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## **Knowledge of Preventive Measures of Harmful Sexual Behaviours among In-school Adolescents in Nsukka Local Government Area, Enugu State**

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### **Abstract**

The study examined the knowledge of preventive measures of harmful sexual behaviours among in-school adolescents in Nsukka Local Government Area of Enugu state. Four specific objectives, four corresponding research questions and three null hypothesis were formulated to guide the study. The study adopted a cross sectional research design. The population for the study consisted of 14,989 in-school adolescents in Nsukka LGA. The sample size was 390 in-school adolescents which were drawn using a multi stage sampling technique. The instrument for data collection was a 10 items structured questionnaire titled Knowledge of Preventive Measures of Harmful Sexual Behaviours Questionnaire (KPMHSBQ). Frequency and percentage were used to answer the research questions while chi-square statistics was used to test the hypothesis at 0.05 level of significance. The results showed that in-school adolescents had high level of knowledge (73.7%) of preventive measures of harmful sexual behaviours. There was no significant difference in the level of knowledge of preventive measures of harmful sexual behaviors based on age( $p=.184>0.5$ ), gender( $p=.314>0.5$ ), and school type ( $p=.083>0.5$ ). Therefore, the study recommended that age appropriate sex education should be taught in schools as well as enlightenment campaigns on forms of harmful sexual behaviours, the preventive measures and consequences in order to maintain the high level of knowledge of preventive measures of harmful sexual behaviors among adolescents.

**Keywords:** Knowledge, Preventive measures, Harmful sexual behaviours, In-school adolescents.

### **Introduction**

In recent times, considerable attention has been on adolescent sexual behaviours in general, especially in sub-Saharan Africa and how harmful sexual behaviours contribute to poor sexual health outcomes. Most of such outcomes have long-term negative consequences on adolescents' health and development. There are 35 million people living with HIV among which youth between the ages of 15–24 years accounted for approximately 33 percent of new HIV infections (UNAIDS, 2018).

World Health Organization (WHO, 2018) surveyed 56 countries across the globe and

found that 15 percent to 30 percent of adolescents reported experiencing sexual violence or coercion by their peers. The study also found that 5 percent to 17 percent of adolescents reported experiencing sexual violence or coercion by adults. This age bracket account for youths including in school adolescents.

Harmful sexual behaviors (HSB) can be defined as sexual behaviours expressed by children and young people under the age of 18 years that are developmentally inappropriate, maybe harmful towards self or others, or be abusive towards a child, young person or adult (Hackett et al., 2019). Harmful sexual behaviors include having multiple sexual partners, sexual intercourse with commercial sex workers, unprotected sexual intercourse, coerced sexual intercourse and sexual intercourse for reward (Keto et al., 2020). Students and educators reported to witness or experience a range of forms of harm occurring within schools including; rumour about sexual activity, sexual name calling, abusive relationships, online harassment,

Non-consensual sharing of sexual imagery, unwanted touching and sexual assault and rape (Lloyd et al., 2020). These are the common harmful sexual behaviours that occur among in-school adolescents. In this study, the harmful sexual behaviours to be studied are rape, pornography, sexual harassment, unprotected sex, masturbation that is displayed by in-school adolescents. These harmful sexual behaviours can be prevented through some measures.

Preventive measures refer to actions taken to prevent or reduce the occurrence of certain events, risks or diseases. According to Colizzi et al. (2020) they are measures designed to mitigate potential harm, protect individuals or communities and promote overall well-being. In this study, preventive measures are the proactive ways of bringing an end or reducing the cases of harmful sexual behaviour. The preventive measures that will be discussed in this study are abstinence, use of condoms, sex education, advocacy and health talks.

There is no universal definition of knowledge; hence it has been conceptualized by many authors. Knowledge, according to Haradhan (2016), is a set of experiences, pertinent data, and expert insight that provides a framework for evaluating and integrating fresh experiences and data. Okeke et al. (2021) defined knowledge as information, facts, skills and understanding gained through learning or experience. In this context, knowledge refers to an in-school adolescent's comprehension of the preventive measures of harmful sexual behaviours.

