

# International Journal of Educational Excellence and Innovation

doi 10.5281/zenodo.14601046

Vol. 02 Issue 01 Jan - 2025

Manuscript ID: #53

# Investigation of Sex Education and its Impact on the Sexual Behaviour of Adolescents in Secondary Schools in Benin City, Nigeria.

Bv

<sup>1</sup>Aikabeli Priscilla O., <sup>2</sup>Ehimhen Prayer O., <sup>3</sup>Aikpitanyi Maureen

**Institutional Affiliations:** Department of Nursing Science, Faculty of Sallied Health Sciences, Benson Idahosa University, Benin City, Edo State, Nigeria.

**Postal address:** Department of Nursing Science, Benson Idahosa University, PMB 1100 University Way, Off Upper Adesuwa Road, GRA, Benin City, Edo State, Nigeria.

Corresponding Author Email: emikeaikabeli@yahoo.com

#### **Abstract**

Sex education plays a crucial role in shaping the sexual behaviour of adolescents, yet its impact remains a topic of debate. This study was undertaken to investigate sex education and its impact on adolescent sexual behaviour insecondary school in Benin City. To achieve this objective, four research questions and four hypotheses were raised and tested. The design was a questionnaire survey. The population comprised of eighty-four adolescent students of Norman Edward Education Centre, a secondary school in Benin City. The research instrument was a structured questionnaire. Data was analysed using SPSS version 21. Analysis of data revealed asignificant relationship between sex education and the sexual behaviour of adolescents in secondary school in Benin City, high level of awareness and acceptance of sex education among adolescent students, variations in understanding and attitude based on gender, age and educational level and identified key areas where sex education programme could be improved to better address the needs of adolescents. The following recommendations were made. The implementation of properly guided sex education that caters to the diverse needs of students, irrespective of gender or religious beliefs. Active involvement of religious organisations in promoting messages of appropriate sexual conduct and providing accurate information during sermons and religious gatherings to reduce unhealthy sexual behaviour and teenage pregnancies. Establishment of anonymous organisations within schools to provide a safe space for students to seek confidential guidance and support regarding sexual health matters as they may feel uncomfortable discussing such matters with parents or teachers. Introduction of sex education in the preadolescent stage to ensure that young people are equipped with essential knowledge and skills regarding sexual health before entering adolescence to help them make informed decisions about their sexual behaviour.

**Keywords:** Sex Education, Adolescent Sexual Behaviour, Secondary Schools, Understanding, Attitude, Impact

#### INTRODUCTION

# **Background**

Nursing Adolescence is the stage of a person's life between growing up and becoming an adult. The term adolescence originates from the Latin term "adolescere," which means "to grow." Adolescents are neither children nor adults; they are usually between the ages of 10 and 19 years<sup>1</sup>. A person within this age range is likely to go through various physical and psychological changes and challenges, including those related to sexuality. Adolescents must consequently be well informed about sex concerns through relevant educational opportunities. Such sex educational competencies can be provided through a sex education curriculum that should be able to equip adolescents with knowledge, skills and attitude in sex education to handle challenges relating to sexuality and be able to develop their potential to the fullest.

Sexuality is a natural element of life defined as the essence of one's humanity, which includes one's self-image, gender, physical appearance and reproductive capabilities<sup>2</sup>. Human sexuality deals with how individuals experience and express their sexuality. Sex education, on the other hand, is the process of obtaining knowledge and forming attitude, beliefs and values regarding relationships, intimacy and personality<sup>3</sup>. Sex education is an important component of the health education curriculum. It gives factual information to help parents, teachers, children and teenagers avoid sexrelated problems. The information also covers methods for assisting children in developing self-esteem, sexual understanding, defining interpersonal relationship ideals and strengthening skills for interaction in sex education. This encourages healthy and stable sex relationships. The necessity for sex education must be understood from a scientific, social and psychological point of view by parents, teachers and other caregivers. Teenagers should be shielded from the negative impact of sexually inappropriate behaviour, according to the sexual uprisings among today's young, who advocate sex education as a must.

