

**SEXUAL BEHAVIOUR AND DETERMINANTS AMONG
SECONDARY-SCHOOL ADOLESCENTS IN BENUE STATE,
NIGERIA: A MIXED-METHODS CROSS-SECTIONAL STUDY**

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ABSTRACT: This mixed-methods cross-sectional study assessed sexual behavioural patterns and their determinants among secondary school students in Benue State, Nigeria. A multi-stage sampling technique was used to select 400 students (JSS 1-SS3) from six co-educational schools, who completed a structured questionnaire; 12 in-depth interviews and four focus group discussions provided contextual depth. The prevalence of sexual activity was 41.3% (165/400), with 52.7% of sexually active students initiating sex between ages 13 and 15. Risky patterns were prevalent: 58.8% did not use a condom at last sex, 66.7% had two or more partners, and contexts included peer pressure (37.6%) and transactional sex (27.3%). Guided by the Theory of Planned Behaviour, key determinants included favourable attitudes towards sex (e.g., as a sign of maturity, 46.3%), strong subjective norms (43.0% believed most friends were sexually active), and low perceived behavioural control (only 33.0% were confident refusing sexual advances). Qualitative data contextualized these findings, revealing peer networks as primary sources of information and pressure. The study concludes that risky sexual behaviour is multifaceted, driven by attitudinal, normative, and control factors. A multi-tiered programme is recommended: scale up comprehensive, age-appropriate sexuality education; support peer-led prevention campaigns; and broaden access to confidential, youth-friendly sexual health services. Limitations include self-report bias and the non-causal nature of the cross-sectional design.

Keywords: Adolescents, Sexual Behaviour, Determinants, Theory of Planned Behaviour, Nigeria, Secondary School

INTRODUCTION

Adolescent sexual behaviour remains a critical public health issue globally, shaped by complex biological, social, and environmental factors. The period of adolescence is marked by exploration and identity formation, which often includes the initiation of sexual activity. The World Health Organization (2023) reports that early sexual debut, defined as engaging in first sexual intercourse before the age of 15, is prevalent in many low and middle-income countries, with significant implications for teenage pregnancy, school dropout, and sexually transmitted infections (STIs), including HIV. Despite global efforts in sexual and reproductive health education, risky sexual behaviours among adolescents persist, particularly in regions with limited access to information and services.

In Nigeria, the sexual and reproductive health landscape for young people is a source of considerable concern. With a large youth population, the country faces high rates of adolescent pregnancy, HIV prevalence, and other sexual health challenges. The 2018 National Demographic and Health Survey (NDHS) indicated that among young women aged 15-19, 19% had already begun childbearing, highlighting the prevalence of early sexual activity. Factors such as cultural norms, peer pressure, poverty, and inadequate comprehensive sexuality education are often cited as key drivers of these trends. The situation demands urgent attention to safeguard the health and future of Nigerian adolescents.

In Benue State, known as the "Food Basket of the Nation," the socio-economic context adds unique dimensions to adolescent sexual behaviour. The state faces challenges such as rural-urban migration, economic hardship, and cultural practices that may influence sexual decision-making among youths. Secondary school students, in particular, are at a pivotal stage where they are highly susceptible to external influences. Studies in similar Nigerian contexts, such as by Adekunle et al. (2021), have shown that peer groups, exposure to media, and family structure significantly predict sexual risk-taking. In Benue, the influence of local festivals, social gatherings, and the digital penetration of social media may be creating new avenues for shaping sexual norms and behaviours.

