



Sexuality Education Knowledge and Perceived Enhancement Strategies among Students of Schools of Health Technology in Nsukka Local Government Area, Enugu State

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Abstract

The study was to ascertain the level of knowledge of sexuality education among students of Schools of Health Technology (SHT) in Nsukka Local Government Area, Enugu State, in order to formulate sexuality education enhancement strategies. To achieve the purpose of the study, descriptive research survey design was adopted. The population for the study consisted 551 students. A sample size of 232 was drawn using Taro Yamane formula for calculating definite population. Two researcher-developed instruments: Knowledge of Sexuality Education Questionnaire and Sexuality Education Enhancement Strategies Questions were used for data collection. The instrument was validated by three experts from department of Human Kinetics and Health Education, University of Nigeria, Nsukka. The reliability coefficient of .63 was obtained. Research questions were answered using frequencies and percentages. The findings revealed that students of SHT, Nsukka possessed high level of sexuality education knowledge and sexuality education knowledge of the students can be improved using sexuality education enhancement strategies. Among the recommendations for the study is that sexuality education should be introduced as a compulsory topic of study for all students irrespective of discipline in both secondary and tertiary institutions of learning to enable students acquire necessary information on sexuality health.

Keywords: Knowledge, Sexuality education, School of Health, Students, Enhancement strategies

Introduction

Predominantly in Africa, sexuality education has become the most controversial topic of discussion among students of diverse institutions of learning. Discussion of sex issues is a taboo in numerous families, cultures and religions, which when discussed in schools as a topic becomes an offensive lesson to students with such background (Ram, Andajani, Mohammadnezhad, 2020: UNICEF, 2020: Sule, 2015). Sexuality education, which is also referred to as relationship education is aimed at the development of children into effective family members who are capable of handling any sexual related issues without bias (Craig-Kuhn, *et al.* 2020: National Adolescent Student Health Survey [NASHS], 2017; Blaney 2015). Unfortunately, little time and attention are given to issues of sexuality education of children, adolescents and adults in Nigeria. Sexuality education caused as many as 850,000 pregnancies and 9.1 million sexually transmitted diseases among teens in both school and out of school (NASHS, 2017: Mckee, 2006). There is increasing global concern on reproductive sexual health as a result of increasing rates of HIV/AIDS infection among young people, mostly students (UNICEF, 2020: Eko, Abeshi, & Osonwa, 2013). In Benin City, Nigeria, 55 per cent female students have had sexual intercourse at the age of 16 years, while 40 percent admitted of having gotten pregnancy (Eko et al., 2013). The above research asserted that in Benin City, students poor knowledge cum involvement in high risk sexual behaviour consciously and unconsciously often results to unplanned pregnancy, unsafe abortion,



HIV/AIDS infections, single parenting and dropping out of school (Astle, *et al.* 2020: Craig-Kuhn *et al.*, 2020).

Sexuality education is vital learning experiences which provide information on gender, sexual development and healthy sexual relationship. As a result, it becomes a necessity for all students (Deshmukh and Chaniana, 2020). Sexuality education is defined as a process whereby information is given or imparted to a group of young ones and which takes into account the development, growth, the anatomy and physiology of the human reproductive system and changes that occur from youth all through the stages of adulthood (Okam, 2017 and Abogunri, 2003). Sexuality education is also the process of acquiring information and forming attitudes and beliefs about sex, sexual identity, relationship and intimacy (Okam, 2017; Obanor & Omoera, 2009; Guttmacher, 2006). Through sexuality education learning experiences, adolescents and adults are equipped with vital information and skills on protective measures from sexual abuse, exploitation, unplanned pregnancy, sexually transmitted diseases and intimidations (Regina, 2015). This means that sexuality education the process of acquiring vital knowledge and information about human sexuality through developmental gradients.

Knowledge is vital for the health, safety and survival, and its acquisition is continually sought by vast majority of people through education. According to Ugwu (2017), knowledge is the ability to understand or comprehend phenomena, the acquisition of positive information by the exercise of some capacity which humans presumably have in common. Knowledge is organized information shared by or to people. Through knowledge acquisition, human beings improve and make remarkable progress in science and technology for the health of mankind and the environment (Astle *et al.*, 2020; Craig-Kuhn *et al.*, 2020). In line with the above assertions, Oparah, Fidelis, and Nwankwo (2014) defined knowledge as information, skill and understanding gained through learning and experience. This indicates that knowledge is referred as all factual information and skills learned through sequential sexuality education learning experiences by students of schools of health technology. Link your paragraphs

The concept of enhancement strategy denotes improvement, amplification, increment, and enrichment in quality, value or extent aimed at increasing practice on different concepts. Maar *et al.* (2016) defined enhancement as the process of improving the quality of knowledge and awareness in order to increase accessibility to available health services. Okam (2017) described strategy as a way of shaping the future and as the human attempt to get desirable ends with available means. Enhancement strategy is a set of different interventions approaches formulated to improve status quo in a given population (Reel, Jones, Chan, and Macleod, 2018). In this study enhancement strategy improves sexuality education knowledge acquisition among the students of schools of health technology. However, enhancement strategies are very crucial in public health issues such as sexuality education knowledge level of students. The enhancement strategy was formulated based on the reviewed literature and according to students' perceived way of enhancing sex education.

