

UNIVERSITY OF EDUCATION, WINNEBA

**EXPLORATION OF PREMARITAL SEXUAL BEHAVIOUR OF FEMALE
STUDENTS IN SENIOR HIGH SCHOOLS IN THE WEST MAMPRUSI
MUNICIPALITY OF NORTH EAST REGION, GHANA**



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**A dissertation in the Department of Educational Foundations,
Faculty of Educational Studies, Submitted to the School of
Graduate Studies, in partial fulfillment**

**of the requirements for the award of the degree of
Post Graduate Diploma in Education (PGDE)
in the University of Education, Winneba**

JANUARY, 2021

DECLARATION

Student's Declaration

I, **David Appiah Korang** declare that this dissertation, with the exception of quotations and references contained in published works which have all been identified and duly acknowledged, is entirely my own original work, and it has not been submitted in part or whole, for another degree elsewhere.

Signature:

Date:

Supervisor's Declaration

I hereby declare that the preparation and presentation of this dissertation was supervised in accordance with the guidelines for the supervision of thesis laid down by the University of Education, Winneba.

Supervisor's Name: Dr. Paul Kobina Effrim

Signature:

Date:

DEDICATION

This project is dedicated to my family especially my mother Mary Yaa Fosuah who has always been there for me throughout my education and my whole life. I hope one day my mother will enjoy the fruit of her kindness and care. May Almighty God richly bless my mother for her tireless support in impacting knowledge and responsiveness into me.



ACKNOWLEDGEMENTS

I thank the almighty God for granting me the grace and wisdom to undertake this research. I would also like to express my sincere gratitude to my supervisor, Dr. Paul Kobina Effrim a senior lecturer at the Department of Educational Foundations of the University of Education, Winneba who in spite of his busy schedules supervised this project, read through and made valuable suggestions which have made this work a success. His dynamism, vision, sincerity and motivation have deeply inspired me. He has taught me the methodology to carry out the research and to present the research work as clearly as possible. It was a great privilege and honour to work and study under his guidance. I am extremely grateful for what he has offered me. May the almighty God bless him and grant his heart desires.

I thank my family for offering their support, fruitful suggestions, encouragement, prayers and other resources to see me through.

I am also grateful and acknowledge with special thanks to Mr. Peter Kpaga Telley for his advice and technical assistance in this research work.

I am over helmed in all humbleness and gratefulness to acknowledge my depth to all those who helped in diverse ways for me to complete this thesis, my prayer is that the Good Lord we serve should fill your cup to the fullest.

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ABSTRACT

This study explores the premarital sexual behaviour of female students in senior high schools in the West Mamprusi Municipality of North East Region, Ghana. The study adopted the descriptive survey design. The population of the study estimated at 4520 comprised female students in senior high schools in the West Mamprusi Municipality of North East Region of Ghana. Sample sizes of ninety (90) students were selected using stratified sampling technique from General Arts and Home Economics Classes. The research instrument used for the study is self-designed questionnaire which has both closed and open ended questions. Content validity was estimated through expert judgment. Reliability of the instrument was ascertained through test-retest method and a Chronbach alpha coefficient of 0.87 was obtained. Data collected were analysed using frequency, table, percentage, mean, pie chart and bar graph. The results of the study showed that the practice of premarital sex is very high among the students who engage in the act. The frequency in the practice of premarital sex is very high and is almost part of the weekly routine of majority of these students. The study recommended among others that schools in the West Mamprusi Municipality should have functioning guidance and counselling units that should carry out comprehensive sex education in line with the Ghanaian culture.



CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Premarital sex means sexual intercourse practiced by adolescents before marriage. Researches disclose that over the years there has been a tremendous increase in the sexual relationship among adolescents, particularly Africa schools (Jones & Espey, 2008). The intensification in premarital sex in Africa has resulted in a sexual revolt that came within western culture (Scott, 2009). Adolescent stage of human development is an important phase of sexual maturation. During this period, adolescents often become active psychologically and sexually. That is due to physiological changes, peer pressure and their tendency of resisting to behavioural change through different forms of denial and rationalism (Fikadu, 2000). These people are susceptible to different social, peer and cultural pressures that may lead them to earlier sexual experimentation (Taffa, Holm-Hansen, & Gunner, 2002). Despite the fact that delaying sexual activity until marriage reduces the spread of HIV/AIDS and various Sexually transmitted infections (STI), sexual activities among youths have been reported to be increasing worldwide (Bureau, 2004).

The society has always criticised that premarital sex is immoral and risky to health, resulting in sexually transmitted diseases, abortions and teenage mothers (Alo, 2009). Students at Senior High Schools are reported as tending to engage in high-risk behaviour that is related to sex, alcohol and drugs. Such practices are referred to as the sexual culture of Senior High School life, which may be open to ‘sugar daddy’ practice, sexual experimentation, and prostitution in Senior High Schools, as well as to the occurrence of unprotected casual sex and multiple partners (Kelly, 2001). The

adolescent period includes many physical and emotional changes, and provides an opportunity for learning by experience and experimentation (Edelman & Mandel, 2006). It is around this age group that high-risk behaviours are initiated, with most Senior High School students belonging to this age group. Young adults at Senior High School are often left unsupervised by both their parents and teachers, who assume that they are, mature enough to protect their own sexual and reproductive health (SRH) (Finger, Fischer, & Moffet, 2009). Although sexual behaviour in teenagers and youth is mostly due to the effect of sexual hormones, the role of psychosocial factors such as media, friends and peer group, drugs and alcohol, and family cannot be denied (Fekadu, 2001).

Demirbag et al. (2006) Concluded that among the background variables considered, girl education, age and ethnicity were among the most important predictors of attitudes towards girl premarital activity. Also as a result of this sexual revolution in the Western world, sex became glorified and commercialised, and all types of behaviours such as nudity, homosexuality, premarital sex and the likes were being experimented on. In some cases, even legalised pornographic magazines, novels and a large number of books have been published. According to Armstrong, (1972) –we live in a crazy world”. Premarital sex and early initiation of sexual activity may prolong the period of exposure to risks of unwanted pregnancy and contracting STDs including; HIV/AIDS during their reproductive life span (Alemayehu, 2013). Many adolescents face pressures to use alcohol, cigarettes, or other drugs and to initiate sexual relationships at earlier ages, to put themselves at high risk for intentional and unintentional injuries and risky sexual behaviours (Teferra, Erena & Kebede, 2015) Prevalence of premarital sexual practice and associated factors among undergraduate health science students of Madawalabu University.

Females, particularly adolescent girls may end up with unwanted pregnancies, abortions, teenage deliveries, and various complications of these including death. Moreover, the girls may drop out from school to look after their children, and in most cases, they become economically reliant on their parents (Berihun, Assessment of the prevalence of premarital sex and unprotected sexual practices among secondary school adolescent students in Sebeta town, Oromia regional state, 2014). Family is the important environment which influences a large number of social behaviours in children. One of the functions of family is socialisation of children. In the socialisation process, children learn values, beliefs, and the accepted behavioural criteria of their society (Meunier, Roskam, Stievenart, Moortele, & Aarti, 2011). Ghana is one of a country where an increasing number of adolescents are involved in unsafe sexual practices and hence face undesired health outcomes such as unplanned pregnancy, too early childbirth, unsafe abortion and sexually transmitted disease. Nearly 70% of premature deaths among adults can be linked to behaviours that were initiated during adolescence (Ayalew, Abreha, Shumey, & Berhane, 2015). Unwanted pregnancy can be associated with higher likelihood of early motherhood, unsafe abortion, and other pregnancy-related complications (Mulugeta & Berhane, 2014). This is may be enhanced as a result of an increasingly large number of adolescents' enrolment in preparatory schools (Wouhabe, 2007).

Early sexual debut, limited knowledge and poor appreciation of sexual health have been reported as among major predisposing factors in HIV transmission among adolescent in East Africa. Bongaarts (2007) observed a positive correlation between early sexual debut and HIV infection in Ghana. The trend is gradually changing and the incidence of student-adolescents' or youths' engaging in sexual relationship is high and may constitute problems (Ngalinda, 1998) including social, health and

academic. Students' sexual activity has resulted into increased cases of unplanned pregnancies, poor academic performance, and eventually school dropouts (Mlyakado, 2013). Premarital sex is not confined to adolescent alone; a good number of people who are not married are also vulnerable to premarital sex. This is evidenced by the large number of unintended or unwanted pregnancies. Many of which get terminated through unsafe abortions (Crimes, 2010). Early sexual debut, which is most of the time premarital, is associated with high risk sexual behaviour in later life (Ojong, Akpan, Ojong-Alasia & Nlumanze, 2014). Multiple sexual partners, high risk of acquiring sexually transmitted infections and an increasing number of girls dropping out of school due to unwanted/unintended pregnancies are associated with early sexual debut (Bukar, Audu, Kawuwa, Ibrahim & Ali, 2013)..

It has also been noticed that most behavioural responses of young people habitually revolve around sexual activities (Inyang, 2007). Engagement in the pleasure of romantic intimacy, usually end up in sexually intercourse among the students. Many reasons are often postulated by the students who engage in reckless romantic and sexual explorations to justify their sexual behaviour, some people believe that premarital sex is necessary because everyone is entitled to engage in sexual intercourse but the person must have safe sex while others sees premarital sex to be a taboo (Rena, 2006).

Based on the afore mentioned problems encountered by the adolescents, especially female students who indulge in premarital sex, there is need for a work of this nature to be carried out on the exploration of premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana, so as to be able to suggest appropriate measures for modifying any identified undesirable attitude.

1.2 Statement of the Problem

Researchers have observed that there is prevalence of premarital sexual practices among female students in the Senior High Schools, which leads to high incidence of unintended pregnancies and sexually transmitted diseases. According to Bennett (2007), the absence of comprehensive sex education for youth raises the dangers that they will have unsafe sex and the chances that they will engage in premarital sex without being efficiently informed of the likely consequences. Most school authorities frown upon adolescents' indulgence in premarital sex. Some Senior High School authorities carry out disciplinary action on students who indulge in it. Researchers have observed that students still engage in risky sexual behaviours, despite the availability of the programmes and interventions that are meant to improve such behaviours. This could be due to the fact that such programmes do not talk to the needs and characteristics of the adolescent group concerned.

The Ghana Health Service engages in series of campaigns to create public awareness on the danger and circulation of sexually transmitted diseases. The available literature on adolescent's (including students') sexuality has tended to be behaviour-focused, spurred by concerns about teenage pregnancy and health risk. Much is known about adolescent's sexual behaviours, especially intercourse, but little about their reasons for having sex or the meaning they ascribe to their behaviour (Crockett, Raffaelli, & Moilanen, 2003). The issue of premarital sexual practice among female students is fast emerging as a serial social and public health problem in the West Mamprusi Municipality in the North East Region. There is a growing incidence of unwanted pregnancies and minors getting involved in sexual activities at early stages of their lives in West Mamprusi Municipality (Ghana Health Service, 2014). This has led to the carrying out of initiatives by West Mamprusi Municipal

Assembly against teenage pregnancy and child marriage. The Municipal Chief Executive and the Social Welfare Department of West Mamprusi Municipal Assembly confirm the alarming rate of teenage pregnancy among students. The problem that forms the basis of the current study is the lack of understanding of factors that influence female students' sexual behaviours from the students' perspective. Only when their perspectives have been analysed can there be a true appreciation of the uniqueness of each population, allowing for the tailoring of initiatives to significantly reduce this phenomenon among students.

1.3 Purpose of the Study

The purpose of the study is to explore the premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana.

1.4 Objectives of the Study

The specific objectives of the study are to;

1. know how involved female students are in premarital sexual practice in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana.
2. discover how frequent students of Senior High Schools in the West Mamprusi Municipality engage in premarital sex.
3. assess the use of contraceptives by students of Senior High Schools in the West Mamprusi Municipality.
4. identify factors influencing premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana.

5. assess the state sex education given to female students in Senior High Schools in the West Mamprusi Municipality of North East Region.

1.5 Research Questions

For the purpose of this study, a few research questions will be formulated to guide the researcher in the process. They are the following;

1. How involved are female students in premarital sexual practice in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?
2. How often do female students of Senior High Schools in the West Mamprusi Municipality engage in premarital sex?
3. How widespread is the use of contraceptives among female students of Senior High Schools in the West Mamprusi Municipality during sex?
4. What are the factors influencing premarital sexual practice among female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?
5. What is the state of sex education for female students of Senior High Schools in the West Mamprusi Municipality use contraceptives during sex?

