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The Sexual Behaviour of Adolescents in Shagari Low-Cost Housing Estate, Maiduguri, Borno State

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ASBSTRACT: The search for work looked at the adolescents' Sexual Behaviour in Shagari Low Cost Housing Estate, Gubio Road, Maiduguri, Borno State. The aim of the study was to isolate major factors that bedeviled adolescents' sexual behaviour in the Estate (Shagari Low Cost) during the period under study. Both male and female adolescents made up the population for the study and the instruments used were questionnaires and the data generated were analysed by simple frequency percentages. The following were discovered: the socio-economic status affected adolescents' sexual behaviours; children whose parents were separated engage more in sexual activities at adolescence; lack of usage and knowledge about contraceptive as well as sexual education affected sexual behaviour of adolescents. Sequel to the findings, it is recommended that government and non-governmental organization (NGOs) need to come up with multifaceted educational programmes such as workshops, mass media, religious programmes on youths sexuality issues, collaborative efforts among the parents, teachers, health workers involving the adolescents be encouraged and embarked upon and programmes so far carried out in that regard be reviewed from time-to-time, etc.

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I. INTRODUCTION

Background of the Study

Deviant adolescents' sexual behaviour has been a time-bomb globally sparing virtually no single nation. Nigeria being one of the most populous African nations has female adolescents' birth rate as one of the highest in the world with the prevalence of sexually transmitted infections (STI) among female adolescents of one of which includes HIV/AIDS on the rapid growth. The reduction in its maternal and infant death rates not being feasible inspite of the rapid increase in sexually transmitted diseases alongside the climbing rate of adolescents dropping out of school. There is therefore the need for global focus in adolescents reproductive health activities such as the consequences of adolescents' sexual activities, early/unwanted as well as unplanned pregnancies, unsafe abortion, STI and HIV/AIDS enlightenment campaigns etc. The isolation of adolescents as the target is because available records implicate the same category as being on the high side of the ladder in the society. It has been also observed that the growing trends of sexual activities send signals of threat to the survival of the societal norms and even that of the society itself. The rate of speed at which the menace has been growing in the recent past is worrisome and alarming. However, national reproductive health policy was developed in Nigeria in the year 2000 to check and prevent risky sexual behaviours targeted at the adolescents. The programme was short-lived due to outdated and incomplete information on the sexual knowledge, attitudes and behaviours of the adolescents at that time. The need to clarify issues before intervention in the subject matter such as for example sex education was later evaluated in Nigeria and Ghana. Records available to researchers in Nigeria have shown that pregnancy and motherhood marked the end of school attendance, and by the age 16, twenty-one percent of female adolescents would have either been pregnant or have given birth. The role of family and school as impacted on adolescent well-being have been severally indicated in studies done by scholars in North America as well as Western Europe. Similar studies were carried out by Baker and Rich (2000) in Nigeria and Kenya. The facts still remains that parents play the foremost role in the lives of their children. It is therefore pertinent to find out some loopholes of the parents such as the poor socio-economic status, lack of parental interest and discipline to initiate and hold discussion on sexuality issues with their children.

DOI: 10.9790/0837-2502064145 www.iosrjournals.org 41 | Page

II. LITERATURE REVIEW

Evidences were abound from the researches carried out by scholars around the world on sexual behaviours of adolescents. These findings have demonstrated numerous set-backs and difficulties noted by the abusers. The set-backs ranged from common pregnancy situations to as huge social life difficulties like illiteracy, poverty and even death.

Sorecan (1998) reported on the study he carried on 96 adolescents that one third (a) of them expressed guilt over their behaviour and sixty (60%) percent of them felt that women should be virgin when they get engaged in marriage.

Zelnic and Kanter (1999) carried out a research on the topic "why adolescents engage in sexual behaviours". They found out among others that it is a way of communicating with their partners as well as a way of punishing or rewarding people who are close to them (adolescents) for being neglected or too strict on them.

