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A STUDY OF RISKY SEXUAL BEHAVIOUR OF ADOLESCENTS IN SELECTED PUBLIC SECONDARY SCHOOLS IN SOUTHWEST, NIGERIA

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ABSTRACT

This study was undertaken to assess risky sexual behaviour of adolescents in public secondary schools in southwest, Nigeria. A multi-stage sampling procedure was employed for the selection of respondents for the study. In the first stage, purposive sampling technique was used to select schools whose heads and principals gave consent as well as students who gave assent to participate in the study in the three states namely Ekiti, Ogun and Osun states in Southwest, Nigeria. In the second stage, 30 schools per state were randomly selected. This was done by writing the names of all the schools on a piece of paper, folded up and put in a container then 30 schools were blindly picked from the container meant for each state. In the third stage, 10 students were randomly selected per school per state to give a total number of 300 per state and 900 students across the three selected states in the study area. Results of the study showed that 2.22% of the interviewed students admitted that they had used drugs while 97.78% admitted to the fact that they had never used drugs. Out of those students who claimed to have been involved in drugs, 75% used alcohol, 10% used tobacco, and 15% used cannabis. Also, research results reveal that use of drugs and substances was drastically low in the study Out of the 500 female students that were interviewed on whether they had ever had sexual intercourse, 9.80% claimed to have had sexual intercourse before while 90.20% claimed not to have ever had sexual intercourse. 59.18% claimed to have willingly had their first sexual encounter, 24.49% claimed to have been coerced/enticed to have had their first sexual encounter and 16.33% claimed to have been forced to have had their first sexual encounter. 69.40% claimed to have used contraceptive while 30.60% claimed not to have used contraceptives. With respect to methods of contraception, 55.10% of the female respondents claimed to have used condoms while 44.90% claimed to have used pills. Out of the 5 female respondents that admitted to the use of drugs, 80.00% claimed to use alcohol while 20.00% claimed to use tobacco. In addition, research results show that alcohol was the major substance being used in the study area. Out of the 400 male students that were interviewed on whether they had ever had sexual intercourse, 45.00% claimed to have had sexual intercourse before while 55.00% claimed not to have ever had sexual intercourse. 66.67% claimed to have willingly had their first sexual encounter, 22.22% claimed to have

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been coerced/enticed to have had their first sexual encounter and 11.11% claimed to have been forced to have had their first sexual encounter. Out of the 15 male respondents that admitted to the use of drugs, 73.33% claimed to use alcohol, 6.67% claimed to use tobacco, and 20.00% claimed to use cannabis. Table 6 shows that 11.11% of the interviewed female respondents who claimed to have had sexual intercourse before claimed to have been raped while 88.89% claimed not to have been raped. 80 male students (44.44%) admitted to have had STD. 62.50% claimed to have been diagnosed of chancroid, 37.50% claimed to have been diagnosed with syphilis. 90.00% claimed to have received treatment. 22.50% claimed to have been diagnosed with STD at the age of 13, 33.75% claimed to have been diagnosed with STD at the age of 15 and 43.75% claimed to have been diagnosed at STD at the age of 16. 120 female students (26.61%) admitted to have had STD. 62.50% claimed to have been diagnosed with chancroid, 37.50% claimed to have been diagnosed with syphilis. 95.83% claimed to have received treatment while 4.17% claimed not to have received treatment. 16.67% claimed to have been diagnosed with STD at the age of 13, 37.50% claimed to have been diagnosed with STD at the age of 15, and 45.83% claimed to have been diagnosed with STD at the age of 16. It can be concluded that youth are still engaging in risky sexual behaviour despite all the educative information and preventive measures availed to them. It is recommended that Youth be enlightened on risky sexual behaviour and their consequences.

Keywords: Adolescents, Risky Sexual Behaviour, Public Secondary Schools and Southwest, Nigeria

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INTRODUCTION

Adolescence, with its many changes, has long been considered a turbulent life stage, endemic with storms and stress (Al-Azar, 2015). In addition to pubertal stages, the adolescents face sociological and psychological challenges associated with peer relationships, their self identity and exploration of possible sexual relationships with the opposite sex. However, not all adolescents are affected by this turmoil. Most relate well with their families and peers and are comfortable with their social and cultural values (Ankrah, 2020). It is being a stage of turmoil, striking a balance between healthy adolescent sexual experimentation and emotionally and physically safe sexual practices is a major challenge for society. In adolescence, reasonable risk-taking is considered normal as it leads to confidence in forming new relationships, sports and social institutions (Ybarra and Mitchell, 2015). However, high risk behaviours are associated with serious negative consequences which include drugs and alcohol use, unsafe sexual practices, self injurious behaviour and reckless driving (Darroch, 2018).