1.6 Significance of the Study

The study will investigate area-specific causes and consequences of premarital sexual activities among students and the researcher hopes this will help the appropriate authorities like the West Mamprusi District Health Directorate and the Guidance and Counseling Units of various schools in the Municipality to make right decisions to deal with the phenomenon among students in the area. It is hoped that the study will add to existing knowledge and also form the basis for further research on teenage pregnancy. The findings of this will inform formulation of policies and

interventions to equip female students in senior high schools with knowledge and skills to make informed choices. Identification of the factors associated with early sexual debut will inform existing programmes on behavior change communication by health workers, gender empowerment and sexual health education in senior high schools. Furthermore, it is hope that the study result will be of immense benefit to other researchers who may want to improve on this study.

1.7 Scope and Delimitation of the Study

The research was conducted and confined within the boundaries of West Mamprusi Municipality of North East Region, Ghana. The West Mamprusi Municipality is one of the six municipals and districts assemblies in the newly created North East Region. The study was done in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana. The participation in exploring the premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana was measured using special design questionnaire. The research was limited to exploring the premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana. The West Mamprusi Municipality is chosen because of risky sexual activities prevalence among students (Shamsu-Deen, 2017). Student population is chosen because of the diverse characteristics which can be measured.

1.8 Definition of the Terms

For clarity of understanding, definitions are provided below. These definitions provide a more in-depth description and will be used throughout the Research.

Sexually transmitted diseases (STDs) - according to the Mayo Clinic Online (2009), are infections acquired by sexual contact. The organisms that cause sexually transmitted diseases may pass from person to person in blood, semen, or vaginal fluids.

Prevention – teaches female students about the actions that stop something from happening.

AIDS (Acquired Immune Deficiency Syndrome) - A disease of the immune system caused by infection with the retrovirus HIV, which destroys some types of white blood cells and is transmitted through blood or bodily secretions such as semen. Patients lose the ability to fight infections, often dying from secondary causes such as pneumonia or Kaposi's sarcoma.

HIV (Human Immunodeficiency Virus) - Either of two strains of a retrovirus, HIV-1 or HIV-2, that destroys the immune system's helper T cells, the loss of which causes AIDS.

Sexual Education Programs - the process of acquiring information and forming attitudes and beliefs about sex, sexual identity, relationships, and intimacy.

1.9 Organisation of the Study

The study was organised into five chapters. Chapter One was the introduction to the study. It included background to the study, statement of the problem, purpose of the study, objectives of the study, research questions, significance of the study, scope of the study and definition of the terms. Chapter Two of the study reviewed literature relevant to the study. This mainly included the themes or sub-topics, theoretical,

empirical and summary of reviewed literature. Chapter Three presents the methods which were adopted in conducting the study. It included the research design, site of the study, population, sample and sampling techniques, research instrument, validity and reliability, data collection procedure and data analysis technique. Chapter Four presented findings of the study and discussed those findings with works done by other researchers. The final chapter (Chapter Five) summarised the study, drew conclusions on the major findings and made recommendations for policy and practice as well as suggestions for further research.



CHAPTER TWO

REVIEW OF RELATED LITERATURE

In the past, Ghanaians approach sexual behaviour with great respect. There was cultural prohibition of premarital sexual experimentation, but it has been observed that adolescents no longer adhere to the cultural regulations regarding sex. Mosher and Cross (1971), stated that the attitudes of adolescents towards premarital sexual activities have become more liberal and permissive than what it was in the past. The prevalence of risky sexual conduct is high among students in secondary schools regardless of a high level of knowledge about reproductive health matters (Omoriegbe, 2002). Literature on premarital sex among young people in industrialised countries, in the west, holds that having a sexual relationship is, on the whole, a socially acceptable form of behaviour and is generally perceived to be a personal decision and choice (Wells & Twenge, 2005). The term premarital is referred to as intercourse before a marriage. More than half of the world population constitutes of young people's less than 25 years old, and majority of these populations live in developing country (UNFPA, 2011). Premarital Sexual activities among adolescents have been reported to be increasing. Several studies in sub Saharan Africa have documented high and increasing premarital sexual activities among adolescents (Sederowitz, 1999). Starting from a recent time, premarital sexual action during adolescence and emerging adulthood leads to a wide range of adverse outcomes in sub Saharan Africa, including unintended pregnancies, illegal abortions, and sexually transmitted infections (Harrison, Cleland, Gouws, & Frohlich, 2005).

Today the difference between love and sex seems to disappear with most young lovers ending up exploring each other's physique and ultimately unprotected sexual intercourse results. The rise in premarital sex in Africa has resulted in a sexual revolution that came within western culture (Scott, 2009). Chastity before marriage is important; however, in this present world where modern technology transports some changes in human sexuality there are several incidents that challenges permissive attitudes to prosper. Sexual activities among young people have been increasing worldwide. Several studies in Sub-Saharan Africa have also documented high and increasing pre-marital sexual activities among young peoples. Moreover, in a rapidly changing world, the large scale of societal changes – caused by modernisation and globalisation Wellings, et al., Sexual behaviour in context: a global perspective', The Lancet, 2006) are continuing to take place, in the last few decades. These societal changes have included a changing trend in sexual behaviours, attitudes and perceptions (Wellings, et al., 2006). Sexual behaviour in context: a global perspective', (Lancet, 2006).

Ghana is a relative conservative country, the topic sex is still considered a taboo between parents and children. The adolescent learned through the mass media and peers unguided. There is a global agreement that sexual attitudes and behaviours are significantly affected and framed by social acceptance and cultural values and norms (Hatfield, Luckhurst, & Rapson, 2010). Pre-marital sex is terminologies which are mostly overheard by people from the teenagers. Some engaged in this act in a casual way and think its effect after they have committed such activity. It is of common knowledge that when a man and woman engaged in sexual intercourse it is coupled with procreation. This will result to pregnancies and for teenagers this will be an early entrance to the world of motherhood. The only issue that is not good to think about is

when one or both participants are senseless on the consequences of the acts that they have done (Widmer, Treas, & Newcomb, 1998). Female youth who have begun pre-marital sexual debut earlier appear more likely to have sex with high risk partners or multiple partners and are less likely to use condom and other contraceptives (Michelle & Adesegun, 2009). Therefore, they are vulnerable to sexually transmitted infections including HIV/AIDS and unwanted pregnancy (Ruth, 2009). Unwanted pregnancy may be associated with greater likelihood of early motherhood, unsafe abortion, and other pregnancy related complications. These events in turn, increase risk of morbidity and mortality both in the mother and the child. Furthermore, early motherhood tends to impede female students academic performance, and eventually dropout from school. It often results in reducing their economic opportunity (Barbara, Wesley, Cynthia, & Annabel, 2001).

Different studies identified inconsistent factors of pre-marital sexual debut. These factors include peer pressure, living arrangement, age of students, religiosity, and school performance, having pocket money, substance use, watching pornographic video, place of family residence and parental educational status (Hong, et al., 2010).

A literature review on premarital sex clearly reveals that social acceptance of premarital sex, specifically among young people, varies widely between societies and cultures, even within the western world (Widmer, Treas, & Newcomb, 1998). For instance, premarital sex, as long as it takes place within a number of socially acceptable parameters, is perceived as an acceptable behaviour in most western cultures (Higgins, Zheng, Liu, & Sun, 2002). Whilst these rules may vary depending on gender norms, there is not a significant gender difference in Western societies and cultures, where individual freedoms and liberties are considered as respected (Finer, 2007). Conversely, a survey that determined sexual knowledge of college students in

four Louisiana universities discovered that students performed poorly on the sexual knowledge test, averaging 55.39%, despite most of the students having a school-based sexuality education (Synovitz, Herbert, Kelley, & Carlson, 2002). This implied that college students, who were sexually active, were not equipped with sufficient knowledge to adopt responsible behaviours. There was a flaw in sex education since many students, despite gaining sex knowledge, did not practice safer sex (Pilkington, Kern, & Indest, 1994). Other studies also contend the notion that sex education or information has no influence on sexual behaviour, implying that knowledge influences attitudes which in turn influence behaviour (Haywood, 1996).

The majority of students in senior high schools are single, young adults who easily fall prey to excitement coupled with the liberal nature of campus life that predisposes them to high risk sexual behaviour (Young, p.76 2011). Physiologically, the changes in reproductive organs that occur in the life of adolescents often serve as a motivating force in their quest to experiment with sex. Some naturally explore and take risks in many aspects of their lives, including sexual relationships. Those who have sex may change partners frequently and have more than one partner in the same time period or engage in unprotected sex.

Early sexual debut increases young peoples' risk for infection with HIV and other STIs. Youth who begin early sexual activity are more likely to have high-risk sex or multiple partners and are less likely to use condoms (Tilahun & Ayale, 2013). In Ghana, a little over a third (34%) of never married women and 30 percent of never married males between the ages 15 and 24 had ever had sex. Of these, however, only about 3 out of every 10 females and 45 percent of males reported the use of a condom at last sexual intercourse (GSS, GHS, & Macro, 2009). This calls for serious considerations into young peoples' perceptions and attitudes about sex. Studies

concerning young people's perception about premarital sex have shown that young people with favourable perceptions about sex are more likely to engage in premarital sex (Wang, et al., 2007). Self-efficacy means having the belief in one's ability to perform a particular behaviour. Self-efficacy depends on past experiences, available resources and anticipated obstacles. Cognitive assessment of environmental cues usually occurs prior to the enactment of any behaviour (Sheeran, 2002). Youths are less likely to have sexual intention if they think having sex is difficult and if they have no sexual partner (Guilamo-Ramos, Jaccard, Dittus, Gonzalez, & Bouris, 2008). Their belief in their ability increases with repeated experience in performing the sexual activity (Martino, Collins, Kanouse, Elliott, & Berry, 2005) and reduces with paucity of resources such as a suitable time and place (Sheeran, Trafimow & Armitage, 2003).

A high level of perceived self-efficacy predicts sexual activity (Turchik & Gidycz, 2012). It is important to note that young people's perceptions however, do not develop in isolation. One's social space plays an important role in shaping beliefs and perceptions. Studies have shown that adolescents' perceptions of their parents' values about sex are instrumental to their sexual development (Somers & Anagurthi, 2014) and these values are likely to shape adolescents' own perceptions. This suggests the importance of studying not only the young person's perception about premarital sex but also what their perceived parents' values or perceptions about sex are in addition to other family specific situations such as relationship quality and financial support. In this chapter, findings from the literature review will be discussed on topics including engagement of student in premarital sex, factors influencing premarital sex practices and consequences of premarital sex.

2.1 Engagement of Student in Premarital Sex

The female student's sexual behaviour is sometimes linked to the socio-economic status of the family, primarily through the education and incomes of the parents. According to Nann and Andrew (1994) female students act in their own best interest when deciding to engage in premarital sex. They weigh the benefits from the joy of sex against its costs, the possibility of having an out-of-wedlock birth. An out-of-wedlock birth has many potential costs for female students; it may reduce her education and job opportunities. It may damage her prospects in the marriage market, she may feel shame. A number of female students in Ghana do not see the consequences of premarital sex as severe problems because of misconceptions about sexuality. Similar investigations were also carried out to merely document levels of sexual practice, numbers and ages of sexual partners, knowledge and use of contraceptives, in a study of Kenya population (Karman, Zulkiffi, & Low, 2007) reported that a lot of Kenyans engage in premarital sex and the behaviour is on the increase.

However, Ghana is a relatively cultural conservative country, the topic of sex is still considered a taboo between parents and children, a child learns through the mass media, and peers unguided. Teens everywhere are not waiting until they are married to have sex. Teenagers are saying, "Sex is fun" and "everybody is doing it". Students who engage in premarital sex are more likely to suffer negatively from long-term physical, emotional, social and moral effects, than students who choose to wait. Adolescents' attitudes towards sexual behaviours are shaped by family values, cultural prescriptions and personal experiences (Crockett et al., 2003). More permissive attitudes about sexual activity predict adolescents' level of coitus and their initiation of sexual relations (Crockett, Raffaelli, & Moilanen, 2003).