Sex education is imparting the necessary facts, information or knowledge about sex and fostering inquiries and discussions rather than teaching young people sexual practices or acts<sup>4</sup>. Sex education aids in training teenagers to have mature attitudes and behaviour about sex in order to have a fulfilling sexual life<sup>5</sup>. Its objective is to empower students with accurate, current and age-appropriate knowledge about human sexuality and the implications of sexual behaviour in order to assist them in making critical, responsible decisions. Additionally, sexuality education aims to foster in students a sense of moral responsibility and self-respect. Additionally, it aids students in practising abstinence prior to marriage, which is the best defense against Sexually Transmitted Infections (STIs) and unintended pregnancy in teenagers<sup>6</sup>. Adolescents now spend more time in school than at any other time in human history in majority of the world's nations. Additionally, there is evidence that children are starting puberty sooner than they did decades ago. This is largely due to better nutrition, though there may be other variables at work as well. As a result, girls nowadays typically start menstrual cycle earlier than their mothers did and boys also develop sperm earlier than their fathers. These adjustments suggest that in many nations, the time between puberty and marriage or the creation of a stable union has been lengthening<sup>7</sup>.

Young people from all over the world are asking for reliable and approachable information about sexuality and reproductive health as the world becomes more connected than ever. They desire answers to the numerous queries and worries they have regarding sexuality. They need to learn the skills necessary to build healthy relationships as well as participate in responsible decision-making about sex, particularly during adolescence when the development of emotions accelerates. They also need knowledge regarding physiology and improved awareness of the norms that society as a whole has set for sexual behaviour<sup>7</sup>.

According to<sup>8</sup>, as the world has transformed into a global village, previously faraway occurrences are now having an immediate impact on patterns of behaviour in other areas of the world. If these

influences are harmful, the effects on those who receive information could be disastrous unless they are well-informed and have developed the necessary coping mechanisms. Our youthful population is exposed to pornography through the media, the internet and direct contact with foreigners and tourists from other countries, but this population is not yet well-equipped to manage this material<sup>9</sup>. Sexual health issues like sexual assault, incest, premarital sex, pregnancies among teens, STDs and illicit abortions could result from this.

The most contentious area of conversation among students of various educational institutions in Africa is sexuality education. In many families, cultures, and religions, talking about sex difficulties is frowned upon. When this subject is covered in the classroom, it might be hurtful to children who come from these backgrounds <sup>10; 11</sup>. However, the right of adolescents to reliable and unbiased information about sexuality borders on the development of healthy relationships decisions-making supported by a growing international movement that aims to address the informational and behavioural skill-training needs of adolescents and young adults. This movement is based on internationally accepted human rights norms that state that adolescents have the right to information that is critical to their physical and mental well-being <sup>12</sup>. The existence of these norms implies that government is responsible for providing programmes that provide accurate and appropriate information for both teenage girls and boys, in or out of school, to enable them preserve their sexual and reproductive well-being.

In Nigeria, many teenagers are sexually active as a result of the difficult economic circumstances and harmful societal influences on the adolescent which has caused serious social and health problems for parents, schools, the government and society at large<sup>13</sup>. Teenagers from diverse cultural backgrounds often lack knowledge about sexual safety, making them more vulnerable to unexpected pregnancies and STDs<sup>14</sup>.In Benin City, Nigeria, 40% of female students 16 years old or younger acknowledged to have been pregnant, while 55% reported having had sexual contact at that age<sup>15</sup>.