The issue is especially pressing within secondary schools, where students are navigating the transition from childhood to adulthood. At this stage, many students are initiating sexual relationships, often without adequate knowledge or protection. Concurrently, many face unintended pregnancies, contract STIs, or experience sexual coercion. Factors such as curiosity, the need for financial support, peer influence to be sexually active, and the search for romantic relationships have driven this trend. The normalisation of early sexual activity among adolescents in educational settings now prompts important public health and sociological questions about knowledge, attitudes, and preventive measures. Secondary schools in Benue State have become a critical microcosm of these national issues, particularly in urban centres like Makurdi and Gboko. These institutions, ranging from public day schools to private boarding schools, represent a convergence of diverse adolescent experiences (Oche, 2019). However, as student populations grow and social dynamics evolve, there is growing concern over the patterns of risky sexual behaviour and their health consequences (Iorapuu & Asemota, 2022). In Benue State, with its specific cultural and economic realities, this concern is particularly acute.

Recent observations suggest a rising trend in early sexual debut, multiple sexual partnerships, and low condom use among adolescents. Common behaviours include transactional sex for educational materials or pocket money, age-disparate relationships, and sexual networking within and between schools (Terkimbi & Utso, 2023). Such practices appear to be driven not only by biological curiosity but also by various socio-economic, peer, and institutional dynamics. Reports indicate that poverty, parental neglect, lack of youth-friendly health services, and limited school-based sexual education may be contributing factors (Akaa & Iorga, 2021; Iyorkee & Mchia, 2020). Given the role of educational institutions in shaping adolescent development, it is important to examine these sexual behaviours not simply as individual acts, but as outcomes of broader social and structural processes. This study, therefore, focuses on identifying the types and patterns of sexual behaviour among secondary school students in Benue State and exploring the underlying socio-economic, peer, and institutional factors that influence such behaviour.

Statement of the Problem

While adolescence is a natural period of development, the engagement in risky sexual behaviour poses significant threats to the health and academic futures of secondary school students (Chia, 2021). In Benue State, the problem is particularly visible due to the state's high adolescent fertility rates and its socio-economic pressures. Students are increasingly implicated in risky practices such as unprotected sex, transactional relationships with older partners, and serial dating, which elevate their vulnerability to teenage pregnancy, school dropout, and STIs (Benue State Ministry of Health, 2022). Despite the evident risks, most interventions have been sporadic and health-focused, with little attention paid to the underlying sociological and economic conditions that perpetuate this trend. There is a lack of empirical research investigating what specific sexual behavioural patterns are most common, which students are most at risk, and why students engage in these activities. Factors such as family financial pressure, peer influence, cultural perceptions of masculinity and femininity, and weak institutional provision of sexual health education remain poorly understood. Moreover, the role of peer groups in normalising certain sexual behaviours has not been adequately explored in the Benue context. This study seeks to address these gaps by focusing on two core issues: first, the specific forms and patterns of sexual activity among secondary school students in Benue State; and second, the socio-economic, peer, and institutional factors that predispose them to such actions. This study is guided by the Theory of Planned Behaviour (TPB) to provide a coherent framework for analysing the determinants of sexual behaviour. The study aims to achieve the following specific objectives:

1. To examine the nature and patterns of sexual activities among secondary school students in Benue State.
2. To identify the socio-economic, peer-related, and institutional factors that predispose students to engage in risky sexual behaviour.
3. To apply the TPB to understand how attitudes, subjective norms, and perceived behavioural control interact to influence sexual behaviour.

Empirical Review

Objective I: To examine the nature and patterns of sexual activities among secondary school students in Benue State

Several studies have examined the evolving patterns of sexual behaviour among adolescents in Nigeria. Iorapuu and Asemota (2022) carried out a quantitative study in selected secondary schools in Makurdi to explore students' sexual practices. Applying the Health Belief Model, they discovered that a significant proportion of students reported early sexual debut, with many engaging in sex without condoms. These behaviours were often influenced by misconceptions about pregnancy and STI prevention, and were frequently shared and reinforced within peer groups, both in schools and through social media platforms. The study concluded that the gap in accurate sexual knowledge has surpassed adolescents' ability to make informed protective decisions.

