	n	680	845	1,525	686	858	1,544	232	135	367	222	134	356	230	138	368
	%	41.2	30.9	35.7	19.7	5.3	12.0	57.1	34.1	49.4	56.9	65.7	59.8	21.9	26.9	23.6
	LCL	34.4	18.5	28.0	15.9	2.5	9.6	48.9	23.1	41.9	48.7	56.3	53.8	15.2	15.3	16.8
	UCL	48.0	43.4	43.4	23.5	8.1	14.4	65.3	45.1	56.8	65.0	75.1	65.8	28.6	38.5	30.3
WHITE	n	406	486	892	408	488	896	86	104	190	85	104	189	88	105	193
	%	25.2	26.4	25.9	9.5	4.0	6.4	66.0	40.7	51.4	61.7	66.8	64.7	24.7	26.5	25.7
	LCL	18.1	20.6	20.2	5.4	1.9	3.8	53.3	26.9	40.0	46.1	56.1	56.0	14.5	15.4	15.0
	UCL	32.4	32.3	31.5	13.6	6.1	9.0	78.8	54.6	62.8	77.2	77.6	73.4	34.9	37.6	36.4
INDIAN	n	66	64	130	65	66	131	15	9	24	18	10	28	16	10	26
	%	30.9	20.0	25.4	10.8	3.6	7.1	29.3	73.6	45.2	65.3	87.6	72.7	42.9	6.2	30.5
	LCL	10.8	4.6	9.3	-0.1	-0.4	0.9	5.1	43.2	23.1	42.0	71.1	55.3	14.0	-7.3	11.0
	UCL	50.9	35.5	41.5	21.7	7.5	13.3	53.5	103.9	67.3	88.5	104.1	90.0	71.7	19.8	50.0
OTHER	n	43	47	90	46	46	92	20	10	30	20	10	30	19	10	29
	%	57.0	30.8	45.0	19.6	0.0	11.0	89.8	22.6	75.8	88.7	88.5	88.6	5.0	16.2	7.7
	LCL	34.6	21.4	29.8	4.5	----	1.4	80.0	-5.6	60.5	70.7	72.4	74.0	-3.5	-6.4	-0.7
	UCL	79.4	40.2	60.2	34.8	----	20.5	99.6	50.7	91.1	106.7	104.5	103.3	13.5	38.9	16.1
GRADE 08	n	1,314	1,426	2,740	1,332	1,437	2,769	401	186	587	375	173	548	399	190	589
	%	41.5	24.4	32.6	24.2	5.4	14.5	59.8	37.6	52.4	65.2	65.6	65.3	21.5	11.6	18.1
	LCL	37.4	19.7	29.5	20.3	3.9	12.2	53.5	29.8	47.5	57.6	58.5	59.0	16.8	6.1	13.9
	UCL	45.7	29.1	35.7	28.2	6.9	16.7	66.0	45.4	57.4	72.8	72.7	71.7	26.2	17.1	22.4
GRADE 09	n	1,642	1,822	3,464	1,649	1,836	3,485	665	398	1,063	590	372	962	643	400	1,043
	%	50.8	31.9	40.9	25.0	5.8	14.9	61.8	39.9	53.6	71.3	71.1	71.2	16.5	10.4	14.2
	LCL	46.3	27.3	37.8	22.4	4.5	13.6	55.5	34.3	48.5	66.7	65.8	67.7	12.6	7.3	11.4
	UCL	55.2	36.5	43.9	27.7	7.1	16.3	68.0	45.5	58.7	75.9	76.3	74.7	20.4	13.5	16.9
GRADE 10	n	1,098	1,214	2,312	1,117	1,200	2,317	555	429	984	509	406	915	559	438	997
	%	52.6	38.0	43.3	25.9	5.6	13.1	70.0	32.6	49.6	63.2	79.3	72.2	16.3	7.6	11.5
	LCL	46.7	31.9	37.4	19.4	2.2	9.3	64.4	23.7	41.8	56.6	73.0	67.1	11.7	4.0	8.2
	UCL	58.6	44.0	49.1	32.3	9.0	16.9	75.7	41.5	57.4	69.7	85.7	77.4	21.0	11.1	14.8
GRADE 11	n	686	985	1,671	701	994	1,695	441	424	865	387	406	793	424	423	847
	%	62.6	47.4	54.2	27.7	5.6	15.6	75.2	45.6	61.6	71.7	69.4	70.6	17.9	7.2	12.9
	LCL	54.2	42.0	48.4	22.4	3.5	13.1	70.1	39.2	56.6	66.1	63.8	66.2	13.3	3.1	9.8
	UCL	71.1	52.7	60.1	32.9	7.8	18.2	80.3	52.0	66.5	77.4	75.0	75.0	22.6	11.3	15.9
AGE: 13 OR UNDER	n	282	512	794	274	511	785	64	21	85	57	20	77	69	25	94
	%	29.4	17.8	21.8	27.0	3.8	11.7	65.5	45.8	59.9	45.6	50.1	46.8	17.5	17.5	17.5
	LCL	22.9	13.8	18.7	21.3	2.1	9.2	50.1	17.4	43.8	28.4	24.3	30.5	9.2	1.9	8.7
	UCL	35.8	21.8	24.9	32.6	5.6	14.2	81.0	74.3	76.1	62.8	75.9	63.2	25.8	33.2	26.3
14	n	630	936	1,566	628	935	1,563	189	87	276	162	85	247	182	97	279
	%	36.8	19.3	26.2	27.1	5.0	13.7	59.6	22.9	47.7	68.5	55.4	63.8	14.1	9.6	12.5
	LCL	30.5	14.8	22.6	21.0	3.0	10.9	50.7	15.6	40.1	59.8	37.1	55.1	6.9	4.7	7.2
	UCL	43.2	23.9	29.9	33.2	7.0	16.5	68.5	30.2	55.2	77.3	73.8	72.6	21.4	14.6	17.7
15	n	796	978	1,774	791	945	1,736	276	174	450	253	167	420	280	172	452
	%	43.1	27.3	33.6	24.5	4.9	12.9	60.9	34.3	48.8	64.9	67.2	66.0	14.3	9.7	12.3
	LCL	38.0	22.6	30.0	20.8	3.1	10.9	53.7	24.8	41.4	57.5	56.8	58.9	7.5	5.8	8.4
	UCL	48.1	32.0	37.1	28.2	6.6	15.0	68.0	43.8	56.2	72.2	77.6	73.1	21.0	13.7	16.2
16	n	899	1,000	1,899	904	993	1,897	367	273	640	315	264	579	355	272	627
	%	50.4	32.9	40.8	23.5	4.8	13.4	64.4	33.3	50.6	61.6	73.1	67.1	17.2	13.7	15.6
	LCL	45.2	28.3	36.9	19.0	3.0	11.1	59.0	26.3	46.2	54.2	66.2	62.5	12.3	8.8	11.6
	UCL	55.6	37.5	44.7	28.0	6.7	15.7	69.9	40.2	55.0	68.9	79.9	71.6	22.1	18.6	19.5
17	n	781	786	1,567	802	804	1,606	396	303	699	364	272	636	393	299	692
	%	59.7	41.7	49.8	25.7	8.7	16.5	68.4	41.7	56.8	68.7	75.9	71.7	17.3	8.8	13.6
	LCL	54.9	31.1	43.3	21.6	1.0	12.1	63.5	35.3	51.7	63.9	68.5	66.8	13.3	4.6	10.2
	UCL	64.5	52.2	56.3	29.8	16.4	20.8	73.3	48.2	61.8	73.6	83.2	76.6	21.3	13.0	17.0
18	n	455	406	861	474	421	895	271	187	458	255	180	435	262	199	461
	%	64.0	56.0	59.8	28.6	4.7	16.2	70.2	35.7	53.6	70.5	79.8	75.1	26.9	2.5	14.6
	LCL	57.5	46.1	53.7	24.3	2.3	13.0	61.8	20.4	42.0	64.2	70.9	69.0	19.7	0.6	10.0
	UCL	70.5	66.0	66.0	32.9	7.0	19.3	78.7	50.9	65.2	76.8	88.7	81.2	34.0	4.3	19.1
19 OR OVER	n	688	532	1,220	707	560	1,267	406	301	707	364	288	652	388	299	687
	%	59.7	60.8	60.2	25.2	7.8	17.3	68.8	47.7	59.3	76.3	76.3	76.3	17.9	7.9	13.2
	LCL	52.8	53.1	54.7	17.0	4.8	12.8	62.4	40.5	53.2	71.7	70.9	72.5	11.4	4.1	9.3
	UCL	66.6	68.5	65.7	33.5	10.8	21.8	75.2	54.8	65.3	80.8	81.8	80.1	24.4	11.7	17.1

Table 17: Percentage of high school learners who used various methods of contraception by gender, race, grade, age and province

		NO METHOD[3]			BIRTH CONTROL PILLS[3]			CONDOMS[3]			INJECTION[3]			WITHDRAWAL[3]			MORNING AFTER PILL[3]			SOME OTHER METHODS[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523
	%	30.4	25.4	28.1	7.3	7.4	7.3	48.4	40.5	44.8	5.2	17.2	10.6	4.5	5.2	4.8	1.2	1.7	1.4	3.1	2.7	2.9
	LCL[1]	27.3	20.6	25.1	5.6	5.8	6.1	44.7	36.0	41.5	3.5	13.0	7.8	3.2	3.5	3.7	0.6	0.8	0.9	2.1	1.6	2.2
	UCL[2]	33.5	30.1	31.2	9.0	9.0	8.6	52.0	44.9	48.2	6.8	21.4	13.3	5.9	6.9	6.0	1.8	2.6	1.9	4.1	3.8	3.6
EASTERN CAPE	n	208	196	404	208	196	404	208	196	404	208	196	404	208	196	404	208	196	404	208	196	404
	%	28.5	18.3	23.5	23.3	8.2	15.9	31.8	29.3	30.6	12.2	38.1	24.8	2.1	4.4	3.2	1.1	0.6	0.8	1.0	1.1	1.1
	LCL	21.4	6.3	14.5	11.4	2.0	10.0	22.0	20.7	24.2	3.5	22.9	12.5	-1.3	-0.2	-0.1	-1.0	-0.4	-0.4	-0.2	-0.2	0.6
	UCL	35.7	30.4	32.6	35.3	14.4	21.9	41.5	37.9	36.9	20.9	53.2	37.2	5.4	8.9	6.5	3.2	1.6	2.0	2.3	2.5	1.5
FREE STATE	n	272	158	430	272	158	430	272	158	430	272	158	430	272	158	430	272	158	430	272	158	430
	%	27.6	21.8	25.2	5.1	8.3	6.4	56.5	50.4	54.0	4.9	10.3	7.1	2.1	4.0	2.9	1.2	0.9	1.1	2.5	4.3	3.2
	LCL	21.8	18.2	20.9	2.7	5.3	3.1	51.5	40.5	48.7	3.5	7.0	5.1	0.1	0.8	0.9	0.2	-0.9	0.2	1.2	2.0	0.9
	UCL	33.5	25.3	29.6	7.5	11.3	9.8	61.5	60.3	59.3	6.3	13.6	9.1	4.2	7.1	4.9	2.3	2.7	2.0	3.7	6.6	5.5
GAUTENG	n	275	193	468	275	193	468	275	193	468	275	193	468	275	193	468	275	193	468	275	193	468
	%	30.4	15.1	24.8	2.3	4.7	3.2	56.8	61.8	58.6	1.2	10.1	4.4	5.9	3.4	5.0	0.9	1.5	1.1	2.4	3.4	2.7
	LCL	23.6	9.1	19.3	0.9	0.7	1.9	49.6	57.1	54.5	-0.8	4.2	2.1	2.3	1.2	2.4	0.2	0.2	0.6	1.4	0.6	1.6
	UCL	37.3	21.1	30.4	3.8	8.6	4.4	64.0	66.5	62.8	3.2	15.9	6.8	9.6	5.7	7.6	1.6	2.8	1.7	3.3	6.1	3.9
KWAZULU-NATAL	n	201	135	336	201	135	336	201	135	336	201	135	336	201	135	336	201	135	336	201	135	336
	%	40.3	56.0	47.1	2.9	6.8	4.6	40.7	21.2	32.3	1.1	6.0	3.2	6.9	4.7	5.9	2.2	2.3	2.2	5.8	3.0	4.6
	LCL	30.3	42.3	37.6	0.2	2.7	1.7	30.1	12.8	24.1	-0.4	1.4	0.9	2.4	0.9	2.7	0.1	0.2	0.8	1.9	1.2	2.7
	UCL	50.4	69.7	56.6	5.5	11.0	7.5	51.4	29.6	40.4	2.6	10.6	5.6	11.3	8.4	9.1	4.3	4.3	3.7	9.8	4.8	6.5
LIMPOPO	n	191	143	334	191	143	334	191	143	334	191	143	334	191	143	334	191	143	334	191	143	334
	%	23.0	17.4	20.2	8.0	10.2	9.1	52.8	46.2	49.6	10.7	15.8	13.2	1.4	5.5	3.4	1.3	0.9	1.1	2.9	4.0	3.4
	LCL	15.7	11.2	14.8	4.2	6.1	6.2	40.0	31.6	37.3	4.2	6.9	6.3	0.7	-0.4	0.0	-0.5	-0.4	0.0	-0.2	-1.4	0.1
	UCL	30.3	23.6	25.7	11.8	14.3	11.9	65.5	60.8	61.8	17.3	24.7	20.1	2.0	11.5	6.8	3.0	2.2	2.2	5.9	9.5	6.8
MPUMA-LANGA	n	248	206	454	248	206	454	248	206	454	248	206	454	248	206	454	248	206	454	248	206	454
	%	29.4	18.4	24.0	4.4	7.5	5.9	52.2	46.2	49.2	3.5	20.7	12.0	6.1	2.5	4.3	0.0	1.0	0.5	4.4	3.6	4.0
	LCL	21.9	11.9	17.9	2.2	4.3	4.9	44.9	37.6	43.7	1.1	11.9	6.7	3.0	0.1	2.7	----	-0.5	-0.2	2.3	0.8	2.4
	UCL	36.9	24.9	30.0	6.6	10.8	7.0	59.5	54.8	54.7	5.9	29.5	17.3	9.3	5.0	6.0	----	2.5	1.2	6.6	6.5	5.7
NORTHERN CAPE	n	216	132	348	216	132	348	216	132	348	216	132	348	216	132	348	216	132	348	216	132	348
	%	19.1	23.6	20.9	4.3	2.6	3.6	51.3	40.5	47.1	2.1	20.3	9.2	16.4	10.2	14.0	1.9	1.8	1.8	5.0	1.0	3.4
	LCL	10.2	14.0	14.3	1.5	-0.6	1.4	41.4	34.1	38.6	0.1	8.3	3.3	10.9	0.4	5.1	1.3	-0.9	0.5	1.2	-0.4	0.7
	UCL	28.0	33.2	27.5	7.0	5.8	5.8	61.1	47.0	55.5	4.1	32.3	15.1	21.9	20.1	22.8	2.4	4.5	3.2	8.7	2.3	6.1
NORTH WEST	n	200	115	315	200	115	315	200	115	315	200	115	315	200	115	315	200	115	315	200	115	315
	%	27.5	15.1	22.2	10.3	3.3	7.3	53.0	57.8	55.0	5.8	10.8	7.9	2.2	11.3	6.1	0.4	1.0	0.7	0.9	0.7	0.8
	LCL	21.0	7.5	18.8	5.3	-0.4	3.3	44.5	50.2	49.7	1.5	3.9	4.7	-0.3	1.7	1.2	-0.3	-1.1	-0.3	-0.3	-0.7	-0.4
	UCL	34.0	22.6	25.6	15.2	6.9	11.3	61.5	65.5	60.4	10.0	17.8	11.2	4.7	20.8	10.9	1.1	3.2	1.6	2.0	2.1	2.0
WESTERN CAPE	n	244	190	434	244	190	434	244	190	434	244	190	434	244	190	434	244	190	434	244	190	434
	%	30.2	17.9	23.9	6.9	8.5	7.7	48.5	33.3	40.7	5.9	26.8	16.7	5.8	7.8	6.8	0.6	5.1	2.9	1.9	0.7	1.3
	LCL	20.1	11.8	19.2	3.1	3.0	3.9	41.0	20.0	32.7	4.2	13.9	8.0	3.4	3.0	3.8	-0.7	-1.0	-0.7	0.8	-0.4	0.6
	UCL	40.4	23.9	28.5	10.8	14.0	11.6	56.0	46.5	48.6	7.7	39.7	25.3	8.1	12.5	9.8	2.0	11.2	6.5	3.0	1.9	2.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who ever had sex (when the penis enters the vagina or anus), when asked what one method of contraception they mostly used when they had sex

		NO METHOD[3]			BIRTH CONTROL PILLS[3]			CONDOMS[3]			INJECTION[3]			WITHDRAWAL[3]			MORNING AFTER PILL[3]			SOME OTHER METHODS[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523	2,055	1,468	3,523
	%	30.4	25.4	28.1	7.3	7.4	7.3	48.4	40.5	44.8	5.2	17.2	10.6	4.5	5.2	4.8	1.2	1.7	1.4	3.1	2.7	2.9
	LCL[1]	27.3	20.6	25.1	5.6	5.8	6.1	44.7	36.0	41.5	3.5	13.0	7.8	3.2	3.5	3.7	0.6	0.8	0.9	2.1	1.6	2.2
	UCL[2]	33.5	30.1	31.2	9.0	9.0	8.6	52.0	44.9	48.2	6.8	21.4	13.3	5.9	6.9	6.0	1.8	2.6	1.9	4.1	3.8	3.6
RACE: BLACK	n	1,668	1,189	2,857	1,668	1,189	2,857	1,668	1,189	2,857	1,668	1,189	2,857	1,668	1,189	2,857	1,668	1,189	2,857	1,668	1,189	2,857
	%	32.0	26.7	29.6	7.4	6.9	7.2	47.4	40.1	44.1	5.4	18.4	11.3	3.6	3.7	3.7	1.0	1.5	1.2	3.2	2.6	2.9
	LCL	28.8	21.2	26.2	5.5	5.2	5.8	43.7	35.2	40.7	3.5	14.0	8.4	2.1	2.1	2.4	0.4	0.6	0.7	2.0	1.3	2.1
	UCL	35.2	32.2	33.0	9.3	8.7	8.6	51.2	45.0	47.5	7.3	22.8	14.2	5.0	5.4	4.9	1.6	2.4	1.8	4.3	3.9	3.8
COLOURED	n	235	143	378	235	143	378	235	143	378	235	143	378	235	143	378	235	143	378	235	143	378
	%	24.8	26.3	25.3	6.1	4.6	5.6	54.6	38.4	49.2	2.2	10.4	5.0	9.8	15.9	11.9	0.7	4.4	1.9	1.8	0.0	1.2
	LCL	16.2	17.9	18.7	1.8	1.3	2.7	46.6	27.9	43.1	0.6	4.4	2.6	5.0	9.9	7.3	-0.7	-3.6	-1.0	0.5	----	0.3
	UCL	33.4	34.7	31.9	10.4	7.9	8.5	62.7	48.8	55.2	3.9	16.4	7.3	14.6	21.9	16.4	2.1	12.5	4.9	3.1	----	2.1
WHITE	n	89	107	196	89	107	196	89	107	196	89	107	196	89	107	196	89	107	196	89	107	196
	%	14.2	8.7	11.0	7.8	15.4	12.2	67.0	48.9	56.6	0.0	4.4	2.5	5.9	16.4	11.9	1.8	1.2	1.5	3.2	5.1	4.3
	LCL	5.7	4.0	6.2	0.4	8.3	6.4	54.7	35.9	44.8	----	1.8	-0.7	1.6	7.8	6.7	0.1	-1.0	-0.2	-1.6	3.3	0.5
	UCL	22.8	13.3	15.8	15.2	22.5	17.9	79.4	61.9	68.3	----	6.9	5.8	10.2	24.9	17.1	3.5	3.4	3.1	8.1	6.9	8.2
INDIAN	n	18	11	29	18	11	29	18	11	29	18	11	29	18	11	29	18	11	29	18	11	29
	%	8.1	9.5	8.6	20.6	1.6	14.4	35.9	27.1	33.0	34.1	41.1	36.4	0.0	11.9	3.9	0.0	0.0	0.0	1.4	8.7	3.8
	LCL	-3.1	-4.1	-0.3	-0.8	-1.7	-0.9	12.0	-7.0	13.3	9.1	4.9	12.3	----	-10.1	-3.1	----	----	----	-1.4	-8.8	-2.2
	UCL	19.3	23.2	17.5	41.9	4.9	29.6	59.7	61.3	52.7	59.0	77.4	60.4	----	33.8	10.8	----	----	----	4.3	26.3	9.9
OTHER	n	22	9	31	22	9	31	22	9	31	22	9	31	22	9	31	22	9	31	22	9	31
	%	28.1	2.6	23.4	0.0	4.5	0.8	38.3	59.8	42.2	2.3	23.5	6.2	23.8	0.0	19.4	3.4	9.5	4.5	4.1	0.0	3.4
	LCL	2.8	-2.7	0.7	----	-4.7	-0.8	19.6	19.2	23.7	1.5	-15.6	-2.7	-6.2	----	-5.7	-3.0	-9.1	-1.7	-1.4	----	-1.2
	UCL	53.3	7.8	46.2	----	13.7	2.4	56.9	100.5	60.7	3.2	62.6	15.1	53.8	----	44.6	9.9	28.2	10.8	9.6	----	7.9
GRADE 08	n	408	188	596	408	188	596	408	188	596	408	188	596	408	188	596	408	188	596	408	188	596
	%	37.5	28.6	34.5	8.5	14.4	10.5	40.8	37.4	39.6	5.7	11.6	7.6	3.0	3.6	3.2	2.1	1.6	1.9	2.3	2.8	2.5
	LCL	31.5	21.1	28.7	4.5	10.2	7.4	34.0	31.5	34.1	1.8	5.1	3.0	0.8	1.1	1.4	0.4	-0.5	0.7	1.2	-0.7	1.2
	UCL	43.6	36.0	40.3	12.6	18.6	13.6	47.6	43.3	45.2	9.5	18.1	12.3	5.3	6.1	5.0	3.8	3.7	3.2	3.5	6.2	3.8
GRADE 09	n	643	405	1,048	643	405	1,048	643	405	1,048	643	405	1,048	643	405	1,048	643	405	1,048	643	405	1,048
	%	33.4	22.3	29.1	9.5	6.7	8.4	46.0	41.0	44.1	4.8	23.1	11.9	4.0	2.8	3.6	0.4	2.1	1.0	1.9	2.0	1.9
	LCL	28.4	17.6	25.3	5.6	4.4	6.2	39.4	33.7	38.1	2.2	17.7	8.1	1.7	1.0	1.9	-0.3	0.5	0.3	0.8	0.6	1.2
	UCL	38.5	27.0	32.9	13.4	8.9	10.6	52.6	48.4	50.0	7.4	28.6	15.7	6.4	4.7	5.3	1.0	3.7	1.8	2.9	3.3	2.6
GRADE 10	n	568	445	1,013	568	445	1,013	568	445	1,013	568	445	1,013	568	445	1,013	568	445	1,013	568	445	1,013
	%	27.8	27.4	27.6	5.7	5.7	5.7	49.7	41.4	45.1	4.7	14.4	10.0	6.3	6.4	6.4	1.1	1.7	1.5	4.6	3.0	3.7
	LCL	21.1	15.5	19.7	3.1	2.6	3.5	41.8	32.5	38.3	1.8	8.7	6.0	3.1	3.2	4.0	-0.2	-0.1	0.3	2.2	1.4	2.3
	UCL	34.6	39.3	35.5	8.3	8.9	8.0	57.7	50.3	52.0	7.5	20.1	14.1	9.5	9.5	8.7	2.4	3.6	2.6	7.0	4.5	5.1
GRADE 11	n	436	430	866	436	430	866	436	430	866	436	430	866	436	430	866	436	430	866	436	430	866
	%	22.1	22.9	22.5	4.9	6.5	5.6	57.7	40.4	49.6	5.7	19.6	12.2	4.8	6.4	5.6	1.3	1.2	1.3	3.6	2.9	3.2
	LCL	15.5	14.7	17.2	2.9	3.7	3.8	51.2	31.9	42.4	2.8	12.9	7.8	2.2	3.5	3.1	0.2	0.2	0.3	-0.2	1.6	1.3
	UCL	28.7	31.2	27.8	6.8	9.2	7.4	64.2	49.0	56.8	8.7	26.4	16.7	7.4	9.4	8.0	2.4	2.2	2.2	7.3	4.2	5.2
AGE: 13 OR UNDER	n	67	27	94	67	27	94	67	27	94	67	27	94	67	27	94	67	27	94	67	27	94
	%	41.2	27.9	36.3	0.7	6.1	2.7	36.1	46.9	40.1	3.7	0.0	2.3	7.9	6.7	7.5	0.0	10.1	3.8	10.4	2.1	7.3
	LCL	27.1	7.3	25.1	-0.6	-4.8	-1.5	24.3	22.8	29.6	-1.0	----	-0.6	0.2	0.3	2.1	----	-3.8	-1.7	4.2	-2.1	2.7
	UCL	55.3	48.6	47.4	2.0	17.0	6.9	47.8	71.1	50.7	8.4	----	5.3	15.6	13.1	12.9	----	24.1	9.2	16.5	6.4	11.9
14	n	181	91	272	181	91	272	181	91	272	181	91	272	181	91	272	181	91	272	181	91	272
	%	49.5	35.6	44.6	2.4	4.1	3.0	38.6	41.5	39.6	2.2	11.6	5.5	5.4	5.7	5.5	1.5	0.6	1.2	0.3	1.0	0.5
	LCL	41.7	23.8	37.9	-0.1	0.0	1.5	28.3	28.2	31.2	-1.2	2.6	1.4	-0.6	0.8	1.3	-0.6	-0.6	-0.3	-0.3	-0.4	-0.1
	UCL	57.4	47.3	51.2	5.0	8.1	4.6	48.9	54.7	48.0	5.7	20.6	9.7	11.3	10.6	9.7	3.6	1.9	2.6	1.0	2.3	1.2
15	n	285	176	461	285	176	461	285	176	461	285	176	461	285	176	461	285	176	461	285	176	461
	%	31.9	19.4	26.2	8.0	9.8	8.8	45.3	38.7	42.3	2.9	19.9	10.6	9.0	7.2	8.1	1.1	0.2	0.7	1.8	4.9	3.2
	LCL	26.3	11.7	20.6	3.7	2.1	5.2	37.7	30.4	36.0	0.8	11.0	5.9	3.6	3.3	4.6	-0.1	-0.2	0.0	0.2	0.5	0.9
	UCL	37.5	27.1	31.8	12.3	17.5	12.4	52.9	47.0	48.6	5.0	28.7	15.4	14.3	11.0	11.7	2.3	0.6	1.4	3.4	9.2	5.5
16	n	362	273	635	362	273	635	362	273	635	362	273	635	362	273	635	362	273	635	362	273	635
	%	29.0	21.3	25.6	10.0	7.9	9.1	48.3	45.9	47.2	4.9	15.5	9.6	3.4	5.6	4.3	1.0	0.7	0.9	3.3	3.1	3.2
	LCL	23.2	15.8	21.6	5.6	4.4	6.1	39.7	38.6	41.0	1.2	10.1	5.6	2.0	2.0	2.5	-0.4	-0.2	0.0	1.6	1.1	1.7
	UCL	34.7	26.8	29.6	14.4	11.4	12.1	57.0	53.1	53.5	8.6	21.0	13.7	4.8	9.1	6.2	2.4	1.6	1.8	5.1	5.1	4.8
17	n	387	301	688	387	301	688	387	301	688	387	301	688	387	301	688	387	301	688	387	301	688
	%	26.6	19.3	23.4	7.0	5.2	6.2	52.6	49.9	51.5	5.0	14.7	9.2	4.6	6.6	5.5	0.8	2.8	1.7	3.4	1.4	2.5
	LCL	21.6	13.1	19.6	3.3	1.9	3.3	45.6	41.4	45.5	2.9	7.8	5.6	2.0	3.4	3.2	-0.8	-0.6	-0.1	0.3	-0.2	0.7
	UCL	31.5	25.6	27.2	10.7	8.5	9.1	59.6	58.5	57.4	7.1	21.6	12.9	7.3	9.9	7.8	2.4	6.3	3.4	6.4	3.1	4.3
18	n	267	198	465	267	198	465	267	198	465	267	198	465	267	198	465	267	198	465	267	198	465
	%	26.0	41.0	33.4	8.1	4.2	6.2	52.5	31.7	42.3	5.1	13.9	9.4	1.9	5.4	3.6	1.4	0.7	1.1	4.9	3.2	4.1
	LCL	19.2	18.5	20.9	5.3	1.2	3.8	46.0	16.3	33.1	2.9	5.9	5.6	0.5	0.6	1.0	0.0	0.4	0.3	-1.4	0.0	0.5
	UCL	32.8	63.6	45.9	10.9	7.1	8.5	58.9	47.1	51.4	7.4	21.9	13.3	3.4	10.2	6.3	2.9	1.0	1.9	11.2	6.3	7.6
19 OR OVER	n	412	309	721	412	309	721	412	309	721	412	309	721	412	309	721	412	309	721	412	309	721
	%	26.7	23.3	25.1	8.1	8.3	8.2	48.4	34.9	42.1	9.5	28.8	18.5	4.1	1.9	3.1	1.0	1.4	1.2	2.2	1.5	1.9
	LCL	20.0	16.1	19.5	4.2	5.3	5.6	41.8	27.4	36.3	5.6	20.7	13.2	1.6	-0.4	1.1	-0.3	-0.1	0.0	0.6	0.1	0.8
	UCL	33.5	30.4	30.7	12.0	11.4	10.8	54.9	42.3	47.9	13.5	36.9	23.8	6.6	4.1	5.1	2.2	2.8	2.3	3.7	2.8	2.9

Table 18: Percentage of high school learners who always use condoms and either had been pregnant or had made someone pregnant by gender, race, grade, age and province

		ALWAYS USE A CONDOM DURING SEX[3]			HAVE BEEN PREGNANT OR MADE SOMEONE PREGNANT[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,077	1,461	3,538	2,544	1,999	4,543
	%	27.2	30.8	28.8	13.9	19.1	16.4
	LCL[1]	24.2	26.3	26.0	11.5	15.4	13.9
	UCL[2]	30.1	35.3	31.5	16.3	22.9	18.8
EASTERN CAPE	n	204	192	396	254	254	508
	%	20.5	38.3	29.2	18.5	12.5	15.6
	LCL	12.9	19.7	18.7	9.9	8.8	11.4
	UCL	28.1	57.0	39.7	27.0	16.2	19.8
FREE STATE	n	271	156	427	314	206	520
	%	31.9	37.9	34.4	7.0	15.9	10.8
	LCL	24.0	24.9	27.4	3.7	11.3	7.8
	UCL	39.8	50.9	41.3	10.3	20.4	13.8
GAUTENG	n	280	198	478	318	247	565
	%	32.3	37.6	34.2	8.8	13.3	10.6
	LCL	25.1	31.6	28.3	6.1	10.7	8.8
	UCL	39.5	43.5	40.1	11.6	15.9	12.4
KWAZULU-NATAL	n	214	128	342	275	213	488
	%	15.2	13.4	14.5	17.4	21.8	19.4
	LCL	9.1	7.6	10.4	9.9	14.5	12.4
	UCL	21.3	19.3	18.6	24.9	29.1	26.5
LIMPOPO	n	190	143	333	241	187	428
	%	30.6	31.8	31.2	11.0	29.8	20.5
	LCL	21.2	20.3	21.8	7.2	13.4	11.0
	UCL	39.9	43.3	40.6	14.9	46.2	30.0
MPUMALANGA	n	248	207	455	307	270	577
	%	25.3	26.4	25.8	15.6	27.1	21.5
	LCL	19.2	17.0	20.2	9.1	17.4	13.6
	UCL	31.5	35.7	31.5	22.1	36.8	29.5
NORTHERN CAPE	n	224	134	358	257	187	444
	%	35.6	32.4	34.4	13.9	9.3	11.1
	LCL	24.6	20.9	26.4	10.6	-4.0	2.0
	UCL	46.6	43.9	42.4	17.2	22.6	20.2
NORTH WEST	n	193	113	306	260	177	437
	%	34.7	44.2	38.8	18.5	17.1	17.9
	LCL	27.9	28.6	30.0	11.6	8.4	11.0
	UCL	41.4	59.9	47.6	25.4	25.9	24.8
WESTERN CAPE	n	253	190	443	318	258	576
	%	39.9	30.8	35.2	14.0	12.0	13.0
	LCL	34.3	23.8	30.2	9.2	7.0	9.3
	UCL	45.5	37.8	40.2	18.7	17.1	16.6

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who ever had sex (when the penis enters the vagina or anus)

		ALWAYS USE A CONDOM DURING SEX[3]			HAVE BEEN PREGNANT OR MADE SOMEONE PREGNANT[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,077	1,461	3,538	2,544	1,999	4,543
	%	27.2	30.8	28.8	13.9	19.1	16.4
	LCL[1]	24.2	26.3	26.0	11.5	15.4	13.9
	UCL[2]	30.1	35.3	31.5	16.3	22.9	18.8
RACE: BLACK	n	1,689	1,182	2,871	2,047	1,592	3,639
	%	24.5	29.9	26.9	13.5	20.8	17.0
	LCL	21.6	25.0	24.1	10.9	16.6	14.1
	UCL	27.4	34.8	29.7	16.2	25.0	19.8
COLOURED	n	238	142	380	308	225	533
	%	45.1	28.3	39.5	11.4	10.7	11.1
	LCL	37.6	18.1	33.6	7.7	4.0	7.4
	UCL	52.6	38.5	45.3	15.1	17.5	14.8
WHITE	n	88	107	195	107	125	232
	%	56.6	45.0	49.8	12.1	5.8	8.5
	LCL	44.3	30.3	41.7	3.3	1.2	3.5
	UCL	68.9	59.8	57.9	20.9	10.4	13.5
INDIAN	n	19	10	29	23	18	41
	%	25.9	6.2	20.5	27.4	27.1	27.2
	LCL	6.7	-7.3	4.7	4.7	2.1	9.4
	UCL	45.1	19.8	36.3	50.0	52.1	45.1
OTHER	n	21	9	30	25	16	41
	%	16.6	31.6	19.9	20.8	20.0	20.6
	LCL	-8.4	-10.9	-2.8	12.8	-2.8	12.0
	UCL	41.6	74.1	42.6	28.9	42.8	29.1
GRADE 08	n	412	175	587	585	370	955
	%	21.3	31.0	24.3	22.6	31.9	26.4
	LCL	16.5	25.1	20.4	17.6	20.0	20.1
	UCL	26.1	36.9	28.3	27.6	43.7	32.7
GRADE 09	n	663	406	1,069	844	617	1,461
	%	22.4	30.5	25.5	10.3	17.5	13.3
	LCL	18.2	23.3	21.5	8.0	13.2	10.7
	UCL	26.7	37.8	29.5	12.5	21.8	15.9
GRADE 10	n	566	443	1,009	655	526	1,181
	%	29.1	33.1	31.3	11.4	13.6	12.6
	LCL	23.1	22.9	24.0	7.7	9.5	9.9
	UCL	35.1	43.4	38.6	15.0	17.7	15.4
GRADE 11	n	436	437	873	460	486	946
	%	37.3	27.3	32.6	9.8	16.9	13.3
	LCL	30.4	20.1	26.2	5.3	13.3	10.4
	UCL	44.2	34.5	38.9	14.4	20.5	16.1
AGE: 13 OR UNDER	n	71	19	90	96	79	175
	%	22.1	55.4	29.3	12.1	57.6	38.0
	LCL	13.1	29.4	19.0	3.3	47.7	28.9
	UCL	31.1	81.4	39.6	20.9	67.6	47.2
14	n	182	89	271	247	197	444
	%	18.8	30.4	22.8	14.1	14.9	14.5
	LCL	11.9	18.4	16.2	7.7	6.9	9.4
	UCL	25.7	42.4	29.4	20.5	23.0	19.7
15	n	283	173	456	361	283	644
	%	30.9	44.4	37.0	12.2	11.2	11.7
	LCL	25.0	33.9	30.0	8.3	6.7	8.3
	UCL	36.8	54.9	44.0	16.1	15.8	15.2
16	n	368	271	639	460	362	822
	%	29.7	38.2	33.4	13.4	10.9	12.3
	LCL	23.8	27.7	27.8	9.1	6.1	9.0
	UCL	35.7	48.6	39.1	17.7	15.7	15.6
17	n	398	299	697	474	367	841
	%	30.8	31.3	31.0	13.6	16.9	15.1
	LCL	25.3	24.3	26.1	10.2	11.4	11.6
	UCL	36.4	38.3	35.9	16.9	22.4	18.5
18	n	267	202	469	310	237	547
	%	27.2	19.2	23.2	12.6	14.7	13.6
	LCL	20.8	11.2	17.5	7.4	8.5	9.5
	UCL	33.5	27.2	28.9	17.8	21.0	17.8
19 OR OVER	n	406	316	722	471	359	830
	%	25.4	25.2	25.3	15.3	28.3	21.4
	LCL	19.6	18.3	20.2	11.3	24.4	17.9
	UCL	31.1	32.2	30.4	19.3	32.1	24.8