In-school adolescent refers to a youth who is in a transitional state of physical and psychological human developments that generally occur during the period of puberty to adulthood that are still in school system (Backes & Bonnie, 2019). Adolescents are classified into two, which are in school and out of school adolescents. Out of school adolescents are those not attending school. The main focus in this research study will be the in school adolescents. In the context of this work, in-school adolescents comprise of adolescents between 10 to 19 years who are in Jss1 to Ss3 in Nsukka LGA in Enugu state. In this study, social demographics are those features, phenomenon, circumstances or conditions such as age, gender, school type that make adolescents possess harmful sexual behaviours.

Age can play a significant role in influencing harmful sexual behaviours amongst in-school adolescents. Specifically, younger adolescents (ages 10-14) may be at higher risk due to their limited knowledge about sexual health, lack of experience in making informed decisions about sexual activity and more susceptible to peer pressure. The researcher aims to determine the level of knowledge of preventive measures of harmful sexual behaviours among younger (10-14) and older (15-19) in-school adolescents.

Gender can have a significant impact on harmful sexual behaviour among in-school adolescents. According to a study by Olaoye et al. (2019), the results indicated that gender was a significant predictor of harmful sexual behaviours among in-school adolescents. Most common harmful sexual behaviours reported by boys included sexual coercion, physical violence and forced sex while girls reported sexual harassment, unwanted sexual touching and unwanted sexual advances (Beeston, 2022). The researcher aims to determine how gender can influence in-school adolescents' level of knowledge of preventive measures of harmful sexual behaviours.

School type is a critical social demographic factor that can influence the prevalence and correlates of harmful sexual behaviours among in-school adolescents. School type refers to co-educational and same sex characteristics of a secondary school. According to a study by Llyod (2019) found that students in same-sex schools were less likely to engage in harmful sexual behaviours than those in co-educational schools particularly among female students. Draugedalen et al. (2021), found no significant differences in the prevalence of harmful sexual behaviours between same-sex and coeducational schools but reported differences in the types of behaviours reported. The researcher aims to determine how the school type of in-school adolescents can influence their level of knowledge of preventive measures of harmful sexual behaviours.

### **Purpose of the Study**

The purpose of the study is to investigate the knowledge of preventive measures of harmful sexual behaviours among in-school adolescents in Nsukka Local Government Area (LGA), Enugu state. Specifically, the study sought to determine the:

1. level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state.
2. level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on age.
3. level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on gender.
4. level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on school type.

### **Research Questions**

The following research questions were posed to guide the study:

1. What is the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state?
2. What is the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on age?
3. What is the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on gender?
4. What is the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on school type?

## Hypotheses

The following null hypothesis were postulated and tested at 0.05 level of significance:

1. There is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on age.
2. There is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on gender.
3. There is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in school adolescents in Nsukka LGA, Enugu state based on school type.

## Materials and Methods

The cross-sectional survey research design was adopted for the study. Nwaogwugwu and Owoeye (2021) successfully adopted this design to investigate assessment of sexual behavior and utilization of sexual reproductive health services amongst secondary school students in Ekiadolor, Edo state. Hence, the design was deemed appropriate and was adopted for the study. The study was conducted in Nsukka Local Government Area. A sample size of 390 in school adolescents was used for the study. The multi-stage sampling technique was used to draw the sample for the study. In the first stage, a proportionate ratio selection was used to select 21 schools out of the 31 schools in Nsukka Local Government Area. In the second stage, stratified sampling technique was used to select 390 respondents from selected schools. This is in line with suggestions of Cohen et al. (2011), that when a population size of 10000 above at 95% confidence level and 5% intervals, the sample size should be 377 or above.

A researcher structured instrument titled Knowledge of Preventive Measures of Harmful Sexual Behaviour Questionnaire (KPMHSBQ) was used for data collection. The instrument was validated by three experts from the Department of Human Kinetics and Health Education, University of Nigeria, Nsukka. The instruments consist of 13 items grouped into two sections, A and B. Section A consisted of three items on socio-demographic factors of the respondents (age, gender and school type). Section B contained 10 items assessing knowledge of preventive measures of harmful sexual behaviour. The reliability of the instruments was established by carrying out a trial test on in-school adolescents that share the same characteristics with the population. The reliability of the instrument was determined using Cronbach's Alpha. An internal consistency of .76 was obtained and adjudged reliable for use. 390 copies of the questionnaire were administered to the respondents by the researcher in their respective schools.