Onyemelukwe (1993) explained that in contemporary time, Nigeria youths have gained in the sex revolution in Europe and America. The impact of alien ideas and cultures, mass communication and conditions of urban life on the behaviour and attitude of Nigeria adolescents cannot be over emphasized. There were extensive interest, inquiry and curiosity in premarital sexual activities. The youths are exposed to sexual stimuli in magazines, television and the movies to a greater extent than before, thereby creating a general trend towards liberated attitude and values that encourage open discussion on sexuality.

2.2 Factors Influencing Premarital Sex Practices

Children are initially socialized in the home environment but as they begin to attend school, other people like teachers and peers, begin to have an influence on them and their behaviours as well. Psychological factors like self-esteem, well-being, religiousness and personal values have been shown to be associated with sexual behaviour but findings regarding this from the Central European region are missing (Mann, Hosman, Schaalma, & de Vries, 2004). Low self-esteem was related to sexual risk behaviour in a sample of adolescents residing in a residential drug-treatment program (Lejuez et al., 2004). Magnani et al. (2001), reported that low self-esteem predicted both early onset of sexual activity and unprotected sex on a large cross-sectional sample of adolescents in Peru. Neuroticism has been correlated with several features of problematic sexuality, including sexual dissatisfaction and marital distress (Gottman, Swanson, & Swanson, 2002). It was found that people who score high in neuroticism tend to have more permissive sexual attitudes (Lameiras & Rodriguez, 2003) and engage in more sexual risk-taking including the practice of unsafe sexual practices (McCown, 1991).

Eysenck (1975) found that extraverts tended to endorse more favourable attitudes than did introverts toward having multiple sex partners and trying out different sexual positions. Extraverts also engaged in sexual intercourse at younger ages than introverts, as well as having sex more frequently and with more partners than introverts did (Eysenck, 1975). Similar associations between extraversion and more promiscuous sexual desires have been found by others (Costa, Fagan, Piedmont, Ponticas, & Wise, 1992). The most consistent predictor of sexual risk taking is sensation seeking (Hagger-Johnson, Bewick, Conner, O'Connor, & Shickle, 2011). Sensation seeking is a trait that overlaps considerably with conscientiousness and some elements of extraversion in the comprehensive 'big five' model of personality (neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness) (Bogg & Roberts, 2004). Low conscientiousness shares variance with impulsive sensation seeking, and extraversion overlaps with need for activity and sociability (Zuckerman, 1993). A number of factors were identified as reasons for the existence of pre-marital sex among female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana namely: peer pressure or influence, parental influence, economic reasons, search of pleasure, academic pursuit and so on. These factors include:

2.2.1 Peer influence

Peer groups provide a place where adolescents feel accepted where they can feel good about themselves, and where their self-esteem is enhanced. Peers like dormitory mates, classmates, club associates and other members of one's social group members equally influence one to be a deviant or conformist. Majority of female students who become involved in premarital sex do so because of peer pressure. They look at their peers and give in to temptation, because 'everyone does it'. They do it in

order to avoid being laughed at and to receive affirmation from their peers. In the end, premarital sex has become kind of passport to acceptance in a particular age group (Mwaba & Naidoo, 2005).

A study in Australia investigated the association between adolescents' perceptions of parental and peer attitudes towards sexuality and HIV precautions, and risky sexual behaviours (Moore & Rosenthal, 2006). Adolescents believed that peers were more likely to discuss sexuality than parents. It also found that adolescent risk-taking was related to the perceived attitudes of significant others (Moore & Rosenthal, 2006) – in this case, youths were more likely to conform to group norms to gain acceptability. Peer influence compels group members to adhere to the standard behavioural guidelines adopted by the group. The need to conform to a social norm either promotes or hinders behaviour change in an individual (Zwane, Mngadi, & Nxumalo, 2004). According to Forehand and Wierson (1993), adolescents are in the process of developing their own identities and establishing complex social network shifts from the family to the social environments. The adolescent stage is when teenagers experience new values and behaviours among their supportive peers. Adolescents' access to a group in which they feel they can 'belong' is often exploited and used to promote negative sexual norms. Certain peer groups may take on traits of gangs, in which each member has consistently to prove their loyalty and devotion to the group by performing immoral, unethical and even illegal acts (like drinking, smoking, and being promiscuous together) (Selikow, Ahmed, Flisher, Matthews, & Mukoma, 2009).

During adolescence, peers become a crucial source of modelling, reinforcement, and support concerning their own behaviour, value and beliefs system (Forehand & Wierson, 1993). Having a group of friends to whom they can turn for

advice and understanding enables them to operate in an environment of mutual trust. Adolescents tend to view other members of their peer group as friends who will not judge them, as outsiders and/or parents would be more likely to do. Peers are presumed to exert a major social influence on adolescent sexual behaviour. Abstaining from sex and delaying sexual debut are undermined by adolescents' strong need to belong to a social group (Selikow, Ahmed, Flisher, Matthews, & Mukoma, 2009). Research has shown that some students engage in one form of premarital sex or the other as a result of the influences of their mates. Sexually experienced same-sex friends might serve as a source of pressure for an adolescent to become sexually active. For girls, the pressure sometimes comes from sexually experienced peers, who exclude abstaining girls from group discussions, because they regard them as still being children (Mpofu, 2012). Peers' behaviours and attitudes are related to adolescent sexual risk behaviour – especially those adolescents whose peers are sexually active are more likely to be sexually active themselves (Miller, Forehand, & Kotchick, 2000).

Peer pressure is another factor that influences student sexual behaviour. Cultural taboos hinder young people in many developing countries to discuss sexual matters explicitly with their parents. Most information for their patchy knowledge comes from peers of the same sex who may themselves lack adequate information or are incorrectly informed. The factor is, perhaps, one of the most powerful psychosocial influences on an adolescent's sexual risk behaviour. Perceived peer norms surrounding sexual behaviour and condom use have been shown to be key influencers of risky sexual behaviour (DiClemente, et al., 2008). If adolescents and young adults perceive that their friends are having unprotected sex or that they are engaging in risky sex, they might be more likely to adopt their friends' behaviours.

Similarly, general perceptions of low levels of social support among peers have also been associated with the likelihood of participating in risky sexual behaviour. In contrast, perceived peer norms that are supportive of STI/HIV-protective behaviours can have a significant influence on the adoption and maintenance of protective behaviours (DiClemente, et al., 2008).

Taffa et al. (2002) recommended that young people have limited knowledge about sexual and reproductive health and know little about the natural process of puberty. This lack of knowledge about reproductive health may have grave consequences. As students begin to socialize with their peers, they tend to shift and values they learnt from home socialization to reliance on their peers. In their quest for a sense of belonging and to avoid rejection by the group the adolescents succumb to this pressure. It has been shown that young people whose friends are sexually active or who perceive their friends to be sexually active are more likely to be sexually active themselves (Kiragu, 2001). As peers play such a significant role in adolescents' lives, peer education has increasingly been advocated as an important avenue that could be used to challenge negative social norms. Peer education is an intervention in which well-trained people lead informal, or organised, educational activities with their peers. Such education is a popular approach to reaching youth with information and skills that are related to their sexual and reproductive health. It is also a convenient way of reaching many youths simultaneously (Finger, Fischer, & Moffet, 2009). Same-sex peers are a major source of information about sexual relations. As much as they perceive peers as untrustworthy sources of information, and believe that adult could provide more accurate information about such relations than could their friends, they have little access to the knowledge of adults, and, hence, they tend to rely on their peers for information (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010).

Brown (1992) found that consistent condom use was associated with the perception of consistent condom use among friends and peers. It was repeatedly found that involvement with deviant peer groups (e.g. using alcohol and drug use or being delinquent) was related to the participation in high risk sexual practices (Miller, Forehand, & Kotchick, 2000). In their quest not to be excluded from interaction with other members of their peer group, they can initiate sexual relations. In a study that was conducted at a Nigerian university, most student respondents (80.7%) reported that they believed that most people of their age group were engaging in premarital sex. The same students were also of the opinion that women on campus encouraged their female peers to engage in premarital sex, and also that men influenced their male peers to do the same (Okonkwo, Fatusi, & Ilika, 2005). Research suggests that a well-designed and well-implemented peer education programme can increase young people's knowledge and, to some extent, change their attitudes and sexual behaviours (Finger, Fischer, & Moffet, 2009).

In a Canadian study, Boyce et al. (2003) observed that students who stated that more than half of their friends had sex were also more likely to have had sex themselves. Yet, others engaged in sexual activity to raise their ego or status among their peers. Peers during adolescence are the preferential sources of information about sexuality. Therefore, their behavior may serve as reference norm for others with high potential of impact (Potard, Courtois, & Rusch, 2008). The perception of their peers on the subject of sexual behaviours is an important normative predictor of intention (Hollander, 2001) with regard to the beginning of sexual relations and engaging in sexuality (Sieving, Eisenberg, Pettingell, & Skay, 2006).

2.2.2 Pleasure

Many adolescents face pressures to use alcohol, cigarettes, or other drugs and to initiate sexual relationships at earlier ages, to put themselves at high risk for intentional and unintentional injuries and risky sexual behaviours (Teferra, Erena & Kebede, 2015). Most people believe that drinking increases the likelihood of sexual activity, enhances sexual experience, and promotes riskier sexual behaviour. Adolescents sometimes attribute risky sexual experiences to the fact that they were drinking and report drinking (or plying their partner with alcohol) to exploit alcohol's alleged disinhibiting effects on sexual behaviour (Cooper, 2006). Consistent with such belief, empirical research has generally supported this idea, with alcohol consumption being positively related to engaging in high-risk sexual behaviours (Leigh & Stall, 1993). These types of behaviour are more likely to occur when one or both sexual partners are under the influence of alcohol or drugs (Cooper, 2006). Females, particularly adolescent girls may end up with unwanted pregnancies, abortions, teenage deliveries, and various complications of these including death. Moreover, the girls may drop out from school to look after their children, and in most cases, they become economically reliant on upon their parents (Berihun, 2014).

Studies have reported that the likelihood that an individual has ever drunk alcohol is predicative of the likelihood that he/she has ever had sex (Mabille, 2009). Binge-drinking teens have been found approximately three times less likely to use condoms, and recent marijuana users are almost two times less likely to use condoms (Tapert, Aarons, Sedlar, & Brown, 2001). The use of marijuana, cocaine or other illicit drugs by adolescents has been shown to be associated with increased rates of sexual intercourse in general, having multiple sexual partners and lower rates of condom use, particularly for users of illicit stimulant drugs (Lowry, et al., 1994). The

results further suggest that the level of alcohol consumption also predicts the level of sexual involvement, and that drinking in a potentially sexual situation is associated with an increased probability of intercourse on the occasion in question (Mabille, 2009).

Benda and Leon (1995) detect that when students are in the transitional stage of like, pleasure and sensation is what most of them seek on campus. This study has revealed that students engage in premarital sex for a variety of factors. A student may engage in pre-marital sex with another person for pleasure. Premarital sex for pleasure is not rampant and it is associated with boys and girls who have enough money and materials. Students involved in pleasure sex do not have a permanent partner and consequently they are the potential victims of STDs/HIV/AIDs in most cases (Bender & Leone, 1995). According to said studies, drinking prior to intercourse is associated with risky partner choice, as well as with decreased risk discussion on the occasion concerned (Mabille, 2009).

2.2.3 Parental influence

The family shapes the sexual attitudes of adolescents by providing structure and guidance through the transmission of cultural norms and values, as well as opportunities for parental attachment, emotional closeness and a sense of support (Fako, 2010). Parents are shy to educate their adolescents on sex and sexual behaviours because of the fear that such discussion may stimulate their interest in sex, while others see education as immoral as a result of religious beliefs to discourage adolescents from pre-marital sex (Richard, 2001). According to a study by Klavs at al. (2005) the main factor associated with early sexual intercourse was not living with both parents up to the age of 15. Devine at al. (1993) found that parental divorce during early adolescence was a significant predictor of sexual risk behaviour for

females in later adolescence. Several studies confirmed that family structure can influence also other types of health risk behaviour. Many families are also shifting their role of educating adolescents on sex to other agents of socialization like schools and peer groups, thus gradually eroding the societal moral value that was obtainable in the past (Olubayo-Fatiregun, 2012).

