



Risky sexual behavior of young people in an urban community, South – South, Nigeria

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ABSTRACT

Background

Risky sexual behaviours exposes young people to the risk of infection with HIV and other sexually transmitted infections (STIs). Sexual behaviours like unprotected sex, early sexual debut, using alcohol or drugs before sexual intercourse, multiple sexual partners, sexual intercourse for reward, non-use of condom, patronage of commercial sex workers increases the vulnerability of this age group.

Objective

To determine risky sexual behaviour and factors affecting risky sexual behaviour among young people in Oluku Community, Ovia North East, Local Government, Edo State, South South, Nigeria.

Methods

The study utilized a descriptive cross-sectional study design. Study was done between January and June, 2013 using multi- stage sampling method.

Results

A total of 400 respondents participated in this study, participants engaged in behaviours like alcohol before sex (33.0%), night parties (44.3%), smoking cigarette (16.0%) and hawking food (6.7%). Over a third, 75 (38.7%) of respondents only knew their sex partner within 1 week before having sexual relations with them, while 33 (17%) knew them for a day, 17 (8.8%) had had sex for reward, 65 (33.5%) did not use a condom in their last sexual encounter and 68 (35.1%) had visited commercial sex workers. Common reasons for sex were peer pressure 96 (49.5%), sex for fun 45(23.2%) and finance 29(14.9%).

Conclusion and Recommendations

The government should regulate of activities and possible prohibition of brothels and transactional sex workers in communities to avoid patronage by young persons. Young people should be trained on negotiating skills, abstinence, correct and consistent use of condom and faithfulness to one partner. Parental support in young person's sexual and reproductive health issues via encouraging the young people to avoid sexual risky behaviors.

Keywords: Risky Sexual Behavior, Multiple Sexual Partners, Young People

GJMEDPH 2018; Vol. 7, issue 4

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Conflict of Interest—none

Funding—none



INTRODUCTION

The potentials of young people are often negated by the poor choices they make, the poor sexual reproductive health choices translate to risky behaviors, adventures and eventual ill health. Young people make up a third of the sexually active population, they account for about one-half of all new sexually transmitted infections (STIs) because they are more susceptible.¹ Young people make up a significant proportion of each country's population and comprise about 20% of the world's people.² This is the age when most people begin to explore their sexuality and have sexual relationships.³ Their growth and development involves overwhelming cognitive, biological, emotional and social changes. These foundational years offer an ideal period of opportunity for building the foundations of sexual and reproductive health and rights among young people and for preparing them to avoid risky sexual behaviors.^{4,5}

Sexual risk behaviors are sexual activities that may expose an individual to the risk of infection with HIV and other sexually transmitted infections (STIs), for example, unprotected sex, early sexual debut, using alcohol or drugs before sexual intercourse, multiple sexual partners, sexual intercourse for reward, nonuse of condom, patronage of commercial sex workers. A lack of knowledge about HIV/AIDS, other STIs and poverty have been identified as factors that increase the chances of young people engaging in risky sexual behaviour.⁶ High-risk sexual behaviors usually result to outcomes like unintended pregnancy and STIs, and studies also showed that depression, suicidal ideation and suicide attempts have been linked to risky sexual activities among young people, especially that associated with early sexual intercourse, multiple sexual partners and sexual abuse.^{5,7}

The United Nations (UN) has identified some indicators of risky sexual behavior, which are low levels of education, early sexual debut, unprotected sexual intercourse, teenage pregnancy, multiple partners, sexual intercourse for reward and forced sexual intercourse.⁸ These risky sexual behaviors and their complications still remain the major health problems of young adults worldwide.^{4,9} Thus, this

age group are susceptible to serious morbidity and mortality related to their sexual and reproductive behaviour.¹⁰

This study assessed the risky sexual behavior of young persons in a community that is a "bus stop town" where drivers in transit, from different parts of the country rest while on long trips. These activities create a good environment for recreational events like alcohol intake, drug use, sexual and sex related activities, and other events used as a form of recreation for the visitors and long distance travelers. It is important to assess the influence of this environment on sexual behavior of young persons in the community.