The filled copies of the questionnaire were collected on the spot. This was done to ensure high return rate. 390 copies of the questionnaire were administered to the respondents by the researcher in their respective schools. The research questions were answered using frequency and percentages. Based on Okafor (1997) criteria, scores below 20 percent was considered very low level of knowledge, 21-39 percent was considered low level of knowledge, 40-59 percent considered average level of knowledge, 60-89 percent was considered high level of knowledge, while a score of 80 and above was considered very high level of knowledge. The hypotheses were tested using chi-square at 0.05 level of significance.

## Results



**Table 1: Level of Knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu State (n = 386)**

S/N	Items	TRUE		FALSE	
		f	%	f	%
1	Abstinence (staying away from sexual activities) is an effective preventive measure against harmful sexual behaviours (rape, masturbation, sexual harassment, pornography and unprotected sex) among in-school adolescents.	354	91.7	32	8.3
2	Harmful sexual behaviours can be prevented through mass media sensitization and advocacy (an action that speaks against harmful sexual behaviours).	329	85.2	57	14.8
3	Condoms is not an effective measure against harmful sexual behaviours among in-school adolescents.	276	71.5	110	28.5
4	Sex education (teaching of sex related topics) is a preventive measure against harmful sexual behaviours among in-school adolescents.	348	90.2	38	9.8
5	Advocacy (an action that speaks in favour of sex education) is an effective preventive measures against harmful sexual behaviours among in-school adolescents.	306	79.3	80	20.7
6	Health talk is not a preventive measure against harmful sexual behaviours among in-school adolescents	182	47.2	204	52.8
7	Health talks given in schools, religious places and through mass media are effective means of preventing harmful sexual behaviours.	326	84.5	60	15.5
8	Condoms can help prevent unplanned pregnancies after sexual activity among in-school adolescents.	251	65.0	135	35.0
9	Condoms cannot prevent transmission of sexually transmitted diseases or infections.	232	60.1	154	39.9
10	Advocacy (an action that speaks in favour of sex education) cannot reduce the rate of harmful sexual behaviours among in-school adolescents	241	62.4	145	37.6
Average		73.7		25.3	

Results in Table 1 shows that overall, in-school adolescents in Nsukka LGA have high level of knowledge of preventive measures of harmful sexual behaviours (73.7%). Specifically, the in-school adolescents have very high knowledge (91.7) of the effectiveness of abstinence as a preventive measure against harmful sexual behaviours.

**Table 2: Level of Knowledge of preventive measures of harmful sexual**

**behaviours possessed by in-school adolescents in Nsukka LGA, Enugu State based on Age (n = 386)**

S/N	Items	AGE							
		10 - 14 years				15 - 19 years			
		n = 205				n = 181			
		True		False		True		False	
		f	%	f	%	f	%	f	%
1	Abstinence (staying away from sexual activities) is an effective preventive measure against harmful sexual behaviours (rape, masturbation, sexual harassment, pornography and unprotected sex) among in-school adolescents.	194	94.6	11	5.4	160	88.4	21	11.6
2	Harmful sexual behaviours can be prevented through mass media sensitization and advocacy (an action that speaks against harmful sexual behaviours).	188	88.3	24	11.7	148	81.8	33	18.2
3	Condoms are effective measures against harmful sexual behaviours among in-school adolescents.	155	74.1	53	25.9	124	68.5	57	31.5
4	Sex education (teaching of sex related topics) is a preventive measure against harmful sexual behaviours among in-school adolescents.	189	89.3	22	10.7	165	91.2	16	8.8
5	Advocacy (an action that speaks in favour of sex education) is an effective preventive measures against harmful sexual behaviours among in-school adolescents.	180	80.5	40	19.5	141	77.9	40	22.1
6	Health talk is not a preventive measure against harmful sexual behaviours among in-school adolescents	115	53.7	95	46.3	72	39.8	109	60.2
7	Health talks Given in schools, religious places and through mass media are effective means of preventing harmful sexual behaviours.	167	81.5	38	18.5	159	87.8	22	12.2
8	Condoms can prevent unplanned pregnancies after sexual activity among in-school adolescents.	144	68.3	65	31.7	111	61.3	70	38.7
9	Condoms cannot prevent transmission of sexually transmitted diseases or infections.	122	62.0	78	38.0	105	58.0	76	42.0