Research has shown that parent–child communication about sexual matters occurs in most families. Such communication is usually initiated by the parents, and rarely by the young people in the family, with their talks usually reflecting the worries that parents have about their children’s sexual health. The talk usually takes the form of warnings, threats and physical discipline, and is mainly about abstinence, unplanned pregnancy and HIV. It is rarely about contraception and condoms (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010). Preparing children for entering into intimate relationships and providing them with an understanding of how to conduct themselves as sexual beings is a crucial aspect of socialisation (Rees-Weber, 2003). A study on Slovak young adolescents found that parental divorce may increase the likelihood of drunkenness more than other factors such as low parental support and poor socioeconomic position (Tomcikova, Geckova, Orosova, van Dijk, & Reijneveld, 2009). Some studies support the proposition that adolescents are less likely to engage in sexual risk-taking behavior when they reside with a parent—especially two parents—or when they identify with the views of their parents (Li, Stanton, & Feigelman, 2000).

Relatively low parental educational attainment also has an impact on parent–child communication (Crockett, Raffaelli, & Moilanen, 2003). The supply and amount of parental emotional resources for control can have a significant influence on the youth to have or not to engage in premarital sex (Magwaza & Bhana, 1991). Parent–

child communication is reported usually to be triggered by seeing or hearing something that parents perceive as negative and that they would not like their children to experience. Parents mainly communicate to their children after observing changes in their behaviours, which they blame on them having sexual relations. Reaching girls and boys at a young age is important to enable them consciously to choose their beliefs and actions (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010). Adolescents should be advised about sex before their sexual debut, as waiting to hear about clues of how to engage in sexual relations might be too late and difficult because of the generally secretive nature of sexual relationships (Rees-Weber, 2003).

Research has shown that the influence of the family on adolescents' sexual intercourse has been linked to the emotional support that parents provide for the adolescent during early adolescence (Neema, Ahmed, Kibombo, & Bankole, 2006). As much as it is observed that parent-child communication does happen, such communication is beclouded by parental inhibition and intergenerational tension. Parents usually shy away from such discussions, because it is generally believed that they might, by discussing the matter with them, unwittingly be encouraging their children to experience that about which they have been told (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010). It has also been found that living apart from parents and guardian was a risk factor for early sexual initiation and that father's absence or family disruption increased the odds of adolescents' adverse sexual health outcome (Ngom, Magadi, & Owuor, 2003). Adolescents whose parents were still married to each other were far less likely to have under-age sex (Olubunmi, 2011).

Family factors such as the relationship between the parents and adolescents in the area of care and protection, single parents, monogamy and polygamy and the parenting style cannot be ignored in the study of premarital sex. Family is the first

socializing agents that a child comes in contact with, and it goes a long way in defining and determining what the child will be. The most powerful sources of social influence are parents and family members. Another aspect of parental control is parent-child communication. Conventional wisdom would suggest that adolescents whose parents frequently engage in discussions (particularly discussions on reproductive and sexual Health issues) would be less likely to be sexually delinquent. In Ghana, national survey data showed that adolescent females who lived with both parents were less likely than females who had other living arrangements to have ever had sex, but the same was not found for males, and there was no association with number of sexual partners or contraceptive use for either gender (Karim, Morgan, & Bond, 2003).

Most studies have found stricter parental monitoring to be associated with a delay of first sexual intercourse and with consistent contraceptive and condom use as well (De Graaf, et al., 2010). Fako (2010) discovered that family cohesion, emotional bonding with important others and the stability of home environment have a determining effect on sexual activity. Fako's study reported that adolescents who were looked after by siblings (and not parents), and those who had no one looking after them were more likely to be sexually active than were those who were looked after by parents or other adult relatives. It is found that when a father lived in the same household as his never-married 12–19-year-old daughters, they were much less likely to have ever had sex, to have had an unwanted pregnancy or to have been recently sexually active than when neither parent or only the mother lived in the household (Ngom, Magadi, & Owuor, 2003).

Study of De Graff et al (2012) shows that low levels of family cohesion precipitates romantic initiation which seems to mediate sexual initiation, but this

findings were confirmed only among early adolescent girls. Family cohesiveness, parent–adolescent communication about sex, and parental monitoring have all been shown to help prevent adolescents from engaging in risky sexual behaviour (Olubunmi, 2011). Parents may not be fully equipped to answer questions on sexual matters usefully, as they sometimes lack appropriate knowledge on sexual and reproductive health issues (Wamoyi, Fenwick, Urassa, Zaba, & Stones, 2010). According to previous studies there are indications that both a high level of parental monitoring and support are associated with a later age of first sexual intercourse (Bersamin, et al., 2008) and with lower levels of STIs (Crosby, DiClemente, Wingood, & Harrington, 2002).

Some researchers have noted that in sub Saharan Africa, parent-child communication usually fraught with discomfiting, especially with fathers. Family as the first agent of socialization helps in shaping the life of an individual. The socialization given to one in the home has a big role to play in one's life in the Senior High School. Some student involve in premarital sex because of lack of parental control and home training. They come to school and behave anyway they like (Magwaza & Bhana, 1991). Parents have a responsibility for fulfilling the task of educating their adolescents about sexual matters (Olubunmi, 2011). Research has also established constructive parental monitoring as the most important and effective factor for mitigating the early onset of sexual activity for the adolescents (Coley, Votruba- Drzal, & Schindler, 2009).

2.2.4 Search for academic advantage

Female students in senior high schools who begin pre-marital sexual debut earlier appear more likely to have sex with high risk partners or multiple partners and are less likely to use condom and other contraceptives (Michelle & Adesegun, 2009).

Therefore, they are vulnerable to sexually transmitted infections including HIV/AIDS and unwanted pregnancy (Blessing, 2008). Students can occasionally engage in sex for academic advantage, specially the academically weak ones. Students who are academically weak become “lay ups” for any student that is academically sound and is ready to do his/ her assignments and exams (Wellings, et al, 2006). Some of the poor but intelligent students are always willing to come to the aid of dull student. They sometimes engage in sex with them and also collect money. As a result of search for academic advantage, female students sleep with male students as a payment for his writing examinations, assignments, copying notes etc. for her. Students know that if they don’t perform well in their academics, the school will withdraw them from the school. They go the extra mile to maintain academic excellence or good grades (Wellings, et al, 2006).

2.2.5 Economic reasons

This is a group of reasons that include the need for money, materialism and other valued goods like cellular phones, laptop etc. Economic reason is the main reason why student indulge in pre-marital sex rather than the other (influence, pleasure and academic) explanatory factors given in students have modern technology-driven material and enough money to lavish around, students need money to make ends meet and some of them can do –Anything to get the money they desire for high social status or fashion and material goods among the students is another factor for engaging in premarital sex (Ruth, 2009). Relative economic disadvantage is found to increase the likelihood of a variety of unsafe sexual behaviours and experiences of young women and men significantly. Low socioeconomic status influences sexual experiences in diverse ways, by increasing women’s and men’s odds of having multiple sexual partners, by lowering the female and male age at

sexual debut, by lowering chances of condom use at last sex, and by affecting communication with the most recent sexual partner regarding sensitive topics (Hallman, 2004).

Most students, after satisfying all their basic needs, go ahead to acquire things like sound sets, expensive dresses, iPhones etc. They go the extra mile acquiring things for themselves in immoral ways. Most students strive to acquire false status by pretending to be rich or to be from rich families. Poorer students are more vulnerable to being enticed into relationships for material gain. Hunger, poverty and desperation drive the young women concerned into engaging in transactional sex (Mutinta & Govender, 2012). Low socio-economic status has larger and more statistically significant effects on female than on male unsafe sexual behaviours (Hallman, 2004). Poverty or economic depravity has also been linked with premarital sexual practice among students. Girls whose parents are economically disadvantaged or less empowered are often times unable to adequately provide for their daughters and thus, their daughters are exposed to seek financial favours elsewhere. In this regard, research has shown that the most likely sources of obtaining such financial favours are from young and older men who in turn ask for sexual favours from such girls (Ruth, 2009). Said students arrived at school with little financial support for food and fees; they exchanged sexual relations for necessary commodities, like free transport to school, access to phones, food and housing. Such lack of disposable income encourages risky behaviour, because the partner who is provided for has little power to negotiate a situation of safe sex in either a casual or a committed relationship (Mutinta & Govender, 2012).

Ankomah (1999) observed that some females entered into premarital sexual relationships ostensibly for financial reward; because their parents could not meet

their basic needs such as paying for tuition fees. Research from South Africa has revealed that poorer women are more likely to have experienced early sexual debut, a nonconsensual first sexual encounter, and a higher rate of physically forced sex, or having engaged in sexual relations in return for money, goods or favours. The women concerned in the study also had more sexual partners and were less likely to use condoms than did their wealthier counterparts (Hallman, 2004). Not all students engaging in sexual relations in exchange for commodities had similar dire economic needs though, as social status also played a role in influencing the issue. Among the female students, social status was acquired through their access to the ‘latest’ items, like phones, clothes, and the ability to go on outings, and to eat nice food. The majority of students said that the pursuit of high-class lifestyles among the female students was influenced by a culture of consumerism. Thus, in wanting to acquire financial support for their ‘luxuries’, some students ended up engaging in sexually risky behaviour (Mutinta & Govender, 2012).

2.3 Consequences of Premarital Sex

The consequences of premarital sex are highly dreadful. Ukor (1990) believes that many adolescents indulge in sexual relationship with the opposite sex without really knowing the implications. The primary effort of this section is to make bare these harmful consequences of premarital sex. Adolescents in particular have been found to be the group at the highest risk for negative health consequences related to sexual risktaking behaviour, including STIs like e.g. chlamydia, gonorrhoea, syphilis, human immunodeficiency virus (HIV), and the occurrence of unintended pregnancies (Aggleton, 1995). It is known that early sex has implications for one's self-perception, social status and future health behaviour. Unprotected or poorly protected sexual intercourse increases the risk of unintended pregnancy with its myriad of possible

unfavourable outcomes for this age group, including abortion, early motherhood and adoption – each of which presents educational, economic, social and health challenges (Ellison, 2003).

According to Omoegun (1995) if there is one important area where the adolescents' reactions to their problems can be terribly marked, it is on the dangers and consequences inherent in premarital sexual activities. Once the adolescent decides to have sex before marriage, a number of consequences which are not pleasant await her. The potential risks associated with sexual behaviour among adolescents are mainly linked to the emotional and behavioural characteristics of this developmental period (Gabhainn, Baban, Boyce, & Godeau, 2009). A scholar like Menses (2008) believes that the most prominent effects of premarital sex are sexually transmitted infections and unwanted pregnancies. For those not employing barrier methods of protection, there is also the risk of STIs with serious short and long-term attendant medical, health and social implications (Gabhainn, Baban, Boyce, & Godeau, 2009). Condoms and hormonal contraceptive pills are considered the most appropriate methods of protection from STIs and from unintended pregnancies, respectively. Possible use of dual methods – both contraceptive pill and condom at the same time – confers an effective protection against pregnancy and a moderately effective protection against STIs (Blythe, Diaz, & Adolescence, 2007).

Early sexual activity can have consequences for young people's health and well-being, in particular if it occurs prior to being physically and mentally mature enough to cope with it (Godeau, et al., 2008). Moreover early initiation of sexual behaviour has been associated with adverse health outcomes such as increased risk of STIs and unintended pregnancies (Godeau, et al., 2008). Adolescents' physical immaturity contributes to an increased risk of acquiring STIs compared with adults.

Female adolescents, for example, do not have the same ability to combat STIs as adults, because their cervix is less able to exclude infections from the upper genital tract until two to three years after menarche. The risk is so great that a sexually active 15 year's old girl has a ten times higher risk of acquiring pelvic inflammatory disease (PID) compared with a 24 year old woman (Duncan, et al., 1990). The consequences include:

2.3.1 Health effects

Majority of young people involved in sex outside marriage are exposed to all sorts of sexually transmitted infections, such as syphilis, gonorrhoea, herpes, AIDS, etcetera. The prevalence of HIV and AIDS amongst cohabiting couples is on the increase. It should be noted that anyone who leads an unclean sex life runs the risk of catching these dreadful diseases. Indeed, graveyards have graves waiting to swallow the many young people dying from these terrible diseases (Smith, 2004). Most behavioural intervention programs which aim to inspire adolescents to recognize their own vulnerability to infection rely on the adolescents' perception of risk. Low perceived risk is generally assumed to be associated with high levels of risk-taking behaviour. If people do not feel that they are at risk of acquiring HIV, then they will not take steps to avoid it, and health promotion messages will be meaningless to them (Macintyre, Rutenberg, Brown, & Karim, 1999).

