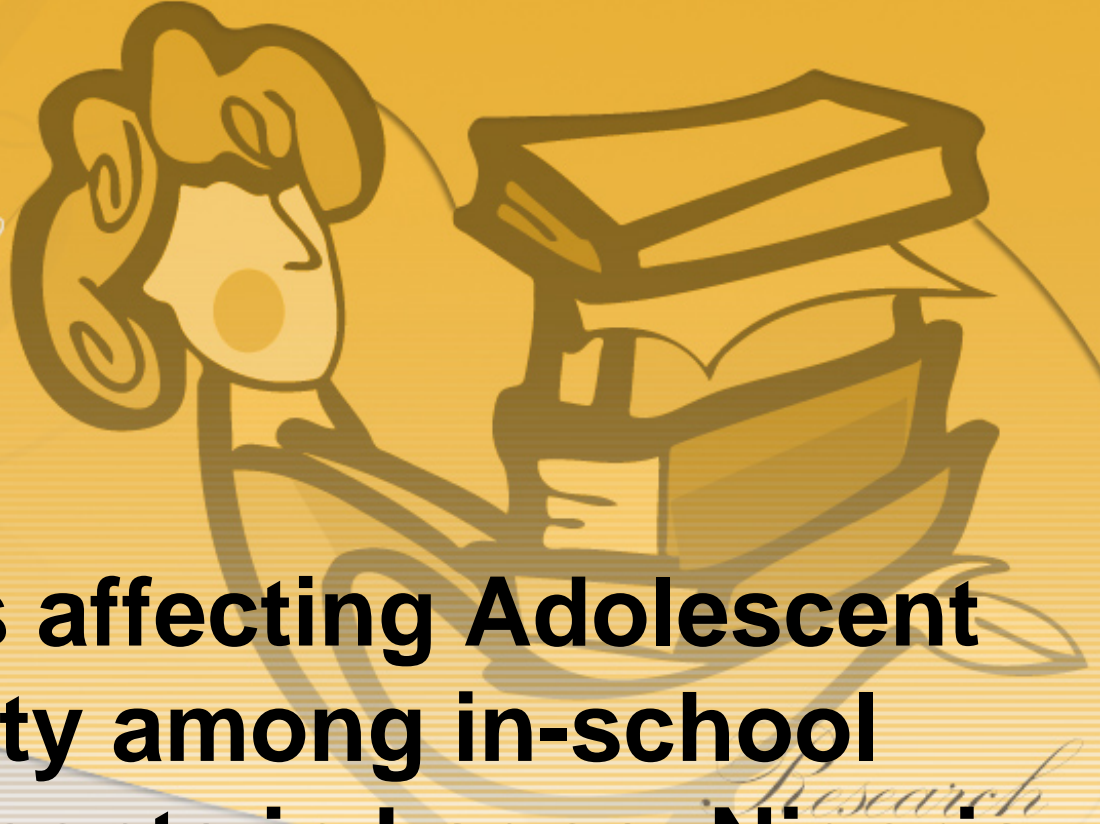


Research



Factors affecting Adolescent Sexuality among in-school Adolescents in Lagos, Nigeria



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Training on Sexual Health Research
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Outline of the presentation

- Introduction
- Problem statement
- Hypothesis
- Objectives
- Methodology
- Expected outcomes
- Summary

Research



- **Introduction**
- **Problem statement**
- **Hypothesis**
- **Objectives**
- **Study Methodology**
- **Expected outcomes**

Research



Introduction

- Sexuality is reflected in the total expression of who we are as human beings
- It is shaped by our values, attitudes, behaviours, physical appearance, beliefs, emotions, personality, likes and dislikes, and spiritual selves, as well as all the ways in which we have been socialized
- Sexuality begins before birth and lasts a lifetime, and it is influenced by ethical, spiritual, cultural, and moral factors. It involves giving and receiving sexual pleasure, as well as enabling reproduction

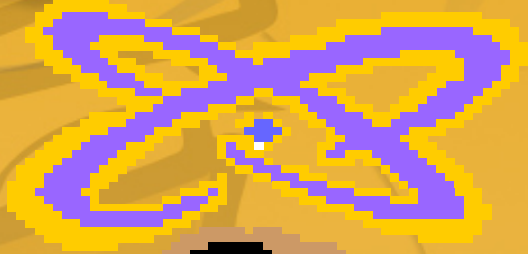


Introduction contd.