Sex education, when used appropriately, has therefore become an important mentor or influence for adolescents due to the risks involved with sexual behaviour. However, sex education for children, adolescents and adults in Nigeria has been riddled with mixed reports. Since 1999, when the Nigerian government approved and implemented a policy requiring curriculum modifications that teach sexuality education, the effectiveness of the programme has been inconsistent. There is currently growing worry over the high rate of teenage pregnancy and the widespread Sexually Transmitted Diseases and Infections. Nigerian women 15 to 19 years old have one of the highest fertility rates in the world<sup>16</sup>. Although it is impossible to confirm the total abolition of the 1999 sex education programme, there appears to be inadequate and unsuitable guidance as there are numerous reports of adolescent sexual misbehaviour in Nigeria. These researchers observed the number of teenage mothers in Benin City, majority of whom were either unmarried or live-in lovers without proper preparation for motherhood. They decided to explore the level of sex education given to teenagers in secondary schools in Benin City. Therefore, the aim of this study is to investigate sex education and its impact on the sexual behaviour of adolescents in a selected secondary school in Benin City and make recommendations.

# The objectives of the study are to:

- Investigate the level of understanding of adolescents of sex education in secondary schools in Benin City.
- Evaluate adolescents' attitudes towards sex education in secondary schools in Benin City.
- Determine the risk factors of sexual engagement among teenagers in secondary schools in Benin City.
- Find out the impact of sex education on the lives of adolescents in secondary schools in Benin City.

#### **Research Questions**

The following questions were proposed as guidelines in an attempt to discover the impact of sex education as well as adolescents' attitudes toward sex education in secondary schools in Benin City.

- What is the level of understanding of adolescents of sex education in secondary schools in Benin City?
- What is the attitude of adolescents towards sex education in secondary schools in Benin City?
- What are the risk factors of sexual engagement among teenagers in secondary schools in Benin City?
- What is the impact of sex education on the lives of adolescents in secondary schools in Benin City?

# **Hypotheses**

- **H0:** Sex education has no significant relationship with the sexual behaviour of adolescents in secondary schools in Benin City.
- **H1:** Sex education has a significant relationship with the sexual behaviour of adolescents in secondary schools in Benin City.
- **H0.** Sex education has no significant impact on the lives of adolescents in secondary schools in Benin City.
- **H2:** Sex education has a significant impact on the lives of adolescents in secondary schools in Benin City.

#### **Research Design**

The research design used in this study was the mixed method of deductive quantitative and qualitative designs for its effectiveness and ability to provide valid result 17 with better insights drawn from the data which helped to identify the underlying motivation for healthy sexual behaviour. Sex education is a social issue surrounded by several complexities influenced by numerical relationships where the diverse social and economic backgrounds reflect the broader Nigerian society essential for understanding the different factors that affect the sexual behaviour of adolescents. The study was conducted in Norman Edward mixed-gender secondary school as it represents the typical demography of Nigerian adolescents. This setting was ideal for deeply exploring the challenges and effects of sex education in a standard Nigerian educational environment.

Benin City is the capital of Edo State, Nigeria possessing a rich cultural heritage which serves as a hub for diversification of different tribes, culture and religion which give insight to the varying effects of culture and religion on sex education, its acceptance and ultimately healthy sexual behaviour. The selection of this demography for the study was justified by the fact that a larger and more diverse sample size allows for a better understanding of the complex and subtle effects of sex education on the average adolescent in Benin City. Inclusion criteria were:

- a) Age range of 13 to 18 years.
- b) Enrollment in the selected secondary school.
- c) Willingness to participate and provide informed consent (or assent, in the case of minors).

# **Sample Technique:**

The simple random sampling technique was used for the study to ensure every member of the population had an equal chance of being selected for the sample, minimizing selection bias <sup>18</sup>. The sample size was determined using the Taro Yamane <sup>19</sup> equation given as:

$$n = \frac{N}{1 + N * (e)^2}$$

Where n, is the sample size, N, the population size, e, the acceptable sampling error and a confidence interval of 95%.

#### **Instrument for Data Collection**

A self-structured questionnaire, carefully crafted to address the specific objectives of the study was designed and distributed by the researchers and a research assistant.

