

Dynamics of Sex Education and Trending Sexual Behaviours among Secondary Students in Delta State, Nigeria

Dr. Morrison Umor Iwele¹, Dr. Chinedu Ogadi², Dr. Peter Olorunmowaju Ajayi³

^{1,2}Department of Educational Foundations School of Education Federal College of Education
(Technical), Asaba, Delta State

³Department of Educational Psychology and Measurement and Evaluation School of Education Federal
College of Education (Technical), Asaba, Delta State

DOI: <https://dx.doi.org/10.47772/IJRISS.2025.90400267>

Received: 04 April 2025; Accepted: 08 April 2025; Published: 10 May 2025

ABSTRACT

The study examined the dynamics of sex education and trending sexual behaviours among secondary school students in Delta State, Nigeria. This was prompted by the conservative nature of the Nigerian society on sexual issues and the emerging sexual behaviours and practices such as LGBTQ oriented sexual activities and the need to guide students properly on sexual behaviours and sexualities. The study adopted the descriptive survey design. The population of the study comprised all students in public secondary schools in Delta State. A sample size of 600 junior secondary school students was selected from 12 public secondary schools in Delta State. The multistage sampling techniques of cluster, quota, purposive, and random sampling techniques were used for the selection of the respondents. The three Senatorial Districts in the State constituted three clusters and from each of the clusters, four schools were selected; one school from a local government area selected through the random sampling technique. The respondents (actual sample) were selected through random sampling technique. The instruments for data collection were a 37-item structured questionnaire of a four-point rating scale titled: "The Dynamics of Sex Education and Trending Behavioural Practices among Secondary Schools Students Questionnaire (DSETBPASSQ), and a 24-item structured Focus Interview Guide titled: Sex Education and Trending Behavioural Practices among Secondary Schools Students Interview Guide (SETBPASSIG). The instruments were validated by two experts while the reliability was established through a trial test by which an index value of .84 was attained. 600 copies of the instrument were administered to the respondents by the researchers with the help of three guided research assistants. The on-the-spot collection method was used to enhance the return rate while 578(96%) copies were retrieved. Descriptive statistics of mean scores and standard deviation were used for data analysis. Findings from the study revealed among others that students have some levels of awareness and knowledge of the dynamics of sexual behaviours but are not adequately taught sex education in schools as students (males and females) do not have adequate awareness/knowledge about sex education as they lack courage and knowledge in taking decisions on consent and personal boundaries, making informed decision about sexual behaviour, and become aware of the risks of unprotected sex. The study recommended among others that the Federal and the Delta State Ministry of Education should ensure the incorporation of comprehensive sex education (CSE) in school curricula to integrate age-appropriate, culturally sensitive, and research-based sex education into the secondary school curriculum in order to address contemporary sexual behaviours, including LGBTQ topics, while promoting responsible decision-making. It also recommends that a comparative studies of public and private secondary schools should be conducted to determine the level of knowledge/awareness of sex education and sexual behaviour and practices among students in Delta State.

Keywords: Sex education, sexuality, LGBTQ, sexual behaviour, and junior secondary school students.

INTRODUCTION

Background to the Study

Education is universally recognized as a fundamental tool for transmitting societal values across generations, ensuring not only the sustainability of humanity but also fostering harmonious social interactions. This process

involves the deliberate transfer and regulation of values that shape human behavior, one of which is sexuality. While sexual behavior is a biological attribute of all animals, within human societies, it carries deeper moral, cultural, and emotional significance. However, with the rapid transformation of modern societies, perspectives on sex and sexual conduct have evolved, often varying across racial, cultural, and religious lines. Some individuals commercialize sex, while others uphold it strictly as a means of procreation or a source of emotional and physical intimacy. These diverse perspectives have given rise to a spectrum of sexual behaviors and relationships, each interpreted differently depending on individual beliefs, religious doctrines, and cultural traditions.

Historically, sex has been a sensitive and often taboo subject, especially in conservative societies such as those in Africa and Asia. Within these regions, sexual matters—including reproductive health—have long been perceived as topics exclusive to adults, requiring the highest level of discretion. This cultural hesitancy toward open discussions on sexuality has had profound social and health consequences, particularly among youth and adults who, due to misinformation or lack of knowledge, face preventable issues such as sexually transmitted infections (STIs) and unintended pregnancies. According to Reiss (2019), the initial goal of sex education was to equip parents with the knowledge needed to educate their children about various aspects of sexuality—biological, psychological, emotional, social, and even spiritual. Over time, this responsibility extended into formal education systems, where sex education was introduced within the framework of hygiene instruction. Reiss further highlighted that early school-based sex education aimed to instill values such as self-respect, self-control, and modesty in young girls, while boys were warned about the "temptations" associated with factory and workshop environments—contexts where sexual exploitation and misconduct were potential risks.

In Africa, however, traditional perspectives on sex have historically impeded the formalization of sex education in schools. Many societies regard sexuality as a sacred and highly private matter, making discussions on the topic uncomfortable, particularly when directed at children and teenagers. This discomfort is reflected in widespread resistance to integrating comprehensive sex education into school curricula, often driven by the belief that such education promotes sexual experimentation among students (Bordia, 2022). A particularly contentious issue is the inclusion of discussions on Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) identities, which remains a subject of intense debate among African parents, educators, and policymakers.

Despite these challenges, sex education, also referred to as sexuality education—is not merely about discussing sexual activity. It plays a crucial role in equipping young people with the knowledge and skills necessary to navigate their sexual health responsibly. By fostering an understanding of sex, sexuality, and their broader implications, sex education empowers young individuals to make informed choices that safeguard their well-being. Moreover, the recognition of children's right to access age-appropriate sex education is increasingly gaining global acceptance (Musa, 2020). A well-structured and culturally sensitive approach to sex education can bridge the knowledge gap, counter harmful myths, and ultimately contribute to healthier societies.

Sex education plays a pivotal role in shaping adolescents' understanding, attitudes, and behaviors regarding sexuality, reproductive health, and overall personal development. In Nigeria, particularly in Delta State, discussions surrounding sex education remain highly contentious due to deep-rooted cultural and religious beliefs that discourage open conversations about sexual matters (Adepoju, 2021). This societal hesitance, however, contrasts sharply with the rapid evolution of global sexual trends, which are increasingly influenced by social media, peer interactions, and the absence of comprehensive parental guidance (Okonofua et al., 2020).

As adolescents gain greater access to digital platforms, their exposure to various sexual narratives, both informative and misleading, continues to grow. This exposure often shapes their perceptions and practices, sometimes leading to risky behaviors such as early sexual initiation, teenage pregnancies, and the spread of sexually transmitted infections (STIs) (Adebayo & Oke, 2022). Despite governmental efforts to integrate sex education into the national curriculum, significant gaps persist in its effective delivery, contributing to widespread misinformation and increasing vulnerability among students (Eze & Omeje, 2019).

To bridge this gap, it is imperative to examine the evolving landscape of adolescent sexual behavior and the role of sex education in influencing these trends. By gaining deeper insights into these dynamics, stakeholders, including educators, policymakers, and parents, can design and implement more responsive, evidence-based programmes that align with the realities of modern adolescents in Delta State.

Reiss (2019) posited that sex education was initially aimed at helping parents to enlighten their children on sexualities (biological, psychological, physical, erotic, emotional, social, or spiritual feelings and behaviours). Reiss stressed that the subject extended to the formal school system where sex education took place in the context of 'hygiene'. He emphasized that the introduction of sex education in the formal school system was also designed to help senior girls being provided with instruction on such topics as 'self-reverence, self-control and true modesty', and to boys, on leaving schools, being given talks on the 'temptation of factory and workshop life', with special reference to sex. However, sex education in some parts of the world has expanded to include Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) issues, a new dimension of sexual behaviour which was initially criminalized but now legalized by some countries. In Africa, this perception, which is pervasive among parents and teachers, is particularly strong concerning sex education oriented towards Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) issues.