Risky sexual behaviour refers to unprotected penetrative sexual contact which may involve initiation of sexual intercourse at an early age, multiple sexual partners, sexual intercourse under the influence of alcohol or other substances of abuse, lack of contraceptive use, sexual intercourse under coercion and sexual abuse. Factors that influence adolescent sexual behaviour include personality traits, gender, cultural and religious background, racial factors, family attitudes, sex education and prevention programs (Witbeck *et al.*, 2020). However, psychosexual factors also come into play, as they affect personality, growth, development and functioning of the adolescent. These include sexual identity, gender identity, sexual orientation and sexual behaviour (Dilorio, 2020). Risky sexual behaviour exposes the adolescents to harmful consequences, both physical and psychological. These include teenage pregnancy, sexually transmitted infections and diseases, abortion, major

depression, suicide, post traumatic stress disorder (PTSD) among others (Dittus and Jaccard, 2016).

Other issues of concern as regards adolescent sexual behaviour are casual sex, use of contraception, abortion, masturbation, pornography and prostitution. These also need to be addressed as they may have psychological consequences to the adolescent, such as regret and guilt, loss of self respect and low self esteem, stunting personal development, shaken trust and fear of commitment in future relationships (Beasamin and Bruckner, 2019). This research will be undertaken to determine the risky sexual practices of adolescents attending public secondary schools in Southwest, Nigeria

Globally, the average age at which teenagers begin to have sex has steadily decreased. The risk of unplanned pregnancy, HIV infection and other Sexually Transmitted Infections increases with the frequency of unprotected sexual intercourse (Aspy, 2019). In the last several decades, there have been substantial increases in the proportion of adolescents who report sexual activity at each year of age (Erulkar, 2018). Thus, more than twice as many females aged 14, 15, and 16 are sexually active now, compared with young women of the same ages just 15 years ago (Barker and Rich, 2022).

In Nigeria, most of the studies that were done on adolescent sexuality were in the 1990s, hence there is need to find out if there are any changes in the trends of sexual behaviour currently. Based on the magnitude of the problem and the gaps of knowledge in this area, this study sets out to study risky sexual behaviour among adolescents attending public secondary schools in Southwest, Nigeria. Many adolescents still choose to initiate sexual intercourse and engage in risky sexual behaviour despite knowledge of the consequences. Their decision is influenced by various factors as seen between ages 13 and 18.

Studies had found out that 17% of teenagers between 13 and 18 years who have had an intimate encounter confessed that they have done something sexual while under the influence of drugs or alcohol (Weiss *et al.*, 2018). Adolescents whose friendship network include mostly low-risk friends is half as likely to experience first intercourse compared to adolescents whose close friend network is composed mostly of high-risk friends (Bearman and Brückner, 2019).

Parents' marital status, family structure and stability are sine-qua non to adolescents' sexual behaviour. Adolescents who intentionally seek out pornography both online and offline were found to be older youth, mostly male (Bersamin *et al.*, 2021). A more complete understanding of these challenges requires wholesome approach towards their mental wellbeing. Hence, there is therefore the need to address psychological effects of their sexual behaviour. How the adolescents themselves perceive the socio-economic, health and psychological implications of their sexual behaviours is also important to note, as this will help them to make better decisions in future.

RESEARCH METHODOLOGY

Area of Study

The study will be carried out in the Southwest, Nigeria. Southwest, Nigeria lies between longitude 2^0 42' and 6^0 03'East of Greenwich and latitude 5^0 49' and 9^0 17' North of the equator (Balogun, 2013). The Southwest comprises Osun, Ogun, Ondo, Ekiti, Oyo, and Lagos States. Three states are selected (Ekiti, Ogun and Osun) for this study. Figure 1 shows the map of Nigeria indicating the study area. Southwestern Nigeria is bounded in the North

by Kwara and Kogi States and in the East by Edo State. In the West, the study area is bounded by Republic of Benin and in the South by the Atlantic Ocean. The total population of the six states according to the 2006 National Census is 27,722,427 (NPC, 2006), while the total land mass of the study is 67,174.6 km^2. There are 690, 969 and 141 public secondary schools in Osun, Ogun and Ekiti states respectively.

