

TITLE PAGE

**PREVALENCE AND VARIABLES INFLUENCING PREMARITAL SEX AMONG
SECONDARY SCHOOL ADOLESCENTS IN ANAMBRA STATE, NIGERIA.**

BY

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APPROVAL PAGE

This dissertation; **PREVALENCE AND VARIABLES INFLUENCING PREMARITAL SEX AMONG SECONDARY SCHOOL ADOLESCENTS IN ANAMBRA STATE, NIGERIA**, has been approved for the award of Ph.D in Nursing, in the Department of Nursing Science, Faculty of Health Sciences and Technology, College of Health Sciences, Nnamdi Azikiwe University, Awka.

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DEDICATION

To the suffering and ignored adolescents in our families and communities who clamour to be recognized by the various segments of the society; and to the nurses and scientists who labour to better their lot.

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ABSTRACT

Pre-marital sex among secondary school adolescents has been identified to be on the increase worldwide. Adolescents are susceptible to peer group influence and pressure. This study was conducted to determine the prevalence and variables influencing pre-marital sex among secondary school adolescents in Anambra State of Nigeria. A cross-sectional descriptive study was conducted among secondary school adolescents in Anambra State. Data was collected using a pre-tested, structured, self-administered questionnaire. Respondents were selected using a multistage sampling technique. The instrument used for data collection in the study was the Secondary School Student Sex Variables Questionnaire (SSSVQ) which was constructed by the researcher. Data was analyzed with SPSS version 20 and summarized using proportions, while associations were tested using chi-square test and logistic regression. Level of statistical significance was set at 5%. A total of 955 respondents were surveyed. More than half of the respondents (54.8%) are aged between 14 and 17 years of age. Males constituted 56.9% of all the respondents while the rest were females. The SSS1 respondents made up the largest proportion of the subjects (32.5%) while the JSS 3 class constitutes the least proportion (17.4%). The urban respondents were 53.3% as opposed to the students in rural areas who made up 46.7% of total. Half of the respondents are from a family of 4-7 children in their family, 28.3% has 1-3 children in their family while 21.7% have ≥ 8 children in their family. Whereas 55.4% of the secondary school adolescents attend public schools, 44.6% attend private schools. The prevalence of pre-marital sex among the respondents was 66.6%. Among the 636 respondents who have had pre-marital sex, 500 (78.6%) were males, while 136 (21.4%) were females ($X^2 = 0.010$, $df=1$, $p=0.010$). Out of the 6536 respondents that have had pre-marital sex, 200 (31.5%) were in SS3, 203 (31.9%) were in SS2, 170 (26.7%) were in SS1 and 63 (9.9%) were in JS3 ($X^2=10.500$, $df=3$, $p=0.030$). Fifty five percent (55%) 350 were in the 14-17 years age bracket, 200 (31.5%) were in the ≥ 18 years age bracket, and 86 (13.5%) were in the 10-13 years age bracket ($X^2 = 6.020$, $df=2$, $p=0.040$). Fifty six (8.8%) had 1-3 siblings, 400 (62.9%) had 4-7 siblings while 180 (28.3%) had ≥ 8 siblings ($X^2 = 7.030$, $df=2$, $p=0.040$). Four hundred and ten (410) (64.5%) were in the urban area, while 226 (35.5%) were in the rural area. ($X^2=9.9196$, $df=1$, $p=0.027$). Male respondents were twice more likely to engage in pre-marital sex than the female respondents [OR: 2.431, (95% CI: 1.705-3.465), $p=0.000$]. Respondents that were in Senior Secondary 2 and above ($\geq SS2$) were 3 times more likely to engage in pre-marital sex than those that were in Senior Secondary 1 and below ($\leq SS1$) [OR: 3.257, (95% CI: 2.385-4.450), $p=0.000$]. Students who were 14 years or older (≥ 14 years) were twice more likely to engage in pre-marital than those that were 13 years or younger (≤ 13 years) [OR: 2.908, (CI: 2.153-3.928), $p=0.000$]. Respondents that were from families with 4 or more children (≥ 4 children) were 4 times more likely than those from families with 3 or less children (≤ 3 children) to engage in pre-marital sex [OR: 4.139, (CI: 2.945-5.817), $p=0.010$], while those that live in the urban areas were twice more likely to engage in pre-marital sex than respondents who live in the rural areas [OR: 2.000, (CI: 1.180-2.143) $p=0.002$]. Students who had "medium extent exposure to mass media or more" ($\geq ME$) were 3 times more likely to engage in pre-marital sex than those who had "low extent exposure to mass media or less" ($\leq LE$) [OR: 3.153, (CI: 2.270-4.380). Respondents who had "medium extent exposure to peer pressure or more" ($\geq ME$) were twice more likely to engage in pre-marital sex than those who had "low extent exposure or less" ($\leq LE$) [OR: 2.240, (CI: 1.601-3.134), $p=0.030$]. This study revealed that the prevalence of pre-marital sex among secondary school students in Anambra State was high. Also the predominant factors that influenced pre-marital sex were identified: Male gender, higher age, higher class of study, large family size, urban location, peer pressure and exposure to mass media.

CHAPTER ONE

INTRODUCTION

Background to the Study

Adolescence has been defined by several authorities in several ways. Wikipedia, (2015) the online dictionary explains that Adolescence (from Latin *adolescere*, meaning "to grow up") is a transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood (age of majority). It further explains that the period of adolescence is most closely associated with the teenage, though its physical, psychological and cultural expressions may begin earlier and end later. Adolescence can be considered the transitional stage from childhood to adulthood (Psychology 2015). It can be a time of both disorientation and discovery. The transitional period can bring up issues of independence and self-identity; many adolescents and their peers face tough choices regarding schoolwork, sexuality, drugs, alcohol, and social life. Peer groups, romantic interests and external appearance tend to naturally increase in importance for some time during a teen's journey toward adulthood. According to the World Health Organisation (WHO), adolescence is the period in human growth and development that occurs after childhood and before adulthood, from ages 10 to 19 (WHO, 2015). It represents one of the critical transitions in the life span and is characterized by a tremendous pace in growth and change that is second only to that of infancy. Biological processes drive many aspects of this growth and development, with the onset of puberty marking the passage from childhood to adolescence. The biological determinants of adolescence are fairly universal; however, the duration and defining characteristics of this period may vary across time, cultures, and socioeconomic situations. This period has seen many changes over the past century namely the earlier onset of puberty, later age of

marriage, urbanization, global communication, and changing sexual attitudes and behaviours.

The process of adolescence is a period of preparation for adulthood during which time several key developmental experiences occur. Besides physical and sexual maturation, these experiences include movement toward social and economic independence, and development of identity, the acquisition of skills needed to carry out adult relationships and roles, and the capacity for abstract reasoning. While adolescence is a time of tremendous growth and potential, it is also a time of considerable risk during which social contexts exert powerful influences. Many adolescents face pressures to use alcohol, cigarettes, or other drugs and to initiate sexual relationships at earlier ages, putting themselves at high risk for intentional and unintentional injuries, unintended pregnancies, and infection from sexually transmitted infections (STIs), including the human immunodeficiency virus (HIV). Many also experience a wide range of adjustment and mental health problems. Behaviour patterns that are established during this process, such as drug use or non-use and sexual risk taking or protection, can have long-lasting positive and negative effects on future health and well-being. As a result, during this process, adults have unique opportunities to influence young people.

Adolescents are different both from young children and from adults. Specifically, adolescents are not fully capable of understanding complex concepts, or the relationship between behaviour and consequences, or the degree of control they have or can have over health decision making including that related to sexual behaviour. This inability may make them particularly vulnerable to sexual exploitation, voluntary pre-marital sex and other high-risk behaviours.

Premarital sex is sexual activity practiced by people who are unmarried (Wikipedia, 2015b). Historically, premarital sex was considered a moral issue which was taboo in many

cultures and considered a sin by a number of religions, but since about the 1960s, it has become more widely accepted, especially in Western countries. A 2014 Pew study on global morality found that premarital sex was considered particularly unacceptable in "predominantly Muslim nations", such as Indonesia, Jordan, Pakistan and Egypt, each having over 90% disapproval, while people in Western European countries were the most accepting, with Spain, Germany and France expressing less than 10% disapproval (Pew Research Center, 2015). Until the 1950s, "premarital sex" referred to sexual relations between two people prior to marrying each other (Wikipedia, 2015b). During that period, it was the norm in Western societies for men and women to marry by the age of 21 or 22, and there was no considerations that one who had sex would not marry. The term was used instead of fornication, which had negative connotations, and was closely related to the concept and approval of virginity, which is sexual abstinence until marriage. Alternative terms for premarital sex have been suggested, including *non-marital sex* (which overlaps with adultery), *youthful sex*, *adolescent sex*, and *young-adult sex*. In some cultures, for example in many modern-day Western cultures, many people do not hold value in sexual abstinence before marriage. Historically, at least a significant portion of people have engaged in premarital sex, although the number willing to admit to having done so was not always high. In a study conducted in the United States, 61 percent of men and 12 percent of women born prior to 1910 admitted to having premarital sex; the gender disparity may have been caused by cultural double standards regarding the admission of sexual activity or by men frequenting prostitutes (Wikipedia, 2015b). Starting in the 1920s, and especially after World War II, premarital sex became more common; this was especially prevalent among women. By the end of the 20th century, between 75 and 80 percent of Americans had vaginal intercourse before the age of 19. This has been attributed to numerous causes, including the increasing median age at marriage and the widespread availability of

efficient contraceptives (Cavendish, 2010). According to a 2001 UNICEF survey, in 10 out of 12 developed nations with available data, more than two-thirds of young people have had sexual intercourse while still in their teens. In Denmark, Finland, Germany, Iceland, Norway, the United Kingdom and the United States, the proportion is over 80%. In Australia, the United Kingdom and the United States, approximately 25% of 15-year-olds and 50% of 17-year-olds have had sex (UNICEF, 2001). In a 2005 Kaiser Family Foundation study of US teenagers, 29% of teens reported feeling pressure to have sex, 33% of sexually active teens reported "being in a relationship where they felt things were moving too fast sexually", and 24% had "done something sexual they didn't really want to do" (Kaiser Family foundation, 2005). From 1943 to 1999, attitudes toward premarital sex changed such that young women's approval increased from 12% to 73% and from 40% to 79% among young men. People's feelings of sexual guilt also decreased during this period. Nowadays, less than 25% of people believe premarital sex is "always or almost always" wrong (Wells & Twenge, 2005).

In Ethiopia, the prevalence of pre-marital sex among adolescents was 42.7% (Teferra, Erena, & Kebede, 2015). In Kenya the prevalence of pre-marital sex among adolescents was 14.9% (Rudatsikira, Ogbwell, Siziya & Muula, 2007). In Port Harcourt, Nigeria, Anochie & Ikpeme (2001) reported a prevalence of 25.7%. In Plateau state, Nigeria, Slap et al., (2003) reported a prevalence of 34%. A study conducted in two south – eastern states in Nigeria (Enugu and Anambra) reported a prevalence of 40% (Amazigo, Silva, Kaufman & Obikeze, 1997).

Adolescence is considered to be the period between 13-19 years of age. This is the group that is mostly seen in our secondary schools, hence the group under study. During this stage, he/she experiences not only physical growth but also other body changes, like emotional, psychological, social, mental changes and growth (Jenkins, 2007). The WHO

agreed that adolescents are seen within age groups of 10-19 years (WHO, 2009). According to Chauhan, (2005), Egeonu, (2008) and Anusiem, (2009) the physical attributes at this stage of life include noticeable growth spurt, development of reproductive organs, appearance of secondary sex characteristics, marked voice changes, broadening shoulders and hips.

Statement of the Problem

Adolescence can be considered the transitional stage from childhood to adulthood (Psychology, 2015). It can be a time of both disorientation and discovery. The transitional period can bring up issues of independence and self-identity; many adolescents and their peers face tough choices regarding schoolwork, sexuality, drugs, alcohol, and social life. Peer groups, romantic interests and external appearance tend to naturally increase in importance for some time during a teen's journey toward adulthood.

Premarital sex among adolescents has been occurring in both developed and developing countries of the world. Premarital sex was considered particularly unacceptable in predominantly Muslim nations such as Indonesia, Japan, Pakistan and Egypt, each having over 90% disapproval, while people in the Western European countries were the most accepting with Spain, Germany and France expressing less than 10% disapproval (Pew Research Centre, 2015). Premarital sexual activity among adolescent is higher in Sub-Saharan African than in other regions. According to WHO (2000) 45% of females and 73% of males aged less than 19 years have had sexual intercourse. Though most African traditions discourage it, some cultures encourage it (Blanc ay Way, 1998). They reported that in Nigeria by 1990, 60.9% of the adolescents were involved in premarital sex, but not among secondary school adolescents.

The implications of premarital sex for both boys and girls were found to have serious effects. The boys are exposed to early fatherhood, which could imply end of

academic career or vocational training, poverty and being encumbered with the burden of providing for the mother and the unplanned child. The female adolescents can experience unplanned unwanted pregnancy, unsafe abortion that can lead to infertility or even death in extreme cases, sexually transmitted infections (STIs), Human Immunodeficiency Virus (HIV) infections, dangers of dropping out of school, early and unplanned marriage which can lead to lifelong unhappiness, increased risk of pregnancy induced hypertension anaemia, obstructed labour and death (Okpani et al., 1995, Ojengbede, et al, 1987), Uwaezuoke et al., 2004). The fetus is prone to be delivered preterm, small for date and risk of prenatal death (Ojengbede et al 1989; Uwaezuoke et al 2004 & Aboyeji et al., 2001), among others.

The prevalence of premarital sex among adolescents has also been recorded in Sub-Saharan African countries. In Ethiopia, a prevalence of 42.7% was recorded (Tefera, Erena, & Kebede, 2015). In Kenya, a prevalence of 14.9% was recorded. In Port Harcourt-Nigeria, a prevalence of 25.7 was recorded (Anochie & Ikpeme, 2001), in Plateau State Nigeria, 34% was recorded (Stap et al., 2003). In South Eastern Nigeria-Enugu and Anambra States, prevalence of 40% was recorded (Amazigo, Silva, Kaufman & Obikeze, 1997).

A community survey in Lagos and States in Nigeria reported a 26.6% prevalence of unwanted pregnancy and a 21.7% prevalence of abortion (Oye-Adeniran et al 2004). Similarly, a study done in 8 states of Nigeria reported that 28% of the adolescents (respondents) had had an unwanted pregnancy and half of these who had had unwanted pregnancies had had abortion (Gilda et al., 2006). The annual cost of treating major complications from unsafe abortion is estimated at \$680 million dollars (WHO, 2016a). All the information on premarital and prevalence of sex recorded above were generally on adolescents but none was on secondary school adolescents.

These adolescent secondary school students, at this period of their study, are not yet knowledgeable about sex and its complications. No information available to them from school curriculum, from school teachers or parents or even church leaders. The only available information on sex for them is from their peers who are not well informed. The question then remains, what is the prevalence of premarital sex among secondary school adolescents in Anambra State, Nigeria: their reasons for involvement in premarital sex, their sources of information, and knowledge of the consequences of the practice.

Aim of the Study

The aim of this study was to determine the prevalence of premarital sex and variables that influence premarital sex involvement among secondary school adolescents in Anambra State.

Specific Objectives

Specifically, the objectives of this study were to determine:

1. The prevalence of premarital sex among secondary school adolescents in Anambra State.
2. The effect of some socio-demographic characteristics (class of study, family size, gender, place of residence, type of school) on the students' involvement in premarital sex.
3. The influence of peer pressure on the secondary school students' involvement in premarital sex involvement.
4. The effect of exposure to mass media on the secondary school students' involvement in premarital sex.
5. The effect of the view of the respondents on sex education on the prevalence of premarital sex among the secondary school students.

Research Questions

Specific research questions that guided this study are the following:

1. What is the prevalence of premarital sex among secondary school students in Anambra State?
2. Which class or classes in secondary schools adolescents in Anambra state are more involved in premarital sex?
3. Does family size of secondary school students' influence premarital sex involvement?
4. Does gender influence secondary school students' premarital sex involvement?
5. Does the view of the respondents on sex education influence their involvement in premarital sex?

Hypotheses

The following null hypotheses guided the study and were tested at ($P < 0.05$) level of significance.

1. There is no difference among secondary school students in their involvement in premarital sex due to their exposure to mass media.
2. Secondary school students who attend either public or private schools will not differ significantly in their involvement in premarital sex.
3. Secondary school students from urban and rural locations will not differ significantly as regards their involvement in premarital sex.