The dynamics of sexualities have brought into grammar some novel concepts that trigger serious debates on the legalities and illegalities of such sexual activities and behaviours. The LGBTQ acronym stands for Lesbian, Gay, Bisexual, Transgender, and Queer (or Questioning). It is a broad term used to encompass a diverse range of sexual orientations and gender identities. The LGBTQ community encompasses individuals who identify as lesbian, gay, bisexual, transgender, queer, or questioning, as well as those who identify with other gender and sexual minorities. This diverse community faces unique challenges related to social acceptance, legal rights, healthcare disparities, and mental health issues. LGBTQ individuals may experience discrimination, stigma, and prejudice based on their sexual orientation or gender identity (American Psychological Association, 2020). These concepts, though sexually related, mean different sexual behaviours and attributes (World Health Organization, 2016). For instance, a lesbian is a woman who has a romantic and/or sexual orientation toward women. The word stands for a woman who is emotionally, romantically, or sexually attracted to other women. It is strange for a woman to have a sexual emotional attraction or attachment to another woman considering the biological features that characterise humans and sexes. However, it is a common practice now with legal backing for women to marry other women legitimately and legally. The legality and legitimacy attached to it by some countries and sociocultural acceptance of the practice do not give it global acceptance as some countries, cultures, and religions consider as sacrilege (Pew Research Center, 2021).

On the other hand, a gay person refers to a man who is attracted to men in a romantic, erotic and/or emotional sense. (Vanderbilt University, 2023). A bisexual person is an individual who experience sexual, romantic, physical, and/or spiritual attraction to more than one gender, not necessarily at the same time, in the same way, or to the same degree. On the other hand, a transgender person is an individual whose sense of personal identity or gender does not correspond to the sex they were assigned at birth or does not conform to gender stereotypes. Finally, the term queer is a multi-faceted word that is used in different ways and means different things to different people. (i) It is an attraction to people of many genders. (ii) It refers to people who do not conform to cultural norms around gender and/or sexuality. (iii) It refers to all non-heterosexual people (Vanderbilt University, 2022). In recent times, gay marriage occupies a significant space in the socio-cultural and marital atmosphere of many countries which generates a lot of debate as some see it as abnormal while others welcome it with vigour and passion. The question is, are this part of sex education? If yes, of what value is it to the education of young learners in secondary education?

Sex education is more than explaining sex and sexuality. According to Haffner, Debra, and Kate (2005), the primary goals of sex education are:

1. To give people information that would make young people receive reliable and potentially life-saving information from trusted sources about pregnancy and sexually transmitted infections.
2. Provide young people with the right attitudes, values, and insights about sexuality: Adolescents learn to articulate their sexual attitudes in the context of the expressed values of their families and religious

communities, their relationships with family members, and their responsibilities to their families, religious communities, and others.

3. Educate people on relationships and interpersonal skills: - The development of interpersonal skills in the areas of communication, decision-making, assertiveness, and peer refusal.
4. Guide young people on responsible decision-making: - Sex education programmes provide youth with the skills and knowledge they need to develop their own moral capacity.

These goals became very necessary as sex, though naturally designed, is abused by individuals, the young the old, and even children. The abuse manifests in the commercialization of the act, rape, incest, same-sex, oral sex, and carnal sex among others. The resultant effect in most cases is unwanted pregnancies resulting in abortions, mortality and morbidity, and contraction of Sexually Transmitted Diseases (STD). All these negatively the society as development depends on the health of the people.

Sex education plays a critical role in shaping young people's perspectives on sexuality, directly influencing both their present and future sexual behaviors. Extensive empirical research over the past two decades supports this assertion, with findings indicating that comprehensive sex education, especially when introduced during childhood, serves as a protective factor against early and frequent sexual activity (Boskey, 2023). By equipping young individuals with accurate knowledge about sexual health, relationships, and personal boundaries, sex education fosters informed decision-making and promotes responsible sexual behaviors.

Despite its proven benefits, sex education remains a contentious topic, particularly in deeply conservative and religious societies across Africa and Asia. The resistance is even stronger when it comes to introducing sex education at the junior secondary school level, where students are often perceived as too young to engage in discussions about sexuality. This reluctance is further amplified when the curriculum includes topics related to LGBTQ identities, an area that remains socially and culturally sensitive in many regions. Given prevailing societal norms and legal restrictions, many teachers and parents shy away from addressing these issues, either out of personal beliefs or fear of community backlash.

As a result, even when sex education is incorporated into school curricula, it is often delivered selectively, reinforcing heteronormative perspectives while neglecting or misrepresenting LGBTQ issues. This limited approach can inadvertently contribute to the development of negative attitudes among students toward gender and sexual diversity. The exclusion or mischaracterization of LGBTQ topics not only deepens stigma and discrimination but also denies students, regardless of their identities, the opportunity to develop a well-rounded understanding of sexual health and inclusivity (Boskey, 2023).

Addressing these challenges requires a nuanced approach that balances cultural sensitivities with the urgent need for inclusive and evidence-based sexual health education. Policymakers, educators, and community leaders must work together to foster a more open, age-appropriate, and scientifically grounded dialogue about sexuality. By doing so, societies can empower young people with the knowledge and values necessary for making healthy, respectful, and informed choices throughout their lives.

Given the above, youths are more likely to acquire their sex education through peers, friends, relationships with the opposite sex public health educators, and to a lesser degree, relatives. Thus, the form, content, accuracy, and variety of sexual information have grown with the proliferation of a myriad of information platforms across new and traditional media (African Population and Health Research Center, 2020). This can have negative implications for their perception of sex and sexual issues resulting in negative consequences for their future wellbeing as they may likely engage in unhealthy sexual behaviours in and out of school.

Many people explain the dynamics of sexuality and trending sexual behaviour with theories of social learning to justify their take or position in the trending behaviours. For instance, the Symbolic Interactionism is a sociological framework linked to George Herbert Mead (1863–1931) and Max Weber (1864–1920). This perspective views society as being shaped by shared symbols, such as language. It suggests that individuals construct the social world through the meanings they attach to experiences and interactions, with these symbols being passed down through language (Charlotte & Saul, 2023). A key idea within symbolic interactionism is the concept of the Self, which enables individuals to assess the impact of social actions (sex

inclusive) on themselves and others. However, the theory has been criticized for overlooking the emotional aspects of the Self in social interactions.

Sexuality is one aspect of social interactions, as it is formed through mutual understanding of its associated concepts. Some of these concepts can be confusing, offensive, or misleading to certain people, as their meanings may seem unfamiliar. Despite efforts to introduce these ideas in schools through structured curricula, the intended outcomes have not yet been fully realized. This may explain why symbolic interactionists consider sexuality an important area of study. The symbolic interactionist perspective is particularly valuable in examining the social meanings of sex and gender. Sociologists argue that gender is a social construct, meaning it does not necessarily align with biological sex. Nonetheless, societal expectations strongly influence how individuals behave based on their assigned sex (Nicki, 2019). The impact of gender norms is evident in interactions between adults and infants. Gendering begins almost immediately, sometimes even before birth, as seen in the popularity of elaborate “gender reveal” parties. Once a child’s sex is identified, people begin to interact with them based on culturally defined gender expectations (Nicki, 2019). These social meanings shape various aspects of childhood, from clothing colors and toy preferences to speech patterns and self-perception. This process extends to LGBTQ identities, as the names and labels associated with them are also socially constructed.

Sexual behaviours among secondary school students have undergone significant changes over the years, shaped by the growing influence of digital media, peer dynamics, socio-economic conditions, and family structures. Adolescence is a crucial phase of self-discovery and identity formation; however, certain sexual behaviours within this demographic raise concerns about their physical, emotional, and psychological well-being (WHO, 2022). There are, undoubtedly, emerging trends in adolescent sexual behaviour, with associated risks that could be grave to students if strategic plans are not put in place for mitigation and intervention.