Table 19: Percentage of high school learners who had an abortion or whose partner had an abortion, and location where the abortion took place, by gender, race, grade, age and province

		HAD AN ABORTION OR PARTNER HAD AN ABORTION[3]			WHERE THE ABORTION TOOK PLACE[4]: HOSPITAL/CLINIC			TRADITIONAL DOCTOR/ HEALER			ANOTHER PLACE			DON'T KNOW WHERE ABORTION TOOK PLACE		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,410	1,772	4,182	249	146	395	249	146	395	249	146	395	249	146	395
	%	8.2	8.1	8.1	54.9	73.6	62.5	18.9	12.6	16.3	9.0	5.8	7.7	17.2	8.0	13.5
	LCL[1]	6.2	4.0	5.7	40.7	62.9	52.7	10.0	7.5	8.8	3.9	2.8	4.6	-6.3	3.7	-1.6
	UCL[2]	10.2	12.2	10.6	69.1	84.3	72.2	27.8	17.7	23.8	14.1	8.9	10.8	40.7	12.3	28.6
EASTERN CAPE	n	242	232	474	22	23	45	22	23	45	22	23	45	22	23	45
	%	7.4	6.5	6.9	43.8	57.6	50.1	36.9	22.2	30.2	7.0	7.2	7.1	12.3	13.0	12.6
	LCL	4.1	2.9	4.1	38.8	46.2	46.0	22.5	7.4	18.2	-3.2	-3.0	-1.2	7.5	-2.4	4.9
	UCL	10.6	10.0	9.8	48.9	69.0	54.2	51.3	36.9	42.1	17.2	17.4	15.4	17.0	28.4	20.3
FREE STATE	n	301	178	479	21	15	36	21	15	36	21	15	36	21	15	36
	%	6.1	7.8	6.8	88.6	54.6	72.0	11.4	5.1	8.3	0.0	4.5	2.2	0.0	35.8	17.5
	LCL	2.9	3.7	4.6	73.0	53.7	68.3	-4.2	5.0	-0.1	----	-4.4	-2.3	----	26.0	10.6
	UCL	9.3	11.9	9.0	104.2	55.6	75.7	27.0	5.2	16.8	----	13.3	6.6	----	45.7	24.4
GAUTENG	n	305	229	534	17	12	29	17	12	29	17	12	29	17	12	29
	%	4.5	3.7	4.2	44.8	77.0	56.7	28.1	0.0	17.7	0.0	0.0	0.0	27.1	23.0	25.6
	LCL	2.0	1.3	2.6	22.5	76.7	44.4	20.1	----	14.7	----	----	----	9.6	22.7	11.1
	UCL	7.1	6.2	5.9	67.0	77.3	69.0	36.2	----	20.6	----	----	----	44.6	23.3	40.1
KWAZULU-NATAL	n	256	178	434	45	14	59	45	14	59	45	14	59	45	14	59
	%	11.9	8.6	10.5	44.4	74.2	51.5	15.6	22.2	17.1	8.3	3.6	7.2	31.7	0.0	24.2
	LCL	5.1	-0.3	3.1	16.7	65.8	30.7	-2.8	14.3	-3.4	0.9	3.2	3.1	-18.8	----	-19.6
	UCL	18.6	17.5	17.8	72.2	82.5	72.2	34.0	30.2	37.7	15.8	4.0	11.3	82.1	----	68.0
LIMPOPO	n	226	162	388	32	22	54	32	22	54	32	22	54	32	22	54
	%	10.0	15.6	12.8	72.0	86.2	80.5	12.8	2.3	6.4	13.0	6.2	8.9	2.3	5.4	4.2
	LCL	3.7	-4.0	2.0	48.3	71.5	66.0	0.1	1.2	1.1	-8.5	-1.2	-1.3	-3.6	-1.9	0.3
	UCL	16.2	35.2	23.6	95.7	100.9	95.1	25.5	3.3	11.8	34.5	13.5	19.0	8.2	12.8	8.0
MPUMA-LANGA	n	286	245	531	39	23	62	39	23	62	39	23	62	39	23	62
	%	9.9	9.7	9.8	63.4	64.2	63.7	20.6	35.8	27.1	15.9	0.0	9.2	0.0	0.0	0.0
	LCL	4.6	5.6	6.0	51.6	44.7	50.8	12.0	16.4	14.4	11.3	----	2.6	----	----	----
	UCL	15.1	13.8	13.6	75.3	83.6	76.6	29.3	55.3	39.8	20.5	----	15.8	----	----	----
NORTHERN CAPE	n	247	161	408	15	11	26	15	11	26	15	11	26	15	11	26
	%	6.2	1.2	3.1	48.1	28.9	41.9	11.2	37.7	19.7	40.7	26.6	36.2	0.0	6.9	2.2
	LCL	2.8	-0.3	1.0	41.3	-4.4	24.0	3.4	8.1	4.7	39.3	19.5	31.8	----	4.0	1.9
	UCL	9.6	2.7	5.3	54.9	62.1	59.9	19.0	67.2	34.6	42.1	33.7	40.5	----	9.7	2.5
NORTH WEST	n	245	150	395	33	14	47	33	14	47	33	14	47	33	14	47
	%	8.1	7.1	7.6	58.7	59.7	59.0	25.3	24.7	25.1	9.4	15.6	11.4	6.6	0.0	4.5
	LCL	5.0	1.2	3.7	42.9	57.6	51.6	5.5	23.5	13.1	6.3	14.9	6.6	-1.3	----	-0.8
	UCL	11.1	12.9	11.5	74.5	61.7	66.4	45.1	25.9	37.2	12.4	16.4	16.1	14.6	----	9.8
WESTERN CAPE	n	302	237	539	25	12	37	25	12	37	25	12	37	25	12	37
	%	5.0	3.7	4.3	68.8	71.9	70.0	20.3	0.0	12.4	7.2	18.0	11.4	3.7	10.1	6.1
	LCL	2.2	1.2	2.2	51.6	53.9	63.7	11.8	----	5.2	-4.2	16.0	5.1	2.3	-9.0	-3.7
	UCL	7.9	6.2	6.4	86.0	89.9	76.3	28.8	----	19.7	18.7	20.1	17.8	5.1	29.1	16.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who ever had sex (when the penis enters the vagina or anus)
4. Of those who had an abortion or whose partner had an abortion

		HAD AN ABORTION OR PARTNER HAD AN ABORTION[3]			WHERE THE ABORTION TOOK PLACE[4]											
					HOSPITAL/CLINIC			TRADITIONAL DOCTOR/ HEALER			ANOTHER PLACE			DON'T KNOW WHERE ABORTION TOOK PLACE		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,410	1,772	4,182	249	146	395	249	146	395	249	146	395	249	146	395
	%	8.2	8.1	8.1	54.9	73.6	62.5	18.9	12.6	16.3	9.0	5.8	7.7	17.2	8.0	13.5
	LCL[1]	6.2	4.0	5.7	40.7	62.9	52.7	10.0	7.5	8.8	3.9	2.8	4.6	-6.3	3.7	-1.6
	UCL[2]	10.2	12.2	10.6	69.1	84.3	72.2	27.8	17.7	23.8	14.1	8.9	10.8	40.7	12.3	28.6
RACE: BLACK	n	1,952	1,408	3,360	205	125	330	205	125	330	205	125	330	205	125	330
	%	8.5	8.4	8.5	55.3	73.8	62.9	18.0	13.7	16.2	8.2	4.7	6.8	18.6	7.7	14.1
	LCL	6.3	3.6	5.6	39.5	62.2	52.2	8.7	7.7	8.1	3.3	1.7	3.8	-7.6	3.1	-2.7
	UCL	10.8	13.3	11.3	71.1	85.5	73.7	27.3	19.8	24.4	13.1	7.8	9.8	44.8	12.3	30.9
COLOURED	n	282	202	484	20	12	32	20	12	32	20	12	32	20	12	32
	%	6.0	9.0	7.4	50.9	85.7	68.3	24.9	0.0	12.4	15.6	13.4	14.5	8.6	0.9	4.7
	LCL	2.6	0.8	3.4	26.6	82.1	52.3	-4.4	----	-4.3	5.1	10.0	7.5	-0.4	0.7	-0.8
	UCL	9.5	17.2	11.4	75.1	89.2	84.3	54.3	----	29.2	26.2	16.9	21.5	17.5	1.1	10.3
WHITE	n	100	113	213	10	6	16	10	6	16	10	6	16	10	6	16
	%	4.5	2.1	3.2	47.3	30.2	40.0	17.8	3.0	11.5	19.4	27.5	22.8	15.5	39.3	25.7
	LCL	1.0	-0.4	1.1	14.8	19.7	20.8	-7.4	2.5	-3.2	5.7	23.3	4.8	8.5	33.4	7.2
	UCL	8.0	4.6	5.2	79.8	40.8	59.2	43.1	3.4	26.1	33.0	31.6	40.8	22.5	45.3	44.1
INDIAN	n	23	17	40	4	3	4	4	3	4	4	3	4	4	3	4
	%	8.5	14.6	11.0	34.9	0.7	34.9	54.9	83.0	54.9	10.2	6.8	10.2	0.0	6.0	0.0
	LCL	-0.7	-5.6	0.8	10.0	-0.7	10.0	36.0	69.3	36.0	-4.3	-1.8	-4.3	----	-0.6	----
	UCL	17.7	34.8	21.2	59.7	2.1	59.7	73.9	96.6	73.9	24.8	15.4	24.8	----	12.5	----
OTHER	n	27	14	41	6	1	7	6	1	7	6	1	7	6	1	7
	%	8.7	2.2	7.1	59.8	100.0	61.5	16.7	0.0	16.0	23.5	0.0	22.5	0.0	0.0	0.0
	LCL	-4.3	-2.4	-2.4	23.2	100.0	25.8	-12.2	----	-11.8	-13.5	----	-13.2	----	----	----
	UCL	21.7	6.9	16.7	96.4	100.0	97.2	45.6	----	43.8	60.5	----	58.2	----	----	----
GRADE 08	n	539	296	835	98	55	153	98	55	153	98	55	153	98	55	153
	%	14.8	23.0	17.9	65.6	84.9	74.5	17.1	9.9	13.7	13.3	3.3	8.7	4.0	1.9	3.0
	LCL	9.9	7.6	10.6	56.4	74.1	64.9	10.5	2.1	7.6	4.9	1.0	3.4	0.4	0.1	0.8
	UCL	19.8	38.4	25.3	74.9	95.8	84.1	23.6	17.6	19.9	21.8	5.6	14.0	7.5	3.7	5.2
GRADE 09	n	789	522	1,311	90	52	142	90	52	142	90	52	142	90	52	142
	%	7.5	7.1	7.4	70.0	59.7	65.8	24.9	10.4	19.0	4.1	8.8	6.0	0.9	21.1	9.1
	LCL	5.0	4.6	5.3	58.9	52.4	59.5	13.7	5.6	12.4	2.1	1.4	2.6	0.7	9.8	4.1
	UCL	10.0	9.6	9.5	81.1	67.0	72.1	36.1	15.1	25.7	6.2	16.2	9.4	1.1	32.5	14.2
GRADE 10	n	625	487	1,112	37	21	58	37	21	58	37	21	58	37	21	58
	%	4.2	2.3	3.1	23.6	62.7	32.3	13.3	6.1	11.7	4.3	14.9	6.6	58.8	16.3	49.3
	LCL	1.8	0.9	1.6	-3.9	53.6	3.2	-4.2	2.5	-0.7	-1.2	8.5	-0.7	11.6	12.7	4.2
	UCL	6.5	3.8	4.7	51.1	71.8	61.5	30.9	9.8	24.1	9.8	21.3	14.0	106.0	19.8	94.5
GRADE 11	n	457	467	924	24	18	42	24	18	42	24	18	42	24	18	42
	%	5.0	5.1	5.1	47.3	53.2	49.8	26.9	34.8	30.3	10.6	4.9	8.1	15.3	7.1	11.7
	LCL	1.7	0.3	1.3	14.4	46.7	24.4	-3.0	28.9	-0.3	1.0	-0.5	2.9	4.6	6.2	0.1
	UCL	8.4	9.9	8.8	80.2	59.7	75.2	56.7	40.8	61.0	20.3	10.2	13.3	25.9	8.1	23.4
AGE: 13 OR UNDER	n	89	52	141	9	12	21	9	12	21	9	12	21	9	12	21
	%	7.9	50.4	29.7	60.6	93.5	88.0	26.2	6.3	9.6	13.2	0.2	2.4	0.0	0.0	0.0
	LCL	1.0	41.3	21.7	32.5	92.8	81.6	-2.0	5.7	3.8	-9.9	-0.2	-1.7	----	----	----
	UCL	14.7	59.5	37.7	88.8	94.2	94.3	54.4	6.8	15.4	36.2	0.7	6.5	----	----	----
14	n	223	152	375	19	14	33	19	14	33	19	14	33	19	14	33
	%	8.3	10.0	9.1	67.9	94.3	80.5	15.9	5.7	11.0	16.2	0.0	8.4	0.0	0.0	0.0
	LCL	3.5	3.0	4.6	51.6	93.8	72.1	4.4	5.2	4.7	8.6	----	5.2	----	----	----
	UCL	13.1	17.0	13.5	84.2	94.8	89.0	27.4	6.2	17.4	23.8	----	11.6	----	----	----
15	n	332	230	562	42	21	63	42	21	63	42	21	63	42	21	63
	%	7.8	4.5	6.3	66.8	37.9	57.0	20.3	10.6	17.0	11.7	30.4	18.1	1.2	21.0	7.9
	LCL	3.9	2.1	3.5	49.7	26.4	46.0	6.8	0.7	7.2	-3.9	21.7	7.8	0.8	11.3	4.1
	UCL	11.7	6.9	9.0	83.9	49.5	68.0	33.9	20.4	26.9	27.3	39.2	28.3	1.5	30.8	11.8
16	n	429	328	757	38	32	70	38	32	70	38	32	70	38	32	70
	%	7.6	7.2	7.4	69.8	68.4	69.2	18.6	19.0	18.8	6.7	3.0	5.1	4.9	9.6	7.0
	LCL	4.2	3.5	4.9	57.2	58.7	58.8	8.8	8.2	11.0	-2.3	2.3	0.0	0.9	7.4	3.0
	UCL	11.0	10.9	10.0	82.5	78.1	79.6	28.3	29.9	26.5	15.7	3.6	10.1	8.9	11.8	10.9
17	n	454	344	798	42	23	65	42	23	65	42	23	65	42	23	65
	%	6.6	4.2	5.5	61.9	71.8	65.3	25.1	8.3	19.3	2.5	4.4	3.2	10.5	15.5	12.2
	LCL	4.4	1.5	3.6	48.6	61.4	54.9	14.2	-2.2	12.0	1.7	3.5	0.9	1.9	12.3	5.5
	UCL	8.8	6.9	7.4	75.3	82.1	75.7	35.9	18.7	26.5	3.4	5.3	5.4	19.1	18.8	18.9
18	n	306	217	523	32	13	45	32	13	45	32	13	45	32	13	45
	%	7.1	2.8	5.0	57.8	33.1	49.9	14.9	36.2	21.7	22.4	24.0	22.9	5.0	6.8	5.5
	LCL	3.2	0.8	2.6	35.9	19.3	29.8	-0.2	23.9	3.4	10.9	0.1	9.8	-4.6	4.5	-2.1
	UCL	11.0	4.8	7.5	79.8	46.9	70.0	30.0	48.4	39.9	33.9	47.8	35.9	14.5	9.1	13.2
19 OR OVER	n	459	344	803	56	25	81	56	25	81	56	25	81	56	25	81
	%	10.2	8.1	9.2	37.0	64.9	43.0	15.0	20.0	16.0	4.4	2.5	4.0	43.6	12.7	37.0
	LCL	5.7	2.2	4.6	12.7	49.9	23.4	-8.8	13.1	-8.1	-3.1	1.7	-1.6	-10.0	0.7	-10.6
	UCL	14.6	13.9	13.8	61.3	79.8	62.6	38.7	26.8	40.2	12.0	3.3	9.7	97.2	24.7	84.5

Table 20: Percentage of high school learners who had a sexually transmitted infection and who received treatment by gender, race, grade, age and province

		EVER HAD A SEXUALLY TRANSMITTED INFECTION[3]			RECEIVED TREATMENT FOR A SEXUALLY TRANSMITTED INFECTION[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,036	1,499	3,535	126	103	229
	%	7.8	6.9	7.4	67.4	58.6	63.6
	LCL[1]	6.2	5.0	6.0	54.7	50.1	54.4
	UCL[2]	9.3	8.7	8.7	80.0	67.1	72.8
EASTERN CAPE	n	200	190	390	8	10	18
	%	3.8	4.4	4.1	79.3	59.4	67.4
	LCL	0.6	1.7	1.5	79.3	59.4	40.4
	UCL	7.0	7.2	6.7	79.3	59.4	94.5
FREE STATE	n	266	161	427	14	13	27
	%	5.1	9.2	6.8	49.6	84.0	68.8
	LCL	2.4	5.9	3.2	41.9	84.0	65.2
	UCL	7.9	12.6	10.5	57.3	84.0	72.4
GAUTENG	n	270	210	480	10	9	19
	%	3.4	3.5	3.4	63.0	93.7	74.2
	LCL	2.2	0.5	2.7	17.5	79.2	38.8
	UCL	4.5	6.5	4.1	108.4	108.2	109.7
KWAZULU-NATAL	n	210	133	343	30	15	45
	%	17.3	10.7	14.6	75.7	59.7	70.6
	LCL	12.7	5.2	11.0	55.8	40.0	53.9
	UCL	21.9	16.3	18.2	95.5	79.5	87.2
LIMPOPO	n	193	152	345	10	13	23
	%	5.3	8.3	6.8	48.9	19.8	31.9
	LCL	1.5	2.5	3.1	16.1	-0.4	11.5
	UCL	9.1	14.0	10.4	81.8	40.0	52.3
MPUMALANGA	n	244	206	450	11	10	21
	%	5.9	6.0	5.9	38.1	72.7	54.2
	LCL	2.9	0.7	2.4	38.1	62.8	30.4
	UCL	8.9	11.3	9.5	38.1	82.7	78.0
NORTHERN CAPE	n	217	136	353	13	13	26
	%	5.2	3.2	3.9	79.3	50.6	63.7
	LCL	2.2	-1.4	0.4	48.0	27.8	47.8
	UCL	8.2	7.8	7.5	110.7	73.4	79.5
NORTH WEST	n	196	123	319	9	6	15
	%	5.0	5.2	5.1	63.7	64.5	64.1
	LCL	1.5	-0.2	1.3	63.7	64.5	64.1
	UCL	8.6	10.6	8.9	63.7	64.5	64.1
WESTERN CAPE	n	240	188	428	21	14	35
	%	9.5	6.6	8.0	72.9	70.7	71.9
	LCL	5.8	0.0	2.8	63.9	70.7	60.2
	UCL	13.2	13.1	13.1	81.9	70.7	83.6

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who ever had sex (when the penis enters the vagina or anus)
4. Of those who ever had a sexually transmitted infection

		EVER HAD A SEXUALLY TRANSMITTED INFECTION[3]			RECEIVED TREATMENT FOR A SEXUALLY TRANSMITTED INFECTION[4]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,036	1,499	3,535	126	103	229
	%	7.8	6.9	7.4	67.4	58.6	63.6
	LCL[1]	6.2	5.0	6.0	54.7	50.1	54.4
	UCL[2]	9.3	8.7	8.7	80.0	67.1	72.8
RACE: BLACK	n	1,662	1,210	2,872	112	91	203
	%	8.0	7.4	7.7	66.7	58.3	63.0
	LCL	6.4	5.4	6.3	54.7	49.2	53.9
	UCL	9.6	9.4	9.1	78.7	67.5	72.1
COLOURED	n	229	144	373	8	8	16
	%	2.8	3.7	3.2	87.9	41.6	63.2
	LCL	0.6	-0.8	1.0	81.7	28.7	48.3
	UCL	5.1	8.2	5.5	94.0	54.6	78.0
WHITE	n	86	109	195	1	1	2
	%	0.5	1.7	1.2	0.0	100.0	81.9
	LCL	-0.5	0.9	-0.8	----	100.0	52.8
	UCL	1.6	2.4	3.3	----	100.0	111.0
INDIAN	n	16	12	28	2	-	2
	%	21.5	23.4	22.2	0.0	0.0	0.0
	LCL	-8.4	-5.4	0.8	----	0.0	----
	UCL	51.4	52.1	43.7	----	0.0	----
OTHER	n	21	10	31	1	2	3
	%	12.9	11.2	12.6	100.0	21.3	84.6
	LCL	-6.2	-6.8	-3.4	100.0	-11.6	49.5
	UCL	32.1	29.2	28.5	100.0	54.2	119.8
GRADE 08	n	397	186	583	24	12	36
	%	8.0	4.9	6.9	60.5	28.5	52.8
	LCL	4.4	1.3	4.3	34.4	12.8	29.4
	UCL	11.5	8.5	9.6	86.6	44.2	76.1
GRADE 09	n	639	431	1,070	34	24	58
	%	6.0	9.2	7.3	50.5	49.0	49.8
	LCL	3.5	4.4	4.7	37.1	44.6	37.5
	UCL	8.6	14.0	10.0	63.9	53.5	62.2
GRADE 10	n	570	451	1,021	40	35	75
	%	8.5	5.2	6.6	74.0	73.4	73.7
	LCL	5.4	2.7	4.4	59.3	52.1	59.0
	UCL	11.5	7.6	8.8	88.7	94.7	88.5
GRADE 11	n	430	431	861	28	32	60
	%	8.9	8.9	8.9	79.3	59.5	69.8
	LCL	5.3	4.8	5.6	61.1	34.4	54.0
	UCL	12.5	12.9	12.2	97.5	84.6	85.6
AGE: 13 OR UNDER	n	72	20	92	6	-	6
	%	6.4	0.0	4.8	2.6	0.0	2.6
	LCL	0.8	----	0.6	-2.7	----	-2.7
	UCL	12.0	----	8.9	7.8	----	7.8
14	n	181	110	291	6	6	12
	%	4.0	8.7	6.0	40.6	0.0	11.2
	LCL	0.2	1.6	2.3	3.8	----	-3.2
	UCL	7.9	15.9	9.8	77.3	----	25.6
15	n	275	181	456	5	6	11
	%	2.5	6.6	4.4	80.7	26.0	44.1
	LCL	-0.3	1.4	1.5	55.8	2.2	7.2
	UCL	5.3	11.8	7.3	105.7	49.7	81.0
16	n	361	273	634	13	12	25
	%	3.7	3.0	3.4	52.8	49.4	51.3
	LCL	2.0	1.0	1.9	31.4	44.2	35.9
	UCL	5.5	5.0	4.9	74.3	54.6	66.7
17	n	390	311	701	20	9	29
	%	7.6	2.4	5.1	72.1	34.7	63.7
	LCL	2.4	0.8	2.4	50.8	21.6	41.1
	UCL	12.7	4.0	7.9	93.3	47.8	86.3
18	n	260	203	463	23	16	39
	%	11.6	6.2	8.9	79.9	60.1	73.4
	LCL	4.9	2.0	4.1	63.2	28.9	65.2
	UCL	18.3	10.4	13.7	96.7	91.4	81.6
19 OR OVER	n	401	308	709	46	50	96
	%	14.4	17.0	15.6	63.9	78.5	71.2
	LCL	9.6	11.7	11.9	49.5	72.3	60.5
	UCL	19.1	22.4	19.3	78.2	84.7	81.9

Table 21: Percentage of high school learners who felt susceptible to getting HIV in their lifetime, who felt able to protect themselves from HIV and who had received HIV/AIDS education in school, by gender, race, grade, age and province

		THINK THEY COULD GET HIV IN LIFETIME			ABLE TO PROTECT THEMSELVES FROM GETTING HIV			EVER RECEIVED HIV/AIDS EDUCATION IN SCHOOL		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,769	5,480	10,249	4,851	5,571	10,422	4,749	5,450	10,199
	%	13.7	10.9	12.2	66.9	65.0	65.9	70.3	73.9	72.3
	LCL[1]	11.9	8.9	10.4	64.3	62.2	63.4	67.1	69.9	69.4
	UCL[2]	15.6	12.9	13.9	69.6	67.9	68.3	73.4	77.8	75.2
EASTERN CAPE	n	466	634	1,100	473	643	1,116	461	629	1,090
	%	17.2	10.5	13.3	59.7	60.6	60.2	75.4	86.9	82.0
	LCL	11.2	7.1	9.2	53.1	54.4	54.9	64.6	81.5	74.8
	UCL	23.3	13.8	17.5	66.2	66.9	65.5	86.2	92.2	89.2
FREE STATE	n	536	573	1,109	543	582	1,125	538	577	1,115
	%	8.7	12.0	10.5	71.1	67.9	69.4	72.0	73.2	72.7
	LCL	5.7	8.5	7.9	66.0	63.7	65.7	63.5	64.4	64.3
	UCL	11.7	15.6	13.0	76.2	72.1	73.0	80.6	82.1	81.0
GAUTENG	n	514	609	1,123	523	614	1,137	511	605	1,116
	%	10.8	8.0	9.3	74.8	77.7	76.3	75.4	78.0	76.8
	LCL	8.8	4.6	7.8	69.5	73.5	72.6	69.3	73.6	72.4
	UCL	12.9	11.3	10.9	80.2	81.9	80.1	81.5	82.4	81.2
KWAZULU-NATAL	n	521	627	1,148	530	637	1,167	516	612	1,128
	%	13.0	11.1	11.9	64.4	58.0	60.8	70.8	71.0	70.9
	LCL	7.8	5.7	6.9	57.4	51.9	54.9	62.7	58.8	63.7
	UCL	18.2	16.5	17.0	71.4	64.0	66.7	78.8	83.1	78.0
LIMPOPO	n	457	513	970	467	525	992	453	510	963
	%	17.3	13.1	14.9	67.2	63.9	65.3	56.5	63.7	60.7
	LCL	11.8	5.3	9.2	60.2	51.6	56.4	49.2	53.0	51.8
	UCL	22.8	21.0	20.6	74.1	76.3	74.1	63.8	74.4	69.6
MPUMALANGA	n	580	636	1,216	595	649	1,244	577	630	1,207
	%	19.1	14.7	16.7	66.1	65.9	66.0	65.0	61.0	62.9
	LCL	13.8	10.1	12.3	59.7	59.0	60.2	53.6	52.9	53.6
	UCL	24.3	19.3	21.1	72.5	72.8	71.8	76.5	69.2	72.1
NORTHERN CAPE	n	470	564	1,034	480	572	1,052	471	565	1,036
	%	8.8	5.2	6.6	68.8	80.5	76.1	82.0	89.5	86.7
	LCL	6.0	-1.7	1.9	62.1	70.0	68.6	75.4	83.5	80.9
	UCL	11.7	12.2	11.3	75.6	91.1	83.6	88.6	95.5	92.4
NORTH WEST	n	607	555	1,162	612	568	1,180	600	558	1,158
	%	9.6	10.0	9.8	68.3	65.6	66.9	64.7	73.2	69.2
	LCL	5.0	5.9	5.8	55.5	56.8	56.7	54.6	61.0	58.6
	UCL	14.2	14.1	13.8	81.0	74.4	77.0	74.8	85.5	79.8
WESTERN CAPE	n	618	769	1,387	628	781	1,409	622	764	1,386
	%	14.9	9.8	11.9	66.5	67.1	66.9	82.2	81.5	81.8
	LCL	11.3	6.1	8.7	60.7	62.7	62.3	75.7	68.3	72.3
	UCL	18.4	13.5	15.0	72.3	71.6	71.4	88.7	94.6	91.2

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit

		THINK THEY COULD GET HIV IN LIFETIME			ABLE TO PROTECT THEMSELVES FROM GETTING HIV			EVER RECEIVED HIV/AIDS EDUCATION IN SCHOOL		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,769	5,480	10,249	4,851	5,571	10,422	4,749	5,450	10,199
	%	13.7	10.9	12.2	66.9	65.0	65.9	70.3	73.9	72.3
	LCL[1]	11.9	8.9	10.4	64.3	62.2	63.4	67.1	69.9	69.4
	UCL[2]	15.6	12.9	13.9	69.6	67.9	68.3	73.4	77.8	75.2
RACE: BLACK	n	3,532	3,996	7,528	3,588	4,058	7,646	3,506	3,969	7,475
	%	14.2	11.9	12.9	65.8	64.0	64.8	67.7	71.9	70.1
	LCL	12.1	9.6	11.0	62.8	60.2	61.7	64.1	68.0	67.0
	UCL	16.4	14.2	14.8	68.8	67.8	67.8	71.3	75.8	73.2
COLOURED	n	680	851	1,531	692	865	1,557	683	847	1,530
	%	12.8	7.9	10.2	65.6	69.3	67.6	81.8	86.8	84.5
	LCL	9.0	4.9	7.5	61.3	63.5	63.7	76.7	82.9	81.2
	UCL	16.6	11.0	12.9	69.8	75.1	71.4	87.0	90.6	87.7
WHITE	n	405	484	889	407	488	895	406	483	889
	%	8.5	5.5	6.9	82.7	74.7	78.3	82.1	87.3	85.0
	LCL	3.8	2.1	3.2	77.9	70.1	75.3	74.9	82.4	81.2
	UCL	13.2	9.0	10.5	87.5	79.2	81.2	89.2	92.2	88.8
INDIAN	n	63	65	128	66	68	134	62	66	128
	%	27.3	9.0	17.8	70.2	80.7	75.6	82.2	74.3	78.1
	LCL	14.4	-4.1	8.2	57.0	72.5	67.0	67.0	56.9	65.8
	UCL	40.3	22.2	27.5	83.4	88.9	84.2	97.5	91.6	90.5
OTHER	n	46	45	91	50	48	98	49	46	95
	%	7.0	6.0	6.5	51.4	67.2	58.2	68.8	83.2	74.9
	LCL	0.5	-1.2	2.5	33.5	55.4	47.8	55.5	74.2	66.7
	UCL	13.5	13.2	10.6	69.4	78.9	68.6	82.1	92.1	83.2
GRADE 08	n	1,325	1,450	2,775	1,353	1,470	2,823	1,309	1,433	2,742
	%	16.1	13.2	14.5	59.3	60.7	60.0	66.1	74.9	70.7
	LCL	13.5	8.7	11.8	54.8	56.1	56.2	60.6	69.4	65.7
	UCL	18.6	17.7	17.3	63.7	65.2	63.9	71.6	80.4	75.8
GRADE 09	n	1,640	1,823	3,463	1,677	1,863	3,540	1,637	1,805	3,442
	%	14.6	10.4	12.4	66.3	63.3	64.8	75.5	80.4	78.1
	LCL	11.5	8.3	10.2	62.4	60.1	61.6	70.0	75.9	73.3
	UCL	17.6	12.5	14.6	70.3	66.6	67.9	81.0	84.8	82.8
GRADE 10	n	1,111	1,215	2,326	1,122	1,234	2,356	1,110	1,215	2,325
	%	10.6	8.5	9.3	73.0	67.3	69.4	69.7	68.4	68.8
	LCL	7.8	5.6	6.9	68.5	61.7	65.1	63.8	60.2	63.2
	UCL	13.4	11.4	11.7	77.6	72.8	73.6	75.6	76.5	74.5
GRADE 11	n	693	992	1,685	699	1,004	1,703	693	997	1,690
	%	12.0	12.5	12.3	75.1	71.2	73.0	70.0	73.1	71.7
	LCL	7.5	9.3	9.1	69.4	66.3	68.4	62.8	66.1	65.5
	UCL	16.4	15.8	15.4	80.8	76.1	77.5	77.3	80.1	77.9
AGE: 13 OR UNDER	n	278	514	792	285	523	808	282	511	793
	%	10.3	14.1	12.8	70.2	60.2	63.6	74.3	77.3	76.3
	LCL	5.8	10.9	9.7	63.7	52.5	58.5	67.2	70.7	70.3
	UCL	14.9	17.2	15.9	76.8	67.8	68.7	81.3	83.9	82.2
14	n	623	938	1,561	637	950	1,587	617	932	1,549
	%	12.8	9.7	10.9	64.4	65.6	65.1	73.4	78.7	76.7
	LCL	8.7	6.6	8.2	59.6	58.7	60.2	67.1	70.2	71.1
	UCL	16.8	12.8	13.6	69.2	72.6	70.0	79.6	87.3	82.2
15	n	802	985	1,787	807	995	1,802	802	978	1,780
	%	12.2	6.9	9.1	71.6	63.8	66.9	74.4	77.3	76.2
	LCL	9.3	5.0	7.2	66.6	58.1	63.0	69.8	72.7	72.6
	UCL	15.2	8.9	10.9	76.6	69.5	70.9	79.0	81.9	79.7
16	n	907	1,000	1,907	922	1,011	1,933	902	997	1,899
	%	14.0	10.4	12.0	64.0	61.0	62.4	70.4	71.2	70.8
	LCL	10.7	7.7	9.8	59.0	54.6	57.6	65.8	64.0	66.1
	UCL	17.3	13.1	14.3	69.0	67.5	67.2	75.0	78.3	75.6
17	n	785	789	1,574	798	803	1,601	779	782	1,561
	%	12.5	8.9	10.5	69.1	72.4	70.9	68.7	73.0	71.0
	LCL	9.3	6.0	7.9	64.3	64.6	65.9	63.7	66.8	66.8
	UCL	15.7	11.7	13.1	74.0	80.3	75.9	73.6	79.1	75.2
18	n	469	407	876	472	422	894	461	410	871
	%	17.1	14.7	15.8	64.1	68.7	66.5	59.8	71.9	66.1
	LCL	12.7	7.1	10.7	58.9	60.2	61.3	53.0	64.4	60.8
	UCL	21.4	22.3	21.0	69.2	77.3	71.8	66.6	79.4	71.5
19 OR OVER	n	690	554	1,244	710	565	1,275	693	551	1,244
	%	16.6	19.1	17.7	66.8	63.9	65.4	66.8	62.2	64.8
	LCL	11.3	15.1	14.3	60.0	58.8	60.2	59.2	54.6	59.1
	UCL	21.8	23.1	21.2	73.5	69.0	70.7	74.5	69.8	70.4

Table 22: Percentage of high school learners who were undernourished and overnourished, by gender, race, grade, age and province