10	Advocacy (an action that speaks in favour of sex education) cannot reduce the rate of harmful sexual behaviours among in-school adolescents	1 70.2 61 29.8 97 53.6 84 46.4
		4 4
	Average	76.2 23.8 70.8 29.2

Results in Table 2 show that overall in- school adolescents have high knowledge of preventive measures of harmful sexual behaviours irrespective of their age. However, in-school adolescents aged 10 to 14 years have higher level of knowledge (76.2%) of preventive measures of harmful sexual behaviours than their counterparts aged 15 to 19 years (70.8%).

**Table 3: Level of Knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu State based on gender (n = 386)**

S/N	Items	Gender							
		Female n = 238				Male n = 148			
		f	True %	f	False %	True f	%	False f	%
1	Abstinence (staying away from sexual activities) is an effective preventive measure against harmful sexual behaviours (rape, masturbation, sexual harassment, pornography and unprotected sex) among in-school adolescents.	219	92.0	19	8.0	135	91.2	13	8.8
2	Harmful sexual behaviours can be prevented through mass media sensitization and advocacy (an action that speaks against harmful sexual behaviours).	202	84.9	36	15.1	127	85.8	21	14.2
3	Condoms are effective measures against harmful sexual behaviours among in-school adolescents.	168	70.6	70	29.4	108	73.0	40	27.0
4	Sex education (teaching of sex related topics) is a preventive measure against harmful sexual behaviours among in-school adolescents.	220	92.4	18	7.6	128	86.5	20	13.5
5	Advocacy (an action that speaks in favour of sex education) is an effective preventive measures against harmful sexual behaviours among in-school adolescents.	188	79.0	50	21.0	118	79.7	30	20.3
6	Health talk is not a preventive measure against harmful sexual behaviours among in-school adolescents	86	36.1	152	63.9	96	64.9	52	35.1
7	Health talks Given in schools, religious places and through mass media are effective means of preventing harmful sexual behaviours.	211	88.7	27	11.3	115	77.7	33	22.3
8	Condoms can prevent unplanned pregnancies after sexual activity among in-school adolescents.	142	59.7	96	40.3	109	73.6	39	26.4
9	Condoms cannot prevent transmission of sexually transmitted diseases or infections.	132	55.5	106	44.5	100	67.6	48	32.4



10	Advocacy (an action that speaks in favour of sex education) cannot reduce the rate of harmful sexual behaviours among in-school adolescents	130	54.6	108	45.4	111	75.0	37	25.0
Average			71.4		28.7		77.5		22.5

Results in Table 3 shows that overall, in-school adolescents have high level of knowledge of preventive measures of harmful sexual behaviours irrespective of their gender. Specifically, male in-school adolescents have higher (77.5%) level of knowledge than their female counterparts (71.4%).