Baker and Rich (2000) found that 35 out of 156 respondents had their first intercourse experiences outside contraception in Nigeria and Kenya.

Sorensen (1999) conducted similar study in Abia state on 108 students and observed that use of contraceptives constitute additional problems to adolescents. Women find it difficult to discuss issues of contraceptives with their partners and so are not willing to address it at all.

Wright (1998) involved 200 Gambian adolescent girls and found that the girls are unwilling to discuss contraceptives with their partners lest they get wrong impression that the girls are knowledgeable about contraceptives.

Resnick and Harris (1999) use 180 students to study a topic, "Sexual activities of adolescents." They found that at age 13 years is 5.5 percent with white students, 20.5 percent with black students and 9.2 percent (Hispanics). While 3.9 percent of the female students had their past or current pregnancy as a result of lack of education on sexuality or lack of exposure to the use of contraceptives.

Donna, Ruane and Movrison (2002) studied complexity of adolescents pregnancy problems and multiplicity factors placing adolescents at risks. Out of 98 adolescents, 77 percent Hispanic pregnant teens claimed that female adolescents should have their first sexual experience by the tenth grade while the 20 percent non-pregnant had no such belief.

Dana A. Gle (2002) made use of 300 adolescents to find out adolescents' sexual behaviour and factors that affect them in India. He discovered that adolescents sexual behaviour could be affected by exposure to alcohol or drug abuse and multiple sex partners.

Zastrow (1997) subjected 1000 teenage African in a study on "Problems affecting adolescents' sexual behaviour". He isolated sex education, information on the use of pills, diaphragm, cervical cap, withdrawal method, condom, spermicides, rhythm method, calendar base, body temperature etc, as the methods of contraception needs to be strengthen in order to nurture a strong and healthy sexual behaviour among adolescents in the community and individually too. Also identified is less attention payed to males by intervention outfits with emphasis to females with lack of recognition to males in case of teenage pregnancy discouragement. As a result of this, few programmes are designed for both female and male adolescents on sexual activities.

Asuquo and Atere (2000) on the topic, "Associated problems with adolescent sexual behaviour" realized that this sexual character set have always created both individual and societal teenage pregnancy, fear of sex, low sex drive, divorce squabbles and inharmony of families, over population with its usual hardships on existing resources for food, shelter, clothing as well as other emotional needs whose changing nature always demand for evaluation and understanding of its nature.

Kirby (2001) carried out a research on 230 adolescent girls age 10-25 years in Ghana on problems associated with adolescents' sexual behaviour and discovered that adolescent girls became fertile following the menarche which occurs in United State at an average age of 11.5/12.5 years, although it can vary widely between different girls.

John S. Stanelli et al., (2000) use 400 young women in conducting national survey and found out the growing rate in pre-marital sexual intercourse among teenage women in United State. The researchers discovered that United State adolescents score higher number of unplanned pregnancies which were usually terminated through abortion than those of adults. The results revealed that adolescents who had highest age specific rates of sexually transmitted diseases (STDs) initiated sexual intercourse earlier. This coupled with unwanted pregnancy load a huge costs in human pains and sufferings in terms of social and economic opportunity, social welfare and health care. They found that taking cognizance of the impact of these behaviours, the public health community has set national goals for delaying the initiation intercourse, heightening the use of condoms and other contraceptives. They were of the views that if adolescent sexual behaviour is delayed or prevented, there will be no unwanted pregnancy and the rate at which the adolescents contact HIV/AIDS will be much lower. Collaborative efforts among the parents, teachers, health workers

involving the adolescents be embarked upon. Also programmes so far carried out in that regard be reviewed from time to time.

III. RESULTS

Objective I (Table I) items 1 - 5.

To find out whether lack of parental interest and discipline to discuss sex education and contraception with their children affect adolescent sexual behaviours.