Significance of the Study

The findings from this study would bring to light those variables that predispose adolescents to premarital sex in Anambra State. The result of the study will also be useful to education policy makers as it has the potentials of providing information that will assist

them in formulating reproductive and sexual health policies that would help students develop healthy and responsible sexual behaviour in the society.

Teachers would benefit from the findings of the study. They could utilize the results in both classroom instruction and counselling of the students. The findings of this study will help the teachers to guide students towards a healthy lifestyle that would make them useful and responsible members of the society.

The findings of the study would be useful to healthcare workers as well as non-governmental organizations that work with adolescents by providing them with more information for planning sexual and reproductive health services for adolescents in order to meet their sexual and reproductive health needs.

The result of this research will help health educators to develop appropriate methods and approaches in teaching and handling reproductive and sexual health problems of the adolescents. This will enable the health educators to inculcate in adolescents the desired knowledge, attitude and skills necessary in dealing with premarital sex issues.

Nurses are who work in secondary schools' sick bay have a big role to play in adolescent health. The students seek medical attention at the sick bay and these are great opportunities for the nurses to impact on their health. Findings from this study will be a great resource to nurses in carrying out this all important function.

Finally, the results of this study will fill the gap in information, as there is dearth of empirical data concerning the factors influencing adolescents' premarital sex in Anambra State. The result will also form a basis for further research in the area of study.

Scope of the Study

The study was restricted to secondary school adolescents in Anambra State of Nigeria. It was delimited to premarital sex involvement of students within the age range of 10 -17 years since this is the age range when most youths initiate heterosexual relationship.

Married students were excluded from the study. The study included both public and private schools. It did not cover all the variables that influence premarital sex but was delimited to such variables as level of education, peer pressure, access to mass media, family size of students, nature of school, location of school, gender and levels of exposure to sex education.

Operational Definition of Terms:

Prevalence: This is defined as the number of the respondents that have ever engaged in premarital sex divided by the total number of respondents.

Variables Influencing Premarital Sex: These are some of the factors that can affect premarital sex and they include: curiosity, life style of significant others, peer pressure, media influences, nature of schools attended, books and magazines, family size, parents' level of education and occupation and broken homes among others.

Secondary School Adolescents: Are secondary school students who fall within the age range of 10 to 19 years.

CHAPTER TWO

LITERATURE REVIEW

Adolescence

Adolescence is the period of physical, psychological and social changes from childhood to adulthood. It spans the ages of 10 to 19 and is subdivided into three periods namely: early adolescence (between 10 – 12 years), mid adolescence (between 13 – 16 years) and late adolescence (17-19 years). An adolescent is a person whose age falls between 10 and 19 years (Nwankwo, 2011). Developmental changes of adolescence include physical changes, cognitive changes and emotional changes. The physical changes of adolescence include wider hips, big breasts and menarche for girls only; for boys they have broader shoulders, hair on the chest, enlarged penis, enlarged testicles, breaking of voice, production of sperm (spermache) and wet dreams. For both boys and girls, they grow taller, armpit hairs appear, hairs on legs, pubic hair, sweat more, and defined facial contour and weight gain (Jenkins, 2007). More so, cognitive changes involve the transformation from concrete operational to formal operational stage. At the concrete operational stage, children deal with concrete facts as they see them. At the formal operational, the cognitive transformation allows the adolescent to engage in abstract thinking and reasoning (Jenkins, 2007). This makes them capable of forming hypotheses and wanting to try them out. They are now able to think about the future, about possibilities and alternative ways of doing things, which are different from the ways the adults or parents expect them to do. Emotional changes have to do with the adolescents being emotionally unstable. They go through emotional fluctuations and this affects their behaviour. Sometimes they may be moody or feel powerful emotional surges. They are concerned with their feelings and attitude toward themselves and other adults. These feelings may be impulsive or sexual in

nature and may bring about disapproval from adults if such feelings clash with adults' values (Nwankwo, 2011).

Attributes of Secondary School Students

According to the National Policy on Education (NPE) (2005), ages less than 6 years are meant for pre-primary schooling; 6 years to 12 years are for primary schooling; 13 years to 18 years are for secondary schooling, while above 18 years are for schooling in tertiary institutions. However, observation from schools shows that some talented children do enter at the age of 10 years while dull ones enter about the age of 14 years (Obi, 2002). Therefore, secondary school children in Nigeria generally fall within the age between 10 years to 19 years. Those within the age range of between 10 years to 16 years are in the junior secondary schools while those in the age range of 15 years to 19 years are in the senior secondary schools. Other authors such as Durojaiye & Majassa (2006) regarded this stage as the initial stage of development and period of storm and stress, autonomy and conflict. This period is also marked by sexual and physical maturation, attraction to the opposite gender; fashion consciousness, school and financial problems become meaningful, peer group influence of friends, heightened emotions, contradictive norms of the society and biological and sexual urges, as well as distrust of adult authority are common. Durojaiye & Majassa, (2006) went further to state that, at the adolescent stage, the young seek for models and roles, craving for independence begin, as well as social and emotional relationship and sexual experimentation.

This stage has been described by Anusiem (2009) as a stage from childhood to adulthood, a time when, an individual approaches peak of his mental and physical growth, a transition stage from biological immaturity to biological maturity. The World Health Organisation (WHO, 2005) defined adolescence as a progress from appearance of secondary sex characteristics (puberty) to sexual and reproductive maturity, development of

adult mental process and adult mentality, transition from socio-economic dependency to relative independence.

Bledsoe & Cohen (2008) pointed out that adolescence period is an economic stage in the life of the individual because many key socio - economic, biological and demographic events occur that set the stage for adult life. They pointed out further that it is a period when boys and girls construct a personal definition of what it means to be female or male. Webb (2004) said that adolescence is a period of identifying formation and developing autonomy, a period of stress because of conflict between parents and the adolescents when she/he attempts to achieve autonomy and separation from her/his parents. According to Webb (2004), it marks a period of shift from parental influence to peer influence, it could also be seen as time when youths take risk and become deviants of parental opinions as well as a period of affection and strong emotional relationship. Uddry & Billy (2007) further pointed out that the period of adolescence is in fact a period of heightened sexual activities. According to them, the physiological changes that occur during this period include dramatic increase in sex hormone that seem to contribute to increased sexual motivation apart from its effect on pubertal development. Therefore, according to Uddry and Billy (2007), many events occur in the life of school age adolescents that have implication for sexual behaviours.

Premarital Sex

Premarital sex means sexual behaviour before marriage (Hornby, 2004). According to Obi (2002) sexual behaviours include holding hands, embracing each other, engaging in pecking, involving in deep kissing, sitting in lonely places together, writing love letters, involving in petting, touching above waist with or without cloth on, engaging in mutual masturbation, lying down together with or without cloth on, caressing as well as engaging in both/either vaginal and/ or anal intercourse. Morbidity and Mortality Weekly Report

(2001) pointed out that the term premarital sex refers to a variety of sexual behaviours, including sexual intercourse, oral sex, anal sex, masturbation and petting before marriage and these behaviours usually occur with a partner. Masturbation according to Nzeagwu (2003) is self-genital manipulation, which may occur/be done alone or with a partner, it often occurs long before marriage even as early as infancy. Therefore, Nzeagwu (2003) opined further that, most people engage in premarital sexual activity even if they do not have sexual intercourse before marriage. Sexual experience with the same gender is common during adolescence, particularly between ages 10 and 16 years (Morbidity and Mortality Weekly Report, 2001). Some sex behaviours, such as mutual touching or masturbation are considered normal aspects of the transition from childhood to adulthood. According to Morbidity and Mortality Weekly Report (2001), when research was conducted on premarital sexual behaviours, sexual intercourse is usually the focus, but this should not be so as other pleasurable acts involving partners also form sexuality. However, it further pointed out that when we think of premarital sexual activity, we think of teenagers. Nevertheless, according to Morbidity and Mortality Weekly Report (2001) because many people are postponing first marriage into their 20's or beyond, premarital sexual behaviour can be experienced by many people older than adolescence. The Report pointed out further that marriage is a norm in cultures and that sex is expected within marriage, hence many people still considered sex within marriage the best and acceptable option for themselves for either normal or religious reasons. Despite the vigorous campaign against indiscriminate sexual activities as well as the cultural values attached to sex after marriage, people particularly youths, have continued to intensify their interest in sexual activities; premarital sexual intercourse is common and appears to be on the rise in all regions of the world (Boyd, 2000).

Premarital sexual activity is higher in sub-Saharan Africa than in other regions. According to WHO (2000), 45% of females and 73% of males aged less than 19 years have had sexual intercourse. Though most African traditions discourage premarital sex, some cultures encourage it (Blanc & Way, 1998). They reported that in sub-Saharan Africa, the proportion of women who have engaged in premarital sex ranged from 5% in Niger to 81% in Botswana. In Nigeria, by 1990, 60.9% of adolescents have had premarital sex. Meeker (2004) also reported that the median age for first sexual experience in Ondo State was 16 years. Orubuloye, Caldwell & Caldwell (2001) reported further that in Ekiti State, around 90% males, 97% of urban females and 64% of rural females have had sexual relationship while unmarried. Understanding how adolescents make decision about sexual involvement poses a serious challenge. Gage (2008) pointed out that several factors seemed to suggest that their decision-making styles are different. According to Audrey and Billy (2007), the physiological changes that occur during adolescence may contribute to increased sexual motivation in teens, apart from indirect effect on pubertal development. Adolescents also differ from adults in terms of their understanding of risks of engaging in certain behaviours. Cognitive distortions and a sense of infallibility tend to be the characteristics of this developmental stage (Kiragu & Zabin, 2005; Webb, 2004). According to them, young adolescents may not consider the costs and benefits of a particular course of action rationally, and therefore they are made more susceptible than adults to rash decision regarding sexual relationships. Webb (2004) further pointed out that motivation for engaging in certain types of sexual behaviours such as offering sex for money or coercive sex appeared to be more common among teenagers. According to Caldwell (2009); Schoept (2009); Archaranitul & Guest (2004), adolescent girls might experience great difficulty in separating sex from economic survival and vulnerable to exploitative and coercive sexual practices. The above authors furthermore, pointed out that adolescent girls might have little

leverage with which to say “no” to unwanted sex or oppose male partners who argue that no risk is involved in having sexual relations. Bledsoe and Cohen (2003), Gage-Brandon and Meekers (2003) were of the view that as communities undergo rapid social transformation and as a result of juxtaposition of traditional and modern values, adolescents may often find themselves faced with conflicting definitions of their rights and responsibilities and their sex roles and gender experiences. Consequently, they may experience greater conflict in making decision concerning the postponement of sexual activity. According to them, stress engendered by the conflict is often amplified by intergeneration tensions regarding sexual behaviours.

Prevalence of pre-marital sex

In a recent study on the prevalence of pre-marital sex among adolescent students in Chita India, it was found that despite the satisfactory knowledge about HIV/AIDS, prevalence of premarital sex was quite high (18.32%). It was more common among boys (25.8%) than girls (9.2%) and it was consistently increasing with increase in age. It was most common among Hindus adolescents (19.0%) and least among Christians. Parent’s education played very important role in reducing the practice of premarital sex (Singh, 2006).

Sexual activities among adolescents have been reported to be increasing worldwide. Several studies in Sub-Saharan Africa have also documented high and increasing premarital sexual activities among adolescents (World Health Organization, 2001). Cultural taboos hinder young people in many developing countries to discuss sexual matters explicitly with their parents. Most information for their patchy knowledge comes from peers of the same sex who may themselves lack adequate information or are incorrectly informed. Taffa et al. (2002) suggested that young people have limited knowledge about sexual and reproductive health and know little about the natural process of puberty. This lack of knowledge about

reproductive health may have grave consequences. Moreover, sexual activities are occurring in the midst of an HIV/AIDS pandemic that is proportionately affecting adolescents and young adults.

On the other hand, young people often face enormous pressure especially from peers to engage in sex, unlicensed erotic video films and the desire for economic gain. As a result of this, significant numbers of adolescents are involved in sexual activities at an early age (Tarfa et al 2002). Young people in Ethiopia are also exposed to various risks such as unprotected sex, early marriage, early pregnancy and STIs/HIV/AIDS. Studies have shown that in Ethiopia 60% of pregnancies are unwanted or unintended (WHO, 2001). In Mongolia a study by the Save the Children Fund (1998) on sexuality of young people also reported by UNESCO (2003) showed that among in school boys and girls, 64% said that boy/girl relationship usually started at age 14 – 15 years, 20% at ages 15 – 17 years and 12.3% at ages 12 – 13 years. Practices in these relationships mentioned most often were hugging, kissing and holding hands, internet talking, walking together and sexual intercourse. The same study by Save the Children Fund (1998) showed that in spite of strict traditional values forbidding pre and extramarital sex, only half of the respondents declared that girls would be a virgin until she married. In Nepal, the survey conducted by the centre for Research on Environment and Population activities (Gurbacharya & Subedi, 2002) in five border towns cited in UNESCO (2003) showed that 10% of adolescent boys aged 15-19 years were sexually active, 84% of them had multiple sex partners. Another survey conducted in three districts by Gurbacharya & Subedi, (2002) in UNESCO, (2003) found that 19% of adolescents were involved in premarital sex.

According to the UNESCO (2003) report, in Sri Lanka, there was no clear evidence, but premarital sex among adolescents appeared to be on the rise, in Thailand, the tendency among young people was toward early and premarital sex with both non-commercial

partners and sex workers. In Vietnam, the involvement of youths in sexual activities was found to begin at much earlier age than 19 years considering a broad range of activities, including kissing, fondling of breast and genitals or oral sex (Goodkind & Anih, 2007). According to Goodkind and Anih (2007) most young men had their first premarital sexual experience with their girlfriends and some with sex workers.

In another study (WHO, 2013) it was reported that studies covering a variety of socio-cultural settings show that premarital sexual activity was a taboo in some countries than in others. However, in every setting, sexual activity began during adolescence among many young people. A breakdown of the study revealed that, there were more premarital friendship and partners between young males and females. However, premarital sexual activities widely across regions and within regions rates were similar. For females for example, rates of sexual activity were 2-11% in various setting in Asia, 12-25% in Latin America and 45-52% in sub-Saharan Africa. Further breakdown of premarital sexual activity among youths (13-20 years) in the 1990s showed Botswana, 45%, Nigeria, 63%, Uganda, 45%, China, 60%, Korea Republic, 30%, Philippines, 10%, Thailand, 30%, Vietnam, 10%, Argentina, 40%, and Peru 29%. A study by WHO (2000) revealed that premarital sex was more in sub-Saharan Africa and Latin American than Asia. UN (2012), which stated that premarital sexual activity was found to be relatively rare in Asian region, supported this result; nonetheless, the prevalence of premarital sexual activity is on the rise in Asian societies. According to PPFA (2011), the cultural norms of different parts of the world vary and the range of attitudes about adolescent sexual behaviours from rigidly repressive to openly liberal was sometimes found within the same communities.

Planned Parenthood Federation of America (PPFA) (2011) reported that in the western world exemplified by the United States, 63% of Americans believed in sexual exploration among young people as a normal growing up process. In the United States, the

initiation of sexual intercourse during adolescence is a recognized pattern of behaviour. Studies carried out in 1990, 1991, 1993 and 1995 in United States showed that 53-54% of students aged 9-12 years have had sexual intercourse (PPFA, 2011). The high extent of premarital sex in United States was corroborated by Smith (1998) who asserted that majority of Americans were having sexual intercourse prior to marriage. Moore, Miller, Sugland, Morrison, Giles and Blumenthal (2004) also indicated that young people in the United States began having sexual intercourse during their teenage years. According to them, current data suggest that slightly more than half of females and nearly two thirds of males have had sexual intercourse by their 18th birthday. In the last decades, there have been substantial increases in the proportion of adolescents who reported sexual activity at early stage. Andres and Nicole (2003) reported that in other developed world, 83% French, 85% Britons and 81% Germans have had sex prior to 20 years. In the United States in 1999, 38.6% of 9th grade students, 46.8% of 10th grade students, 52.5% of 11th grade student and 64.9% of 12th grade students have ever had sexual intercourse (PPFA 2011).

