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Sexual Behaviours and Contraceptive Use among Students of Tertiary Institutions in Kwara State, Nigeria

Okesina, Falilat Anike Ph.D; Hammed, Ayuba Olawale; Mustapha, Mulikat Ladi Abdulkadir, Ph.D and Saadu, Yusuf Olatunji

Department of Counsellor Education, Faculty of Education, University of Ilorin, Nigeria
hammedayuba66@gmail.com. +2348065242872

Abstract

Sexuality is an essential issue of concern around the world; and the rate at which students of tertiary institutions engage in sexual behaviour is a major source of concern to the stakeholders. The study investigated sexual behaviours and contraceptive use among students of tertiary institutions in Kwara State, Nigeria.

Descriptive research method was employed, while multistage sampling procedure was adopted to draw a total of 500 respondents across the three Senatorial Districts in Kwara State. Sexual Behaviours and Contraceptive Use Questionnaire (SBCUQ) was used to obtain data. Hypotheses generated and the collected data were analysed using frequency count, percentage, PPMC, t-test and ANOVA statistical method at 0.05 level of significance.

The study revealed that holding hands of the opposite sex, looking at sexy pictures and hugging the opposite sex are common sexual behaviours among the respondents. Also, condom, pills (oral contraceptives) and spermicides are commonly used by the respondents. The findings of the study showed no significant relationship between sexual behaviours and contraceptive use. Significant difference was found in the sexual behaviours of respondents based on age.

Among others, it was recommended that fresh students should be properly orientated by counsellors on sexuality at the beginning of their academic year.

Keywords: sexual behaviours; contraceptive use; students; tertiary institutions

Introduction

Sexuality among Nigerian students is usually expressed in different ways through dress code, manners and gifts. Men are usually louder and have more domineering attitude in manners while women tend to be calm and soft spoken. However, some expressions of sexuality are considered irresponsible in Nigeria, especially among students. Some of those are: wearing heavy make-up, putting multiple coloured hairs, wearing skimpy dresses, a male wearing an earring, kissing and hugging in public places (Alubo, 2000).

Nigerian students engage themselves in sexual activities for different reasons. The most predominant reasons may be pressure from peer groups and economic gains. These students rely mainly on advice from peers and self medication for prevention of pregnancy and for treatment of infection, respectively (Alubo, 2000). Sexual behaviours are forms of physical intimacy that are directed to reproduction or to the enjoyment of any activity involving sexual gratification (Mufflin, 2004). It is a form of behaviour that brings about arousal in and increase the chance of orgasm.

According to Wood (2003), human sexual behaviour is driven by desire for sexual pleasure, encompasses searching for a partner or partners, interactions between individuals, whether physical or emotional intimacy, or sexual activities that may lead to foreplay, masturbation and ultimately orgasm. Human sexual activity, human mating strategies, human sexual practice, or human sexual behaviour is a manner in which human being express their sexuality. People engage in a variety of sexual acts from time to time and for a wide variety of reasons. Sexual activity normally results in sexual arousal and physiological changes in the aroused person, some of which are pronounced while others are more subtle.

Olatunji (2000) identified eight sexual behaviours of female undergraduates in two Nigerian universities. These include kissing, petting, stimulation of breasts, stimulation of genitals, oral genital sex, anal coitus, masturbation and sexual intercourse. Most students experiment a range of sexual activities during their lives, while only few avoid them altogether for religious or other concealed reasons.

One of the prominent factors which have not been given adequate attention is the role of religion in students' sexual behaviours. Since most religious groups discourage premarital sex, the degree of commitment to religious organisations may be more important as a determinant of premarital sex attitudes and behaviour than religious affiliation. Students who attend religious services may receive more frequent religious messages against premarital sex. Although, several studies have shown a correlation between students' sexual behaviours and commitment, no serious attempt to confirm the underlying mechanism through which religion affects sexual behaviours (Lehrer, 2004).

Contraceptive methods are the techniques used in preventing unwanted pregnancy and other STIs (Sexually Transmitted Infections). There are varieties of birth control methods available to choose from, although most options are for women. However, selecting methods is a personal decision that involves consideration of many factors, including convenience, reliability, accessibility, cost, side effects and reversibility (whether the method is temporary or permanent). For instance, some people may prefer a birth control option that provides continuous protections against pregnancy, while other may prefer a method that only prevents pregnancy during a single act of sexual intercourse (Owodunni, 2007).