Sampling Procedure

A multi-stage sampling procedure will be employed for the selection of respondents for the study. In the first stage, purposive sampling technique was used to select schools whose heads and principals gave consent as well as students who gave assent to participate in the study in the three states namely Ekiti, Ogun and Osun states in Southwest, Nigeria. In the second stage, 30 schools per state were randomly selected. This was done by writing the names of all the schools on a piece of paper, folded up and put in a container then 30 schools were blindly picked from the container meant for each state. In the third stage, 10 students were randomly selected per school per state to give a total number of 300 per state and 900 students across the three selected states in the study area.

Methods of Data Collection and Analysis

Primary data were collected from the students in 2023 with a structured pre-tested questionnaire. The students were reassured that their identity would not be revealed, hence their confidentiality would be safeguarded. No teacher was allowed into the classroom so as to prevent bias. The researchers explained to the participants how to fill the questionnaire and grant them adequate time of about one hour, to fill it. The filled questionnaires were collected by the researchers on spot and stored in a waterproof bag and securely delivered to the data entry point for data management and processing. Data were analysed using frequency counts, percentages and inferential statistics.

RESULTS AND DISCUSSION

Table 1: Employment status of parents and guardians

Parents	Self-employed (%)	Employed (%)	Unemployed (%)
Mother	180 (20.00%)	220 (24.44%)	20 (2.22%)
Father	230 (25.56%)	185 (20.56%)	4 (0.44%)
Guardian	35 (3.89%)	24 (2.67%)	2 (0.22%)

The table above shows that 20.00% of the mothers of the interviewed students were self-employed, 24.44% were employed, 2.22% were unemployed while out of the fathers of the interviewed students, 25.56% were self-employed, 20.56% were employed, 0.44% were unemployed and also, out of the guardians of the interviewed students, 3.89% were self-employed, 2.67% were employed and 0.22% were unemployed. It implies that a good number of the parents and guardians were productively engaged.

Table 2: Use of Drugs/ Substances of abuse

Frequency	Percentage (%)
Use of Drugs Yes No **Total**	 20 (2.22%) 880 (97.78%) **900**
Types of drugs used Alcohol Tobacco Cannabis Khat Heroin Cocaine **Total**	 15 (75%) 2 (10%) 3 (15%) - - - 20

Table 2 shows that 2.22% of the interviewed students admitted that they had used drugs while 97.78% admitted to the fact that they had never used drugs. Out of those students who claimed to have been involved in drugs, 75% used alcohol, 10% used tobacco, and 15% used cannabis. Research results reveal that use of drugs and substances was drastically low in the study

TABLE 3: SEXUAL EXPERIENCE OF THE FEMALE RESPONDENTS

Sexual experience	Frequency	Percentage (%)
Ever had sexual intercourse? Yes No **Total**	 49 451 **500**	 9.80 90.20 **100**
First sexual encounter Willing Coerced/ enticed Forced **Total**	 29 12 8 **49**	 59.18 24.49 16.33 **100**
Contraceptive use Yes No **Total**	 35 14 **49**	 69.4 30.6 **100**
Methods of contraception Condoms Pills **Total**	 27 22 49	 55.10 44.90 **100**
Use of drugs/ substances Yes No **Total**	 5 - **5**	 100 - **100**
Types of drugs/substances Alcohol	 4	 80.00

Tobacco	1	20.00
Cannabis	-	-
Khat	-	-
Total	**5**	**100**

Out of the 500 female students that were interviewed on whether they had ever had sexual intercourse, 9.80% claimed to have had sexual intercourse before while 90.20% claimed not to have ever had sexual intercourse. 59.18% claimed to have willingly had their first sexual encounter, 24.49% claimed to have been coerced/enticed to have had their first sexual encounter and 16.33% claimed to have been forced to have had their first sexual encounter. 69.40% claimed to have used contraceptive while 30.60% claimed not to have used contraceptives. With respect to methods of contraception, 55.10% of the female respondents claimed to have used condoms while 44.90% claimed to have used pills. Out of the 5 female respondents that admitted to the use of drugs, 80.00% claimed to use alcohol while 20.00% claimed to use tobacco. Research results show that alcohol was the major substance being used in the study area.