Premarital sexual activity is not a recent occurrence worldwide, Research indicates that as far back as 1950's, the phenomena have attracted public attention in the United Kingdom and United States of America (Teenage pregnancy, 2007). In those days girls involved in premarital sex came from a particular background, either broken house or of bad parental influence. To fully understand the problem of premarital sex one has to understand the group mostly affected which is the adolescent group. Premarital sex according to Jimenez (2003) refers to a variety of sexual behaviours including sexual intercourse, oral sex, anal sex, masturbation and petting before marriage. It appears to be on the increase according to Cohorts of women turning 15 between 1964 and 1993, in which at least 91% had had premarital sex.

Adolescence is the period between puberty and adult hood. It is often a period of prolific sexual activity as it often signifies the beginning of a more serious interaction with the opposite gender (Ramiro, 2005). Generally, adolescence is a word associated with young boys and girls, (Teenage and youths), which are applicable to secondary school students (National Policy on Education, 2005). It is the time between the beginning of sexual maturation (Puberty) and adult hood. It is a time of psychological maturation during which a person becomes “adult-like”, in behaviour. Adolescence is roughly considered to be the period between 13-19 years of age. This is the group that is mostly seen in our secondary schools, hence the group under study. During this stage, he/she experiences not only physical growth but also other body changes, but also emotional, psychological, social, and mental changes and growth (Tenkins, 2007). The WHO agreed that adolescents are seen within age groups of 10-19 years (WHO, 2009). According to Chauhan, (2005), Egeonu, (2008) and Anusiem, (2009) the physical attributes at this stage of life include noticeable growth spurt, development of reproductive organs, appearance of secondary sex characteristics, marked voice changes, broadening shoulders and hips.

Factors Influencing Premarital Sex

Many reasons have been given as being responsible for the extent of premarital sex. Werner-Wilson (2005) said that factors associated with sexual behaviours are family relationships, peer pressure, attitudes about sexuality, gender of adolescents and individual psychological factors. Zablan (2000) saw such factors as approval of men and / or women having sexual intercourse before marriage, non-importance attached to women’s virginity before marriage, as being positively related to premarital sex. Other works like AGI (2001) and PPFA (2001) pointed out that religiosity, single parenthood; sex education, peer influence and level of educational attainment do influence extent of premarital sex. Furthermore, WHO (2003), was of the view that parental divorce, religious affiliation and

mass media do have effect on adolescents' involvement in sex. Other factors pointed out as predisposing youths to sexual relations are self-concept, attachment to boy or girlfriends, low extent of parental monitoring, parental belief on adolescent premarital sex, attachment to school, location, socio-economic status and school quality. It was observed that religiosity, peer influence, substance use, disco attendance, attitude towards premarital sex, attitude toward birth control and academic achievements are endogenous factors that explain levels of premarital sex (Mensch et al 2004). According to Mensch et al, (2006), often the variables that are exogenous such as age, pubertal status, school location, living arrangements, measure of friction between the respondents' mother, and father are more influencing.

Level of Educational Attainment and Premarital Sex

Larimore (2004) did point out that level of educational accomplishment and/or commitment to school did influence the extent of involvement in premarital sex. According to Change (2008), education was a basic issue in Taiwanese society because it was very common for every Taiwanese to complete education before entering the roles of worker, spouse and parent. This according to Huang (2008), school completion played an important role in determining the readiness for sex and adulthood. In Srilanka, Silva and Schensul (2003) reported that the strong norms that prohibit premarital sexual contact between young man and woman had come under severe strain due to increased opportunities that school completion indicated the readiness for woman in Taiwan to enter the adulthood that the readiness might have influence on the readiness for sexual experience, and premarital sex was more likely to occur. For example, women with college education were more likely to engage in premarital sex because they were exposed to the Western culture, which had more openness to premarital sexual relationship. However, women with college education

according to Huang et al (2010) were more likely to have strong career ambition, which might have negative influence on the likelihood of premarital sex.

Meekers and Calves, (2007) and Bledsoe (2000), were of the opinion that expansion in schooling might have led to increased rates of sexual activity among girls in sub-Saharan Africa for yet another reason. According to them, the imposition of school fees including charges for uniforms and textbooks might force girls whose parents could not afford to educate all their offspring or who were expected to be financially independent by virtue of their student status to acquire older sexual partners. Such sponsors according to Meekers and Calves (2007) give girls money and other needs in exchange for sexual favours. Zabin and Kiragu (2008) explained that the growing importance of education is often viewed as having created adolescence, prolonged it well beyond the period traditionally encompassed by pubertal customs and leading girls and boys to a level of independence not previously experienced. In general, according to Zabin and Kiragu, the schooling of young women was thought to reduce premarital sex and childbearing. In the views of Douglas, Woods, Gates and Sherman (2007), access of young women to future options was seen as one of the deterrents to early onset of sexual activity and unintended parenthood. The relationship between schooling and premarital sex was not unidirectional in Africa nor were the effects of schooling on sexual activity the same. Douglas et al (2007) pointed out that rates of sexual activity were generally lower among young students than among their unschooled contemporaries. However, in Nigeria according to Feyisetan and Pebley (2009), the higher rate of premarital sex were reported among women with secondary and post-secondary education whose background were less traditional than were those women with lower levels of education. These views, in the opinion of Kiragu (2005) may not be contradictory as they appear. According to him, students interviewed while in school could have lower rates of sexual activity than their out of school contemporaries, but by postponing marriage,

more of them could still report at later ages that they were actually sexually active before marriage. In the views of Twa-Twa (2007), schooling might actually encourage sexual onset, especially as it tended to remove young people from the supervision of traditional caretakers. To him, because secondary schools were not available in many villages, the possibility was that young people moved away from parents in order to attend school.

Peer Group Influence and Premarital Sex

Adolescents are susceptible to peer group influence and pressure. Nzeagwu (2003) posited that they shift from parental influence to peer influence (period of transition from parental shelter to that of peers). According to Nzeagwu (2003), the need to be accepted by peer and belongingness might exert a strong motivation to engage in sexual activities particularly when such peers were those that engage in such life style. Adolescence is a period of affection and strong emotional relationship; thus, the need for affection and emotional relationship could motivate the adolescent into initiating sexual activity (Gage, 2008). This situation according to Berglund, Liljestr n, Floor de Maria, Salgado and Zalaya, (2007) and Orubuloye et al (2001) was worst for girls who have poor relationship with their parents and for those whose fellow adolescent partners viewed sexual act as a demonstration of a girls love. Marriage is highly valued in Africa and most adolescent girls in interaction with their peers were preoccupied with finding whom to marry (Meekers and Claves, 2007). Goldstein (2003) explained that in order to attain the enviable position of “main” girlfriend and with the threat of displacement by other girls, a teenage girl might be pressurized to engage in sexual activities in order to prevent the partner from seeking other sexual outlets. The girl might have no choice but to submit to the sexual demands of the boyfriend who threaten to abandon her if she refused to comply with the sexual demands.

Basset (2002), Meekers and Calves (2007) were of the view that among the boys, the desire to have sex could be encouraged by the African social environment, which was

polygamous in nature. Hence, according to them, in the early stages, boys were encouraged by their peers to seek sexual variety and most unmarried males kept several girlfriends at the same time. Some works such as Gage (2008) pointed to the fact that the influence of social groups on adolescents' sexual behaviours could not be overemphasized. Vanlandingham, Somboon, Grandjean and Sittitrai, (2005) stated that through the employment of both positive and negative sanctions or by altering the individual's assessment of risk, social groups can affect the individual of the relative costs and benefits of engaging in sexual activity, thus increasing the tendency to be involved in premarital sex. Moreover, according to Baker (2009), because most adolescents found talking about sex with parents and adults family members uncomfortable or impossible, peers often seemed to constitute the reference group for transmitting information about sexual activity. In a study carried out by Weiss, Whwlan and Gupta (2006) on female adolescents aged 13-19 years in Mexico among sexually active girls, perception of peer attitudes was liberal and communication with peer was statistically significant.

Exposure to Mass Media and Premarital Sex

Adolescents' behaviour can be influenced by access to mass media Comstock (2008). According to Escobar-Chares, Tortolere, Markham and Low, (2004), a critical review of the scientific literature and other sources showed that one largely unexplored factor that might contribute to adolescent sexual activity is their exposure to the mass media. Obi (2002) pointed out that the mass media include; the print media and the electronic media. According to her, the print media dealt with newspapers, magazines and books while the electronic media included television, film/video cassettes, radio, CDs, computer and the Internet. Comstock (2008) argued that mass media was such a strong socializing agent that they should be given status as a social agent competing with parents, teachers and other agents in providing models for emulation and furnishing information that

influenced the adolescents' belief, values and expectations. Craig (2006) saw mass media as the strongest agent of socialization of growing youths. The mass media according to Comstock (2008) had both positive and negative effects adolescents. The negative effects might, according to Comstock (2008) culminate to making adolescents vulnerable to premarital sex when they were exposed to erotic and pornographic information. Craig (2008) argued that because the mass media provided information to the adolescents, they serve as models for behaviours acquired, and the values and ideas they expressed. That being the case, the mass media could either reinforce the efforts of parents and schools or weaken them. Explaining further, Comstock (2008) stated that there was little development in the last twenty-five years that had had greater impact on children and adolescents than the television. Many adolescents, he argued, spend more time in front of the television set than they do with their parents, although television was only one aspect of the mass media. Corroborating Comstock (2008), Kerby (2011) stated that a 1995 poll of children ten to sixteen years of age in USA showed that children recognized that what they saw on television encouraged them to take part in sexual activities too soon. More than two-third said that they were influenced by television, 77% said that television showed too much sex before marriage and 62% said that sex on television and in movies influenced their peer to have sexual relationships when they were too young. Kerby (2011) reported further that the findings were pointer to the fact that television set the baseline standard for the entire entertainment industry. Most homes (98%) had television set and the average household watched 7 hours 15 minutes of television daily. Television was universally available and thus had the most profound effect on one's way of life (Kerby, 2011).

According to Kerby (2011), most adolescents spent time in cybercafés browsing through sexuality website and as they view these sites, they put them into real life situation. That is why Esu (2004) posited that premarital sex among adolescents was more

pronounced, then in Nigeria than it was before because of changes in the society, especially the adoption of western culture and education. They attributed this to exposure of adolescents to mass media such as television, pornographic books, movies, pictures, home videos and sexually loaded advertisements in Newspapers and magazines, and more recently the internet. Smith (1998) concluded by pointing out that it was uncontroversial to note that the entertainment and media industries bombarded the young people with the message that everyone should be sexually active; that sexual activity was essential to happiness. Furthermore, PPFA (2001) stated that we lived in a world saturated with images and messages about sex from movies, magazines, recordings, television shows and advertisements. PPFA (2001) went further to say that, maturing adolescents were exposed to many of the conflicting messages that might help them or confuse them in their decisions about sexual behaviour. Mensch, Clark and Anih (2002) reported that improvement in mass communication, including a greater familiarity with western culture has led to a rapid rise in premarital sex and unplanned pregnancies in Vietnam. Andres and Nicole (2003) also observed that mass media might increase both the desire and opportunity for sexual activity. Verma (2000), in a study of 61 students from India observed that international television viewers in India were more likely to support greater sexual freedom. Hence, Escobar-Charles, et al. (2004); PPFA (2001) and Smith (2008) concluded by saying that access to mass media whether print or electronics might likely have an impact on the sexual attitudes and behaviour of the adolescents.

Family Size and Premarital Sex

Though little or no research seemed to have focused on the relationship between family size and premarital sex, family size has implication for adolescent's pregnancy (Wu & Martinson, 2003). There could be relationship between family size and personality, emotional and social development, less interaction between siblings, parental supervision

and manner in which resources are allocated (Hogan & Kitagawa 2005; Nye, Carlson & Gerald, 2000). Studies have shown an increased relationship between family size and such variables as family affection, emotional adjustment of children, intelligence and achievement (Nye et al. 2000).

Large groups were said to be characterized by more formally structured and authoritarian leadership pattern, a less concern for others opinion. (Nye et al. 2000), suggested that the number of children in the family altered the power and support dimension of parenting. Greater number of children, according to Elder and Brown in Obi (2002) had the potential for increasing parental frustrations in dealing with the complexities of individual personality needs, the variety of role definition and their day-to-day demand and pressure of family life.

An increase in the size of the family increases the complexity of intra-group relations and poses new problems in the fulfilment of individual family needs (Nye et al. 2000). Obi (2002) explained that the time and patience needed to explain rules were no doubt less available to parents with large families. Thus, according to Obi (2002) as family size increases, parents tended to rely on strong behaviour control requiring the children to assume a passive role. Obi (2002) pointed out further, that when parents adopt strong behaviour control, adolescent might become rebellious and breakaway from the family. This view conformed to that of Teevan (2002) who contended that as adolescents' breakaway from parents, they conform to their peers. Conformity with peers, according to Teevan (2002) might have impact on the adolescent. Thus Anarfi (2007) and Armstrong (2004) reported that adolescent girls' vulnerability to various forms of sexual violence and sexual coercion tended to increase once they live beyond the protection of their families and when they lived under conditions of poverty and conflict.

Adolescents, as pointed out by Caldwell et al. (2008) who were distant from parental love, acceptance and authority might seek affection and attention elsewhere, often becoming emotionally dependent on boyfriends and afraid of losing the boys, gave in to their demands for sexual intercourse. Gage (2008) supporting this view stated that the need for attention, affection and strong emotional relationship might be an important motivation for involvement in premarital sex. This situation according to Berglund et al. (2007) was worst for girls who had poor relationship with their parents. Hogan and Kitagawa (2005) explained that there was positive association between family size and teenage pregnancies because of low resources. In large families where parental resources were inadequate to meet each child's need, the need to survive became a driving force behind the adolescent girl's decision to engage in premarital sex (Gage, 2008). She stated further that adolescent girls were vulnerable to exploitative and coercive sexual practices, especially if the pressure on them to earn income were strong because of their own needs or because of demands from their parents. In line with the views of Gage (2008), WHO (2000) and Schoepf, (2004) argued that adolescent girls could enter into sexual relationship with older wealthy men who could take over their financial, school and material needs.

Nature of School and Premarital Sex

Some writers had reported that the type of school attended had some influence on the premarital sex of students. Planned Parenthood Federation of America (PPFA) (2001) observed that the sexual norm of a particular school could have impact on the variety of sexual experiences an adolescent might experience. According to them, the perception that "more people" practice a particular sexual activity might influence teen's decision to experience it. Furstenberg (2008) opined that the educational system might undermine parental authority where the family loses control over young people's behaviours. According to Furstenberg (2008), this might be applicable to boarding school system where

the children were kept from home, thereby undermining the authority of parents. This loss of parental control both in socializing and dating, Furstenberg (2008) explained determined the adolescents' sexual attitudes and behaviours. Mensch et al (2009) highlighted that boys who resided in boarding schools were more likely to be sexually experienced. While both boys and girls who attended schools in rural areas far away from home also were sexually active at adolescence. In mixed schools, data collected by Mensch and Lloyd (2008) indicated that considerable harassment of girls, of both sexual and non-sexual nature, took place in Kenyan schools. They evidenced the existence of non-consensual sexual activity within mixed schools. Mensch et al. (2008) and Youri (2004) reported sexual encounter that occurred in transit to and from schools (day-studentship).

The nature of school a girl or boy attended was hypothesized to be important in premarital sex because of the negotiation process around sex (Mensch, et al. 2009). According to the description of this process in Kenya, girls "give in" to boys in exchange for gifts, money or safe transit in mixed schools (Erulka & Mensch, 2007). This the author speculated that those schools which were more supportive of girls, because there was both less sexual harassment and greater encouragement of academic achievement equipped them with the facility to ward off unwanted attention from boys. Mensch et al. (2009) discovered that a school characterized by teacher's supportive of girls and a gender free atmosphere (only girls' school) appeared to minimize premarital sexual behaviour among the girls. On the other hand, according to Mensch et al (2009), schools where girls felt pressure to engage in sexual activities appeared to be associated with more of such behaviour.