Research highlights emerging trends in adolescent sexual behaviours that a notable percentage of secondary school students engage in at a young age. In Nigeria, for instance, approximately 20% of adolescents have had sexual intercourse before the age of 15 (National Demographic and Health Survey, 2021). Factors contributing to early sexual initiation include inadequate parental supervision, peer influence, and unfiltered exposure to explicit digital content (UNICEF, 2023). Early sexual engagement increases the risk of unintended pregnancies, STIs, and emotional distress, necessitating early intervention through education and parental involvement.

Economic hardship has led some students to engage in transactional sex, where sexual favours are exchanged for money, material gifts, or academic advantages. This phenomenon is especially prevalent among female students who enter relationships with older men, commonly known as “sugar daddies” (Toska, et al., 2015). The consequences of this behaviour include unintended pregnancies, sexually transmitted infections (STIs), exposure to sexual exploitation, and significant psychological distress (WHO, 2022). Addressing this issue requires economic empowerment programmes for adolescents, mentorship initiatives, and strengthened child protection policies. This becomes necessary as children could be exposed to unguided use of pornography and risky sexual experimentation.

The digital era has granted adolescents unprecedented access to explicit online content, leading to increased pornography consumption. Exposure to such content has been linked to distorted perceptions of sexual norms and risky sexual experimentation, including unprotected sex and multiple sexual partnerships (Resnick & Bearinger, 2021). These behaviours elevate the risks of STIs, including HIV, and contribute to unrealistic expectations of intimate relationships. Enhancing digital literacy and incorporating responsible sexual education can help mitigate these risks, some of which are due to peer influence and liberal sexual norms that are digital-oriented.

Peer influence and exposure to liberal sexual norms, especially in urban settings, contribute to the rise in multiple sexual partnerships among secondary school students (Odetola et al., 2023). Engaging in multiple sexual relationships increases vulnerability to STIs and emotional instability, affecting adolescent mental health and future relationship stability (UNAIDS, 2023). Reinforcing relationship education and fostering self-esteem in adolescents can play a crucial role in reducing this trend.

An increasing number of students are exploring same-sex relationships, influenced by curiosity, peer interactions, and the single-gender school environment (Smith et al., 2022). While same-sex attraction is a natural part of sexual identity for some individuals, a lack of proper education on sexual health increases vulnerability to misinformation and health risks such as STIs (CDC, 2023). Implementing inclusive sexual education programmes that address diverse sexual orientations with factual information is critical, especially, in curbing same sex relationship and use of emergency contraceptives and unsafe abortions.

Fear of pregnancy has led many female students to rely on emergency contraceptives, often without proper medical guidance (Guttmacher Institute, 2022). In cases of unintended pregnancies, unsafe abortion practices remain a serious concern, particularly in regions with restricted access to legal and safe abortion services (WHO, 2023). Expanding access to reproductive health education and youth-friendly health services can help adolescents make informed decisions and reduce the prevalence of unsafe practices. This can be enhanced through integration of appropriate intervention strategies.

Given the rise in high-risk sexual behaviours among adolescents, a holistic approach is essential to promote safer practices and better health outcomes. Schools must integrate age-appropriate, evidence-based sexual education programs that provide students with comprehensive sexuality education (CSE) for accurate information on sexual health, relationships, and responsible decision-making (UNESCO, 2022). These programs should address misconceptions and promote safe practices. Healthy partnership with parents can promote healthy sexual behavior among students.

Parents play a crucial role in shaping adolescent behaviours. Encouraging open, non-judgmental discussions about sexual health can help dispel myths and provide adolescents with a reliable source of guidance (Resnick & Bearinger, 2021). Parenting workshops and resources on effective communication strategies should be widely available to complement access to adolescent-friendly health services. Governments and NGOs should ensure that secondary school students have easy access to reproductive health services, including counseling, STI screening, and contraceptive options (WHO, 2022). These services must be confidential, youth-friendly, and free of stigma to encourage utilization. However, these steps would be ineffective if strategies to promote digital media awareness and regulation are not put in place and adequately implemented.

Regulating adolescent exposure to explicit online content is critical. Some schools are exposed to unguided media usage thereby exposing children to different social media sites that endanger the emotional and psychological state of mind of the students who could desperately be exploring sexualities. As students become desperate to learn new sexual behaviours, they could learn it differently if not formally taught them. Schools, policymakers, and parents, therefore, should advocate for stronger digital literacy initiatives, equipping students with skills to navigate online content responsibly (UNICEF, 2023). Social media platforms should also be held accountable for enforcing age-appropriate content restrictions.

The evolution of adolescent sexual behaviours presents both challenges and opportunities for intervention. A multi-faceted approach that combines education, parental involvement, accessible health services, and digital media regulation is essential for fostering healthier sexual attitudes and behaviours. By implementing strategic interventions, societies can create a safer and more informed environment for secondary school students, ultimately promoting their long-term well-being and development. But how adequate and inclusive is sex education taught in secondary schools to address the dynamics and trending sexual behaviour among secondary school students remains a challenges. This study, examined the dynamics of sex education and the trending practices such as Lesbian, Gay, Bisexual, Transgender, and Queer (LGBT) dimension of sexual orientation among Junior Secondary Schools in Delta State.

Statement of the Problem

Sex education remains a contentious yet indispensable component of adolescent development, particularly in Nigeria, where deep-rooted socio-cultural and religious beliefs shape conversations about sexuality. In Delta State, secondary school students are increasingly exposed to diverse sexual behaviors due to globalization, widespread digital media influence, and shifting social norms. However, the lack of a standardized, well-

structured sex education curriculum has resulted in inconsistent knowledge, widespread misinformation, and engagement in risky sexual behaviors among adolescents.

The rise of emerging sexual trends, such as premarital sex, multiple sexual partnerships, sexting, and the growing awareness of LGBTQ identities, underscores the limitations of existing sex education programs in addressing contemporary realities. Many students rely on informal and often misleading sources—peer discussions, social media, and even explicit online content—for sexual knowledge, while others remain uninformed due to societal taboos and parental reluctance. This knowledge gap not only exacerbates issues such as teenage pregnancies and the spread of sexually transmitted infections (STIs) but also contributes to emotional distress, low self-esteem, and poor decision-making regarding sexual health.

Furthermore, while LGBTQ discourse has gained prominence on a global scale, Nigeria's predominantly conservative landscape continues to stigmatize and, in some cases, criminalize non-heteronormative identities. This cultural resistance creates an internal struggle for adolescents who may experience a conflict between personal identity and societal expectations, exposing them to mental health challenges, bullying, and discrimination within their school environments. The absence of inclusive and comprehensive sex education further alienates these students, leaving them vulnerable to misinformation and psychological distress.

Given these evolving dynamics, it is crucial to critically assess how sex education is currently implemented in Delta State's secondary schools, evaluating both its effectiveness in addressing contemporary sexual behaviors and its inclusivity in representing the lived realities of students. A data-driven and culturally sensitive approach to reforming sex education policies can bridge existing gaps, promote responsible sexual decision-making, and foster a more supportive and informed environment for adolescents navigating their sexual and emotional well-being.

Purpose of the Study

This study aimed to examine the impact of sex education on junior secondary school students' sexual behaviour in relation to lesbian, gay, bisexual, transgender, and queer (LGBTQ). Specifically, the aimed to:

1. Determine the level of awareness/knowledge of sex education among secondary school students in Delta State?
2. Find out the trending sexual behaviors exhibited by secondary school students in Delta State?
3. Find out the factors that influence the sexual behaviors of secondary school students (e.g., peer pressure, social media, parental guidance, or religious beliefs)?
4. Determine the extent to which sex education influences junior secondary school students' tendency to engage in LGBTQ-oriented sexual behaviour in Asaba, Delta State.

Research Questions

The following research questions were raised to guide the study:

1. What is the level of awareness and knowledge of sex education among secondary school students in Delta State?
2. What are the trending sexual behaviors exhibited by secondary school students in Delta State?
3. What factors influence the sexual behaviors of secondary school students (e.g., peer pressure, social media, parental guidance, or religious beliefs)?
4. To what extent does sex education influence junior secondary school students' sexual behaviour in Delta State?

