

**PERCEPTION AND HELP SEEKING BEHAVIOUR OF IN-SCHOOL  
ADOLESCENTS ON SEXUAL ABUSE IN IFE CENTRAL LOCAL  
GOVERNMENT, ILE-IFE, OSUN STATE, NIGERIA**

**A THESIS SUBMITTED**

**BY**

**OLATUNDE-AJAGBE, YEMISI OLAYINKA**

**CLP12/13/H/1992**

**B.Sc. Microbiology**

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**THE DEPARTMENT OF COMMUNITY HEALTH,**

**FACULTY OF CLINICAL SCIENCES, COLLEGE OF HEALTH SCIENCES,  
OBAFEMI AWOLOWO UNIVERSITY, ILE-IFE, OSUN STATE**

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**AUTHOR:** OLATUNDE-AJAGBE, Yemisi Olayinka

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**Olatunde-Ajagbe, Yemisi Olayinka**

-----

**Date**

**CERTIFICATION**

This is to certify that this work was carried out by OLATUNDE-AJAGBE, YEMISI OLAYINKA under the supervision of Dr. C.A. Adegbenro of the Department of Community Health and Dr. B.M. Mapayi of the Department of Mental Health, College of Health Sciences, Obafemi Awolowo University, Ile-Ife, Osun State, Nigeria.

.....

Dr. C.A. Adegbenro

**Supervisor**

.....

Date

.....

Dr. B.M. Mapayi

**Co-Supervisor**

.....

Date

.....

Dr. O.A. Esimai

**Head of Department**

.....

Date

## DEDICATION

I dedicate this project to God Almighty, for his faithfulness. Also, to my wonderful family for their prayers.

OBAFEMI AWOLOWO UNIVERSITY

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## ACRONYMNS

AIDS	Acquired Immune Deficiency Syndrome
HIV	Human Immuno-deficiency Virus
LGA	Local Government Area
NCANDS	National Child Abuse and Neglect Data System
SPSS	Statistical Package for Social Sciences
STI	Sexually Transmitted Infections
UNFPA	United Nations Population Funds
UNICEF	United Nations Children's Fund
USAID	United State Agency for International Development
WHO	World Health Organization

## ABSTRACT

The study assessed the perception of In-school adolescents about sexual abuse, identified the socio-demographic determinants of sexual abuse among In-school adolescents and factors that influenced help-seeking behaviour of adolescents who have experienced sexual abuse. These were with the view to designing intervention programmes for identifying and managing victims of sexual abuse in Ife Central Local Government, Osun State, Nigeria.

The study was a descriptive cross sectional survey. Four hundred and twenty In-school adolescents were selected by multistage sampling technique from three public and three private secondary schools in Ife Central Local Government, Ile-Ife. A semi-structured questionnaire was used to elicit information on socio-demographic characteristics, perception on sexual abuse, occurrence of sexual abuse and help-seeking behaviour. The data was analyzed using Statistical Package for Social Sciences (SPSS) version 20.0 software. Data analysis was carried out in three stages; univariate analysis was used to determine the proportions and summary statistics. Bivariate analysis was used to establish the relationship between in-school adolescents' socio-demographic characteristics and experience of sexual abuse. Multivariate analysis was used to identify factors influencing help-seeking behaviour of those who have experienced sexual abuse. The level of significance was determined at p value less than 0.05.

The study showed 93.1% of the in-school adolescents agreed that a person can be sexually abused by neighbours, 73.3% agreed that women cannot be perpetrators of sexual abuse and 78.5% disagreed that a person can be sexually abused by his or her teachers and caregivers. Seventy-three percent identified friends as the source of information on sexual abuse and 3.8% reported parents and relatives as source of information. This study further reported that 50% of

the In-school adolescents' had experienced sexual abuse and 15.7% has sought help after the incident. The socio-demographic factors identified to be associated with sexual abuse in this study were fathers' level of education ( $\chi^2 = 14.5$ ,  $p = 0.001$ ), mothers' level of education ( $\chi^2 = 21.8$ ,  $p = 0.001$ ), age ( $\chi^2 = 63.5$ ,  $p = 0.001$ ) and class ( $\chi^2 = 54.1$ ,  $p = 0.001$ ). The odds of respondents who had ever experienced sexual abuse in the school premises was eleven times more than the odds of respondents who had not experienced sexual abuse in the school premises (OR=11.0, 95% CI 2.307-52.729,  $p=0.003$ ). The odds of respondents who had ever experienced sexual abuse by neighbours was twenty-two times more than the odds of respondents who had never experienced sexual abuse by neighbours (OR=22.18, 95% CI 0.082-10.239,  $p=0.001$ ).

The study concluded that the prevalence of sexual abuse amongst in-school adolescents is 50% and 15.7% has sought help after the incident. The determinants of sexual abuse among in-school adolescents were parent's level of education, age and class. The factors that influenced help-seeking behaviour of in-school adolescents were place of abuse and type of perpetrators.