Students' Location and Premarital Sex

Strong relationship has been attributed to seemingly rising extent of premarital sex to the students' location, especially living in the urban environment. Mensch et al. (2009) reported that the place of residence influenced experience in sex. They however pointed out

that boys who were post pubescent and attended schools in rural areas were more likely to be sexually experienced. Moore et al, (2004) saw living in urban slums as disadvantageous and described it as “living in dangerous environment”. To them, being such disadvantaged was associated with several factors that could influence teenage sexual and reproductive behaviours and outcomes. He stated that being so disadvantaged was associated with early age at first intercourse. According to him, in the urban slums are brothels, which served as “havens” for adolescent’s sexual escapades. He also reported that the vast majority of urban boys were engaged in unprotected sex, even with commercial sex workers. Hesketh (2009) pointed out that with increasing influence of urbanization in China, traditional attitudes towards sex, marriage and family had changed and premarital sex was acceptable. The extent was such that contraceptive tablets and condoms were made available at drug stores and supermarkets. Hesketh (2009) even pointed out that “back street” abortion, often seen in many developing countries were being available in China, particularly in urban areas. Jimenez (2003) reported that because of urbanization, young males did not give as much value to virginity as they did in the past.

Emphasizing further on the influence of location, Fritzinger (2004) suggested that migration reduced premarital sexual occurrence. To her, migration could reduce bounds between adolescents and their peers. Moving from town to town and often being in new schools, could weaken bonds and make it harder for adolescents to make close friendship with people, including peers, teachers and in general the community. Hence, constant relocation according to Fritzinger (2004) might reduce the chances of premarital sex from occurring. Although, relocation could cause some feelings of loneliness and isolation, sex was less likely to occur. AGI (2008) stated that migration and urbanization might increase both desire and opportunity for sexual activity. Larimore (2004) accepted the influence of changing location but according to him, it increased rather than decreased the rate.

Larimore (2004) opined that due to frequent family relocation, bonds to social support such as church groups that help prevent sexual activity might be severed. Loneliness and loss of friendships might lead some teenagers to use sexual activity to gain social acceptance. According to Nzeagwu (2003), urbanization has affected adolescents' sexual behaviours in sub-Saharan African. With industrialization, Nzeagwu (2003) opined, the traditional African agrarian economy seemed to be collapsing, causing the drift of younger adults to urban areas to seek for white-collar jobs. She stated further that with increasing unemployment and youths being hard-hit, most of them were lured into all kinds of sexual activities in order to survive the hard economic urban environment. Meeker and Calves (2007) elaborating further stated that, with a lot of young people drifting to urban areas and with no feasible means of livelihood, most of the females ended up in prostitution or commercial sex as profession. The boys, according to them, engaged in sexual activities with wealthy women termed "sugar mummies" who sustained them financially and materially. This view was supported by UNESCO (2003) which reported that prevalence of premarital sexual activities were significantly higher among urban than rural students.

Gender and Premarital Sex

Gender of the student had been considered by many works as being a factor influencing the extent of involvement in premarital sex by adolescents. Amporns (2007) reported that in a study in Cambodia, that although 22% of the females had any form of sexual experience, the sexual encounters had been with their boyfriends. However, the males were less likely to have their first sexual experience with their partners, but high proportion (about 42%) had their first sexual experience with girlfriends and another 40% with commercial sex workers. Furthermore, gender is an important factor in understanding premarital sexual attitudes and behaviors. Studies (X. Zuo *et al*, 2012), (Liao PS *et al*, 2006) indicate that males are more likely to initiate sexual intercourse and have more

permissive perceptions about sex than females. Yet few studies have explored possible reasons for these gender differences.

With samples of unmarried adolescents in three Asian cities influenced by Confucian cultures, this article investigates the relationship between underlying gender norms and these differences in adolescents' premarital sexual permissiveness (PSP). In a collaborative survey conducted in 2006–2007 in urban and rural areas of Hanoi, Shanghai, and Taipei, 16,554 unmarried participants aged 15–24 years were recruited in the three-City Asian Study of Adolescents and Youth, with 6,204, 6,023, and 4,327 respondents from each city, respectively. All the adolescents were administered face-to-face interviews, coupled with computer-assisted self-interview for sensitive questions. Scales on gender-role attitudes and on PSP for both male and female respondents were developed and applied to the analysis of the data. Male respondents in each city held more permissive attitudes toward premarital sex than did females, with both boys and girls expressing greater permissiveness to male premarital sexual behaviors.

Boys also expressed more traditional attitudes to gender roles (condoning greater inequality) than did girls in each city. Adolescents' gender-role attitudes and permissiveness to premarital sex varied considerably across the three cities, with the Vietnamese the most traditional, the Taiwanese the least traditional, and the adolescents in Shanghai in the middle. A negative association between traditional gender roles and PSP was only found among girls in Shanghai and Taipei. In Shanghai, female respondents who held more traditional gender-role attitudes were more likely to exercise a double standard with respect to male as opposed to female premarital sex (odds ratio [*OR*] = 1.18). This relationship also applied to attitudes of both girls and boys in Taipei (*OR* = 1.20 and *OR* = 1.22, respectively).

Sex Education and Premarital Sex

The influence of sex education on premarital sex has often looked controversial. Obi (2002) pointed out that there had been greater increase in premarital sex, because of the knowledge about contraceptive and abortion. However, Onochie (2002) maintained that the most unfortunate thing with sex and reproductive education in Nigeria was that not much emphasis had been placed on the subjects. This, according to him was because many people including parents, traditional or community and religious leaders did not support sex education in any aspect. Simple explanation to this was that, many still believed that sex education could promote sexual activities or open up their minds to develop interest, which they might not have developed earlier than their educational exposure.

Onochie (2002) however pointed out that this fear had adequately been taken care of by different studies/researchers on sex education at different levels. There was therefore clear evidence according to him that sex education did not lead to earlier or increased sexual intercourse. Onochie (2002) stated further that evidence from researchers commissioned by WHO and UNAIDS, showed that there was no support for the contention that sex education encouraged sexual experimentation or increased sexual activity. Many researchers are of the view that comprehensive sex education encouraged higher levels of abstinence and use of contraceptives and fewer partners (Onochie 2002).

Rosenthal (2001) noted that there was need to provide children and adolescents with responsible, age appropriate, comprehensive and medically accurate sex education and risk prevention programmes. Such education must be realistic. This according to her was imperative in order to check the identified greater number of sexual acts before marriage and / or greater number of sexual partners before marriage (AGI, 2004) and the ensuing high rate of unwanted pregnancy as well as sexually transmitted infections.

Consequences of involvement in premarital sex

Sexually transmitted infections (STIs) have a profound impact on sexual and reproductive health worldwide, and continue to cause a major burden of disease. An estimated 357 million new infections occur every year with one of 4 STIs: chlamydia, gonorrhoea, syphilis and trichomoniasis (WHO, 2016b). Taken together with previous estimates of herpes simplex virus and human papillomavirus (HPV) infections, other important STIs, the data suggest that more than 1 million sexually transmitted infections are acquired every day. A large proportion of new STIs occur amongst adolescents and young adults who may not be aware that they are infected – which can have a negative impact upon their future sexual and reproductive health.

STIs can have serious consequences not only on physical health, but also on the psychological and social well-being of those infected. If left untreated, both chlamydia and gonorrhoea can lead to pelvic inflammatory disease, which can cause serious damage to women's reproductive organs, and can in turn lead to infertility, as well as adverse pregnancy outcomes such as ectopic pregnancies. Several STIs can also be transmitted from mother to child during pregnancy and childbirth. Syphilis in pregnancy leads to approximately 305 000 fetal and neonatal deaths every year and leaves 215 000 infants at increased risk of dying from prematurity, low-birth-weight or congenital disease. HPV infection causes over 500 000 cases of cervical cancer and over 250 000 cervical cancer deaths each year (WHO, 2016b). Infection with STIs can also increase the risk of acquiring infection with HIV. People who are living with HIV are also more likely to transmit the virus to a partner if they are also infected with another STI.

Theoretical Review

In this study some behavioural theories, models and framework were considered for application to the understanding of premarital sexual behaviour among adolescents

(secondary school students). Many theories have made suppositions about adolescence sexual behaviour and sexuality. Those related to this study include:

- a. Sigmund Freud psychoanalytic theory of sexuality.
- b. Self-Efficacy/External Locus of Control
- c. Social Exchange Theory and Sexuality

Freud's Psychoanalytic Theory of Sexuality

Sigmund Freud (1856-1939) the founder of psychoanalysis popularized man as a sexual being. He believed that man is sexual from birth and sexual expression is a basic human need throughout life. Psychoanalytic theories were considered synonymous with both sex and psychiatry (Bollough & Bollough, 2003). Freud introduced the concept of libido (sexual energy), which is made up of irrational forces, unconscious motivations and instinctual motivational drive. Freud saw man as a bundle of sexual energy, a composite of dynamic system comprising the id, ego, and superego (Freud, 1925). He presented the id as a raw instinctive drive that is concerned with only amoral wishes. Bollough, (2003) described it as a source of fixed reservoirs of sexual energy. According to him, the id represented the deep inaccessible part of an individual and within it resided the instinctual urges that are mainly concerned with gratification of sex drive.

The ego, Freud described as the director of individual's personality, which follows the reality principle. According to Freud, it operated by suppressing the instinctive urge of id until the object reality for its satisfaction is available. The superego represents the societal values that develop from the ego and out of the individual's resolution of unacceptable drive for sexual satisfaction. The superego according to Freud was synonymous with individual's conscience and served to guide him on the appropriate sexual behaviour acceptable to the society. He conceived man as mostly sexually driven and all his endeavours-religion, culture, art were as a result of displaced sexual energy since

societal norms and values tended to discourage free expression of sexual impulses outside culturally accepted institution such as marriage institution. Freud, (1933) postulation tended to provide the theoretical framework within which adolescent premarital sex could be explained. Sex instinct in man seems to be the driving force for marriage and adolescents are therefore sexually driven.

It was on this basis that Freud (1933) postulated the psychosexual stages of human development. Individuals according to him went through several stages in which the focus of sex drive changed from oral to anal, phallic and the genital (adolescence stages). Comstock (2008) stated that the adolescence stage marked the onset of puberty in which the sexual energy of the child is renewed. He further stated that adolescents therefore develop interest in the opposite sex and engage in some sexual experimentation at this stage of their life.

It is in no way the case that an overtly negative stance against infant sexuality will prevent premarital sex from existing later in life. Sexualization often goes hand in hand with prohibition and the function of the prohibition is to hem in and intensify sexuality, after which it may be formed in a socially acceptable manner by enhancing the character traits that receive priority within a given society. This becomes clearer when one looks at cross-cultural studies. Entire cultures have been classified according to the fixations embedded in their handling of the problems of child rearing. Sexuality is most clearly exposed in societies where sexual relations between children and adults or among children themselves are instituted as a norm. In ancient Greece, boys were sexually initiated by adult males. In many so-called primitive societies, children are encouraged to practice sexual games, and their sexual initiation often takes place with older children but it may also take place with adult men according to Gilbert Herdt's (2005) . When a restrictive sexual

morality prevails, as it did in Europe from the time of Rousseau, the explicit interest in children—their formation, manners, and illnesses—constitute a source for understanding how they are formed, for better or worse, as sexual. It is in no way the case that an overtly negative stance against infant sexuality will prevent infant sexuality from existing. Despite efforts by puritan parents, sexually provocative clothes, in-depth knowledge of sexual matters, and games involving sexual roles are all communicated to young children by older children, by the media, and by an industry that has helped to make children's culture a poor copy of adult culture. This is arguably a more massive problem than the approaches of pedophiles, which has usually been the focus of suspicion in cases of premature sexual maturation and a tendency to indulge in premarital sex. This is of particular concern because there seems to be a connection between children assuming adult roles inappropriate for their age and a longer struggle after puberty to overcome infantile personality traits.

Self-Efficacy/External Locus of Control

Self-efficacy refers to individual's ability and confidence in him or herself to initiate and maintain behaviour, in this case sex within marriage or virginity. It is a feeling an individual has about his or her ability to attain goals. Locus of control refers to whether a person believes he or she is in control of things that happen to him/her in life. Having external locus of control implies believing that one is a victim of fate, that some powerful "others" control one's future (Heights et al 2001); as a result, one does not believe that one's personal choices will truly affect one's life. A study by Heights et al. (2001) explained that girls with poor self-efficacy and external locus of control are more likely to become pregnant.

This framework is applicable in explaining adolescent premarital sexual behaviour. Adolescents with poor self-efficacy, self-confidence and self-esteem indulge in premarital sex because they see themselves unable to reach family or societal values and goals of sex

within marriage or virginity. They believe that even if they tried to reach the goals, powerful “others” would disrupt their progress. Such adolescents were more likely to engage in premarital sex, less likely to purposefully reject unwanted sexual advances and more likely to engage in casual sexual relations (Heights et al. 2001). This theory explains the influence of peer pressure and significant others on adolescent premarital sex.

Social Exchange Theory / Exchange Orientation Theory of Sexuality

The theory is based on the economic and behaviouristic psychological theory which was developed and elaborated by Blau (2005). The theory holds that individuals make choices intended to maximize rewards and minimize costs to achieve the most profitable outcome. Sprecher (2002) expatiated on this theory while attempting to explain reason for premarital sex and premarital sexual satisfaction by emphasizing on the generalized reinforces. They believed that people choose to remain in social relationship in which profit is maximized. They explained further, the social relationship in which one gives something of value to get something valuable in return, which implies that every positive or negative action by someone should be met with similar weighted action by the recipients. Exchange orientation theory involves reward and cost. The more rewarding the behaviours is, the more the individual is likely to be involved in it. The theory explained also that sexual relationship must involve reciprocal exchanges. The theory thus explained why adolescents expect reward for sexual relationship. Hence, they exchange sex for material things and as a way of expressing love for someone.

According to Sprecher (2002), the more equitable the exchanges in the relationship, including sexual behaviour and feeling, the more likely the partners are to be satisfied in the relationship. Adolescent girls are more likely to give in to sexual relationship when they perceive a higher reward in the relationship than when the cost is higher. Adolescents (Meekers & Calves, 2007; Webb, 2004;) might go into premarital sex for monetary

rewards, material gifts, marriage prospect, love and affection, higher scores in examination and such other things. Profitable outcomes and reward could motivate the adolescents into premarital sex. It implies that students from low social economic status may get involved in premarital sex because of material gains they will get. This could explain why students get into sexual relationship with wealthy men generally termed “sugar daddies” who have the means and materials to assist them in schooling and purchase material goods (WHO, 2000; Schoept, 2004).

Empirical Studies

A study by Bonke (2006) examined prevalence of premarital sexual activities among the youths in a selected private University in Nigeria. A sample of 300 students comprised of 176 males and 124 females were randomly selected to participate in the study. The mean age and standard deviation was 21.7 ± 6.3 years. The ex-post-facto research design was employed. A 35 item; youth premarital sexual activities (YPSA) developed by the researchers was used to generate data for the study. All the hypotheses data were tested at 0.05 level of significance. Data were analyzed with the use of Independent t-test and Multiple Regression and Analysis of Variance. The results indicated that there was a significant difference between the sex, age and family background and premarital sexual activities, as $F(3,296) = 3.303$; $P < 0.05$. Also, family background contributed most to premarital activities ($\beta = 0.439$; $t = 4.174$; $P < 0.05$), followed by age grouping as $\beta = 0.216$; $t = 2.142$ ($P < .05$) and finally by gender, ($\beta = .083$; $t = .825$; $P > 0.05$). Lastly, there is no significant difference between the age grouping and premarital sexual activities. It is seen that $\beta = 0.319$; $df = 298$ ($P > 0.05$). On the basis of finding, it was concluded that gender and family background play a vital role in engagement of premarital sexual activities by young people, whereas age that suppose to have impact on the dependent variable proved wrong the intention of the researchers.

A study on premarital sexual activities in an urban society of Southwest-Nigeria by Olubunmi (2010) had the aim to quantify premarital sexual behaviour in the study population. Interview method was used to collect information from a sample of 2,500 women within the age bracket of 15-49 years. Percentage distribution and logistic regression were used in the analysis. The results revealed a very high rate of sexual activities; 14.24% had had sex before age 14, and 84% had sex before their 20th birthday at which age only 1.28% of the sample had married. Premarital sexual activities are highly associated with age, age at marriage and puberty. The study calls for the empowerment of the younger population especially girl child through sexual right education to avoid the negative consequences associated with premarital sex. Studies of sexual behavior among young people in the developing world have generally neglected the circumstances in which sex takes place, most often assuming that when young people have sex, it is wanted and consensual. The few published studies on nonconsensual sex have often used highly selective samples, ignoring the experience of males and of married young people.