METHODOLOGY

The study was conducted in Delta State, Nigeria. Delta State is a state in the South South Geopolitical Zone of Nigeria. It is an oil producing area which attracts people from different sociocultural and religious backgrounds with diverse views about sex education. Hotel business thrives in the area with LGBTQ-Oriented

people prominently residing in the different cities in the state. This seems to influence the attitude of youths toward trending sexual practices such as LGBTQ sexual behaviour and practices. The study adopted a descriptive survey research design. Four research questions and three research hypotheses guided the study. The population of this study consisted of all junior secondary students (male and female) in public secondary in Delta State. According to the Delta State Ministry of Basic and Secondary Education (2023), there are 472 public secondary schools in Delta State spread across the three senatorial districts in the State.

A sampled size of 600 respondents were selected for the study. The 600 respondents were selected from twelve (12) schools. The schools were first grouped into three clusters in line with the senatorial districts of Delta Central, Delta North and Delta South Senatorial Districts. From each of the senatorial district, four (4) schools were selected through the purposive sampling technique to ensure inclusiveness, equity, and parity. From each of the schools, a total of 50 students were selected for the study. The simple random sampling technique was used for selection. Thus, 25 males and 25 females (all students) were selected for the study. The use of random sampling provided every member of the group the opportunity to be selected but only those who met the selection criteria were selected and used for the study. . The instruments for data collection were a 37-item structured questionnaire of a four-point rating scale titled: “The Dynamics of Sex Education and Trending Behavioural Practices among Secondary Schools Students Questionnaire (DSETBPASSQ), and a 24-item structures focus interview guide titled: Sex Education and Trending Behavioural Practices among Secondary Schools Students Interview Guide (SETBPASSIG). The instrument were validated by three experts and was trail tested through the use of Split half method to determine the reliability level. An index number of 8.4 was attained. The researcher, with the support of three guided research Assistants, administered 600 copies of the instrument to the respondents while 578(96%) copies were returned. Descriptive statistics of, mean and standard deviation were used for data analysis and interpretation while the t-test was used for the test of hypotheses.

RESULTS

Research Question One: What is the level of awareness and knowledge of sex education among secondary school students in Delta State?

Table 1: Mean and Standard Deviation of Respondents’ Rating on the Level of Awareness/Knowledge of Sex Education among Secondary School Students in Delta State.

S/N	Item	Male			Female		
		x	SD	Decision	x	SD	Decision
	Students level of awareness/knowledge of sex education’						
1	I have heard about sex education before	2.40	1.11	Disagree	2.43	1.13	Disagree
2	I have adequate knowledge of sexual education	2.36	1.15	Disagree	2.37	1.14	Disagree
3	I first heard about sex education in the school	2.20	1.10	Disagree	2.20	1.09	Disagree
4	I have knowledge of human right and sexuality	2.29	1.02	Disagree	2.32	1.04	Disagree
5	I am aware of values, attitudes and insights about sexuality	2.68	1.01	Agree	2.64	1.03	Agree
6	I have knowledge of sexual relationship and interpersonal skills	2.17	1.10	Disagree	2.21	1.12	Disagree
7	I am aware of my responsibility regarding sexual relationship	2.67	1.19	Agree	2.66	1.18	Agree
8	I am well aware of sexual intercourse and use of contraceptives	2.76	1.15	Agree	2.77	1.14	Agree

9	I have knowledge of the appropriate age for sexual relationship	2.65	1.11	Agree	2.68	1.12	Agree
10	I have good knowledge about Lessons on LGBTQ	2.29	1.03	Disagree	2.32	1.03	Disagree
11	I have good knowledge about human reproduction and body changes	2.65	1.11	Agree	2.63	1.09	Agree
12	I have good knowledge of puberty and body changes	2.71	1.09	Agree	2.68	1.19	Agree
13	I have good knowledge about relationships and responsible behaviour	2.20	1.10	Disagree	2.37	1.14	Disagree
14	I have adequate Knowing on how to prevent pregnancy and STDs	2.17	1.10	Disagree	2.21	1.12	Disagree
	Grand Mean Score/Standard deviation	2.44	1.09	Disagree	2.46	1.11	Disagree

Results in Table 1 reveal that respondents (male) agree with items 5(2.68), 7(2.67), 8(2.76), 11(2.65), and 12(2.71) with mean scores significantly higher than 2.50 the criterion mean. The results also reveal that the male respondents disagree with items 1(2.40), 2(2.36), 3(2.20), 4(2.29), 6(2.17), 10(2.29), 13(2.20) and 14(2.17), with mean scores significantly less than 2.50 the criterion mean. The grand mean for the male column is 2.44 with a grand standard deviation of 1.09.

On the other hand, respondents (female) agree with items 5(2.64), 7(2.66), 8(2.77), 11(2.63), and 12(2.68) with mean values significantly higher than 2.50 the criterion mean. However, they Disagree with items 1(2.43), 2(2.37), 3(2.20), 4(2.32), 6(2.21), 10(2.32), 13(2.37) and 14(2.21) with mean values significantly less than the 2.50 criterion mean. The results show that both male and female respondents agree and disagree on the same items showing a parity on the level of awareness and knowledge of students on the dynamics and knowledge of sex education and sexual behaviour of students. The results further indicate that students are not adequately taught sex education in schools as students (males and females) do not have adequate awareness and knowledge about sex education and sexuality in the school, have no adequate knowledge of human right and sexuality, sexual relationship and interpersonal skills, lessons on LGBTQ, relationships and responsible behaviour, and knowing on how to prevent pregnancy and STDs. The results also indicate that respondents, males and females, are aware of the values, attitudes and insights about sexuality, responsibility regarding sexual relationships, have had sexual intercourse and use of contraceptives, have knowledge of the appropriate age for sexual relationship, good knowledge about human reproduction and body changes, and have good knowledge of puberty and body changes.

Research Question Two: What is the trending sexual behaviors exhibited by secondary school students in Delta State?

Table 2: Mean and Standard Deviation of Respondents' Rating on the Trending Sexual Behaviors Exhibited by Secondary School Students in Delta State.

S/N	Item	Male			Female		
		X	SD	Decision	x	SD	Decision
	The following are trending sexual behaviour among students.						
15	Petting (touching private parts)	2.59	1.12	Agree	2.60	1.11	Agree
16	Regular sexual intercourse	2.70	1.10	Agree	2.63	1.09	Agree
17	Oral sex	2.19	1.07	Disagree	2.22	1.09	Disagree
18	Sexing (sending sexual messages or	2.68	1.17	Agree	2.68	1.19	Agree

	images)						
19	Use of sex toys	2.71	1.09	Agree	2.68	1.08	Agree
20	Multiple sex partners	2.16	1.07	Agree	2.27	1.12	Agree
21	Same sex relationship	2.83	1.11	Agree	2.77	1.07	Agree
22	Anal sex	2.42	1.03	Disagree	2.38	1.07	Disagree
23	Commercial sex activities	2.65	1.11	Agree	2.64	1.14	Agree
24	Sugar relationships (dating older adults for money/gifts)	2.76	1.09	Agree	2.68	1.19	Agree
25	Use of drugs/alcohol to enhance sexual experience	2.64	1.10	Agree	2.77	1.07	Agree
26	LGBTQ+ relationships	2.24	1.07	Disagree	2.42	1.03	Disagree
27	Unprotected sexual relationships	2.60	1.09	Agree	2.65	1.11	Agree
28	Masturbation	2.77	1.09	Agree	2.63	1.09	Agree
	Grand Mean Score/Standard deviation	2.50	1.09	Agree	2.57	1.10	Agree

Results in Table 2 reveal that respondents (male) agree with all the items except items 3(2.19), 22(2.42), and 26(2.24) with mean scores significantly less than 2.50 the criterion mean. The mean scores for all the other items range between 2.59 and 2.83, values that are significantly higher than the 2.50 criterion mean. The grand mean for the segment is 2.50 with a grand standard deviation of 1.09.

