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Sexuality, pattern and age of sexual debut amongst young reproductive aged health students in Nigeria: A cross-sectional study

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Abstract

Aim: The aim of this paper was to study and understand the sexuality, pattern and the age of sexual debut amongst young reproductive aged Nigerian health students.

Methodology: It was a double-blinded cross-sectional study conducted amongst 81 participants. All participants were delegates present at the SRHR-session of the 2nd Nigerian Health Students summit. Data on variables were obtained using a validated data collection tool that was distributed via a google online form. Analysis was done using a google spread sheet analyzer. Written consent was sought from each participant on the questionnaire.

Results: 61.3% have had their sexual debut, while 38.7% have not had their sexual debut. 92% identified as heterosexuals (straight), 3.7% bisexuals, 1.2% identified as purely homosexuals, while 3.1% preferred not to say. The pattern of debut identified here were consented, coerced and forced. Majority of the sexually active respondents had their sexual debut between the ages of 16 and 20 years of age. 16.5% of all those who had their first sexual intercourse before the age of 15 are now heterosexuals (straight), while 83.5% of them now identify as bisexuals.

Conclusion: Pattern and age of sexual debut has a significant role to play in the sexual life of an individual.

Keywords: Sexuality, Nigeria, debut, patter, age, young

Introduction

Although some literatures will simply define sexuality as the capacity for one to have sexual feelings. It is a person's identity in terms of gender or genders to which they are typically attracted to; sexual orientation [1]. Sexuality is a complex terminology that often means different things to different people. Sexuality is a central aspect of being human throughout life. It encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviour, practices, roles and relationships [2].

Sexuality is a term we use to talk about how we understand our bodies. Nevertheless, the most important thing to understand about sexuality is that, it is self-defined. That is, every person is allowed to talk about and understand their own sexuality in their own way which makes sense to them [3]. However, in the context of this paper we will be using the simple meaning related to the patter of attraction. That is, attraction to same, opposite, one or both sexes. In other words, homo, hetero, or bisexual. Although, in Nigeria, only heterosexuality is legal. Bisexual and homosexuality are both criminalized [4]. Hence, one may anticipate some reservations and restrains when having such conversations, and albeit openly.

The age of sexual debut simply means the age of first sexual initiation/intercourse. While early sexual debut in some literatures is seen as having sexual intercourse at or before the age of 14 years [5]. Although the Nigerian constitution and culture will want this to be at the age of right of consent, that's 18years, the Nigerian Demography of Health Survey for 2018 (NDHS'18) puts this at the 11-15 years age range. But some literatures have put this at lower ages. NDHS'18 went further to give a single average of 17.2 years for women and 21.8 years for men [6]. With an almost 5 years difference in between.

This pattern raises questions as to why the age of sexual initiation for girls was way earlier than men? Questions of consent, coercion, early marriages, rape and other forms of sexual inappropriateness.

Nonetheless, the data published by NDHS'18 as regards the age ranges of sexual orientation, was supported by some Nigerian literatures such as Durowade KA *et al.*, 2017 who put the mean age for sexual debut at 13.10 +/- 2 years and Omolola FF *et al.*, 2018 who found the mean age of sexual debut for girls to be 15.80 and 15.40 for boys [5,7]. However, as you can see there is a reverse in the gender most likely to have sex earliest, as Omolola FF puts the mean age of girls higher than that of boys. Hence, could this be the trend in South-western Nigeria, where their study was carried out? [5-7] A study into the pattern of sexual debut in Nigeria found out that majority of Nigerians who had their first sexual intercourse before the age of 15 were from northern Nigeria, predominantly, North-Eastern and North-Western regions [8].

Comparatively speaking, initiation into sexual activities at an early age are more rampant now, amongst the "Gen Zs", when compared to the older generations. In the religious comparison, Muslims are more 72.4% more likely to have sex before their counterpart/ fellow Christian brethren amongst one study population (table 1). Those who were not educated were also found to engage in early sexual intercourse when compared to

those who were. This was also in correlation to wealth, as the poorest groups, and those who stayed in rural settings were the most sexually active group (table 1) [8].