**Table 4: Level of Knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu State based on school type (n = 386)**

S/N	Items	Co-educational n = 98				School Type				Boys only n = 106			
		True n = 98		False n = 98		Girls only n = 182		Boys only n = 182		True n = 106		False n = 106	
		f	%	f	%	f	%	f	%	f	%	f	%
1	Abstinence (staying away from sexual activities) is an effective preventive measure against harmful sexual behaviours (rape, masturbation, sexual harassment, pornography and unprotected sex) among in-school adolescents.	88	89.8	10	10.2	167	91.8	15	8.2	99	93.4	7	6.6
2	Harmful sexual behaviours can be prevented through mass media sensitization and Advocacy (an action that speaks against harmful sexual behaviours).	73	74.5	25	25.5	158	86.8	24	13.2	98	92.5	8	7.5
3	Condoms are effective measures against harmful sexual behaviours among in-school adolescents.	62	63.3	36	36.7	131	72.0	51	28.0	83	78.3	23	21.7
4	Sex education (teaching of sex related topics) is a preventive measure against harmful sexual behaviours among in-school adolescents.	83	84.7	15	15.3	168	92.3	14	7.7	97	91.5	9	8.5
5	Advocacy (an action that speaks in favour of sex education) is an effective preventive measures against harmful sexual behaviours among in-school adolescents.	64	65.3	34	34.7	148	81.3	34	18.7	94	88.7	12	11.3
6	Health talk is not a preventive measure against harmful sexual behaviours among in-school adolescents	49	50.0	49	50.0	61	33.5	121	66.5	72	67.9	34	32.1
7	Health talks Given in schools, religious places and through mass media are effective means of preventing harmful sexual behaviours.	75	76.5	23	23.5	164	90.1	18	9.9	87	82.1	19	17.9
8	Condoms can prevent unplanned pregnancies after sexual activity among in-school adolescents.	67	68.4	31	31.6	101	55.5	81	44.5	83	78.3	23	21.7
9	Condoms cannot prevent transmission of sexually transmitted diseases or infections.	52	53.1	46	46.9	103	56.6	79	43.4	77	72.6	29	27.4
10	Advocacy (an action that speaks in favour of sex education) cannot reduce the rate of harmful sexual behaviours among in-school adolescents	60	61.2	38	38.8	96	52.7	86	47.3	85	80.2	21	19.8

Average	68.7	31.1	63.5	28.7	80.6	17.5
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Results in Table 4 shows that generally, in-school adolescents have high level of knowledge of preventive measures against harmful sexual behaviours irrespective of their school type. Specifically, in-school adolescents in boy's only school have very high (80.6%) level of knowledge while those in co-educational and girl's only schools have high (68.7% and 63.5%) respectively level of knowledge.

**Table 5: Summary of Chi-square Testing/Analysis Showing Difference in the Knowledge of Preventive Measures of Harmful Sexual Behaviours possessed**

Variables	Group	N	True		False		X <sup>2</sup>	df	P-value
			O	(E)	O	(E)			
Age	10 - 14 years	205	156	(151.09)	49	(53.91)	3.487	1	0.184
	15 - 19 years	181	128	(133.41)	53	(47.59)			
	Total	386	284	(284.5)	102	(101.5)			

Significant at  $p < 0.05$

Table 5 shows the results of Pearson chi-square value with the corresponding P-value for hypothesis of no significant difference in the level of knowledge of harmful sexual behaviours based on age. ( $X^2 = 3.487$ ,  $p = 0.184$ ). Since the p value is greater than 0.05 level of significance, the null hypothesis is not rejected. This implies that there is no significance difference in the level of knowledge of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on age.

**Table 6: Summary of Chi-square Testing/Analysis Showing Difference in the Knowledge of Preventive Measures of Harmful Sexual Behaviours possessed by in-school Adolescents based on gender. (386)**

Variables	Group	N	True		False		X <sup>2</sup>	df	P-value
			O	(E)	O	(E)			
Gender	Female	238	170	(175.43)	68	(62.57)	7.221	1	0.314
	Male	148	115	(109.07)	33	(38.93)			
	Total	386	285	(284.5)	101	(101.5)			

Significant at  $p < 0.05$

Table 6 shows the results of Pearson chi-square value with the corresponding P-value for hypothesis of no significant difference in the level of knowledge of harmful sexual behaviours based on age. ( $X^2 = 7.221$ ,  $p = 0.314$ ). Since the p value is greater than 0.05 level of significance, the null hypothesis is not rejected. This implies that there is no significance difference in the level of knowledge of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on gender.

**Table 7: Summary of Chi-square Testing/Analysis Showing Difference in the Knowledge of Preventive Measures of Harmful Sexual Behaviours possessed by in-school Adolescents based on school type. (386)**

Variables	Group	N	True		False		X <sup>2</sup>	df	P-value
			O	(E)	O	(E)			
School Type	Co-educational	98	67	(72.24)	31	(25.76)	13.186	2	0.083
	Boys only	182	130	(134.13)	52	(47.87)			

Girls only	106	88	(78.12)	18	(27.88)
Total	386	285	(284.49)	101	(101.51)

Significant at  $p < 0.05$

Table 7 shows the results of Pearson chi-square value with the corresponding P-value for hypothesis of no significant difference in the level of knowledge of harmful sexual behaviours based on age. ( $X^2 = 13.186$ ,  $P = 0.083$ ). Since the p value is greater than 0.05 level of significance, the null hypothesis is not rejected. This implies that there is no significance difference in the level of knowledge of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on school type.