Birth control methods work in different ways to prevent pregnancy. Some methods prevent sperm from meeting eggs; some affect a woman's hormones, altering her reproductive circles, while other birth control methods involve behaviours that alter sexual activity in ways that lessen the chance for pregnancy (Ogunsanya, 2005). Some of them are barriers methods like the male condom, female condom (vaginal pouch), diaphragm, cervical cap and spermicides. There are also the intrauterine device (IUD), hormonal contraceptives like birth control pill, hormonal implants, contraceptives injections, contraceptives ring and contraceptives patch.

Thus, the use of condoms and vaginal spermicides continue to be recommended for all sexually active students to decrease the risk of contracting sexually transmitted diseases. In addition to the latex condom and other barrier contraceptives, the following like diaphragm, cervical cap, vaginal sponge; female condom and vaginal spermicides are recommended for most students (WHO, 2004). According to James and David (2005), students engage in sexual intercourses with multiple sex partners in ignorance of the fact that the contraceptive they are relying on have the tendency to fail. No one of the methods, including the condoms, is 100 percent reliable.

The research done by Manlove, Ryan and Franzetta (2003) showed that more than 50 percent of the student participants reported to have used condoms in their first sexual intercourse. Subsequently, in another research carried out by Larsson, Eurenus, Westerling and Tyden (2006) revealed that students have good knowledge of how to use condom and about 96 percent were already heard about emergency contraceptive. Among Nigerian students, there is an obvious gap between students' understanding of contraception and sexual behaviours. Even though students have knowledge about contraception, the rate of contraceptive use is still very low. This results in unwanted pregnancies and risks of abortions.

In Nigeria, unintended and unnegotiated intercourse is the primary cause of unwanted pregnancies, and many students with unwanted pregnancies decide to end them by abortion (Otoide, Oronsaye & Okonofua, 2001). Since abortion is illegal in Nigeria (except on the grounds to save the life of the mother), as a result, many abortions are done in unsafe environments and these illegal abortions have severe consequences that can be life threatening, sometimes, leading to maternal deaths (Abiodun & Balogun, 2009). Abortions account for 20 – 40 percent of maternal deaths in Nigeria (Pedersen, Samulsen & Wikstro, 2003).

Fear of infertility in the future is the main contributing factor why Nigerian students choose induced abortion over effective contraception. Many students perceive modern contraceptives, excluding condoms, to have negative prolonged and continuous adverse effect on fertility; as a result, they fall back on abortion which is an immediate solution to unwanted pregnancy so as to reduce the negative impact of infertility in the future resulting from contraceptive use (Otoide, Oronsaye & Okonofua, 2001).

Contraceptive prevalence rates have correlated with maternal mortality and it has been shown that countries with low contraceptive prevalence rates are also countries with very high maternal mortality ratios (Okonofua, 2003). Sexuality education plays a significant and inalienable role among students to ensure safety behaviours and contraceptive use. Sexuality education has been given various definitions by various schools of thought. Action Health Incorporation (2003) described sexuality education as “a planned process of education that fosters the acquisition of factual information, the formation of positive attitudes, beliefs and values as well as the development of skills to cope with the biological, psychological, socio-cultural and spiritual aspects of human sexuality.” That is, learning about the anatomy, physiology and bio-chemistry of the sexual response system which determines identity, orientations, thoughts and feelings as influenced by values beliefs, ethics and moral concerns. Having being educated about human sexuality and contraception, the risk of being vulnerable would be minimal (Action Health Incorporation, 2003). Considering the foregoing, the researcher deems it is very necessary and important that empirical study be conducted on sexual behaviours and use of contraceptives among students of tertiary institutions in Kwara State and deduce what implication these sexual behaviours and contraceptive use have to counselling.

Research Questions

The following research questions were answered in the study:

1. What are the sexual behaviours of students of tertiary institutions in Kwara State?
2. Which contraceptive is frequently used by students of tertiary institutions in Kwara State?

Research Hypotheses

The following hypotheses are postulated and tested in the study:

1. There is no significant relationship between sexual behaviours and contraceptive use among students of tertiary institutions in Kwara State.
2. There is no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age.
3. There is no significant difference in the contraceptive use among students of tertiary institutions in Kwara State based on age.
4. There is no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on gender.
5. There is no significant difference in the contraceptive use among students of tertiary institutions in Kwara State based on gender.