# Validity of Instrument

Face and content validity was ensured by two experts in the field research and measurement. All necessary corrections and adjustments were effected in the final copy of the questionnaire.

# **Reliability of Instrument**

The reliability of the research instrument was assessed using Cronbach alpha to ensure its consistency and validity.

#### **Method of Data Collection**

To save time and manual effort, electronic questionnaire was shared among the sample group via the internet. However, the research assistant was on ground to assist in case the students needed clarification on any part. This was done during break time. The completed questionnaire were submitted online on the spot so as to reduce invalid or non-responses from respondents.

# Method of Data Analysis

Data was analyzed using SPSS version 21. Hypotheses in the study were tested individually.

#### **Results**

**Table 1: Demographic characteristics of respondents** 

| 04:        |         | D        | D4         |
|------------|---------|----------|------------|
| Question   |         | Response | Percentage |
| Gender Ma  | le      | 20       | 23         |
| Female     | 64      |          | 77         |
| Total      | 84      |          | 100        |
|            |         |          |            |
| Age Belov  | w 15    | 4        | 4.8        |
| 15 4       |         | 4.8      |            |
| 16 31      |         | 37.0     |            |
| Above 16   | 45      |          | 53.6       |
|            |         |          |            |
| Total      | 84      |          | 100        |
| Educationa | l Level |          |            |
| JSS1-3     | 11      | 13.5     | 5          |
| SS1-3      | 73      | 86.5     |            |
|            |         |          |            |
| Total      | 84      | 100      |            |

Table 2: Result 1 to investigate adolescents' understanding of sex education

| You have received any form of sex education |        |      |  |
|---|--------|------|--|
| Frequency                                   | Percen | tage |  |
| No  | 6      | 7.2  |  |
| Yes   | 78     | 92.8 |  |
|   |        |      |  |
| Total                                       | 84     | 100  |  |
|   |        |      |  |

Table 3: Result 2 to investigate adolescents' understanding of sex education On a scale of 1 to 5, rate your understanding of sexual health and reproduction

| Scale | Frequency | Percent |
|-------|-----------|---------|
| 1     | 1         | 1.2     |
| 2     | 2         | 2.4     |
| 3     | 27        | 32.1    |
| 4     | 19        | 22.6    |
| 5     | 35        | 41.7    |
| Total | 84        | 100.0   |

Table 4: Result 1 to investigate adolescents' attitudes about sex education Adolescents believe that sex education is important for them

| Answer | Frequency | Percent |
|--------|-----------|---------|
| No     | 5         | 6.0     |
| Yes    | 79        | 94.0    |
| Total  | 84        | 100.0   |

Table 5: Result 2 to investigate adolescents' attitudes about sex education. When sex education should be introduced in Secondary Schools

|                 | Frequency | Percent |
|-----------------|-----------|---------|
| Adolescence     | 31        | 36.9    |
| Early childhood | 26        | 31      |
| Not at all      | 1         | 1.1     |
| Pre-adolescence | 26        | 31      |
| Total           | 84        | 100.0   |

Table 6: Result 3 to investigate adolescents' attitude about sex education

On a scale of 1 to 5 indicate how comfortable you would feel discussing sexual health issues with teachers or parents

| Scale | Frequency | Percent |
|-------|-----------|---------|
| 1     | 11        | 13.1    |
| 2     | 10        | 11.9    |
| 3     | 34        | 40.5    |
| 4     | 12        | 14.3    |
| 5     | 17        | 20.2    |
| Total | 84        | 100     |

Table 7: Result 1 to find out how sex education impacts adolescents Influence of sex education on adolescents' views on sexual behaviour

| Answer | Frequency | Percentage |
|--------|-----------|------------|
| Maybe  | 4         | 4.8        |
| No     | 9         | 10.7       |
| Yes    | 71        | 84.5       |
| Total  | 84        | 100        |