### Discussion

The findings from Table 1 revealed that in-school adolescents in Nsukka LGA have high level of knowledge of preventive measures of harmful sexual behaviours (73.7%). Specifically, the in-school adolescents have very high knowledge (91.7%) about the effectiveness of abstinence as a preventive measure against harmful sexual behaviours. The result was quite surprising and unexpected because it negates the real situation of in-school adolescents engaging in harmful sexual behaviours that is prevalent in Nsukka LGA. Reproductive education was also recently introduced to the curriculum. The implication of the findings could be in-school adolescents do not practice the knowledge they have on preventing harmful sexual behaviours among them which is detrimental to their health and academic pursuit. The findings in accordance with Osuala and Ogbu (2020), which indicates that the respondents had a good knowledge of harmful sexual behaviours. The findings contradict the result of Nwaogwugwu and Owoeje (2021), which indicates that the respondents had a low knowledge of harmful sexual behaviours.

The findings from table 2 revealed that in-school adolescents have high level of knowledge of preventive measures of harmful sexual behaviours irrespective of their age. However, in-school adolescents aged 10 to 14 years have higher level knowledge (76.2%) of preventive measures of harmful sexual behaviours than their counterparts aged 15 to 19 years (70.8%). The finding is unexpected and surprising because the older in-school adolescents are expected to have more level of knowledge compared to the younger in-school adolescents because they have a broader curriculum that will explain the preventive measures of harmful sexual behaviours. The corresponding hypothesis in Table 5 revealed that there is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on age. The implication of the findings is that, older in-school adolescents are in a stage where their sexual hormones are heightened and they are more experimental compared to younger in-school adolescents. The findings in accordance with that of Owaka (2020) which indicates, older in-school adolescents have lower level of knowledge of risky sexual behaviours.

Findings from Table 3 revealed that both female in-school adolescents (71.4%) and male in-school adolescents (77.5%) have high level of knowledge of preventive measures of harmful sexual behaviours in Nsukka LGA, Enugu state. The findings are expected and not surprising because regardless of gender, in-school adolescents should have high level of knowledge of preventive measures of harmful sexual behaviours. The corresponding hypothesis in Table 6 shows that there is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on gender. The findings in accordance with Ena and Hurrisa (2016) which indicates, in-school adolescents of both genders have a high level of knowledge of risks of sexual behaviours.

The findings in Table 4 revealed that In-school adolescents have high level of knowledge of preventive measures of harmful sexual behaviours, irrespective of their school type. Specifically, in-school adolescents in boy's only school have very high (80.6%) level of knowledge while those in of co-educational and girl's only schools have high (68.7% and 63.5% respectively) level of knowledge. The findings are unexpected and surprising because in girl's only schools, they are encouraged by teachers and their parents to practice abstinence and not engage in harmful sexual behaviours and how to protect themselves from it. The corresponding hypothesis in Table 7, shows that there is no significant difference in the level of knowledge of preventive measures of harmful sexual behaviours possessed by in-school adolescents in Nsukka LGA, Enugu state based on school type. The findings in accordance with Lloyd (2019) which indicates that students from same sex schools have a higher level of knowledge of harmful sexual behaviours than students in co-educational schools. The implication of the study to health education is that it empowers in-school adolescents with the information and skills they need to make informed decisions about their sexual health. A limitation during the course of the study was inability to get maximum co-operation of the in-school adolescents as they were writing their examinations.

### Conclusion

Findings from the study revealed in-school adolescents have a high level of knowledge which however, does not translate to high level of practice. Therefore, it is essential that adequate measures are put in place to address these issues as they relate to the health and wellbeing of in-school adolescents, as well as the general public. There should be stringent laws to serve as deterrent to sexual offenders. Also, parents and teachers should be sensitized on the importance of age appropriate sex education.