Research Design

The research design that was adopted for this study is the descriptive survey. This method helps in collection of data for the purpose of describing and interpreting existing conditions, prevailing practices, attitudes and ongoing process (Ndaji, 1999). Descriptive survey method enables information to be obtained from a representative sample of the population and describes situations as they exist. It also focuses attention on the people; their belief, opinions, perception, motivation, attitude and behaviours. In view of these assertions, the descriptive survey approach was considered appropriate for this study since the researcher is interested in collecting information from a representative sample of students of tertiary institutions in Kwara State.

Population, Sample and Sampling Procedure

The population of this study covered all students of tertiary institutions in Kwara State, while the target population for the study were students of the selected tertiary institutions from the three (3) Senatorial Districts in the state. There are sixteen (16) tertiary institutions in the state excluding distance learning, open universities, mono-technics and satellite campuses. According to the Kwara State Ministry of Tertiary Institution (2016), there were 116,371 students of tertiary institutions across the three senatorial districts of the state. With reference to the Research Advisor (2016), a sample size of 383 respondents (Confidence Level = 95%, Margin Error = 5%) was recommended for a population of that magnitude. However, a sample size of 500 respondents was used for the study.

For the purpose of this study, multi-stage sampling procedure was adopted. Multi-stage sampling technique is a procedure by which a researcher uses three or more sampling techniques in a study. At the first stage, the institutions were classified according to the senatorial district. At the second stage, stratified sampling technique was used to select six (6) tertiary institutions across Kwara Centre, Kwara South and Kwara North in ratio 3:2:1 respectively. At the third stage, stratified sampling procedure was used to select students (respondents) in each of the randomly chosen institutions. Stratification is a process in which a variable is classified into groups, e.g age, gender, institutions, faculty, departments etc. At the final stage, 500 respondents were chosen in each of the randomly selected tertiary institutions in

Kwara State using simple random sampling techniques. Simple random sampling is method of choosing the samples that were the representatives of the population by making it possible for every member of the population being included in the sample (Oke, Olosunde & Jekayinfa, 2005).

Instrumentation

Instrumentation is the process of selecting or developing measuring devices for gathering desired data in educational studies. Instrumentation is also the process of selecting a tool which an investigator finds appropriate for the solution of the research problem (Hassan, 1995). A questionnaire titled "Sexual Behaviours and Contraceptive Use Questionnaire" (SBCUQ) was used in obtaining data. The Questionnaire consists of three sections (A, B and C). Section A entails demographic data of the respondents such as age, gender, religion and type of institution. Section B and C contained 20 items each on the respondents' sexual behaviours and contraceptive use respectively. Both sections were patterned after a Four Point Likert Type Rating Scale of: SA- Strongly Agree, A- Agree, D- Disagree and SD- Strongly Disagree. The respondents were expected to rate the items as applicable in the section.

Validity of any instrument is the extent to which an instrument measures what it purports to measure. Therefore, in order to ascertain the validity of the instrument, the researcher gave the questionnaire to nine (9) experts in the Department of Counsellor Education; and a copy each to two lecturers in Sociology Department and Department of Psychology, University of Ilorin for vetting.

Reliability means the extent to which the results obtained from the test can be relied upon as the true score (Abiri, 2007). In order to ascertain the reliability of the instrument (SBCUQ), the test re-test method was used to ascertain the reliability of the instrument and co-efficient of reliability of 0.89 was obtained.

Method of Data Analysis

The data generated were analysed using frequency and percentage for section A (i.e. demographic data). Hypotheses 2 and 3, were tested with Analysis of Variance (ANOVA) and hypotheses 4 and 5 were tested using t-test. while hypothesis 1 was tested with Pearson Product Moment Correlation (PPMC). All hypotheses in the study were tested at 0.05 level of significance.

Results

This section presents the results of data obtained on the respondents in frequency and percentage. This is presented in the table below.

Table 1: Distribution of Respondents Based on Age and Gender

Variables Frequency Percentage (%)

Age

16-25 yrs	349	69.8
26-34 yrs	134	26.8
35 yrs and above	17	3.4
Total	500	100.0

Gender

Male	188	37.6
Female	312	62.4
Total	500	100.0

Table 1 presents the demographic data of the respondents. The table shows that 349 (69.8%) respondents were between 16-25 years in age, 134 (26.8%) respondents were between 26-34 years in age while 17 (3.4%) respondents were 35 years and above in age. It also reveals that 188 (37.6%) of the respondent were male, while 312 (62.4%) were female.