On the other hand, respondents (female) also align with their male counterpart to agree with all the items, except items 3(2.22), 22(2.38), and 26(2.42) with mean scores significantly less than 2.50 the criterion mean. The mean score for all the other items range between 2.63 and 2.77, values that are significantly higher than 2.50 the criterion mean. The grand mean for results is 2.57 with a grand standard deviation of 1.10. The results indicate that, some sexual behaviours are trending in the society among students and that these sexual behaviours include petting (touching private parts), regular sexual intercourse, sexting (sending sexual messages or images), use of sex toys, multiple sex partners, keeps (dating older adults for money/gifts, use top drugs/alcohol to enhance sexual experience, and unprotected sexual relationships. On the other hand, the results indicate that oral sex, anal sex, and LGBTQ+ relationship are not common sexual behaviour among secondary school students in the area of the study.

Research Question 3: What factors influence the sexual behaviors of secondary school students?

Table 3: Mean and Standard Deviation of Respondents' Rating on the factors influence the sexual behaviors of secondary school students in Delta State.

S/N	Item	Male			Female		
		X	SD	Decision	x	SD	Decision
	My sexual behaviour is influenced by:						
29	friends discussions on topics related to sex	2.59	1.12	Agree	2.62	1.10	Agree
30	Pressure from friends to engage in sexual activities	2.76	1.09	Agree	2.60	1.09	Agree
31	Parents/guidance regular discussion of sexual health	2.73	1.09	Agree	2.77	1.09	Agree
32	Parental sexual relationships	2.64	1.10	Agree	2.62	1.08	Agree

33	Parents' set rules about dating and relationships	2.24	1.07	Disagree	2.25	1.08	Disagree
34	Regular access to sexual content on the social media	2.84	1.07	Agree	2.80	1.09	Agree
35	Religious sexual value system	2.78	1.05	Agree	2.77	1.13	Agree
36	Cultural sexual beliefs system	2.72	1.08	Agree	2.72	1.09	Agree
37	Personal beliefs and life goals.	2.66	1.11	Agree	2.67	1.07	Agree
	Grand Mean Score/Standard deviation	2.66	1.08	Agree	2.64	1.09	Agree

Results in table 3 reveal that respondents (male) agree with all the items as factors that influence secondary school students' sexual behaviour except item 33(2.24) with a mean score significantly less than 2.50 the criterion mean. The mean scores for all the other items range between 2.59 and 2.84, values that are significantly higher than the 2.50 criterion mean. The results also show a grand mean of 2.66 for the male students' responses with a grand standard deviation of 1.08. In the same vein, the results reveals that respondents (female students) agree with all the items except item 33(2.25) with a mean score also significantly less than 2.50 criterion mean. The mean scores for the agreed items range between 2.60 and 2.80; values that are significantly higher than the 2.50 criterion mean. The grand mean for this set of responses is 2.64 with a grand standard deviation of 1.09. The results indicate that secondary school students' sexual behaviour is influenced by: several factors which include, friends discussions on topics related to sex, pressure from friends to engage in sexual activities, parents/guidance regular discussion of sexual health, parental sexual relationships, regular access to sexual content on the social media, religious sexual value system, cultural sexual beliefs system, and personal beliefs and life goals. However, the results show that parents' set rules about dating and relationships do not significantly influence students' sexual behaviours.

Research Question Four: To what extent does sex education influence junior secondary school students' sexual behaviour in Delta State?

Table 4: Mean and Standard Deviation of Respondents' Rating on the ways sex education influences the sexual behaviors of secondary school students in Delta State.

S/N	Item	Male			Female		
		X	SD	Decision	x	SD	Decision
	The knowledge from sex education influences my sexual behaviour by:						
38	Taking decisions on consent and personal boundaries	2.78	1.09	Agree	2.83	1.07	Agree
39	Making informed decision about sexual behaviour	2.69	1.10	Agree	2.66	1.07	Agree
40	Encouraging me to delay sexual activity	2.16	1.06	Disagree	2.14	1.04	Disagree
41	Making me more curious about sex	2.34	1.15	Disagree	2.32	1.16	Disagree
42	Making me to be aware of the risks of unprotected sex	2.79	1.07	Agree	2.70	1.07	Agree
43	Giving me the courage to say "no" to sexual advances	2.20	1.11	Disagree	2.87	1.06	Agree
44	Giving me the courage to discuss sexual issues with other people	2.69	1.21	Agree	2.27	1.06	Disagree
45	Understanding body changes and emotions	2.25	1.14	Disagree	2.18	1.10	Disagree

46	Preventing me from engaging in casual sex	2.85	1.04	Agree	2.09	1.08	Disagree
47	Choosing to become the sex of my choice	1.99	1.12	Disagree	2.29	1.14	Disagree
	Grand Mean Score/Standard deviation	2.47	1.10	Disagree	2.43	1.08	Agree

Results in Table 4 reveal that respondents (male) agree with items 38(2.78), 39(2.69), 42(2.79), 44(2.69), and 46(2.85) with mean scores that are significantly higher than 2.50 the criterion mean. The results also reveal that respondents (male) disagree with items 40(2.16), 41(2.34), 45(2.25), and 47(1.99). The mean score for these set of items range between 1.99 and 2.34 and are significantly less than 2.50 the criterion mean. The grand mean score for the segment is 2.47 and is significantly less than 2.50 with a grand standard deviation of 1.10.

On the other hand, the results reveal further that the respondents (female students) agree with items 38(2.83), 39(2.66), 42(2.70), and 43(2.87) with mean scores significantly higher than 2.50 the criterion mean. The results also reveal that respondents (female respondents) disagree with items 40(2.14), 41(2.32), 44(2.27), 45(2.18), 46(2.09) and 47(2.29) with mean scores significantly less than 2.50 the criterion mean for the determination of a mean score as agree or disagree. The results reveal a grand mean of 2.43 and a grand Standard deviation of 1.08. With the grand mean for both male and female students less than 2.50 benchmark, the results indicate that male and female students agree that knowledge of sex education can help students in taking decisions on consent and personal boundaries, making informed decision about sexual behaviour, and to become aware of the risks of unprotected sex. Both groups also disagree that the knowledge of sex education will encourage them to delay sexual activity, make them become more curious about sex, understand their body changes and emotions, and choose to become the gender of their choice. However, both groups are at variance on sex education giving them the courage to say “no” to sexual advances, discuss sexual issues with other people, and preventing them from engaging in casual sex.

Analysis of Focus Group Interview on Secondary School Students’ Knowledge of trending sexual behaviors exhibited among them (students) in Delta State

Table 5: Frequency and Percentage Distribution of Respondents’ Rating on Secondary School Students’ Knowledge of trending sexual behaviors exhibited among them (students) in Delta State. **Note:** HE stand for High Extent while LE stands for Lo Extent

S/N	Item	Male Students		Female Students	
		X	Decision	X	Decision
	As students, the following are sexual behaviours that are common among you in schools.				
1	Petting (touching private parts)	61%	HE	66%	HE
2	Regular sexual intercourse	73%	HE	71%	HE
3	Oral sex	39%	LE	41%	LE
4	Sexting (sending sexual messages or images)	79%	HE	81%	HE
5	Use of sex toys	72%	HE	74%	HE
6	Multiple sex partners	44%	LE	48%	LE
7	Same sex relationship	69%	HE	77%	HE
8	Anal sex	46%	LE	47%	LE
9	Commercial sex activities	71%	HE	83%	HE
10	Sugar relationships (dating older adults for money/gifts)	73%	HE	86%	HE
11	Use of drugs/alcohol to enhance sexual experience	79%	HE	84%	HE

12	LGBTQ+ relationships	44%	LE	49%	LE
13	Unprotected sexual relationships	87%	HE	91%	HE
14	Masturbation	82%	HE	85%	HE
	Grand Mean Score/Standard deviation	64.21%	HE	70.21%	HE

Results in Table 5 reveal that respondents (male) at the focus group interview agreed to a high extent with item 1(61%), 2(73%), 4(79%), 5(72%), 7(69%), 8(46%), 9(71%), 10(73%), 11(79%), 12(44%), 13(87%), and 14(82%) with percentages significantly higher than average for 50%. It also reveal that that respondents (male) agree to a low extent with 3(39%), 6(44%), 8(46%), and 12(44%) with percentages significantly less than 50%. The grand percentage for the unit is 64.21% and is significantly higher than the average percentage of 50%. On the other hand, respondents (female) agreed with 1(66%), 2(71%), 4(81%) 5(74%), 7(77%), 9(83%), 10(86%), 11(84%), 13(91%), and 14(85%) with percentages significantly higher than 50%. It also revealed that participants agree to a low extent with 3(41%), 6(48%), 8(47%), and 12(49%) as the percentages are significantly less than 50% the average mean. The results indicated that that sexual behaviours like petting (touching private parts), regular sexual intercourse, sexting (sending sexual messages or images), use of sex toys, multiple sex partners, keeps (dating older adults for money/gifts, use top drugs/alcohol to enhance sexual experience, and unprotected sexual relationships and very common among secondary school students while oral sex, anal sex, and LGBTQ+ relationship are not common sexual behaviour among secondary school students in the area of the study.