When we look at these findings and look at the sociodemographic of North Eastern and Western Nigeria, it will make sense why they have the earliest ages of sexual debut in Nigeria [6].

The age of sexual debut is very important, especially for human rights, oncologic, gynecologic and obstetric reasons. Human rights wise, this has to do with pedophile-like actions, rape, coercion and child marriages. Oncological and gynecologically speaking, i.e early sexual debut is an important risk factor for development of cervical cancer. In relation to obstetrics, there may be mortalities or even life-long morbidities that develop from obstetric complications and emergencies amongst underaged mothers [9].

Furthermore, studies have shown that women who have early sexual debut are more likely to have multiple sexual partners [8]. However, maybe it is as a result of the criminalized status on other sexualities, as no study was found in our search to try and assess the link between early sexual debut and one's sexuality (sexual identity) in Nigeria.

Hence, the aim of this paper is to study and understand the sexuality, pattern and the age of sexual debut amongst young reproductive aged Nigerian health students.

Table 1: Age of sexual debut. From Sanni Yaya *et al.*, 2018. [8]

Variable	<15 years (n = 16,108)	15–17 years (n = 17,696)	≥18 years (n = 26,810)
	26.6% (25.8–27.4)	29.2% (28.6–29.8)	44.2% (43.3–45.2)
YEAR			
2008	45.4, 42.9, 47.9	49.8, 47.8, 51.7	46.2, 44.7, 47.7
2013	54.6, 52.1, 57.1	50.2, 48.3, 52.2	53.8, 52.3, 55.3
P	<0.001		
AGE			
15–19	14.6, 13.8, 15.4	17.4, 16.7, 18.2	2.7, 2.4, 2.9
20–24	15.5, 14.8, 16.2	18.4, 17.7, 19.1	18.3, 17.7, 18.9
25–29	18.6, 17.9, 19.3	18.8, 18.1, 19.5	24, 23.4, 24.7
30–34	15.2, 14.6, 15.9	13.9, 13.3, 14.6	17.7, 17.1, 18.2
35–39	12.9, 12.2, 13.6	13.2, 12.6, 13.9	15, 14.5, 15.5
40–44	11.2, 10.6, 11.8	9.2, 8.7, 9.8	11.6, 11.1, 12.1
45–49	12, 11.4, 12.8	9, 8.5, 9.6	10.7, 10.2, 11.2
P	<0.001		
REGION			
North Central	10.2, 9.4, 11.1	14.5, 13.5, 15.6	22.4, 21.5, 23.4
North East	25.8, 23.9, 27.9	22.8, 21.3, 24.3	11.8, 10.8, 12.8
North West	45.6, 43.3, 48	32, 30.2, 33.8	12, 11.1, 12.9
South East	4.3, 3.8, 4.8	6.7, 6.1, 7.3	16.3, 15.3, 17.3
South-South	9.4, 8.6, 10.3	14.6, 13.6, 15.6	16.7, 14.7, 16.7
South West	4.6, 4.1, 5.2	9.5, 8.8, 10.3	21.9, 20.8, 23.1
P	<0.001		

RESIDENCY			
Urban	19.3, 17.5, 21.3	25.3, 23.7, 26.9	46.5, 45, 48
Rural	80.7, 78.7, 82.5	74.7, 73.1, 76.3	53.5, 52, 55
<i>p</i>	<0.001		
RELIGION			
Christian	25.5, 23.8, 27.3	40.3, 38.3, 42.2	64.5, 62.9, 66.1
Islam	72.4, 70.5, 74.2	58, 56, 60	33.6, 32, 35.2
Other	2.1, 1.7, 2.6	1.7, 1.4, 2.1	1.9, 1.6, 2.3
<i>p</i>	<0.001		
EDUCATION			
None	68.5, 66.8, 70.1	51.5, 49.8, 53.3	24.1, 22.8, 25.3
Primary	17.8, 16.7, 18.9	21.3, 20.3, 22.4	20, 19.2, 20.9
Secondary	12.6, 11.7, 13.5	24.2, 23.1, 25.4	38.6, 37.5, 39.7
Higher	1.2, 1.0, 1.4	2.9, 2.6, 3.3	17.4, 16.4, 18.4
<i>p</i>	<0.001		
WEALTH INDEX			
Poorest	43.4, 41.6, 45.2	35.0, 33.5, 36.5	21.6, 20.2, 23.1
Poorer	35.4, 34.0, 36.9	34.4, 33.2, 35.6	30.2, 28.7, 31.7
Middle	24.3, 23.1, 25.5	31.1, 30.0, 32.3	44.6, 43.1, 46.1
Richer	16.5, 15.4, 17.5	26.6, 25.5, 27.6	57.0, 55.5, 58.4
Richest	8.7, 8.0, 9.5	16.6, 15.7, 17.6	74.6, 73.3, 75.9
<i>p</i>	<0.001		