Scholar such as Okoye (2006) strongly believe that premarital sex poses a lot of health challenges to those who engage in it. Students who engage in premarital sex run the risk of contracting sexually transmitted infections (STI) such as AIDs, HIV, Chlamydia, Gonorrhoea, Genital herpes, general Warts, Trichomoniasis, syphilis and so on. These diseases are life-threatening, painful and can cause infertility. Students

who engage in group sex, sharp-sharp sex and sodomy account for a greater proportion of STI's victims.

2.3.2 Unplanned pregnancy

Unwanted pregnancy may be associated with greater likelihood of early motherhood, unsafe abortion, and other pregnancy related complications. These events in turn, increase risk of morbidity and mortality both in the mother and the child. Furthermore, early motherhood tends to impede female students academic performance, and eventually dropout from school. It often results in reducing their economic opportunity (Barbara, Wesley, Cynthia & Annabel, 2001). There are many girls who fall pregnant unexpectedly because they engage in premarital sex (Chitamun & Finchilescu, 2003). These unplanned and unwanted pregnancies force many of these children to seek legal or illegal abortions. This is often associated with premarital sex. When a pregnancy is an outcome of premarital sex, most students resort to abortion as a way of concealing their acts in order to avoid embarrassment. Premarital sexual behaviors such as early sexual debut and pregnancy are stigmatized in many sub-Saharan African settings as they are viewed to deviate from the norm, in that they are expected to occur within marital unions (Kabiru & Orpinas, 2009).

The girl feels ashamed to carry a pregnancy that is out of wedlock while the boy responsible for the pregnancy is not mature enough to tackle the responsibilities of fatherhood. Female students who are sexually active are often in relationships where they lack power due to having older and/or wealthier male partners (Marston, Beguy, Kabiru, & Cleland, 2013). Being in such relationships decreases their probability of having protected sex, thereby increasing their risk of unintended pregnancy and sexually transmitted infections (STIs) including HIV (Marston & King, 2006). According to Dike (2000) this act is most commonly associated with

females while males co-pilot the affair. An unsuccessful abortion could lead to death or the destruction of the womb. It could also lead to childlessness at later years.

Premarital sexual practices have given birth to illegal child trafficking. Young female students can now take in, only to deliver and dump babies' accordance with the management of such homes. Such babies are later adopted by couples who are childless. The practice of sharp-sharp sex was said to contribute for some unwanted pregnancy among to students. Sharp-sharp is carried out mostly in party venues and some of them are drunk and engaged in sex without condom (Dike, 2000). Premarital sexual activity and consequently pregnancy have socioeconomic consequences such as decreased probability of completing education, decreased probability of gainful participation in the workforce, lower social standing, and increased dependency on social welfare programs (Gupta, Katende, & Bessinger, 2003).

2.3.3 Victims of rituals

It is believed that engaging in sex deviant act may lead one to be victim to ritualise while trying to use what they have to get what they want. Some become bedridden with strange diseases, a lot of others never lived to tell the tale (Meunier, Roskam, Stievenart, Moortele, & Aarti, 2011). Most people who were looking for human parts for ritual purposes give huge amounts of money to greedy and materialistic students, who possibly would end up with missing part or death. Female students are more likely to be victims of rituals because they need money by all means to maintain high class in school. Students like this see themselves as the "big girls in school" (Meunier, Roskam, Stievenart, Moortele, & Aarti, 2011).

2.3.4 School dropout

Unwanted pregnancy often disrupts the education of female students, thereby increasing the chances of dropping out of school. When a girl becomes pregnant and drops out of school, she may never resume again except in rare cases (Edelman & Mandle, 2006). Even when the girl decides to remain in school, the challenges of unplanned pregnancy and motherhood may lead to poor academic performance. This had prevented many female students from achieving their educational goals. Consequently poverty may set in because job opportunities have decreased as a result of lack of education (Edelman & Mandle, 2006).

2.3.5 Depression

Studies have shown that most victims of rape, those who had unwanted pregnancies and those caught in acts of sodomy tend to more depressed than others who engage in premarital sex (Sederowitz, 1999). Depression may lead to risky sexual behaviour, increase one's ability to control impulsive behaviour, increase emotional reactivity in peer relationship, and reduce motivation and increases fatalism. These effects of depression may inhibit an individual clear perception of the risk of contracting an STD and their ability to prevent risky sexual behaviour (Khan, Shover, & Goodliffe, 2009). The emotional stress of breaking sexual relationships also causes depression. Young students tend to invest more in a relationship that seems real at first, and then suffer deeper pain and hurt when the relationship comes to an end. Depressed students and young adults are more likely to engage in risky sexual behaviours, have an increased risk of a sexually transmitted infection, and are less likely to use condoms or use them appropriately. In some cases drug use and alcohol consumption were said to be coping strategies or remedies for the depression the individual was passing through (Sederowitz, 1999).

2.3.6 Loss of self-respect

Student engagement in premarital sex leads to loss of self-respect. When a person falls so low and allows her to be used as a sex object she will certainly lose self-respect and personality in the eyes of both the person and the larger society (Haywood, 1996). Loss of self-respect also comes when students happen to contact STDs or were raped in the case of female students. Female students who engage in group sex, sharp-sharp sex or being watched by others while having sex, usually suffer a loss of self-esteem. Students who had abortion or got pregnant equally suffer from loss of self-esteem (Widmer, Treas, & Newcomb, 1998).

2.3.7 Feeling of regret or guilt

Zeelenberg (1999) defines regret as a negative emotion that one feels when remembering the past and imagining that the present would be different if one had behaved differently. Sexual regret may be experienced by some female students after a risky sexual experience. The consequences of the negative outcomes associated with sexual risk taking often have long-term detrimental effects. These outcomes can include damage to romantic relationships, family conflicts, financial concerns, damage to social reputations, legal disputes, and more (Turchik & Garske, 2009). Regretted sexual experiences are beginning to be recognized as significant and fairly common experiences in the lives of female students (Oswalt, Cameron, & Koob, 2005). In as much as a sexual act can be pleasurable, it leads to guilt and regret. Guilt about past sexual acts ends up crippling people when they become parents and most often they become very strict with their children's sexual behaviour, which in turn makes such children curious about sex acts and thus easily get involved when the opportunity comes up (Michelle & Adesegun, 2009).

Regret about romantic relationships is especially common in younger adults, who experience more relationship change and turmoil than do older adults (Jokisaari, 2003). Perceived consequences of regrets have been shown to be related to lower self-rated life satisfaction and increased physical ailments (Jokisaari, 2003). Regretted sex has been conceptualized as regret that an individual experiences when he or she reflects on past sexual experiences (Oswalt, Cameron, & Koob, 2005). Some female students regret losing their virginity because money or material things that won't last. Guilt is a form of regret, a feeling that a person has gone against her conscience or has done something morally wrong. Guilt comes as a result of the fear that parents are aware of one's sexual acts or would be upset if they know one is having sex. It is terrible when the guilt comes (Alemayehu, 2013). Regretted sexual experiences often occur in the context of excessive alcohol consumption (Eshbaugh & Gute, 2008). Alcohol is consistently associated with sexual assault (Abbey & McAuslan, 2004). Approximately 50% of sexual assaults involve alcohol consumption by the victim, the perpetrator or both (Abbey & McAuslan, 2004).

The likelihood of experiencing regretted sex may also depend on the individual's sexual values. In their study on sexual regret, Oswalt, Cameron and Koob (2005) found that the most common reason for regretting sex was that participants' decisions were inconsistent with their morals and values. If students make sexual decisions contradicting their value set, these values may be the cause of sexual regret after a sexual experience (Oswalt, Cameron, & Koob, 2005). Regret pertaining to sexual experiences may have long-term psychological consequences as well. Regret in general has been associated with emotions such as anger, shame, and embarrassment and even depression or other psychological disorders (Grello, Welsh, & Harper, 2006).

2.3.8 Poor academic performance

Studies have found that poor academic self-concept can lead to disengagement from school, and a downward spiral over time toward poor grades, and behavioural transgression (Honken & Ralston, 2013). Student engagement in premarital sexual practice can lead to poor academic performance. Problem frequently experienced by Senior High School female students due to premarital sex includes missed classes, missed assignment and poor academic achievement (Young, 2011). In the United States, a number of studies have shown that, teenagers who abstain from sex are more likely to graduate from high school and attend college than their sexually active peers (Sabia & Rees, 2009).

For many Senior High School students, Senior High School life is a major transition in their lives since they are accorded the chance to decide what to do without the undue influence of their parents. Many researchers believe that students' sexual relationship adversely affects academic performance. Most sexually active students perform poorly in their studies and faced several problems, which compromised their academic lives. Student sexual relationship is inherently short-term and unstable, which means, when it collapses the result is likely to be emotional turmoil and depression (Rector & Johnson, 2005). Academically, if a female student is psychological disturbed or depressed, she is likely to perform poor.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter describes the various methods and instruments employed in the study. It describes the study design that is used, site of the study, the population, the sample and sampling technique, research instruments, validity and reliability, data collection procedure and data analysis technique.

3.1 Research Design

The study used the descriptive survey design. Mikkelsen (1995) has identified two forms of triangulation which are ~~within method~~” triangulation and ~~between method~~” triangulation. ~~Within method~~” triangulation involves using the same method on different occasions whilst the ~~Between methods~~” triangulation is where different methods are used in the same study. The study used the ~~within method~~” triangulation where both open and closed ended questions were used in the same questionnaire. Bryman (2006) calls this ~~the use of varieties of the same method to investigate a research issue~~”.

The study employed the descriptive survey design because of the numerous advantages it offers. Decrop (1999) has observed that triangulation opens the way for richer and potentially more valid interpretations. These are important of research design;

1. Data collected from descriptive research is helpful in important decision-making because the data is obtained from a large population. Because using the descriptive survey method, statistical information can be obtained, and analysis of that data can be made to deduce desired results.

2. A variety of data can be obtained using different descriptive research methods like surveys, observation, and case study. These three research methods provide different type of data which can be used to analysis for a research problem. for example, using the case study research method can be used to develop a hypothesis about a research problem.
3. one advantage of descriptive research over other research methods is that it is cheap and quick to conduct descriptive research. You don't require having a great place dedicated only to research. Descriptive research like observation research can be held in natural settings, and you can distribute surveys to people online or get them answered by random people at your business place or other public places.

3.2 Site of the Study

The West Mamprusi Municipality is one of the six municipalities and districts assemblies in the newly created North East Region. It shares boundaries with Mamprugu Moaduri district to the West, East Mamprusi Municipality to the West and bordered the Upper East and Northern Regions to the North and South respectively. The Municipality has a population of 121,117 and projected population to be 153,361 in 2020, according to the 2010 Population and Housing Census Report. There are four Senior High Schools in the Municipality with two of them in the Municipal capital, Walewale and the other two in two different communities.

3.3 Population

The study population comprised of female students in Senior High Schools in the West Mamprusi Municipality of North East Region of Ghana between the ages of 10-20 years and 20 years above. The study population is estimated to be 4520. The

age category is within the late adolescence and most Senior High School female students are within this age group.

3.4 Sample and Sampling Technique

The sample size of ninety (90) was used by the researcher with thirty (30) each from the three schools. This size is suitable for a descriptive survey design and is representative enough for a valid generalization. Both Probability and Non-probability sampling techniques were employed for the study. Purposive sampling technique as a non-probability sampling technique was used in the selection of the schools. In the selection of the schools for the study, the researcher used sound judgment based on specific purposes associated with answering research questions. This technique provided more reliable responses from respondents.

In the selection of respondents for the study, Stratified Random Sampling technique as a probability sampling technique was used. This was appropriate since the students were in mutually exclusive year-groups. Students were stratified according to the courses they are offering in the school and proportionate random sampling technique applied to select the corresponding proportions of five (5) students from each class (3 General Arts classes and 3 Home Economics classes) for the study. The Stratified Random Sampling technique was employed to ensure greater representation for a valid generalization.

Three (3) classes each of Home Science and General Arts were purposively selected based on the fact that these two courses have the largest number of female students in the selected schools. Five (5) students were then randomly selected from each class with the use of the class register. This was done by assigning numbers to the list of female students and one number was randomly picked at a time. The student whose name corresponded with the selected number became part of the

sampled respondents for the study. This process was repeated in all the selected classes till the sample size of thirty (30) for each school and the overall sample size of ninety 90 was arrived at.