- Sexual health is the ability to enjoy and express one's sexuality free from the risks of sexually transmitted infections, unwanted pregnancy, coercion, violence, and discrimination

Research

Research



- Introduction
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- Study Methodology
- Expected outcomes

Research



Problem statement

- Adolescents in Nigeria are contributing to unfavourable indices of sexual and reproductive health ranging from sexually transmitted infections, unwanted pregnancies, and unsafe abortions to maternal mortality
- Traditional mechanisms for coping with and regulating adolescents' sexuality, especially marriage and norms of chastity before marriage are being eroded. This has resulted in the following:

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Early/unprotected sex (NDHS 1999)

- Over 25% of adolescents in Nigeria have had their first sexual intercourse by the age of 15
- By the age of 18 years, over 60% of adolescents have had sexual intercourse
- First sex is often experimentation, and adolescents usually do not prepare for it nor take any protective measures

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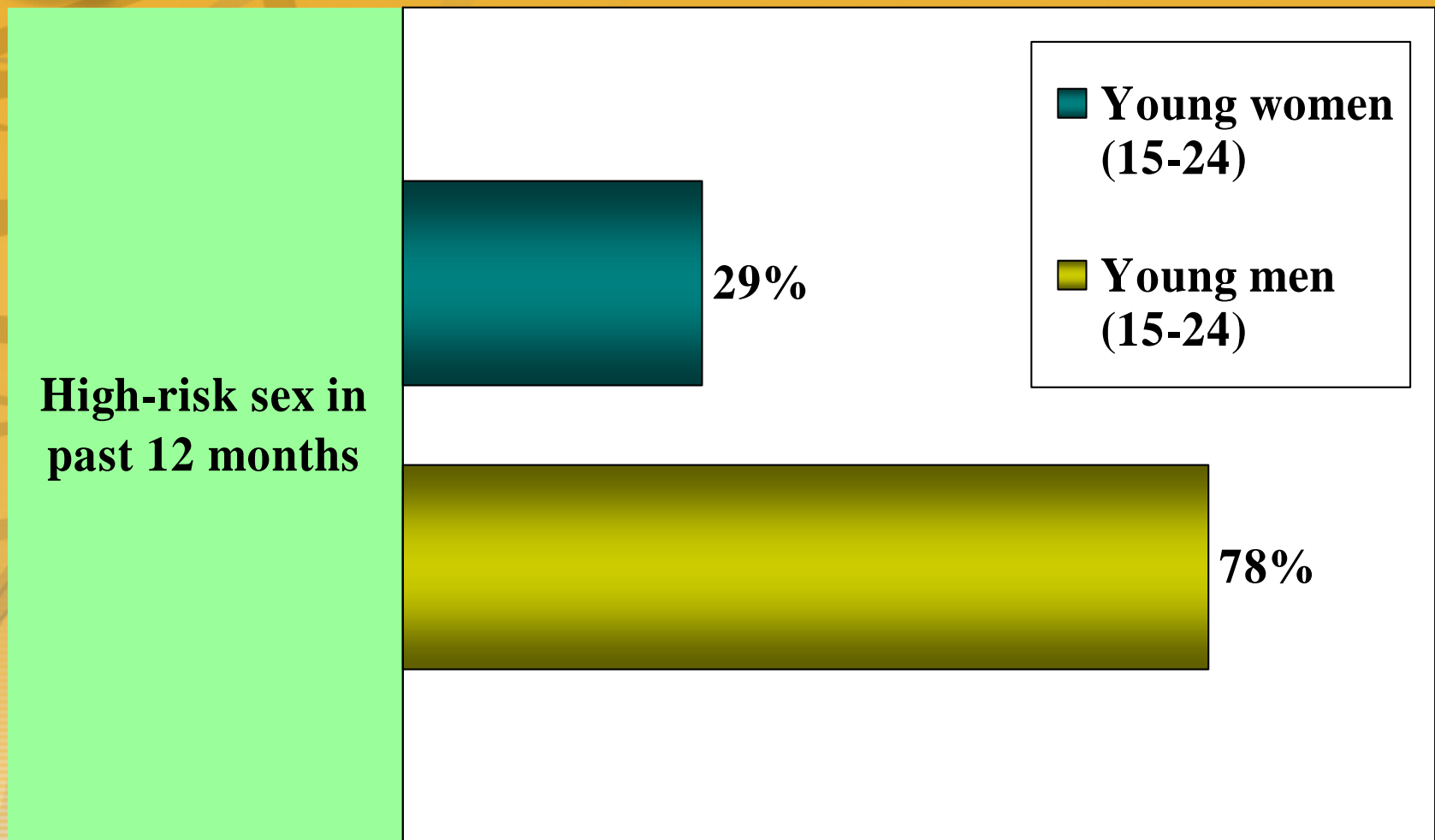
Early childbearing