A 2004 population-based survey of young people in Nyeri, Kenya (Hurlock 2004) included a special module on sexual coercion. Descriptive data and multivariate analysis are used to explore the prevalence and patterns of sexual coercion among married and unmarried males and females aged 10-24. Among the sexually experienced respondents, 21% of females and 11% of males had experienced sex under coercive conditions. Most of the perpetrators were intimate partners, including boyfriends, girlfriends and husbands. In a multivariate logistic regression, females who had ever been married and those who did not live with a parent or spouse had a significantly elevated risk of sexual coercion (odds ratios, 2.6 and 3.1, respectively); sexual coercion was associated with having had multiple sexual partners and with having had a reproductive tract infection (2.2 and 2.5). Males who had been coerced into sex were significantly more likely than those who had not to have had a

first partner who was older by at least five years (82.9). In conclusion reproductive health programs for young people need to address nonconsensual sex, including the special needs of males and of married females.

This article by Fawole, Ogunkan, Awoniyi, & Oche (2010) explored the rising trends of cohabitation and premarital sex amongst Christian and non-Christian youths in South Africa that is becoming more socially acceptable. Moving from a premise of engaging in these practices, which is not biblically justified, to what a missional Christian church can do, this article sought to bring the numbers of those who cohabit and engage in premarital sex down. The thesis of this article was that a missional church should view cohabitation and premarital sex as frontiers that need to be crossed to save the lives of our youth by minimizing premarital pregnancies and the spread of sexually transmitted diseases (the Human immunodeficiency virus [HIV] and Acquired immune deficiency syndrome [AIDS] pandemic included). This will also go a long way in saving the sinking image of marriage. It is the presupposition of this article that cohabitation and premarital sex are great threats to the institution of marriage.

Sexual promiscuity among adolescents is reaching alarming rates despite widespread propaganda on HIV/AIDS menace and other sexually transmitted diseases. This study by Bamidele et al (2009) investigated the prevalence of sexual activity among females in secondary schools in Oshogbo, Osun state, Nigeria. The objectives of this study were to examine the prevalence of premarital sex, factors that predispose the adolescent female to the behavior and their awareness of consequences of premarital sex. The study was carried out with the use of questionnaire in sampling 500 female students from 8 different schools in Oshogbo. The data revealed that majority of the adolescents had engaged in premarital sex. It also showed that romantic love was the major predisposing factor in engaging in premarital sex. Unwanted pregnancy was the most widely known consequences of

premarital sex. The study recommended that parents and educationists should be stronger role models for the children, sex education should be added to the schools' curriculum and that awareness of the consequences of premarital sex should be intensified with particular emphasis on pregnancy and

Singh, et al. (2001), though accepting that educational level had influence on premarital sex, had a contrary view on the pattern of influence. To Singh, et al. (2001), in five countries studied there was strong negative association between level of educational attainment and having a child before 20 years of age. In Sweden and France, less than 1% of best educated women had a child before 20 years of age compared with 20% of those with least schooling; in Britain, 2-4% of the most educated and 36-46% of the least educated, United States 7% college education. In United States, 95% of 20-24 year old women with less than high school education become sexually active before 20 years of age compared with 72% of those with some post secondary education. In France, the proportion was 91% among those who had completed high school or had some post-secondary education. In all the countries, young women who were continuing education were less likely to have begun sexual activity before the age 20 years than those who were working only or who were neither working nor in school. They summarized by stating that there were large difference in early childbearing across income and educational attainment levels with poorer and less educated young women being more likely to have a child during adolescence.

The finding of substantial differences in adolescents' sexual activity according to educational attainment was consistent with the findings of multivariate studies showing that adolescents who were motivated to obtain an education and better access to educational opportunities also were motivated to delay sexual activity and childbearing (East, 2008). Lammers, (2000) reported that premarital sex was more prevalent among adolescent's

females who had lower educational commitments and who were expected to achieve less education than they desired. Views by Mensch et al. (2009) was that increase in school enrolment, which had undoubtedly contributed to rise in age at marriage and thus lengthened the period of exposure to risk of premarital sex, had intensified contact between adolescent boys and girls, undermined the authority of parents and increased the likelihood that schooling have influence on premarital sex. Zabin and Kiragu (2008) opined that schooling might actually encourage early sexual onset, especially as it tend to remove young people from supervision of traditional caretakers. Bledsoe and Cohen (2003) attributed the increase in premarital sexual activity to schooling, which gave adolescents greater independence from families and wider sexual access to young women. According to Bledsoe and Cohen, boys had heightened expectations and made sexual demands on girls away from the watchful eyes of their elders.

United Nations (UN) (2010) report on the on the global HIV/AIDS epidemic stated that peers in Nigeria often acted as accomplices in coercing young males and friends into sex. Hence, much sexual activity among young people continued to rise. Andres and Nicole (2003), PPFA (2011) and Kinsman (1998) reported that many youths felt strong peer pressure to engage in sexual intercourse. Werner-Wilson (2005) in his study reported among others, that generally adolescents males and females reported similar perception of peer pressure, but males were more likely to submit to peer influence; peer power was mediated by a U-shaped curve that was related to age; and although there were strong similarities between sexual behaviours of peers, the congruence might not reflect peer-pressure. Werner-Wilson (2005) pointed out that the adolescents did not end friendship due to difference in sexual behaviours nor did they succumb to peer pressure to conform to sexual standards, instead, according to him, similarity of sexual behaviours occurred via acquisition of friends who had similar sexual behaviours.

Larimore (2004) reported a strong desire of teenagers to identify and be accepted by peers as a strong factor as teenagers who felt incomplete, inadequate and unappreciated were more likely to seek comfort in sexual relationship. According to Larimore (2004), they also engage in such activities as frequenting discos, going to massage parlors, have night outs, going to night clubs/strip shows and frequenting beer parlors. Those activities according to Zablan (2010) were significantly associated with higher approval rates of premarital sex. Therefore, Larimore (2004) pointed out that friends who had similar commitment to abstinence did lower the risk of teen sex. Lauritsen (2004) further reported that premarital sex was more prevalent among adolescents who spent more time with peers.

The normal process of an adolescent's development involves becoming less dependent on the family and paying more attention to the influence of peers. PPFA (2011) reported that of teens surveyed in urban and rural family practice office settings, a higher percentage of sexually active younger adolescents believed their peers to be sexually active. Younger adolescents believed that their peers are more sexually active than 13 and 14 years olds who believed that many or all of their peers are sexually active. These adolescents were more than 20 times more likely to have had their first coital experience than those who believed that none of their friends was sexually active. Among adolescents younger than 15 years old at the time of their first intercourse, according to PPFA (2011) report, 16% reported peer pressures as the most important reason for having intercourse. In another study that focused on the role of peer norms in early sexual initiation, (PPFA, 2001), the adolescents perceived high prevalence of sexual intercourse, and believed there was a younger age of peers' sexual initiation. Furthermore, in another study in Vietnam by Mensch, Clark and Anih (2002), respondents who were adolescents were asked whether their best friends had ever had sex, 14% of boys and 9% of girls indicated that their best friend had sex. These proportions were higher than those that the respondents reported from

their own behaviour. The work concluded that adolescent' friends' behaviours mirror their own not excluding sexual activity. This view as confirmed by Onochie (2002), that most youths in Nigeria even get their education about sex through peer groups, friends/school mates and others due to poor source of information from appropriate media. Confirming the above, Andres and Nicole (2003) observed that many youths felt strong peer pressure to engage in sexual intercourse. Bethesda (2004) reported that most Americans believed there was too much sex on television. In a survey conducted in 2004, according to her, 75% of Americans felt that televisions have too many sexually explicit materials. Moreover, 86% believe that television had contributed to a decline in values. Parents Television Council (2009) stated that there was substantial evidence that sexuality and language is significantly affected by television. The council stated further that professional organizations like the American Academy of Padiatrics have drawn links between televisions depictions of sexuality and real life behaviour.

Escobar-Chares, Tortolero, Marjham and Low (2004) observed as earlier stated that exposure to mass media might contribute to adolescent sexual activity. The average American youth spends one-third of each day with various forms of mass media, mostly without parental oversight (Roberts, 2000). In a study carried out by Escobar-Chares et al (2004) on impact of the media on adolescent sexual attitudes and behaviours, the following findings were made: that the average teenager spent 3-4 hours per day watching television, that every hour of programming are watched by adolescents, an average of 6.7 scenes included sexual topics and about 10% of scenes shown portrayed couples engaging in sexual intercourse.

Two studies analysed the content of the top movie video rentals and R-rated movies frequently viewed by youths (Dempsey & Reichet, 2000). Both studies reported a high amount of sexual content with the most common activity being intercourse with unmarried

partners. Escobar-Chares et al. (2004) reported that the effect of such exposure was that adolescents who were exposed to NC-17 rated movies were more likely to have multiple sexual partners and had more frequent sex. However, they stated that they did not know if sexual content of R-rated movies had comparable effects.

Wingood, Diclemente, Harrington, Davies, Hook & Kim (2001) stated that American adolescents listen to radio nearly 40 hours a week. Roberts (2000) reported that teenagers spent an average of over 20 hours per week listening to music. Forty-two percent of the top selling CDs in 1999 contained sexual content, 41% of these were “pretty explicitly or very explicit” (Gentile, 1999). The effect according to Escobar-Chares et al. (2004), they did not know since it had not been determined scientifically.

Zollo, (2003) reported that the average American child saw an estimated 20,000 advertisement each year. By age 19 years, the average American adolescent had absorbed nearly 300,000 advertisements. According to Escobar-Charles et al. (2004), the sexual content had not been scientifically determined and they did not know their effect on adolescent sexual attitude and behaviour.

American Academy of Pediatrics (2001) reported that on average, children 9-17 years old used the Internet 4 days per week and spent almost 2 hours online at a time, sixty-one percent of youth using computers, “surf the net”, and 14% reported seeing something they would not want their parent to know about (Strasburg and Donnerstein 2000). According to Roberts (2000), 60% of youths reported accessing chat rooms and websites mainly alone. Escobar-Chares et al. (2004) stated while pornography was widely available on the Internet, there were no systematic data concerning the sexual content of those sites visited by adolescents and their impact on the sexual attitudes and behaviours of adolescents, were not known to them. Their reports, however, suggested that exposure and access to mass media contributed to adolescents sexual activities.

According to Bandura (2002), the mass media is a medium through which the adolescents can acquire new behaviours, ideas and practices through the process of observational learning or modeling identification, Obi (2002) observed that viewing erotic films or reading erotic literature produces transitory increase in sexual arousal and sexual activities such as masturbation, petting, marital and premarital intercourse. Sexual viewing Obi (2002) continued, fosters more permissive attitude towards erotic depictions. The implication of sexual modeling, Obi (2002) pointed out, differed markedly depending upon the moral codes applicable to each society. Given the negative conditioning of sexual attitudes and behaviours, many people felt that exposure to sexual materials and sexual models under improper condition might lead to premarital sexuality and antisocial transgression.

In Nigeria, access to mass media had increased; particularly radio, television and video viewing and their influence on the social life of Nigerian youth could not be over-emphasized (Woruka, 2011). Population report (1995) stated that in Nigeria, many urban young men and women in focus group discussions said that they learnt about sexuality from popular magazines such as Ikebe Supper, Lolly and Fantasy, television and home video. In the views of Woruka (2011), mass medias were as double-edged swords as they sometimes tended to transport the minds of growing adolescents a world of fantasy and illusion. This therefore made the adolescents to shy away from realities and do with fantasies that they had emulated from the mass media. Comstock (2008) argued that television, for instance presented to the adolescents, worlds different from the world they lived in. Hurlock (2010) believed that children and adolescents learned to form concepts and values from what was seen and read from the mass media. She stated further, that most information seen in pictorial mass media, especially comics, movie and television contained elements of unreality even though they might be skewed towards reality.

Researchers have found strong effects of parental supervision on the risk of premarital pregnancy and early sexual activity for black adolescent women in Chicago (Hogan & Kitagawa, 2005). They also stated that over supervision of adolescents by parents might lead them to premarital sexual experimentation and eventual pregnancy. Hogan and Kitagawa (2005) explained that large family size was associated with teen pregnancy because of lack of parental supervision. Wu (2006) was of the opinion that children from large family might not get parental attention and surveillance required to keep them out of premarital sex. Such students according to Wu (2006) were at risk of premarital sex and teen pregnancy due to weak prenatal supervision. Larimore (2004), Renninger and Chambliss (2001) reported that lack of parental supervision and monitoring were associated with early onset of premarital sex.

Nye et al. (2000) found out that the degree of permissiveness was higher in larger families than smaller ones. They further said that adolescent from large families had more freedom. The amount of permissiveness among adolescents from large family predisposed them to premarital sex based on the influence of reference group (Kelly, 2008). Tygart (2001) in his study of 800 adolescent males and females found out that parental influence in large families was often diluted and that children from large families were influenced more by peers since adolescents from large families did not see them as effective role players.

Zablan (2010) stated that being an only child was viewed as being associated with lower approval rate of premarital sex. This, according to Zablan might reflect in more parental control being exerted on the only child than greater number of siblings. Smaller family size according to Nye et al. (2000) was said to promote personality development of children. They were more intelligent, creative, independent, and energetic as well as being healthier, physically and mentally. AGI (2002) posited that personality variables affect the likelihood of adolescents engaging in premarital sex. Jessor (2007) maintained that

adolescents' behaviours including those associated with premarital sex were functions of the individual's personality system and perceived environment. Plotnick (2002) stated further, that when adolescents in large family began to develop negative self-concept and self-esteem of themselves they were more likely to involve in premarital sex.

A study in Bangladesh found high rates of premarital sexual activity among adolescents in rural areas where 38% of unmarried females were sexually active by age 18 years (UNFPA, 2007). Similar study by Singh (2008) confirmed the above observation by showing higher rural fertility for females less than twenty years than urban areas in all the places studied. PPFA (2011), though accepting that location influenced premarital sex, observed that it was urban location that influenced sex much. In their study, they found out that of teenage women attending urban-based medicine clinic, forty-one percent (41%) had had consensual heterosexual experience, fifty-one percent (58%) a current boyfriend, heterosexual experience, fifty-eight percent (58%) a current boyfriend, thirty-one percent (31%) reported past boyfriend and only eleven percent (11%) had never had a boyfriend. These experienced girls whose mean age of sexual initiation was 13-20 years were more likely than inexperienced ones to share unique information with their boyfriends, spend time with them and anticipated that their relationship would last long.

Rugpao (2007) reported on adolescent sexual attitudes and behaviours in his study in Thailand showed that among factory workers aged 13 – 20 years who lived in urban Changai, 6% had casual contact at first sexual relationship with a friend, 90% with fiancée (girls), 50% with sex workers and only 13% fiancé (boys). However, of the rural household survey conducted in North East Thailand of adolescents aged 13 – 20 years (Isarabhakdi, 2007), 6% had casual sex with a friend (girls) and only 4% with sex workers or partner (boys).

In Thailand, according to Amporns (2007), sexual activity was found to be much more common among male than female adolescents. He reported that in a study conducted in 21 private and government secondary schools, it was found that nearly one third of male students in grade 12 were sexually active. Soonthern's study (2006) also indicates that between 36% - 45% of males had their first sexual experience with commercial workers. In comparison with males, fewer female adolescents were engaged in premarital sex ranging from 10% in school based study to about 20% of young females drawn from the broad catchment area. Yet another study conducted among final year secondary school students in suburban province found that 40.6% of male and 6.6% of female respondents had experienced sexual intercourse (Sartsara, 2005). The above studies also found that the average age at their first sexual intercourse was around 16 years for boys and 18 years for girls. Limited information from Bangladesh revealed a very high prevalence of premarital sexual activity for males (61%) as compared with females 24% (Uddin, 2003).

Further studies in different countries had shown marked disparity in premarital sex experience by gender. UNESCO (2003) reported that in China, nearly half of the male college students as compared with one-third of the female students had experienced masturbation. In Lao PDR, men were exposed to more risk than women because it was socially acceptable for them to have many sex partners. Furthermore, according to UNESCO, men did not like to use contraceptive while having sexual intercourse. In the survey (UNESCO, 2003) it was also revealed that almost 47% of male and 11% of female respondents admitted to having more than one sex partner. Majority of female respondents said they never had sexual intercourse while only 31% of male said the same.

World Health Organization (WHO) (2003) reported that a study revealed that almost half of young women who engaged in premarital sex were unaware that pregnancy was possible after only one sexual encounter. It added that seventy percent (70%) of them

who demonstrated awareness that pregnancy was possible after start of menstruation, around eighty percent (80%) of these girls were unaware of their fertility period. Only two percent (2%) had knowledge of their monthly fertility cycles, hence unrestrained sexual encounters and consequent high rate of teenage pregnancy. Nzioka (2001), therefore, affirmed that these findings pointed to the need to promote communication skills leading to sexual responsibility among adolescents through outlets acceptable to them.