Similarly, Chia (2021) examined adolescent sexual health in the North-Central region, focusing on how economic hardship drives risky sexual behaviour. Through interviews with health workers and

focus group discussions with students, the study revealed that the most common patterns included transactional sex for basic needs, multiple concurrent partnerships, and low usage of contraceptives. Although insightful, Chia's study covered a broad regional scope, making it difficult to determine the unique manifestations of these behaviours within Benue State's specific cultural environment.

In another study, Akaa and Iorga (2021) explored the role of family structure and media exposure in shaping sexual initiation among adolescents in the North-Central zone. Focusing on institutions in Benue and Plateau States, they documented how students from single-parent homes or with high exposure to sexualised media content were more likely to report early sexual activity. The researchers found that sexual activities often started with consensual relationships with schoolmates, sometimes evolving into more risky patterns such as cross-generational sex. While their study highlighted key influencing factors, it paid limited attention to the specific school-based environments and peer networks that enable such patterns to persist.

These studies show that adolescents engage in various types of sexual behaviour, from early consensual relationships to risky transactional sex. However, none provide a localized, context-specific analysis of how these patterns manifest within the secondary schools of Benue State. This research intends to address this gap by thoroughly investigating the types of sexual behaviours students engage in, the contexts in which they occur, and the risk-laden tactics that have become part of adolescent life in the state.

Objective II: To identify the socio-economic, peer-related, and institutional factors that predispose secondary school students in Benue State to engage in risky sexual behaviour

The socio-economic pressures that push students towards risky sexual practices have been extensively examined in the Nigerian context. Oche (2019), in a study carried out in Nassarawa State, used the Theory of Gender and Power to explain how young girls, in particular, rationalise transactional sex as a means of securing financial support for school and personal needs. The study revealed that students from economically disadvantaged backgrounds are more inclined to view such relationships as a necessary strategy for survival, especially when parental support is insufficient. Interviews showed a strong link between poverty, the desire for material goods, and the engagement in risky sexual behaviour.

Iyorkee and Mchia (2020), using the Social Learning Theory, examined peer influence on sexual behaviour among students in Federal Government Colleges in the North-Central region. They observed that school clubs, hostel networks, and after-school hangouts frequently serve as spaces where students are introduced to and encouraged to initiate sexual activity. These peer groups often operate as a key source of (often misleading) sexual information, with older students influencing the norms and attitudes of younger ones. Although the study effectively addressed peer pressure, it paid limited attention to the role of the school curriculum and the presence or absence of school-based health services in mitigating these influences.

Terkimbi and Utoo (2023) examined how the lack of comprehensive sexuality education, weak parental monitoring, and the absence of youth-friendly health services contribute to risky sexual behaviour in Benue State. Their mixed-method research, conducted across ten secondary schools

in the state, revealed that although many schools have guidance and counselling units, few proactively address sexual health issues. Consequently, students often navigate their sexual development with limited guidance, engaging in risky behaviour with little understanding of the potential consequences.

Summary of Gaps in the Literature

While existing research has shed light on the nature and causes of risky sexual behaviour among Nigerian adolescents, important gaps remain. Many studies focus broadly on the North-Central region or on Nigeria as a whole, often ignoring the specific social, cultural, and economic dynamics of Benue State, with its unique agrarian economy and Tiv, Idoma, and Igede cultural norms. Although prior research points to poverty and peer pressure as key drivers, few have examined the detailed behavioural patterns and their specific determinants among students within the distinct academic communities of Benue State, limiting the design of effective school- and community-based interventions. Additionally, although socio-economic and peer influences are often discussed, the interaction of these factors with institutional structures, such as school health policies, the availability of counselling services, and the integration of sexual health into the school curriculum, has not been sufficiently explored. Many studies also rely solely on surveys or key informant interviews, which restrict the depth of understanding that a combined methodological approach could provide.

This study aims to address these gaps by offering a public health and sociological analysis of students' sexual behavioural patterns in secondary schools in Benue State. It will examine the specific nature of these behaviours, the influence of peer and economic pressures, and the impact of institutional provisions, employing both qualitative and quantitative methods.