Students are group of learners admitted into institutions of learning for proper acquisition of knowledge and skills. Students of SHT are adolescents and adults admitted into health institutions for acquisition of knowledge and skills about health and well-being of individuals, community and the society at large. Students of SHT comprise both Junior Community Health Extension Workers (JCHEW) which its duration of study is two years, and Community Health Extension Workers (CHEW) which its duration of study is three years. The choice of community health extension workers students alone was because other students of the college were on clinical experiences. The choice of the area of study was as a result of strict culture on human sexuality which affect the children, adolescents and adults dispositions to discuss sex freely. Nsukka is a local government area in Enugu state, Nigeria.



It is situated in the northern part of Enugu State. Sexuality education seeks to reduce the risk of potentially negative outcomes from sexual behaviour, such as unplanned pregnancies, sexual transmitted infections and dropping out of school among adolescence students. It is also about developing young people's ability to make decision over lifetime. Sexuality education aimed at developing and strengthening the ability of children and young people to make conscious, satisfying, healthy and respectful choices regarding relationships, sexuality, emotional and physical health (WHO, 2010). Unfortunately, sexuality education is viewed as a taboo in different communities, religion and cultures. As a result, less attention is given to sexuality education by both students and teachers. Lack of sexuality education in schools causes unplanned pregnancy, sex abuse, early marriage, forced marriage, STIs and dropping out of school. This situation is worrisome as the above problems can be prevented if only sexuality education is effectively and efficiently taught in families and schools. Therefore, the researcher sought out the level of knowledge of sexuality education and formulation of enhancement strategies that will improve human sexuality lifestyles and behaviour among the students of schools of health technology in Nsukka Local Government Area in Enugu State.

The purpose of the study was to identify the level of sexuality education knowledge among the students of Schools of Health Technology in Nsukka Local Government Area, and formulation of enhancement strategies. The study may be of immense benefit to numerous groups such as the students of SHT, government, public health researchers, sexologists, adolescents, adults and the general public. This study will formulate appropriate sexuality education enhancement strategies which will aim at lessening students' chance of becoming pregnant unplanned and reduce chance of contracting sexually transmitted diseases. In one of the previous paragraphs, you failed to describe how you intend to FORMULATE the enhancement strategies. It is very important to the readers as it formed part of your specific objective.

Methods

The researcher adopted descriptive survey research design. A descriptive survey research design is aimed at the appropriate collection of data, and systematic description of the characteristics, features, or facts about a given population (Nworgu, 2015). The study was conducted in Nsukka local government area of Enugu State. The area of the study was chosen because of strict culture on human sexuality in Nsukka Senatorial zone, and the availability of both private and government SHTs in the local government area.

The population for the study comprises of all the students of SHTs in Nsukka LGA: school of Public Health Nursing/ Health Technology with 330 students and Davmaxun School of Health Technology Obukpa Nsukka with 221 students, summing it up to 551 students. The sample for this study consisted of two hundred and thirty students of the two schools health technology in Nsukka LGA.

Instruments for data collection were two researcher designed questionnaires titled Knowledge of Sexuality Education Questionnaire [KSEQ] and Sexuality Education Enhancement Strategies Questionnaire [SEESQ]. The questionnaires were structured by the researcher based on the literature review and purpose of the study. The KSEQ consisted of three sections [A, B and C]. Section A elicited information on personal data of the respondents. Section B consisted five items which was designed to seek answers on students' level of knowledge of sexuality education and section C contains perceived items on how to enhance sexuality education among students.

The face-validity was established by giving the instrument to three experts who critically examined and modified the instrument before using it for this study. Reliability of the instrument was done using spearman's Brown rank correlation formula. The index value was 0.63. Frequencies and percentages were used to answer research questions. In this study,



0 -40 per cent was interpreted as low, 41 -60 per cent as moderate, 61 – 80 per cent as high and 81 per cent and above as very high (Ali, 2018)

Table 1: Students' Knowledge of Sexuality education (n=232)

S/ N	Item statement	No		Yes		Decision
		f	%	f	%	
4.	Sexuality education is the process of acquiring knowledge and information about human sexuality	225	97.0	7	3.0	VH
5.	I got my first sexual health information from my parents	182	78.4	50	21.6	H
6.	The school authorities organize programs to enlighten students on the importance of sexuality education	202	87.1	29	12.5	VH
7.	Lecturers of school of health have introduce the students to sexuality education, thus creating enough awareness	180	77.6	51	22.0	H
8.	School health technology curriculum (course) adequately expose students to human sexuality, its dos and don'ts	202	87.1	30	12.9	VH
Overall (%)			85.44		14.4	VH

Key: **VH** = Very High; **H** = High; **M** = Moderate; **L** = Low

Table 1 shows that the overall percentage of student's knowledge of sexuality education was very high (95.44%). The findings implies that all the students through dispositions to learning experiences according to the institution's curriculum have improved in the level of knowledge on sexuality education. This shows that health institution discusses sexuality issues without cultural restrictions.