N.B. p-values (Pearson's Chi-square) indicate the probability of observing statistically significant relationships between column and row variables.

Methodology

It was a double-blinded cross-sectional study conducted amongst 81 participants. All participants were delegates present at the SRHR-session of the 2nd Nigerian Health Students summit. Data on variables were obtained using a validated data collection tool that was distributed via a google online form. Analysis was done using a google spread sheet analyzer. Written consent was sought from each participant on the questionnaire.

Data set was gotten from medical, nursing, pharmacy, microbiology, veterinary medical, medical laboratory science and basic medical science students.

Results

Respondents were between 18 and 31 years of age. The genders were male [43.2%], females [53.1%], non-conforming [1.2%] and agender [1.2%]. While 1.2% chose not to say.

- **Sexual activity:** 61.3% have had their sexual debut, while 38.7% have not had their sexual debut.
- **Sexuality:** 92% identified as heterosexuals (straight), 3.7% bisexuals, 1.2% identified as purely homosexuals, while 3.1% preferred not to say [figure 1].
- 33.33% of the bisexuals were females, while 66.67% were males.

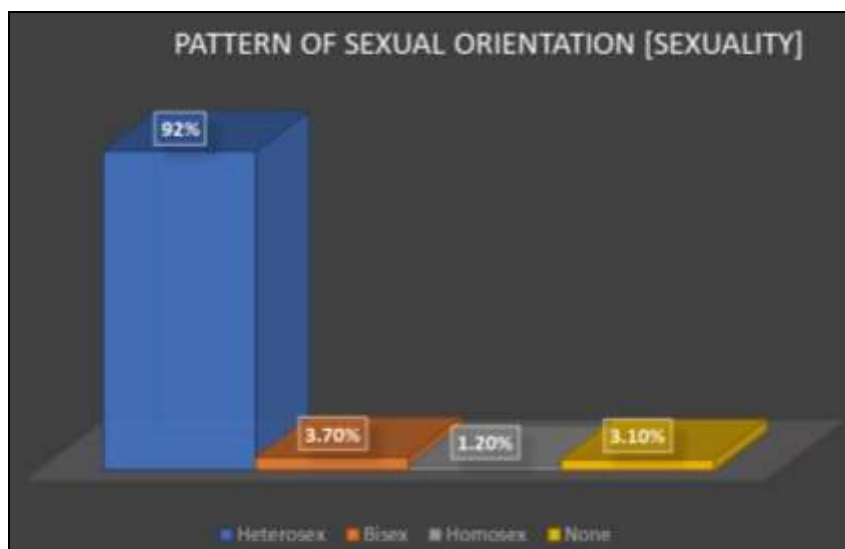


Fig 1: Bar chart showing the percentage pattern of sexuality distribution amongst participants in the study.