Research Question 1: What are the sexual behaviours of students of tertiary institutions in Kwara State?

Table 2: Mean and Rank Order of Sexual Behaviours of Students of Tertiary Institutions in Kwara State

Item No Sexual behaviours of students of Mean Rank
tertiary institutions include:

1	holding hands of the opposite sex	3.21	1 st
2	looking at sexy pictures	3.19	2 nd
3	hugging the opposite sex	3.03	3 rd
8	dressing the opposite sex	2.31	18 th
17	engaging in anal sex	2.15	19 th
18	engaging in necking	2.09	20 th

Table 2 shows the mean and rank order of sexual behaviours of students of tertiary institutions. Item 1, 2 and 3 were ranked top three. The items were ranked 1st, 2nd and 3rd with the mean score of 3.21, 3.19 and 3.03 respectively. The items are stated in the following order: sexual behaviours of students of tertiary institutions include: holding hands of the opposite sex; looking at sexy pictures and hugging the opposite sex. On the other hand, items 8, 17 and 18 were the least ranked items i.e. 18th, 19th and 20th respectively. Then items stated respectively that sexual behaviours of students of tertiary institutions include: dressing the opposite sex; engaging in anal sex and engaging in necking. Eleven out of the twenty items have the mean scores that are above the mid-mean of 2.50. Therefore, this shows that the level of engagement of tertiary institution students in sexual behaviour is moderate.

Research Question 2: *Which contraceptive is frequently used by students of tertiary institutions in Kwara State?*

Table 3: Mean and Rank Order of Contraceptive Use of Students of Tertiary Institutions in Kwara State

Item No Students of tertiary institutions use: Mean Rank			
1 condom	2.97	1 st	2 pills (oral contraceptive) 2.97 1 st
3 spermicides	2.86	3 rd	8 vasectomy (male sterilization) 2.18 18 th
18 transdermal patch	1.89	19 th	17 Lactation Amenorrhea Method (LAM) 1.84 20 th

Table 3 depicts the mean and rank order of contraceptive use among students of tertiary institutions. Item 1, 2 and 3 were ranked top three. The items 1 and 2 were ranked 1st with the mean score of 2.97, respectively. Also item 3 was ranked 3rd with the mean score of 2.86. The items stated respectively that the most commonly used contraceptive among the students of tertiary institutions are: condom, pill (oral contraceptive) and spermicides. On the other hand, items 8, 18 and 17 were the least ranked items i.e. 18th, 19th and 20th respectively. The items stated respectively that students of tertiary institutions use: vasectomy (male sterilization), transdermal patch and Lactation Amenorrhea Method (LAM). Eleven out of the twenty items have the mean scores that are above the mid-mean of 2.50. Therefore, this indicates that the level of contraceptive usage among students of tertiary institution is moderate.

Hypotheses Testing

Hypothesis One:

There is no significant relationship between sexual behaviours and contraceptive use among the respondents in Kwara State.

Table 4: Mean, Standard Deviation and r-value Showing Relationship between Sexual Behaviours and Contraceptive Use among Students Tertiary Institutions

Variables	N	Mean	SD	df	Cal. r-value	Crit. r-value	p-value
Sexual behaviour	500	51.87	12.033				
Contraceptive Use	500	50.60	10.918		498	0.28	0.39

Table 4 shows that the calculated r-value of 0.28 is less than the critical r-value of 0.39. This indicates that there is no significant relationship. Hence, the hypothesis is accepted. Therefore, there is no significant relationship between sexual behaviours and contraceptive use among the respondents in Kwara State.

Hypothesis Two:

There is no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age.

Table 5: ANOVA Showing Sexual Behaviours of Students of Tertiary Institutions based on Age

Source	df	Sum of Squares	Mean Squares	Cal. F-ratio	Crit. F-ratio	p-value
Between Groups	2	1524.900	762.450	5.36*	3.0	0.01
Within Groups	497	70727.650	142.309			
Total	499	72252.550				

* Significant at 0.05 alpha level

Table 5 shows that the calculated F-ratio of 5.36 is greater than the critical F-ratio of 3.00. This implies that there is significant difference. Hence, the hypothesis is rejected. Therefore, there is significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age. A further examination of the group difference was carried out using Duncan Multiple Range Test (DMRT) as indicated below.