Analysis of Focus Group Discussion on the extent sex education influences junior secondary school students' sexual behaviour in Delta State

Table 6: Frequency and Percentage Distribution of Respondents' Rating on the extent Sex Education influence the sexual behaviors of secondary school students in Delta State.

S/N	Item	Male Students		Female Students	
		X	Decision	X	Decision
	As a student, the following factors influence my sexual behaviours:				
15	Taking decisions on consent and personal boundaries	8%	HE	83%	HE
16	Making informed decision about sexual behaviour	69%	HE	66%	HE
17	Encouraging me to delay sexual activity	33%	LE	46%	LE
18	Making me more curious about sex	47%	LE	41%	LE
19	Making me to be aware of the risks of unprotected sex	79%	HE	70%	HE
20	Giving me the courage to say "no" to sexual advances	39%	LE	87%	HE
21	Giving me the courage to discuss sexual issues with other people	72%	HE	47%	LE
22	Understanding body changes and emotions	43%	LE	49%	LE
23	Preventing me from engaging in casual sex	85%	HE	41%	LE
24	Choosing to become the sex of my choice	32%	LE	45%	LE
	Grand Mean Score/Standard deviation	50.60%	HE	57.50%	HE

Results in Table 6 revealed that respondents (male) agreed to a high extent with items 15(78%), 16(69%), 19(79%), 21(72%), and 23(85%) with average percentages significantly higher than 50% average. The results also revealed that respondents agreed to a low extent with items 17(33%), 18(47%), 20(39%), 22(43%), and 24(32%) with average percentage significantly less than 50% the average. The grand Average for the results at this unit is 50.60.

On the other hand, respondents (female) agreed with items 15(83%), 16(66%), 19(70%), and 20(87%) with the average of the items significantly higher than 50% benchmark. The results also revealed that the respondents agreed to a low extent with 17(46%), 18(41%), 21(47%), 22(49%), 23(41%), and 24(45%), average scores of the items significantly less 50% benchmark. The grand percentage for this unit of the results is 57.50% and is significantly higher than the 50% benchmark. The results indicate that male and female students agree that knowledge of sex education can help students in taking decisions on consent and personal boundaries, making informed decision about sexual behaviour, and to become aware of the risks of unprotected sex. Both groups also disagree that the knowledge of sex education will encourage them to delay sexual activities, make them become more curious about sex, understand their body changes and emotions, and choose to become the gender of their choice. However, both groups are at variance on sex education giving them the courage to say “no” to sexual advances, discuss sexual issues with other people, and preventing them from engaging in casual sex.

DISCUSSION OF FINDINGS

Finding from the study revealed that although, students have some levels of awareness and knowledge on the dynamics of sex education and sexual behaviour of students, they are not adequately taught sex education in schools as students (males and females) do not have adequate awareness and knowledge about sex education and sexuality in the school. Findings also reveal that students have no adequate knowledge of human right and sexuality, sexual relationship and interpersonal skills, lessons on LGBTQ, relationships and responsible behaviour, and knowing on how to prevent pregnancy and STDs, which make students to engage in causal sexual behaviours. This finding aligns with the position of Reiss (2019) who stated that the initial goal of sex education was to equip parents with the knowledge needed to educate their children about various aspects of sexuality; biological, psychological, emotional, social, and even spiritual.

Further findings from the study revealed that against the primary goal of sex education, there are some sexual behaviours that are trending in schools among students and that these sexual behaviours include petting (touching private parts), regular sexual intercourse, sexting (sending sexual messages or images), use of sex toys, multiple sex partners, keeps (dating older adults for money/gifts, use top drugs/alcohol to enhance sexual experience, and unprotected sexual relationships. This finding is in agreement with the findings of Adebayo and Oke, (2022) who affirmed that exposure of children to different sources of information including social media often shapes their perceptions and practices, sometimes leading to risky behaviours such as early sexual initiation, teenage pregnancies, and the spread of sexually transmitted infections (STIs). Furthermore, findings from the study also revealed that oral sex, anal sex, and LGBTQ+ relationship are not common sexual behaviours exhibited among secondary school students in the area of the study. This finding negates the findings of Eze and Omeje (2019) who stated that despite governmental efforts to integrate sex education into the national curriculum, significant gaps persist in its effective delivery, contributing to widespread misinformation and increasing vulnerability among students. Additionally, findings from the study revealed that secondary school students' sexual behaviours are either negatively or positively influenced by several factors which include, friends discussions on topics related to sex, pressure from friends/peers to engage in sexual activities, parents/guidance regular discussion of sexual health, parental sexual relationships, regular access to sexual contents on the social media, religious sexual value system, cultural sexual beliefs system, and personal beliefs and life goals. This finding aligns with the findings of African Population and Health Research Center (2020) which found out that, the form, content, accuracy, and variety of sexual information have grown with the proliferation of a myriad of information platforms across new and traditional media exposing children to different forms of sexual behaviours. However, findings revealed further that parents' set rules about dating and relationships do not significantly influence students' sexual behaviours. This finding contradict with the findings of Charlotte & Saul (2023) who stated that individuals construct the social world

through the meanings they attach to experiences and interactions, with these symbols being passed down through language, set rule and goals.

Still, finding from the study revealed that knowledge of sex education can help students (male and female) in taking decisions on consent and personal boundaries, making informed decision about sexual behaviour, and to become aware of the risks of unprotected sex. Findings further revealed that the knowledge of sex education will encourage students to delay sexual activity, make them become more curious about sex, understand their body changes and emotions, and choose to become the gender of their choice. This finding is in agreement with the position Nicki (2019) who emphasized that once a child's sex is identified, people begin to interact with them based on culturally defined gender expectations through teaching. The finding also revealed that sex education influences male and female students differently as male and female students are seemingly emotionally different in their perception reactions, and responses to sexual advances, discussions, prevention and engagements in sexual behaviours and activities. This aligns with the position of Boskey (2023) who concluded that comprehensive sex education, especially when introduced during childhood, serves as a protective factor against early and frequent sexual activity.

Findings from the focus group interview revealed that that sexual behaviours common among students at the junior secondary school students include petting (touching private parts), regular sexual intercourse, sexting (sending sexual messages or images), use of sex toys, multiple sex partners, keeping (dating) older adults for money/gifts, use top drugs/alcohol to enhance sexual experience, and unprotected sexual relationships. The results also revealed that oral sex, anal sex, and LGBTQ+ relationship, though not completely out of place, are not common sexual behaviour among secondary school students in the area of the study. This is in line with the position of Adebayo and Oke, (2022) who found out that secondary school students are exposed to several forms of sexual behaviours.

