Full Length Research Paper

Prevalence of premarital sex and factors influencing it among students in a private tertiary institution in Nigeria

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This study examined prevalence of premarital sexual activities among the youth in a selected private University in Nigeria. A sample of 300 students comprised of 176 males and 124 females were randomly selected to participate in the study. The mean age and standard deviation was 21.7 ± 6.3 years. The ex-post-facto research design was employed. A 35 item; youth premarital sexual activities (YPSA) developed by the researchers was used to generate data for the study. All the hypotheses data were tested at 0.05 level of significance. Data was analyzed with the use of Independent t-test and Multiple Regression and Analysis of Variance. The results indicated that there is a significant difference between the sex, age and family background and premarital sexual activities, as $F_{(3,296)}$ = 3.303; P< 0.05. Also, family background contributed most to premarital activities (β=0.439; t=4.174; P<0.05), followed by age grouping as β = 216; t = 2.142 (P< .05) and finally by gender, (β = .083; t = .825; P >0 .05). Lastly, there is no significant difference between the age grouping and premarital sexual activities. It is seen that β = 0.319; df = 298 (P> 0.05). On the basis of finding, it was concluded that gender and family background play a vital role in engagement of premarital sexual activities by young people, whereas age that suppose to have impact on the dependent variable proved wrong the intention of the researchers.

Key words: Gender, age, family background and premarital sexual activities.

INTRODUCTION

Sexual activities among adolescents have been reported to be increasing worldwide. Several studies in Sub-Saharan Africa have also documented high and increasing premarital sexual activities among adolescents (World Health Organization, 2001). However, viewing youth as a specific group with their own needs is a relatively recent practice, especially in developing countries (Judith, 1999). Cultural taboos hinder young people in many developing countries to discuss sexual matters explicitly with their parents. Most information for their patchy knowledge comes from peers of the same sex who may themselves lack adequate information or are incorrectly informed. Taffa et al. (2002) suggested that young people have limited knowledge about sexual and reproductive health and know little about the natural process of puberty. This lack of knowledge about reproductive health may have grave consequences. Moreover, sexual activities are occurring in the midst of an HIV/AIDS pandemic that is proportionately affecting adolescents and young adults.

On the other hand, young people often face enormous pressure especially from peers to engage in sex, unlicensed erotic video films and the desire for economic gain. As a result of this, significant number of adolescents are involved in sexual activities at an early age (Alexander and Hickner, 1997; Taffa et al., 2002). Young people in Ethiopia are also exposed to various risks such as unprotected sex, early marriage, early pregnancy and STIs/HIV/AIDS. Studies have shown that in Ethiopia 60% of pregnancies are unwanted or unintended (WHO, 2001).

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Fikadu and Fikadu (2000) opined that premarital sex is one of the reproductive health problems witnessed among youth. Studies have also revealed that the prevalence of premarital sex among school youth is higher in Oromia (31.3%) than nationally (19%) (HAPCO, 2000). However, factors that contribute to such an early initiation of sexual practices were not dealt with in the study area. Due to sensitivity of this issue, young people receive inadequate education, guidance and services on reproductive health (Judith, 1999). With their limited knowledge about their bodies and their sexuality, they find themselves vulnerable to sexually transmitted diseases and infections, including HIV/AIDS, unplanned early childbearing and unsafe abortions.

In the USA, sexual behaviour differed by ethnicity, age, and urban/rural location (Grunbaum et al., 2002). In Thailand and Philippines, family structure was associated with premarital sex; youths living with one parent have higher rate of sexual activity than those living with both parents (Choe et al., 2004). For many adolescents, experimenting with tobacco, alcohol, sex, and drugs are rites of passage. Associations between sexual activity and substance use have been a consistent research finding. In Kenya, the single most important predictor of sexual activity among adolescent women was the use of alcohol, drugs, or tobacco (Kiragu and Zabin, 1993). Studies from the USA also reported similar findings (Coker et al., 1994). There is a growing evidence of young men having sex with men (MSM) exploratory behaviour among boys in Bangladesh; though no national data on young MSM is available. A need assessment study for prevention of HIV/STIs among MSM in the age group of 21 to 30 years in Dhaka revealed that the mean age of first sex with other males was mostly between 10 to 12 years (Rani et al., 2003). Most of them sold sex with seven or eight clients per night and 40% did not know anything about condoms. Premarital sex, particularly if it occurs outside of a stable union that will lead to marriage, is considered socially as a taboo.