3.5 Research Instrument

In line with the –within method” triangulation, the research instrument used for the study is self-administered questionnaire which has both closed and open ended questions. It is asserted that questionnaires are widely used for collection of data in educational research and when well developed to answer research questions, they are very effective for obtaining factual information about practices, enquiring into opinions and attitude of the subjects (Sekaran & Bougie, 2016).

The questionnaire comprised of four sections (A-D) with section A asking for general demographic information of the respondent. This included the age and the level/form of the respondent. Section B required data on sexual behavior in detail, including their involvement in sex, the age at first pre-marital sex, multiple sexual partners. Section C requested for data on respondent’s guardian. This included the level of education of guardian, readiness of guardian to educate respondent on sex. The last section required data about environmental factors such as sources of information on sex, use of contraceptives and the state of sex education in Senior High Schools in the Municipality.

The respondent also had the opportunity to express her view on whether family planning is be made available in Senior High Schools in Ghana or not.

This research instrument was used for the reasons that, it gives the respondent enough time to respond to the questions appropriately with greater accuracy and precision. It also reduces researcher’s interference in the data collection process.

3.6 Validity and Reliability

Content Validity is very vital in every research. It is against this backdrop that the research instrument for this study was subjected to strict scrutiny by experts in measurement and evaluation to ensure that its content relate to and adequately measures the objectives of the study. This procedure is supported by Fraenkel, Wallen and Hyun (2012) who opined that the common way to have instrument validated was to have individuals or preferably experts look at the content and format thereof and render intelligent judgment about the extent to which the items captured on the research instrument are adequate. The supervisor for this work scrutinized the questionnaire thoroughly base on the adequacy of its content. A friend who is a Phd student also went through the instrument and passed a positive judgment on the instrument, making it fit for purpose.

The instrument was altered a little after a trial-testing was carried out. Ambiguous items were made clearer and irrelevant items completely removed with a few relevant items included. This trial-testing was done using final year female students of Presby Junior High School in Walewale. The final year students of this school were chosen since they are about to move to Senior High Schools and some of them are with the age group under consideration.

The internal consistency was measured to determine the reliability of the content on the instrument using the Cronbach co-efficient alpha;

$$\alpha = \frac{N\bar{c}}{\bar{v} + (N - 1)\bar{c}}$$

Where N is equal to the number of items, \bar{c} is the average inter-item covariance among the items and \bar{v} is the average variance. The computed Cronbach co-efficient alpha was =0.87 indicating a very high internal consistency of the

research instrument. Fraenkel and Wallen (2009) stated that the reliability item can be accepted if the alpha is within 0.70 and 0.99.

3.7 Data Collection Procedure

The data collection process took two (2) weeks to complete. The researcher introduced himself to the authorities of the three schools, starting with Wulugu Senior High School, Saint Pauls Senior High School and ended with Walewale Senior High/Technical School. The research was well explained to the authorities of the school and the researcher was assured of their support and cooperation. The first week was devoted for the selection of the respondents and the distribution of the research instruments to self-administer. The instrument was well explained to them and all issues regarding the instrument were clarified.

The collection of the administered questionnaire took place in the following week. All questionnaires were returned with 98% of all questioned responded to. Extra ten (10) questionnaires were given to make up for unreturned ones but these were not used since all the questionnaires were returned.

3.8 Data Analysis Plan

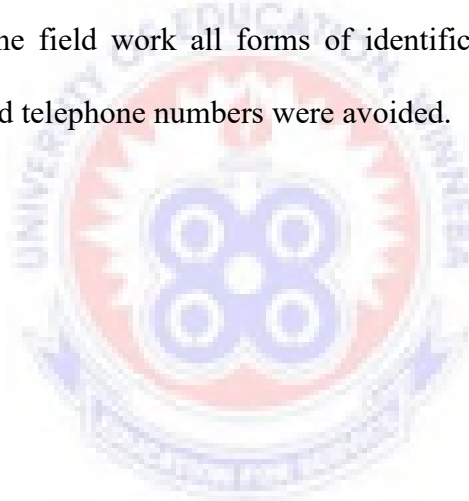
The researcher received all the questionnaire distributed and that made up a 100% returning rate with 98% of the questions responded to. Data collected from the field were first cross-checked to ensure that they were correct and without significant errors. Responses were put into excel for easy analysis.

Means and standard deviation of the composite scores for the participants were computed to ascertain the direction of responses for decision making. Data on the demographic characteristics of respondents were presented using frequency, tables and percentages.

Research question one (1) and four (4) were analysed using pie chart while research question two (2), three (3) and five (5) were answered using bar charts.

3.9 Ethical Issues

Ethical issues were not left out during the field work. Proper permission was sought from the school authorities of the selected schools before the field work was embarked on. The purpose of the study and the nature of the questionnaire were also made known to the respondents. The consent of the respondent was sought and was assured of utmost confidentiality and anonymity. Participation in the study was not compulsory and respondent's decision to participate or not to participate was respected. During the field work all forms of identification including respondents' names, addresses and telephone numbers were avoided.



CHAPTER FOUR

RESULTS AND DISCUSSION

This chapter presents the analysis and discussion of data collected on the demographic characteristics of respondents, the knowledge of respondents on premarital sexual practice, and the factors influencing its practice, the frequency at which students engage in premarital sex, the use of contraceptives during sex and concern of female about the consequences of premarital sex. The presentation of the results is done according to the research questions.

4.1 Results

Age distribution of respondents

Table 1: Age of respondent

Group	Frequency	Percent (%)
10 – 12	1	1.1
13 – 15	40	44.4
16 -20	45	50.0
20 and above	4	4.4
Total	90	100.0

Source: 2020 field Survey

As shown in table1 above, out of the 90 respondents used for the study, only 1 representing 1.1% of the total respondents was below 13 years with 40 respondents representing 44.4% falling within the age brackets of 13 and 15. 45 of the respondents also representing 50% of the total number of respondents were between 16 to 20 years of age while only 4 representing 4.4% of the total number of respondents were 20 years and above. It is clear from the data that majority of the respondents used for the study are in their late adolescence and early adulthood.

Research question 1: How involved are female students in premarital sexual practice in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?

This research question sought to assess the knowledge of respondents in premarital sex in terms of their involvement in the act. The chart below presents the data on the involvement of respondents in premarital sex.

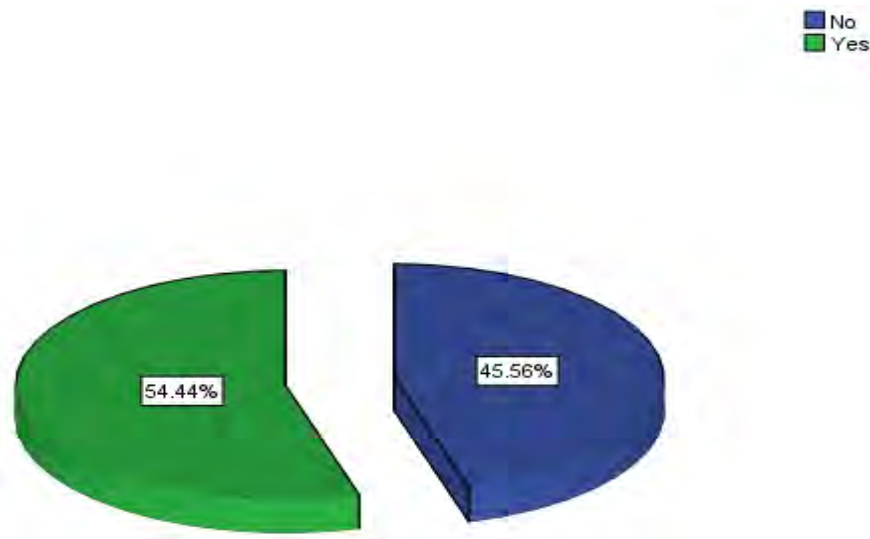


Figure 1: Involvement in premarital sex

Source: 2020 field survey

From the figure 1 above, 49 respondents represented by 54.44% of the 90 respondents for the study said they have been engaged in premarital sex while only 41 respondents representing 45.56% said they have not been engaged in any premarital sex yet. The practice of premarital sex among students is very high with over half of them engage in the act.

Research question 2: How often do female students of Senior High Schools in the West Mamprusi Municipality engage in premarital sex?

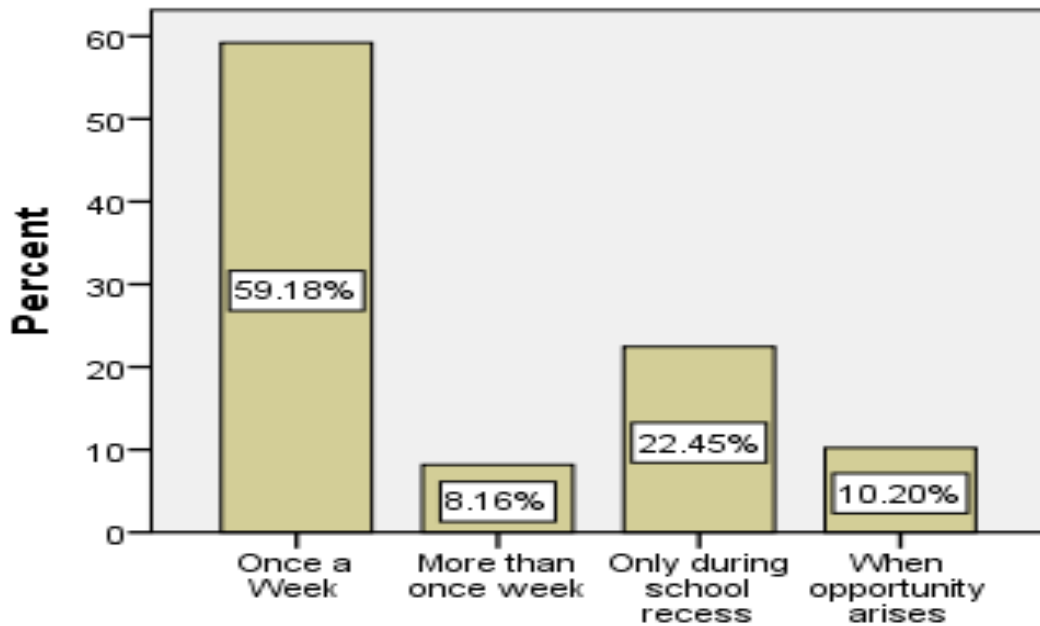


Figure 2: Frequency in having sex

Source: 2020 Filed Survey

Out of the 49 respondents who said they have been involved in premarital sex, 29 of them, representing 59.18% said they practice the premarital sex once a week with 11 of them also representing 22.45% said they only practice premarital sex when school is in recess. 4 of them who constitute 8.16% of the 49, said they engage in the act more than once in a week while 5 of them also representing 10.20% said they engage in the act when the opportunity to have sex is presented to them. The frequency in the practice of premarital sex is very high and is almost part of the weekly routine of majority of these students.

Research question 3: How widespread is the use of contraceptives among female students of Senior High Schools in the West Mamprusi Municipality during sex?

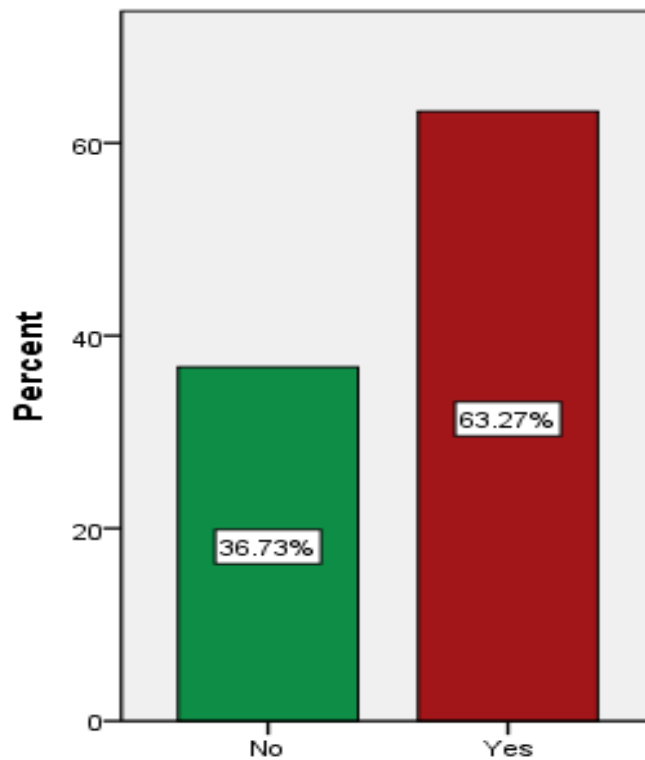


Figure 3: The use of contraceptives during sex

Source: 2020 Field Survey

Out of the 49 respondents from the total number of 90 respondents who said they engage in premarital sex, 31 of them representing 63.27 say they use contraceptives during sex while the remaining 18 representing 36.73 say they do not use contraceptives during sex. Over half of the students who engage in premarital sex use contraceptives to protect themselves.