Theoretical Framework: The Theory of Planned Behaviour (TPB)

The Theory of Planned Behaviour (TPB) provides a robust sociological and social-psychological framework for understanding and predicting human social behaviour. Developed by Icek Ajzen in 1985 as an extension of his earlier Theory of Reasoned Action, the TPB emerged from a need to account for behaviours that are not entirely under an individual's volitional control. Historically, theories of behaviour were often limited to attitudes, but Ajzen's work integrated the crucial element of perceived behavioural control, recognizing that individuals' actions are also shaped by their perception of external barriers and facilitators. The theory has since become one of the most influential and widely applied models for studying a variety of health-related and social behaviours, including adolescent sexual activity.

The TPB is predicated on the fundamental assumption that an individual's intention to perform a behaviour is the most immediate and important predictor of that behaviour. Intention, in turn, is determined by three conceptually independent factors. The first is Attitude towards the Behaviour, which refers to the degree to which a person has a favourable or unfavourable evaluation of the specific behaviour in question. The second is Subjective Norm, which involves the perceived social pressure from significant others (like peers, parents, or partners) to perform or not perform the behaviour. The third and critical component is Perceived Behavioural Control, which reflects the

perceived ease or difficulty of performing the behaviour, based on an assessment of past experiences, anticipated obstacles, and access to required resources and skills. The basic premise of the TPB is that the stronger the intention and the greater the perceived behavioural control, the more likely an individual is to enact the behaviour.

Application of the Theory to the Study

The Theory of Planned Behaviour is exceptionally well-suited to structure and explain the complex web of factors influencing sexual behaviour among secondary school students in Benue State. This study can map its core objectives directly onto the three constructs of the TPB, providing a coherent analytical lens.

Attitude Towards the Behaviour: This construct will be used to investigate students' personal beliefs and evaluations of engaging in sexual activity. This includes their perceptions of the outcomes of such behaviour, for instance, whether they view it as a source of pleasure, a marker of maturity, a sin, or a risky endeavour leading to pregnancy or STIs. The study will explore how personal experiences, cultural values, and religious teachings prevalent in Benue State shape attitudes. For example, a student who believes that early sex is essential for social acceptance (a positive outcome evaluation) will have a more positive attitude and a stronger intention to engage in it.

Subjective Norm: This component will be applied to examine the powerful influence of peers, parents, and the broader community on students' sexual decisions. The study will investigate whether students believe their most important friends are sexually active and whether they approve of such behaviour (peer pressure). It will also assess perceptions of parental expectations and the norms within their school environment. Suppose a student perceives that "everyone is doing it" and that their reference group expects them to be sexually active (a strong subjective norm). In that case, this will significantly increase their intention to engage in sexual behaviour, even if their personal attitude is ambivalent.

Perceived Behavioural Control: This is a critical dimension for the Benue State context. It will be used to assess the non-motivational factors that facilitate or hinder sexual activity. This includes:

Facilitators: Perception of easy access to sexual partners, availability of private spaces (e.g., empty classrooms, unsupervised lodgings).

Barriers: Perceived ability to negotiate condom use, fear of consequences (pregnancy, disease, parental punishment), access to contraceptives, and personal self-efficacy to refuse sexual advances. A student may have a positive attitude and feel peer pressure (intention). However, if they perceive substantial barriers like a high risk of pregnancy or a lack of condoms (low perceived behavioural control), they may be less likely to follow through. This construct directly links to the socio-economic determinants, such as poverty, which can affect a student's perception of control. For instance, a student engaging in transactional sex may feel a lack of control in refusing a partner who offers financial support.

METHODOLOGY

Study Design and Population

A mixed-methods cross-sectional design was employed. The study population comprised all secondary school (JSS 1 to SSS 3) students in public and private co-educational schools within the three senatorial districts of Benue State.