Table I: This table indicates respondent' responses on the willingness to offer sexual education and contraceptives in the Estate. 52.6 percent of the respondents agreed that parents should sacrifice time with children at home. 33.7 percent of the parents agreed strongly. While 10.5 and 2.1 percent disagreed and strongly disagreed respectively. Only 1.1 were undecided.

Table II: Item 6 stated that most parents in the Estate were educated enough. 49.5 percent and 29.5 percent agreed and strongly agreed respectively. On the other hand, 7.3 and 4.2 percents of the respondents disagreed and strongly disagreed respectively. Meanwhile, 9.5% of the respondents were undecided.

On item 7, 34.7% and 26.3% of the respondents agreed and agreed strongly respectively and so on and so forth.

Table 1: Distribution showing responses on parental interest in giving sex education/contraceptives

S/No	ITEMS	SA	%	A	%	SD	%	D	%	UD	%
1.	Parents spend enough time	32	33.7	50	52.6	2	2.1	10	10.5	1	1.1
	to take care of their children										
	at home.										
2.	Parents are exposed to the	13	13.7	36	37.9	23	24.2	20	21.1	3	3.1
	use of contraceptives.										
3.	Parents are not interested in	19	20.0	35	36.9	19	20.0	18	18.9	4	4.2
	discussing sex education										
	with their children.										
4.	Parents are not exposed to	7	7.4	36	37.9	27	28.4	17	17.9	8	8.4
	the use of contraceptive										
	methods.										
5.	Parents expose their children	9	9.5	25	26.3	22	23.2	23	24.2	16	16.8
	to contraceptive methods.										

Objective II: Items (6-10)

Table 2: Percentage distribution showing subject responses on educational qualification of parents

S/No	ITEMS	SA	%	A	%	SD	%	D	%	UD	%
6.	Parents are sufficiently educated.	28	29.5	47	49.5	7	7.3	4	4.2	9	9.5
7.	The level of education does not affect adolescents sexual behaviours.	25	26.3	33	34.7	17	17.9	15	15.8	5	5.3
8.	Educational qualification of prents encourage adolescents' sexual behaviours.	19	20.0	33	34.7	21	22.1	17	17.9	5	5.3
9.	Children of poorly educated mothers engage more in pre-marital sexual behaviours.	29	30.5	28	29.5	20	21.1	14	14.7	4	4.2
10.	Mothers who are educated are more caring than those who are not	35	36.8	36	37.9	7	7.4	6	6.3	11	11.6

Objective III

Table 3: Items (11 - 14) showing percentage distribution of subjects' responses on socio-economic status of parents

Partition												
	S/No	ITEMS	SA	%	Α	%	SD	%	D	%	UD	%
	11.	Children of low income	20	21.0	41	43.2	14	14.7	13	13.7	7	7.4
		status engage more in										

	adolescents' sexual behaviour										
12.	Parents' low income status do not affect sexual activities of the adolescents	19	20.0	26.	27.4	26	27.4	13	13.7	11	11.5
13.	Rich parents' children are more exposed early sexual behaviour.	45	47.4	18	18.9	9	9.5	11	11.6	12	12.6
14.	Parents with poor socio- economic background expose their children to early sexual behaviour.	18	18.9	26	27.4	12	12.6	15	15.8	24	25.3

Objective IV

Table 4: Items (15 – 18) A parentage distribution showing respondents' on marital status and living arrangement

Table 4. Items (15 – 16) A parentage distribution showing respondents on marital status and riving arta											Sement
S/No	ITEMS	SA	%	Α	%	SD	%	D	%	UD	%
15.	Children whose parents are	28	29.5	38	40.0	15	15.7	9	9.5	5	5.3
	living together are not										
	exposed to early sexual										
	activities.										
16.	Parents who are not living	15	15.8	37	38.9	18	18.9	15	15.8	10	10.5
	together, separated or										
	divorced do not expose their										
	children to sexual activities.										
17.	Parents who live together	49	51.6	37	38.9	8	8.4	0	0.0	1	1.1
	give the best education to										
	their children.										
18.	Older members of the	25	26.3	24	25.3	13	13.7	16	16.8	17	17.9
	community exploit children										
	who are not living with their										
	parents to early unprotected										
	sexual contact activities.										