		UNDERNUTRITION									OVERNUTRITION					
		UNDERWEIGHT - WEIGHT FOR AGE[3]			STUNTING - HEIGHT FOR AGE[4]			WASTING - WEIGHT FOR HEIGHT[5]			OVERWEIGHT (COLE)[6]			OBESITY (COLE)[7]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,260	4,964	9,224	4,215	4,937	9,152	4,199	4,911	9,110	4,213	4,931	9,144	4,213	4,931	9,144
	%	15.6	3.9	9.0	15.6	8.1	11.4	7.6	1.3	4.0	6.9	25.0	17.2	2.2	5.3	4.0
	LCL[1]	13.6	3.1	7.8	13.9	6.6	10.1	6.3	0.9	3.3	5.5	20.1	14.3	1.5	4.3	3.3
	UCL[2]	17.6	4.7	10.2	17.4	9.7	12.7	8.8	1.6	4.7	8.4	29.9	20.1	2.9	6.4	4.7
EASTERN CAPE	n	435	596	1,031	437	596	1,033	435	595	1,030	437	596	1,033	437	596	1,033
	%	13.8	3.4	7.7	14.6	7.1	10.2	5.0	0.6	2.4	6.2	24.9	17.1	1.4	4.9	3.4
	LCL	10.1	1.3	6.3	11.9	3.7	7.5	2.1	0.0	1.2	0.2	17.8	11.3	-0.1	3.3	2.3
	UCL	17.5	5.4	9.1	17.3	10.5	12.9	7.9	1.2	3.7	12.1	32.1	22.9	2.8	6.5	4.6
FREE STATE	n	477	520	997	477	525	1,002	473	522	995	477	522	999	477	522	999
	%	15.9	3.9	9.5	14.4	9.1	11.6	10.3	1.4	5.5	5.2	22.5	14.3	1.8	4.3	3.1
	LCL	11.4	1.2	6.3	10.5	6.1	8.5	7.1	0.2	4.3	2.5	17.8	10.4	0.2	2.3	1.6
	UCL	20.4	6.6	12.8	18.3	12.2	14.8	13.4	2.5	6.8	7.8	27.2	18.2	3.4	6.3	4.6
GAUTENG	n	486	569	1,055	486	570	1,056	485	568	1,053	486	569	1,055	486	569	1,055
	%	11.6	3.7	7.4	11.9	9.5	10.6	5.4	0.3	2.7	6.4	29.5	18.5	1.9	10.4	6.4
	LCL	8.9	1.9	6.4	7.4	7.0	8.1	3.7	-0.2	2.0	4.3	23.2	15.3	1.1	6.9	4.6
	UCL	14.3	5.4	8.4	16.3	12.0	13.2	7.0	0.8	3.4	8.5	35.7	21.8	2.7	13.8	8.2
KWAZULU-NATAL	n	395	481	876	393	488	881	391	476	867	392	481	873	392	481	873
	%	14.1	2.5	7.2	19.3	7.8	12.4	5.9	1.0	3.0	6.3	34.3	22.9	2.2	2.3	2.2
	LCL	9.5	1.0	4.3	15.1	3.1	8.8	3.1	0.3	1.7	3.5	16.2	11.7	0.2	1.3	1.2
	UCL	18.7	4.0	10.1	23.4	12.4	16.1	8.7	1.7	4.4	9.1	52.5	34.1	4.1	3.3	3.3
LIMPOPO	n	432	452	884	406	439	845	406	440	846	407	441	848	407	441	848
	%	20.0	6.1	12.1	16.2	7.2	11.1	10.1	2.1	5.5	7.0	13.1	10.5	3.1	4.2	3.8
	LCL	11.2	3.2	6.8	9.7	2.3	6.1	4.4	0.7	2.1	2.1	10.1	7.3	1.1	0.2	1.0
	UCL	28.7	9.0	17.4	22.6	12.1	16.0	15.8	3.5	8.9	11.9	16.0	13.7	5.1	8.2	6.5
MPUMA-LANGA	n	512	585	1,097	516	587	1,103	511	584	1,095	513	588	1,101	513	588	1,101
	%	14.6	2.9	8.2	14.0	5.4	9.3	6.8	0.8	3.5	8.4	24.0	17.0	2.3	5.8	4.2
	LCL	7.3	1.3	4.4	7.8	3.7	6.0	4.3	0.2	2.1	3.9	21.2	14.1	0.9	3.4	3.3
	UCL	22.0	4.4	11.9	20.3	7.2	12.6	9.2	1.4	4.9	12.9	26.8	19.9	3.6	8.2	5.2
NORTHERN CAPE	n	379	495	874	381	497	878	380	494	874	381	497	878	381	497	878
	%	27.6	7.0	14.3	26.0	10.0	15.6	17.2	3.8	8.6	6.2	15.6	12.3	3.8	5.4	4.8
	LCL	19.2	3.7	9.9	22.4	4.6	11.1	12.2	1.7	5.7	-0.2	-2.7	-0.6	-0.9	-0.5	-0.5
	UCL	36.0	10.3	18.7	29.7	15.3	20.2	22.1	5.9	11.4	12.6	33.9	25.2	8.5	11.3	10.1
NORTH WEST	n	558	531	1,089	559	532	1,091	559	529	1,088	559	532	1,091	559	532	1,091
	%	24.1	5.4	14.2	20.4	9.8	14.8	12.2	2.4	7.0	9.3	14.2	11.9	2.3	3.4	2.9
	LCL	17.5	3.0	10.0	15.4	6.7	11.4	8.6	0.9	4.7	4.0	9.3	8.2	-0.1	0.8	0.4
	UCL	30.8	7.8	18.5	25.5	12.9	18.1	15.9	3.9	9.4	14.7	19.1	15.6	4.7	6.0	5.4
WESTERN CAPE	n	586	735	1,321	560	703	1,263	559	703	1,262	561	705	1,266	561	705	1,266
	%	9.6	3.4	6.0	9.5	9.5	9.5	5.5	1.3	3.0	8.2	30.7	21.5	2.4	10.3	7.1
	LCL	7.2	1.6	4.0	7.2	6.6	7.3	3.8	0.6	1.9	6.3	27.3	18.8	0.0	8.1	5.3
	UCL	12.1	5.3	8.0	11.7	12.4	11.7	7.1	1.9	4.1	10.2	34.1	24.1	4.9	12.6	8.9

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. (WAZ score <-2 standard deviations)
4. (HAZ score <-2 standard deviations)
5. (WHZ score <-2 standard deviations)
6. Overweight according to the age-dependent BMI cut-offs suggested by Cole (25 kg/m2 by age 18)
7. Obese, as well as overweight, according to the age-dependent BMI cut-offs suggested by Cole (30 kg/m2 by age 18)

		UNDERNUTRITION									OVERNUTRITION					
		UNDERWEIGHT - WEIGHT FOR AGE[3]			STUNTING - HEIGHT FOR AGE[4]			WASTING - WEIGHT FOR HEIGHT[5]			OVERWEIGHT (COLE)[6]			OBESITY (COLE)[7]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,260	4,964	9,224	4,215	4,937	9,152	4,199	4,911	9,110	4,213	4,931	9,144	4,213	4,931	9,144
	%	15.6	3.9	9.0	15.6	8.1	11.4	7.6	1.3	4.0	6.9	25.0	17.2	2.2	5.3	4.0
	LCL[1]	13.6	3.1	7.8	13.9	6.6	10.1	6.3	0.9	3.3	5.5	20.1	14.3	1.5	4.3	3.3
	UCL[2]	17.6	4.7	10.2	17.4	9.7	12.7	8.8	1.6	4.7	8.4	29.9	20.1	2.9	6.4	4.7
RACE: BLACK	n	3,097	3,575	6,672	3,078	3,581	6,659	3,062	3,556	6,618	3,074	3,572	6,646	3,074	3,572	6,646
	%	17.0	3.9	9.5	16.4	8.4	11.8	8.0	1.1	4.1	5.2	25.1	16.6	1.9	5.3	3.8
	LCL	14.6	3.1	8.1	14.5	6.7	10.3	6.5	0.7	3.3	4.0	20.5	13.8	1.2	4.1	3.1
	UCL	19.3	4.8	10.9	18.2	10.1	13.3	9.5	1.5	4.9	6.3	29.8	19.4	2.5	6.4	4.5
COLOURED	n	655	811	1,466	628	779	1,407	627	781	1,408	629	782	1,411	629	782	1,411
	%	15.5	6.2	10.6	16.5	11.4	13.8	8.2	2.8	5.3	8.5	16.9	13.0	2.8	3.8	3.3
	LCL	12.3	3.8	8.3	12.6	7.8	11.3	6.1	1.5	3.8	5.5	12.9	10.7	0.5	1.9	1.6
	UCL	18.8	8.5	12.8	20.4	15.0	16.3	10.2	4.1	6.8	11.6	20.9	15.4	5.0	5.7	5.1
WHITE	n	365	437	802	366	436	802	367	435	802	367	437	804	367	437	804
	%	2.6	1.3	1.9	4.8	3.2	3.9	2.8	0.3	1.4	20.2	26.0	23.4	4.8	7.7	6.4
	LCL	1.2	-0.3	0.8	2.3	0.8	2.2	0.1	0.2	0.2	14.0	20.8	19.3	1.2	4.3	3.2
	UCL	4.0	2.9	3.0	7.3	5.5	5.7	5.4	0.5	2.7	26.3	31.1	27.4	8.3	11.1	9.5
INDIAN	n	62	56	118	62	56	118	62	55	117	62	56	118	62	56	118
	%	6.9	2.8	4.8	8.5	5.3	6.9	9.7	4.1	6.8	23.7	26.9	25.3	6.3	14.1	10.2
	LCL	2.2	-1.1	2.0	1.6	0.2	2.0	0.1	1.1	2.6	16.8	18.1	20.1	2.0	4.5	6.0
	UCL	11.5	6.7	7.7	15.4	10.4	11.8	19.2	7.0	11.1	30.7	35.7	30.5	10.6	23.7	14.5
OTHER	n	39	41	80	39	42	81	39	41	80	39	41	80	39	41	80
	%	27.5	3.9	16.8	38.5	5.5	23.3	2.6	2.3	2.5	1.0	22.7	10.8	0.5	0.0	0.3
	LCL	11.8	-1.0	10.5	26.3	-1.0	14.6	-0.5	-1.4	0.2	-1.0	7.1	2.0	-0.5	----	-0.3
	UCL	43.1	8.8	23.1	50.7	12.0	31.9	5.7	6.1	4.8	3.1	38.2	19.7	1.5	----	0.8
GRADE 08	n	1,291	1,400	2,691	1,275	1,385	2,660	1,270	1,376	2,646	1,276	1,382	2,658	1,276	1,382	2,658
	%	18.1	5.1	11.3	19.7	10.9	15.1	7.8	1.5	4.5	6.9	18.2	12.8	2.3	4.3	3.3
	LCL	14.8	3.9	9.5	16.5	8.2	13.1	6.2	0.9	3.7	5.0	14.4	10.7	1.3	2.2	2.1
	UCL	21.4	6.3	13.1	22.9	13.5	17.0	9.5	2.1	5.4	8.9	22.1	15.0	3.3	6.4	4.5
GRADE 09	n	1,547	1,694	3,241	1,519	1,672	3,191	1,511	1,667	3,178	1,514	1,673	3,187	1,514	1,673	3,187
	%	17.4	4.4	10.5	17.0	9.7	13.1	9.7	1.6	5.4	5.0	21.1	13.6	1.7	5.2	3.6
	LCL	14.5	2.9	8.6	14.6	7.7	11.5	7.2	0.9	4.0	3.6	17.8	11.5	0.8	3.8	2.7
	UCL	20.3	5.8	12.3	19.3	11.6	14.7	12.2	2.3	6.8	6.4	24.4	15.7	2.5	6.7	4.4
GRADE 10	n	908	1,056	1,964	909	1,062	1,971	906	1,053	1,959	909	1,059	1,968	909	1,059	1,968
	%	11.1	2.4	5.4	11.7	4.4	6.9	5.3	0.9	2.4	9.1	33.6	25.1	2.3	6.3	4.9
	LCL	7.9	1.2	3.7	8.5	2.8	4.8	3.2	0.3	1.4	6.0	21.4	16.6	0.7	4.0	3.3
	UCL	14.2	3.6	7.1	15.0	6.0	9.0	7.4	1.4	3.4	12.2	45.8	33.7	3.9	8.7	6.6
GRADE 11	n	514	814	1,328	512	818	1,330	512	815	1,327	514	817	1,331	514	817	1,331
	%	12.3	3.9	7.5	8.4	7.9	8.1	5.8	1.0	3.0	7.7	27.1	18.7	3.1	5.6	4.5
	LCL	8.9	2.1	5.7	5.1	5.4	5.8	3.8	0.2	2.1	4.8	22.3	15.8	1.5	3.5	3.1
	UCL	15.6	5.7	9.3	11.6	10.4	10.4	7.8	1.7	3.9	10.6	31.8	21.7	4.8	7.7	5.9
AGE: 13 OR UNDER	n	288	518	806	284	510	794	283	508	791	283	511	794	283	511	794
	%	15.9	4.3	8.3	18.2	10.6	13.2	6.4	1.6	3.3	10.9	2.9	12.8	4.5	2.9	3.5
	LCL	10.1	2.5	5.6	12.4	7.2	9.8	2.4	0.8	1.8	5.1	1.6	9.8	1.3	1.6	2.2
	UCL	21.7	6.1	11.0	24.1	14.0	16.7	10.5	2.4	4.7	16.7	4.2	15.7	7.6	4.2	4.7
14	n	637	943	1,580	623	922	1,545	621	915	1,536	624	922	1,546	624	922	1,546
	%	17.9	4.3	9.7	19.9	8.2	12.8	7.9	2.1	4.4	8.8	4.5	17.3	2.2	4.5	3.6
	LCL	13.5	2.5	7.5	14.4	5.3	10.1	5.5	1.1	3.3	6.1	2.2	11.7	0.9	2.2	2.2
	UCL	22.2	6.1	11.8	25.4	11.2	15.6	10.2	3.1	5.5	11.5	6.7	22.9	3.4	6.7	4.9
15	n	819	995	1,814	811	993	1,804	808	990	1,798	810	992	1,802	810	992	1,802
	%	15.1	4.7	8.9	13.6	9.5	11.1	7.5	1.2	3.7	7.3	5.8	15.9	1.7	5.8	4.2
	LCL	11.7	2.9	6.6	10.9	7.5	9.3	5.5	0.4	2.7	4.4	3.3	12.8	1.0	3.3	2.6
	UCL	18.5	6.6	11.2	16.3	11.4	13.0	9.4	2.0	4.7	10.1	8.4	19.1	2.5	8.4	5.8
16	n	918	1,015	1,933	907	1,013	1,920	902	1,011	1,913	905	1,012	1,917	905	1,012	1,917
	%	14.8	3.2	8.5	16.6	7.7	11.7	7.2	0.7	3.7	7.9	4.7	18.2	2.2	4.7	3.6
	LCL	11.5	1.9	6.6	13.2	4.8	9.3	5.1	0.2	2.4	5.4	3.0	14.2	0.9	3.0	2.4
	UCL	18.2	4.5	10.5	20.0	10.5	14.2	9.2	1.2	4.9	10.3	6.4	22.2	3.6	6.4	4.8
17	n	799	791	1,590	795	797	1,592	793	793	1,586	795	793	1,588	795	793	1,588
	%	15.5	3.5	9.0	15.2	6.2	10.4	7.6	1.0	4.0	5.0	7.3	19.9	1.5	7.3	4.7
	LCL	12.5	1.8	7.0	11.2	4.2	8.0	5.1	0.0	2.6	2.7	4.2	11.4	0.0	4.2	2.8
	UCL	18.5	5.1	11.0	19.3	8.3	12.7	10.1	2.1	5.4	7.3	10.3	28.3	3.1	10.3	6.5
18	n	478	420	898	474	422	896	473	420	889	475	420	895	475	420	895
	%	16.0	4.3	9.9	12.3	7.3	9.7	7.9	22.9	4.6	5.2	4.4	14.4	2.7	4.4	3.6
	LCL	11.3	2.0	7.3	8.6	3.5	7.1	4.9	16.4	3.0	2.9	2.4	10.9	1.4	2.4	2.4
	UCL	20.6	6.5	12.5	16.0	11.2	12.4	10.9	29.4	6.1	7.5	6.4	18.0	4.0	6.4	4.8
19 OR OVER	n	321	282	603	321	280	601	319	281	597	321	281	602	321	281	602
	%	13.9	2.0	8.5	12.1	6.4	9.5	8.8	41.8	5.2	3.2	9.5	20.7	2.0	9.5	5.4
	LCL	8.0	0.5	5.6	7.3	3.3	6.9	4.5	32.8	3.1	1.5	4.2	14.2	0.3	4.2	2.7
	UCL	19.7	3.5	11.3	16.9	9.6	12.1	13.1	50.9	7.3	5.0	14.8	27.3	3.7	14.8	8.1

Table 23: Percentage of high school learners who described themselves as underweight or overweight by gender, race, grade, age and province

		DESCRIPTION OF OWN BODY WEIGHT					
		UNDERWEIGHT			OVERWEIGHT		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,818	5,509	10,327	4,818	5,509	10,327
	%	27.8	20.5	23.8	9.7	17.5	14.1
	LCL[1]	25.5	17.5	21.9	8.1	15.8	12.7
	UCL[2]	30.1	23.6	25.6	11.3	19.2	15.4
EASTERN CAPE	n	464	637	1,101	464	637	1,101
	%	27.3	13.7	19.5	5.4	16.1	11.6
	LCL	19.4	7.2	13.7	2.1	8.9	6.4
	UCL	35.2	20.2	25.2	8.6	23.3	16.8
FREE STATE	n	540	576	1,116	540	576	1,116
	%	28.1	22.5	25.1	8.3	16.9	12.9
	LCL	23.0	17.2	20.0	5.3	13.1	10.1
	UCL	33.2	27.8	30.2	11.3	20.6	15.7
GAUTENG	n	522	611	1,133	522	611	1,133
	%	25.3	20.5	22.8	8.0	17.1	12.8
	LCL	19.7	18.2	19.5	6.0	12.2	9.9
	UCL	30.9	22.9	26.1	10.1	21.9	15.7
KWAZULU-NATAL	n	526	629	1,155	526	629	1,155
	%	30.5	20.5	24.9	13.2	18.1	16.0
	LCL	24.4	11.9	20.8	8.0	15.2	12.7
	UCL	36.6	29.1	28.9	18.4	21.0	19.2
LIMPOPO	n	467	514	981	467	514	981
	%	29.4	25.6	27.2	10.9	14.7	13.1
	LCL	22.5	18.1	21.2	6.5	11.4	9.6
	UCL	36.2	33.2	33.3	15.2	18.1	16.6
MPUMALANGA	n	585	644	1,229	585	644	1,229
	%	28.3	19.7	23.6	9.3	13.6	11.6
	LCL	24.2	14.5	19.0	4.3	9.9	8.2
	UCL	32.3	25.0	28.3	14.2	17.4	15.1
NORTHERN CAPE	n	479	565	1,044	479	565	1,044
	%	27.0	36.0	32.5	8.4	16.8	13.6
	LCL	24.2	-5.1	6.4	4.3	5.2	6.0
	UCL	29.7	77.0	58.7	12.5	28.3	21.1
NORTH WEST	n	604	562	1,166	604	562	1,166
	%	23.4	21.9	22.6	9.8	18.4	14.3
	LCL	19.9	14.1	17.7	6.5	10.6	9.6
	UCL	26.9	29.7	27.6	13.0	26.2	18.9
WESTERN CAPE	n	631	771	1,402	631	771	1,402
	%	26.8	15.1	20.0	8.6	25.5	18.5
	LCL	22.4	11.2	16.2	6.4	18.9	14.8
	UCL	31.2	19.0	23.7	10.9	32.1	22.1

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit

		DESCRIPTION OF OWN BODY WEIGHT					
		UNDERWEIGHT			OVERWEIGHT		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,818	5,509	10,327	4,818	5,509	10,327
	%	27.8	20.5	23.8	9.7	17.5	14.1
	LCL[1]	25.5	17.5	21.9	8.1	15.8	12.7
	UCL[2]	30.1	23.6	25.6	11.3	19.2	15.4
RACE: BLACK	n	3,553	4,017	7,570	3,553	4,017	7,570
	%	28.7	21.2	24.5	8.6	15.2	12.3
	LCL	26.1	18.1	22.6	6.9	13.8	11.0
	UCL	31.4	24.3	26.3	10.3	16.6	13.6
COLOURED	n	696	850	1,546	696	850	1,546
	%	25.2	28.1	26.7	11.6	20.5	16.4
	LCL	21.4	15.6	19.6	7.8	15.4	13.4
	UCL	28.9	40.6	33.9	15.5	25.5	19.3
WHITE	n	408	488	896	408	488	896
	%	21.8	9.9	15.2	15.9	39.6	29.0
	LCL	17.6	6.3	12.2	11.4	34.2	26.2
	UCL	26.0	13.6	18.3	20.3	45.0	31.9
INDIAN	n	66	67	133	66	67	133
	%	23.3	10.8	16.9	24.0	21.8	22.9
	LCL	15.4	1.4	10.9	10.0	13.6	13.9
	UCL	31.2	20.2	22.9	38.0	30.1	31.8
OTHER	n	49	46	95	49	46	95
	%	31.5	15.4	24.3	12.1	11.6	11.9
	LCL	15.8	3.9	11.2	0.4	2.9	2.9
	UCL	47.3	27.0	37.5	23.7	20.3	20.9
GRADE 08	n	1,338	1,453	2,791	1,338	1,453	2,791
	%	32.2	24.8	28.3	11.0	13.4	12.3
	LCL	28.4	20.4	25.2	9.0	11.2	10.8
	UCL	35.9	29.3	31.4	13.1	15.6	13.7
GRADE 09	n	1,667	1,837	3,504	1,667	1,837	3,504
	%	27.1	21.9	24.4	7.9	16.3	12.3
	LCL	24.0	18.8	22.0	6.2	14.0	11.0
	UCL	30.3	24.9	26.8	9.6	18.6	13.6
GRADE 10	n	1,116	1,221	2,337	1,116	1,221	2,337
	%	26.6	15.8	19.7	8.7	21.0	16.5
	LCL	20.6	9.7	16.1	6.6	17.9	14.3
	UCL	32.6	21.8	23.3	10.9	24.1	18.7
GRADE 11	n	697	998	1,695	697	998	1,695
	%	21.9	20.4	21.1	11.6	19.9	16.1
	LCL	16.8	16.6	17.8	3.6	16.0	11.3
	UCL	27.0	24.1	24.3	19.6	23.8	20.9
AGE: 13 OR UNDER	n	287	515	802	287	515	802
	%	30.9	32.8	32.2	13.6	8.1	10.0
	LCL	22.9	25.3	26.9	8.3	5.3	7.3
	UCL	38.9	40.3	37.4	18.9	10.9	12.7
14	n	633	944	1,577	633	944	1,577
	%	27.5	21.8	24.1	10.0	19.1	15.5
	LCL	22.4	17.2	20.0	6.9	11.6	10.7
	UCL	32.5	26.5	28.1	13.0	26.5	20.3
15	n	810	986	1,796	810	986	1,796
	%	24.8	15.0	18.9	9.6	17.7	14.5
	LCL	21.5	12.0	16.5	6.9	13.7	11.6
	UCL	28.1	18.0	21.4	12.3	21.7	17.3
16	n	909	1,009	1,918	909	1,009	1,918
	%	27.4	16.7	21.5	7.8	19.2	14.0
	LCL	23.3	13.7	19.3	5.4	15.5	11.9
	UCL	31.4	19.6	23.8	10.2	22.9	16.1
17	n	788	787	1,575	788	787	1,575
	%	27.2	20.6	23.6	9.6	19.0	14.7
	LCL	23.3	11.3	18.2	6.2	13.7	11.2
	UCL	31.0	29.9	29.0	13.0	24.3	18.2
18	n	472	417	889	472	417	889
	%	25.9	18.8	22.2	6.8	12.5	9.8
	LCL	20.2	11.9	17.9	3.3	8.6	7.4
	UCL	31.6	25.7	26.5	10.3	16.4	12.1
19 OR OVER	n	700	558	1,258	700	558	1,258
	%	31.1	22.8	27.3	9.1	18.6	13.4
	LCL	24.7	17.9	23.6	7.2	14.7	11.4
	UCL	37.4	27.7	31.0	11.0	22.5	15.4

Table 24: Percentage of high school learners whose diet included frequent consumption of various food types, by gender, race, grade, age and province

		FRESH FRUIT[3]			VEGETABLES[4]			MILK[5]			MAIZE[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,752	3,015	5,767	2,885	3,262	6,147	2,314	2,437	4,751	3,306	3,595	6,901
	%	57.0	58.4	57.8	57.6	58.7	58.2	45.9	44.1	44.9	65.5	64.0	64.7
	LCL[1]	54.1	54.8	55.5	55.0	54.7	55.6	43.4	40.8	42.7	62.8	60.5	61.8
	UCL[2]	59.9	62.0	60.1	60.1	62.6	60.7	48.3	47.5	47.1	68.2	67.5	67.5
EASTERN CAPE	n	453	625	1,078	471	644	1,115	465	636	1,101	466	640	1,106
	%	39.8	39.3	39.5	42.5	40.9	41.6	39.6	36.1	37.6	47.6	46.7	47.1
	LCL	34.6	32.4	33.6	34.3	32.0	33.9	31.6	27.3	29.5	39.8	39.3	40.1
	UCL	45.0	46.1	45.4	50.6	49.8	49.3	47.6	45.0	45.6	55.4	54.1	54.1
FREE STATE	n	535	569	1,104	548	582	1,130	544	577	1,121	546	581	1,127
	%	61.7	56.7	59.0	59.7	56.4	57.9	45.3	46.4	45.9	79.6	71.6	75.3
	LCL	55.7	52.7	55.0	53.8	51.1	53.1	41.9	41.5	42.5	73.8	63.9	68.7
	UCL	67.7	60.7	63.0	65.6	61.7	62.8	48.6	51.3	49.2	85.4	79.3	82.0
GAUTENG	n	513	605	1,118	528	618	1,146	527	613	1,140	524	616	1,140
	%	62.5	65.9	64.3	68.5	69.8	69.2	46.2	46.1	46.2	77.4	73.3	75.2
	LCL	57.3	62.2	61.3	63.7	65.1	65.6	42.3	44.2	44.1	71.6	67.4	70.3
	UCL	67.7	69.5	67.3	73.3	74.5	72.8	50.2	48.0	48.2	83.2	79.2	80.2
KWAZULU-NATAL	n	515	620	1,135	536	637	1,173	531	628	1,159	530	637	1,167
	%	63.5	68.7	66.4	62.6	67.7	65.5	45.8	46.9	46.4	57.1	56.7	56.9
	LCL	54.3	58.4	60.1	55.8	55.0	58.3	39.9	36.9	41.6	49.4	46.2	48.3
	UCL	72.7	79.0	72.7	69.4	80.4	72.6	51.8	56.9	51.3	64.8	67.2	65.5
LIMPOPO	n	464	512	976	471	524	995	462	519	981	469	521	990
	%	53.8	58.5	56.5	46.4	48.9	47.8	36.9	38.0	37.5	74.3	74.8	74.6
	LCL	46.9	51.8	51.5	40.6	41.8	42.2	29.8	31.2	32.4	66.7	68.5	69.8
	UCL	60.7	65.2	61.5	52.2	56.0	53.5	44.0	44.7	42.7	81.9	81.1	79.4
MPUMALANGA	n	587	635	1,222	598	655	1,253	594	650	1,244	597	656	1,253
	%	55.1	59.3	57.4	60.5	64.6	62.7	49.1	43.5	46.0	71.8	74.7	73.4
	LCL	48.4	51.2	50.9	54.1	60.9	58.9	40.9	37.6	40.1	64.5	67.0	66.3
	UCL	61.7	67.5	63.8	66.9	68.3	66.5	57.2	49.3	52.0	79.0	82.3	80.5
NORTHERN CAPE	n	462	565	1,027	482	573	1,055	477	569	1,046	483	568	1,051
	%	56.2	36.8	44.0	60.9	46.7	52.2	54.1	36.0	42.9	72.6	72.4	72.5
	LCL	46.7	13.5	27.6	52.6	18.3	32.0	45.5	13.2	26.5	67.3	49.8	58.9
	UCL	65.7	60.1	60.3	69.3	75.2	72.3	62.6	58.9	59.2	77.9	95.1	86.1
NORTH WEST	n	606	557	1,163	615	568	1,183	612	565	1,177	614	568	1,182
	%	58.2	61.3	59.8	60.2	67.7	64.1	55.1	52.1	53.5	73.7	72.1	72.8
	LCL	52.1	55.5	55.2	54.1	62.5	59.0	47.0	44.6	46.2	68.9	69.8	70.4
	UCL	64.4	67.2	64.5	66.2	72.9	69.2	63.2	59.5	60.8	78.4	74.4	75.3
WESTERN CAPE	n	616	766	1,382	632	777	1,409	624	780	1,404	629	774	1,403
	%	56.1	52.7	54.1	58.2	54.9	56.3	54.6	49.8	51.8	51.5	53.3	52.6
	LCL	50.7	44.2	48.0	51.7	48.1	50.6	44.4	41.9	43.6	47.0	44.4	46.4
	UCL	61.6	61.3	60.2	64.7	61.7	61.9	64.8	57.7	60.0	55.9	62.3	58.7

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Ate frequently (i.e. on 4 or more days in the week preceding the survey)
4. Ate fresh vegetables, that were cooked or in a salad, frequently
5. Drank milk / 'amasi' frequently in the week preceding the survey (including the milk drunk in a glass, in a cup, from a carton, or with cereal / porridge)
6. Ate maize in any form frequently (for example pap or porridge)
7. Ate fast food or 'luxuries' frequently (for example a hamburger, fried chicken, boerewors roll, hotdog, hot chips, 'gatsby', pie, vetkoek or polony roll)
8. Ate chocolate or sweets, or drank cooldrinks frequently (for example Coca-cola ('Coke'))

		MEAT[3]			FAST FOOD[7]			CAKES AND/OR BISCUITS[3]			COOLDRINKS AND SWEETS[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	3,063	3,543	6,606	1,860	2,147	4,007	2,299	2,548	4,847	2,439	3,001	5,440
	%	62.3	63.9	63.2	38.9	38.8	38.8	45.9	48.5	47.4	49.5	54.0	52.0
	LCL[1]	59.7	59.2	60.0	36.6	35.8	36.9	43.3	45.6	45.0	47.0	51.4	50.0
	UCL[2]	64.9	68.6	66.4	41.2	41.9	40.8	48.5	51.5	49.7	52.0	56.6	54.0
EASTERN CAPE	n	459	632	1,091	464	628	1,092	465	642	1,107	463	634	1,097
	%	41.0	41.5	41.3	29.5	26.6	27.8	33.6	34.9	34.3	37.3	40.9	39.4
	LCL	31.2	28.1	29.7	21.9	22.6	23.1	25.6	27.8	27.4	30.3	34.8	34.0
	UCL	50.8	54.8	52.9	37.0	30.6	32.6	41.5	41.9	41.2	44.3	47.1	44.8
FREE STATE	n	542	570	1,112	537	576	1,113	548	581	1,129	542	580	1,122
	%	62.4	62.6	62.5	35.9	40.2	38.2	52.0	53.9	53.0	44.0	54.9	49.8
	LCL	55.4	59.8	58.8	31.4	35.7	35.2	44.5	47.5	46.4	39.1	51.0	47.2
	UCL	69.3	65.3	66.2	40.4	44.7	41.2	59.5	60.2	59.6	48.9	58.9	52.5
GAUTENG	n	512	608	1,120	517	616	1,133	528	619	1,147	526	613	1,139
	%	75.7	77.1	76.4	42.4	42.1	42.2	55.7	53.2	54.4	56.6	66.0	61.6
	LCL	71.3	72.6	73.3	38.6	38.2	39.9	49.1	48.0	48.8	47.6	61.1	57.3
	UCL	80.2	81.5	79.6	46.3	45.9	44.6	62.3	58.3	59.9	65.5	71.0	65.8
KWAZULU-NATAL	n	524	615	1,139	523	621	1,144	532	636	1,168	531	632	1,163
	%	64.1	68.5	66.6	46.2	46.8	46.5	51.5	57.9	55.1	54.3	55.8	55.2
	LCL	58.6	55.7	59.3	39.7	37.4	41.6	44.8	51.0	50.3	47.6	50.0	50.1
	UCL	69.6	81.4	73.8	52.7	56.2	51.4	58.1	64.8	59.9	61.0	61.7	60.2
LIMPOPO	n	467	512	979	465	512	977	468	521	989	465	517	982
	%	53.0	58.4	56.1	35.2	32.2	33.5	37.9	47.0	43.1	45.2	53.1	49.7
	LCL	47.0	44.7	46.4	29.8	26.5	28.6	32.6	38.7	36.8	40.5	43.7	43.3
	UCL	59.0	72.1	65.8	40.7	37.8	38.4	43.1	55.2	49.4	49.9	62.5	56.2
MPUMALANGA	n	586	642	1,228	590	640	1,230	594	650	1,244	590	642	1,232
	%	70.9	66.0	68.2	36.3	41.6	39.2	45.0	39.4	42.0	50.3	51.2	50.8
	LCL	63.8	58.2	61.3	32.4	35.8	34.7	38.8	33.8	36.9	44.9	44.4	45.1
	UCL	78.1	73.8	75.2	40.1	47.4	43.6	51.2	45.0	47.0	55.8	58.1	56.5
NORTHERN CAPE	n	470	564	1,034	473	564	1,037	480	573	1,053	479	567	1,046
	%	77.3	56.7	64.5	36.4	30.7	32.8	46.1	61.4	55.6	56.8	43.5	48.6
	LCL	70.9	22.6	39.9	30.4	17.6	24.7	40.3	36.1	37.2	52.6	19.2	33.3
	UCL	83.7	90.9	89.1	42.4	43.7	40.9	52.0	86.7	74.1	60.9	67.8	63.8
NORTH WEST	n	608	562	1,170	611	564	1,175	615	571	1,186	614	563	1,177
	%	62.5	70.4	66.6	35.5	37.3	36.5	48.7	53.3	51.1	45.2	54.4	50.0
	LCL	51.9	62.8	58.1	29.4	27.6	29.1	40.6	41.3	41.2	38.0	47.4	43.6
	UCL	73.1	77.9	75.2	41.6	47.0	43.8	56.9	65.4	61.1	52.5	61.3	56.4
WESTERN CAPE	n	619	763	1,382	621	771	1,392	630	779	1,409	629	780	1,409
	%	70.2	70.6	70.4	41.5	41.5	41.5	38.0	35.6	36.6	55.5	57.1	56.4
	LCL	64.9	62.0	63.7	36.0	34.5	36.0	33.1	29.9	32.2	51.4	53.2	53.5
	UCL	75.4	79.2	77.1	47.0	48.6	47.1	42.9	41.3	41.0	59.5	60.9	59.4