Further findings from the focus group discussion revealed that both male and female students agreed that knowledge of sex education can help students in taking decisions on consent and personal boundaries, making informed decision about sexual behaviour, and to become aware of the risks of unprotected sex. Findings also revealed that the knowledge of sex education will not, in itself, encourage students to delay sexual activities, make them become more curious about sex, understand their body changes and emotions, and choose to become the gender of their choice. Findings revealed further that there exist disagreement between male and female students' position on sex education giving them the courage to say "no" to sexual advances, discuss sexual issues with other people, and preventing them from engaging in casual sex. These findings agree with African Population and Health Research Center (2020) which asserted that information on sex education is highly proliferated and distorted such that the real essences is basically distorted thereby defeating the essence of sex education to students.

CONCLUSION

This study explores the complexities of sex education and the shifting patterns of sexual behaviors, including LGBTQ identities, among secondary school students in Delta State, Nigeria. The findings emphasize the pivotal role of comprehensive, well-structured sex education in shaping students' understanding, attitudes, and choices regarding sexuality. While cultural and religious norms often hinder open discourse on these subjects, the research highlights an increasing awareness and evolving perceptions of sexual orientation and identity among students, signaling a shift toward more inclusive perspectives.

The study reinforces the urgency of implementing inclusive, age-appropriate, and culturally responsive sex education programs that reflect contemporary sexual behaviors and identities. It calls for a collaborative approach among educators, parents, and policymakers to deliver accurate, unbiased, and supportive guidance. Such initiatives should empower students with critical knowledge while fostering respect, tolerance, and informed decision-making in matters of sexual health and relationships.

Conclusively, the integration of modern, research-driven sex education into school curricula is essential for equipping students with the necessary skills to navigate their sexual health responsibly. Additionally, future studies should delve deeper into the influence of digital media, peer interactions, and family dynamics on

students' sexual behaviors. These insights will be instrumental in refining intervention strategies tailored to the unique socio-cultural landscape of Delta State, Nigeria.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations were made.

1. The Federal and the Delta State Ministry of Education should ensure the incorporation of Comprehensive Sex Education (CSE) in School Curricula integrate age-appropriate, culturally sensitive, and research-based sex education into the secondary school curriculum in order to address contemporary sexual behaviours, including LGBTQ topics, while promoting responsible decision-making.
2. School managements in collaboration with NGOs should provide professional training for teachers to equip them with the knowledge and skills to deliver sex education effectively void of sentiments and biases.
3. Schools and community leaders should organize sensitization programs for parents to help them understand modern sexual behaviors and how to guide their children appropriately.
4. Schools should establish counseling centers with trained professionals to provide confidential guidance and support to students experiencing sexual health concerns.
5. The government and NGOs should leverage social media, mobile apps, and other digital platforms to disseminate accurate sexual health information in a youth-friendly manner.
6. Faith-based organizations, traditional leaders, and community stakeholders should be involved in discussions on sex education to align interventions with cultural and moral values while ensuring inclusivity.

REFERENCES

1. Adebayo, T., & Oke, O. (2022). Adolescent sexuality and digital exposure: A Nigerian perspective. *Journal of Adolescent Health Research*, 18(3), 112-130
2. Adepoju, A. (2021). Sex education and cultural perceptions in Nigeria: Challenges and prospects. *African Journal of Reproductive Health*, 25(2), 45-58.
3. Advocates for Youth. (2023). Building an evidence-and rights-based approach to healthy decision-making.
4. African Population and Health Research Center. (2020, January 30th). We need to have more dialogue between
5. Amaechi, N. N., Anyalebechi, L. I. & Ariole, I. A. (2016). "Promoting sexuality education in promoting sexuality education in tertiary institutions: Expected roles of women librarians in Nigeria. Retrieved from: Promoting sexuality education in tertiary institutions: expected roles of women librarians in Nigeria (unl.edu)
6. American Psychological Association. (2020). Sexual orientation and homosexuality. Retrieved from" <https://www.apa.org/topics/lgbtq/orientation>.
7. Bloom, B. E., Kieu, T. K., Wagmen, J. A., Ulloa, E. C., & Reed, E. (2022). Responsiveness of sex education to the needs of LGBTQ+ undergraduate students and its influence on sexual violence and harassment experiences. *American Journal of Sexuality Education*, 17(3). ;
8. Bordia, D. (2022, August 16th). Importance of sex education in schools. Teachmint. <https://blog.teachmint.com/importance-of-sex-education-in-schools/>
9. Boskey, E. (2023, May 2nd). The benefits of sexual education in schools. Very well. <https://www.verywellhealth.com/support-comprehensive-education-schools-3133083>
10. Centers for Disease Control and Prevention (CDC). (2023). sexual health trends among adolescents. Retrieved from www.cdc.gov
11. Charlotte N. & Saul M. (2023). Symbolic interactionism theory & examples. <https://www.simplypsychology.org/symbolic-interaction-theory.html#:~:text=Key%20Takeaways%201%20Symbolic%20interactionism%20is%20a%20social,caculate%20the%20effects%20of%20our%20actions.%20More%20items>

12. Eisenberg, M. E., Gower, A. L., McMorris, B. J., Rider, G. N., Shea, G., & Coleman, E. (2017). Risk and protective factors in the lives of transgender/gender nonconforming adolescents. *Journal of Adolescent Health*, 61(4), 521-526.
13. Eze, C., & Omeje, K. (2019). Implementing sex education in Nigerian schools: Barriers and solutions. *International Journal of Education Policy*, 14(1), 77-93. <http://dx.doi.org/10.4314/afrev.v7i1.22>
14. Griffin, L. J. (2021). The effect of sex education programs on rape culture. M.Sc. Thesis Submitted to the Graduate College, Missouri State University. <https://bearworks.missouristate.edu/cgi/viewcontent.cgi?article=4663&context=theses>
15. Guttmacher Institute. (2022). Adolescent contraceptive use and pregnancy prevention. Retrieved from www.guttmacher.org
16. Haffner, Debra, & Kate, O. A. (2005). "Time to speak: Faith communities and sexuality education, (2nd Ed.)" Norwalk, CT: Religious Institute on Sexual Morality, Justice, and Healing,
17. Kelly, P.J & Morgan-Kidd, K. J. (2001). Social influences on the sexual behaviours of adolescent girls in at-risk circumstances. *Journal of Obstetric, Gynaecologic and Neonatal Nursing*30(5):481-489.[http://www.ncbi.nlm.nih.gov/pubmed/11572528\[22\]](http://www.ncbi.nlm.nih.gov/pubmed/11572528[22])
18. Musa, A. (2020). Sex education in Nigeria: Attitude of secondary school adolescents and the role of parents and stakeholders. *Open Journals of Educational Development (OJED)*, 1(1), 1-30. <https://www.openjournalsnigeria.org.ng>
19. Musa, A. (2020). Sex education in Nigeria: Attitude of secondary school adolescents and the role of parents and stakeholders. *Open Journals of Educational Development (OJED)*, 1(1), 1-30. <https://www.openjournalsnigeria.org.ng>
20. National Demographic and Health Survey (NDHS). (2021). Sexual behaviours and health outcomes among adolescents in Nigeria. Retrieved from: <https://www.thoughtco.com/symbolic-interaction-theory-application-to-race-and-gender-3026636>
21. Nicki L. C. (2019). Studying race and gender with symbolic interaction theory. Retrieved from:<https://www.thoughtco.com/symbolic-interaction-theory-application-to-race-and-gender-3026636>.
22. Obiekea, P. O., Ovri, F. B & Chukwuma, E. T. C. (2013). Sexual education: An intervention and social adjustment programme for youths in secondary education in Nigeria. *An International Multidisciplinary Journal, Ethiopia* 7 (1), 322-339. Retrieved from:
23. Odetola, T. O., Eze, C. C., & Umar, A. (2023). Multiple sexual partnerships and STI risks among adolescents. *African Journal of Reproductive Health*, 27(3), 45-60.
24. Okonofua, F., Ogu, R., & Agholor, K. (2020). Sexual behaviors and health risks among Nigerian adolescents: The role of education and policy interventions. *Nigerian Journal of Public Health*, 27(4), 200-215.
25. Osadolor, U. E., Amoo, E. O., Azuh, D. E., Mfonido-Abasi, I., Washington, C. P., & Ugbenu, O. (2022). Exposure to sex education and its effects on adolescent sexual behavior in Nigeria. *Journal of Environmental and Public Health*, 22. <https://doi.org/10.1155/2022/3962011>
26. Pew Research Center. (2021). Being LGBTQ in America. Retrieved from: https://www.pewresearch.org/short-reads/2023/06/23/5-key-findings-about-lgbtq-americans/?utm_source=chatgpt.com
27. Reiss, M. (2019). A brief history of sex education. Open Learn. The Open University. Retrieved from <https://www.open.edu/openlearn/course/view.php?id=8473>
28. Resnick, M. D., & Bearinger, L. H. (2021). Adolescent health and development: trends and challenges. *Journal of Adolescent Health*, 68(4), 567-578.
29. Rosario, M.; Schrimshaw, E.; Hunter, J.; Braun, L. (2006). "Sexual identity development among lesbian, gay, and bisexual youths: Consistency and change over time". *Journal of Sex Research*. 43 (1): 46–58. doi:10.1080/00224490609552298. PMC 3215279. PMID 16817067.
30. Simmonds, D. I. (2019). The effects of sex education on sexual behaviors of adolescents in rural Jamaica. A Ph. D Dissertation Submitted to Keller Graduate School of Management, BS, DeVry University.
31. Smith, P. K., Olweus, D., & Craig, W. (2022). Peer influence on adolescent sexuality: trends and impacts. *Developmental Psychology*, 58(2), 89-104.