The Summary of the Responses to the Questionnaire

Item	Strongly agreed					disagreed		undecided		Total		
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
1	32	33.7	50	52.6	2	2.1	10	10.5	1	1.1		100
2	13	13.7	36	37.9	23	24.2	20	20.1	3	3.1		100
3	19	20.0	35		19	20.0	18	18.9	4	4.2		100
4	7	7.4	36	37.9	27	28.4	17	17.9	8	8.4		100
5	9	9.5	25	26.3	22	23.2	23	24.2	16	16.8		100
6	28	29.2	47	49.5	7	7.4	4	4.2	9	9.5		100
7	25	26.3	33	34.7	17	17.9	15	15.8	5	5.3		100
8	19	20.0	33	34.7	21	22.1	17	17.9	5	5.3		100
9	29	30.5	28	29.5	20	21.1	14	14.7	4	4.2		100
10	35	36.8	36	37.9	7	7.4	6	6.3	11	11.6		100
11	20	21.0	41	43.2	14	14.7	13	13.7	7	7.4		100
12	19	20.0	26	27.4	26	27.4	13	13.7	11	11.6		100
13	45	47.4	18	18.9	9	9.5	11	11.6	12	12.6		100
14	18	18.4	26	27.4	12	12.6	15	15.8	24	25.3		100
15	28	29.5	38	40.0	15	15.8	9	9.5	15	15.8		100
16	15	15.8	37	38.9	18	18.9	15	15.8	10	10.5		100
17	49	51.6	37	38.9	8	8.4	0	0	1	1.1		100
18	25	26.3	24	25.3	13	13.7	16	16.8	17	7.4		100

IV. CONCLUSION AND RECOMMENDATION

Government should be fully aware of the reverse effects of adolescents' negative sexual behaviours and should go a long way in doing what is necessary to guide against the menace believed to be detrimental. Government sponsored programmes and workshops be organized for adolescents, especially the girl-child to serve as enlightenment and attention diverting measures for the vulnerable individuals. The Nigerian government should prioritize towards providing free and compulsory education to the girl child.

Religious teaching in schools should incorporate in the curriculum ideologies towards strengthening adolescents on the knowledge of sexual education and the menace of abuse. Multiple approach as well as skilled and knowledge-based programmes on sexuality education issues be organized and implemented so as to equip young people on how to be strong and resistant to the temptations of all sorts of sexual behaviours.

Parents, teachers and religious instructors should not leave any stone unturned in checking young people against being vulnerable to issues pertaining sexuality in their homes, institutions as well as places of worship.

REFERENCES

- [1]. Baker and Rich (2000). The influence of family on pre-marital sexual attitudes and behaviour of adolescent. *Institute for Survey Research. University of Maiduguri*.
- [2]. Chukwudum U. and Gloria (1998). Adolescent Sexual behaviour; A study of Nigerian Villages.
- [3]. Dana A. Gle (2002). Psychosocial correlates of alcohol, tobacco and cannabis use.
- [4]. Resnide, M. D. and Harris L. J. (1999). The impact of carrying and connectedness on adolescents; a health and well-being. *Paediatric Child Health*.
- [5]. Sorecan (1998). Sexual conduct. The Social Sources of Human Sexuality, Chicago Aldine.
- [6]. Sovensen (1999). Sexual behaviour, Contraceptive Practice and Reproductive Health among young Unmarried Population in Nigeria: *Adolescent Reproductive Behaviour*. An annotated Bibliography.
- [7]. Wright, C. D. (1998). The psychology of sexual behaviour.
- [8]. Wright, G. C. (1998). The Psychology of Sexual Behaviour.
- [9]. Zelnick and Kanter (1999). Sources of Information and Adolescent Sexual Knowledge and Behaviour. *Journal of Adolescent*.

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