Table 8: Result 2 to find out how sex education impacts adolescents

Feeling more prepared to make informed decisions about sexual health after receiving sex education

| Answer | Frequency | Percentage |
|--------|-----------|------------|
| Maybe  | 3         | 3.6        |
| No     | 4         | 4.8        |
| Yes    | 77        | 91.6       |
| Total  | 84        | 100        |

Table 9: Result 1 to determine the risks linked with sexual engagement among teenagers Awareness of the risks associated with early sexual engagement

| Answer | Frequency | Percentage |
|--------|-----------|------------|
| Maybe  | 1         | 1.2        |
| No     | 2         | 2.4        |
| Yes    | 81        | 96.4       |
| Total  | 84        | 100        |

Table 10: Result 3 to determine the risks linked with sexual engagement among teenagers. On a scale of 1 to 5, rate the adequacy of sex education in addressing the risks of sexual behaviour

| Scale | Frequency | Percentage |
|-------|-----------|------------|
| 1     | 1         | 1.2        |
| 2     | 7         | 8.3        |
| 3     | 36        | 42.9       |
| 4     | 13        | 15.5       |
| 5     | 27        | 32.1       |
| Total | 84        | 100        |

**Table 11: Hypothesis Testing** 

| Н0 | Sex education has no significant relationship with the sexual behaviour of | Rejected |
|----|--|----------|
|    | adolescents in secondary schools in Benin City.                            |          |
| H1 | Sex education has a significant relationship with the sexual behaviour of  | Accepted |
|    | adolescents in secondary schools in Benin City.                            |          |
| Н0 | The sex education curriculum in Benin City has no significant impact on    | Rejected |
|    | the sexual behaviour of adolescents in secondary schools Benin City.       |          |
| H2 | The sex education curriculum in Benin City has a significant impact on the | Accepted |
|    | sexual behaviour of adolescents in secondary schools Benin City.           |          |

#### **Discussion of Findings**

The result of the study revealed that an overwhelming majority of respondents have received sex education, while only a small percentage has not. This finding suggests a high level of exposure to sex education among adolescents in the study population, indicating that the majority have had some form of formal or informal instruction regarding sexual health and reproduction. This is in line with the study of <sup>20</sup> which suggested that comprehensive sex education contributes to healthier sexual behaviour and outcomes among adolescents. The second finding demonstrated a significant number of respondents reported learning about multiple topics with comprehensive coverage, reflecting efforts to provide holistic information on sexual health and behaviour, aiming to equip them with the knowledge and skills necessary to make informed decisions. This aligns with the study of <sup>21</sup>. However, <sup>22</sup> found that state-mandated abstinence-based sex education did not consistently lead to

improved teen health outcomes. This discrepancy may be attributed to variations in the content and approach of sex education programme.

The current study supports the increasing pursuit of comprehensive sexuality education to enhance healthy adolescent development and decision-making. <sup>22</sup>. This is in line with the systematic reviews of <sup>23</sup> which found positive evidence supporting the efficacy and importance of early implementation of comprehensive sex education to promote positive sexual health outcomes among young people.

The result indicated a high level of perceived understanding among the study population. This finding suggests that adolescents generally feel confident in their knowledge of sexual health and reproduction, which may be attributed to the comprehensive sex education they received. This finding agrees with the findings of <sup>24</sup> which indicated a prevailing positive attitude towards the need for comprehensive sexual health education in adolescent populations. However, it is important to note that a small percentage of respondents rated their understanding lower, indicating potential gaps in knowledge or areas where further education may be neededwhich is at variance with the study of <sup>25</sup>.

The findings revealed diverse perspectives, highlighting differing beliefs about the appropriate timing for sex education. The range of opinion underscores the complexity of addressing sex education implementation and the importance of considering diverse perspectives in policy and programme development which aligns with the findings of <sup>26</sup>. Majority of respondents reported feeling relatively comfortable discussing sexual health issues as reported in the study of <sup>27</sup>. Additionally, these findings suggest a positive attitude towards open communication about sexual health with trusted adults, an agreement with the findings of <sup>28</sup> indicating a willingness to engage in conversations that can facilitate learning and support. However, a notable number of respondents rated their comfort level lower asindicated in <sup>29</sup> with lower levels of comfort.