There are numerous institutions or school based studies^{1,8,10,22} but not many are community – based on adolescents and young people sexual behavior and practices in Nigeria. Risky sexual behavior assessed can help channel health education and sex education programs to combat these risky behaviors. This study aimed to assess the risky sexual behavior including sexual experience, multiple sexual partners, frequency and periodicity of sexual intercourse; sex for reward, use of condom, visiting commercial sex workers and factors affecting risky sexual behavior of young people in Oluku Community, Edo State.

MATERIAL AND METHODS

The study was done in Oluku community, Ovia North East local government, Edo State, Nigeria. Young persons aged 10- 24 years in Edo State is 1,089,332, while women of child bearing age (15- 49 years) are 853,624 with a total fertility rate of 5.3 and use of family planning by married women is 19%.¹¹ Oluku community has a primary health centre, one government owned primary school, three private primary school, a secondary school, a market and three petrol stations. It is home numerous parking spots for drivers and visitors, hotels, brothels and a night market. The town is divided into two by the Lagos- Benin Express way which is a highway that links South-Western Nigeria to South-South and South-Eastern Nigeria.

It is a descriptive cross-sectional study involving 400 young people in the Oluku community. All young

people residing (in – school and out- of school) in Oluku community and present at the time of the study were included in the study, while those who refused consent or where not available were excluded. This study was carried out between January and June, 2013. The minimum sample size for young people was calculated using the Cochran's formula for minimum sample size determination in cross-sectional study.¹²

$$n = \frac{Z^2 pq}{d^2}$$

A multi- stage sampling technique was used for this study.

Stage One

The Lagos - Benin express road divides the community into a two halves, one on the right (as community 1) and the other on the left (as community 2). A simple random sampling technique using a table of random numbers was used to select one of the two communities. The left community (community 2) was selected.

Stage Two

The number of houses and households in the selected community was determined by counting and numbering. There were 172 houses and 526 households on the left side of the community (Data from an initial enumeration done by researcher). From this, 400 households were selected using a simple random sampling (using a table of random numbers). In households with more than one adolescent, an adolescent was selected by balloting.

Pre-testing was done 300km away from Oluku community among young people in Ogbona community in Etsako Central Local Government Area, Edo State.

The Research Assistants were final year medical students and Community health extension workers. A total of ten research assistants were recruited and trained over a period of three days on how to administer and fill the questionnaires. A structured, interviewer administered questionnaires was administered to young people resident in the

community.¹³ The questionnaires covered socio-demographic data, sexual exposure, risky behaviors like multiple sexual partners, sex for reward, patronage of commercial sex workers, non- use of condom, alcohol and drug use. Data collected was entered and analyzed using Statistical Package for Scientific Solution (SPSS) version 19.

Ethical approval was obtained from the ethical committee of the University of Benin Teaching Hospital. Permission was obtained from the community leaders and youth leaders, while parents gave assent for questionnaires to be administered respondent gave his or her consent before. The questionnaires were filled after individual informed consent attached to each questionnaire were filled. Participation was voluntary and there was no undue influence or inducement on participants. Confidentiality and privacy were respected during the course of the study: Serial number rather than name was used to identify each respondent. Results of study were coded and kept secure. Respondents were informed that there will be no penalties or loss of benefit for refusal to participate in the study or withdrawal from it.

Career talk and health education was given to each respondent during the study. Referrals to Primary Health Care Center were given to young people that were ill.