Table 6: DMRT Showing the Magnitude of Differences in the Sexual Behaviours of Students of Tertiary Institutions in Kwara State based Age

Group	N	Mean	Age
C	17	42.88	35 years and above
B	349	51.90	16-25 years
A	134	52.93	26-34 years

Table 6 presents the magnitude of difference in the sexual behaviours of the students of tertiary institutions based on age. The table shows that group C, 35 years and above with mean score of 42.88. While groups A and B, which are 16-25 years and 26-34 years had mean scores of 51.90 and 52.93 respectively. The mean scores of groups A and B are different from each other but greater than group C. The explanation to this is that group C (35 years and above) contributed to the differences noted in the ANOVA result in table 7.

Hypothesis Three:

There is no significant difference in the contraceptive use among the students of tertiary institutions in Kwara State based on age.

Table 7: ANOVA Showing Contraceptive Use among Students of Tertiary Institutions based on Age

Source	df	Sum of Squares	Mean Squares	Cal. F-ratio	Crit. F-ratio	p-value
Between Groups	2	229.489	114.745	0.96	3.0	0.38
Within Groups	497	59252.511	119.220			
Total	499	59482.000				

Table 7 shows that the calculated F-ratio of 0.96 is less than the critical F-ratio of 3.00. This implies that there is no significant difference. Hence, the hypothesis is not rejected. Therefore, there is no significant difference in the level of contraceptive use among students of tertiary institutions in Kwara State based on age.

Hypothesis Four:

There is no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on gender.

Table 8: Mean, Standard Deviation and t-value Showing Sexual Behaviours of Students of Tertiary Institutions based on Gender

Gender	N	Mean	SD	df	Cal. t-value	Crit. t-value	p-value
Male	188	50.85	12.749				
Female	312	52.49	11.557				
				498	1.48	1.96	0.14

Table 8 shows that the calculated t-value of 1.48 is less than the critical t-value of 1.96. This indicates that there is no significant difference. Hence, the hypothesis is accepted. Therefore, there is no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on gender.

Hypothesis Five:

There is no significant difference in the level of usage of contraceptives among students of tertiary institutions in Kwara State based on gender.

Table 9: Mean, Standard Deviation and t-value Showing Contraceptive Use among Students of Tertiary Institutions based on Gender

Gender	N	Mean	SD	df	Cal. t-value	Crit. t-value	p-value
Male	188	49.96	11.009				
Female	312	50.98	10.863				
				498	1.01	1.96	0.71

Table 9 shows that the calculated t-value of 1.01 is less than the critical t-value of 1.96. This indicates that there is no significant difference. Hence, the hypothesis is accepted. Therefore, there is no significant difference in the level of usage of contraceptives among students of tertiary institutions in Kwara State based on gender.

Discussion of the Findings

The study revealed that the students of tertiary institutions do engage in sexual behaviours as the results of the finding revealed that there was significant difference between sexual behaviours and contraceptive use among the students of tertiary institutions in Kwara state. The findings revealed that the most common sexual behaviours among the respondents are holding

hands of the opposite sex, looking at the sexy pictures and hugging the opposite sex as they were ranked top three in the ranking order of the students' sexual behaviours. The finding of this study corroborated with the opinion of Abogunrin (2003) who reported that holding hands of the opposite sex was considered common and prevalent among students at all levels of education.

Also, the findings has shown further that condom, oral contraceptive pill and spermicides were ranked top three respectively as contraceptives commonly used by the students of tertiary institutions. The finding of this study is in support of view of Abiodun and Balogun, (2009) that condom and contraceptive pills are commonly used contraceptives among students. The finding, in addition, corroborated Elisabet, Catrin, Mats and Tanja (2011) who asserted that condom were considered common contraceptive method that students most often reported using during sexual intercourse and followed by oral contraceptive pills. The reason for this may be as a result of easy accessibility, cheaper price or fear of infertility in future which are attributed to most of modern type of contraceptives such as vasectomy (male sterilization), tubal ligation (female sterilization) and hormonal contraceptive implant. The finding of the study moreover indicated no significant relationship between sexual behaviours and contraceptive use among students of tertiary institutions in Kwara State.