The findings revealed a positive impact of sex education on adolescents' perceived readiness to navigate sexual health decisions. This finding aligns with the findings of <sup>30</sup> which suggest that sex education equips adolescents with the knowledge, skills and confidence needed to make informed choices regarding their sexual health. The overwhelming majority of respondents in the current studyreported being aware of the risks, suggesting a high level of understanding among teenagers regarding the potential consequences of early sexual activity. This agrees with the study finding of <sup>31</sup> which suggested that sex education plays a crucial role in shaping adolescents' attitude and belief regarding sexual behaviour, potentially influencing their decisions and behaviour in this domain. While a small number of respondents were unsure of the influence of sex education and a slightly larger number reported that it had not influenced their views, however, the overwhelming majority endorsing its influence underscores the importance of sex education in promoting informed and responsible sexual behaviour among adolescents.

The final finding of this study revealed that few respondents were unsure about the impact of sex education and an even smaller number reported feeling uncertain. This finding agrees with the findings of <sup>32</sup>, <sup>33</sup> which showed that an overwhelming majority feel more prepared after sex education, underscoring its effectiveness in empowering adolescents to take control of their sexual health. Overall, these findings provide compelling evidence of the positive impact of sex education on adolescents, both in shaping their perception on sexual behaviour and in preparing them to make informed decisions about sexual health.

#### Limitations of the study

The research has several limitations. The relatively smallsample size of adolescents from a selected secondary school in Benin City may limit the generalisability of the results to other populations or geographic locations. Additionally, the use of self-reported data via questionnaire forms may introduce response and social desirability bias, as adolescents may provide answers they perceive as

socially acceptable rather than reflecting their true attitude and behaviour. Furthermore, the cross-sectional design of the study limits the ability to establish causality or temporal relationships between variables. Future research employing larger, more diverse samples and longitudinal designs could address these limitations and provide a more comprehensive understanding of the impact of sex education on adolescent sexual behaviour.

#### Conclusion

In conclusion, the results of this study underscore the importance of comprehensive sex education in promoting healthier sexual behaviour among adolescents. Sex education programme can play a crucial role in fostering positive sexual health outcomes and overall well-being by addressing the diverse needs and experiences of young people. The research shed light on the significance of sex education in shaping the sexual behaviour of adolescents. Through comprehensive analysis and interpretation of data, key insights were gained into adolescents' understanding, attitude and perception regarding sex education. The findings highlight the need for inclusive and properly guided sex education programme that cater for the diverse needs of students, irrespective of gender or religious beliefs. Overall, this research underscores the importance of proactive measures in fostering informed decision-making and improving sexual health outcomes among adolescents.

#### **Ethical Consideration**

A written ethical permission to conduct the study was obtained from Benson Idahosa University and the administrator of Norman Edward Education Center. Informed consent of each respondent was obtained and they were assured of utmost confidentiality and anonymity. All information gathered was used solely for the purpose of the study. The researchers also avoided sensitive topics that could pose potential risks, psychological distress and invasion of privacy and sought informed consent from participants and their guardians.

#### **Conflict of Interests**

No conflict of interest.

# Recommendations

- a) Implementation of properly guided, inclusive sex education programme in schools, regardless of gender or religious beliefs. This programme should cover a wide array of topics such as sexual health, contraception, consent and healthy relationships in a non-judgmental manner to cater to the diverse needs of students.
- b) Active involvement of religious organizations in promoting messages of appropriate sexual conduct and providing accurate information about sex during sermons or religious gatherings. Religious institutions can contribute to reducing unhealthy sexual behaviour and teen pregnancies by engaging youth with knowledge and guidance.
- c) Establishment of anonymous organisations within schools where students can seek confidential guidance and support regarding sexual health matters. This initiative would provide a safe space for students who may feel uncomfortable discussing such topics with parents or teachers.
- d) Introduction of sex education in the pre-adolescent stage to ensure that young people are equipped with essential knowledge and skills before entering adolescence. Adolescents can develop a better understanding of sexual health and make informed decisions regarding sexual behaviour by starting sex education early.