## CHAPTER ONE

### INTRODUCTION

#### 1.1 Background Information

Sexual Abuse is any unwanted sexual activity with perpetrators using force, making threats and taking advantage of victims not able to give consent. It may also include showing pornographic material, offensive and filthy exposure of one's genitals or forcibly viewing the victim's sensitive parts (Mullen, 2010).

World Health Organization defines an adolescent as a person between age 10 and 19 years. Globally, WHO estimated that 150 million girls and 73 million boys under 18 years experienced forced sexual intercourse or other forms of sexual violence involving physical contact (WHO, 2002). Millions more are likely to be exploited in prostitution or pornography each year, most of the times lured or forced into these situations through false promises and limited knowledge about the risks (Andrews, 2004). Globally, some 40 million children suffer some form of abuse and neglect requiring health and social care (WHO, 2004).

The most devastating of such abuse is sexual abuse. Both girls and boys are sexually abused and exploited. Generally, sexual abuse was more common among girls than boys; however, studies from Asia have found boys to be as affected as girls (WHO, 2005). Sexual abuse can occur in a variety of circumstances and settings including schools and home. Perpetrators are mostly adult males, but also females and children may sexually abuse other children (Elizabeth *et al.*, 2005). While sexual abuse of adolescents by an adult has been present throughout history, it has

become the object of significant public attention since 1970's and 1980's when there were increased legal actions and reported cases of sexual abuse. Sexual abuse occurs frequently in the Western societies.

A survey conducted in Swaziland by UNICEF, the Centers for Disease Control and Prevention (CDC), and local partners in 2007 illustrated the scope of the problem, with approximately one in three girls as a victim of sexual violence prior to the age of 18, and three-quarters of the perpetrators being men and boys (including boyfriends, husbands, and male relatives) from the neighborhoods the victims resided in. The survey of the Romanian families found that 0.1% of parents admitted to having sexually abused their children while 9.1% of children reported having suffered sexual abuse (Cawson & Brooker, 2000). The most frequent explanations for the sexual abuse of children in Sub-Saharan Africa (SSA) include rapid social change and the patriarchal nature of society. The impact of sexual abuse resonates in all areas of health: physical, psychological, including negative sexual outcomes. Victims of sexual abuse in childhood are predisposed to recurrent or repeated abuse in childhood, adolescence and adulthood (Agossou, 2000).

The prevalence of sexual abuse in Africa is compounded by the belief that sexual intercourse with a virgin will cure a man's sexually transmitted infections including HIV/AIDS. This belief is common in countries like Zambia, Zimbabwe, Nigeria and mostly South-Africa, which has the highest number of HIV positive citizens in the world (Agossou, 2000). According to the study conducted by African Child Policy Forum in five countries, being talked to in a sexual manner was reported as the most widespread form of sexual abuse against girls in Nigeria, between 38% and 52% of girls reported having been sexually touched and 40% reported sexual violence in

form of forced sexual intercourse (Bornstein, 2007). A study conducted in Nigeria by Olley (2008), where 2,290 adolescents in Ibadan, Nigeria were interviewed revealed 55% prevalence of sexual abuse. In a study on Sexual abuse in Minna where case notes of patients presented to the General Hospital, Minna were analyzed. A total of 32 cases were seen between January 2008 and December 2008, 90.1% of whom were children less than 17 years old (Ashimi & Ugwa 2008).

The nature and dynamics of sexual abuse are often traumatic. Victims tend to display more self-destructive behaviour and experience more suicidal ideation than those who have not been abused (Browne & Finkelhor, 1996). Most victims of sexual abuse never report the crime or get help in coming to grips with this life-changing trauma. They move into adulthood with a broken heart and low self-esteem. Much misbehaviour and acting out can be traced to an incident which occurred in childhood and left the child feeling confused, betrayed and angry. In an attempt to cope with the confusing reality of what has happened to them, many develop survival skills or behaviours that will help them to cover up what they are really feeling (Browne & Finkelhor, 1996). The nature and dynamics of sexual abuse are often traumatic (Mullings & Marquart, 2002). Families, friends and society sometimes see and judge the problem behaviour when it is actually a symptom of the internal pain which has never been addressed.

Sexual abuse prevention efforts has focused on education targeted at children themselves, these efforts have also been aimed at families, teachers, youth service workers and other caregivers who may be in a position to intervene, The central goals has been to educate young children on sexual abuse and impart life building skills to help children identify dangerous situations and prevent abuse as well as to teach them how to refuse approaches and invitations, how to break



off interactions and how to summon courage in seeking help when need arises (Wurtele *et al.*, 2005).

## 1.2 Statement of the Problem

Sexual Abuse is a global problem that has become the subject of great concern and the focus of many legislative and professional initiatives. This is evidenced by the expanding body of literature on sexual abuse, public declarations by adults' survivors and increased media coverage of sexual abuse issues. Most times cases of sexual abuse are unreported by the victims except when physical damages were

For more information, please contact **ir-help@oauife.edu.ng**