▪ **Age of sexual debut:** [Figure 2]

83.5% of them now identify as bisexuals. [Figure 3]

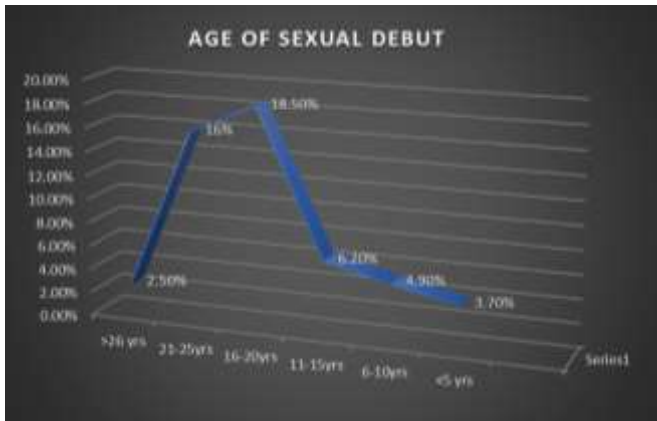


Fig 2: Showing the distribution of the ages of sexual debut and percentage prevalence for specified age range.

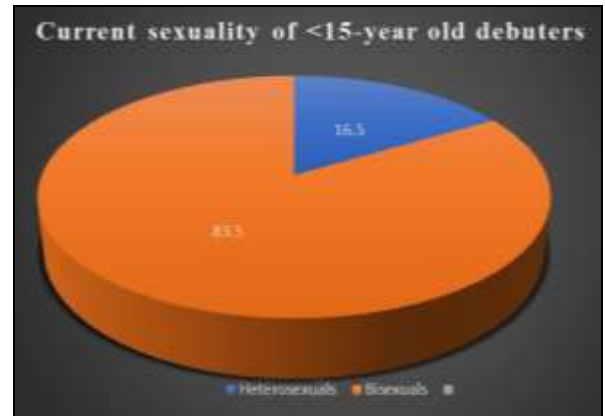


Fig 4: Current sexuality of those who had their first sexual experience at less than 15 years of age.

▪ 16.5% of all those who had their first sexual intercourse before the age of 15 are now heterosexuals (straight), while

▪ **Pattern of sexual debut:** 71.5% had it willingly, 16.3% were coerced and 12.2% were raped [figure 3].

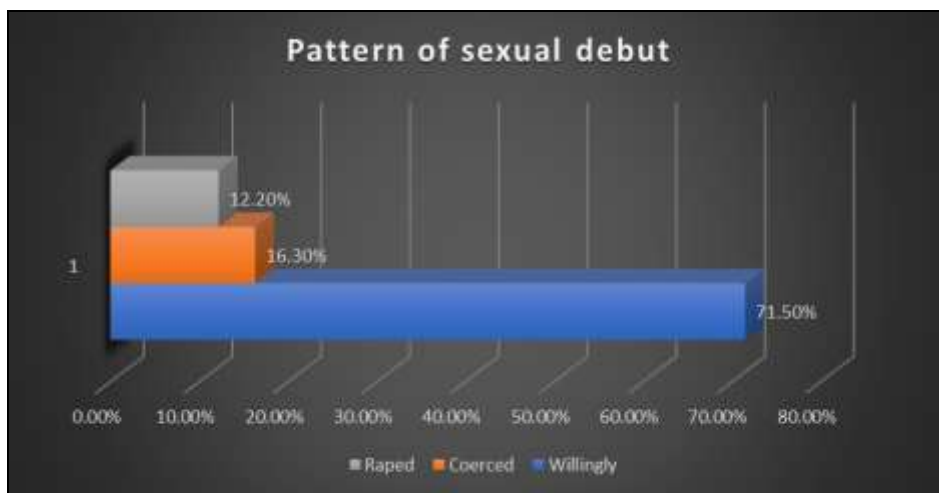


Fig 4: Showing pattern of sexual debut. It highlights willful intercourse as the highest form while rape was the lowest. However, 12.20% of sexual violence (rape) is still a high number.

▪ Of those coerced, 87.5% of them are now heterosexuals (straight), while 12.5% are now bisexuals. [Figure 5]

▪ Of those coerced, 37.5% of them now abstains from any form of sexual activity, with only 62.5% remaining sexually

active.

▪ Amongst those raped, only 16.7% of them are sexually active, 83.3% of them are not. The sexually active ones are all heterosexuals.