#### References

- 1. World Health Organization. Adolescent health, 2022 available on https://www.who.int/health-topics/adolescent-health#tab=tab\_1
- 2. Malenkov V. Gender equality in the structure of civil-political orientations of teenagers from 19 countries. Woman in Russian Society, 2022 3, 17–35 available on https://doi.org/10.21064/winrs.2022.3.2
- 3. Torres K. The Importance of Access to Comprehensive Sex Education. American Academy of Paediatrics, 2024 available on https://www.aap.org>adolescent-sexual-health>the-imp...
- 4. Iddings CL, Wadsworth DJ. The Effectiveness of Comprehensive Sexual Education for Teens: An Exploration of the Advantages and Disadvantages [Master's thesis, Bethel University]. Spark Repository, 2021 available on https://spark.bethel.edu/etd/314
- 5. Moreira TM et al. Knowledge about Sex Education in Adolescence: A Cross-Sectional StudyAdolescents 2023 3(3), 431-445 available on https://doi.org/10.3390/adolescents3030030
- 6. Goldfarb ES, Lieberman LD. Three Decades of Research: The Case for Comprehensive Sex Education. Journal of Adolescent Health, 2021 January, 68 (1) 13-27
- 7. Kustati ALK, Kartika A, Friska R. The Role of Sexuality Knowledge and Parents: The Role of Communication Quality in introducing Sex Education to Adolescents. Science Midwifery, 2022 10 (3), 2233–2239 available on https://doi.org/10.35335/midwifery.v10i3.477
- 8. Barriuso-Oterga S, Fernandez-Hawrylak M. Sex education in adolescence: A systematic review of programmes and meta-analysis, Children and Youth Services Review, Elsevier, 2024 November, 166, 107926 available on https://www.sciencedirect.com/science/article/pii/S0190740924004985
- 9. Arulogun OS, Ogbu I.A, Dipeolu IO. Influence of internet exposure on sexual behaviour of young persons in an urban district of Southwest Nigeria. The Pan African medical journal,2016 available on https://doi.org/10.11604/pamj.2016.25.261.2630
- 10. United Nations Children's Fund, UNICEF. Adolescent HIV prevention,2022 available on https://data.unicef.org/topic/hivaids/adolescents-young-people
- 11. Ram S, Andajani S, Mohammadnezhad M. Parents' perception regarding the delivery of Sexual and reproductive health (SRH) education in secondary schools in Fiji: A qualitative study. International Journal of Environmental Research and Public Health, 2020, 1-8.
- 12. World Health Organization. The changing world of adolescent sexual and reproductive health and rights, 2020 available on https://www.who.int/news/item/03-02-2020-the-changing-world-of-adolescent-sexual-and-reproductive-health-and-rights
- 13. Alawode OA, Ogunwemimo H, Bolorunduro ME, Awoleye AF. Age at Sexual Debut and Multiple Sexual Partnerships among Adolescents in Nigeria: An Assessment of the Mediating Role of the Knowledge of Sexually Transmitted Infections. Adolescents,2021. 1(4):421-432 available on https://doi.org/10.3390/adolescents1040032
- 14. Golden D et al. Class, education and parenting: cross-cultural perspectives. British Journal of Sociology of Education, 2021 42(4), 453–459 available on https://doi.org/10.1080/01425692.2021.1946301
- 15. Isikhuemen, ME. Knowledge, attitude and practice of child adoption among men and women attending the infertility clinic at the University of Benin Teaching Hospital, Benin City. Medical Journal of Zambia, 2021 47(4), 297–304 available on https://doi.org/10.55320/mjz.47.4.784
- 16. World Bank Group. Adolescent fertility rate (Births per 1,000 Women Ages 15–19) Nigeria, Washington, DC: World Bank Group: 2021.
- 17. Yin RK. Case study research and applications: Design and methods, 2018. Sage Publications.
- 18. Creswell JW, Creswell JD. Research design: qualitative, quantitative and mixed methods approaches, 2018. Sage Publication
- 19. Garcia M, Lee. Ethical Challenges in Research Involving Adolescents: Lessons from Cross-Cultural Studies. International Journal of Adolescent Research, 2019. Academic Press.
- 20. Durrotun A, Sugiyo PYK, Nuzulia S. The Impact of Father Involvement in the Early Childhood Problematic Behavior. JPUD Journal Pendidikan USIA Dini, 2023 17(1), 14–30 available on https://doi.org/10.21009/jpud.171.02