RESULTS

Risky Sexual Behavior of Respondents

Over a third, 75 (38.7%) of respondents only knew their sex partner within 1 week before having sexual relations with them, while 33 (17%) knew them for a day. A higher proportion 87 (44.8%) of respondents had their first sexual relations with their neighborhood friend, 29.9% had it with school mate. Almost a third 130 (32.5%) proportion of respondents do not know if they will indulge in sexual activity when the next opportunity comes, 37.2% reported that they would have sex in the next opportunity. Also, 30.3% stated they will not engage in sex when another opportunity occurs. (Table 1)

Table 1 Length of Time

Variables	Frequency	Percent (%)
Length of Time Respondents Knew Partner Before Intercourse (Days) (n=194)		
A day	33	17.0
Less than a week	42	21.7
Within a month	75	38.7
More than a month	22	11.3
Can't remember	22	11.3
Indulge in Sex in Next Opportunity (n=400)		
Yes	149	37.2
No	121	30.3
Don't Know	130	32.5
Last Sex Partner (n=194)		
Neighbourhood friend	87	44.8
School mate	58	29.9
Older person	23	11.9
Motor driver	12	6.2
Relative/ family member	10	5.2
Commercial Sex Worker	4	2.1
Reasons for Sexual Intercourse (n=194)		
Peer Pressure	96	49.5
For Fun	45	23.2
Financial	29	14.9
Alcohol & Drugs	12	6.2
No reason	8	4.1
Others **	4	2.1
Types of Risky Behaviors (n=194)		
Night parties	86	44.3
Alcohol before sex	64	33.0
Smoking	31	16.0
Hawking food	13	6.7

** Others anger (0.7%), good looks (1.3%). * Multiple responses

Seventeen (8.8%) young person's had sex for reward, 65 (33.5%) had unprotected sex (did not use a condom) in their last sexual encounter while 68 (35.1%) had visited commercial sex workers.

Respondents engaged in risky behaviors like alcohol for sex 64 (33.0%), night parties 86 (44.3%), smoking cigarette (16.0%) and hawking food 13 (6.7%). (Table 2)

Table 2 Respondents Level of Education and Use of Condom in Last Sexual Encounter

Level of Education	Use of Condom (%)		Fishers Exact	p value
	Yes	No		
Primary	7 (38.8)	11 (61.2)	25.321	p=0.003*
Secondary	100 (69.4)	44 (30.6)		
Tertiary	22 (68.7)	10 (31.3)		
Total	129 (66.5)	65 (33.5)		

Reasons for Risky Sexual Behavior

Peer pressure 96 (49.5%), sex for fun 45(23.2%) and finance 29(14.9%) were the commonest reason for indulging in sex among respondents. Respondents that did not indulge in sexual intercourse did so because 98.1% were waiting for marriage, 42.7% felt they were not of age, 35.4% did not indulge in sex due to moral values, while 3.9% avoided sex because of their parental control. Eighty nine percent of respondents did nothing to avoid sexual

intercourse, 66% practiced abstinence, 6.3% use prayer, while 2.4% actively avoided men to stay away from sex.

Factors Affecting Risky Sexual Behavior of Young People

The higher the level of education, the higher the use of condom in the last sexual encounter. ($p = 0.003$) (Table 3)

Table 3 Number of Sexual Partners in the last 12 Months and Possible Predictor Variables

Predictor Variable	Number of Sexual Partners in the Last 12 Months			Fisher Exact	P value
	None (%)	Single (%)	Multiple (%)		
Age (Years)					
10-14	2 (33.3)	2 (33.3)	2 (33.3)	10.324	0.013*
15-19	27 (35.5)	20 (26.3)	29 (38.2)		
20-24	22 (19.6)	19 (17.0)	71 (63.4)		
Sex					
Male	24 (21.6)	23 (28.7)	65 (58.6)	5.214	0.044*
Female	27 (32.5)	21 (36.8)	37 (44.6)		
Religion					
Christianity	43 (26.4)	31 (19.0)	89 (54.6)	5.164	0.533
Islam	6 (31.6)	6 (31.6)	7 (36.8)		
Traditional	2 (28.6)	2 (28.6)	3 (42.9)		
None	0 (0.0)	2 (40.0)	3 (60.0)		
Ethnic Group					
Edo	26 (25.2)	23 (22.3)	54 (54.4)	1.762	0.886
Non Edo	25 (27.5)	18 (19.8)	48 (52.7)		
Level of Education					
None	1 (33.3)	0 (0.0)	2 (66.7)	9.271	0.164
Primary	8 (53.8)	1 (6.7)	6 (40.0)		
Secondary	35 (24.8)	34 (24.1)	72 (51.1)		
Tertiary	7 (20.8)	6 (17.1)	22 (62.9)		
Type of School					
Day School	41 (27.5)	31 (20.8)	77 (51.7)	0.500	0.779
Boarding	10 (22.2)	10 (22.2)	25 (55.6)		