Table 2: Use of contraceptives

Contraceptive	Frequency	Percent (%)
None	18	36.7
Condom	26	53.1
Emergence Pills	4	8.2
Others	1	2.0
Total	49	100.0

Source: 2020 field Survey

From table 2, 26 respondents out of the 31 who use contraceptives, use condom for protection during sex while 4 respondents use emergency pills for protection during sex with 1 respondent resorting to other means of protection. Condom is the commonest contraceptive used by students. This is largely due to its availability and affordability to students.

Research Question 4: What are the factors influencing premarital sexual practice among female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?

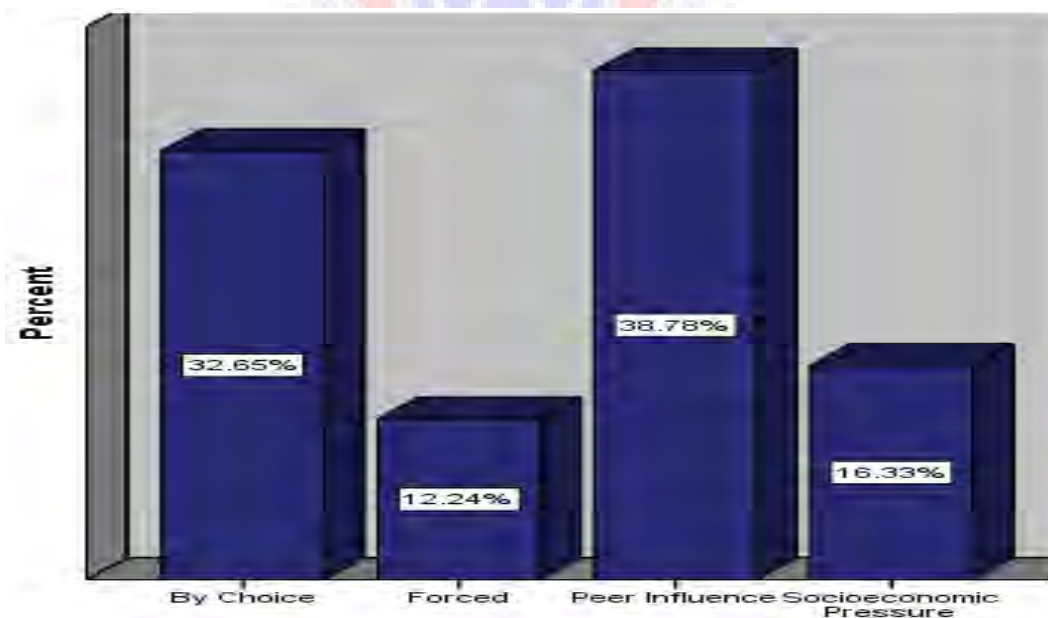


Figure 4: Reasons for engaging in premarital sex

Source: 2020 Field Survey

From figure 4, out of the 49 respondents who engage in premarital sex, 19 of them, representing 38.8% attribute their involvement in premarital sex to peer influence while 16 of them representing 32.7% said they chose to engage in the act. 8 respondents who constitute 16.33% blamed socioeconomic pressure for their practice of premarital sex while 6 of them said they have been forced to engage in the practice. It is evident from the above that, peer influence is the major factor that influences many students into the practice of premarital sex in most Senior High Schools.

From figure 1, 41 respondents representing 45.56% of the total number of respondents said they have not engage in any premarital sex yet.

Figure 5 presents the findings on the reasons for their abstinence from premarital sex.

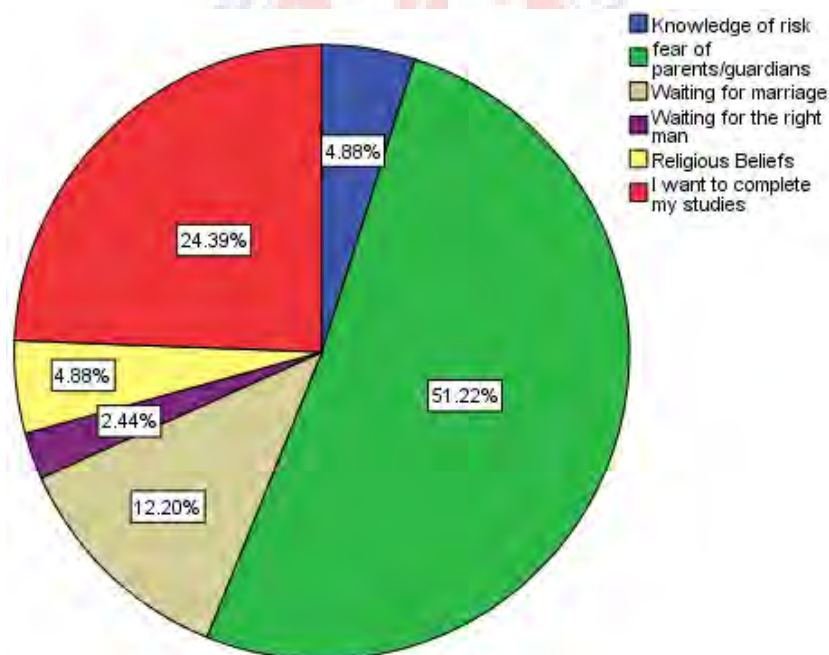


Figure 5: Reasons for abstaining from premarital sex

Source: 2020 Field Survey

From figure 5, 51.22% of respondents attribute their abstinence from premarital sex to fear of guardians/parents with 24.39% saying their desire to complete their studies is the main reason for their abstinence from premarital sex.

Whilst 12.20% of respondents are saying that they are waiting for marriage before engaging in premarital sex, 4.88% attribute their abstinence to their knowledge on the risks of premarital sex. 4.88% say they are waiting for the right man before engaging in premarital sex with 2.44% attributing their abstinence to religious beliefs. From the above, over half of the students fear their parents/guardians well enough to abstain from premarital sex.

Table 3 presents data on student's sex behavior and the level of education of student's guardian.

Table 3: Crosstabulation of student's sex behavior and the level of education of student's guardian?

		What is the level of education of guardian		
		No Formal Education	formal Education	Total
Had Sex	No	5	36	41
	Yes	39	10	49
Total		44	46	90

Source: 2020 field survey

From table 3 above, out of the 41 respondents who said they have not practiced premarital sex, 36 of them have parents/guardians who have had formal education with only 5 whose parents/guardians have no formal education. With the 49 respondents who admitted practicing premarital sex, 39 of them have parents/guardians who have not had formal education while only 10 of them have parents/guardians with formal education. This data shows that, the level of education of parents/guardians has an influence on the practice of premarital sex by students. Thus, students whose parents/guardians have received formal education are more likely to abstain from premarital sex than those whose parents/guardians have not received formal education.

Question five (5): What is the state of sex education for female students of Senior High Schools in the West Mamprusi Municipality use contraceptives during sex?

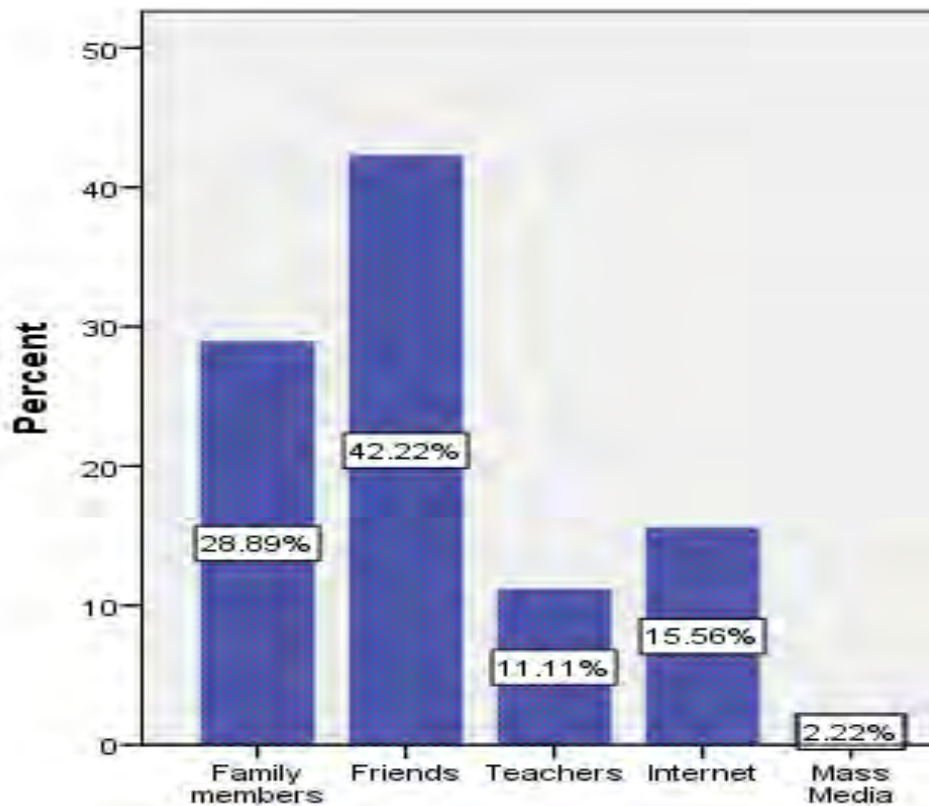


Figure 6: Source of sex education

Source: 2020 Field Survey

Figure six (6) above presents data on the source of sex education to respondents. From the data, 42.22% of respondents say they receive sex education from their friends, 28.89% say family members are a source of information on sex to them, 15.56% receive sex education from the internet with teachers serving as a source sex education to 11.11% of the respondents while 2.22% of them receive sex education from the Mass Media. From the above, most of the respondents do not receive sex education from professional sources. This explains the rampant practice of indiscriminate sex among female students in Senior Schools of the North East Region. Most schools do not have a functioning unit that is responsible for sex education. This

renders these young girls resort to seeking sex education from their colleagues and elderly siblings.

It is also discovered that only a few respondents can openly discuss sex related issues with their parents/guardians without fear, shame and intimidation. Few others depend on lessons on reproductive health in the class to receive sex education. Since lessons on reproductive health in the class are not that comprehensive sex education, the knowledge of recipients on sex education is limited. Figure 7 below shows that 57.78% of respondents say they do not receive sex education in school while 42.22% say they receive sex education in school.

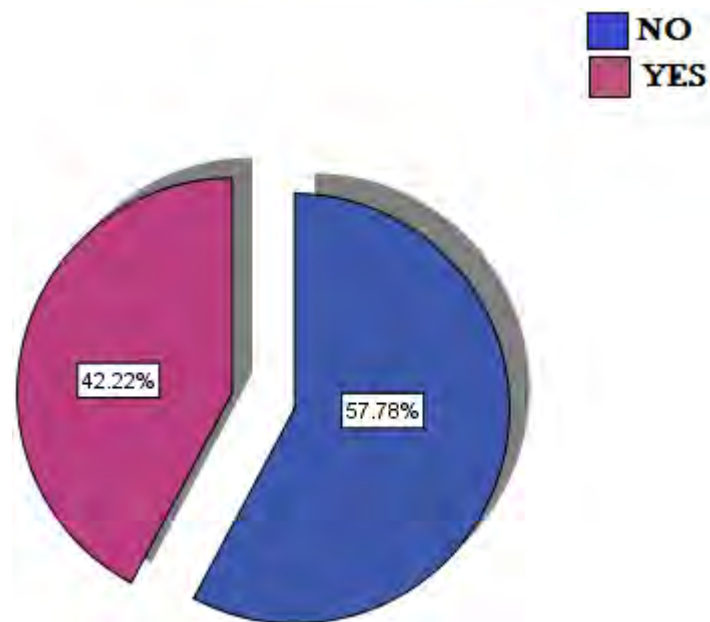


Figure 7: Sex Education in schools

Source: 2020 Field Survey

The absence of sex education professionals makes female students vulnerable with some resorting to seeking knowledge on sex from the internet which is proliferated with a lot of wrong and inappropriate information on sex.