- 1 in 4 women between the ages of 15-19 is already a mother or pregnant with her first child (NDHS 2003)





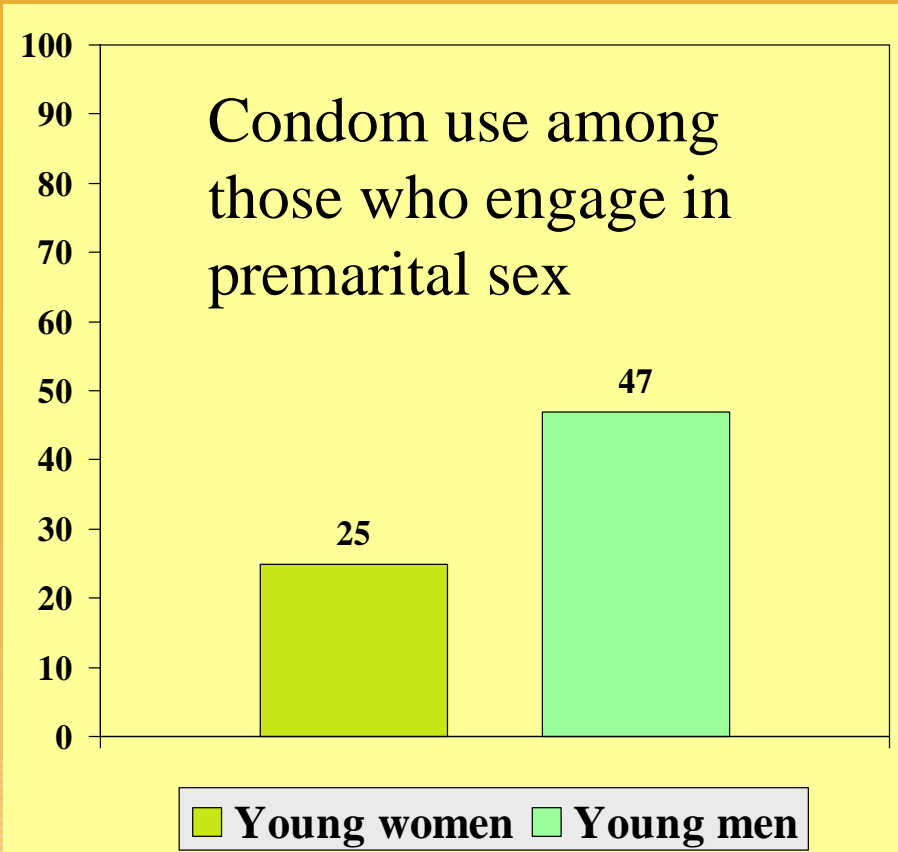
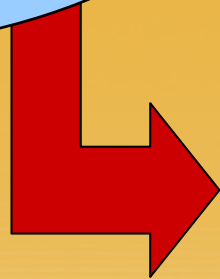
High-risk sex among young adults





Premarital sex among young women and young men

Premarital sex:
32 percent of young women
29 percent of young men

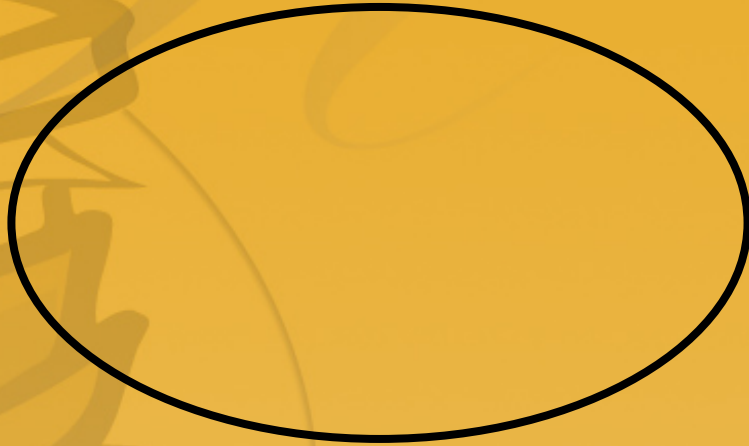


During the last 12 months

Source NDHS 2003



HIV prevalence by age groups, 1999



- Young people are at the highest risk of the epidemic
- Young people of age 20 to 24 years consistently showed the highest prevalence in four out of the six geo-political zones



- Introduction
- Problem statement
- **Hypothesis**
- Objectives
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Research