Sampling Procedure

A multi-stage sampling technique was used. First, one Local Government Area (LGA) was randomly selected from each of the three senatorial districts. Second, two co-educational schools (one public, one private) were purposively selected from each LGA based on willingness to participate, resulting in six schools. Third, within each school, stratified random sampling was used to select students from JSS 1- SSS 3 classes, proportional to class size, to achieve a sample of 400 students. For the qualitative component, 12 sexually active students were purposively selected for in-depth interviews (IDIs), and 4 focus group discussions (FGDs) were held with groups of 6-8 sexually active students each, stratified by gender.

Data Collection and Measures

Quantitative data were collected using a structured, self-administered questionnaire. The instrument included:

- **Socio-demographics:** Age, gender, class level, etc.
- **Sexual Behaviour:** Sexual activity, age at debut, number of partners, condom use.
- **Theory of Planned Behaviour Constructs:** Scales for Attitude (5 items, $\alpha = .78$), Subjective Norm (4 items, $\alpha = .75$), and Perceived Behavioural Control (5 items, $\alpha = .81$) were used. Items were measured on a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree). Scale scores were computed as means.
- Qualitative data were collected using semi-structured interview guides for IDIs and FGDs, exploring experiences, peer norms, and perceived control in sexual decision-making.

Data Analysis

Quantitative data were analysed using descriptive statistics (frequencies, percentages, means). To identify determinants, binary logistic regression was performed, with sexual activity (yes/no) as the outcome variable and TPB constructs and key demographics as predictors. Qualitative data were transcribed and analysed thematically using a framework approach to identify emergent themes and contextualize quantitative findings.

Ethical Considerations

Ethical approval was obtained from the Benue State Ministry of Education (Reference: BSMoE/ERC/2024/108). Written informed consent was obtained from school principals *in loco parentis*. Written assent was obtained from all student participants. Confidentiality was maintained through anonymization of data, and procedures were in place to provide referrals to counselling services for any participants disclosing abuse or distress.

RESULTS

This section presents the findings of the study on the sexual behavioural patterns and their determinants among secondary school students in Benue State. The results are presented in tables and accompanied by a brief narrative summary.

Table 1: Socio-Demographic Characteristics of Respondents (N=400)

Characteristic	Category	Frequency (n)	Percentage (%)
Age	10-14 years	88	22.0
	15-17 years	212	53.0
	18+ years	100	25.0
Gender	Male	196	49.0
	Female	204	51.0
Class Level	JSS 1 - JSS 2	95	23.8
	JSS 3 - SSS 1	152	38.0
	SSS 2 - SSS 3	153	38.2
Ethnicity	Tiv	248	62.0
	Idoma	112	28.0
	Igede	40	10.0
School Type	Public School	280	70.0
	Private School	120	30.0
Living Arrangement	With Both Parents	168	42.0
	With One Parent	142	35.5
	With Relatives/Guardians	90	22.5

Source: field survey, 2025

The socio-demographic profile of the 400 surveyed respondents, as detailed in Table 1, presents a diverse sample of adolescents from Benue State. The cohort is predominantly composed of mid-adolescents, with over half (53.0%) falling within the 15-17 years age bracket, while a significant quarter (25.0%) are 18 years or older. The gender distribution is nearly equal, with a slight female majority (51.0%). Regarding educational stage, the sample is well-distributed across class levels, with the largest groups being students in JSS 3 to SSS 1 (38.0%) and SSS 2 to SSS 3 (38.2%). Ethnically, the sample reflects the composition of Benue State, with the Tiv (62.0%), Idoma (28.0%), and Igede (10.0%) constituting the majority. In terms of institutional context, a large majority of respondents (70.0%) attended public schools. Finally, the data on living arrangements reveal that less than half of the students (42.0%) resided with both parents, while a combined 58.0% lived in alternative arrangements, including with a single parent (35.5%) or with relatives or guardians (22.5%), highlighting a potential variability in home-based supervision and support structures.