Table 3: Enhancement Strategy for Sexuality education Knowledge among the Students (n = 232)

S/ N	Item statement	No		Yes		Decision
		f	%	f	%	
1.	Provision of accurate information about human sexuality and its benefits	221	95.3	11	4.7	VH
2.	Sexuality education can be improved by encouraging the need for abstinence	198	85.3	34	14.7	VH
3.	Appropriate sexual health information in a safe environment and at early stage will be of great help	185	79.7	47	20.3	VH
4.	Appropriate development of communication skills on refusal, self-defense and negotiation approaches	191	82.3	41	17.7	VH
5.	Sexuality education should be taught in schools by trained health educators	191	82.3	41	17.7	VH
6.	Sexuality education should be added to all the school curriculum	187	80.6	45	19.4	VH
7.	Online resources on sexuality education should be made available to every student	211	90.9	21	9.1	
Overall (%)			85.2		14.8	VH

Key: **VH** = Very High; **H** = High; **M** = Moderate; **L** = Low.

Table 3 shows that the overall percentage of how to enhance sexuality education knowledge among the students was very high 85.2 per cent. The data implies that sexuality education knowledge can be enhanced among students (95.3%) by providing accurate information about human sexuality and its benefits. It also shows that sexuality education knowledge can be improved by making online resources available to every student (90.9%). It can also be improved by encouraging the need for abstinence (85.3%). The result also shows that sexuality education can be improved by assisting students to develop skill in communication, refusal, self-defense, negotiation and by also relying on participatory teaching method implemented by trained health educators (82.3%). The result also revealed that sexuality education knowledge can be improved by offering age and culturally appropriate sexual health in a safe environment and at early stage (79.7%).

Discussion

The study was to determine the level of sexuality education knowledge possessed by students of school of health technology. The findings of the study revealed that students of school of health technology have high knowledge of sexuality education through their curriculum (courses) which adequately exposed them to acquire human sexuality, its dos and don'ts which attracted the highest number of responses (87.1%). It revealed that those students who had very good facts about HIV/AIDS were fully aware of the dangers of wanton sexual activities. The finding was not expected. The findings contradict Regina



(2015) who reported that students of tertiary institution have low level of knowledge of sexuality education. The present result maybe as a result of area of the study and gap in years of the two research findings. The findings of this study was in consonant with World Health Organization (2022) and Nneke (2019) which stated that knowledge of HIV/AIDS was high among adolescents and adults. The high level of knowledge according to World Health Organization (2022), can only be as a result of provision of effective and efficient sexuality education, either formally or informally.

The last objective of the study was to determine how to improve sexuality education knowledge among the students of school of health technology through enhancement strategies. The finding revealed that sexuality education knowledge can be improved by providing accurate information about human sexuality and its benefits. The finding of this study supports the findings of a study carried out by Regina (2015) which revealed that our cultural values and parental-influences have an overpowering impact on students, with 1168 respondents representing 73 per cent of the total responses agreed to this view that sexuality education for students should be continuous and with comprehensive and attainable enhancement strategies or measures, while 432 respondents representing 27 per cent of the total responses disagreed. This shows that irrespective of high level of knowledge of sexuality education among students of schools of health technology, there is also need to enhance it continuously. Sule (2015) asserted that enhancement or improvement strategies for sexuality education should be encouraged. This is because students are disposed to learn negative things from internet and peer groups. Ugwu (2017) supported the findings that enhancement strategies or measures play vital roles in curbing menace of sexual risk behaviours among youths, students inclusive. The sexuality education enhancement strategies aimed at improving sexuality education knowledge among students through provision of appropriate approaches capable of influencing students positively in all matters related to human sexuality and reproductive health.

Conclusion

Based on the results of the findings, the following conclusions were drawn that knowledge of sexuality education possessed by the students of schools of health technology was very high. The enhancement strategies of sexuality education knowledge among the students of schools of health technology was also very high and would be of immense benefit to the students, adolescents, adults, government and the general public.

Recommendations

Based on the findings of the study, the discussion and conclusions drawn. The followings recommendations were made:

1. Sexuality education as a topic of learning should be well emphasized and taken serious to enable students participate effectively and efficiently.
2. Sexuality education should be introduced as a compulsory topic of study in both secondary and tertiary institutions of learning to enable students acquire salient information on human sexuality and reproductive health.



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