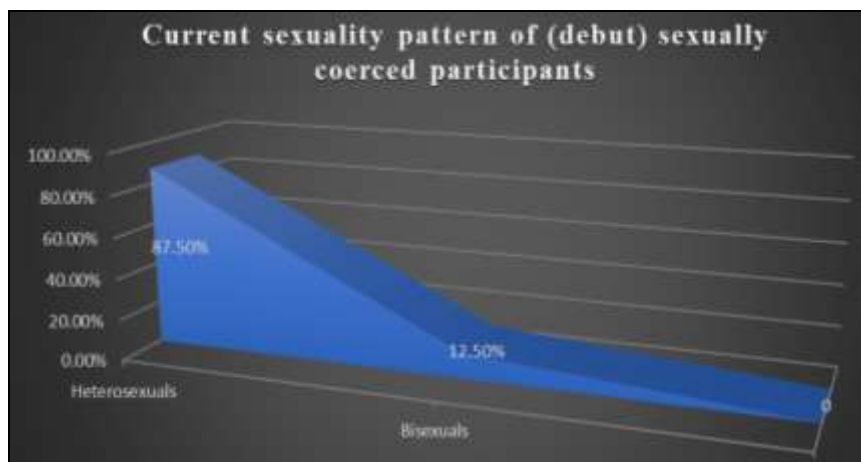


Fig 5: Showing the current sexuality pattern of participants who were coerced into having their first sexual intercourse.

- 100% of all those who were raped, were raped heterosexually.

Gender distribution

Table 3: A gender distribution of some variables on sexual activity, <15 debut, coerced and raped

Variables	Males	Females	Agender	Non-Conforming
Sexually active	58.1%	35.5%	3.2%	3.2%
<15 years debut	58.3%	41.7%	-	-
Coerced	37.5%	62.5%	-	-
Raped	16.7%	83.3%	-	-

Discussion

The aim of the study was to understand the sexuality, pattern and the age of sexual debut amongst young reproductive aged Nigerian health students. We found out that, while a majority of the participants were sexually active, a small but significant percentage of the respondents had not had any form of sexual initiations. However, the statistics amongst all respondents showed that majority of them identified as heterosexuals (straight), while a small percentage identified their sexualities as bisexuals and homosexuals. We had to explore the possibility that these values for the sexual minority may actually be higher than this. With these low figures being as a result of the fact that; They are in a country where their identity is criminalized; The lack of trust in the means of the data collection; And some homosexuals having to exist as bisexuals so that they could fit into a society that may otherwise ostracize them.

That said, more males were bisexuals compared to women. While this cannot be definitively stated as the general case here in Nigeria, due to a small number of respondents, this trend definitely poses a transmission bridge for oncogenic viruses between the men who have sex with men (MSMs) and the women. Thus, putting the ladies at risk of cervical, other HPV prone neoplasia and other MSM predominant STIs.

Irrespective of sexual orientation, a general inquiry was made into the age of sexual debut amongst the sexually active respondents. That's, those who have had one or more sexual intercourse(s). The results revealed that while majority of the respondents had their sexual debut within 16-20 years of age, a small group had theirs when they were younger than 10 years of age (Figure 2). While, the least were those who had theirs at or older than 26 years of age (Figure 2). Being collected from educated class of individuals, we can thus say that most sexual debut amongst this groups occurs around ages 16-20 years. That is the age where they round off their secondary schools and begin the first two years of their university/tertiary studies. When they begin to get a feel of independence.

When compared to the rural and uneducated group of individuals who even before the age of 16 are seen hawking, trading, farming or doing other forms of menial jobs to assist their families, wards and masters. The feel of responsibility and independence does come early for this lot, and so does sex.

Furthermore, regarding the statistical link between early sexual debut and sexuality, we found out that majority of those who had their sexual initiations at an age younger than 15 years of age were now bisexuals. Now, one will wonder if this was related to some form of childhood/young adolescence psychological trauma related to their early sexual debut? Thence, what form of sexual consent must an under 15 have given? Pattern in which it happened? Sex of the person who they had it with? Age of the person who they had it with? Or the possibility of bisexuality just being their unprovoked choice not

related to their past experiences, what-so-ever?