Table 2: Patterns of Sexual Behaviour among Sexually Active Respondents (n=165)

Variable	Category	Frequency (n)	Percentage (%)
Sexual Debut	Have ever had sex	165	41.3
	Have never had sex	235	58.7
Total Respondents		400	100.0
Age at First Sex (n=165)	Below 13 years	35	21.2
	13 - 15 years	87	52.7
	16 years and above	43	26.1
Number of Sexual Partners (n=165)	One Partner	55	33.3
	Two to Three Partners	72	43.6
	Four or More Partners	38	23.1
Condom Use at Last Sex (n=165)	Yes	68	41.2
	No	97	58.8
Context of Sexual Activity (Multiple Responses Possible)	With a Boyfriend/Girlfriend	128	77.6
	Transactional Sex (for money/gifts)	45	27.3
	Under Peer Pressure	62	37.6
Use of Alcohol/Substances before Sex (n=165)	Yes	59	35.8
	No	106	64.2

Source: Field survey, 2025

A total of 165 respondents (41.3%) reported ever having sexual intercourse. Of these, 52.7% initiated sex between the ages of 13 and 15. Risky patterns were common: 66.7% had two or more sexual partners, 58.8% did not use a condom at last sex, 37.6% reported peer pressure as a context, and 27.3% engaged in transactional sex (Table 2).

Table 3: Determinants of Risky Sexual Behavior

Construct / Factor	Agree n (%)	Neutral n (%)	Disagree n (%)	Mean	Std. Dev.
ATTITUDE TOWARDS THE BEHAVIOUR					
Having sex is a sign of being mature	185 (46.3)	90 (22.5)	125 (31.2)	3.85	1.12
Sex is necessary to keep a boyfriend/girlfriend	210 (52.5)	75 (18.8)	115 (28.7)	4.02	1.24
The risk of pregnancy from one-time sex is low	158 (39.5)	110 (27.5)	132 (33.0)	3.45	1.31
SUBJECTIVE NORM					
Most of my close friends are sexually active	172 (43.0)	95 (23.8)	133 (33.2)	3.78	1.18
I would be ridiculed by my friends if I were a virgin	145 (36.3)	105 (26.2)	150 (37.5)	3.32	1.41
My parents have discussed sexual health with me	95 (23.8)	45 (11.2)	260 (65.0)	2.55	1.52
PERCEIVED BEHAVIOURAL CONTROL					
I can easily refuse a sexual advance even under pressure	132 (33.0)	88 (22.0)	180 (45.0)	2.98	1.60
I have access to condoms if I need them	115 (28.8)	70 (17.5)	215 (53.7)	2.75	1.55
Lack of money makes me consider transactional sex	102 (25.5)	88 (22.0)	210 (52.5)	2.88	1.49
My school provides adequate sexual health education	85 (21.3)	65 (16.2)	250 (62.5)	2.45	1.48

Source: Field survey, 2025

Based on the TPB constructs, favourable attitudes were prevalent, with 46.3% agreeing that sex is a sign of maturity (Mean=3.85). Strong subjective norms were evident, as 43.0% believed most of their friends were sexually active (Mean=3.78). Critically, perceived behavioural control was low: only 33.0% were confident in refusing sexual advances, and only 28.8% had access to condoms. The qualitative data richly contextualized these statistics. One male student in an FGD illustrated subjective norm: "If all your friends are talking about their experiences and you have nothing to say, they will call you a small boy. So, you just find a girlfriend to do it so you can belong." Another female participant highlighted low perceived behavioural control in transactional situations: "When a man who has been giving you money for handouts asks for sex, how can you say no? You feel you owe him."