Nnachi (2003) observed that in terms of behavioural problems, sex abuse appeared to be one of the most serious offences committed by children and youth. Obiekezie-Ali (2003) supported this instance with a United Nation's (2000) information on reproductive health, which shows that many Nigerian girls are known to start involvement in active sex at the early age of thirteen years. The age of initial sexual experience and involvement thus becomes younger than fifteen years as found by Esen (1974). Okonkwo and Eze (2000) observed that today's situation shows a sharp contrast to the traditional Nigerian societal context in which girls avoided pre-marital sexual experiences for fear of social punishments usually meted out to girls who lost their virginity before marriage. Apart from the blame apportioned to parents for their negligence as earlier mentioned, some people are of the opinion that adolescents are naturally open to the normal sex drive while this drive is incensed by the impact of permissive Western culture transmitted through the sexual stimuli conveyed by the mass media. Denga (1983) pointed out that sexually explicit movies expose young people to adult issues at an "impressionable age." Others opine that the use of pornographic materials as well as knowledge and use of contraceptives, especially the condom that has been excessively advertised, has contributed immensely to the involvement of adolescents in sexual practices (Onuzulike, 2002). These and other evidence in the literature show that a real problem exists.

The study also tried to find out which factors influence the young people toward sexual practices and to what extent. This will then serve as a starting point for determining what interventions to carry out in order to help young people in their sexual adjustment.

METHODS

Design

The study adopted as descriptive survey design of ex-post facto type, which involve the giving out of questionnaire to elicit information from young people. This is so because the researcher is only interested in determining the influence of the predictors' variables (gender, age grouping and family background) on the criterion variables (premarital sex).

Population, sample and sampling techniques

The population for this study was made up of youth whose ages ranged from 14 to 25 years, chosen from Babcock University, Ilishan in Ikenne Local Government of Ogun state of Nigeria. A sample of 300 undergraduate students that fall between the age ranges was randomly selected. The mean age of the respondent was 21.7 while the standard deviation was 6.291.

Instrumentation

The instrument consists of structured questions developed by the researchers. Section A consisted of demographic data on the family, sex and age. Section B consisted of structure questions which measure premarital sexual activities. The questions were made in such a way that it measured different aspect of premarital sexual activities. There are seven subscales in which 5 questions were asked to generate information. Participant responded to the questions statement in a 4 – point Likert scale ranging from Never = 1, Rarely – 2, Sometimes -3 and Usually- 4.

Validity and reliability

The questionnaire was subjected to face validity and content validity by the assistance of experts in research method. Some questions were reconstructed, while some were deleted. A reliability coefficient of 0.83 was obtained via a test-retest method.

RESULTS

H_1: There is no significant difference between gender, age and family background on premarital sexual activities.

Table 1. Analysis of variance ANOVA[a].

Model	Sum of squares	Df	Mean square	F	Sig
Regression	566.600	3	188.667		
Residual	16924.688	296	57.178	3.303	0.024
Total	5140.810	299			

Significant at 0.05 level; df = 3.296, critical value = 2.60. [a]Dependent variable: premarital sexual activities.

Table 2. Independent t-test of age grouping and premarital sexual activities.

Age grouping (Years)	N	Mean	Std deviation	df	t.	Sig.
14-18	134	48.0667	6.05294	298	0.319	0.379
19-25	166	48.7797	6.4678			

Significant at 0.05 level; df = 298, critical value = 1.960.