Further findings on pattern of sexuality revealed a majority of the participants in this study had their first sexual intercourse willingly, a significant 28.50% of respondents were either raped or coerced into having sex. As pertains the rape, 100% of all those who were raped were raped heterosexually. However, a larger portion of those who were coerced are still heterosexuals. That said, currently, majority of the sexually inactive respondents fell into this group of past traumatic experience. Especially the rape victims.

In regards to the pathologies associated with sexual violence (rape or coercion), it could either be medical, gynaecological, obstetric, surgical or psychological; such as unintended pregnancy, STIs, genital scars, psychological scars, sexual dysfunction and even death, among others. As seen in this study, some of those who were sexually coerced now stay away from sex, while a higher percentage who were raped are currently not sexually active. This could be explained when one considers the psychological impacts of the traumas of sexual violence on the victims.

This study was able to answer the questions of sexuality, pattern and age of sexual debut amongst its respondents. However, the assessment of the mental health status of the sexually preyed-on groups, the rape, coercion, under 5s, under 10s and some under-15-years sexual debut victims, is still an untapped window of important research. The percentages of sexual inactivity amongst the raped and coerced victims raises questions that need to be scientifically answered. Furthermore, though a link was made between early sexual debut and propensity to bisexuality, this cannot be definitively ascertained. As this will need to be supported by a larger sample, bisexual only study, focusing on their ages and pattern of sexual debut. This is another window of unexplored research.

Other short comings of this study were the small number of participants, a larger sample size will have added more confident assertiveness to the propositions of this paper. Furthermore, the exact ages of sexual intercourse, instead of age ranges would help us identify a modal age of initiation. Also, inquiries into medical history of Sexually Transmitted Infections (STI), either gotten from their sexual debut or their lives afterwards. To help us make a correlation between age and pattern of sexual debut and lifetime risk of acquiring an STI.

Lastly, we will like to make some recommendations as provoked by the findings in this study;

- The need for timely and age-appropriate Comprehensive Sexual Education (CSE) amongst young Nigerians cannot be over emphasized.
- CSE is no longer merely a tertiary appropriate curriculum, but should be brought to lower levels of education (age appropriately), and should not be seen as an early introduction to sexual activities.
- Short one- or two-hours online courses on CSE for parents could be made for intending couples, with such certificates being submissible before a court wedding is given a green light.
- Parents should pay more attention to the little variations in countenance, mood, physique and demeanor of their children. As it can be (though non-specific), but important indicators to some sexually uncomfortable or even pedophilic occurrences.
- Routine medical psychotherapy should be amongst the regular care of raped and coerced sexual victims. So as to serve as prophylaxis against some psychological disorders that may develop as a result of their experiences, such as;

- paranoia, PTSD, sexual dysfunction, depression and suicide.
- vi. The HPV vaccination should be made available to not just girls, but also boys. As more boys were found to be bisexuals in this study, they could act as STI bridges to the girls. Thereby reintroducing new/resistant strains to even vaccinated girls. Hence, bridging the medical gap between homo and heterosexual worlds.

Conclusion

There are different sexualities practiced amongst reproductive aged health students in Nigeria. Although the ones identified in this study were heterosexuals, bisexuals and homosexuals; the heterosexuals remained (significantly) the sexual majority. More men were found to be bisexuals, in comparison to women.

However, bisexuality as a form of sexuality may be psychologically related to early sexual debut. As we discovered that majority of the respondents who were initiated when less than 15 years of age, are now bisexuals. Pure homosexuality is still a very minute sexual community, with most being practicing bisexuals than just homosexuals. So as to fit into this society which is brutal to homosexuals. The three main patterns of sexual debut were; consented, raped and coerced. Though most were consented, we discovered that rape and coercion were more amongst the sexual majorities. That is, the heterosexuals.

The age of sexual debut varied from as young as under 5 to as old as above 26 years of age. However, the ages 16-20 and 21-25 years of age are the two most active years when most of the respondents became sexually active, respectively. Thus, indicating that though the average age ranges for sexual debut amongst the educated group of individuals in Nigeria was 16-20 years of age. Though more research will be needed to support this.

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