**Statistically Significant*

The older the respondent, the higher the number of sexual partners in the last 12 months ($p = 0.013$). Also, more males (58.6) than females (44.6) had more sexual partners in the last 12 months ($p = 0.044$). (Table 4).

A higher proportion of males 72 (64.9%) had multiple sexual partners in a life time than the

females 35 (42.2%). ($p = 0.002$). The younger the age at first sexual intercourse, the higher the number of sexual partners ($p = 0.001$). Respondents in day school 87 (58.4%) had more multiple sexual partners in their life time than those who attended or are attending boarding school 20 (46.6%) ($p = 0.009$). Majority of respondents from Edo 59 (64.8%) have had more multiple sexual partners in their life time

than non Edo 48 (46.6%) ($p= 0.011$). (Table 5)
 Respondents who attended day schools 58 (38.9%)
 were more likely to initiate sex at an older age than

those that attended a boarding school 24 (53.2%) ($p = 0.035$)

Table 4 The Number of Sexual Partners in Respondent's Life Time and Predictor Variables

Predictor Variable	Number of Sexual Partners in Life Time		Fisher exact	p value
	Single (%)	Multiple (%)		
Age (Years)				
10-14	3 (50.0)	3 (50.0)	0.893	0.640
15-19	37 (48.7)	39 (51.3)		
20-24	47 (42.0)	65 (58.0)		
Sex				
Male	39 (35.1)	72 (64.9)	9.894	0.002*
Female	48 (57.8)	35 (42.2)		
Religion				
Christianity	74 (45.4)	89 (54.6)	0.135	0.935
Islam	11 (42.3)	15 (57.7)		
Traditional	2 (40.0)	3 (60.0)		
Age at First Sex (Years)				
<10	0 (0.0)	9 (100.0)	23.167	0.001*
10-14	6 (18.2)	27 (81.8)		
15-19	33 (47.1)	37 (52.9)		
20-24	48 (58.5)	34 (41.5)		
Family Structure				
Monogamous	57 (44.5)	71 (55.5)	2.289	0.318
Polygamous	28 (49.1)	29 (50.9)		
Separated	2 (22.2)	7 (77.8)		
Type of School				
Day School	62 (41.6)	87 (58.4)	2.717	0.009*
Boarding	25 (55.6)	20 (44.4)		
Ethnic Group				
Edo Indigene	55 (53.4)	48 (46.6)	6.494	0.011*
Non Edo	32 (35.2)	59 (64.8)		
Residence				
Shared/Passage	31 (45.6)	37 (54.4)	0.023	0.879
Flat/Self Contain	58 (44.4)	70 (55.6)		
Level of Education				
None	1 (33.3)	2 (66.7)	4.320	0.229
Primary	3 (20.0)	12 (80.0)		
Secondary	65 (46.8)	75 (53.2)		
Tertiary	17 (48.6)	18 (51.4)		
Family Size				
≤4	26 (44.8)	32 (55.2)	9.894	0.002*
>4	61 (44.9)	75 (55.1)		