Hypothesis one revealed no significant relationship between sexual behaviours and contraceptive use among the respondents in Kwara State. The result indicated that the calculated r -value was 0.28 and the p -value was 0.39. Since the calculated r -value is less than the alpha level at 0.05, then there was no significant relationship. Hence, the hypothesis which stated that there was no significant relationship between sexual behaviours and contraceptive use among the respondents in Kwara State was not rejected. This could be due to the fact that many students are afraid of using available modern contraceptives due to their side effects. The findings of this study confirmed the result of Abogunrin (2003), which indicated that despite the respondents' engagement in sexual behaviours, the rate of contraceptive use was very low.

Hypothesis two stated that there was no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age. The finding revealed significant differences. Therefore, the hypothesis is rejected. Hence, there is significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age. This implies that age has influence on sexual behaviours of the respondents. In this study, respondents aged 26-34 years had significantly higher mean scores than the age groups 16-25 years and 35 years and above. This signified that tertiary institution students of age 26-34 years engaged more in premarital sexual behaviours than other age groups. This could be attributed to the biological developmental process experienced at different developmental stage. This seems to be corroborated by Simon, Berger and Gagnon (2002) who found that older students are more likely to have had sexual experience than the young ones. The finding however contradicted the view of Pedersen, Samulsen and Wikstro, (2003) that age is one of the considerable factors in sexual behaviours and that students had already had their sexual debut at their earlier age.

The third hypothesis revealed no significant difference in contraceptive use among students of tertiary institutions in Kwara State based on age. This implies that age has no influence on the contraceptive use among students of tertiary institutions in Kwara State. This may be due to the fact that students, as a matter of necessity, used one form of contraceptives or the other to prevent disruption of their educational career with unwanted pregnancy, prevent risk of contracting vulnerable diseases and also the risk of abortion. This finding agreed with Emmanuel, Andrea, John and James (2010), who concluded that age did not influence the level

of consumption of modern contraceptives as far as students are aware of pregnancy prevention methods.

Hypothesis four showed no significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on gender. This means that gender has no influence on the expression of sexual behaviours of the respondents, that is, both male and female students' sexual behaviours are the same. It may be due to the wrong notion of students that premarital sexual behaviours are normal. The finding of this study contradicted the conclusion of Teitler, 2002 and Kontula, (2003) who noted that gender had significant influence on the sexual behaviours of students. They also reported further that male students engaged in sexual behaviours than their female counterparts.

Hypothesis five indicated no significant difference in contraceptive use among students of tertiary institutions in Kwara State based on gender. This depicts that male and female students are not different in the use of contraceptives. This could be due to the mutual decision made by the partners to prevent unwanted pregnancy. This finding contradicted the assertion of Aliyu and Mburza (2007) who stated that gender has significant influence on contraceptive use among the students of tertiary institutions.

Conclusion

This study examined sexual behaviours and contraceptive use among students of tertiary institutions in Kwara State, Nigeria. The following conclusions were therefore reached based on the results of the findings: Sexual behaviours of students of tertiary institutions in Kwara State include holding hands of opposite sex, looking at sexy pictures and hugging the opposite sex. Contraceptives that are commonly used among the students of tertiary institutions in Kwara State are condom, pills (oral contraceptives) and spermicides.

There is no significant relationship between sexual behaviours and contraceptive use among the respondents in Kwara State. There is significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on age. There is no significant difference in contraceptive use among students of tertiary institutions in Kwara State based on age and gender. There is significant difference in the sexual behaviours of students of tertiary institutions in Kwara State based on gender.

Recommendations

Based on the findings of the study, it was recommended that:

- The fresh students should be properly oriented by the counsellors on the dangers associated with risky sexual behaviours at the beginning of their academic year.
- Sex education should be provided by counsellors so that students would be informed about the anatomy, philosophy and bio-chemistry of sexual response.
- Counsellors should organize seminars on the risks associated with premarital sexual behaviours and non-use of contraceptives for students irrespective of age and gender.
- Students should be given orientation by counsellors on the values and need to use contraceptives. Further information should also be provided on different methods and types of contraceptives available, their effectiveness and reliability side effects among others.
- Parents, guidance and teachers should be sensitised and encouraged to be more empathic while reacting to issues relating to sexuality and use of contraceptives.

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