TABLE 4: SEXUAL EXPERIENCE OF THE MALE RESPONDENTS

Sexual experience	**Frequency**	**Percentage (%)**
Ever had sexual intercourse?		
Yes	180	45.00
No	220	55.00
Total	**400**	**100**
First sexual encounter		
Willing	120	66.67
Coerced/ enticed	40	22.22
Forced	20	11.11
Total	**180**	**100**
Use of drugs/ substances		
Yes	15	100
No	-	-
Total	**15**	**100**
Types of drugs/substances		
Alcohol	11	73.33
Tobacco	1	6.67
Cannabis	3	20.00
Khat	-	-
Total	**15**	**100**

Out of the 400 male students that were interviewed on whether they had ever had sexual intercourse, 45.00% claimed to have had sexual intercourse before while 55.00% claimed not to have ever had sexual intercourse. 66.67% claimed to have willingly had their first sexual encounter, 22.22% claimed to have been coerced/enticed to have had their first sexual encounter and 11.11% claimed to have been forced to have had their first sexual encounter. Out of the 15 male respondents that admitted to the use of drugs, 73.33% claimed to use alcohol, 6.67% claimed to use tobacco, and 20.00% claimed to use cannabis.

TABLE 5: SEXUAL ABUSE/ RAPE EXPERIENCE

Sexual Abuse/Rape Experience	**Percentage (%)**	
Ever been raped/sexually abused?		
Yes	20	11.11
No	160	88.89
Total	**180**	**100**
Who was the perpetrator?		
Boyfriend	5	25.00
Brother	1	5.00
Cousins	1	5.00
Friend	4	25.00
Gangster	3	15.00
Sister's friend	1	5.00
Step-father	3	15.00
Sugar-mummy	1	5.00
Teacher	-	-
Uncle	-	-
I don't know	-	-
Total	**20**	**100**
Was it reported?		
Yes	14	70.00
No	6	30.00
Total	**20**	**100**
Reported to whom?		
Mother	9	64.29
Father	2	14.29
Sister	1	7.14
Brother	-	-
Police	2	14.29
Total	**14**	**100**

Table 5 shows that 11.11% of the interviewed female respondents who claimed to have had sexual intercourse before claimed to have been raped while 88.89% claimed not to have been raped. 25% claimed to have been raped by their boyfriend, 5.00% claimed to have been raped by their brother, 5.00% claimed to have been raped by their cousins, 25.00% claimed to have been raped by their friend, 15.00% claimed to have been raped by a gangster, 5.00% claimed to have been raped by their step-father, and 15.00% claimed to have been raped by their sugar-mummy.

Table 6: Sexually Transmitted Diseases

Sexual Transmitted Diseases	Male Frequency	Percentage (%)	Female Frequency	Percentage (%)
Ever had STD?				
Yes	80	44.44	120	26.61
No	100	55.56	331	73.39
Total	**180**	**100**	**451**	**100**
Diagnosis				
Chancroid	50	62.50	75	62.50
Syphilis	30	37.50	45	37.50
I don't know	-	-	-	-
Total	**80**	**100**	**120**	**100**
Received treatment?				
Yes	72	90.00	115	95.83
No	8	10.00	5	4.17
Total	**80**	**100**	**120**	**100**
Age when diagnosed with STD				
13	18	22.50	20	16.67
15	27	33.75	45	37.50
16	35	43.75	55	45.83
Total	**80**	**100**	**120**	**100**

80 male students (44.44%) admitted to have had STD. 62.50% claimed to have been diagnosed of chancroid, 37.50% claimed to have been diagnosed with syphilis. 90.00% claimed to have received treatment. 22.50% claimed to have been diagnosed with STD at the age of 13, 33.75% claimed to have been diagnosed with STD at the age of 15 and 43.75% claimed to have been diagnosed at STD at the age of 16. 120 female students (26.61%) admitted to have had STD. 62.50% claimed to have been diagnosed with chancroid, 37.50% claimed to have been diagnosed with syphilis. 95.83% claimed to have received treatment while 4.17% claimed not to have received treatment. 16.67% claimed to have been diagnosed with STD at the age of 13, 37.50% claimed to have been diagnosed with STD at the age of 15, and 45.83% claimed to have been diagnosed with STD at the age of 16.

CONCLUSION AND PREVENTION AND INTERVENTION PROGRAMMES

The youth are still engaging in risky sexual behaviour despite all the educative information and preventive measures availed to them. Alcohol and other substance use are associated with risky sexual behaviour, especially during their first sexual intercourse. Youth programmes must be regularly organised to inform the youth more about risky sexual behaviour and their consequences. The programmes should also emphasize on the psychological and mental health consequences of risky sexual behaviour, especially in the area of substance abuse.

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