Table 3. Multiple regression showing relative contribution of each of the independent variables on dependent variable.

Variable	Unstandarized co-efficient		Standard co-efficient β	t	Sig.
	β	Std. Error			
Constant	54.544	5.252		10.328	0.000
Gender	0.04499	1.768	0.083	0.825	0.980
Family	3.970	1.826	0.439	4.174	0.033
Age	0.229	1.608	0.216	2.142	0.887

Dependant variable: - premarital sexual activities.

The result in Table 1 indicated that there is a significant difference between the gender, age and family background and premarital sexual activities, as $F_{(3,296)}$ = 3.303; P< .05. Thus, the hypothesis of no significant difference is thus discarded and the alternate is accepted. The finding implies that premarital sexual activities are affected by the 3 independent variable.

H₂: There is no significant difference between 14 to 15 years and 19 to 25 years and premarital sexual activities.

Table 2 shows that there is no significant difference between the age grouping and premarital sexual activities. It is seen that t = 0.319; df = 298; P> 0.05. Hence the hypothesis of no significant difference is upheld. That is age grouping does not have anything to do with premarital sexual activities.

H₃: There is no significant relative contribution of gender, age and family background to premarital sexual activities.

In Table 3, the relative contribution of each independent variable is seen. It shows the corresponding Beta and the t-value. Family background contributed most to premarital activities (β=0.439; t=4.174; P<0.05) followed by age grouping as (β = 216; t = 2.142 P<.05) and finally by Gender, (β = .083; t = .825; P > .05). Hence, the hypothesis of no significant difference is discarded and the alternate is accepted.

DISCUSSION

Consequent upon the analysis of data, the following findings were arrived at: Hypothesis one indicates a significant difference between gender, age and family background on youth premarital sexual activities. This finding is in line with (Egbochukwu, 2007) who opines that gender and age are determinants of premarital sex. Also considering the gender, it is a known fact there is sex difference in human. It is a common belief that male adolescents react more in sexual behaviour than their female counterpart. On the other hand, youthful periods are time in which the young people exhibit youthful tendencies; hence, it is expected that both gender and age will produce a significant difference. Also, the role of family background is not surprising to the researchers. Family background is the bed rock of success in any

society, that is, when the family background is good, it has a positive influence in the society and a shaking family background would produce the problematic children to the society. In view of the fact that Nigerian family does not have a solid foundation in which children bound from illegimate homes, children of such homes cannot be expected to behave better in the society.

Hence, one expects nothing better than anti social behaviour like premarital social behaviour. The most surprising thing to the researchers is the second hypothesis. It was expected that the age grouping (between 14 to 15 years and 19 to 25 years) of young people would have effects on youth premarital sexual behaviours, but we are proved wrong as age grouping has no significance difference to youth sexual behaviour. This might have been due to the fact that the two age ranges fall within the youth period in which bubbling life is still being expected. The last hypothesis indicates significant relative contribution of gender, age and family background on premarital sexual activities. It is revealed that family back ground contribute most to the premarital activities followed by age and lastly by gender. This is not surprising in that good family background has been said to be bedrock of any good society. In view of moral decadence in the society, family background is expected.

CONCLUSION AND RECOMMENDATIONS

Based on the findings, it is therefore concluded that gender and family background have significant impact on premarital sexual activities of young people while age grouping has no impact on premarital sexual activities of young people.

Arising from the findings of the study, the following recommendations are hereby made:

1) Since age and gender are strong determinants to premarital sexual activities, parents should monitor their children closely especially during the time of their youth,
2) Each family must strive to live a decent life in such a way that children from such background do have something to emulate,
3) Parents should be closer to their wards, so that young people feel free to discuss with them,
4) Parents should live to set good example to their children on living a decent life, and

5) The counselors, psychologists and social workers should also launch a campaign against premarital sexual activities.

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