Table 24: continued

		FRESH FRUIT[3]			VEGETABLES[4]			MILK[5]			MAIZE[6]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,752	3,015	5,767	2,885	3,262	6,147	2,314	2,437	4,751	3,306	3,595	6,901
	%	57.0	58.4	57.8	57.6	58.7	58.2	45.9	44.1	44.9	65.5	64.0	64.7
	LCL[1]	54.1	54.8	55.5	55.0	54.7	55.6	43.4	40.8	42.7	62.8	60.5	61.8
	UCL[2]	59.9	62.0	60.1	60.1	62.6	60.7	48.3	47.5	47.1	68.2	67.5	67.5
RACE: BLACK	n	3,510	3,964	7,474	3,607	4,068	7,675	3,574	4,032	7,606	3,585	4,059	7,644
	%	57.9	60.6	59.4	56.1	58.4	57.4	41.0	42.2	41.7	67.8	66.5	67.1
	LCL	54.6	56.8	56.9	53.1	54.1	54.6	38.4	37.8	39.2	64.4	61.9	63.3
	UCL	61.2	64.4	61.9	59.2	62.7	60.2	43.7	46.6	44.1	71.1	71.2	70.8
COLOURED	n	674	850	1,524	696	861	1,557	687	860	1,547	695	861	1,556
	%	49.3	44.2	46.5	55.7	50.6	53.0	52.9	41.3	46.7	54.7	56.1	55.4
	LCL	43.8	35.6	40.8	50.3	41.5	47.4	46.8	33.0	40.5	49.7	47.4	50.0
	UCL	54.8	52.8	52.3	61.2	59.7	58.6	59.1	49.5	52.8	59.7	64.9	60.9
WHITE	n	410	485	895	411	488	899	411	489	900	408	486	894
	%	54.3	48.4	51.1	69.6	65.3	67.2	77.1	64.6	70.2	58.4	45.6	51.3
	LCL	46.4	41.8	45.5	64.4	60.6	62.9	72.6	58.6	65.2	49.2	37.8	44.0
	UCL	62.2	55.0	56.6	74.8	70.0	71.6	81.5	70.5	75.1	67.7	53.5	58.7
INDIAN	n	65	67	132	67	68	135	67	67	134	68	67	135
	%	54.0	53.4	53.7	60.0	63.7	61.9	67.9	80.1	74.0	44.7	36.1	40.3
	LCL	43.0	39.2	45.3	46.1	51.7	54.4	56.9	68.3	65.5	27.8	16.0	24.5
	UCL	65.1	67.7	62.1	73.9	75.7	69.4	79.0	91.8	82.5	61.7	56.1	56.2
OTHER	n	48	47	95	51	48	99	49	48	97	50	48	98
	%	77.9	60.1	69.9	70.0	58.4	65.0	51.2	38.5	45.7	71.1	69.2	70.3
	LCL	62.0	47.0	58.9	57.8	45.1	54.8	34.7	21.3	34.7	52.6	56.2	57.4
	UCL	93.9	73.1	81.0	82.2	71.7	75.3	67.8	55.6	56.7	89.6	82.1	83.1
GRADE 08	n	1,317	1,447	2,764	1,357	1,472	2,829	1,346	1,468	2,814	1,352	1,466	2,818
	%	59.9	60.8	60.4	61.0	59.0	60.0	52.4	47.4	49.8	64.1	64.5	64.3
	LCL	55.2	56.8	56.5	56.7	53.5	55.8	49.3	43.2	46.5	59.6	60.1	60.6
	UCL	64.6	64.9	64.3	65.2	64.6	64.1	55.6	51.6	53.1	68.6	68.9	67.9
GRADE 09	n	1,647	1,816	3,463	1,695	1,867	3,562	1,669	1,845	3,514	1,681	1,864	3,545
	%	59.3	55.5	57.3	59.1	60.7	59.9	45.3	42.8	44.0	63.8	65.1	64.5
	LCL	55.3	50.7	53.6	55.2	56.4	56.4	41.8	39.4	41.4	59.1	60.3	60.4
	UCL	63.3	60.3	61.0	63.1	65.0	63.5	48.7	46.1	46.5	68.6	69.8	68.6
GRADE 10	n	1,101	1,209	2,310	1,125	1,237	2,362	1,117	1,228	2,345	1,119	1,229	2,348
	%	55.0	60.5	58.5	54.4	58.2	56.8	42.3	45.1	44.1	67.9	61.7	64.0
	LCL	48.8	50.4	52.3	49.0	47.7	50.6	36.4	36.0	38.2	61.3	54.1	57.3
	UCL	61.3	70.7	64.7	59.8	68.6	63.0	48.3	54.2	50.0	74.5	69.3	70.7
GRADE 11	n	686	982	1,668	704	1,002	1,706	704	996	1,700	706	1,002	1,708
	%	50.0	54.1	52.2	52.1	55.6	54.1	38.6	38.3	38.4	68.1	66.1	67.0
	LCL	43.9	49.3	48.0	44.7	50.3	49.1	32.4	32.5	33.8	59.9	59.9	60.9
	UCL	56.0	59.0	56.5	59.6	61.0	59.0	44.7	44.0	43.1	76.3	72.4	73.2
AGE: 13 OR UNDER	n	285	513	798	287	524	811	287	520	807	288	523	811
	%	61.0	63.3	62.5	68.0	58.0	61.4	54.9	49.3	51.2	65.3	69.4	68.0
	LCL	53.2	57.7	58.0	60.8	51.4	56.2	47.4	42.5	45.7	59.5	61.2	62.1
	UCL	68.8	68.8	67.0	75.2	64.6	66.7	62.5	56.2	56.8	71.1	77.6	73.9
14	n	626	941	1,567	637	949	1,586	635	947	1,582	633	950	1,583
	%	59.3	61.6	60.7	59.9	62.4	61.4	46.5	51.1	49.3	59.3	59.7	59.6
	LCL	53.5	56.2	56.3	55.3	57.3	57.8	41.9	44.5	44.5	53.0	52.9	54.5
	UCL	65.0	67.0	65.1	64.5	67.5	65.0	51.1	57.6	54.0	65.6	66.5	64.7
15	n	795	980	1,775	814	995	1,809	806	990	1,796	811	993	1,804
	%	61.7	57.4	59.1	61.7	57.7	59.3	51.9	40.3	44.9	67.1	67.3	67.2
	LCL	56.5	53.0	55.5	57.2	53.4	56.0	47.5	35.1	41.3	62.2	62.7	63.6
	UCL	66.8	61.8	62.8	66.1	62.0	62.5	56.4	45.5	48.6	72.0	72.0	70.9
16	n	901	1,004	1,905	925	1,021	1,946	915	1,015	1,930	922	1,021	1,943
	%	58.8	57.0	57.8	59.1	56.6	57.8	46.2	39.2	42.4	67.7	62.5	64.8
	LCL	54.9	52.1	55.0	55.0	51.3	54.0	40.9	33.7	38.0	63.3	57.5	61.6
	UCL	62.8	61.9	60.7	63.3	62.0	61.6	51.5	44.8	46.8	72.0	67.5	68.1
17	n	782	777	1,559	800	802	1,602	793	797	1,590	796	799	1,595
	%	53.9	55.0	54.5	54.0	57.8	56.1	44.9	42.9	43.8	68.1	66.2	67.1
	LCL	50.1	42.2	46.9	49.8	46.5	49.5	40.8	31.0	37.1	63.9	60.3	63.5
	UCL	57.7	67.8	62.1	58.1	69.2	62.6	49.1	54.8	50.6	72.3	72.1	70.6
18	n	468	408	876	480	423	903	476	414	890	477	420	897
	%	49.7	63.5	56.8	54.0	59.9	57.1	36.8	43.3	40.2	68.5	59.7	63.9
	LCL	41.3	56.6	51.4	48.5	51.9	51.7	30.5	31.7	33.0	63.7	47.8	56.6
	UCL	58.2	70.4	62.2	59.6	67.9	62.5	43.0	54.9	47.4	73.4	71.6	71.2
19 OR OVER	n	684	543	1,227	717	564	1,281	706	560	1,266	713	561	1,274
	%	53.5	51.4	52.5	52.4	56.2	54.1	40.1	38.7	39.4	64.6	68.9	66.5
	LCL	45.0	45.9	46.8	45.1	48.8	47.7	32.1	31.5	33.4	54.8	61.4	59.2
	UCL	61.9	56.9	58.3	59.7	63.6	60.5	48.1	45.8	45.5	74.3	76.5	73.9

		MEAT[3]			FAST FOOD[7]			CAKES AND/OR BISCUITS[3]			COOLDRINKS AND SWEETS[8]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	3,063	3,543	6,606	1,860	2,147	4,007	2,299	2,548	4,847	2,439	3,001	5,440
	%	62.3	63.9	63.2	38.9	38.8	38.8	45.9	48.5	47.4	49.5	54.0	52.0
	LCL[1]	59.7	59.2	60.0	36.6	35.8	36.9	43.3	45.6	45.0	47.0	51.4	50.0
	UCL[2]	64.9	68.6	66.4	41.2	41.9	40.8	48.5	51.5	49.7	52.0	56.6	54.0
RACE: BLACK	n	3,536	3,983	7,519	3,549	3,994	7,543	3,587	4,061	7,648	3,570	4,030	7,600
	%	59.1	62.0	60.7	39.2	40.7	40.0	47.9	51.3	49.8	48.0	53.5	51.1
	LCL	56.1	56.7	57.1	36.5	36.5	37.6	45.0	47.6	47.3	45.2	50.3	48.7
	UCL	62.1	67.2	64.3	41.9	44.9	42.5	50.8	55.0	52.3	50.8	56.6	53.5
COLOURED	n	684	846	1,530	685	858	1,543	696	866	1,562	696	857	1,553
	%	68.2	68.2	68.2	46.2	41.9	43.9	41.8	46.8	44.5	54.8	57.0	56.0
	LCL	64.0	56.5	61.5	40.8	33.7	38.2	36.5	36.8	38.1	49.7	47.3	50.2
	UCL	72.5	79.9	74.9	51.5	50.1	49.6	47.1	56.8	50.8	59.9	66.6	61.8
WHITE	n	407	487	894	408	484	892	408	487	895	409	487	896
	%	83.8	76.0	79.5	27.2	17.7	21.9	26.3	25.8	26.0	53.3	49.3	51.1
	LCL	77.8	71.2	75.0	20.9	12.4	17.6	20.7	20.5	21.8	44.0	44.0	44.8
	UCL	89.9	80.7	83.9	33.4	22.9	26.3	31.9	31.0	30.3	62.7	54.7	57.5
INDIAN	n	68	66	134	67	67	134	68	67	135	66	66	132
	%	64.1	56.9	60.5	44.5	53.7	49.2	55.5	44.7	50.0	61.8	64.5	63.2
	LCL	47.4	34.4	48.8	28.1	36.6	39.6	40.7	23.9	35.4	41.8	45.8	53.7
	UCL	80.9	79.4	72.1	61.0	70.7	58.8	70.3	65.5	64.7	81.8	83.2	72.7
OTHER	n	46	48	94	48	48	96	50	48	98	51	48	99
	%	78.4	63.9	72.0	38.2	42.0	39.9	43.0	50.1	46.1	53.9	65.9	59.0
	LCL	62.5	49.8	58.2	26.4	19.8	28.3	25.7	37.0	34.7	40.4	49.8	51.1
	UCL	94.4	78.0	85.8	50.1	64.3	51.6	60.3	63.1	57.4	67.4	81.9	67.0
GRADE 08	n	1,328	1,448	2,776	1,333	1,455	2,788	1,345	1,469	2,814	1,348	1,457	2,805
	%	63.1	63.4	63.3	45.7	41.9	43.7	50.8	52.0	51.4	53.2	57.7	55.5
	LCL	59.0	57.3	59.0	42.1	37.8	40.4	46.1	46.8	47.4	49.4	53.0	52.2
	UCL	67.3	69.5	67.6	49.3	46.0	47.0	55.4	57.1	55.4	56.9	62.4	58.9
GRADE 09	n	1,661	1,830	3,491	1,666	1,832	3,498	1,688	1,869	3,557	1,675	1,847	3,522
	%	60.6	62.8	61.8	39.6	37.4	38.5	45.3	48.5	47.0	48.8	53.3	51.2
	LCL	56.8	58.1	58.0	36.6	34.1	35.7	41.7	43.4	43.5	45.6	48.4	47.7
	UCL	64.4	67.6	65.5	42.7	40.8	41.2	49.0	53.7	50.5	52.0	58.2	54.6
GRADE 10	n	1,108	1,204	2,312	1,106	1,216	2,322	1,121	1,233	2,354	1,113	1,228	2,341
	%	60.1	65.0	63.2	29.7	38.7	35.4	40.5	47.1	44.7	44.9	52.2	49.6
	LCL	53.5	53.9	56.0	25.4	28.6	29.1	34.9	38.9	39.4	39.8	47.7	46.4
	UCL	66.7	76.2	70.5	34.0	48.8	41.7	46.1	55.4	50.0	50.0	56.7	52.8
GRADE 11	n	690	986	1,676	696	989	1,685	706	1,001	1,707	703	996	1,699
	%	67.1	64.2	65.5	36.6	35.7	36.1	44.6	45.1	44.9	49.6	52.0	50.9
	LCL	60.9	57.0	59.4	29.5	31.3	31.8	36.4	39.3	39.1	43.4	47.0	46.9
	UCL	73.2	71.5	71.6	43.7	40.1	40.5	52.8	50.9	50.7	55.9	56.9	54.9
AGE: 13 OR UNDER	n	286	515	801	286	515	801	285	525	810	287	520	807
	%	70.9	62.8	65.6	42.1	46.1	44.6	53.9	51.2	52.1	53.8	61.5	58.8
	LCL	64.3	55.1	59.7	33.8	39.5	38.8	45.3	44.6	46.8	47.1	55.8	54.1
	UCL	77.4	70.6	71.5	50.3	52.7	50.4	62.6	57.8	57.3	60.6	67.1	63.6
14	n	623	940	1,563	630	946	1,576	632	948	1,580	631	948	1,579
	%	65.2	70.5	68.4	40.6	41.0	40.8	45.3	51.7	49.2	49.1	56.9	53.9
	LCL	60.8	65.9	64.7	36.5	35.6	37.3	40.2	45.9	44.6	44.4	50.2	49.0
	UCL	69.5	75.0	72.1	44.6	46.4	44.3	50.3	57.6	53.8	53.9	63.6	58.7
15	n	796	979	1,775	803	983	1,786	810	994	1,804	813	988	1,801
	%	62.6	62.5	62.5	39.1	33.3	35.7	47.5	48.9	48.3	52.5	54.4	53.6
	LCL	57.4	57.8	58.8	35.5	29.3	32.8	42.6	43.8	44.5	48.1	49.9	50.5
	UCL	67.9	67.2	66.3	42.8	37.4	38.5	52.4	53.9	52.1	56.8	58.8	56.7
16	n	910	1,003	1,913	908	1,005	1,913	922	1,018	1,940	912	1,014	1,926
	%	61.2	62.7	62.0	42.2	35.9	38.8	41.6	38.4	39.9	49.4	53.7	51.8
	LCL	56.8	56.6	57.5	37.3	31.0	35.0	37.6	33.4	36.5	44.0	47.8	47.5
	UCL	65.5	68.7	66.5	47.2	40.8	42.5	45.7	43.3	43.2	54.7	59.7	56.1
17	n	790	781	1,571	787	781	1,568	800	804	1,604	800	793	1,593
	%	61.7	61.6	61.7	35.3	40.1	37.9	45.5	51.1	48.6	47.7	53.0	50.6
	LCL	58.0	49.9	54.6	31.4	27.6	30.2	41.1	41.4	42.2	43.3	42.7	44.3
	UCL	65.4	73.4	68.8	39.2	52.7	45.6	50.0	60.8	54.9	52.1	63.3	56.8
18	n	470	412	882	475	416	891	478	420	898	471	420	891
	%	58.4	66.2	62.4	31.7	44.6	38.4	40.5	52.2	46.6	47.0	44.0	45.5
	LCL	51.9	56.2	56.1	25.9	33.8	32.2	35.6	41.0	40.3	40.1	33.9	39.0
	UCL	65.0	76.1	68.8	37.5	55.3	44.7	45.4	63.4	53.0	54.0	54.2	51.9
19 OR OVER	n	697	549	1,246	705	553	1,258	712	564	1,276	705	550	1,255
	%	54.9	51.9	53.5	35.1	35.2	35.1	46.0	49.5	47.6	45.0	46.8	45.8
	LCL	46.4	43.8	47.2	28.1	29.0	30.2	37.9	42.7	41.2	37.3	40.9	40.5
	UCL	63.3	59.9	59.8	42.0	41.4	40.0	54.0	56.2	53.9	52.8	52.7	51.1

Table 25: Percentage of high school learners who participated in vigorous, moderate and insufficient or no physical activity by gender, race, grade, age and province

		PARTICIPATED IN SUFFICIENT VIGOROUS PHYSICAL ACTIVITY[3]			PARTICIPATED IN SUFFICIENT MODERATE PHYSICAL ACTIVITY[4]			PARTICIPATED IN INSUFFICIENT OR NO PHYSICAL ACTIVITY[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,776	5,495	10,271	4,797	5,511	10,308	4,764	5,414	10,100
	%	57.1	34.7	44.6	32.6	34.2	33.5	34.4	43.0	37.5
	LCL[1]	54.6	31.7	42.3	31.0	32.3	32.2	32.3	41.0	36.0
	UCL[2]	59.6	37.6	46.8	34.2	36.2	34.8	36.5	45.0	39.0
EASTERN CAPE	n	447	628	1,075	458	630	1,088	445	616	1,053
	%	54.0	37.6	44.5	25.0	30.6	28.3	40.6	45.9	41.5
	LCL	45.6	34.6	40.4	20.7	21.8	23.2	33.6	39.5	36.2
	UCL	62.5	40.6	48.6	29.4	39.4	33.3	47.6	52.4	46.8
FREE STATE	n	536	574	1,110	540	576	1,116	538	568	1,095
	%	64.4	41.4	52.0	37.4	36.4	36.9	27.8	38.4	31.9
	LCL	57.7	37.5	46.5	33.1	32.8	33.4	22.7	33.1	27.7
	UCL	71.1	45.2	57.5	41.7	40.1	40.4	32.9	43.7	36.2
GAUTENG	n	521	608	1,129	521	612	1,133	519	600	1,115
	%	66.9	36.1	50.6	34.2	38.9	36.7	28.1	37.9	31.2
	LCL	63.0	31.0	47.0	32.0	35.0	34.6	24.9	32.5	28.0
	UCL	70.8	41.2	54.2	36.3	42.7	38.7	31.3	43.3	34.4
KWAZULU-NATAL	n	531	629	1,160	532	624	1,156	532	612	1,136
	%	48.8	30.3	38.3	31.1	32.5	31.9	40.2	46.5	42.3
	LCL	43.5	20.9	32.4	27.5	27.2	28.8	36.8	42.3	39.8
	UCL	54.0	39.6	44.2	34.8	37.7	34.9	43.5	50.8	44.9
LIMPOPO	n	463	509	972	462	512	974	459	499	950
	%	59.5	33.4	44.5	36.2	39.1	37.9	30.7	40.7	35.5
	LCL	51.8	28.0	38.5	31.6	35.1	34.8	24.0	35.1	30.3
	UCL	67.2	38.9	50.6	40.9	43.2	40.9	37.4	46.2	40.7
MPUMALANGA	n	587	648	1,235	588	650	1,238	588	642	1,217
	%	57.0	39.2	47.3	33.9	37.5	35.9	34.6	35.6	32.6
	LCL	51.3	31.1	41.1	27.9	31.6	30.2	28.7	28.6	27.6
	UCL	62.7	47.3	53.5	39.9	43.5	41.6	40.5	42.5	37.6
NORTHERN CAPE	n	474	567	1,041	474	572	1,046	473	564	1,030
	%	59.7	27.8	39.9	35.6	24.3	28.5	31.2	58.3	46.2
	LCL	53.8	10.1	25.8	28.5	11.8	18.8	25.4	35.7	28.4
	UCL	65.6	45.4	54.0	42.6	36.8	38.2	37.1	80.9	64.1
NORTH WEST	n	602	563	1,165	607	563	1,170	601	554	1,147
	%	58.8	44.2	51.1	32.1	30.3	31.1	32.3	37.9	33.2
	LCL	49.2	35.7	44.5	26.6	26.0	27.0	23.2	31.3	28.8
	UCL	68.4	52.6	57.7	37.6	34.6	35.2	41.4	44.5	37.6
WESTERN CAPE	n	615	769	1,384	615	772	1,387	609	759	1,357
	%	56.5	28.5	40.0	32.7	31.6	32.1	35.2	49.1	41.7
	LCL	50.4	25.0	35.7	26.7	26.4	27.7	28.7	43.7	37.4
	UCL	62.5	31.9	44.2	38.7	36.8	36.4	41.6	54.6	45.9

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Activities for 20 or more minutes on 3 or more of the 7 days preceding the survey such as soccer, netball, rugby, basketball
4. Activities for 30 or more minutes on 5 or more of the 7 days preceding the survey such as fast walking, slow bicycling, skating, pushing a lawn mower, mopping, polishing or sweeping the floors
5. Did not participate in the 7 days preceding the survey in a combination of vigorous and moderate physical activity that would have been sufficient to gain any health benefit

		PARTICIPATED IN SUFFICIENT VIGOROUS PHYSICAL ACTIVITY[3]			PARTICIPATED IN SUFFICIENT MODERATE PHYSICAL ACTIVITY[4]			PARTICIPATED IN INSUFFICIENT OR NO PHYSICAL ACTIVITY[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,776	5,495	10,271	4,797	5,511	10,308	4,764	5,414	10,100
	%	57.1	34.7	44.6	32.6	34.2	33.5	34.4	43.0	37.5
	LCL[1]	54.6	31.7	42.3	31.0	32.3	32.2	32.3	41.0	36.0
	UCL[2]	59.6	37.6	46.8	34.2	36.2	34.8	36.5	45.0	39.0
RACE: BLACK	n	3,524	4,005	7,529	3,541	4,014	7,555	3,519	3,938	7,393
	%	57.0	34.5	44.3	33.0	35.0	34.1	34.4	42.4	37.5
	LCL	54.3	31.4	42.0	31.2	33.1	32.7	32.2	40.3	35.9
	UCL	59.7	37.6	46.6	34.8	36.9	35.5	36.6	44.6	39.1
COLOURED	n	684	854	1,538	686	855	1,541	681	844	1,516
	%	54.9	24.8	38.8	30.4	25.4	27.7	36.8	56.8	45.6
	LCL	50.2	19.8	34.3	26.1	19.0	23.3	32.3	48.3	39.7
	UCL	59.6	29.9	43.2	34.7	31.9	32.2	41.3	65.2	51.4
WHITE	n	404	484	888	408	486	894	404	482	883
	%	64.7	50.3	56.7	35.9	30.6	33.0	28.2	37.0	29.4
	LCL	57.2	41.4	50.1	30.2	25.3	29.2	21.5	29.8	24.3
	UCL	72.1	59.2	63.2	41.5	36.0	36.8	34.9	44.2	34.6
INDIAN	n	67	65	132	68	67	135	67	65	132
	%	56.7	47.1	51.9	31.6	31.1	31.4	40.8	36.0	33.0
	LCL	42.0	37.0	42.9	19.6	21.8	22.8	26.9	24.9	25.4
	UCL	71.3	57.1	60.8	43.7	40.4	39.9	54.7	47.0	40.7
OTHER	n	50	48	98	50	48	98	50	48	97
	%	39.9	18.2	30.4	12.2	37.6	23.1	54.8	59.4	54.8
	LCL	25.5	4.7	15.7	0.0	20.5	11.0	37.5	41.4	39.5
	UCL	54.3	31.7	45.2	24.5	54.6	35.3	72.0	77.3	70.1
GRADE 08	n	1,327	1,447	2,774	1,334	1,455	2,789	1,324	1,420	2,718
	%	54.6	39.9	46.9	29.9	29.9	29.9	38.0	41.8	38.7
	LCL	49.9	36.0	43.5	26.9	25.8	27.1	33.5	37.5	35.2
	UCL	59.4	43.8	50.3	32.9	34.0	32.7	42.5	46.1	42.2
GRADE 09	n	1,649	1,845	3,494	1,657	1,847	3,504	1,646	1,821	3,433
	%	59.7	38.2	48.3	32.3	33.7	33.0	32.9	43.4	36.0
	LCL	56.3	35.2	45.8	28.8	30.5	30.4	29.9	39.9	33.5
	UCL	63.1	41.2	50.9	35.8	36.8	35.6	35.9	46.9	38.6
GRADE 10	n	1,110	1,210	2,320	1,111	1,220	2,331	1,107	1,196	2,292
	%	60.7	30.8	41.8	34.6	37.9	36.7	30.4	43.1	37.3
	LCL	55.1	23.2	34.1	30.6	33.9	33.6	24.7	38.5	33.6
	UCL	66.4	38.5	49.5	38.6	42.0	39.9	36.1	47.6	41.1
GRADE 11	n	690	993	1,683	695	989	1,684	687	977	1,657
	%	52.5	27.2	38.6	36.1	35.5	35.8	35.7	44.4	38.1
	LCL	45.0	22.9	34.4	29.4	30.6	31.2	29.2	39.6	33.6
	UCL	60.1	31.6	42.8	42.8	40.4	40.3	42.1	49.3	42.7
AGE: 13 OR UNDER	n	285	517	802	284	515	799	286	515	787
	%	63.4	42.9	50.0	33.8	30.6	31.7	29.7	30.6	37.7
	LCL	57.0	36.5	45.4	26.2	25.7	27.8	23.2	25.7	32.5
	UCL	69.8	49.3	54.6	41.5	35.6	35.7	36.1	35.6	43.0
14	n	630	941	1,571	622	943	1,565	626	943	1,543
	%	58.0	39.0	46.4	30.9	32.6	31.9	34.6	32.6	36.3
	LCL	52.5	33.7	42.8	25.9	29.0	29.1	28.6	29.0	32.8
	UCL	63.4	44.2	50.1	35.9	36.2	34.8	40.6	36.2	39.8
15	n	792	982	1,774	803	985	1,788	795	985	1,752
	%	63.1	37.7	47.8	35.1	34.6	34.8	31.7	34.6	36.8
	LCL	57.8	32.6	44.2	31.2	29.1	31.3	26.8	29.1	33.6
	UCL	68.4	42.7	51.3	39.0	40.1	38.3	36.7	40.1	40.0
16	n	910	1,008	1,918	911	1,011	1,922	910	1,011	1,890
	%	56.4	34.3	44.4	33.6	36.8	35.3	34.2	36.8	36.9
	LCL	52.7	30.2	41.5	30.1	30.5	31.1	30.3	30.5	33.3
	UCL	60.2	38.4	47.3	37.2	43.1	39.5	38.1	43.1	40.5
17	n	779	792	1,571	790	794	1,584	775	794	1,547
	%	58.1	28.5	41.8	31.2	33.9	32.7	32.5	33.9	36.1
	LCL	53.9	21.0	36.3	26.9	27.6	28.5	28.2	27.6	29.7
	UCL	62.2	36.0	47.4	35.6	40.2	36.9	36.9	40.2	42.5
18	n	468	410	878	470	415	885	465	415	860
	%	55.4	31.5	43.1	28.1	32.1	30.2	39.6	32.1	41.6
	LCL	49.4	23.5	37.0	23.9	24.5	25.9	33.6	24.5	34.6
	UCL	61.3	39.5	49.1	32.3	39.7	34.5	45.6	39.7	48.5
19 OR OVER	n	697	555	1,252	698	557	1,255	691	557	1,227
	%	50.4	27.2	39.8	32.0	37.1	34.3	40.9	37.1	40.9
	LCL	44.7	22.7	36.8	26.3	31.4	30.6	35.1	31.4	37.0
	UCL	56.1	31.7	42.9	37.6	42.7	38.0	46.8	42.7	44.7

Table 26: Percentage of high school learners who had physical education classes on their timetable by gender, race, grade, age and province

		PHYSICAL EDUCATION CLASSES ON TIMETABLE[3]		
		MALE	FEMALE	TOTAL
NATIONAL	n	4,788	5,495	10,283
	%	57.9	51.4	54.3
	LCL[1]	54.8	46.0	50.5
	UCL[2]	60.9	56.9	58.0
EASTERN CAPE	n	463	627	1,090
	%	56.2	48.5	51.8
	LCL	49.9	38.1	43.5
	UCL	62.4	59.0	60.2
FREE STATE	n	537	572	1,109
	%	63.8	56.0	59.7
	LCL	58.0	50.1	54.1
	UCL	69.7	62.0	65.2
GAUTENG	n	516	615	1,131
	%	50.4	46.8	48.5
	LCL	41.3	35.5	39.2
	UCL	59.6	58.1	57.8
KWAZULU-NATAL	n	526	631	1,157
	%	60.9	58.8	59.7
	LCL	53.9	40.3	48.8
	UCL	67.9	77.2	70.6
LIMPOPO	n	461	514	975
	%	61.5	45.9	52.5
	LCL	52.4	33.7	41.6
	UCL	70.6	58.2	63.4
MPUMALANGA	n	589	641	1,230
	%	54.6	52.0	53.2
	LCL	47.9	43.4	45.9
	UCL	61.4	60.5	60.5
NORTHERN CAPE	n	470	564	1,034
	%	54.4	32.2	40.6
	LCL	46.0	18.2	30.5
	UCL	62.8	46.2	50.8
NORTH WEST	n	607	558	1,165
	%	57.8	55.7	56.7
	LCL	45.7	42.4	44.1
	UCL	69.8	69.1	69.3
WESTERN CAPE	n	619	773	1,392
	%	55.5	49.5	52.0
	LCL	47.6	40.6	43.6
	UCL	63.3	58.5	60.4
NATIONAL	n	4,788	5,495	10,283
	%	57.9	51.4	54.3
	LCL[1]	54.8	46.0	50.5
	UCL[2]	60.9	56.9	58.0
RACE: BLACK	n	3,533	4,012	7,545
	%	60.3	53.9	56.7
	LCL	57.4	48.2	52.9
	UCL	63.3	59.6	60.5
COLOURED	n	685	851	1,536
	%	57.1	46.9	51.7
	LCL	49.4	36.0	43.0
	UCL	64.8	57.9	60.3
WHITE	n	407	484	891
	%	39.9	35.8	37.6
	LCL	31.0	26.0	29.0
	UCL	48.9	45.6	46.3
INDIAN	n	67	63	130
	%	33.7	42.5	38.1
	LCL	7.4	14.1	11.7
	UCL	60.1	70.8	64.5
OTHER	n	48	46	94
	%	52.3	60.0	55.7
	LCL	24.2	38.1	40.8
	UCL	80.4	81.8	70.6
GRADE 08	n	1,331	1,451	2,782
	%	64.5	58.9	61.6
	LCL	59.9	53.9	57.6
	UCL	69.2	63.8	65.6
GRADE 09	n	1,647	1,831	3,478
	%	60.8	59.9	60.3
	LCL	57.4	55.2	56.9
	UCL	64.2	64.7	63.8
GRADE 10	n	1,112	1,214	2,326
	%	51.1	37.7	42.6
	LCL	44.1	26.7	34.7
	UCL	58.2	48.7	50.6
GRADE 11	n	698	999	1,697
	%	48.7	52.1	50.6
	LCL	41.7	45.1	44.3
	UCL	55.7	59.2	56.8
AGE: 13 OR UNDER	n	288	515	803
	%	66.9	60.0	62.4
	LCL	59.0	55.6	58.1
	UCL	74.7	64.5	66.7
14	n	623	938	1,561
	%	63.0	59.3	60.8
	LCL	57.0	52.3	55.5
	UCL	69.0	66.4	66.0
15	n	795	981	1,776
	%	57.6	49.0	52.4
	LCL	52.3	42.7	47.5
	UCL	62.9	55.4	57.3
16	n	909	1,009	1,918
	%	54.3	46.1	49.8
	LCL	48.3	39.2	44.1
	UCL	60.2	52.9	55.5
17	n	787	790	1,577
	%	55.5	44.9	49.8
	LCL	50.2	33.6	42.7
	UCL	60.9	56.2	56.9
18	n	468	414	882
	%	55.9	50.5	53.1
	LCL	49.9	38.5	45.6
	UCL	61.9	62.6	60.6
19 OR OVER	n	699	551	1,250
	%	59.2	52.9	56.3
	LCL	53.6	47.3	52.3
	UCL	64.9	58.5	60.3

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Physical education classes on one or more days in an average school week

Table 27: Percentage of high school learners engaged in various activities during physical education classes by gender, race, grade, age and province

		NO PHYSICAL EDUCATION CLASSES[3]			ENGAGED IN VIGOROUS ACTIVITY[4,5]			ENGAGED IN LIFESKILLS EDUCATION/CLASS DISCUSSION[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,820	5,493	10,313	4,820	5,493	10,313	4,820	5,493	10,313
	%	26.5	30.9	29.0	60.8	46.5	52.8	4.2	10.7	7.8
	LCL[1]	24.1	27.2	26.0	57.6	41.4	48.8	3.3	9.3	6.8
	UCL[2]	28.9	34.6	31.9	63.9	51.5	56.7	5.1	12.1	8.8
EASTERN CAPE	n	466	622	1,088	466	622	1,088	466	622	1,088
	%	26.2	29.9	28.3	69.4	54.1	60.7	1.3	7.6	4.9
	LCL	19.0	19.5	19.5	60.8	41.4	50.0	0.2	3.7	2.5
	UCL	33.4	40.2	37.1	78.0	66.8	71.3	2.4	11.6	7.3
FREE STATE	n	538	573	1,111	538	573	1,111	538	573	1,111
	%	20.1	28.4	24.5	66.9	45.4	55.4	4.2	12.2	8.5
	LCL	16.4	23.6	20.3	61.6	38.8	49.2	2.7	8.1	6.4
	UCL	23.9	33.3	28.8	72.2	51.9	61.6	5.7	16.3	10.5
GAUTENG	n	526	611	1,137	526	611	1,137	526	611	1,137
	%	31.2	38.3	34.9	57.1	32.8	44.3	4.5	14.4	9.7
	LCL	23.5	27.3	26.2	47.6	25.9	36.4	1.6	9.6	6.4
	UCL	39.0	49.2	43.6	66.5	39.8	52.2	7.4	19.3	13.1
KWAZULU-NATAL	n	529	627	1,156	529	627	1,156	529	627	1,156
	%	25.3	26.5	26.0	59.4	50.3	54.3	3.1	8.4	6.1
	LCL	21.4	22.8	22.8	51.8	35.4	43.3	0.7	4.4	3.4
	UCL	29.3	30.2	29.2	67.0	65.2	65.3	5.5	12.4	8.8
LIMPOPO	n	469	516	985	469	516	985	469	516	985
	%	22.2	30.6	27.1	63.9	51.0	56.5	3.6	10.0	7.3
	LCL	17.2	15.5	16.2	58.5	34.6	44.7	1.8	6.5	4.8
	UCL	27.3	45.8	38.0	69.3	67.4	68.2	5.4	13.4	9.7
MPUMALANGA	n	590	643	1,233	590	643	1,233	590	643	1,233
	%	30.4	31.2	30.9	59.0	46.3	52.1	2.6	9.2	6.2
	LCL	21.5	21.6	22.0	47.2	33.9	40.3	0.9	4.4	3.0
	UCL	39.4	40.9	39.8	70.8	58.7	63.9	4.3	14.0	9.4
NORTHERN CAPE	n	474	568	1,042	474	568	1,042	474	568	1,042
	%	28.9	30.2	29.7	49.0	50.6	50.0	15.2	11.8	13.1
	LCL	23.0	6.0	14.1	42.0	16.5	27.4	9.4	5.6	7.6
	UCL	34.8	54.4	45.3	56.0	84.7	72.6	21.0	18.0	18.6
NORTH WEST	n	612	564	1,176	612	564	1,176	612	564	1,176
	%	26.7	30.9	28.9	61.2	45.5	53.0	4.9	10.6	7.9
	LCL	12.4	15.4	14.1	47.2	32.8	39.6	3.2	7.5	5.7
	UCL	41.1	46.3	43.7	75.1	58.2	66.4	6.6	13.8	10.1
WESTERN CAPE	n	616	769	1,385	616	769	1,385	616	769	1,385
	%	31.4	36.5	34.4	51.4	37.0	42.9	9.6	16.6	13.7
	LCL	24.4	28.0	26.8	45.1	25.3	35.3	5.8	10.4	9.1
	UCL	38.3	45.1	42.0	57.7	48.7	50.5	13.4	22.7	18.3

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Never have physical education classes or play sport at school
4. Such as soccer, running, rugby, netball, basketball, or cricket
5. During an average physical education class