Goodkind (2004) asserted that the government unwillingness to provide reproductive health information to young people, had probably led to a rise in premarital sex and pregnancy. Goodkind and Anih (2007) made similar argument in their paper documenting an increase in condom use in Vietnam. Kerby (2011) also explained that the extent to which factors, including the receipt of sexuality education and access to reproductive health services vary across countries might contribute to differences in adolescents' sexual and reproductive health behaviours.

In a study on the relationship between the source of sex education and adolescent attitudes about sexuality, Sommers and Glenson (2001) found out that in the source of knowledge, differences in sources correlated with differences with adolescent attitudes. Sex education from peers and professional educators compared with sex education from parents according to Smutz (2004), reported that the adolescents would prefer to learn about sex from their parents. Smutz (2004) went further to suggest that, perhaps, sex education should be reformed by placing stronger emphasis on parental involvement. May be according to him, there would be drop in the level of the consequent teenage pregnancy. Other works also recognized the importance of family sex education in reducing prevalence of premarital sex behaviours (Sue, 2004; Makinde 2004; Kanter & Zilnik, 2007).

Obi (2002) in her work found a positive relationship between the amount of sex education received by adolescents and involvement in premarital sex. The level of

premarital sex was higher for adolescents who had received sex education. She also found out in the study that college students with sex education knowledge involved in more sexual activity. This finding was supported by Moore, Peterson and Furstenberg (2006) who found out that sex education by parents did not discourage adolescent's involvement in premarital sex.

The review on the influence of sex education on premarital sex appears a bit conflicting. While a few works suggested that sex education had no influence at all, most of them agreed that it influenced premarital sex to a large extent. However, even among these works, there seemed to be no agreement on the direction of influence. Some writers and research works pointed out that exposure to sex education removed fear from adolescents, built confidence in them and consequently increased their involvement in premarital sex. Others posited that it reduced the probability of indulging in promiscuous sex because of awareness of the consequences of indiscriminate sexual activity.

The study is aimed at ascertaining the prevalence of premarital sex and the comparative analysis of the variable that influence it, among secondary school adolescent students in Anambra State. Pertinent literature was reviewed on the attributes of secondary school students; the concepts of prevalence and trend of premarital sex among adolescents as well as factors influencing premarital sex.

From available literature (Werner Wilson, 2005; Lammers, 2000; Zablan 2000; Mensch et al 2006 etc), the factors, which influence premarital sex, include family socio-economic status, level of education attainment, peer groups, family size, home stability and nature of school. Other identified factors are parenting styles, life style of significant others, student's location, student's religious background, age at onset of puberty, culture, exposure to mass media and sex education.

Detailed review of the above factors indicated that authors and works are in conflict about the extent and direction of effect of these factors. While some works (WHO, 2000; Werner-Wilson, 2005) pointed out that some of the above factors influence premarital sex to either high or low extent, others like Obi (2002) disagreed, but rather enumerated other levels of influence. They are also not fully clear with regards to the relationship of these factors to premarital sex in Anambra State secondary schools in particular. Moreover, little literature is available on the prevalence and variables, which are responsible for the extent of premarital sex involvement among, secondary school students in Nigeria, including Anambra State.

Theoretical frameworks such as Sigmoid Freud psychoanalytic theory and social learning theory of sexuality among others, in identifying causes of premarital sex, were also critically examined especially with reference to how these theories relate to premarital sex. Again these theories are not fully clear as they relate to prevalence of premarital sex among adolescents in Anambra State secondary schools. Some empirical studies were also reviewed. A base line study of adolescent students in Chitwan Districts found a correlation between knowledge of HIV/AIDS and prevalence of premarital sex among them. Also a study on sexual behavior patterns among Ugandan University Students and factors influencing them that were studied (Anette 2011) revealed high prevalence of premarital cohabitation and a large percentage with first coital experience between the ages of 22 and 27. In addition, religion does not appear to have a strong inhibiting influence on premarital sex, although it does affect the frequency of changing partners. Another study by Bonke (2006) which examined prevalence of premarital sex among youths in a Nigerian private University concluded that gender and family background play a vital role on the prevalence of premarital sex by young people. However, from these reviewed literature no empirical

data has been identified on prevalence of adolescent premarital sexual behaviours and variables influencing them in Anambra state. This present study will hopefully fill this gap.

CHAPTER THREE

MATERIALS AND METHODS

Research Design

The research design adopted in this study is the cross – sectional descriptive survey design. This is a systematic empirical enquiry where the researcher has no direct control over the independent variables as their manifestations had already occurred or because they cannot be manipulated (Uzoagulu, 2011).

Setting of the study

The area of this study is Anambra State of Nigeria. Anambra State is one of the thirty six (36) States of Nigeria and is situated on a generally low elevation on the eastern bank of the River Niger. It is bounded in the north by Kogi State, in the south by Imo State, in the east by Enugu State and in the west by Delta State.

The State comprises of 21 LGAs, 3 senatorial zones, 6 education zones and 177 communities, with the capital at Awka. The State has a population of about 4,055,048 people according to 2006 census with 405,504 as children and 1,013,762 as adolescents (National Population Commission, 2006). Religiously, the State could be described as one of the States that has the greatest number of Christian worshippers. The predominant denominations are the Roman Catholic, Orthodox Protestants and Pentecostal Protestants. There are few Muslims resident in the State (Iheagwam, 2008).

Target Population

The target population of the study comprises of unmarried secondary school students in Anambra State, that is, all the members of the specific group to which the investigation relates (Nworgu, 2001). There are all together 428 secondary schools in the State. The estimated population of students in all the schools based on the Ministry of

Education records (2012) was 226, 106. These 226, 106 secondary school students formed the population for the study. The spread of the target population was based on education zone, location, category of school, type of school and sex.

Ethical Consideration

Ethical approval was sought and obtained from Faculty of Health Sciences and technology ethical committee. This implies the code of conduct that guides researcher while carrying out research. It is meant to protect the respondents from physical and psychological harm. This also involves protection of the respondents' confidentiality, in the sense that all information obtained in the course of the research was not disclosed, and the respondents were not exposed through details of the data obtained from them; non – plagiarism and non – falsification.

Sample and Sampling Techniques

The study sample consisted of 955 students drawn from the study population. This sample size was calculated using the Krejcie and Morgan sample size table (Krejcie & Morgan, 1970). In the Krejcie and Morgan Sample size table, populations of 100,000 require a minimum sample size of 384. There are 226,106 secondary students in Anambra State. So I applied the formular:

$$384/100,000 \times 226,106 = 868.$$

The calculated minimum sample size was 868.

Attrition

In order to cater for anticipated attrition, 10% of the minimum sample size was calculated and added to the minimum sample size thus:

$$10/100 \times 868 = 86.8$$

$$868 + 86.8 = 954.8 \approx 955.$$

Hence 955 respondents were sampled.

Multi staged sampling technique was used to select the sample for the study. In the first stage, the schools were listed based on the existing six (6) education zones in Anambra State which are Aguata, Awka, Nnewi, Ogidi, Onitsha and Otuocho zones. Convenience sampling method was used to select three education zones namely Awka, Nnewi and Ogidi zones.

In each zone, schools were broken down into urban and rural, where each was further subdivided into public and private schools. There was a final breakdown of schools into single gender boys, single gender girls and co-educational schools. In the selected schools, students were stratified into classes and by this process one class/stream of JSS 111 and one class/stream of SS 1 – 3 were selected from each of the single gender boys, single gender girls and co-educational secondary schools. The sample for the study consisted of respondents made up of 152 girls from single gender secondary school and 260 girls from co-educational secondary schools giving a total of 412 girls. The same principle was employed for the boys in which 190 were selected from single gender schools and 353 from co-educational schools giving a total of 543 boys, and a grand total of 955 secondary school adolescents. It is to be pointed out that the assignment of students to classes was done ab initio by the respective principal at first come first served basis which can be equated to a random process.

The Research Instrument

The instrument used for data collection in the study was the Secondary School Students Sex Variables Questionnaire (SSSVQ) which was constructed by the researcher. The instrument has two sections. Section A sought information from the respondents about their personal background such as their class, sex, age, location, religious denomination, number of children in their families and parents' relationships. Other attributes required in the section were; age at onset of puberty, extent of peer influence, exposure to mass media

and sex education. Section B contains items designed to measure the respondents' degree of involvement in premarital sex. The response options were as indicated in the Likert scale as follows: very high extent; high extent; moderate extent; little extent and very little extent. It also covered the prevalence of pre marital sex among adolescents.

Validity of the Instrument

Two experts in Nursing Science, two experts in measurement and evaluation, and one expert from community medicine validated the instrument. The experts were each given a draft copy of the questionnaire along with the purpose of the study, research questions and hypotheses to critically assess for relevance of content, clarity of statements and logical accuracy of the instrument. The experts suggested various improvements on the draft of the instrument presented to them. The suggestions made by five experts were used to design the present copy of the instrument; it was approved by the supervisor and hereby attached as Appendix B.

Reliability of the Instrument

The instrument was pre-tested on 20 secondary schools adolescents (respondents) from an educational zone not included in the study but has same characteristics set up as the area of study. In order to establish the reliability of the instrument, split-half method was employed. The correlation coefficient obtained was 0.73. Spearman Brown correction was applied and the correlation obtained was 0.97. A correlation of 0.97 demonstrated that the instrument was reliable.

Administration of Instrument

Data collection was generally done during school recreation to avoid interruption of school programme. On the agreed date for each school, the subjects were assembled and the researcher after introducing self-informed them of the purpose of the study. With the help of the principal and class teachers in each school, the instruments was administered to the

subjects and collected on the spot giving a 100% response rate. Opportunities were provided for questions to be asked before the students settled down to complete the instrument.

Method of Data Analysis

Data were collated and entered into the computer by a statistician. Data was analyzed using IBM SPSS Version 20 software for data analysis. Frequencies and percentages were determined. Appropriate tests of statistical significance such as chi square test and logistic regression were applied to test for associations. Statistical significance was set at $p < 0.05$.

CHAPTER FOUR

RESULTS

Table 4.1 shows the distribution of subjects according to their socio-demographic variables. More than half of the respondents (54.8%) are aged between 14 and 17 years of age. Males constituted 56.9% of all the respondents while the rest were females. Seventy five percent of the students attained their puberty at age group 12-14 years, while 4.7% attained it at ≥ 15 years of age. The SSS1 respondents made up the largest proportion of the subjects (32.5%) while the JSS 3 class constitutes the least proportion (17.4%). The urban respondents were 53.3% as opposed to the students in rural areas who made up 46.7% of total. Majority of the respondents were Catholics (47.9%). This is followed by Orthodox Protestants (35.9%), Pentecostal Protestants (10.9%) while the Muslims made up 5.3% of respondents. Half of the respondents (50%) have 4-7 children in the family, 28.3% has 1-3 siblings while 21.7% has ≥ 8 children. Whereas 55.4% of the secondary school adolescents attend public schools, 44.6% attend private schools. Also 64.2% are in mixed/co-educational institutions while 35.8% are in single gender institutions. Majority (78.1%) of the secondary school adolescents are products of intact marriages, the parents of 6.9% of respondents are separated while another 6.9% has one or both parents deceased. Moreover 4.6% of the students are products of single parenthood while 3.5% said their parents were divorced.

Figure 4.1 shows the prevalence of pre-marital sex among the respondents. Out of the 995 respondents, 636 (66.6%) have engaged in pre-marital sex, while 319 (33.4%) have never engaged in pre-marital sex.

Table 4.1a: Distribution of the respondents according to socio-demographic variables.

Variable	Frequency	Percentage	Mean	SD
Age (years)				
10-13	131	13.7	14.5	2.1
14-17	523	54.8		
≥ 18	301	31.5		
Total	955	100.0		
Gender				
Male	543	56.9		
Female	412	43.1		
Total	955	100.0		
Age of onset of puberty (years)				
9-10	187	19.6		
12-14	723	75.7		
≥15	45	4.7		
Total	955	100.0		
Class				
SS3	229	24		
SS2	249	26.1		
SS1	311	32.5		
JS3	166	17.4		
Total	955	100.0		
Location				
Urban	509	53.3		
Rural	446	46.7		
Total	955	100.0		
Religious Denomination				
Catholic	457	47.9		
Orthodox protestant	343	35.9		
Pentecostal protestant	104	10.9		
Muslim	51	5.3		
Total	955	100.0		
Number of children in the family				
1-3	270	28.3		
4-7	478	50.0		
≥8	207	21.7		
Total	955	100.0		
Nature of school				
Private	426	44.6		
Public	529	55.4		

Table 4.1b: Distribution of the respondents according to socio-demographic variables.

Total	955	100.0
Type of school		
Single gender	342	35.8
Co-educational	613	64.2
Parent's marital relationship		
Intact marriage	746	78.1
Separated	66	6.9
Divorced	33	3.5
One/both of them is/are dead	66	6.9
Single parenthood	44	4.6
Total	955	100.0

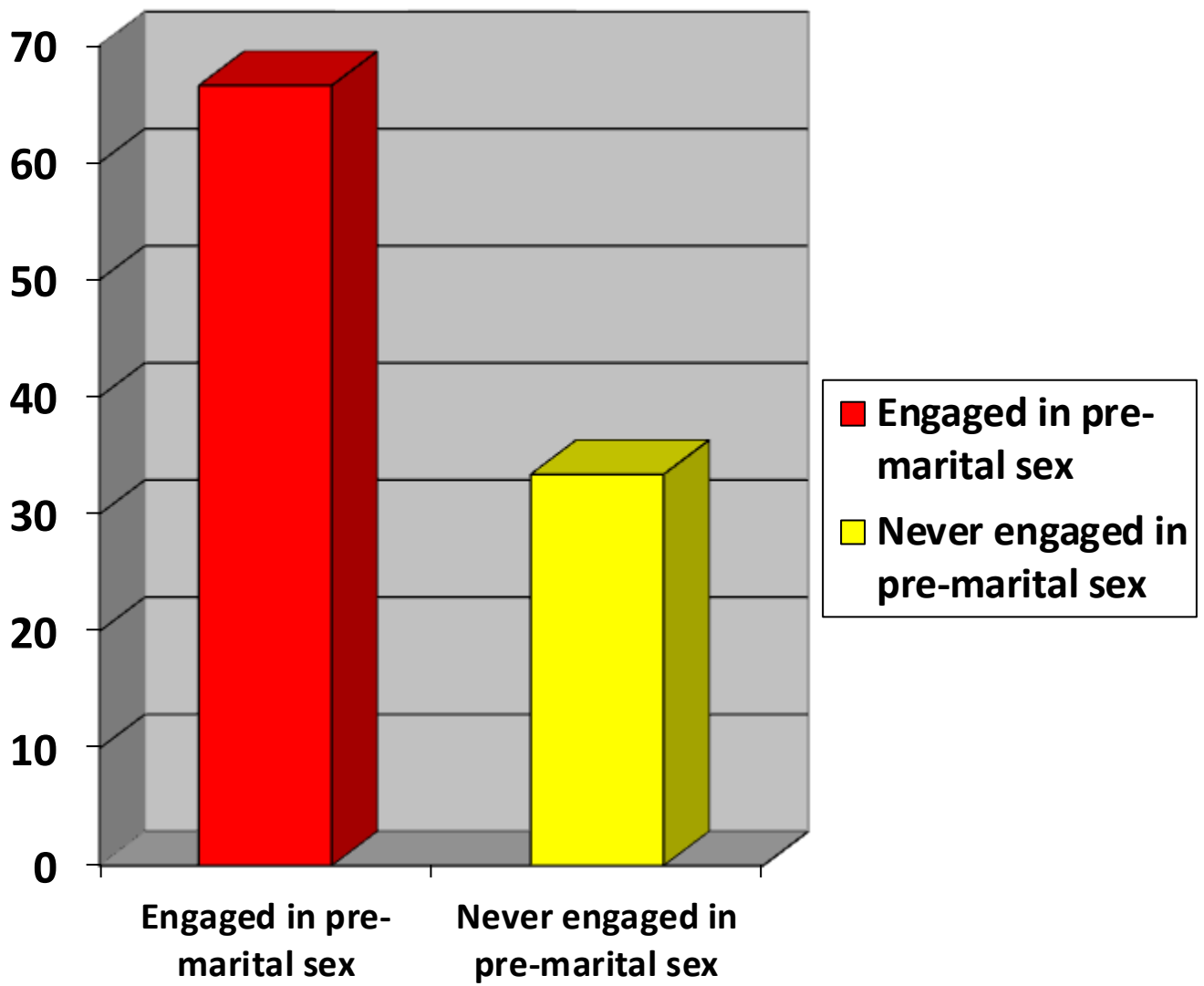


Figure 4.1. Prevalence of pre-marital sex among the respondents.