- 21. Carr J, Packham A. The effects of state-mandated abstinence-based sex education on teen health outcomes. Health Economics, 2017 26, 403-420.
- 22. Breuner CC, Mattson G, Adelman, WP. et al. Sexuality education for children and adolescents. Pediatrics, 2016 138 (2).
- 23. Goldfarb ES, Lieberman LD. Three decades of research: the case for comprehensive sex education. Journal of Adolescent Health, 2020 68, 13-27.
- 24. Feng Y. University Sex Education in the Crevice. Asian Journal of Social Science Studies,2022 7(9), 101. https://doi.org/10.20849/ajsss.v7i9.1299
- 25. Attila FL et al. Adolescence and sex education: Socio-cultural and psycho-theoretical perspectives. Mediterranean Journal of Social & Behavioral Research, 2023 7(1), 43–49 available on https://doi.org/10.30935/mjosbr/12801
- 26. Abstracts, Oral and Symposia Presentation for Qualitative Methods Conference. International Journal of Qualitative Methods, 2018 17(1), 160940691880162 available on https://doi.org/10.1177/1609406918801621
- 27. Bose DL. et al. Evidence and gap map report: Social and Behaviour Change Communication (SBCC) interventions for strengthening HIV prevention and research among adolescent girls and young women (AGYW) in low- and middle-income countries (LMICs). Campbell Systematic Reviews, 2023 19 (1) available on https://doi.org/10.1002/cl2.1297
- 28. Alencar NES. et al. Serious games for sex education of adolescents and youth: integrative literature review. Ciência & Saúde Coletiva, 2022 27(8), 3129–3138 available on https://doi.org/10.1590/1413-81232022278.00632022en
- 29. Nanda VD, Setyaningsih W, Jupriyono J. Research and Development of Seduboo as a Sex Education Media for Teenagers. Journal Ilmu Dan Teknologi Kesehatan, 2022. 9(2), 192–204 available on https://doi.org/10.32668/jitek.v9i2.711
- 30. Neto de Menezes ML et al. Sex education from the perspective of adolescent students, teachers, and managers of Elementary School in Recife, Pernambuco, Brazil. International Archives of Medicine, 2020 available on https://doi.org/10.3823/2603
- 31. Pichon M et al. A qualitative study exploring parent–daughter approaches for communicating about sex and transactional sex in Central Uganda: Implications for comprehensive sexuality education interventions. Journal of Adolescence, 2022 94(6), 880–891 available on https://doi.org/10.1002/jad.12071
- 32. Centers for Disease Control and Prevention. Social determinants and eliminating disparities in teen pregnancy, 2019 available on https://www.cdc.gov/teenpregnancy/about/social-determinants-disparities-teen-pregnancy.htm
- 33. Thomas CL et al. Adolescents' problematic internet use in secondary school students in Lagos, Nigeria: A preliminary examination of individual and family-based predictors and consequences. Computers in Human Behavior, 2022 132, 107247 available on https://doi.org/10.1016/j.chb.2022.107247