### References

- Backes, E. P., & Bonnie, R. J. (2019). Adolescent Development. National Academies Press (US). <https://www.ncbi.nlm.nih.gov/books/NBK545476/>
- Beeston, A. (2022). Sexual assault impacts teenager's mental health and education.
- Cohen, L., Manion, L., & Morrison, K. (2007). Research Methods in Education (6th ed.). Routledge. <https://doi.org/10.4324/9780203029053>
- Colizzi, M., Lasalvia, A., & Ruggeri, M. (2020). Prevention and early intervention in youth mental health: Is it time for a multidisciplinary and trans-diagnostic model for care? *International Journal of Mental Health Systems*, 14(1), 1–14. [doi.org/10.1186/s13033-020-00356-9](https://doi.org/10.1186/s13033-020-00356-9)
- Draugedalen, K., Kleive, H., & Grov, Ø. (2021). Preventing harmful sexual behavior in primary schools: *Barriers and solutions*. *Child Abuse & Neglect*, 121, 105295. [doi.org/10.1016/j.chiabu.2021.105295](https://doi.org/10.1016/j.chiabu.2021.105295)
- Ena, L., & Fekecha Hurissa, B. (2016). Knowledge, Attitudes and Practices towards Risky Sexual Behaviors among Adolescents of Jimma University Community High School, South West Ethiopia, 2015. *Journal of Women's Health Care*, 05(01). [doi.org/10.4172/2167-0420.1000292](https://doi.org/10.4172/2167-0420.1000292)
- Hackett, S., Branigan, P., & Holmes, D. (2019). Harmful sexual behaviour framework: An evidence-informed operational framework for children and

young people displaying harmful sexual behaviours  
<https://www.icmec.org/wp-content/uploads/2019/04/harmful-sexual-behaviour-framework.pdf>

Haradhan, M. (2016). Knowledge is an essential element at present world. *Munich Personal RePEc Archive*, 83041.

Keto, T., Tilahun, A., & Mamo, A. (2020). Knowledge, attitude and practice towards risky sexual behaviors among secondary and preparatory students of Metu town, south western Ethiopia. *BMC Public Health*, 20(1). doi:10.1186/s12889-020-09371-4

Lloyd, J. (2019). Response and interventions into harmful sexual behaviour in schools. *Child Abuse & Neglect*, 94, 104037. doi:10.1016/j.chiabu.2019.104037

Lloyd, J., Walker, J., & Bradbury, V. (2020). Harmful sexual behaviour in schools: a briefing on the findings, implications and resources for schools and multi-agency partners.  
<https://www.contextualsafeguarding.org.uk/media/elsc0mc3/beyond-referrals-two-harmful-sexual-behaviour-in-schools.pdf>

Nwaogwugwu, C., & Owoeye, O. (2021). Assessment of sexual behavior and utilization of sexual reproductive health services amongst secondary school students in Ekiadolor, Edo state. *Journal of Medical Women's Association of Nigeria*, 6(2), 105–111. doi.org/10.4103/jmwa.jmwa\_20\_21

Okeke, N. U., Anierobi, E. I., & Oparaugo, U. I. (2021). Risky sexual and health behaviors and impact on psycho-social development of adolescents in tertiary institutions in Enugu State, Nigeria. *European Journal of Education Studies*, 8(9). doi.org/10.46827/ejes.v8i9.3888

Olaoye, T., & Agbede, C. (2019). Prevalence and personal predictors of risky sexual behaviour among in-school adolescents in the Ikenne Local Government Area, Ogun State, Nigeria. *International Journal of Adolescent Medicine and Health*, 9(10). doi.org/10.1515/ijamh-2019-0135

Osuala, E., Ogbu, B., & Udi, O. (2020). Risky sexual behaviour among students of tertiary institutions in South-South, Nigeria: A qualitative study. *Health*, 12(09), 1095–1104. doi.org/10.4236/health.2020.129080

Owaka, O. (2020). Inference of school-based sexual risk avoid avoidance education on sexual behavior among adolescent girls in Hombay County, Kenya.

UNAIDS. (2018). Young people and HIV.  
[https://www.unaids.org/sites/default/files/media\\_asset/young-people-and-hiv\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/young-people-and-hiv_en.pdf)

WHO. (2018). Health promotion. <https://www.who.int/health-topics/health-promotion>