33.4

Table 4.2 shows the effect of gender on pre-marital sex. The table shows that among the 636 respondents who have had pre-marital sex, 500 (78.6%) were males, while 136 (21.4%) were females. This difference was statistically significant ($X^2 = 0.010$, $df=1$, $p=0.010$). This shows that gender has an effect on pre-marital sex.

Table 4.2. Effect of gender on the prevalence of pre-marital sex.

Gender	Pre-marital sex			X²	Df	p-value
	Yes N (%)	No N (%)	Total N (%)			
Male	500 (78.6)	43 (13.5)	543 (56.9)	21.256	1	0.010
Female	136 (21.4)	276 (86.5)	412 (43.1)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.3 shows the effect of class of study on pre-marital. Out of the 636 respondents that have had pre-marital sex, 200 (31.5%) were in SS3, 203 (31.9%) were in SS2, 170 (26.7%) were in SS1 and 63 (9.9%) were in JS3. This difference was statistically significant ($X^2=10.500$, $df=3$, $p=0.030$). This shows that there was a statistically significant association between class of study and pre-marital sex.

Table 4.3. The effect of class of study on pre-marital sex.

Class of Study	Pre-marital sex			X²	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
SS3	200 (31.5)	29 (9.1)	229 (24.0)	10.500	3	0.030
SS2	203 (31.9)	46 (14.4)	249 (26.0)			
SS1	170 (27.0)	141 (44.2)	311 (32.6)			
JS3	63 (9.9)	103 (32.2)	166 (17.4)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.4 shows the effect of age on pre-marital sex. Out of the 636 respondents that have had pre-marital sex. Out of the 636 respondents that have had pre-marital sex, 350 (55.0%) were in the 14-17 years age bracket, 200 (31.5%) were in the ≥ 18 years age bracket, and 86 (13.5%) were in the 10-13 years age bracket. This difference was statistically significant ($X^2 = 6.020$, $df=2$, $p=0.040$). This shows that age has an effect on pre-marital sex.

Table 4.4. The effect of age on pre-marital sex

Age (years)	Pre-marital sex			X²	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
10-13	86 (13.5)	45 (14.1)	131 (13.7)	6.020	2	0.041
14-17	350 (55.0)	173 (54.2)	523 (54.8)			
≥18	200 (31.5)	101 (31.7)	301 (31.5)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.5 shows the effect of family size on pre-marital sex. Out of the 636 respondents that have had pre-marital sex, 56 (8.8%) had 1-3 siblings, 400 (62.9%) had 4-7 siblings while 180 (28.3%) had ≥ 8 siblings. This difference was statistically significant ($X^2 = 7.030$, $df=2$, $p=0.040$). This shows that family size had an effect on pre-marital sex.

Table 4.5. The effect of family size on pre-marital sex

Family size	Pre-marital sex			X^2	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
1-3	56 (8.8)	214 (67.0)	270 (28.3)	7.030	2	0.040
4-7	400 (62.9)	78 (24.5)	478 (50.0)			
≥ 8	180 (28.3)	27 (8.5)	207 (21.7)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.6 shows the effect of location on pre-marital sex. Out of the 636 respondents that have had pre-marital sex. Out of the 636 respondents that have had pre-marital sex, 410 (64.5%) were in the urban area, while 226 (35.5%) were in the rural area. This difference was statistically significant ($X^2=9.9196$, $df=1$, $p=0.027$). This shows that location has an effect on pre-marital sex.

Table 4.6. The effect of location (place of residence) on pre-marital sex.

Location	Pre-marital sex			X ²	Df	p-value
	Yes	No	Total			
	N (%)	N(%)	N (%)			
Urban	410 (64.5)	99 (31.0)	509 (53.3)	9.196	1	0.027
Rural	226 (35.5)	220 (690)	446 (46.7)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.7 shows the effect of type of school on pre-marital. Out of the 636 respondents that have had pre-marital sex, 310 (48.7%) were in private schools, while 326 (51.3%) were in public schools. This difference was not statistically significant ($X^2=1.147$, $df=1$, $p=0.887$). This shows that type of school had no effect on pre-marital sex.

Table 4.7. The effect of type of school on pre-marital sex.

Type of school	Pre-marital sex			X²	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
Private	310 (48.7)	116 (36.4)	426 (44.6)	1.147	1	0.887
Public	326 (51.3)	203 (63.6)	529 (55.4)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.8 shows the effect of peer pressure on pre-marital sex. Out of the 636 respondents that have had pre-marital sex, 232 (36.5%) had VHE of peer pressure, 213 (33.5%) had HE to peer pressure, 82 (12.9%) had ME to peer pressure, 61 (9.6%) had LE to peer pressure, while 48 (7.5%) had VLE exposure to peer pressure. This difference was statistically significant ($X^2=3.748$, $df=4$, $p=0.038$). This shows that peer pressure had effect on pre-marital sex.

Table 4.8. The effect of peer pressure on pre-marital sex.

Peer Pressure	Pre-marital sex			X²	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
VHE	232 (36.5)	18 (5.6)	250 (26.2)	3.748	4	0.038
HE	213 (33.5)	13 (4.1)	226 (23.7)			
ME	82 (12.9)	130 (40.8)	212 (22.2)			
LE	61 (9.6)	73 (22.9)	134 (14.0)			
VLE	48 (7.5)	85 (26.6)	133 (13.9)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.9 shows the effect of exposure to mass media on pre-marital sex. Out of the 636 respondents that have had pre-marital sex, 200 (31.4%) had VHE exposure, 150 (23.6%) had HE exposure, 150 (23.6%) had ME exposure, 115 (18.1%) had LE exposure, and 21 (3.3%) had VLE exposure. This difference was statistically significant ($X^2=4.051$, $df=4$, $p=0.041$). This shows that exposure to mass media had an effect on pre-marital sex.

Table 4.9. Effect of exposure to mass media on pre-marital sex.

Extent of exposure to Mass Media	Pre-marital sex			X^2	Df	p- value
	Yes N (%)	No N(%)	Total N (%)			
VHE	200 (31.4)	43 (13.5)	243 (25.4)	4.051	4	0.041
HE	150 (23.6)	8 (2.5)	159 (16.6)			
ME	150 (23.6)	7 (2.2)	157 (16.4)			
LE	115 (18.1)	69 (21.6)	184 (19.3)			
VLE	21 (3.3)	192 (60.2)	213 (22.3)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.10 shows the effect of the view of respondents on sex education on the prevalence of pre-marital sex. Out of the 636 respondents who have had pre-marital sex, 133 (20.9%) had VHE of influence on pre-marital sex, 130 (20.4%) reported HE, 127 (20.0%) reported ME, 126 (19.8%) reported LE, while 120 (18.9%) reported VLE. This difference was statistically significant ($X^2=5.484$, $df=4$, $p=0.064$). this shows that the views of the respondents on the influence of sex education on pre-marital sex, had no effect on their pre-marital sex status.

Table 4.10. Effect of view of respondents on sex education on the prevalence of pre-marital sex.

View of respondents on exposure to sex education	Pre-marital sex			X^2	Df	p-value
	Yes N (%)	No N(%)	Total N (%)			
VHE	133 (20.9)	110 (34.5)	243 (25.4)	5.484	4	0.064
HE	130 (20.4)	28 (8.8)	158 (16.5)			
ME	127 (20.0)	30 (9.4)	157 (16.4)			
LE	126 (19.8)	58 (18.2)	184 (19.3)			
VLE	120 (18.9)	93 (29.1)	213 (22.3)			
Total	636 (100.0)	319 (100.0)	955 (100.0)			

Table 4.11 shows the adjusted odds ratios for predictors of engagement in pre-marital sex. Note that adjusted odds ratios were obtained for only variables that were significant before adjustment. Hence variables that were not represented in the adjusted odds ratios were not significant pre-adjustment (they include “Type of school” and “The view of the respondents on the influence of sex education on pre-marital sex”).

Table 4.11 shows that male respondents were twice more likely to engage in pre-marital sex than the female respondents and this was statistically significant [OR: 2.431, (95% CI: 1.705-3.465), $p=0.000$]. Respondents that were in Senior Secondary 2 and above (\geq SS2) were 3 times more likely to engage in pre-marital sex than those that were in Senior Secondary 1 and below (\leq SS1), and this was statistically significant [OR: 3.257, (95% CI: 2.385-4.450), $p=0.000$]. Respondents that were 14 years or older (≥ 14 years) were twice more likely to engage in pre-marital than those that were 13 years or younger (≤ 13 years), and this was statistically significant [OR: 2.908, (CI: 2.153-3.928), $p=0.000$]. Respondents that were from families with 4 or more children (≥ 4 children) were 4 times more likely than those from families with 3 or less children (≤ 3 children) to engage in pre-marital sex, and it was statistically significant [OR: 4.139, (CI: 2.945-5.817), $p=0.010$]. Respondents who live in the urban areas were twice more likely to engage in pre-marital sex than respondents who live in the rural areas [OR: 2.000, (CI: 1.180-2.143) $p=0.002$]. Respondents who had “medium extent exposure to mass media or more” (\geq ME) were 3 times more likely to engage in pre-marital sex than those who had “low extent exposure to mass media or less” (\leq LE) [OR: 3.153, (CI: 2.270-4.380). Respondents who had “medium extent exposure to peer pressure or more” (\geq ME) were twice more likely to engage in pre-marital sex than those who had “low extent exposure or less” (\leq LE) [OR: 2.240, (CI: 1.601-3.134), $p=0.030$].

Table 4.11. Adjusted Odds Ratio for predictors of engagement in pre-marital sex.

Variables	Odds Ratio	Engagement in pre-marital sex	
		95% Confidence Interval	p-value
Gender			
Male	2.431	1.705-3.465	0.000
Female	1.000		
Class of Study			
≥ SS2	3.257	2.385-4.450	0.000
≤ SS1	1.000		
Age			
≥ 14 years	2.908	2.153-3.928	0.000
≤ 13 years	1.000		
Family size			
≥4 children	4.139	2.945-5.817	0.010
≤3 children	1.000		
Location			
Urban	2.000	1.180-2.143	0.002
Rural	1.000		
Exposure to Mass Media			
≥ME	3.153	2.270-4.380	0.000
≤LE	1.000		
Peer Pressure			
≥ ME	2.240	1.601-3.134	0.030
≤ LE	1.000		

CHAPTER FIVE

DISCUSSION

According to Uddry & Billy (2007) pointed out that the period of adolescence is in fact a period of heightened sexual activities. According to them, the physiological changes that occur during this period include dramatic increase in sex hormone that seem to contribute to increased sexual motivation apart from its effect on pubertal development. Therefore, many events occur in the life of school age adolescents that have implication for sexual behaviors.

The prevalence of pre-marital sex in this study was 66.6%. This is higher than the prevalence (14.9%) reported among school going adolescents in Coast Province, Kenya (Rudatsikira, Ogbwell, Siziya & Muula, 2007). Similarly in Thailand, the prevalence was 11.0% (Karl & Supa, 2011). Boyd (2000) reported that in spite of the vigorous campaign against indiscriminate sexual activities as well as the cultural values attached to sex after marriage, people particularly adolescents,(14-17years) have continued to intensify their interest in pre-marital sexual activities; premarital sexual intercourse is common and appears to be on the rise in all regions of the world (Boyd, 2000). The result is also similar to what was found in an African study by World Health Organization in 2000. They observed that premarital sexual activity is higher in sub-Saharan Africa than in other regions, and that 45% of females and 73% of males aged less than 19 years have had premarital sexual intercourse. Similarly, in Nigeria, Meeker (2004) reported that the median age for first sexual experience in Ondo State was 16 years. It is also akin to findings by Orubuloye, Caldwell and Caldwell (2001) who reported further that in Ekiti State, around 90% males, 97% of urban females and 64% of rural females have had sexual relationship while unmarried. These opinions and findings in support of and pointing towards very high prevalence of premarital sex among adolescents especially in sub Saharan Africa, serves as

a clarion call to all parents, guardians and adults to seriously re-examine and sharpen their parenting skills with a view to instilling the desired strong moral and disciplinary attitudes in the adolescents.

Some socio-demographic characteristics were found to have effect on pre-marital sex. The males were twice more likely compared with the females to engage in pre-marital sex [OR: 2.431, (95% CI: 1.705-3.465), $p=0.000$]. This is similar to the situation in Thailand (Karl & Supa, 2011) [OR: 1.66, (95% CI: 1.14-2.42)]. Gender of the student had been considered by many researchers as being a factor influencing the extent of involvement in premarital sex by adolescents. Amporns (2007) reported in a study in Cambodia, that although 22% of the females had any form of sexual experience, the sexual encounters had been with their boyfriends. However, the males were less likely to have their first sexual experience with their partners, even though a high proportion (about 42%) had their first sexual experience with girlfriend, another 40% had theirs with commercial sex workers. Furthermore, gender is an important factor in understanding premarital sexual attitudes and behaviors. Several studies (X. Zuo et al, 2012), (Liao et al, 2006) indicate that males are more likely to initiate sexual intercourse and have more permissive perceptions about sex than females. Yet few studies have explored possible reasons for these gender differences. With samples of unmarried adolescents in three Asian cities influenced by Confucian cultures, this article investigated the relationship between underlying gender norms and these differences in adolescents' premarital sexual permissiveness (PSP). In this study the older respondents (≥ 14 years) were twice more likely to engage in pre-marital sex than the younger respondents (≤ 13 years) [OR: 2.908, (95% CI: 2.153-3.928), $p=0.000$]. Similarly in Thailand the older aged respondents (≥ 15 years) were twice more likely to engage in pre-marital sex compared with the younger respondents [OR: 2.60, (95% CI: 1.80-3.74)] (Karl & Supa, 2011).

This study also revealed that large family size had an effect on pre-marital sex. Respondents from families with ≥ 4 Children were four times more likely to engage in pre-marital sex compared with those from families with ≤ 3 children. [OR:4.139, (95% CI: 2.945-5.817), $p=0.010$). This is in agreement with the hypothesis put forward by Wu & Martinson in 2003 to the effect that there could be a relationship between family size and personality, emotional and social development, less interaction between siblings, parental supervision and manner in which resources are allocated. This has been corroborated by studies by Nye et al in (2000), which have shown an increased relationship between family size and such variables as family affection, emotional adjustment of children, intelligence and achievement. Greater number of children, according to Obi in (2002) had the potential for increasing parental frustrations in dealing with the complexities of individual personality needs, the variety of role definition and their day-to-day demand and pressure of family life. An increase in the size of the family increases the complexity of intra-group relations and poses new problems in the fulfillment of individual family needs (Nye et al. 2000). Obi (2002) explained that the time and patience needed to explain rules were no doubt less available to parents with large families. Thus, according to him, as family size increases, parents tended to rely on strong behavioral control requiring the children to assume a passive role. Obi (2002) pointed out further, that when parents adopt strong behavioral control, adolescent might become rebellious and breakaway from the family. This view conformed to that of Teevan (2012) who contended that as adolescents breakaway from parents, they conform to their peers. Conformity with peers, according to Teevan (2012) might have impact on the adolescent. Thus Armstrong (2004) and Anarfi (2007) reported that adolescent girls' vulnerability to various forms of sexual violence and sexual coercion tended to increase once they live beyond the protection of their families and when they lived under conditions of poverty and conflict. Adolescents, as pointed out

by Caldwell et al. (2008) who were distant from parental love, acceptance and authority (a consequence of large family size) might seek affection and attention elsewhere, often becoming emotionally dependent on boyfriends and afraid of losing the boys, give in to their demands for sexual intercourse. Gage (2008) supporting this view stated that the need for attention, affection and strong emotional relationship might be an important motivation for involvement in premarital sex. This situation according to Berglund et al. (2007) was worse for girls who had poor relationship with their parents. Moreover the contribution of large family size to increased incidence of premarital sex among adolescents is further supported by Hogan and Kitagawa (2005) who explained that there was positive association between family size and teenage pregnancies because of low resources. In large families where parental resources are inadequate to meet each child's need, the need to survive becomes a driving force behind the adolescent girl's decision to engage in premarital sex (Gage, 2008). She stated further that adolescent girls are vulnerable to exploitative and coercive sexual practices, especially if the pressure on them to earn income is strong because of their own needs and demands from their parents. In line with the views of Gage (2008), WHO (2013) and Schoept, (2004) adolescent girls could enter into sexual relationship with older wealthy men who could take over their financial, school and material needs.