		NO PHYSICAL EDUCATION CLASSES[3]			ENGAGED IN VIGOROUS ACTIVITY[4,5]			ENGAGED IN LIFESKILLS EDUCATION/CLASS DISCUSSION[5]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,820	5,493	10,313	4,820	5,493	10,313	4,820	5,493	10,313
	%	26.5	30.9	29.0	60.8	46.5	52.8	4.2	10.7	7.8
	LCL[1]	24.1	27.2	26.0	57.6	41.4	48.8	3.3	9.3	6.8
	UCL[2]	28.9	34.6	31.9	63.9	51.5	56.7	5.1	12.1	8.8
RACE: BLACK	n	3,565	4,005	7,570	3,565	4,005	7,570	3,565	4,005	7,570
	%	23.0	28.3	26.0	65.1	50.5	56.9	3.3	9.4	6.7
	LCL	21.2	24.4	23.3	62.4	45.2	53.0	2.4	8.1	5.9
	UCL	24.8	32.2	28.6	67.8	55.8	60.7	4.1	10.8	7.6
COLOURED	n	687	851	1,538	687	851	1,538	687	851	1,538
	%	31.5	33.6	32.6	49.4	36.7	42.6	11.8	16.6	14.4
	LCL	25.7	24.6	26.0	43.3	25.2	36.0	7.7	10.3	9.6
	UCL	37.3	42.5	39.1	55.5	48.1	49.2	15.9	23.0	19.1
WHITE	n	404	485	889	404	485	889	404	485	889
	%	53.1	57.4	55.5	31.7	18.5	24.4	4.9	11.3	8.5
	LCL	44.9	47.3	46.9	22.7	10.0	16.3	1.3	6.1	4.5
	UCL	61.4	67.4	64.0	40.7	27.0	32.5	8.5	16.6	12.4
INDIAN	n	68	66	134	68	66	134	68	66	134
	%	43.7	44.2	44.0	49.3	41.4	45.3	4.0	5.0	4.5
	LCL	12.7	19.2	17.1	22.3	21.2	23.5	-0.8	0.1	0.5
	UCL	74.7	69.3	70.8	76.3	61.7	67.2	8.7	9.9	8.5
OTHER	n	50	46	96	50	46	96	50	46	96
	%	22.4	22.9	22.6	62.4	53.8	58.8	0.0	3.6	1.5
	LCL	5.9	10.2	12.1	34.4	37.5	45.1	–	-1.1	-0.3
	UCL	38.8	35.6	33.1	90.3	70.1	72.6	–	8.3	3.3
GRADE 08	n	1,344	1,456	2,800	1,344	1,456	2,800	1,344	1,456	2,800
	%	22.5	22.5	22.5	64.9	56.1	60.3	4.3	10.5	7.6
	LCL	18.4	18.5	19.2	60.6	51.1	56.4	2.8	8.0	5.7
	UCL	26.6	26.6	25.8	69.3	61.1	64.3	5.8	13.1	9.4
GRADE 09	n	1,665	1,832	3,497	1,665	1,832	3,497	1,665	1,832	3,497
	%	21.8	24.7	23.3	67.9	53.8	60.5	4.5	11.0	7.9
	LCL	18.7	20.8	20.2	63.8	48.9	56.5	3.1	9.1	6.6
	UCL	24.9	28.5	26.4	72.1	58.8	64.6	6.0	12.8	9.2
GRADE 10	n	1,112	1,216	2,328	1,112	1,216	2,328	1,112	1,216	2,328
	%	32.4	41.7	38.3	54.4	36.2	42.8	2.8	9.3	6.9
	LCL	26.6	34.9	32.3	48.0	24.6	33.2	1.6	5.9	4.5
	UCL	38.3	48.6	44.3	60.7	47.8	52.5	3.9	12.7	9.3
GRADE 11	n	699	989	1,688	699	989	1,688	699	989	1,688
	%	34.5	34.3	34.4	48.6	37.8	42.8	5.4	13.4	9.8
	LCL	29.4	27.4	28.8	42.4	31.9	37.7	3.0	10.0	7.4
	UCL	39.6	41.1	39.9	54.9	43.7	47.8	7.7	16.8	12.1
AGE: 13 OR UNDER	n	285	517	802	285	517	802	285	517	802
	%	27.2	17.3	20.7	56.6	59.0	58.2	5.9	11.0	9.2
	LCL	18.4	13.7	17.2	46.6	53.2	52.7	1.8	7.0	5.7
	UCL	36.1	20.9	24.2	66.5	64.9	63.6	9.9	15.0	12.8
14	n	629	939	1,568	629	939	1,568	629	939	1,568
	%	22.2	28.6	26.1	62.9	47.3	53.4	5.6	11.8	9.4
	LCL	17.4	20.9	20.6	58.2	40.5	48.5	3.6	8.8	7.4
	UCL	26.9	36.3	31.6	67.5	54.1	58.3	7.7	14.8	11.3
15	n	803	988	1,791	803	988	1,791	803	988	1,791
	%	25.4	35.1	31.2	62.9	44.3	51.7	4.9	10.2	8.1
	LCL	20.7	27.9	25.4	57.7	37.5	46.3	2.8	8.1	6.6
	UCL	30.1	42.4	37.1	68.0	51.1	57.2	6.9	12.3	9.5
16	n	912	1,007	1,919	912	1,007	1,919	912	1,007	1,919
	%	28.3	34.7	31.7	62.5	40.8	50.7	2.4	12.9	8.1
	LCL	23.2	28.6	26.8	57.4	33.7	45.1	1.4	5.5	3.9
	UCL	33.3	40.7	36.6	67.7	47.8	56.3	3.3	20.3	12.3
17	n	791	782	1,573	791	782	1,573	791	782	1,573
	%	30.3	31.8	31.1	59.0	44.3	51.0	4.3	8.3	6.5
	LCL	26.3	21.8	24.9	54.6	33.1	44.4	2.4	5.8	4.9
	UCL	34.3	41.7	37.3	63.4	55.5	57.6	6.2	10.7	8.0
18	n	474	416	890	474	416	890	474	416	890
	%	25.8	34.2	30.2	61.8	48.2	54.6	4.5	9.3	7.0
	LCL	19.6	22.5	22.9	56.0	37.8	48.3	0.7	5.5	4.0
	UCL	32.0	45.9	37.5	67.5	58.5	61.0	8.4	13.1	10.1
19 OR OVER	n	705	551	1,256	705	551	1,256	705	551	1,256
	%	25.1	29.4	27.0	60.1	50.7	55.9	3.9	11.8	7.4
	LCL	19.9	23.8	23.2	52.8	46.3	51.8	2.3	8.2	5.6
	UCL	30.2	34.9	30.8	67.3	55.2	59.9	5.5	15.3	9.2

Table 28: Percentage of high school learners who did not take part in physical activity in the past week (reasons given) by gender, race, grade, age and province

		DID NOT WANT TO TAKE PART IN PHYSICAL ACTIVITY[3]			WAS ILL[3]			FELT UNSAFE[3, 4]			NO ACCESS TO EQUIPMENT[3, 5]			DON'T KNOW THE REASON FOR INACTIVITY[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528
	%	23.9	27.1	25.9	21.2	17.8	19.1	8.8	6.0	7.0	15.4	15.8	15.7	30.8	33.3	32.3
	LCL[1]	21.6	24.6	24.4	19.0	15.4	17.1	7.5	4.6	6.0	12.6	12.8	12.9	27.6	30.3	30.0
	UCL[2]	26.2	29.6	27.3	23.3	20.2	21.0	10.0	7.3	8.1	18.2	18.9	18.4	34.0	36.3	34.7
EASTERN CAPE	n	234	432	666	234	432	666	234	432	666	234	432	666	234	432	666
	%	27.5	27.7	27.6	20.6	17.2	18.5	12.3	7.2	9.1	12.6	18.0	16.0	26.9	29.9	28.8
	LCL	23.4	23.3	24.4	15.4	11.9	13.8	8.2	1.4	4.8	7.0	6.4	7.3	20.5	18.9	20.6
	UCL	31.6	32.1	30.8	25.9	22.5	23.1	16.5	13.0	13.3	18.3	29.7	24.8	33.3	40.9	37.0
FREE STATE	n	305	393	698	305	393	698	305	393	698	305	393	698	305	393	698
	%	24.0	31.9	28.6	18.0	16.7	17.3	7.3	7.9	7.6	21.6	10.5	15.2	29.1	33.0	31.4
	LCL	17.7	24.4	23.8	13.3	13.4	14.2	4.4	2.0	4.0	17.5	7.5	12.0	20.8	26.0	25.9
	UCL	30.3	39.4	33.3	22.7	20.1	20.4	10.3	13.8	11.3	25.6	13.5	18.4	37.4	40.0	36.9
GAUTENG	n	280	436	716	280	436	716	280	436	716	280	436	716	280	436	716
	%	25.2	25.1	25.1	18.5	18.1	18.2	8.0	6.7	7.2	20.0	15.2	17.0	28.3	35.1	32.4
	LCL	21.8	20.0	21.9	14.3	12.6	13.7	5.3	4.3	5.5	14.3	13.3	14.2	23.3	32.1	29.5
	UCL	28.7	30.1	28.3	22.8	23.5	22.8	10.7	9.0	8.9	25.6	17.1	19.9	33.3	38.0	35.3
KWAZULU-NATAL	n	327	495	822	327	495	822	327	495	822	327	495	822	327	495	822
	%	21.0	26.2	24.2	23.9	15.9	18.9	8.5	4.9	6.3	15.7	20.4	18.6	31.0	32.7	32.0
	LCL	14.1	19.2	21.1	18.3	9.1	13.2	5.1	1.9	3.4	6.6	12.6	10.3	21.7	25.1	25.9
	UCL	27.9	33.1	27.3	29.5	22.6	24.6	11.9	7.9	9.1	24.7	28.2	26.9	40.3	40.3	38.2
LIMPOPO	n	261	364	625	261	364	625	261	364	625	261	364	625	261	364	625
	%	19.2	24.0	22.2	22.0	20.4	21.0	10.8	7.8	9.0	13.7	15.1	14.6	34.2	32.7	33.3
	LCL	15.1	18.7	17.8	16.3	16.1	18.0	7.4	4.9	7.2	9.3	11.4	11.9	26.0	26.7	28.8
	UCL	23.2	29.3	26.6	27.8	24.7	24.0	14.3	10.7	10.7	18.1	18.8	17.2	42.4	38.7	37.7
MPUMA-LANGA	n	353	448	801	353	448	801	353	448	801	353	448	801	353	448	801
	%	26.2	28.5	27.6	15.9	15.9	15.9	7.8	5.9	6.7	14.0	15.9	15.1	36.1	33.8	34.7
	LCL	23.9	19.7	21.9	9.1	11.2	10.9	4.8	2.6	5.0	7.7	11.4	10.7	29.7	28.6	30.6
	UCL	28.5	37.3	33.2	22.6	20.7	20.9	10.9	9.2	8.3	20.4	20.3	19.6	42.5	39.0	38.8
NORTHERN CAPE	n	241	382	623	241	382	623	241	382	623	241	382	623	241	382	623
	%	32.9	32.1	32.4	20.6	22.9	22.1	9.3	3.3	5.6	11.5	6.9	8.6	25.6	34.7	31.3
	LCL	25.7	27.7	27.9	13.7	19.6	18.9	3.6	1.7	4.0	6.6	4.1	5.8	19.4	27.9	26.2
	UCL	40.1	36.6	37.0	27.5	26.3	25.2	15.1	5.0	7.2	16.4	9.7	11.4	31.9	41.6	36.4
NORTH WEST	n	342	351	693	342	351	693	342	351	693	342	351	693	342	351	693
	%	23.7	25.4	24.6	22.9	24.5	23.8	5.8	5.8	5.8	15.9	10.0	12.7	31.7	34.3	33.1
	LCL	17.4	17.6	19.1	15.0	19.8	19.4	2.3	3.5	3.2	11.3	5.4	9.6	25.1	27.7	28.2
	UCL	30.1	33.2	30.2	30.9	29.3	28.2	9.2	8.0	8.3	20.5	14.5	15.7	38.3	41.0	38.0
WESTERN CAPE	n	335	549	884	335	549	884	335	549	884	335	549	884	335	549	884
	%	30.5	32.3	31.7	21.2	16.2	18.0	7.6	3.1	4.7	10.1	11.2	10.8	30.7	37.2	34.9
	LCL	25.8	26.0	27.0	14.9	14.1	15.1	5.1	2.0	3.3	6.7	9.8	9.2	21.2	30.9	28.1
	UCL	35.2	38.7	36.4	27.5	18.2	20.9	10.0	4.2	6.1	13.4	12.7	12.4	40.2	43.5	41.6

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Of those who did not take part in physical activity in the past week
4. Felt unsafe, frightened and/or scared to go out to the ground or gym to take part in physical activity
5. Did not have the equipment / ground / gym to take part in physical activity

		DID NOT WANT TO TAKE PART IN PHYSICAL ACTIVITY[3]			WAS ILL[3]			FELT UNSAFE[3, 4]			NO ACCESS TO EQUIPMENT[3, 5]			DON'T KNOW THE REASON FOR INACTIVITY[3]		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528	2,678	3,850	6,528
	%	23.9	27.1	25.9	21.2	17.8	19.1	8.8	6.0	7.0	15.4	15.8	15.7	30.8	33.3	32.3
	LCL[1]	21.6	24.6	24.4	19.0	15.4	17.1	7.5	4.6	6.0	12.6	12.8	12.9	27.6	30.3	30.0
	UCL[2]	26.2	29.6	27.3	23.3	20.2	21.0	10.0	7.3	8.1	18.2	18.9	18.4	34.0	36.3	34.7
RACE: BLACK	n	2,055	2,851	4,906	2,055	2,851	4,906	2,055	2,851	4,906	2,055	2,851	4,906	2,055	2,851	4,906
	%	23.1	26.3	25.1	21.1	17.5	18.9	8.9	6.6	7.4	17.0	17.0	17.0	29.9	32.7	31.6
	LCL	20.4	23.0	23.4	18.8	14.9	16.8	7.4	5.0	6.3	13.7	14.6	14.7	26.4	29.5	29.2
	UCL	25.8	29.7	26.8	23.4	20.1	20.9	10.4	8.1	8.6	20.3	19.4	19.3	33.4	35.8	34.1
COLOURED	n	375	602	977	375	602	977	375	602	977	375	602	977	375	602	977
	%	28.6	40.4	35.3	21.4	16.2	18.5	10.8	4.6	7.3	9.9	5.8	7.5	29.3	33.1	31.4
	LCL	25.0	35.6	31.8	15.0	12.3	14.5	6.6	3.3	5.3	7.1	3.7	5.8	23.2	27.9	27.1
	UCL	32.3	45.2	38.8	27.8	20.1	22.4	15.1	5.8	9.2	12.7	7.9	9.2	35.3	38.2	35.8
WHITE	n	164	294	458	164	294	458	164	294	458	164	294	458	164	294	458
	%	25.3	27.7	26.8	21.4	24.6	23.4	1.9	1.4	1.6	8.2	4.1	5.6	43.2	42.2	42.6
	LCL	16.2	21.3	21.0	9.6	19.6	17.4	-0.2	0.3	0.6	2.1	1.2	2.7	29.8	36.2	36.5
	UCL	34.4	34.1	32.6	33.2	29.7	29.5	4.0	2.5	2.6	14.2	7.0	8.6	56.5	48.2	48.7
INDIAN	n	29	39	68	29	39	68	29	39	68	29	39	68	29	39	68
	%	33.7	44.6	39.2	20.4	3.3	11.7	11.3	4.3	7.7	9.0	3.3	6.1	25.5	44.6	35.2
	LCL	15.9	30.2	27.3	-3.0	0.2	-0.8	2.0	-1.9	2.4	-5.8	-1.9	-1.7	9.8	30.9	22.7
	UCL	51.5	59.0	51.2	43.8	6.3	24.2	20.7	10.4	13.1	23.8	8.6	13.9	41.2	58.2	47.7
OTHER	n	24	33	57	24	33	57	24	33	57	24	33	57	24	33	57
	%	18.8	9.3	13.9	33.0	43.4	38.3	7.7	6.0	6.8	1.9	6.6	4.4	38.6	34.7	36.6
	LCL	1.9	-2.6	1.3	16.8	19.3	24.3	-4.3	-4.3	-1.1	-1.9	-3.2	-1.4	14.0	22.1	24.5
	UCL	35.7	21.2	26.5	49.1	67.5	52.3	19.6	16.4	14.8	5.8	16.5	10.1	63.3	47.2	48.7
GRADE 08	n	740	965	1,705	740	965	1,705	740	965	1,705	740	965	1,705	740	965	1,705
	%	26.8	24.3	25.4	23.4	20.9	22.0	6.0	6.8	6.4	8.9	11.2	10.2	34.9	36.8	36.0
	LCL	23.1	20.0	22.5	19.9	16.9	19.3	4.2	4.7	4.7	6.7	8.0	8.0	30.1	32.5	32.5
	UCL	30.5	28.5	28.2	26.9	24.9	24.7	7.7	8.9	8.1	11.0	14.4	12.4	39.8	41.2	39.5
GRADE 09	n	927	1,237	2,164	927	1,237	2,164	927	1,237	2,164	927	1,237	2,164	927	1,237	2,164
	%	24.9	27.0	26.1	22.2	17.0	19.2	11.8	6.8	8.9	14.0	14.5	14.3	27.2	34.7	31.5
	LCL	21.4	23.4	23.8	17.2	12.7	15.5	9.1	4.8	7.1	10.9	11.8	12.3	22.6	29.7	27.9
	UCL	28.3	30.7	28.5	27.2	21.2	22.8	14.5	8.8	10.7	17.0	17.3	16.3	31.8	39.7	35.2
GRADE 10	n	612	875	1,487	612	875	1,487	612	875	1,487	612	875	1,487	612	875	1,487
	%	18.6	28.2	25.3	17.6	14.1	15.2	9.9	5.6	6.9	23.0	19.8	20.8	30.8	32.3	31.8
	LCL	13.8	23.8	22.1	13.1	9.6	11.2	6.7	3.0	4.4	12.9	12.5	13.1	24.6	26.9	26.8
	UCL	23.3	32.6	28.4	22.2	18.6	19.2	13.2	8.2	9.4	33.2	27.1	28.5	37.1	37.7	36.9
GRADE 11	n	399	773	1,172	399	773	1,172	399	773	1,172	399	773	1,172	399	773	1,172
	%	23.6	29.8	27.4	19.8	21.1	20.6	7.5	4.0	5.4	20.1	17.7	18.7	29.0	27.4	28.0
	LCL	17.5	24.2	23.0	13.1	15.3	16.1	3.6	2.2	3.8	13.8	13.9	15.3	18.1	23.0	22.5
	UCL	29.8	35.5	31.7	26.5	26.9	25.0	11.4	5.8	7.1	26.4	21.5	22.0	39.9	31.7	33.5
AGE: 13 OR UNDER	n	148	341	489	148	341	489	148	341	489	148	341	489	148	341	489
	%	25.5	27.8	27.2	26.7	17.8	20.3	4.2	6.8	6.1	6.5	9.8	8.8	37.1	37.8	37.6
	LCL	18.2	18.8	20.5	17.5	11.0	15.3	1.8	3.8	3.9	2.5	6.0	5.6	27.9	29.2	31.5
	UCL	32.9	36.9	33.8	35.8	24.5	25.3	6.6	9.9	8.3	10.6	13.5	12.0	46.2	46.4	43.7
14	n	321	630	951	321	630	951	321	630	951	321	630	951	321	630	951
	%	22.2	30.4	27.7	26.0	13.6	17.7	4.5	6.6	5.9	8.6	10.2	9.7	38.7	39.2	39.0
	LCL	17.2	20.6	21.3	19.3	8.6	14.0	2.0	3.2	3.4	4.3	6.3	6.9	32.3	33.3	34.7
	UCL	27.3	40.2	34.1	32.7	18.6	21.4	7.0	10.1	8.5	12.9	14.1	12.4	45.2	45.1	43.4
15	n	426	657	1,083	426	657	1,083	426	657	1,083	426	657	1,083	426	657	1,083
	%	21.7	24.2	23.3	21.5	18.2	19.3	8.3	6.0	6.8	15.1	19.3	17.9	33.4	32.4	32.7
	LCL	17.7	20.4	20.2	16.4	12.0	14.2	4.2	3.6	4.2	9.3	13.8	12.6	28.6	26.9	28.2
	UCL	25.7	28.0	26.4	26.7	24.3	24.3	12.4	8.5	9.3	20.8	24.8	23.1	38.3	37.9	37.3
16	n	506	723	1,229	506	723	1,229	506	723	1,229	506	723	1,229	506	723	1,229
	%	25.7	25.2	25.4	21.7	17.5	19.2	8.7	5.8	7.0	12.2	18.9	16.2	31.7	32.5	32.2
	LCL	21.7	19.1	21.0	15.3	13.8	15.8	4.9	3.5	5.3	8.6	9.7	10.0	25.8	27.2	28.2
	UCL	29.6	31.4	29.8	28.1	21.3	22.7	12.5	8.1	8.6	15.7	28.2	22.3	37.7	37.9	36.2
17	n	469	577	1,046	469	577	1,046	469	577	1,046	469	577	1,046	469	577	1,046
	%	26.0	30.1	28.4	19.2	17.7	18.3	10.1	6.1	7.7	19.7	13.2	15.9	25.0	32.9	29.7
	LCL	20.2	23.8	23.9	14.4	11.9	14.1	7.3	3.1	5.3	14.6	9.1	13.0	19.3	27.4	25.2
	UCL	31.7	36.5	33.0	24.0	23.5	22.5	12.8	9.0	10.1	24.8	17.3	18.7	30.7	38.4	34.2
18	n	290	294	584	290	294	584	290	294	584	290	294	584	290	294	584
	%	26.8	24.1	25.3	18.1	17.6	17.9	7.4	5.7	6.5	13.9	27.3	21.4	33.7	25.3	29.0
	LCL	18.6	15.0	18.0	11.7	8.9	12.2	3.3	2.2	3.7	8.9	8.6	10.0	25.4	16.6	23.4
	UCL	35.0	33.1	32.5	24.6	26.4	23.5	11.6	9.3	9.3	19.0	46.0	32.8	41.9	34.0	34.7
19 OR OVER	n	403	418	821	403	418	821	403	418	821	403	418	821	403	418	821
	%	19.0	26.4	22.8	21.2	25.5	23.4	15.2	6.5	10.7	25.9	15.7	20.6	18.7	25.8	22.4
	LCL	13.2	20.6	17.8	16.8	20.1	20.1	9.6	3.7	7.7	12.9	11.1	13.7	13.0	20.8	18.2
	UCL	24.8	32.2	27.9	25.6	31.0	26.8	20.9	9.3	13.8	38.9	20.3	27.6	24.4	30.9	26.6

Table 29: Percentage of high school learners who spent more than 3 hours per day watching television, playing video games or computer games by gender, race, grade, age and province

		WATCH TV[3] FOR MORE THAN 3 HOURS PER DAY[4]		
		MALE	FEMALE	TOTAL
NATIONAL	n	4,385	5,061	9,446
	%	22.2	27.5	25.2
	LCL[1]	20.2	24.0	22.7
	UCL[2]	24.1	31.0	27.7
EASTERN CAPE	n	421	581	1,002
	%	14.6	19.1	17.2
	LCL	10.9	14.6	13.7
	UCL	18.3	23.7	20.6
FREE STATE	n	497	531	1,028
	%	22.3	28.1	25.4
	LCL	18.4	25.3	22.2
	UCL	26.2	30.8	28.5
GAUTENG	n	483	584	1,067
	%	28.4	39.1	34.1
	LCL	25.2	31.9	30.0
	UCL	31.7	46.2	38.2
KWAZULU-NATAL	n	468	535	1,003
	%	16.9	28.2	23.2
	LCL	10.3	16.0	14.2
	UCL	23.4	40.4	32.3
LIMPOPO	n	411	448	859
	%	21.0	21.7	21.4
	LCL	17.4	13.0	15.2
	UCL	24.6	30.3	27.6
MPUMALANGA	n	541	596	1,137
	%	31.0	29.7	30.3
	LCL	26.6	24.7	27.1
	UCL	35.4	34.6	33.5
NORTHERN CAPE	n	438	534	972
	%	29.8	23.2	25.6
	LCL	25.1	11.1	17.9
	UCL	34.6	35.3	33.4
NORTH WEST	n	540	513	1,053
	%	23.7	22.1	22.9
	LCL	19.3	15.5	18.0
	UCL	28.0	28.8	27.7
WESTERN CAPE	n	586	739	1,325
	%	26.6	34.5	31.2
	LCL	22.2	29.8	28.2
	UCL	30.9	39.2	34.3
RACE: BLACK	n	3,210	3,623	6,833
	%	21.9	26.9	24.7
	LCL	19.7	23.5	22.2
	UCL	24.2	30.2	27.2
COLOURED	n	646	813	1,459
	%	25.4	33.2	29.6
	LCL	21.0	26.6	25.7
	UCL	29.8	39.7	33.4
WHITE	n	386	481	867
	%	20.9	19.9	20.4
	LCL	15.4	14.8	16.0
	UCL	26.4	25.1	24.7
INDIAN	n	63	64	127
	%	27.6	30.3	29.0
	LCL	13.5	14.8	20.8
	UCL	41.7	45.9	37.2
OTHER	n	40	42	82
	%	18.1	46.5	31.1
	LCL	5.1	27.6	17.1
	UCL	31.1	65.4	45.2
GRADE 08	n	1,227	1,351	2,578
	%	21.9	25.1	23.6
	LCL	18.9	21.1	20.5
	UCL	24.8	29.1	26.6
GRADE 09	n	1,512	1,679	3,191
	%	19.9	24.9	22.5
	LCL	16.8	21.3	19.6
	UCL	22.9	28.5	25.4
GRADE 10	n	1,015	1,120	2,135
	%	22.9	31.1	28.2
	LCL	19.5	23.1	22.2
	UCL	26.3	39.1	34.2
GRADE 11	n	631	911	1,542
	%	25.9	29.0	27.5
	LCL	16.9	23.3	21.3
	UCL	34.8	34.6	33.8
AGE: 13 OR UNDER	n	261	479	740
	%	24.8	22.5	23.3
	LCL	17.6	18.5	19.0
	UCL	32.1	26.6	27.7
14	n	590	883	1,473
	%	26.8	30.3	28.9
	LCL	22.6	25.3	25.1
	UCL	31.0	35.3	32.8
15	n	751	912	1,663
	%	21.6	28.0	25.4
	LCL	18.4	24.5	22.7
	UCL	24.9	31.4	28.1
16	n	829	925	1,754
	%	22.2	29.1	25.9
	LCL	19.3	21.4	21.3
	UCL	25.0	36.7	30.6
17	n	715	738	1,453
	%	19.6	28.3	24.4
	LCL	15.6	21.3	19.4
	UCL	23.7	35.3	29.4
18	n	426	370	796
	%	18.8	30.4	24.7
	LCL	13.7	15.0	16.8
	UCL	23.8	45.7	32.7
19 OR OVER	n	614	486	1,100
	%	17.0	17.2	17.1
	LCL	12.9	13.3	13.8
	UCL	21.2	21.0	20.4

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit
3. Watched TV, played video games or played computer games for 3 hours or more during an average school day
4. Of those who have access to a TV, video games or computer games

Table 30: Percentage of high school learners who brushed their teeth and who owned their own toothbrush by gender, race, grade, age and province

		BRUSH TEETH AT LEAST ONCE A DAY			OWN TOOTHBRUSH THAT IS NOT SHARED		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,430	10,170	4,731	5,489	10,220
	%	87.5	90.1	88.9	88.3	89.2	88.8
	LCL[1]	85.6	88.0	87.1	86.7	86.9	87.2
	UCL[2]	89.3	92.2	90.7	89.8	91.5	90.4
EASTERN CAPE	n	456	622	1,078	461	621	1,082
	%	84.2	76.2	79.7	78.0	87.3	83.3
	LCL	79.9	67.0	73.3	73.9	82.6	79.3
	UCL	88.6	85.5	86.0	82.0	91.9	87.2
FREE STATE	n	537	569	1,106	536	579	1,115
	%	93.0	94.6	93.9	91.0	93.5	92.3
	LCL	89.9	92.0	91.3	88.3	91.6	90.4
	UCL	96.1	97.3	96.4	93.8	95.3	94.3
GAUTENG	n	514	603	1,117	520	616	1,136
	%	92.2	96.9	94.7	93.5	94.8	94.2
	LCL	90.0	95.5	93.0	91.5	93.1	92.5
	UCL	94.4	98.3	96.4	95.6	96.5	95.9
KWAZULU-NATAL	n	526	614	1,140	508	619	1,127
	%	82.5	89.4	86.3	87.1	81.6	83.9
	LCL	77.0	84.6	81.6	82.2	74.5	78.9
	UCL	88.0	94.2	91.1	91.9	88.7	89.0
LIMPOPO	n	457	511	968	453	511	964
	%	86.6	90.5	88.9	88.9	90.2	89.6
	LCL	82.7	85.0	84.1	85.7	87.5	87.1
	UCL	90.6	96.0	93.7	92.1	92.8	92.2
MPUMALANGA	n	574	642	1,216	582	646	1,228
	%	86.6	88.3	87.5	88.2	91.3	89.9
	LCL	80.4	83.3	82.3	84.6	88.4	87.0
	UCL	92.8	93.3	92.7	91.8	94.1	92.8
NORTHERN CAPE	n	470	560	1,030	470	564	1,034
	%	92.1	97.2	95.3	91.9	96.1	94.6
	LCL	88.2	96.0	93.5	88.4	94.4	92.5
	UCL	96.0	98.4	97.0	95.4	97.9	96.6
NORTH WEST	n	599	557	1,156	601	563	1,164
	%	89.1	93.0	91.1	90.4	92.3	91.4
	LCL	85.6	89.2	87.6	85.7	88.0	87.1
	UCL	92.6	96.7	94.6	95.2	96.7	95.7
WESTERN CAPE	n	607	752	1,359	600	770	1,370
	%	92.3	94.6	93.7	91.0	92.9	92.1
	LCL	87.9	92.6	91.1	87.3	90.2	89.3
	UCL	96.7	96.7	96.3	94.7	95.5	95.0

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit

		BRUSH TEETH AT LEAST ONCE A DAY			OWN TOOTHBRUSH THAT IS NOT SHARED		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,740	5,430	10,170	4,731	5,489	10,220
	%	87.5	90.1	88.9	88.3	89.2	88.8
	LCL[1]	85.6	88.0	87.1	86.7	86.9	87.2
	UCL[2]	89.3	92.2	90.7	89.8	91.5	90.4
RACE: BLACK	n	3,504	3,961	7,465	3,490	3,997	7,487
	%	86.7	88.8	87.9	87.2	89.0	88.2
	LCL	84.4	86.5	86.0	85.6	87.2	86.8
	UCL	88.9	91.2	89.8	88.8	90.8	89.6
COLOURED	n	672	838	1,510	678	853	1,531
	%	90.1	95.9	93.2	91.0	92.8	91.9
	LCL	86.3	94.3	91.0	88.1	89.9	89.8
	UCL	93.9	97.4	95.4	93.8	95.7	94.1
WHITE	n	403	482	885	403	486	889
	%	96.4	98.2	97.4	97.3	95.6	96.3
	LCL	94.2	97.0	96.0	95.4	92.8	94.6
	UCL	98.7	99.3	98.8	99.1	98.4	98.1
INDIAN	n	66	67	133	66	67	133
	%	78.3	96.1	87.3	87.4	96.9	92.3
	LCL	58.3	89.8	76.0	72.3	93.4	84.3
	UCL	98.4	102.4	98.7	102.6	100.5	100.2
OTHER	n	50	45	95	48	48	96
	%	78.7	72.7	76.1	87.7	82.2	85.3
	LCL	55.7	51.7	67.6	77.2	69.4	76.5
	UCL	101.7	93.7	84.6	98.3	94.9	94.0
GRADE 08	n	1,319	1,436	2,755	1,296	1,440	2,736
	%	82.5	86.1	84.4	84.1	86.5	85.4
	LCL	78.4	83.1	81.4	80.6	83.9	82.8
	UCL	86.5	89.1	87.4	87.7	89.1	88.0
GRADE 09	n	1,634	1,816	3,450	1,640	1,835	3,475
	%	86.4	88.4	87.4	87.3	91.1	89.3
	LCL	83.6	86.0	85.3	85.0	89.2	87.6
	UCL	89.1	90.8	89.5	89.6	92.9	91.0
GRADE 10	n	1,097	1,196	2,293	1,104	1,218	2,322
	%	92.5	92.6	92.6	92.2	88.1	89.6
	LCL	90.0	89.2	90.0	89.9	81.5	85.3
	UCL	95.0	96.1	95.1	94.5	94.8	94.0
GRADE 11	n	690	982	1,672	691	996	1,687
	%	92.1	95.2	93.8	92.6	93.5	93.1
	LCL	89.8	93.0	91.8	89.4	91.4	90.9
	UCL	94.5	97.5	95.8	95.8	95.7	95.3
AGE: 13 OR UNDER	n	277	517	794	282	515	797
	%	90.9	90.9	90.9	93.4	84.9	87.9
	LCL	86.7	86.8	87.8	89.7	80.0	84.3
	UCL	95.1	94.9	94.0	97.2	89.7	91.6
14	n	627	935	1,562	612	939	1,551
	%	87.6	88.4	88.1	87.9	91.6	90.2
	LCL	83.4	85.2	85.1	84.7	88.6	87.7
	UCL	91.8	91.6	91.1	91.2	94.7	92.7
15	n	794	972	1,766	792	986	1,778
	%	88.0	91.0	89.8	87.8	91.5	90.0
	LCL	84.7	88.5	87.4	84.4	89.0	88.1
	UCL	91.4	93.4	92.2	91.1	94.1	92.0
16	n	900	993	1,893	906	1,003	1,909
	%	87.9	89.6	88.8	90.2	89.2	89.6
	LCL	84.5	86.1	86.0	87.6	82.0	85.5
	UCL	91.2	93.2	91.6	92.7	96.4	93.7
17	n	774	777	1,551	777	796	1,573
	%	85.1	89.9	87.7	88.5	86.3	87.3
	LCL	81.7	85.3	84.2	84.6	79.0	82.4
	UCL	88.5	94.4	91.1	92.5	93.6	92.2
18	n	462	404	866	459	414	873
	%	86.1	91.5	88.9	83.9	88.9	86.5
	LCL	81.6	87.4	85.6	78.7	84.3	82.6
	UCL	90.6	95.5	92.2	89.2	93.5	90.5
19 OR OVER	n	691	545	1,236	691	550	1,241
	%	86.2	90.4	88.1	87.7	89.3	88.4
	LCL	83.1	86.9	85.6	84.5	85.7	85.7
	UCL	89.4	93.8	90.6	90.9	92.9	91.2

Table 31: Percentage of high school learners who always washed their hands before eating and after going to the toilet by gender, race, grade, age and province