*Statistically Significant

Table 5 Respondents Age at First Intercourse and Possible Predictor Variables

Predictor Variable	Age at First Intercourse (Years)			Fisher exact	p value
	≤ 14	15-19	>20		
Ethnic Group					
Edo Indigene	24 (26.3)	31 (34.1)	36 (39.6)	2.302	0.523
Non Edo	18 (17.4)	39 (37.9)	46 (44.7)		
Level of Education					
None	1 (33.3)	0 (0.0)	2 (66.7)	6.871	0.603
Primary	3 (20.0)	6 (40.0)	6 (40.0)		
Secondary	34 (24.1)	52 (36.9)	55 (39.0)		
Tertiary	4 (11.4)	12 (34.3)	19 (54.3)		
Religion					
Christianity	35 (21.5)	55 (37.7)	73 (44.8)	7.180	0.334
Islam	7 (26.9)	11 (42.3)	8 (30.8)		
Traditional	0 (0.0)	4 (80.0)	1 (20.0)		
Type of School					
Day School	37 (24.9)	54 (36.2)	58 (38.9)	2.652	0.035*
Boarding	5 (11.1)	16 (35.6)	24 (53.3)		
Sex					
Male	28 (25.2)	38 (34.2)	45 (40.5)	3.271	0.581
Female	14 (16.9)	32 (38.6)	37 (44.6)		
Residence					
Shared/Passage	15 (22.1)	23 (33.8)	30 (44.1)	9.939	0.891
Flat/Self Contain	27 (21.5)	47 (37.3)	52 (41.3)		
Family Size					
≤4	16 (27.7)	21 (36.2)	21 (36.2)	6.192	0.292
>4	26 (19.4)	49 (36.0)	61 (44.9)		
Family Structure					
Monogamous	34 (26.5)	42 (32.8)	52 (40.6)	5.327	0.318
Polygamous	7 (17.3)	24 (42.1)	26 (45.6)		
Separated	1 (11.1)	4 (44.4)	4 (44.4)		

*Statistically Significant

DISCUSSION

In a life time, a higher proportion of respondents have multiple sexual partners. This proportion did not change in the last 12 months preceding this study. Multiple sexual partners present a risky sexual behaviour that increases the chances of infection with HIV/AIDs and other STIs. This is in keeping with studies done in Namibia (58%),¹⁴ Addis Ababa (45%).¹⁵ The NARHs 2012 (19.9%)¹⁶ and other studies^{3, 14} reported a much lower proportion of those with multiple sexual partners. A study done in Calabar³⁰ and Jos showed much lower values 2.6% and 6.1% respectively. This contrast may be due to the fact that the study was done among nursing

students in Calabar and clinical medical students in Jos who by virtue of their training are aware of the risks of having multiple sexual partners. Over a third of respondents only knew their sex partner within 1 week before having sexual relations with them, while 33 (17%) knew them for a day. This demonstrates the adventurous and spontaneous nature of this age group, as sexual activities commences within a week among young acquaintances. This presents a dangerous trend as time may not be enough to have knowledge of partners HIV status and other STI status before sex. Thus, negotiating skills to postpone sex and have more time to develop the relationship and discuss

options to prevent spread of HIV and other STIs will be important.

About a third of respondents don't know if they will indulge in sexual activity when the next opportunity comes, 37.3% reported that they would have sex in the next opportunity. This presents a challenge as a third of the respondents will require sex education with emphasis on correct and consistent use of condom and faithfulness to one partner, while the another third will need positive enforcement on the need to abstain from sexual activity.

Thirty nine percent of respondents only knew their sex partner within 1 week before having sexual relations with them. This situation clearly demonstrates a dangerous trend with high risk of transmission of HIV/AIDs and sexually transmitted infection.

One in ten respondents had sex for reward. The National HIV and AIDS and Reproductive Health survey also showed that 5% of females and 8% of females had sex for reward. Sex for reward was 16.5% in Limpopo, South Africa, this higher percentage may be as a result of higher commercial sexual activities in this region.