Another socio-demographic variable that had effect on premarital sex was the location of the schools. Adolescents in the urban secondary schools were twice more likely to engage in pre-marital sex compared with their rural counterparts [OR: 2.000, (95% CI: 1.180-2.143), $p=0.002$]. This result is at variance with the finding of Mensch et al in 2009 who reported that boys who were post pubescent and attended schools in rural areas were more likely to be sexually experienced. This discrepancy may have arisen because only the male adolescent was considered in the reference study. However the finding of our study is in

agreement with that of Moore et al, (2004) who saw living in urban slums as disadvantageous and described it as “living in dangerous environment”. To them, being such disadvantaged was associated with several factors that could influence teenage sexual and reproductive behaviours and outcomes. He stated that being so disadvantaged was associated with early age at first intercourse. According to him, in the urban slums are brothels, which served as “havens” for adolescent’s sexual escapades. He also reported that the vast majority of urban boys were engaged in unprotected sex, even with commercial sex workers. Moreover Hesketh (2009) pointed out that with increasing influence of urbanization in China, traditional attitudes towards sex, marriage and family had changed and pre-marital sex was acceptable. The extent was such that contraceptive tablets and condoms were made available at drug stores and supermarkets. Hesketh (2009) even pointed out that “back street” abortion, often seen in many developing countries were being available in China, particularly in urban areas. Jimenez (2003) reported that because of urbanization, young males did not give as much value to virginity as they did in the past.

In this study peer pressure was found to increase the likelihood of engaging in pre-marital sex. The respondents who had “Medium extent or more” peer pressure were twice more likely to engage in pre-marital sex [OR: 2.240, (95% CI: 1.601-3.134), $p=0.030$]. Peer pressure is hardly avoidable among secondary school adolescents because according to Nzeagwu (2003), the shift from parental influence to peer pressure is almost inevitable because that period of transition from parental shelter to that of peers present a period of vulnerability for the adolescent. The need to be accepted by peer and belongingness might exert a strong motivation to engage in sexual activities particularly when such peers were those that engage in such life style. A similar postulation was also put forward by Gage (2008) who found that adolescence is a period of affection and strong emotional relationship; thus, the need for affection and emotional relationship could motivate the

adolescent into initiating sexual activity. This situation was worse for girls who have poor relationship with their parents and for those whose fellow adolescent partners viewed sexual act as a demonstration of a girls love. Marriage is highly valued in Africa and most adolescent girls in interaction with their peers were preoccupied with finding whom to marry. Goldstein (2003) postulated that in order to attain the enviable position of “main” girlfriend and with the threat of displacement by other girls, a teenage girl might be pressurized to engage in sexual activities in order to prevent the partner from seeking other sexual outlets. The girl might have no choice but to submit to the sexual demands of the boyfriend who threaten to abandon her if she refused to comply with the sexual demands. On the other hand, among the boys, the desire to have sex could be encouraged by the African social environment, which is polygamous in nature. Therefore, in the early stages, boys were encouraged by their peers to seek sexual variety and most unmarried males kept several girlfriends at the same time. Through the employment of both positive and negative sanctions or by altering the individual’s assessment of risk, peer groups can affect the individual’s ability to objectively assess the relative costs and benefits of engaging in sexual activity, thus increasing the tendency to be involved in premarital sex. Moreover, according to Baker (2009), because most adolescents found talking about sex with parents and adults family members uncomfortable or impossible, peers often seemed to constitute the reference group for transmitting information about sexual activity. In a study carried out by Weiss, Whwlan and Gupta (2006) on female adolescents aged 13-19 years in Mexico among sexually active girls, perception of peer attitudes was liberal and communication with peer was statistically significant.

Exposure to mass media was found in this study to significantly affect the involvement of secondary school adolescents in premarital sex. Those who had “Medium extent or more” exposure mass media were 3 times more likely to engage in pre-marital sex [OR: 3.153,

(95% CI: 2.270-4.380), $p=0.000$]. This is in agreement with Comstock (2008) who argued that mass media was such a strong socializing agent that they should be given status as a social agent competing with parents, teachers and other agents in providing models for emulation and furnishing information that influenced the adolescents' belief, values and expectations. He added that adolescents' behaviour can be influenced by access to mass media. Comstock (2008) opined that the negative effects of mass media might culminate to making adolescents vulnerable to premarital sex when they were exposed to erotic and pornographic information. Furthermore, Craig (2008) argued that because the mass media provided information to the adolescents, they serve as models for behaviours acquired. That being the case, the mass media could either reinforce the efforts of parents and schools or weaken them. Comstock postulated in 2008 that there was little development in the last twenty-five years that had had greater impact on children and adolescents than the television. Many adolescents, he argued, spend more time in front of the television set than they do with their parents, although television was only one aspect of the mass media. Moreover, Comstock (2008) and Kerby (2011) stated that a 1995 poll of children ten to sixteen years of age in USA showed that children recognized that what they saw on television encouraged them to take part in sexual activities too soon. More than two-third said that they were influenced by television, 77% said that television showed too much sex before marriage and 62% said that sex on television and in movies influenced their peer to have sexual relationships when they were too young. These findings are pointers to the fact that television set the baseline standard for the entire entertainment industry. Most homes have television set and the average household watched 7 hours 15 minutes of television. Furthermore, Esu (2004) supports our findings by positing that premarital sex among adolescents was more pronounced, then in Nigeria than it was before because of changes in the society, especially the adoption of western culture and education. They attributed this to

exposure of adolescents to mass media such as television, pornographic books, movies, pictures, home videos and sexually loaded advertisements in Newspapers and magazines, and more recently the internet. Similarly the bad influence of mass media on adolescents' involvement in premarital sex is further corroborated by Verma (2010), who in a study of 61 students from India observed that international television viewers in India were more likely to support greater sexual freedom. Hence, Escobar-Charles, et al, (2004); Smith (2008) and PPFA (2011) concluded by saying that access to mass media whether print or electronics might likely have an impact on the sexual attitudes and behaviour of the adolescents.

In conclusion, the prevalence of pre-marital sex among the respondents was 66%. The following variables were found to increase the likelihood of pre-marital sex among the respondents: Male gender, older age, larger family size, urban location, exposure to mass media and peer pressure.

IMPLICATIONS FOR NURSING

The result of this study shows that the incidence of pre-marital sex among secondary school adolescents is high. The school health nurse has a big role to play. The adolescents who are in school usually approach the school health nurse for health counseling and for treatment of common health problems. The findings of this study will afford the school health nurse information needed to appropriately counsel the adolescents. There is need to continually create a forum for nurses and indeed other stakeholders in health to educate secondary school adolescents on the benefits of sexual abstinence. Secondary school adolescents are often a neglected age group who are neither adults nor children. There is hardly any health program targeted at them. Therefore there is a strong need for nurses, an important professional group in health care, to create, implement and sustain school adolescent health services to take care of the health needs of the adolescents.

Nurses must spearhead the establishment and running of recreational sporting facilities for adolescents in secondary schools to help them dissipate their abundant energy and promote good health. Nurses should also employ their requisite skills in the running of preventive and curative school health services targeted at adolescents.

Apart from targeting the adolescents, nurses should also direct their health information dissemination activities at the teachers and parents of these adolescents. Parents and teachers are role models and character molders who must be encouraged to show good examples to the adolescents under their care. Of particular significance is the need for nurses to extend family planning services to young couples who should be counseled to bring into the world the number of children they can adequately cater for.

The result of this study also signifies that nurses should not stop at only bringing health services to the homes and study/work places of adolescents; they should also embark on advocacy targeted at government and media practitioners to ensure censorship of unwholesome pornographic materials on TV and other audiovisuals.

RECOMMENDATIONS

1. Nurses who are in charge of school health clinics should counsel the adolescents on the dangers of pre-marital sex and also provide them with skills to be able to take the right decisions.
2. Parents and guardians should re-examine and sharpen their parenting skills with a view to instilling the desired strong moral and disciplinary attitudes in the youths.
3. Family planning should be embraced by parents in order to determine or control the number of children they can comfortably cater for.
4. There is an urgent need to control what adolescents watch, read and listen to in the mass media. This media censorship must be enforced in all places including homes

and schools where children and adolescents are found. This strategy will surely reduce the incidence of premarital sex among this morally vulnerable group.

5. Parents and governments must realize that the male adolescent is as sexually vulnerable as their female counterparts. On account of this, close attention must be paid to the male adolescent particularly those living in the urban areas.
6. Health educators must recognize the impressionable mind set of the average adolescent and should consider this when providing them with information.

SUGGESTIONS FOR FURTHER STUDY

A further study could be designed and implemented to determine the perception of teachers and parents about the incidence of pre-marital sex among the secondary school adolescents under their care. This will help to further elucidate the contributions of these stakeholders to the overall incidence of premarital sex among the target population.

Also an interventional study could be carried out in future to generate the exact cause of premarital sex and proffer best solutions available to reduce the incidence among secondary school adolescents. In this proposed future study, some of the selected schools will be randomized into study and control groups. The study schools will be given consistent well-structured moral instruction, while the control is left without any intervention. At the end of a given period, the prevalence of premarital sex will be measured in both groups and the result compared with the baseline incidences. The result of this study (best intervention against premarital sex) will be generalized and implemented in all secondary schools in Anambra state.

LIMITATION OF STUDY

No limitation was encountered in the process of carrying out this study.

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APPENDIX A

Department of Nursing Science,
F.H.S.&T, College of Health Sciences
Nnamdi Azikiwe University,
Nnewi Campus,
Anambra State, Nigeria
10th February, 2013

The Honorable Commissioner,
Ministry of Education,
Awka,
Thro.
The Executive Secretary,
Secondary Education Management Board,
Awka.

Sir,

Permission to Collect Data

I am a postgraduate student of the above named institution involved in a study on premarital sex among secondary school students in Anambra State. I therefore need your permission to collect data from schools in your ministry, which will help me to carry out the study. The information that will be contained in the data shall be used purely for research purposes. Confidentiality of information collected is assured

Thanks for your anticipated cooperation.

Your Faithfully,

Anene, Jane. O.
Researcher

APPENDIX B

SECONDARY SCHOOL STUDENTS' SEX VARIABLES QUESTIONNAIRE

Dept of Nursing Science.
Nnamdi Azikiwe University,
Nnewi Campus

Dear Respondents,

I am a doctoral student of the above named institution interested in finding out the variables which influence premarital sex among secondary school students. Could you please give sincere responses to all the items in the questionnaire. All your responses are purely for research purposes and therefore will not be linked to you. Your name and school are not needed in order to ensure anticipated co-operation and confidentiality.

Thank you for your anticipation co-operation.

Anene, J. O.

Researcher

APPENDIX C

SECTION A PERSONAL BACKGROUND INFORMATION

Instruction: Please tick (✓) in the appropriate box

1. Class

JSS 3 ☐

SSS 1 ☐

SSS 2 ☐

SSS 3 ☐

2. Sex:

Male ☐

Female ☐

3. Age range

10-13 years ☐

14-17 years ☐

18 years and above ☐

4. Location

Urban ☐

Rural ☐

5. Religions Denomination:

Catholic ☐

Orthodox Protestant ☐

Pentecostal Protestant ☐

Muslim ☐

6. Number of Children or Siblings in the Family:

1-3 children ☐

4-7 children ☐

8 and above children ☐

7. How would you describe your parents' relationship?

Intact marriage ☐

Separated ☐

Divorced ☐

Both/One of them are/is dead ☐

Single Parenthood ☐

8. Nature of School:

Private ☐

Public ☐

Single sex ☐

Mixed or Co-educational system ☐

9. Location of school-----

10. Place of residence.....

11. Age of Onset of puberty:

9-11 years ☐

12-14 years ☐

≥15 years ☐

SECTION B: Please choose the most appropriate option and tick (x)

VHE= Very high extent, HE= High extent, ME= Moderate extent, LE= Little extent, VLE= Very little extent.

SN	To what extent are the following incidence (new cases) levels of pre-marital sex found among secondary school adolescents in Anambra State	VHE	HE	ME	LE	VLE
1	Very high incidence					
2	High incidence					
3	Moderately high incidence					
4	Low incidence					
5	Very low incidence					
	To what extent does the secondary school students' class of study (educational level) influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
6	SS3					
7	SS2					
8	SS1					
9	JS3					
	To what extent do peer practices/ pressure influence the secondary school students' premarital sex involvement?	VHE	HE	ME	LE	VLE
10	Holding hands					
11	Embracing each other					
12	Engaging in pecking					
13	Involving in kissing					
14	Sitting in a lonely place together.					
15	Attending a party together.					
16	Visiting her/him in their house					
17	Visiting her/him in their school					
18	Taking a stroll (walk) together.					
19	Writing each other love letters					
20	Taking picture together					
21	Exchanging picture of one another					
22	Playing together					
23	Dancing together					
24	Rubbing palms on chests, breast, hand, laps.					
25	Touching of breast with clothes on					

26	Touching of breast without clothes on					
27	Touching vagina/penis without clothes on					
28	Touching vagina/penis with clothes on					
29	Caressing without clothes on					
30	Caressing with clothes on					
31	Thinking about sexual intercourse					
32	Initiating sexual activity					
33	Lying down together with clothes on					
34	Lying down together without clothes on					
35	Engaging in mutual masturbation					
36	Engaging in personal masturbation					
37	Eyeing one another seductively					
38	Lying on each other's body					
39	Sitting on his/her body					
40	Engaging in penetrative sex					
41	Engaging in non penetrative sex					
42	Talk about opposite sex					
43	Discusses boyfriend/girlfriends					
44	Read book about sex					
45	Plans to engage in sex					
46	Discusses sexual exploits					
47	Talk about people who have sex					
48	Discusses sex education/family planning					
49	Encourage each other to exploit sex					
50	Provide avenue for sex for each other					
	How does exposure to mass media influence secondary school students' involvement to premarital sex?	VHE	HE	ME	LE	VLE
51	Listening to the Radio					
52	Watching Television					
53	Watching home Video					
54	Watching foreign films					

55	Watching VCD cassettes					
56	Watching love/Romance films					
57	Reading News magazines					
58	Reading newspaper					
59	Watching sexuality website in Internet					
60	Reading Romance/love magazines					
61	Watching romance/love pictures					
62	Watching pornographic pictures					
63	Listening to music with sexual contents					
64	Watching dance with sexual contents					
	To what extent does the secondary school student's family size influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
65	1-3 children in family					
66	4-7 children in family					
67	≥8 children in family					
	To what extent does the nature of school attended by secondary school students influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
68	Attending Private school					
69	Attending Public school					
70	Single sex school attendance					
71	Mixed or co-educational school attendance					
	To what extent does the secondary school students' place of residence influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
72	Living in Urban area					
73	Living in Rural area					
	To what extent does the secondary school students' gender influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
74	Male					
75	Female					

	To what extent does the secondary school students' level of exposure to sex education influence their involvement in premarital sex?	VHE	HE	ME	LE	VLE
76	Teaching about Human Reproductive Organs					
77	Teaching about how to prevent HIV/AIDS					
78	Teaching about sexually Transmitted Diseases					
79	Teaching about effects of Abortion					
80	Teaching about causes of teenage pregnancy					
81	Teaching about fertile and infertile periods					
82	Teaching about effects of teenage pregnancy					
83	Teaching about effects of sex before marriage					
84	Teaching about menstruation and menstrual Hygiene					
85	Teaching about love and Marriage					
86	Teaching about safer sex					
87	Teaching about prevention of pregnancy					
88	Teaching about methods of Family Planning					

APPENDIX D
INSTRUMENT EVALUATION GUIDE

Address

.....

.....

Dear Expert,

You have been selected to assist me in validating the attached instruments because of your expert knowledge in the topic and research study. Could you please review the instrument and the questions that follow for me? Attached are the research objectives and the research hypotheses for a guide. Please feel free to make any corrections, additions or deletions as you deem fit.

Thank you for your assistance.

Sincerely yours

.....

Anene Jane O
(Ph.D Student UNIZIK)
Researcher