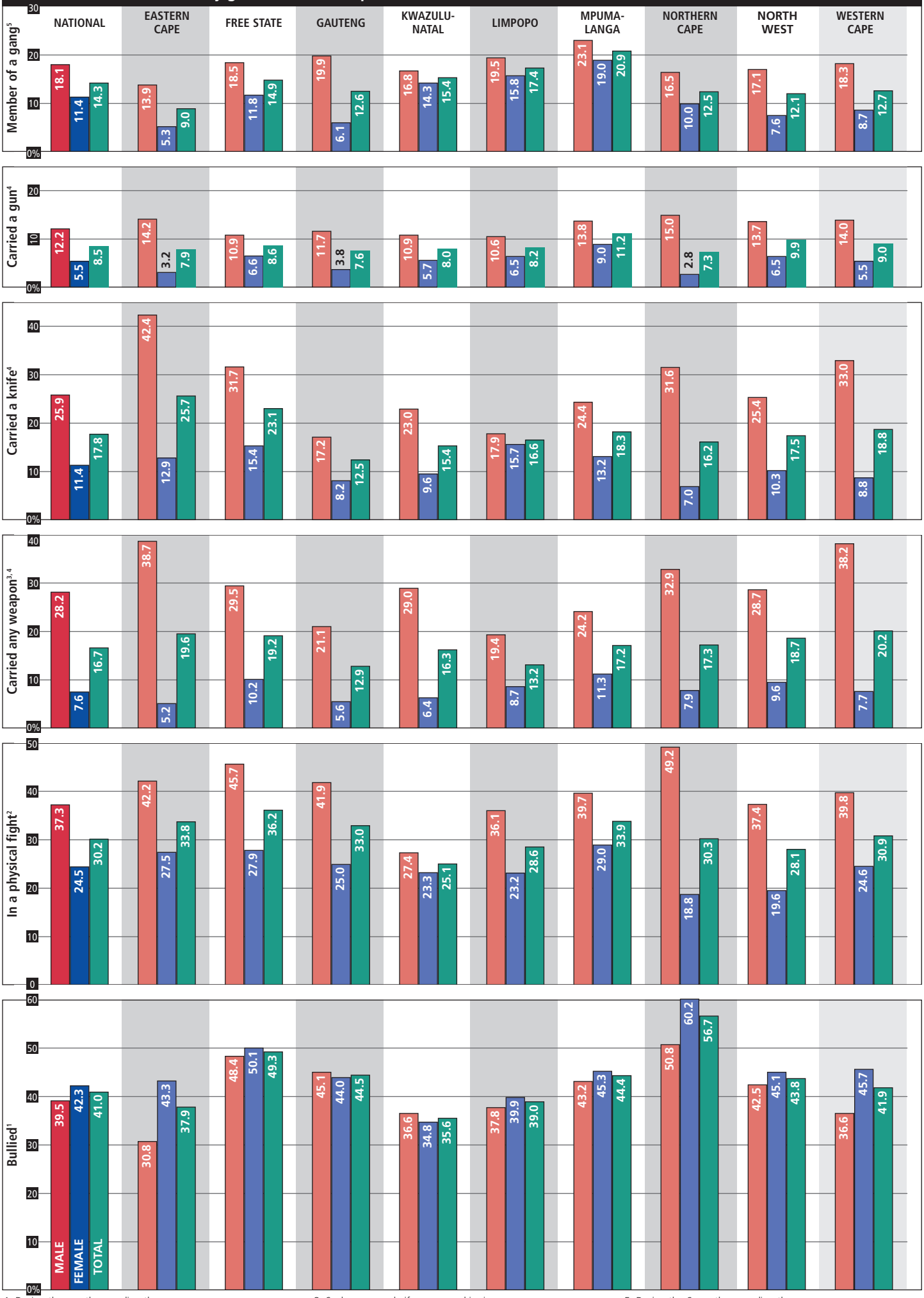
		ALWAYS WASH HANDS AFTER GOING TO TOILET			ALWAYS WASH HANDS BEFORE EATING		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,777	5,472	10,249	4,837	5,551	10,388
	%	73.9	76.7	75.5	65.8	67.7	66.8
	LCL[1]	71.8	74.7	73.7	63.1	64.7	64.3
	UCL[2]	75.9	78.8	77.2	68.4	70.7	69.4
EASTERN CAPE	n	458	626	1,084	467	630	1,097
	%	75.2	78.1	76.9	59.3	64.5	62.3
	LCL	68.4	70.7	70.4	50.5	51.5	51.7
	UCL	82.1	85.4	83.3	68.1	77.5	72.9
FREE STATE	n	536	577	1,113	545	581	1,126
	%	78.5	78.7	78.6	66.7	70.2	68.6
	LCL	75.3	73.2	74.7	61.9	62.2	63.0
	UCL	81.8	84.2	82.5	71.6	78.1	74.2
GAUTENG	n	517	607	1,124	526	617	1,143
	%	73.9	79.0	76.6	65.5	66.1	65.8
	LCL	69.5	76.3	74.2	59.7	63.3	63.1
	UCL	78.2	81.6	79.0	71.4	68.9	68.6
KWAZULU-NATAL	n	523	614	1,137	528	631	1,159
	%	77.5	79.2	78.5	66.7	70.8	69.0
	LCL	72.8	77.0	75.6	59.3	64.8	63.0
	UCL	82.1	81.4	81.3	74.1	76.8	75.0
LIMPOPO	n	465	518	983	467	520	987
	%	71.4	74.6	73.2	74.2	73.1	73.6
	LCL	65.6	70.4	68.8	68.5	66.5	67.5
	UCL	77.2	78.8	77.7	79.8	79.8	79.7
MPUMALANGA	n	585	642	1,227	596	650	1,246
	%	71.4	72.0	71.8	69.5	68.9	69.2
	LCL	67.8	64.6	67.1	62.7	59.3	61.4
	UCL	75.0	79.5	76.4	76.3	78.5	76.9
NORTHERN CAPE	n	471	563	1,034	475	571	1,046
	%	68.4	49.8	56.8	60.6	39.6	47.5
	LCL	62.3	23.1	38.5	53.3	20.7	33.5
	UCL	74.5	76.6	75.2	67.8	58.5	61.6
NORTH WEST	n	612	565	1,177	612	570	1,182
	%	72.8	80.9	77.0	62.2	72.4	67.6
	LCL	65.9	73.9	70.9	52.2	63.6	58.7
	UCL	79.6	87.8	83.1	72.3	81.2	76.4
WESTERN CAPE	n	610	760	1,370	621	781	1,402
	%	67.1	75.8	72.3	59.3	59.2	59.2
	LCL	59.4	67.3	64.6	51.1	46.5	49.8
	UCL	74.8	84.4	80.0	67.5	72.0	68.7

1. LCL: Lower 95% Confidence Limit
2. UCL: Upper 95% Confidence Limit

		ALWAYS WASH HANDS AFTER GOING TO TOILET			ALWAYS WASH HANDS BEFORE EATING		
		MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
NATIONAL	n	4,777	5,472	10,249	4,837	5,551	10,388
	%	73.9	76.7	75.5	65.8	67.7	66.8
	LCL[1]	71.8	74.7	73.7	63.1	64.7	64.3
	UCL[2]	75.9	78.8	77.2	68.4	70.7	69.4
RACE: BLACK	n	3,530	3,994	7,524	3,581	4,049	7,630
	%	75.7	80.5	78.4	68.6	72.2	70.6
	LCL	73.8	78.3	76.6	65.9	68.7	67.8
	UCL	77.7	82.8	80.3	71.4	75.7	73.5
COLOURED	n	681	842	1,523	689	860	1,549
	%	70.0	65.1	67.4	59.3	52.1	55.4
	LCL	63.2	52.4	58.8	52.2	42.7	49.0
	UCL	76.9	77.7	76.0	66.3	61.4	61.8
WHITE	n	403	481	884	409	486	895
	%	62.0	56.2	58.8	48.6	42.2	45.0
	LCL	54.8	49.8	54.6	39.8	34.5	39.1
	UCL	69.3	62.7	63.0	57.3	49.9	51.0
INDIAN	n	68	66	134	66	68	134
	%	73.5	85.0	79.2	68.0	74.9	71.5
	LCL	53.6	70.0	64.8	53.5	60.9	61.3
	UCL	93.3	100.0	93.5	82.4	88.8	81.8
OTHER	n	50	48	98	48	46	94
	%	67.4	80.6	73.1	47.3	78.8	61.0
	LCL	50.8	66.3	59.0	28.2	58.2	44.9
	UCL	84.0	94.8	87.2	66.3	99.5	77.1
GRADE 08	n	1,330	1,447	2,777	1,347	1,457	2,804
	%	74.2	77.6	75.9	67.7	68.8	68.3
	LCL	71.3	74.3	73.5	63.4	64.7	64.9
	UCL	77.1	80.8	78.4	72.0	72.9	71.6
GRADE 09	n	1,656	1,829	3,485	1,670	1,859	3,529
	%	72.9	77.9	75.5	66.3	70.2	68.3
	LCL	69.1	74.5	72.6	62.8	66.1	65.1
	UCL	76.7	81.3	78.5	69.8	74.3	71.5
GRADE 10	n	1,099	1,212	2,311	1,121	1,233	2,354
	%	76.2	75.3	75.6	67.2	66.8	66.9
	LCL	73.0	71.1	72.4	62.5	61.3	62.2
	UCL	79.3	79.5	78.9	71.9	72.3	71.7
GRADE 11	n	692	984	1,676	699	1,002	1,701
	%	71.8	76.2	74.2	58.9	63.5	61.5
	LCL	65.8	71.3	70.0	49.9	57.7	54.8
	UCL	77.9	81.1	78.4	67.9	69.3	68.1
AGE: 13 OR UNDER	n	281	515	796	287	518	805
	%	69.8	79.7	76.2	72.0	71.3	71.5
	LCL	63.0	75.7	72.3	64.3	67.1	67.7
	UCL	76.6	83.6	80.0	79.7	75.4	75.4
14	n	628	938	1,566	633	948	1,581
	%	78.9	76.2	77.3	68.3	64.7	66.1
	LCL	75.5	71.3	73.9	63.1	57.7	61.1
	UCL	82.3	81.1	80.6	73.4	71.7	71.1
15	n	800	974	1,774	810	992	1,802
	%	73.6	77.4	75.9	65.0	68.6	67.1
	LCL	69.6	73.3	72.8	60.9	64.0	63.6
	UCL	77.6	81.5	78.9	69.0	73.2	70.6
16	n	901	1,000	1,901	919	1,016	1,935
	%	74.3	72.8	73.5	61.2	63.8	62.6
	LCL	70.8	66.5	69.5	56.4	56.7	57.9
	UCL	77.8	79.2	77.5	66.1	70.9	67.3
17	n	783	791	1,574	792	801	1,593
	%	72.7	75.6	74.3	66.3	69.3	67.9
	LCL	68.9	66.7	68.7	61.6	60.0	61.7
	UCL	76.6	84.6	79.9	71.0	78.6	74.2
18	n	471	416	887	474	420	894
	%	71.8	82.5	77.4	66.5	75.1	71.0
	LCL	65.9	78.0	73.4	59.5	66.4	64.1
	UCL	77.8	87.1	81.4	73.6	83.7	78.0
19 OR OVER	n	697	548	1,245	704	562	1,266
	%	74.2	78.7	76.2	70.1	70.5	70.3
	LCL	70.1	74.3	73.0	65.3	66.1	66.3
	UCL	78.3	83.1	79.4	74.9	74.8	74.3

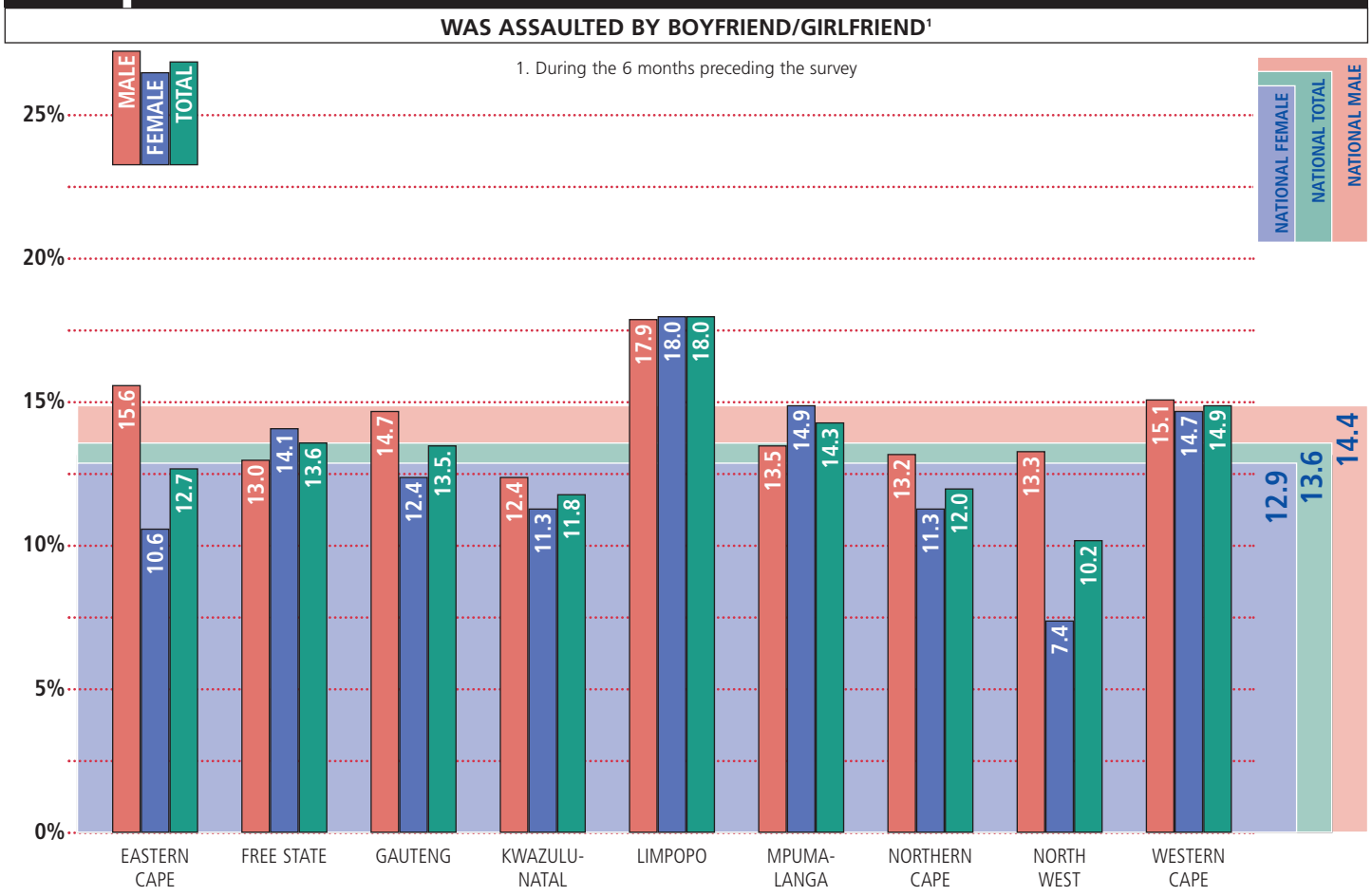
List of Graphs

GRAPH 1: Percentage of high school learners who reported violence-related behaviours by gender across the provinces

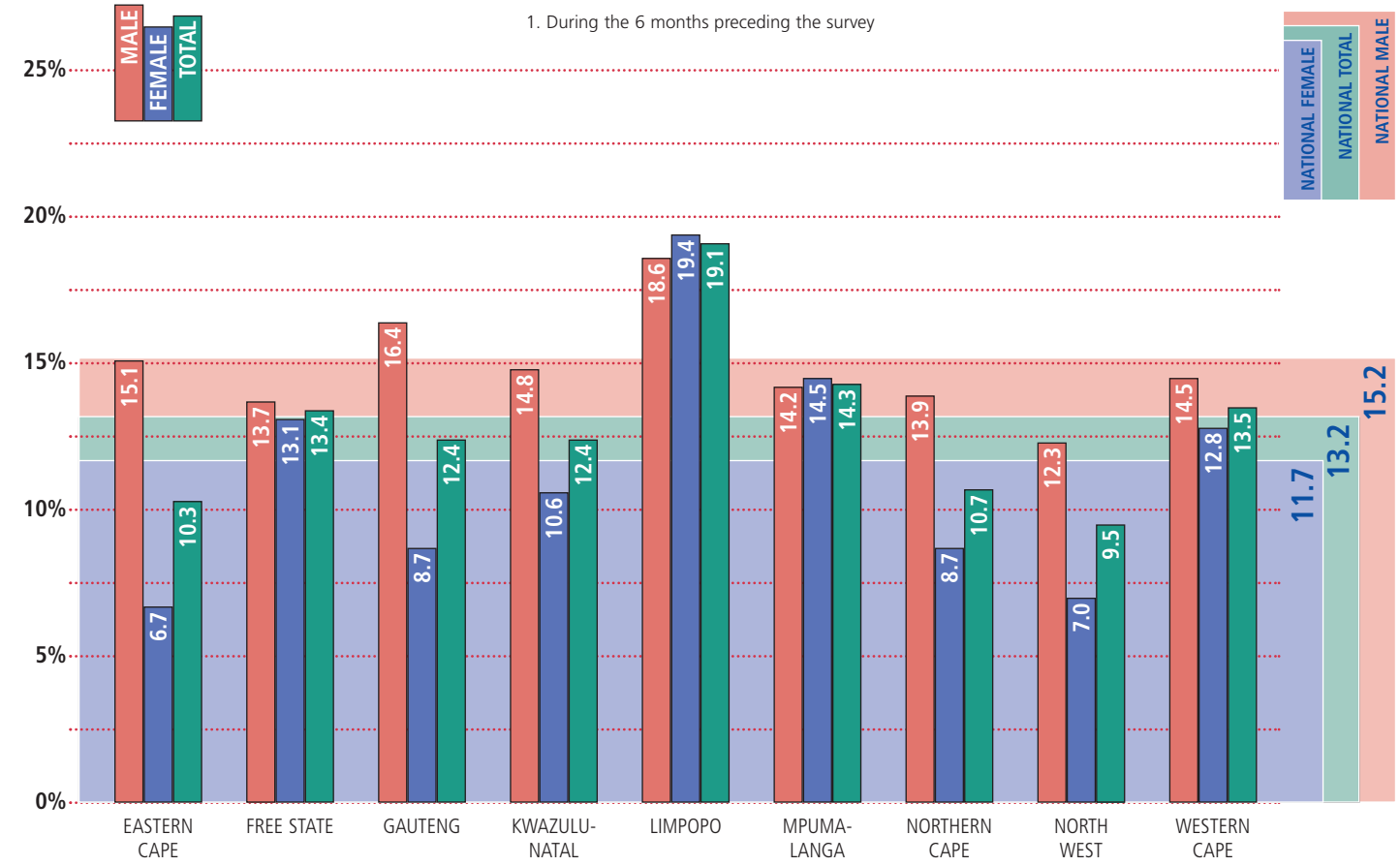


1. During the month preceding the survey
2. One or more times during the 6 months preceding the survey
3. Such as a gun, knife, panga or kierrie
4. On one or more days in the month preceding the survey
5. During the 6 months preceding the survey

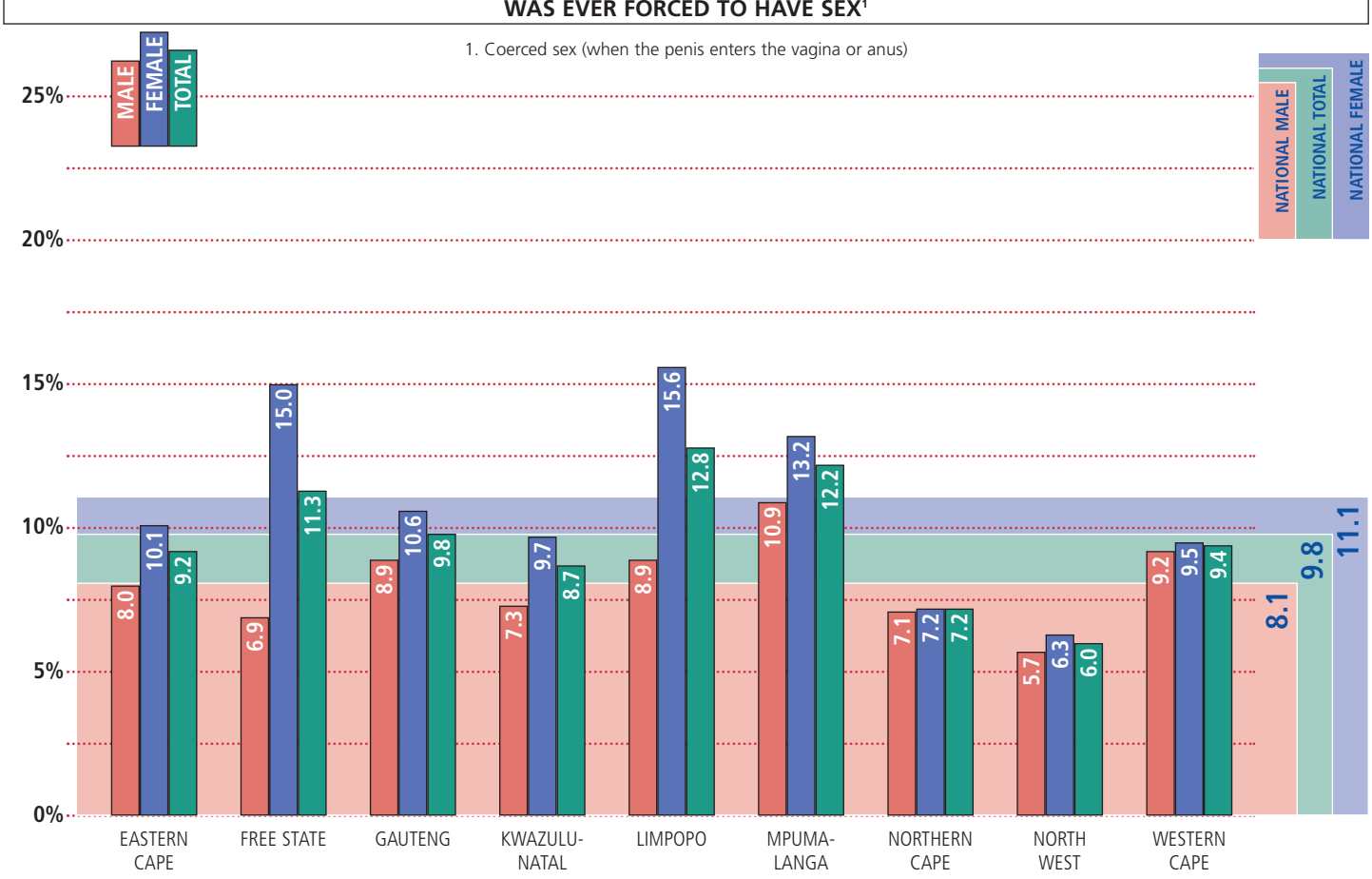
Graph 2: Percentage of high school learners who were assaulted by a boyfriend/girlfriend by gender across the provinces



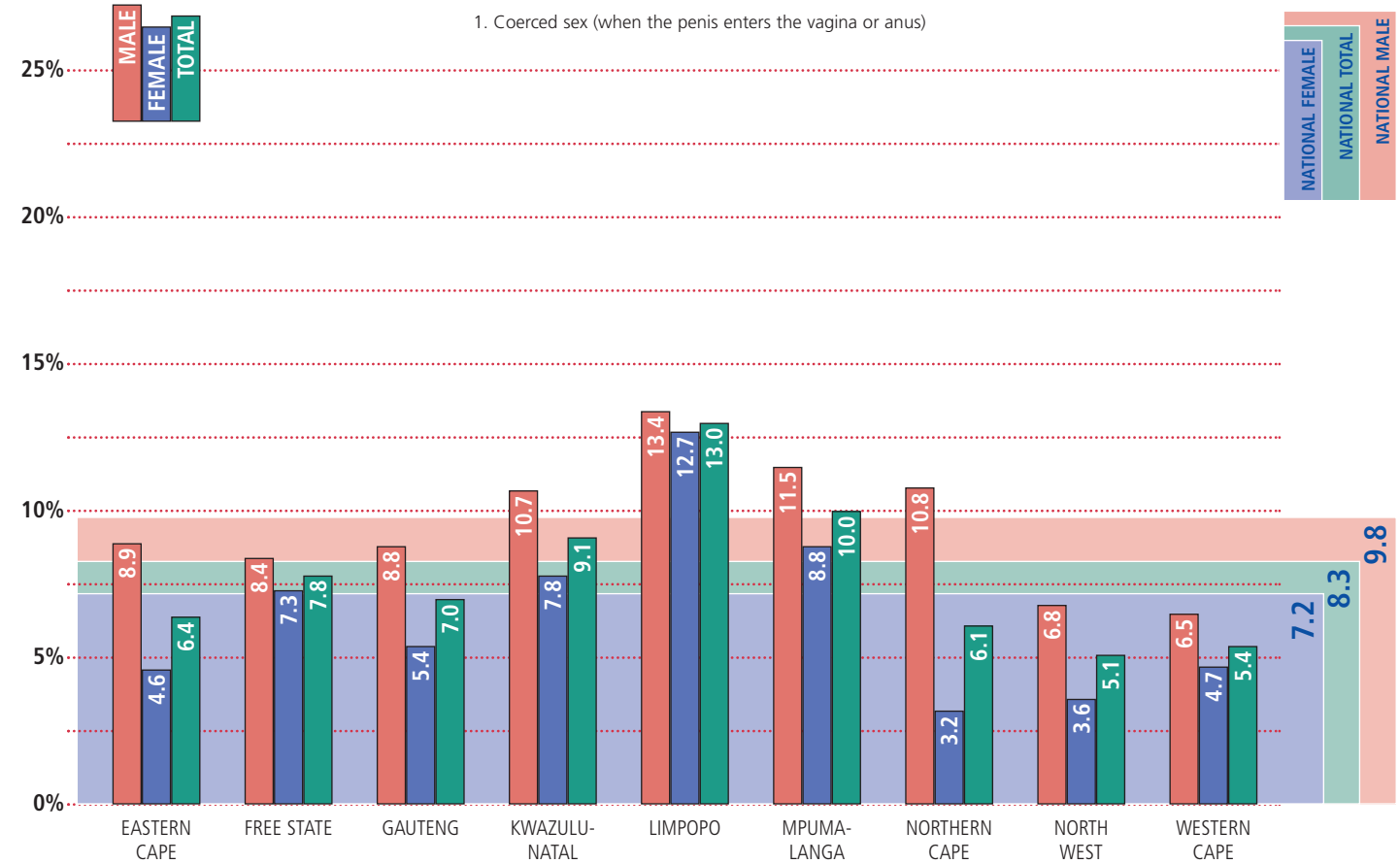
Graph 3: Percentage of high school learners who assaulted a boyfriend/girlfriend by gender across the provinces



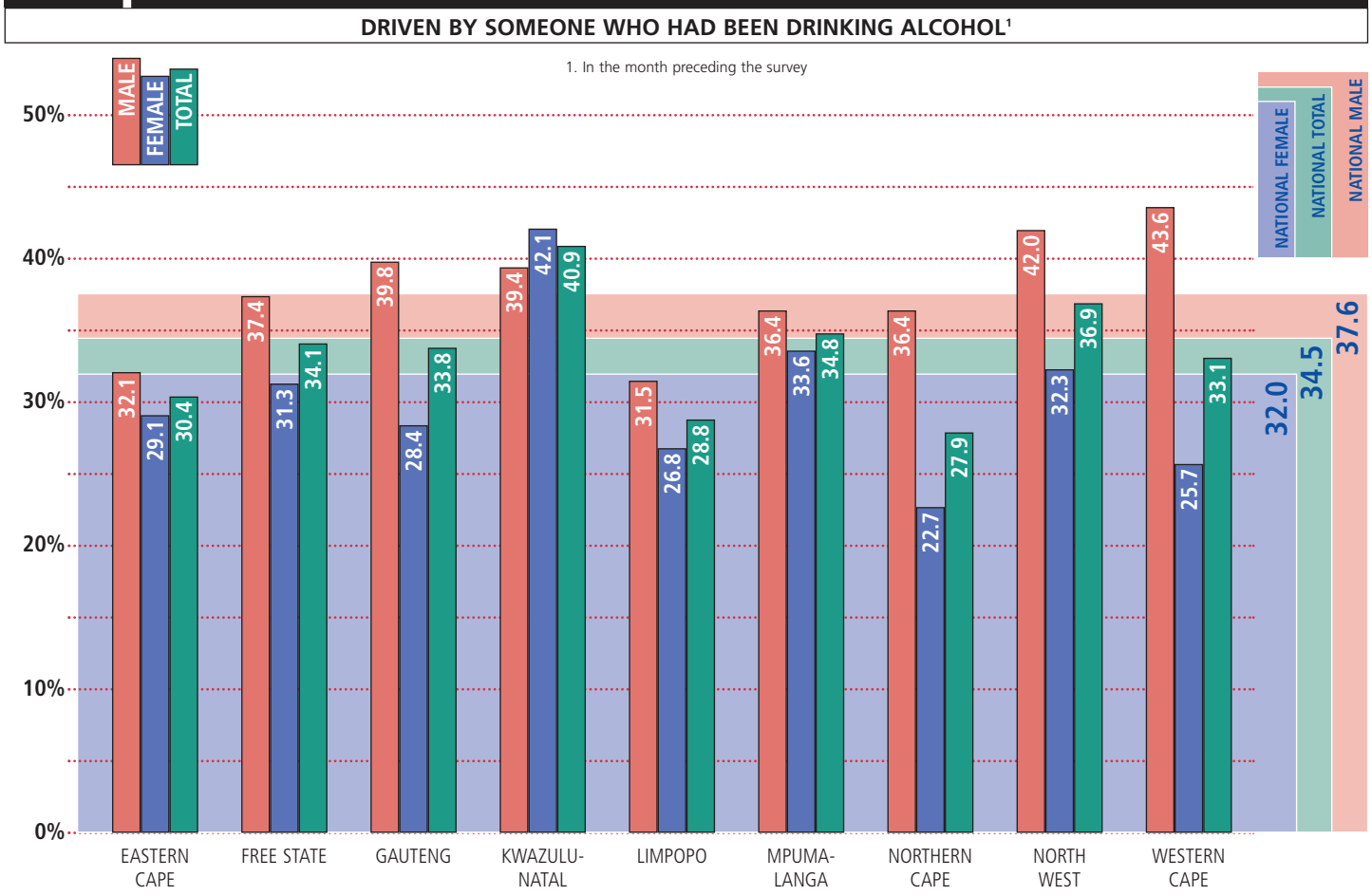
Graph 4: Percentage of high school learners who were ever forced to have sex by gender across the provinces



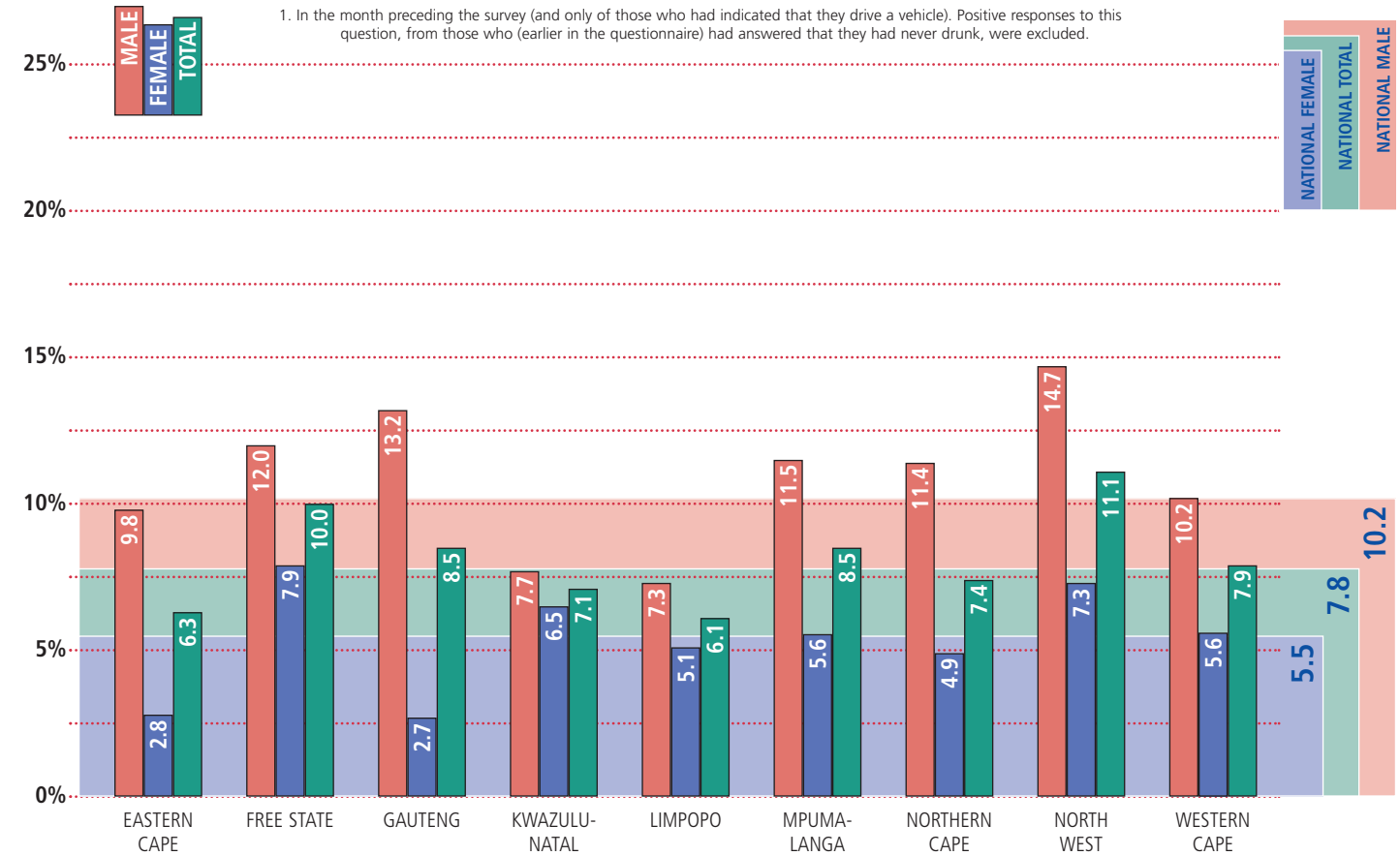
Graph 5: Percentage of high school learners who ever forced someone else to have sex by gender across the provinces



Graph 6: Percentage of high school learners who were driven by someone who had been drinking alcohol by gender across the provinces



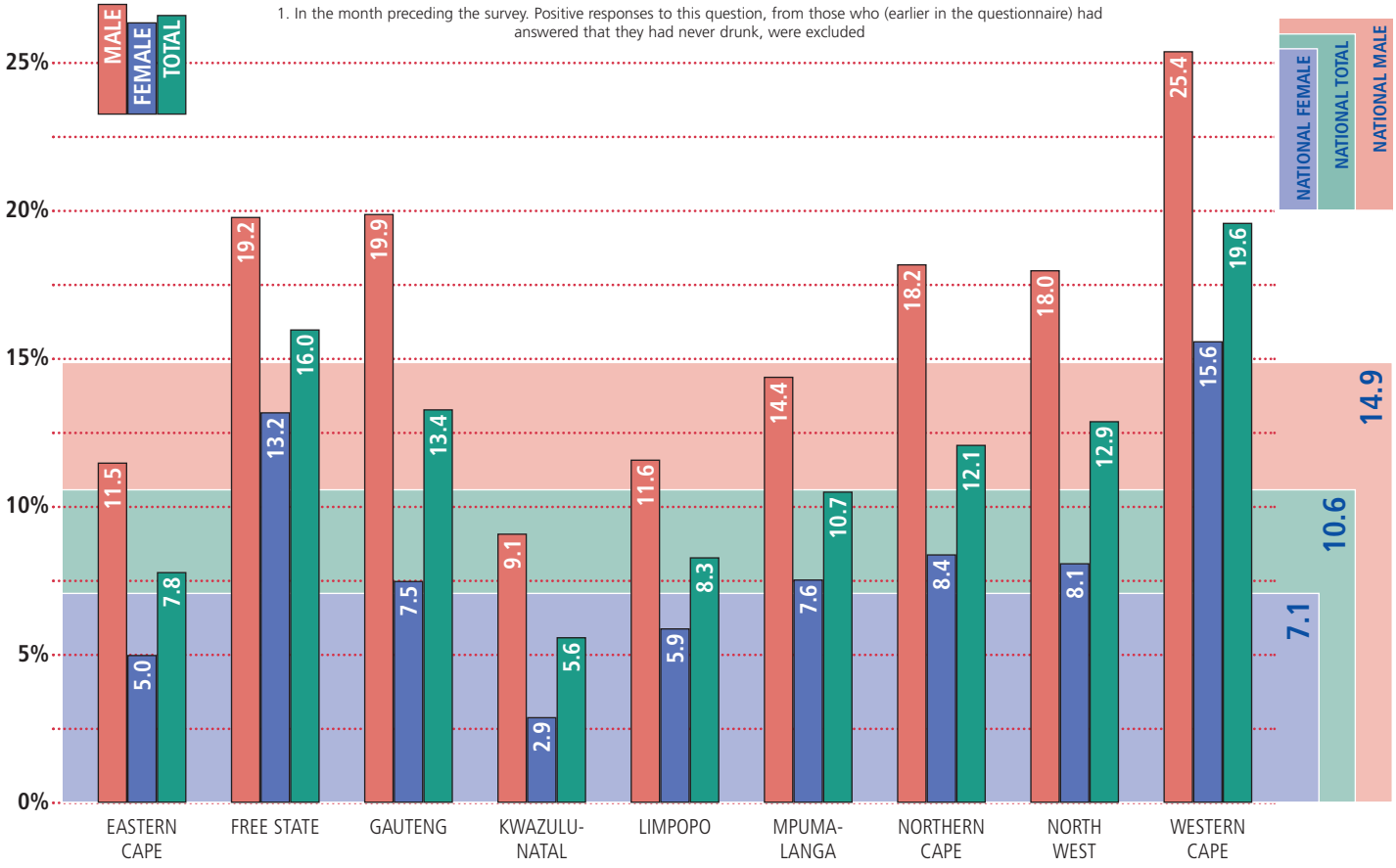
Graph 7: Percentage of high school learners who drove after drinking alcohol by gender across the provinces