From table 4 below, 58 respondents representing 58.90% of the total number of respondents agreed that Family Planning Services should be made available in schools while 32 respondents who represent 42.10% said Family Planning should not be allowed in schools.

Table 4: Making family planning services available in schools

Response	Frequency	Percentage (%)
No	37	41.1
Yes	53	58.9
Total	90	100.0

Source: 2020 Field Survey

4.2 Discussion of Research Findings

This study sort to explore premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana. With the use of self-administered questionnaire and a sample size of 90 respondents, the researcher sort for answers for the following research questions;

- i. To know how involved female students are in premarital sexual practice in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana.
- ii. Discover how frequent students of Senior High Schools in the West Mamprusi Municipality engage in premarital sex.
- iii. Assess the use of contraceptives by students of Senior High Schools in the West Mamprusi Municipality.
- iv. Identify factors influencing premarital sexual behaviour of female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana.

- v. Assess the state sex education given to female students in Senior High Schools in the West Mamprusi Municipality of North East Region.

A number of findings were obtained in the study conducted. The main findings of the study include;

- i. The practice of premarital sex among students is very high with over half of them engage in the act.
- ii. The frequency in the practice of premarital sex is very high and is almost part of the weekly routine of majority of these students.
- iii. Over half of the students who engage in premarital sex use contraceptives to protect themselves.
- iv. Aside socioeconomic pressure, forced and by choice, peer influence is the major factor that influences many students into the practice of premarital sex in most Senior High Schools.
- v. Most schools do not have a functioning unit that is responsible for sex education.

4.3 Involvement of Students in Premarital Sex

The practice of premarital sex is wide spread among female students. It is almost a part of the weekly routine of some of these young women who have little knowledge on sex and its effects. The situation is further compounded by the fact that female students have little knowledge and appreciation for the use of contraceptives to protect themselves during sex. Majority of those who engage in premarital sex do not use contraceptives to protect themselves during sex. They are therefore exposed to sexually transmitted diseases and unwanted pregnancy with its negative effects. This collaborates the assertion by Tilahun and Ayale (2013) that Youth who begin early

sexual activity are more likely to have high-risk sex or multiple partners and are less likely to use condoms.

4.4 Frequent Engagement of Students in Premarital Sex

The frequency in the practice of premarital sex is very high and is almost part of the weekly routine of majority of these students. Majority of female students who become involved in premarital sex do so because of peer pressure. They look at their peers and give in to temptation, because *'everyone does it'*. They do it in order to avoid being laughed at and to receive affirmation from their peers. In the end, premarital sex has become kind of passport to acceptance in a particular age group (Mwaba & Naidoo, 2005).

4.5 Use of Contraceptives

Over half of the students who engage in premarital sex use contraceptives to protect themselves. Contraceptive use reduces the need for abortion by preventing unwanted pregnancies. Pregnancy and childbirth carry risks of morbidity and mortality. Although the contraceptives that couples use to avoid pregnancy have their own health risks, they also have substantial non contraceptive health benefits. Oral contraceptives, for example, not only prevent pregnancy, but they also reduce the risk of endometrial and ovarian cancer and protect against acute pelvic inflammatory disease and ectopic pregnancies. However, oral contraceptives increase the risk of cardiovascular disease (Scrimshaw, 1978).

4.6 Factors Influencing Premarital Sex

Aside socioeconomic pressure, forced and by choice, peer influence is the major factor that influences many students into the practice of premarital sex in most Senior High Schools. Peer influence is the major factor that informs young females'

decisions on matters relating to sex. Majority of female students who become involved in premarital sex do so because of peer pressure. These young girls fear and others shy to talk about sex related matters with family members and professionals but rather feel comfortable discussing such issues with their peers who equally have little knowledge on sex education. This is supported by Forehand & Wierson (1993) statement that in adolescence, peers become a crucial source of modelling, reinforcement, and support concerning their own behaviour, value and beliefs system. Female adolescents believe in what they are being told by their group of friends to whom they can turn for advice and such advice is taken ‘line, hook and sinker’. This explains the wide spread of the practice of premarital sex among young females and its negativities.

4.7 Sex Education

The guidance and counselling units in schools are ineffective and non-functional. The dysfunctional nature of schools on sexual education has promoted the spread of premarital sex. The schools are not effective and functioning units for sex education and control of premarital sex among students. The youth rely more on friends, social media and the internet which are not professional sources, for sex education.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

This chapter gives a summary of the study undertaken. It brings to the fore the conclusions drawn from the study and makes some recommendations.

5.1 Summary of the Key Findings

The main focus of the study was to explore the premarital sexual behaviour of female students in senior high schools in the West Mamprusi Municipality of North East Region, Ghana. The West Mamprusi Municipality is one of the six municipalities and districts assemblies in the newly created North East Region. The study sort to answer the following research questions;

1. What is the knowledge of female students on premarital sexual practice in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?
2. How often do female students of Senior High Schools in the West Mamprusi Municipality engage in premarital sex?
3. How widespread is the use of contraceptives among female students of Senior High Schools in the West Mamprusi Municipality during sex?
4. What are the factors influencing premarital sexual practice among female students in Senior High Schools in the West Mamprusi Municipality of North East Region, Ghana?
5. What is the state of sex education for female students of Senior High Schools in the West Mamprusi Municipality use contraceptives during sex?

Through the use of self-administered questionnaires, data was collected from 90 female students selected from three (3) Senior High Schools. Majority of the respondents used for the study are in their late adolescence and early adulthood. The data was computed and presented in frequency tables and charts. The following were the key findings of the study.

1. The study revealed that the practice of premarital sex among students is very high with over half of them engage in the act.
2. The study revealed that the frequency in the practice of premarital sex is very high and is almost part of the weekly routine of majority of these students.
3. The study revealed that over half of the students who engage in premarital sex use contraceptives to protect themselves.
4. The study revealed that aside socioeconomic pressure, forced and by choice, peer influence is the major factor that influences many students into the practice of premarital sex in most Senior High Schools.
5. The study revealed that most schools do not have a functioning unit that is responsible for sex education.

5.2 Conclusions

A number of conclusions were drawn from the research and are presented below. The practice of premarital sex among students is very high with half of them being at risk of contracting Sexually Transmitted Diseases for not using protection during sex.

Furthermore, peer influence is the major factor that influences many students into the practice of premarital sex in most Senior High Schools with parents and schools less involved in sex education. This makes the practice more common among female students.

Finally, the data also shows that, the level of education of parents/guardians has an influence on the practice of premarital sex by students. Thus, students whose parents/guardians have received formal education are more likely to abstain from premarital sex than those whose parents/guardians have not received formal education.

5.3 Recommendations

The following recommendations have been made based upon the findings of the research;

- a. Senior High Schools in the West Mamprusi Municipality should have functioning guidance and Counselling units that should carry out comprehensive Sex Education in line with the Ghanaian culture.
- b. Public education should be carried out for the purpose of educating parents and guardians on the need to openly discuss sex related issues with their adolescent wards in the West Mamprusi Municipality.
- c. The Ghana Education Service and National Council for Curriculum and Assessment should ensure that the curriculum places much emphasis on Sex Education in Pre-tertiary institutions in Ghana.
- d. The Ghana Education Service in collaboration with the Ghana Health Service should make available Family Planning Services to students.

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APPENDICES

APPENDIX I

PARTICIPANT INFORMATION SHEET

Participant Information Sheet

Introduction and aim of the research study:

My name is David Appiah Korang, a Postgraduate Diploma in Education research student at the Department of Educational Foundations, University of Education, Winneba. I am conducting a research study which aims to explore the premarital sexual behavior of female students and to identify factors influencing premarital sexual practice among female students, as well as to determine the consequences of premarital sexual practice among female students in senior high schools in the Walewale Municipality of North East Region, Ghana.

Data collection:

I would like to ask for your approval to fill an anonymous questionnaire that has demographic-related questions in general on sex, age, socio-economic status, senior high school, religion, sexual activity and so on. This questionnaire aims to help me better understand my sample.

Voluntary participation:

Your participation on the research study is completely voluntary. You can refuse to take part in this study, as no one will oblige you to participate.

Confidentiality and privacy:

Privacy and confidentiality are two of the most important components of this study. All questionnaires will be anonymised and no identifiable data will be used. The participants' will fill the questionnaires in a private and comfortable venue to ensure confidentiality. To ensure confidentiality, all data provided by participants

(questionnaire) will be saved in safe files and in a locked place. Only the researcher (myself) will access the data, transcribe it and analyse it. The findings and data from the questionnaire will be presented anonymously without indicating the participants' identity.

Contacting the researcher:

If you have any further questions or concerns, I will be glad to answer your questions and issues of concern. You can reach me through email:
davidappiahkorang@gmail.com.

Informed Consent Form

I agree to take part in the Postgraduate Diploma in Education research study on –Exploration of premarital sexual behavior of female students in senior high schools in the Walewale Municipality of North East Region, Ghana” which is conducted by research student, David Appiah Korang, at the Department of Educational Foundations, University of Education, Winneba. I have had the research study fully explained to me and I have read the information sheet about the study which I may keep for my own personal records. I understand that my own contribution will be used for postgraduate research and that I can withdraw from the research at any time. I also understand that this research study will be carried out in accordance with the University of Education’s Code of Research Ethics. Material gathered as part of this study will be treated as confidential and securely stored in accordance with the Data Protection Act 1998.

Name [or initials]

Signature

Date

APPENDIX II
QUESTIONNAIRE

Questionnaire

Section A: Social Demographics

1. What is your age?

i. 10 – 12

ii. 13 – 15

iii. 16 – 20

iv. 20 and above

2. Which type of secondary school do you attend?

i. Boarding school (mixed)

ii. Boarding school (boys/girls)

iii. Day school (mixed)

iv. Day school (boys/girls)

3. What form are you currently in?

i. Form one

ii. Form two

iii. Form three

Section B (a): Sexual Behaviour

4. Have you ever had sexual intercourse?

Yes

No

If no continue from section B(b).

5. How old were you when you first engaged in sex?

6. What was the age of your sexual partner?

7. What is/was the gender of your sexual partner?

- a) Same gender
- b) Opposite gender
- c) Both male and female

8. What was the relation between you and your first sexual partner?

- a) Classmate
- b) Relative
- c) Neighbor
- d) Teacher
- e) Friend
- f) Stranger

9. Why did you engage in sexual intercourse?

- a) By choice
- b) Forced
- c) Peer influence
- d) Socioeconomic pressure. (needed money)
- e) Others (specify).....

10. Did you use any contraception during this encounter?

Yes No

If yes, which one?

- a) Condom
- b) Emergency pills
- c) Other (specify).....

11. How many sexual partners have you had in the past year?

12. How frequently do you engage in sexual intercourse?

- Once a week
- More than once a week
- Only during school recess
- When opportunity arises

13. How regularly do you use contraceptives?

- Always
- Sometimes
- Never

Section B(b): None Sexually Active

14. What is the reason for your abstinence?

- Knowledge of risks (pregnancy, STI, HIV/AIDS)
- Fear of parents or guardians
- Waiting for marriage
- Waiting for the right partner
- Religious beliefs
- I want to complete my studies

Section C: Family Factors

15. Who is your guardian?

- a) Mother and Father
- b) Father
- c) Mother
- d) Others (specify).....

16. What is the level of education of guardian?

- i. Primary Education
- ii. Secondary
- iii. Tertiary
- iv. None

17. Have you ever had any discussion on sex with any of your parents or guardians?

Yes No

If yes, which one

- a) Father
- b) Mother
- c) Both father and mother
- d) Older sibling
- e) Guardian
- f) Others (specify).....

Section D: Environmental Factors

18. What is your main source of information regarding sex?

- a) Family Members
- b) Friends
- c) Teachers
- d) Internet
- e) Mass media
- f) Others (specify).....

19. Have you ever had a lesson on sexual education in school?

Yes

No

20. Rank the following consequences of premarital sex using (1) Extremely Concerned. (2). Moderately Concerned. (3). Somewhat Concerned. (4). A little Concerned. (5). Not at all Concerned;

i. Unwanted Pregnancy

ii. Contracting STDs

iii. Dropping out of School

iv. Stigmatization

v. Disciplinary Measures at School

21. Do you think family planning should be availed in schools? Yes

No

22. What about availing condoms only? Yes No