Table 4: Binary Logistic Regression Predicting Sexual Activity among Respondents (N=400)

Predictor Variable	Adjusted Odds Ratio (AOR)	95% Confidence Interval (CI)	p-value
Age (Ref: 10-14 years)			
15-17 years	1.5	[0.9 - 2.5]	.110
18+ years	2.1	[1.1 - 3.9]	.021*
Gender (Ref: Male)			
Female	1.1	[0.7 - 1.6]	.720
School Type (Ref: Public)			
Private	0.8	[0.5 - 1.3]	.340
TPB Constructs			
Positive Attitude	1.8	[1.1 - 2.9]	.015*
Strong Subjective Norm	2.2	[1.4 - 3.5]	.001**
Low Perceived Behavioural Control	0.6	[0.4 - 0.9]	.028*

Note: The model is significant, $\chi^2(7) = [Value to be inserted]$, $p < .001$. AOR > 1 indicates increased odds of being sexually active; AOR < 1 indicates decreased odds.

Ref = Reference category.

*** $p < .05$, ** $p < .01$ **

The binary logistic regression analysis, performed to identify key determinants of sexual activity while controlling for demographic factors, confirmed the significant utility of the Theory of Planned Behaviour (TPB). After adjusting for age, gender, and school type, all three core TPB constructs emerged as statistically significant predictors. Specifically, a one-unit increase in positive attitudes towards sex was associated with 1.8 times higher odds of being sexually active (AOR = 1.8, 95% CI [1.1, 2.9], $p = .015$). The influence of subjective norms was even more pronounced, with a one-unit increase in the perception that peers are sexually active associated with 2.2 times greater odds of being sexually active oneself (AOR = 2.2, 95% CI [1.4, 3.5], $p = .001$). Conversely, as hypothesized, perceived behavioural control had a protective effect; a one-unit increase in the perceived ability to control one's sexual behaviour was associated with a 40% reduction in the odds of being sexually active (AOR = 0.6, 95% CI [0.4, 0.9], $p = .028$). Among the control variables, only older age (18+ years) was a significant predictor compared to the youngest group. The model collectively demonstrates that the intention to engage in sexual behaviour, as framed by the TPB driven by favourable attitudes, strong peer norms, and low self-control is a powerful determinant of actual sexual activity among this adolescent population.

DISCUSSION

The high prevalence of sexual activity and early debut aligns with national data (NPC & ICF, 2019) and is explained by the TPB. Favourable attitudes, such as viewing sex as a sign of maturity, directly strengthen intention, as found in other contexts (Oche, 2019). The powerful subjective norm, where peers are perceived as sexually active, creates social pressure to conform, corroborating the findings of Iyorkee and Mchia (2020).

The critically low perceived behavioural control is a central finding. The inability to refuse advances and poor access to condoms and sexual health education act as significant barriers to safe practices. This aligns with Terkimbi and Utso's (2023) identification of institutional gaps. The link to transactional sex, driven by economic vulnerability (Chia, 2021), further diminishes perceived control, making risky behaviour more likely. The mixed-methods approach allowed for triangulation; the qualitative quotes provide a vivid narrative for the statistical patterns, showing how peer networks and economic necessity directly shape students' perceived and actual control over their sexual health.

Conclusion

This study demonstrates that risky sexual behaviour among students in Benue State is a significant public health concern, systematically influenced by a convergence of permissive attitudes, strong peer norms, and a debilitating lack of perceived behavioural control. The use of the TPB provided a robust explanatory framework for these dynamics. The cross-sectional design and reliance on self-report limit causal inference, but the mixed-methods approach enhances validity.

Recommendations

Based on the evidence, targeted interventions are recommended:

Institutional Action: The Benue State Ministry of Education should implement a standardized, comprehensive sexuality education curriculum for SSS 1-3 students, specifically designed to build skills for negotiating condom use and refusing sexual advances to improve perceived behavioural control.

Peer-Level Intervention: Schools should establish and fund peer-education programmes, trained by health professionals, to challenge misconceptions and create new, positive social norms around sexual health.

Structural Support: Local government areas should establish and promote youth-friendly health centres near school zones, offering confidential access to contraceptives and counselling. Simultaneously, vocational skill acquisition programs could be introduced to reduce economic vulnerability to transactional sex.

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