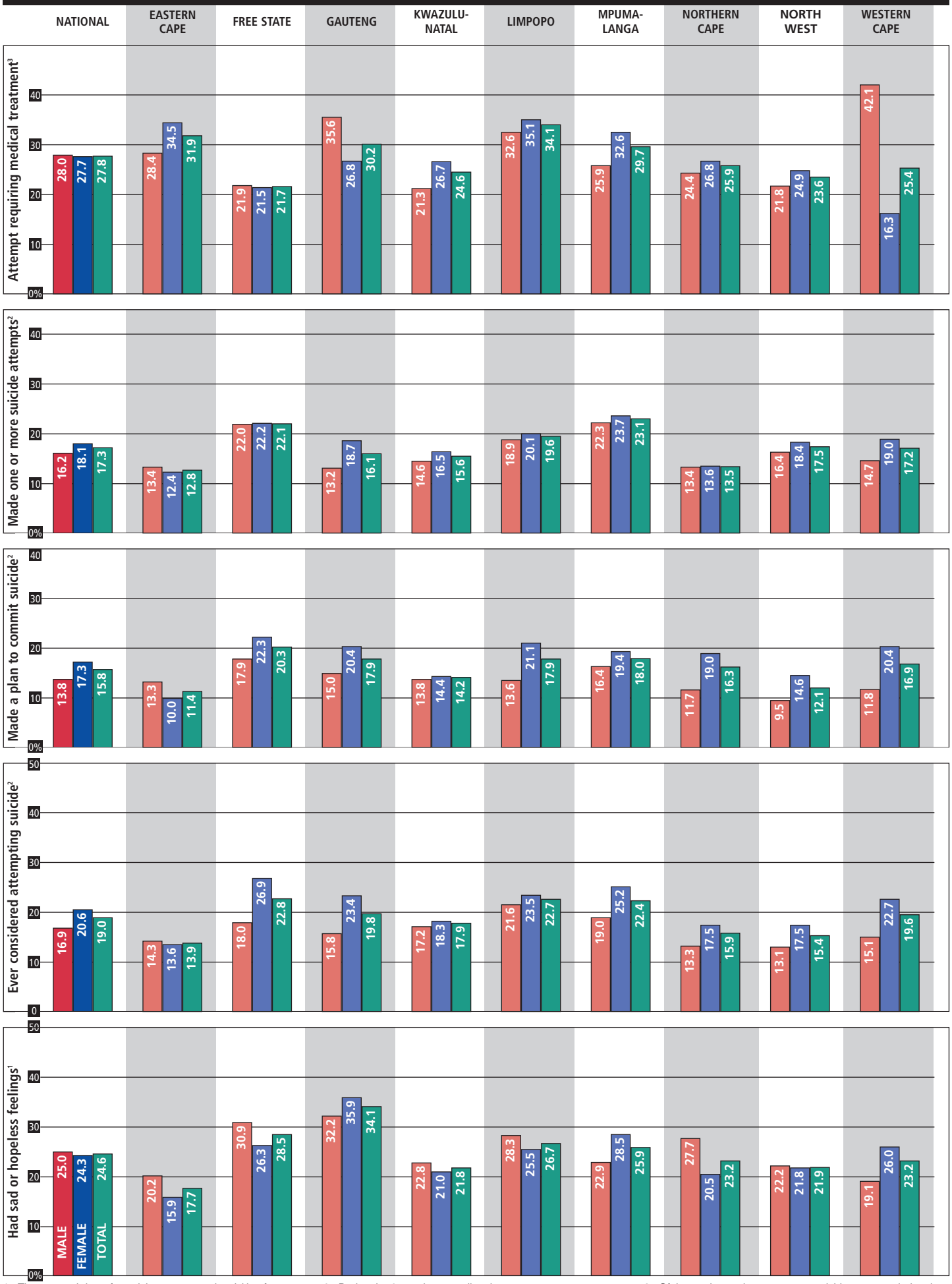
Graph 8: Percentage of high school learners who walked alongside a road after drinking alcohol by gender across the provinces

WALKED ALONGSIDE A ROAD AFTER DRINKING ALCOHOL[1]

1. In the month preceding the survey. Positive responses to this question, from those who (earlier in the questionnaire) had answered that they had never drunk, were excluded



GRAPH 9: Percentage of high school learners who reported suicide-related behaviours by gender across the provinces

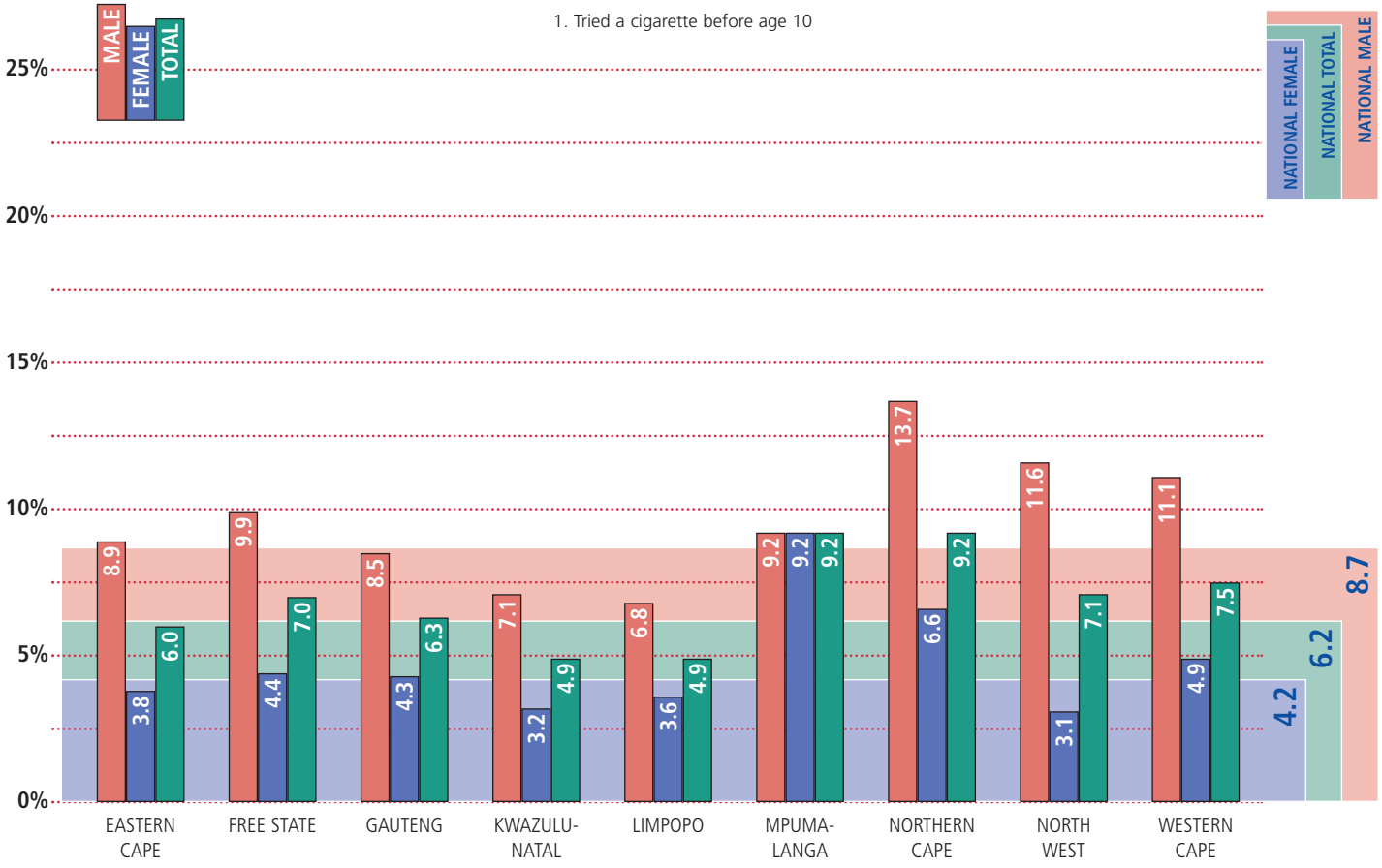


1. That stopped them from doing some usual activities for two or more weeks in a row, during the 6 months preceding the survey
2. During the 6 months preceding the survey
3. Of those who made one or more suicide attempts during the six months preceding the survey

Graph 10: Percentage of high school learners who were younger than 10 years when they first tried smoking a cigarette by gender across the provinces

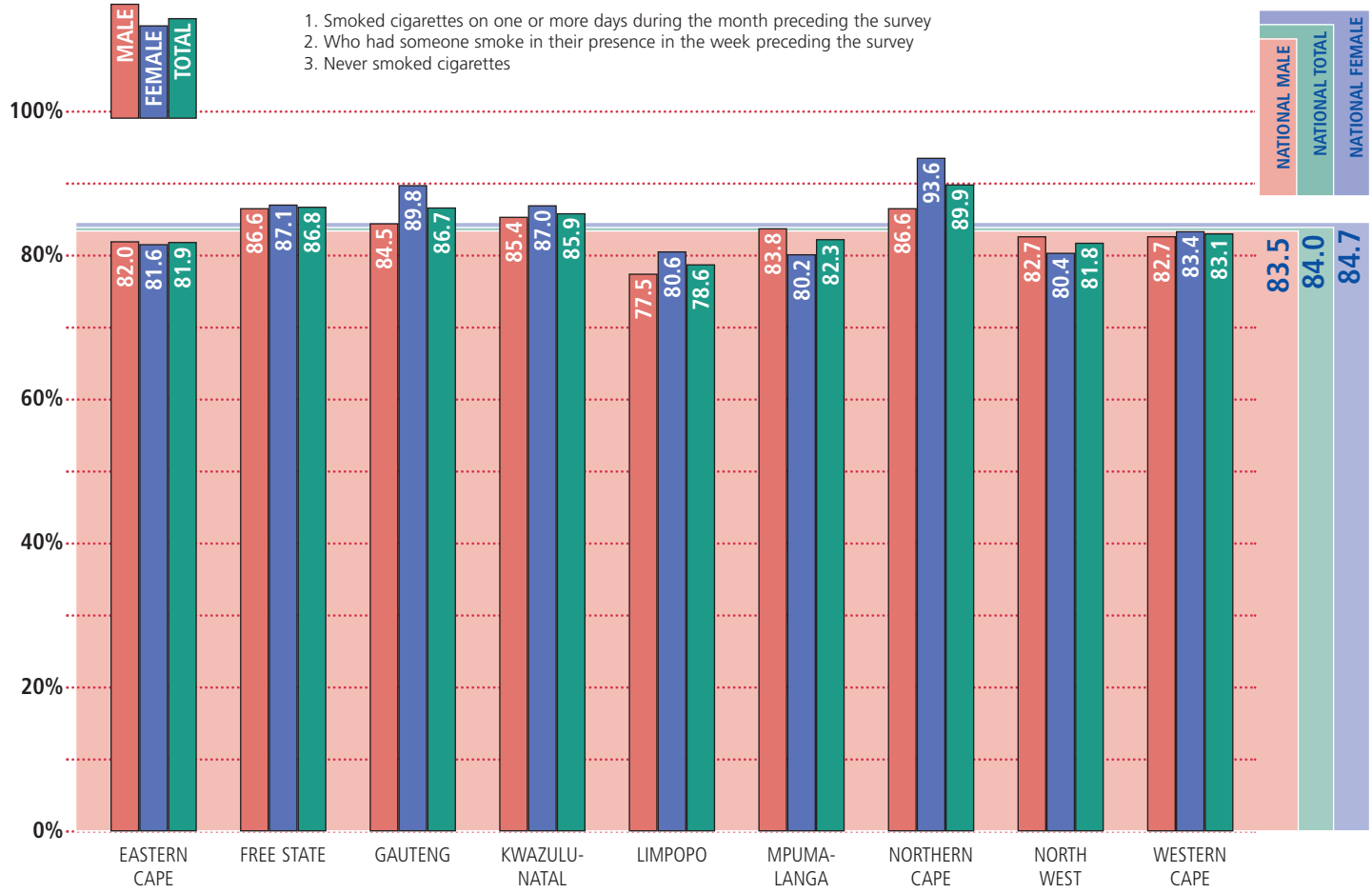
AGE OF INITIATION < 10 YEARS[1]

1. Tried a cigarette before age 10

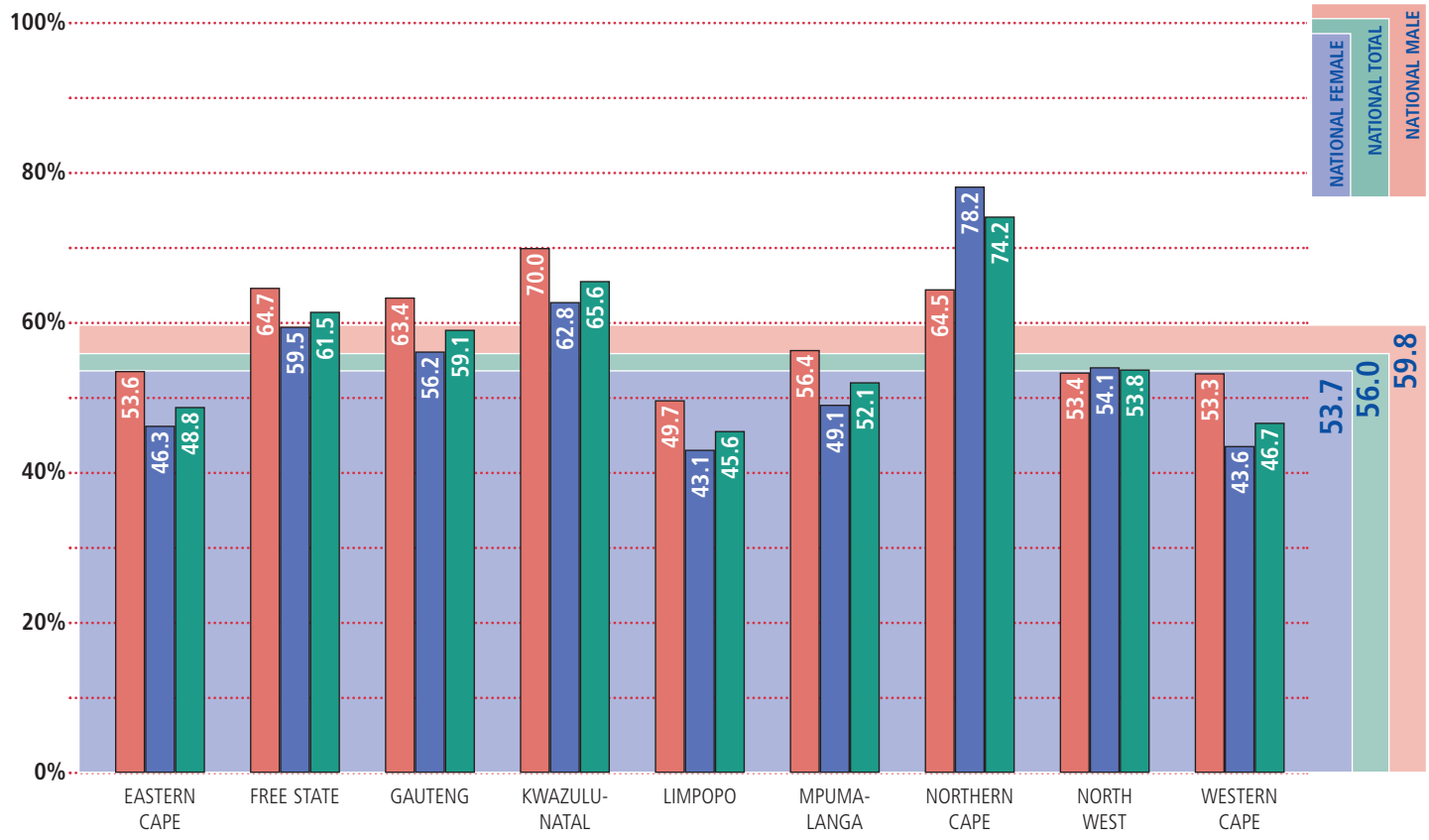


Graph 11: Percentage of high school learners who were exposed to environmental tobacco smoke by gender and smoking status, across the provinces

CURRENT SMOKERS[1] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[2]



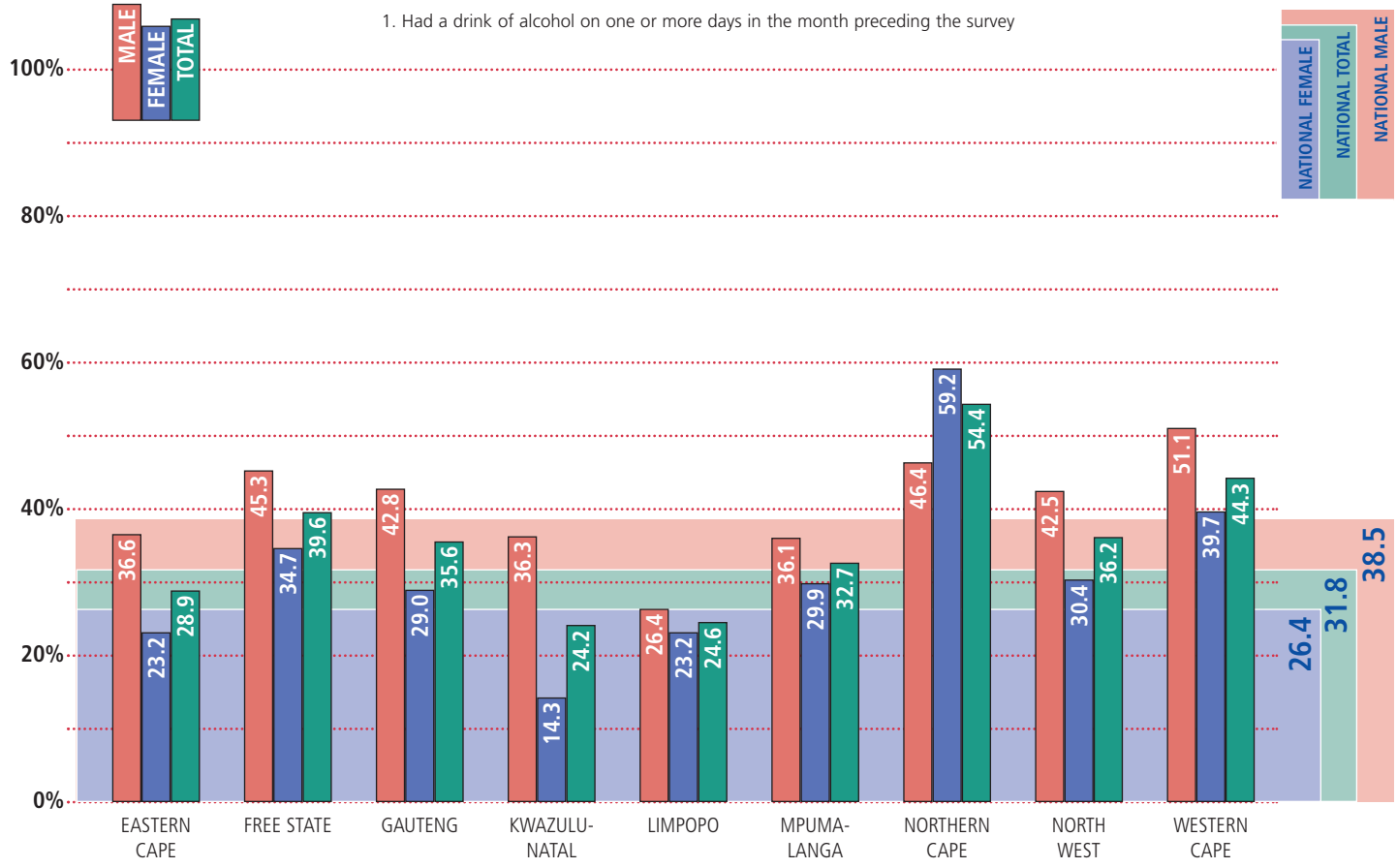
NEVER SMOKERS[3] EXPOSED TO ENVIRONMENTAL TOBACCO SMOKE[2]



Graph 12: Percentage of high school learners who drank alcohol in the past month by gender across the provinces

USED ALCOHOL IN THE PAST MONTH[1]

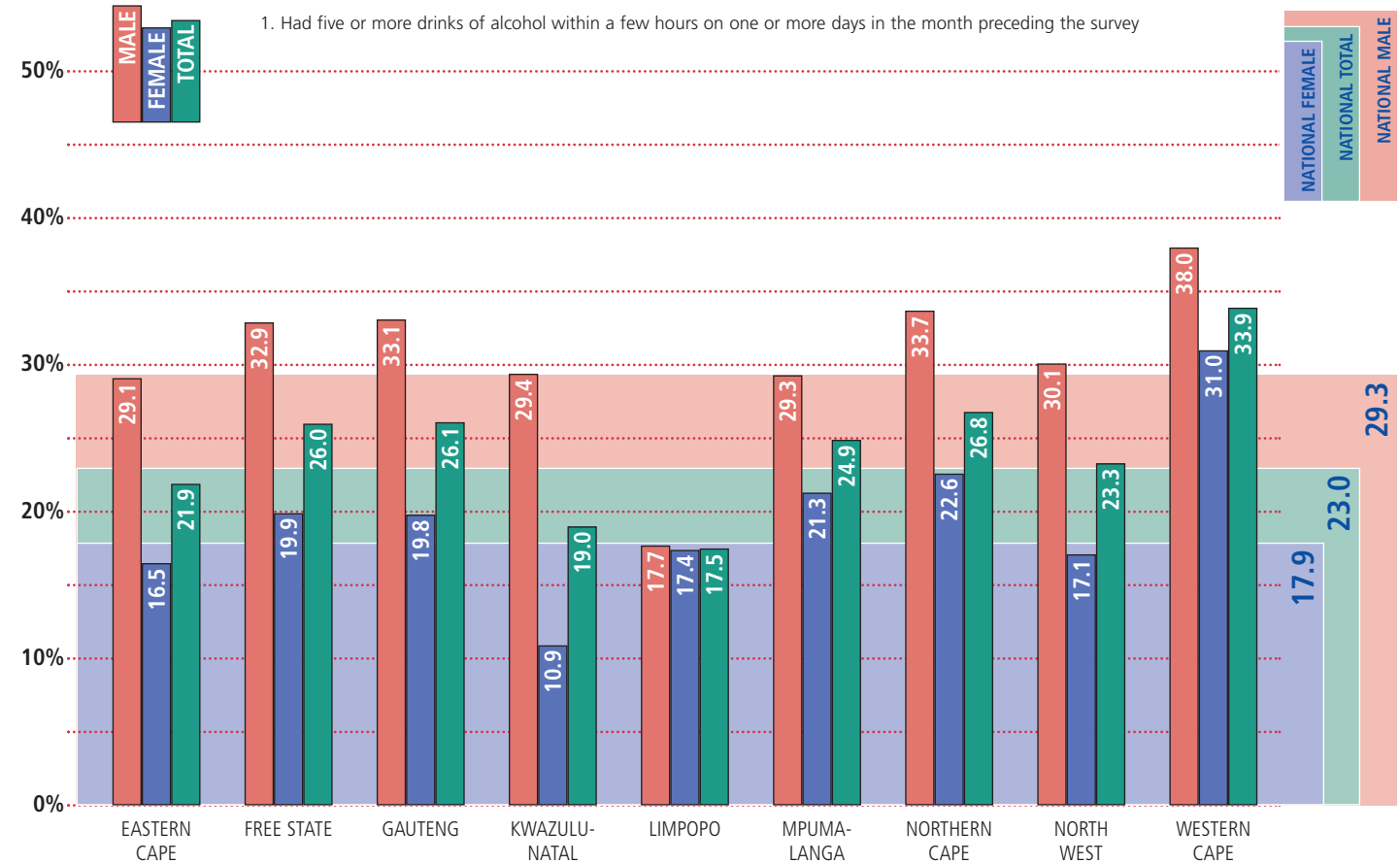
1. Had a drink of alcohol on one or more days in the month preceding the survey



Graph 13: Percentage of high school learners who engaged in binge drinking of alcohol in the past month by gender across the provinces

PAST MONTH BINGE DRINKING[1]

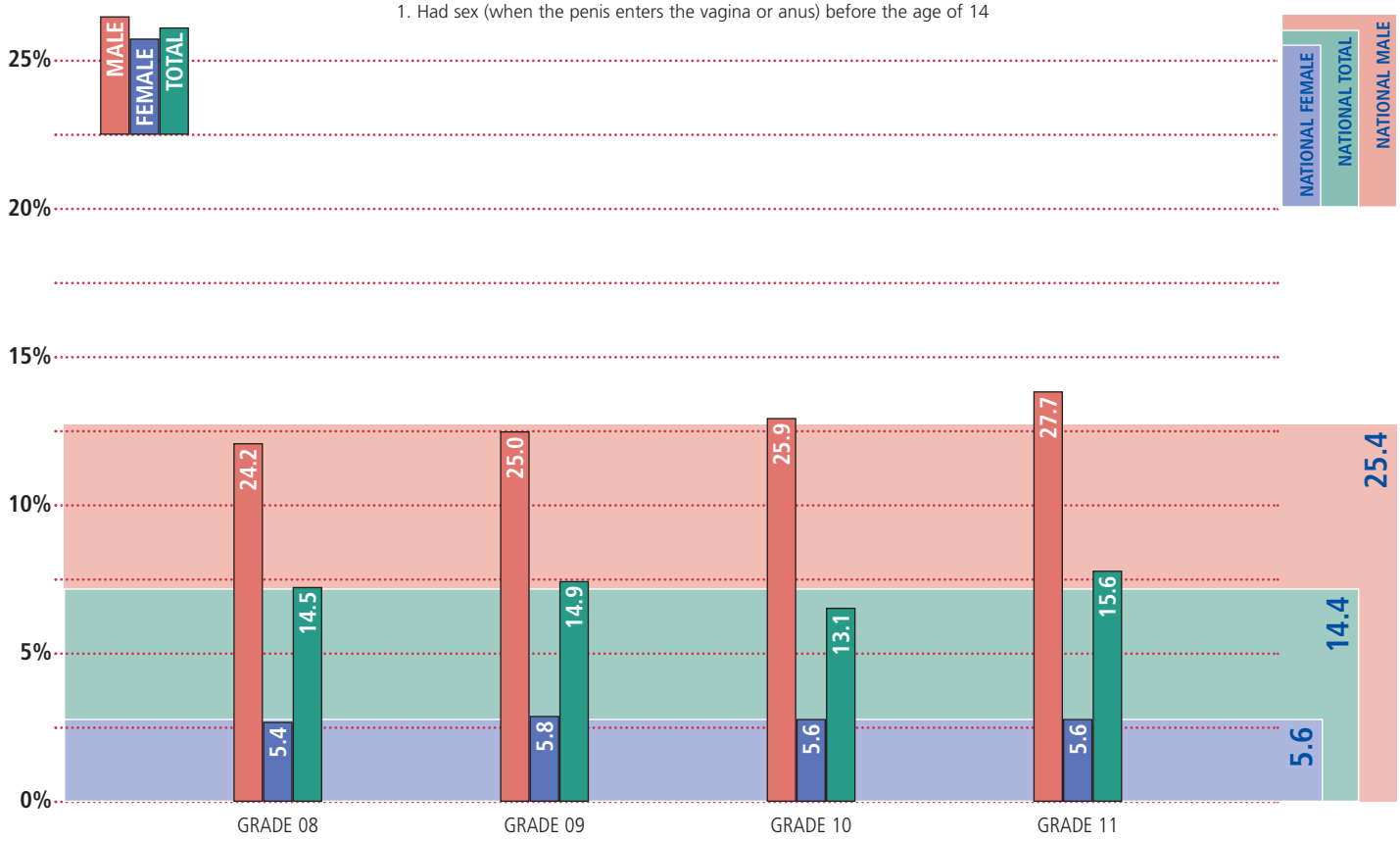
1. Had five or more drinks of alcohol within a few hours on one or more days in the month preceding the survey



Graph 14: Percentage of high school learners who were younger than 14 years when they first had sex by gender across grades

AGE OF INITIATION < 14 YEARS[1]

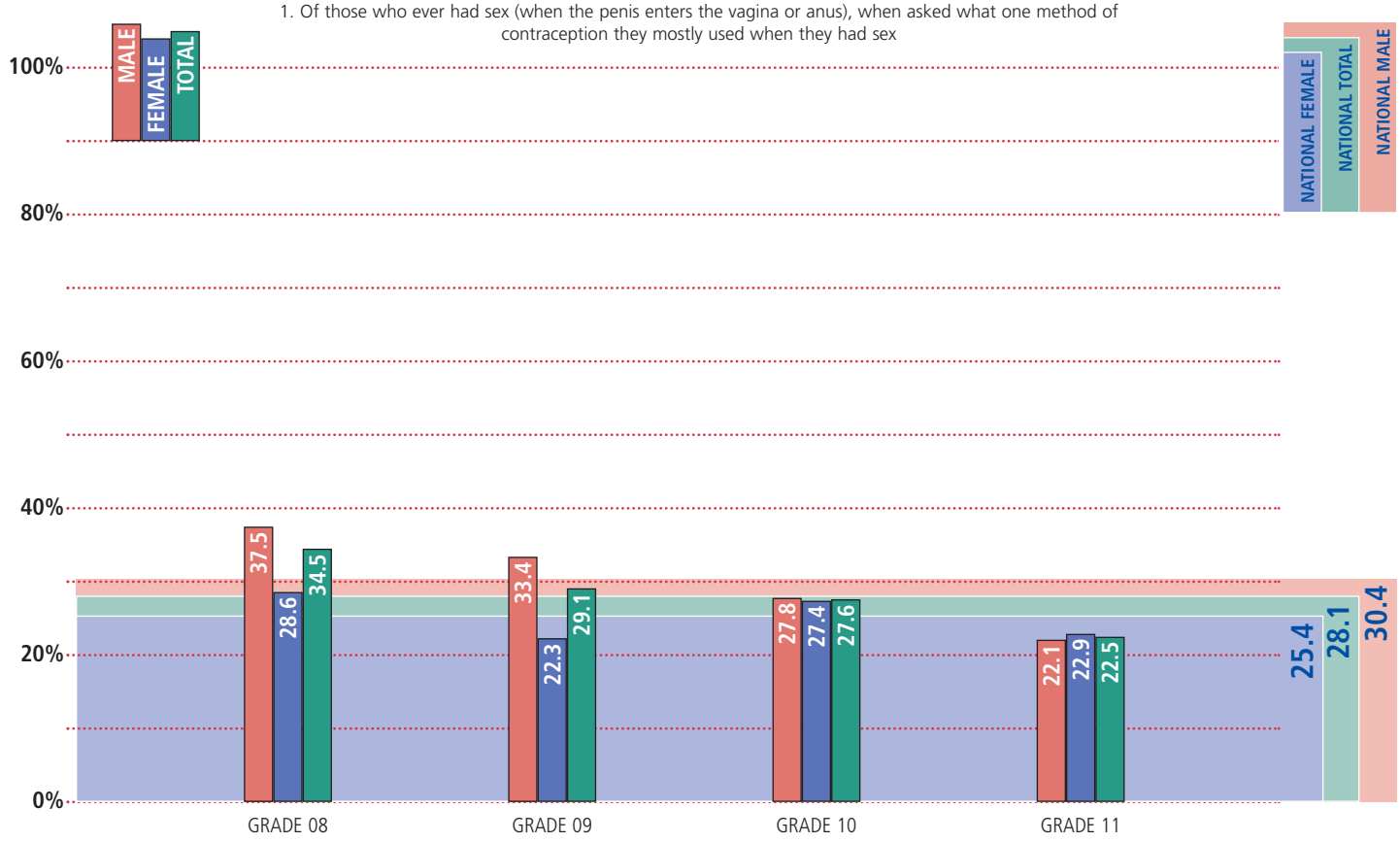
1. Had sex (when the penis enters the vagina or anus) before the age of 14



Graph 15: Percentage of high school learners who have had sex who mostly use no method of contraception by gender across grades

NO METHOD[1] OF CONTRACEPTION

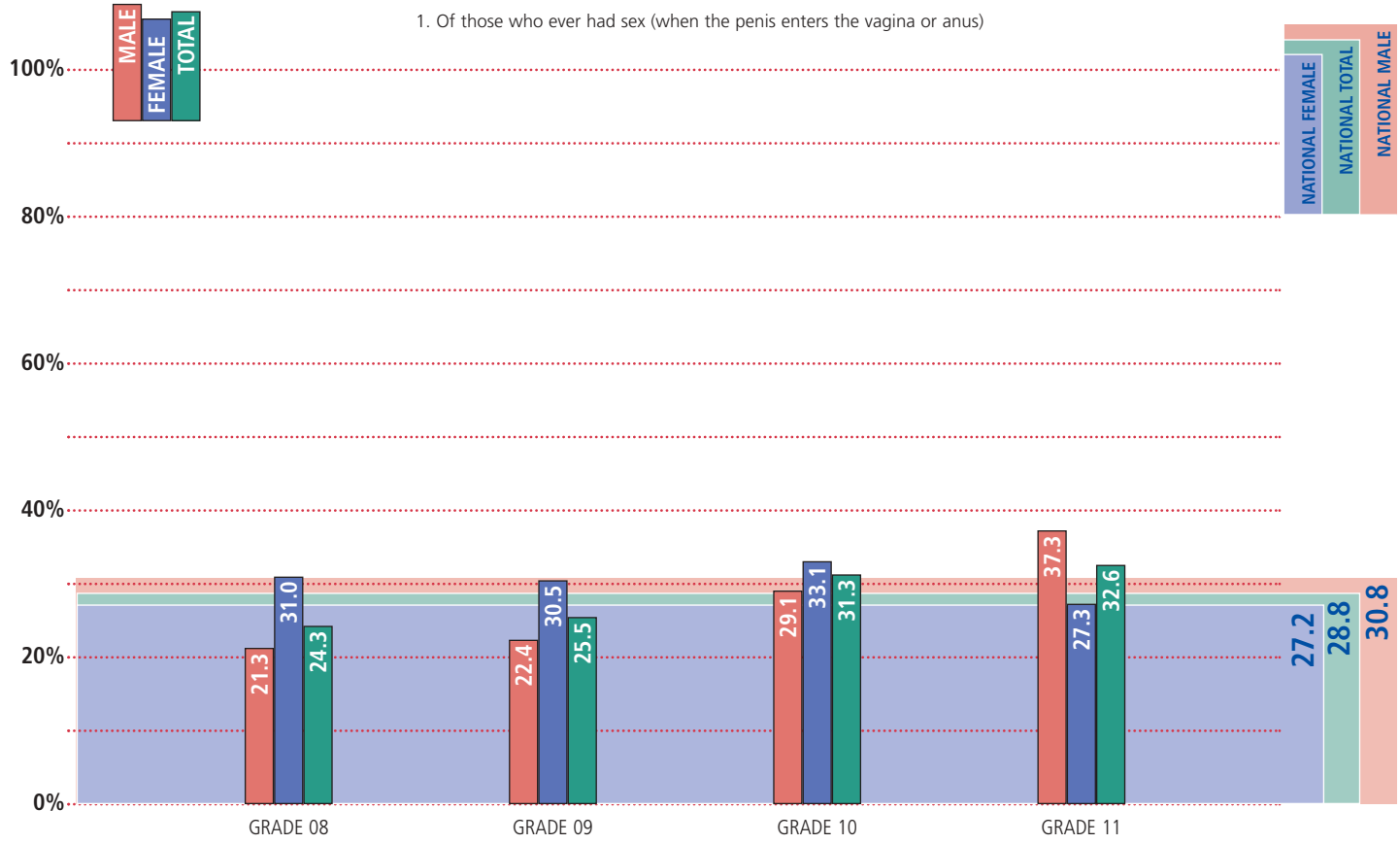
1. Of those who ever had sex (when the penis enters the vagina or anus), when asked what one method of contraception they mostly used when they had sex