32. Toska E., Cluver L.D., Boyes M., Pantelic M., Kuo C. (2015). From 'sugar daddies' to 'sugar babies': exploring a pathway among age-disparate sexual relationships, condom use and adolescent pregnancy in South Africa. *Sex Health*.12(1):59-66. doi: 10.1071/SH14089. PMID: 25702156; PMCID: PMC4546918
33. Tsotovor, L. A., & Dadey, G. O. (2022). Influence of sex education on the sexual behavior of adolescents. *Open Journal of Educational Research*,2(409), 2-17. DOI: 10.31586/ojer.2022.409
34. UNAIDS. (2023). The impact of adolescent sexual behaviours on HIV transmission. Retrieved from www.unaids.org
35. UNESCO. (2022). Comprehensive sexuality education: Key to adolescent well-being. Retrieved from www.unesco.org
36. UNICEF. (2023). Adolescent sexual and reproductive health: a global perspective. Retrieved from www.unicef.org
37. Vanderbilt University. (2023). Lesbian, gay, bisexual, transgender, queer & intersex life. Vanderbilt University. <https://www.vanderbilt.edu/lgbtqi>
38. World Health Organization (WHO). (2022). Global adolescent health report. Retrieved from www.who.int
39. World Health Organization (WHO). (2023). Unsafe abortions among adolescents: causes and consequences. Retrieved from: [www.who.int/recommendations for enhancing sexual health education in Nigeria and fostering safer, more informed adolescent communities](http://www.who.int/recommendations-for-enhancing-sexual-health-education-in-nigeria-and-fostering-safer-more-informed-adolescent-communities).
40. World Health Organization. (2016). Health for the world's adolescents: A second chance in the second decade. World Health Organization. <https://apps.who.int/adolescent/second-decade>

Data Analysis Table Just for Reference/Sighting

CLUSTER 1A MALE STUDENTS						
SA	A	D	SD	ΣFX	$\square \square$	SD.
62	70	74	80	286	2.40	1.11
68	54	76	88	286	2.36	1.15
50	58	78	100	286	2.20	1.10
42	74	94	76	286	2.29	1.02
80	68	104	34	286	2.68	1.01
48	56	78	104	286	2.17	1.10
100	62	54	70	286	2.67	1.19
104	68	56	58	286	2.76	1.15
82	84	58	62	286	2.65	1.11
44	72	94	76	286	2.29	1.03
82	84	58	62	286	2.65	1.11
94	62	84	46	286	2.71	1.09
50	58	78	100	286	2.20	1.10
48	56	78	104	286	2.17	1.10

Cluster 1 B – Female Students

68	70	74	80	292	2.43	1.13
68	60	76	88	292	2.37	1.14
50	58	84	100	292	2.20	1.09
48	74	94	76	292	2.32	1.04
80	68	104	40	292	2.64	1.03
54	56	78	104	292	2.21	1.12
100	62	60	70	292	2.66	1.18
104	74	56	58	292	2.77	1.14
88	84	58	62	292	2.68	1.12
46	72	94	76	292	2.32	1.03
78	88	66	60	292	2.63	1.09
100	70	50	72	292	2.68	1.19
68	60	76	88	292	2.37	1.14
54	56	78	104	292	2.21	1.12

CLUSTER 2A MALE STUDENTS

80	70	74	62	286	2.59	1.12
88	78	66	54	286	2.70	1.10
44	62	84	96	286	2.19	1.07
94	76	46	70	286	2.68	1.17

94	62	84	92	286	2.71	1.09
42	64	78	102	286	2.16	1.07
102	84	48	52	286	2.83	1.11
56	68	102	60	286	2.42	1.03
82	84	58	62	286	2.65	1.11
94	78	66	48	286	2.76	1.09
82	76	72	56	286	2.64	1.10
46	66	84	90	286	2.24	1.07
78	78	78	58	286	2.60	1.09
102	66	80	44	286	2.77	1.09

CLUSTER 2B FEMALE STUDENTS

82	74	74	62	292	2.60	1.11
78	88	66	60	292	2.63	1.09
50	60	86	96	292	2.22	1.09
100	70	50	72	292	2.68	1.19
90	68	86	48	292	2.68	1.08
56	64	74	96	292	2.27	1.12
88	102	50	52	292	2.77	1.07
58	68	92	74	292	2.38	1.07
88	78	58	68	292	2.64	1.14
98	72	50	72	292	2.68	1.19
88	102	50	52	292	2.77	1.07
56	68	102	60	292	2.42	1.03
82	84	58	62	292	2.65	1.11
80	86	66	60	292	2.63	1.09

CLUSTER 3A MALE STUDENTS

78	80	62	66	286	2.59	1.12
94	78	66	48	286	2.76	1.09
96	62	84	44	286	2.73	1.09
82	76	72	56	286	2.64	1.10
46	66	84	90	286	2.24	1.07
102	78	64	62	286	2.84	1.07
84	102	52	48	286	2.78	1.05
92	66	84	44	286	2.72	1.08
88	70	72	56	286	2.66	1.11

Cluster 3B Female

78	86	66	62	292	2.62	1.10
78	78	78	58	292	2.60	1.09
102	66	80	44	292	2.77	1.09
78	82	74	58	292	2.62	1.08
52	60	90	90	292	2.25	1.08
104	72	70	46	292	2.80	1.09
98	88	46	60	292	2.77	1.13
94	70	80	44	292	2.72	1.09
78	96	62	56	292	2.67	1.07

CLUSTER 4A MALE STUDENTS

90	98	44	54	286	2.78	1.09
86	80	66	54	286	2.69	1.10
40	66	80	100	286	2.16	1.06
70	42	88	86	286	2.34	1.15
94	84	62	46	286	2.79	1.07
50	60	74	102	286	2.20	1.11
104	62	46	54	286	2.69	1.21
54	68	60	104	286	2.25	1.14
98	84	66	38	286	2.85	1.04
40	58	48	140	286	1.99	1.12

CLUSTER 4B FEMALE STUDENTS

98	92	56	46	292	2.83	1.07
80	86	72	54	292	2.66	1.07
38	68	84	102	292	2.14	1.04
70	48	80	94	292	2.32	1.16
82	94	62	57	292	2.70	1.07
106	82	64	40	292	2.87	1.06
46	74	84	88	292	2.27	1.06
48	64	74	106	292	2.18	1.10
42	58	76	116	292	2.09	1.08
62	58	76	92	292	2.29	1.14