Hypothesis

- The researchers intend to test the hypothesis that an increased understanding and knowledge of the sexual behaviours of in-school adolescents can present opportunities for effective evidence-based interventions to curtail unfavourable health outcomes

Research



- Introduction
- Problem statement
- Hypothesis
- **Objectives**
- Study Methodology
- Expected outcomes

Research



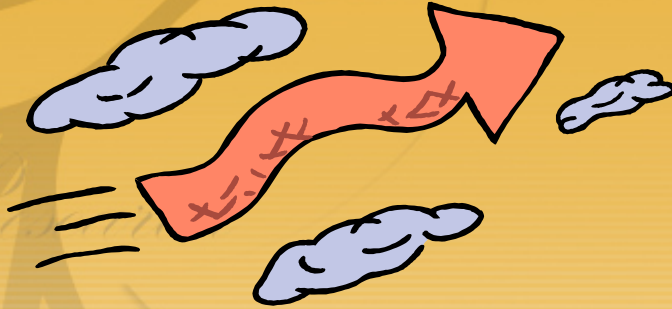
Objectives

- To determine the pattern of sexual behaviour among in-school adolescents
- To identify factors that influence their sexual behaviour
- To assess their knowledge, attitude and use of contraceptives
- To document their experiences of unwanted pregnancies and its consequences

Research



- Introduction
- Problem statement
- Hypothesis
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Research



Methodology

- The study will be conducted in 4 schools in Lagos. Two schools each will be selected each from a rural and urban Local Government Area (LGA)
- **Study population**
 - The study population is randomly selected in-school adolescents aged between 12 and 17 years found in these schools, the teachers of the selected adolescents and the heads of schools



Methodology contd.

- **Sampling method**

- Probability sampling will be used. The sampling procedure to be used will be a multi-stage stratified random sampling
- In each school, students will be randomly selected from the entry, mid and exit classes i.e. Junior Secondary School (JSS) 1, Senior Secondary School (SSS) 1 and SSS3
- The number of classes to be used in each arm of the class level will be randomly selected to give a total number of 80 students per class level, and a total of 240 per school for the quantitative questionnaires



Methodology contd.

- Five students (3 female and 2 male) each will be randomly selected from other arms of the same class levels for Focus Group Discussions (FGDs), making a total of 15 per school and 60 overall
- The main class teachers of the randomly selected students i.e. the entry, mid and exit classes will be selected for in-depth interviews
- **Study team**
 - The study will be conducted by a team comprising the principal investigator and officials from the school health branch of the Federal Ministry of Health, as well as relevant officials from the Lagos State Ministries of Education and Health

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Methodology contd.

- **Study process**

- The principal investigator will conduct a 3-day training on the use of questionnaire and on how to conduct the (FGDs) and in-depth interviews
- A 2-day pre-testing of the questionnaires will be conducted in a randomly selected school, which will not form part of the study sample

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Methodology contd.

Type of data to be collected

- Quantitative data
 - Demographic characteristics
 - Knowledge on sexual health issues (e.g. teenage pregnancy, abortion, contraception and sexually transmitted infections)
 - Sexual behaviours (e.g. age at sexual initiation, number of partners, sexual norms)
 - Consequences of unwanted pregnancies
- Qualitative Data
 - Two sets of FGDs will be conducted in each school on the students randomly selected
 - One set will comprise 6 males from the entry, mid and exit classes, i.e. 2 per class, while the other set will comprise 9 females from the entry, mid and exit classes i.e. 3 per class
 - In-depth interviews will be conducted for teachers of the classes of students selected for the study as well as the heads of each of the schools



Analysis of data

- The Epi Info statistical software will be the primary software for data entry and analysis
- Some strategies will be adopted to ensure the quality of data collected and entered into the computer

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Cost and timing

- The study should be concluded in about six months
- It would cost approximately twenty-one thousand five hundred dollars (\$21,500)

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Research ethics

- Data collected will be kept confidential
- The purpose of the study will be explained to all the adolescents and their teachers
- Participation will be voluntary
- Consent forms will be designed for respondents and their parents/wards to sign

Research



- Introduction
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Research



Expected outcomes

The expected outcomes from the study will be:

- A deeper understanding and knowledge of sexual behaviours and health outcomes of adolescents in-school
- Availability of data, which will be valuable for evidence-based decision making by policy makers and other stakeholders for policy change, training and improvement in services for in-school adolescents
- The anticipated need for an intervention phase of the project. (This will however depend largely on the findings)

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In summary...

- If we cannot define it, we cannot measure it
- If we cannot measure it, we cannot change it
- But measuring sexual/reproductive health is a challenge



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Thank
you for
listening!

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