Graph 16: Percentage of high school learners who have had sex who always use a condom by gender across grades

ALWAYS USE A CONDOM DURING SEX[1]

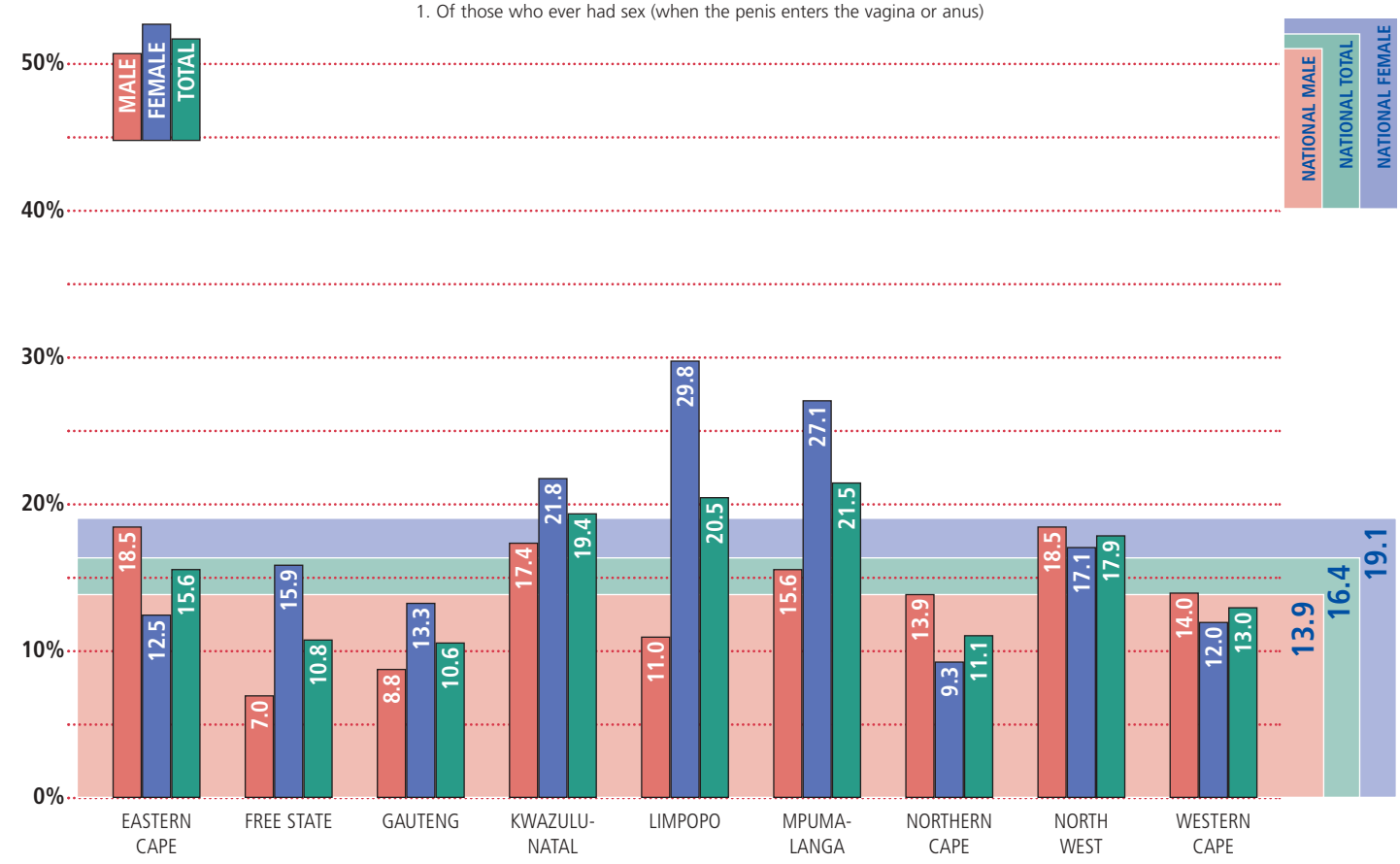
1. Of those who ever had sex (when the penis enters the vagina or anus)



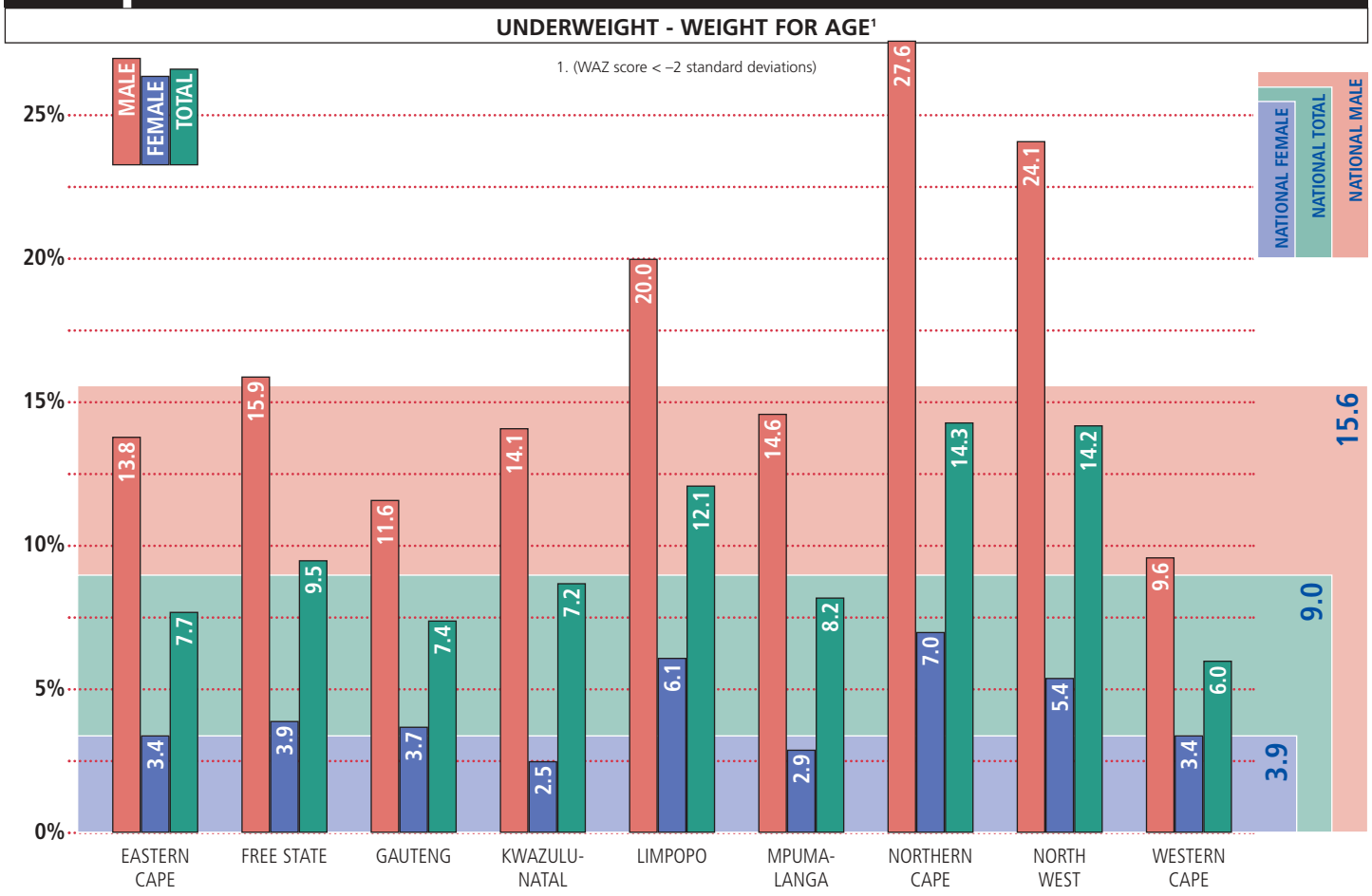
Graph 17: Percentage of high school learners who have had sex who have been pregnant or made someone pregnant by gender across the provinces

HAVE BEEN PREGNANT OR MADE SOMEONE PREGNANT[1]

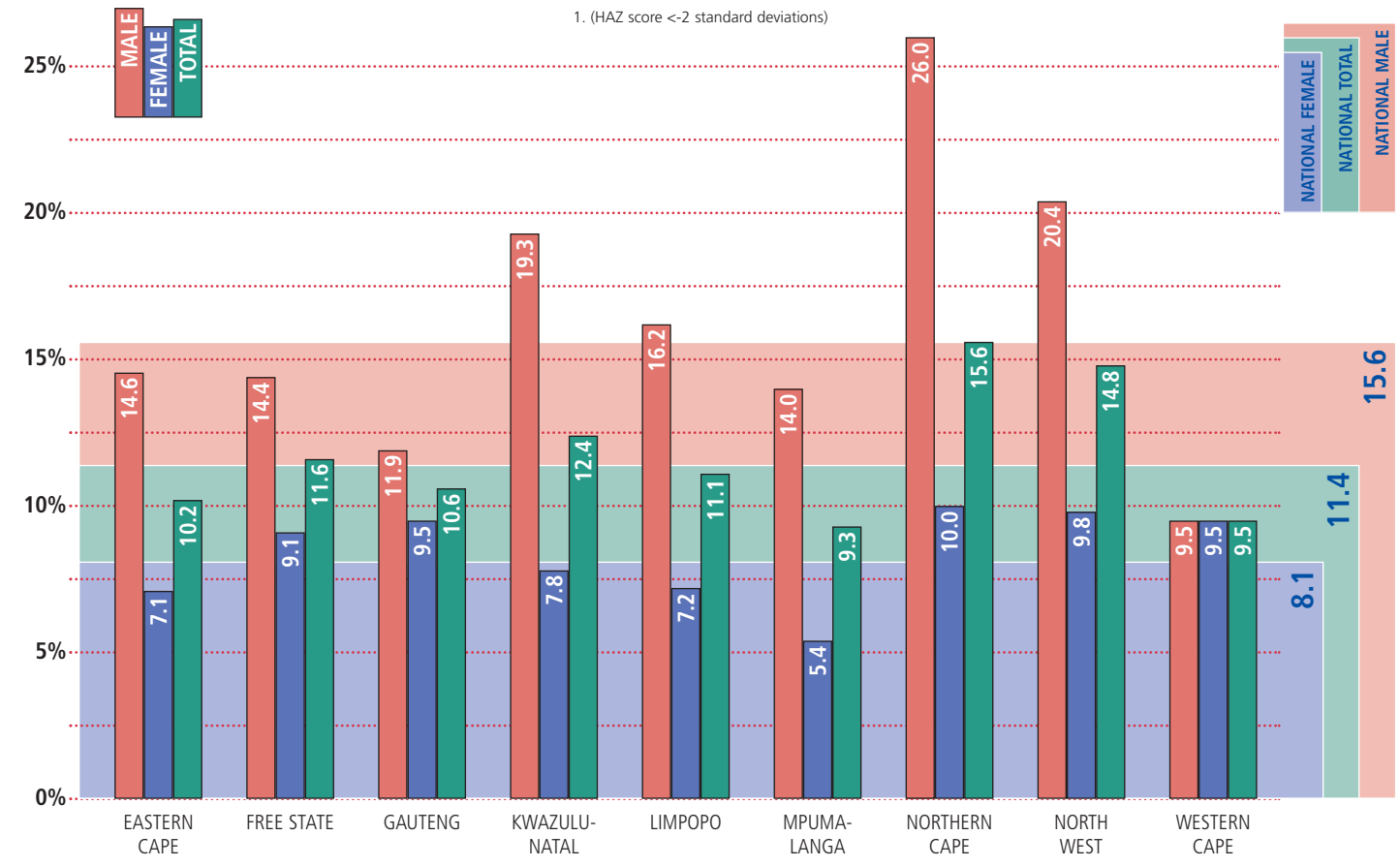
1. Of those who ever had sex (when the penis enters the vagina or anus)



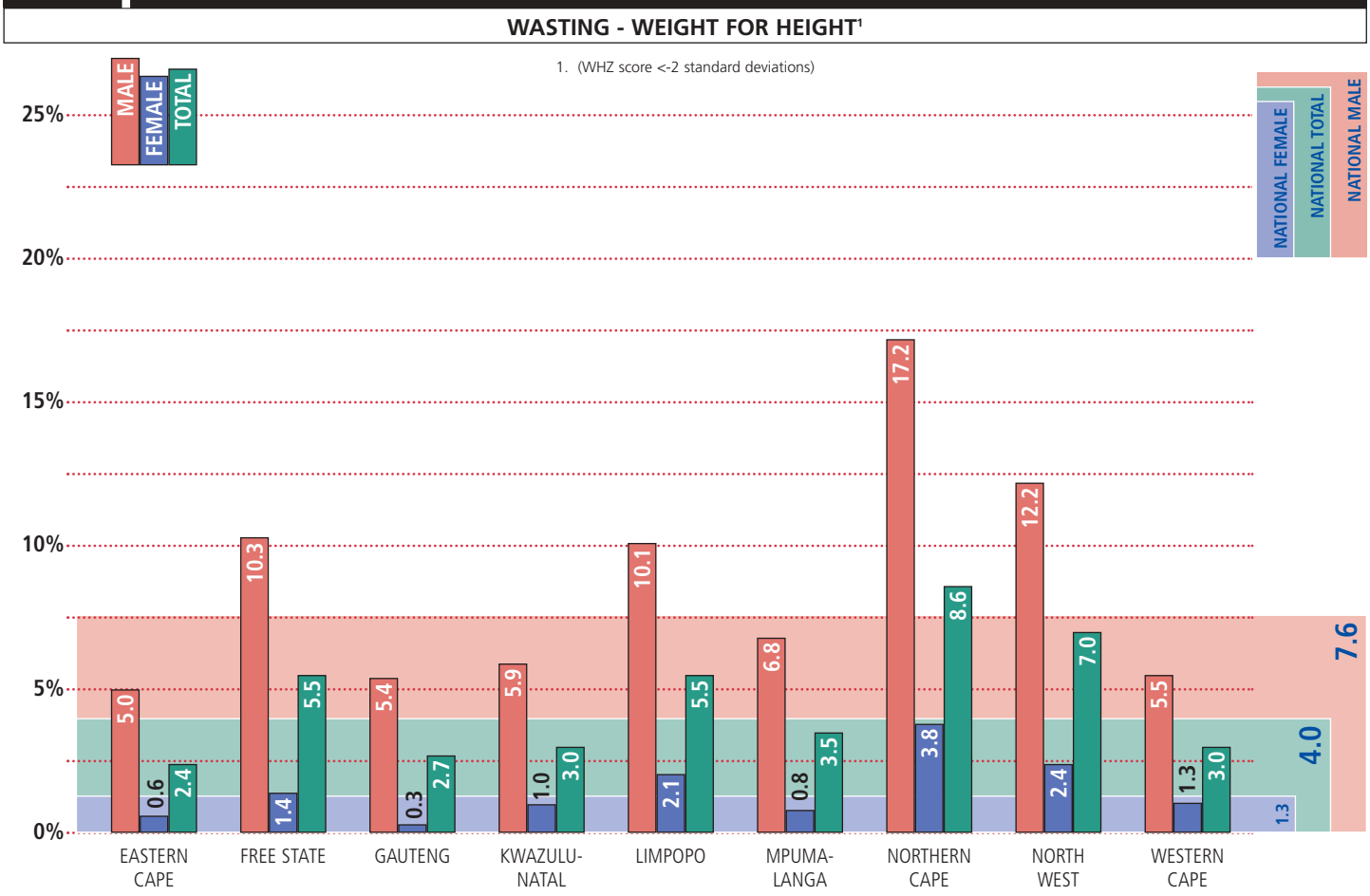
Graph 18: Percentage of high school learners who were underweight (low weight for age) by gender across the provinces



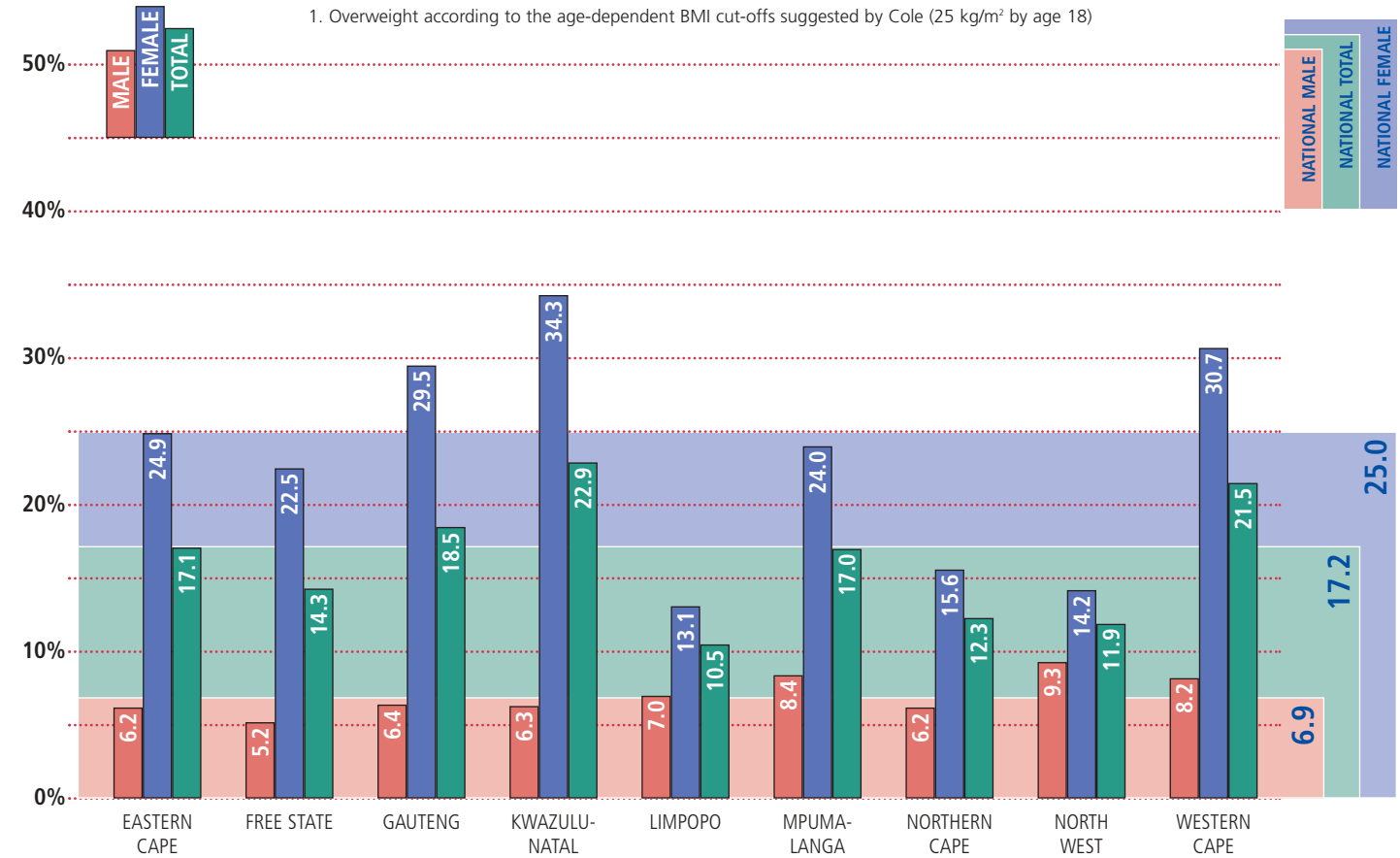
Graph 19: Percentage of high school learners who were stunted (low height for age) by gender across the provinces



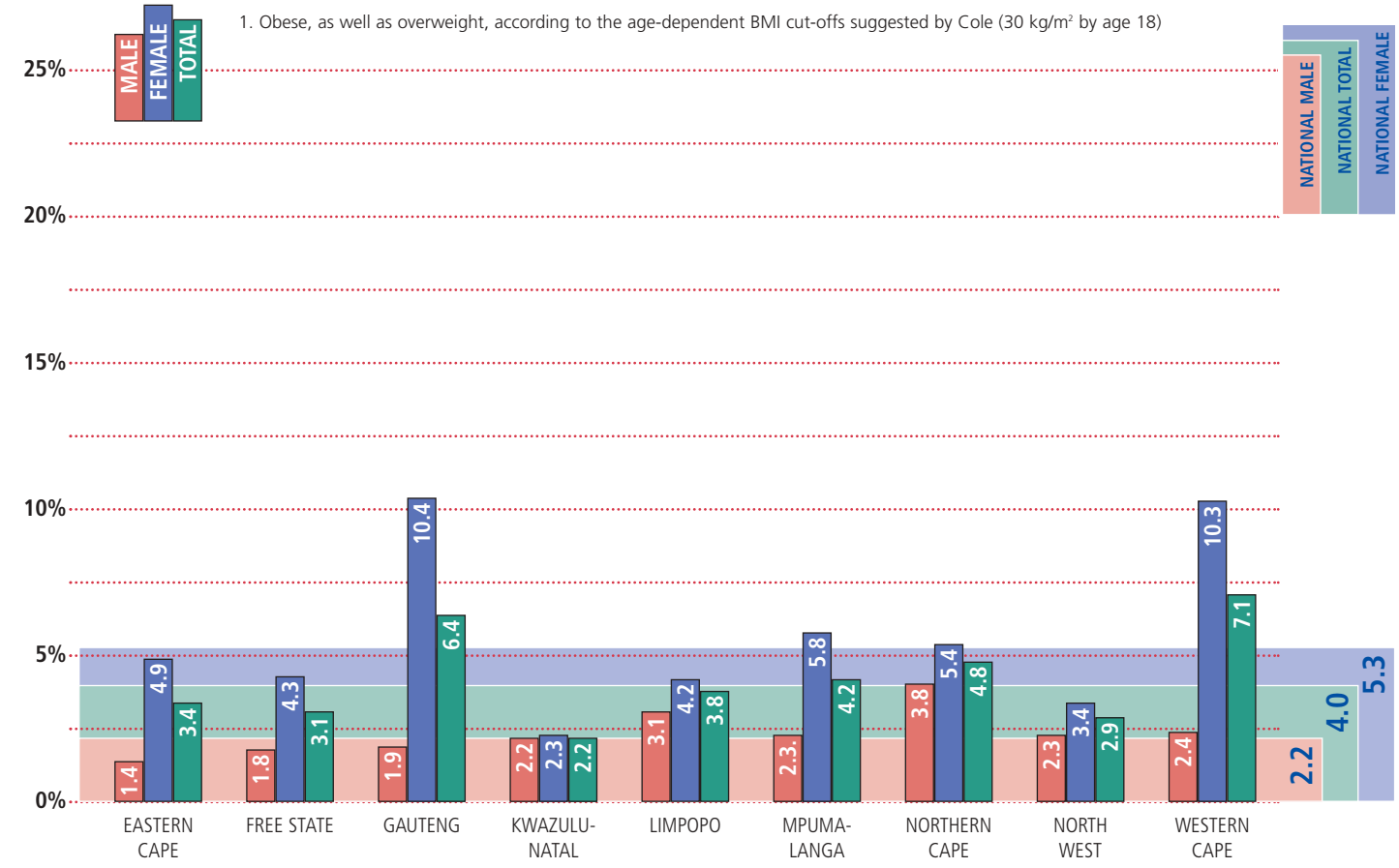
Graph 20: Percentage of high school learners who were wasted (low weight for height) by gender across the provinces



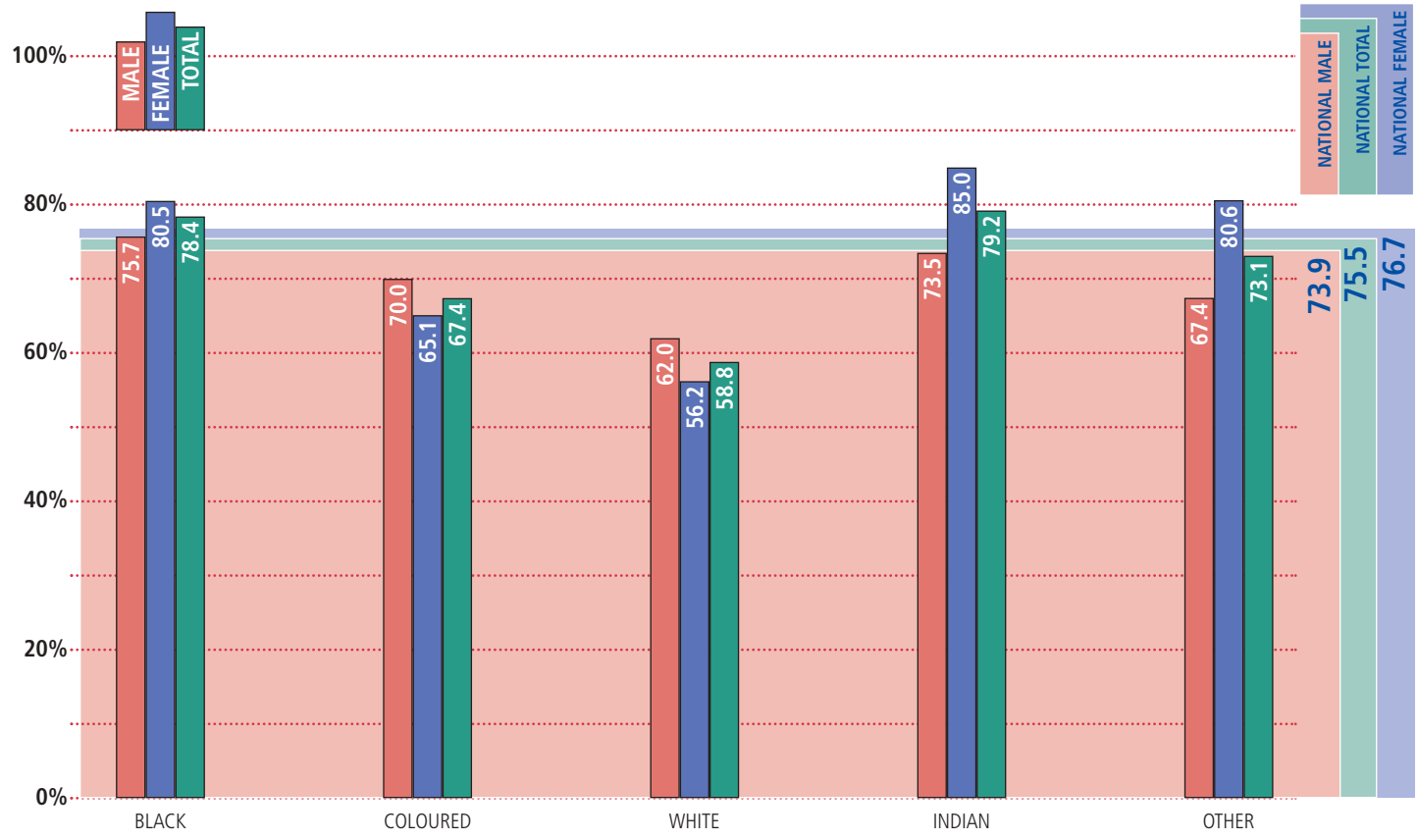
Graph 21: Percentage of high school learners who were overweight by gender across the provinces



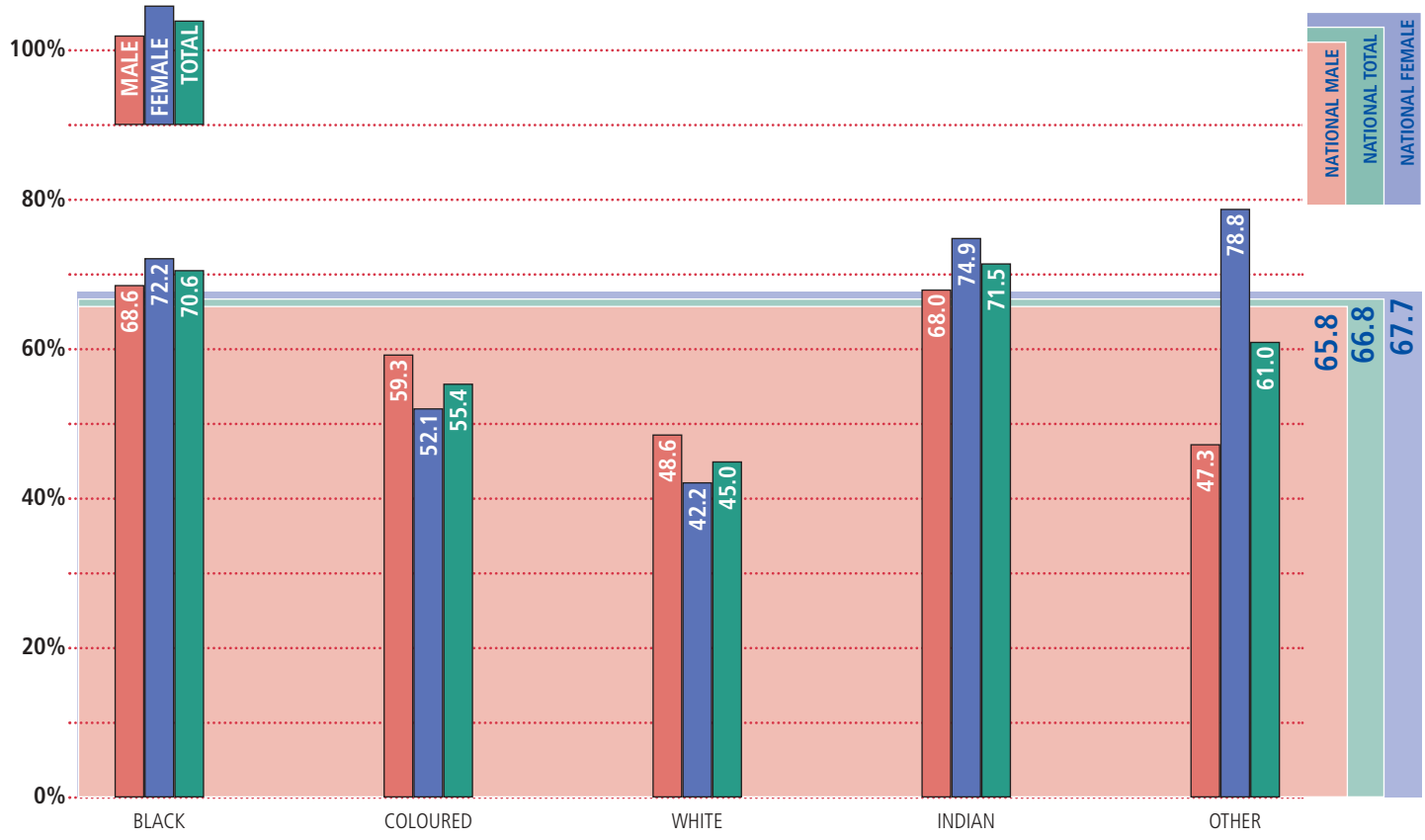
Graph 22: Percentage of high school learners who were obese by gender across the provinces



Graph 23: Percentage of high school learners who always washed their hands after going to the toilet by gender across the "races"



Graph 24: Percentage of high school learners who always washed their hands before eating by gender across the "races"



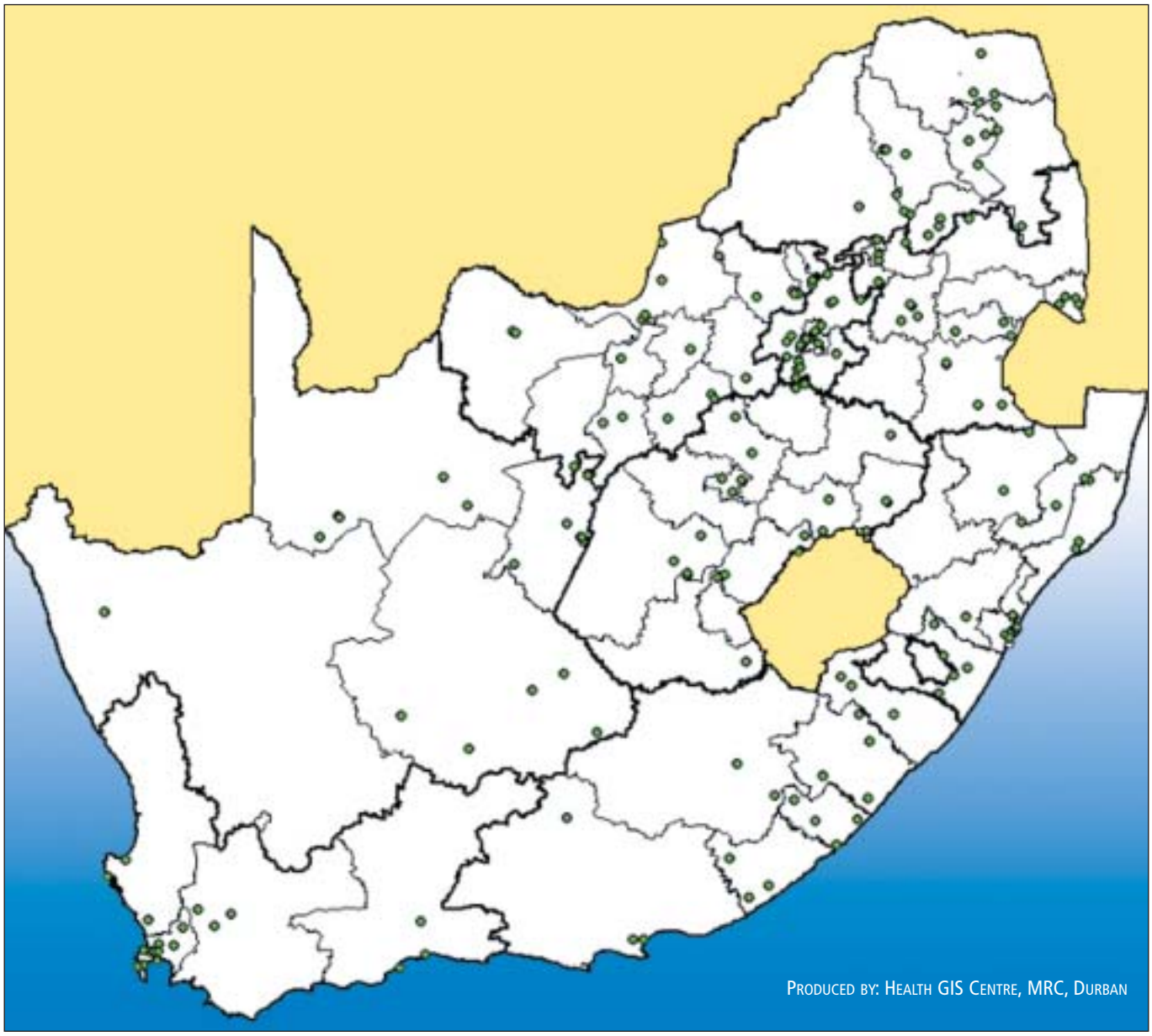


Figure VII: GIS Map of schools that were selected and that participated