Two thirds of respondents used a condom in their last sexual encounter, while a third did not use a condom in their last sexual encounter, thus putting themselves at risk of contracting STIs. This level of condom use could be as a result of high awareness on HIV/ AIDS transmission prevention and control. This is similar to findings from studies done in Jos,³⁴ Anambra³² and Oshana region, Namibia²⁶ where the prevalence of condom use was 65%, 59% and 54% respectively. Much higher proportions (77%) were found in Maseno University, Kenya.²⁶ A third or respondents had visited commercial sex workers. Patronage of commercial sex presents a sexual risky behaviour. The presence of commercial sex workers, brothels and hotels in Oluku community may be a plausible reason for this level of patronage of commercial sex workers.

A higher proportion of young person's had their first sexual relations with their neighborhood friend and

school mate. This clearly shows that sexual activities occur around the home and school environment, thus any targeted intervention to prevent risky sexual behaviour should focus on the young people in the community and school.

In Limpopo, South Africa,⁹ there was low use of condom among those with higher level of education than those who had lower level of education (primary school), also condom use was lower among those who had received life saving skills and sexual education during formal education. This is in contrast to this study finding where the higher the level of education, the higher the use of condom in the last sexual encounter. This association was statistically significant. This is likely due to compliance with methods of prevention of HIV/ AIDs and STI learnt in secondary schools in Oluku community.

The older the respondent, the higher the number of sexual partners in the last 12 months, while the younger respondents, have single sexual partners. Older respondents may feel confident and be more willing to explore different sexual partners than the younger and relatively more naïve respondents. This age group tend to have more independence and often feel they are matured enough to engage in sexual activities. This is in contrast to a study in Western Kenya,²⁰ where age group 15 – 19 years had higher number of multiple sexual partners. More males than females had more than one sexual partner in the last 12 months and in their life time. This is probably due to African culture, where males have freedom to have more sexual partners and polygamy is acceptable. Respondents who had no religion were more likely to commence sex earlier 16 years, than those who were Christians, Muslims, and Traditionalist. The teaching of religion discourages early sexual exposures and sex before marriage. Abstinence is advocated by religious groups as a means of preventing spread of disease and being at peace with God.

A higher proportion of respondents who hail from Edo state had more multiple sexual partners than non Edo indigenes in the last 12 months and in a life time. This may be due to familiarity with the

locality, thus interaction among young persons from Edo state will be higher. A multiplier effect will be the the peer pressure and interaction with the Universities and other tertiary institutions may increase tendency of young people to indulge in sex with multiple partners.^{30, 31}

Respondents in day school had more multiple sexual partners in their life time and were more likely to initiate sex at a younger age than those who attended or are attending boarding school. Possibly as a result of the fact that after close of school , young people have ample time when going back home and as parents or guardians are still at work to indulge in sexual risky behaviour, unlike in boarding schools where supervision is round the clock. Boarding schools are characterized by close supervision, regimentation and control by school teachers, school prefects and class hierarchy as opposed to day schools where students are allowed to go home, visit friends, neighbors and interact with adults. Sometimes parents and guardians are not regularly available to monitor and supervise the activities of their young ones, as they are away trying to earn a living for their families. This gives young person's free time to engage in sexual activities.

Furthermore, those from monogamous home (26.5%) and those from polygamous home (17.3%) were more likely to initiate sex earlier than 15 years than those whose parents were separated (11.1%). Findings were in consonance with in a study done in Ibadan¹⁶ were 29% of adolescents in monogamous homes initiated sex earlier than 16 years. A most likely explanation for this finding is that parental supervision may be inadequate in polygamous homes because of competition, large number of children and family size. Similarly, in monogamous setting, parents may be unavailable to properly supervise their children. Although, separated homes do not present an ideal environment for parental support, communication and care for young people, young people from separated homes live with either of their parent or with a relative, thus strict monitoring of their activities tend to occur. Also, parents who are positively oriented in their styles (involving and responsiveness) will make their

adolescents and young person's socially competent and goal – directed. Parents who exert control and monitor young ones activities and promote self-autonomy will have the most positive effects on their behaviour. Uninvolving parents and also those not responsive to young people's needs will have negative impacts on their behaviour.¹⁷

Peer pressure, finance and sex for fun were the commonest reason for indulging in sex among young people. Assefa²⁶ reported that a similar proportion of respondents had sex because of peer pressure. In addition, Dias et al²³ reiterated that peer pressure was an important factor in sexual behaviour of young people. This finding is probably due to the adventurous minds of young people and the urge to feel accepted among their peers using sexual risky actions as a sign of maturity, independence and control over their lives.

Respondents engaged in risky behaviours like alcohol before sex, multiple sexual partners attending night parties , smoking cigarette and hawking food . This is in consonance to findings done in South Africa,¹¹ Taiwan,²² Kenya,²⁶ Namibia and Delta State Nigeria³⁶ where alcohol/ drug use, cigarette smoking, multiple sexual partners were identified as common sexual risky behaviour among young people. These risky behaviours are part of habits and practices of young person's and these actions aid the transmission of HIV/STI and unwanted pregnancies. Waiting for marriage and not being up to age were the commonest reasons given by respondents for not indulging in sexual intercourse, others were because of morals, while very few avoided sex because of their parental control. Current teaching in schools, non-governmental organizations and religious bodies encourages young person's to avoid pre marital sex, these reasons reflects the religious and societal demands for abstinence from sex for young people until marriage. Also, most respondent did not avoid sex because of parental control. This demonstrates the characteristic independence from their parents, which most adolescent and young people tend to exhibit.^{17, 18} Also, this calls to attention the need for more parental involvement in sex education of their children. Majority of respondents did nothing to

avoid sexual intercourse, 34% used prayer, while 1.2% actively avoided men to stay away from sex. This presents a challenge, as all young people must actively be involved in avoiding sexual behaviours. Just simply doing nothing to prevent sexual intercourse means they are vulnerable and will indulge in sex when the situation presents itself.

CONCLUSION

This study showed that more than half had multiple sexual partners. About two thirds had sex one to six times in the last 12 months, and usually more than once a month. Sex for reward, unprotected sex and sex with commercial sex workers were risky sexual behaviours in young people.

Other sexual risky behaviours among young people were alcohol intake, multiple sexual partners, smoking cigarette or marijuana, attending night parties and hawking food after school. The common reasons for indulging in sex were peer pressure, finance and sex for fun.

RECOMMENDATIONS

To the Government

Support for continuous peer education and training on life building skills for young people so as to increase the age of sexual debut and reduce the practice of multiple sexual partners and other risky sexual behaviours in Oluku community. Government should establish institutional structures like Youth friendly centres in Oluku community which will help to coordinate and serve the needs of young person's especially their sexual, reproductive needs and other social needs and promote meaningful youth participation and involvement in decision-making as most of their actions are based on peer pressure, fun and adventure.¹⁹

There should be regulation of activities and possible prohibition of brothels and transactional sex workers in Oluku to avoid patronage by young persons.

To the Community and Community Leaders

Collaborate with government at all levels and other partners to implement strategies to combat early sexual debut for young person's like festival for celebration of chastity and virginity, etc.

To the Schools

Training young person's on negotiating skills, abstinence, correct and consistent use of condom and faithfulness to one partner.²⁰

To the Parents

Parental should encourage the young people to avoid excessive use of alcohol, multiple sexual partners, smoking cigarette or marijuana, attending night parties, hawking food after school and other risky behaviours.

Parents should help channel the energy and vigour of their young ones towards academic and recreational activities, rather than risky sexual adventures. Parents should promote dialogue, communication, explanations and establishment of good and cordial relationships between them and their young ones.

To Young People

They should avoid risky sexual behaviours and peer pressure into participation in risky sexual practices.²²

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