

Self-Esteem And Safe Sex Behaviours Among Adolescents in Federal Government Secondary Schools

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ABSTRACT

This study examined self-esteem and safe sex behaviours among adolescents in federal government secondary schools. Two purposes, research questions and two corresponding null hypotheses were formulated for the study. Correlational survey research design was adopted for the study. The population of the study comprised 5345 students in Federal Government senior secondary schools (SSS 2) in the South East zone. The sample population of the study was three hundred and seventy-two (372) students using stratified random sampling technique. The instruments for data collection were adapted (Index of Self Esteem (ISE) by Walter Hudson 1982 and (Safe Sex Behaviour Questionnaire (SSBQ) developed by Dilorji 1992) and validated by three experts, one from measurement and evaluation option of Science Education and two experts from the Department of Educational Foundations Faculty of Education all in Ebonyi State University, Abakaliki. In analyzing the research questions, Pearson Product Moment Correlation Coefficient statistical tool was used to answer the research questions, while Linear Regression was used to test the hypotheses. The study revealed the following findings: there is a moderate positive relationship between self-esteem and safe sex behaviour on SS2 students of federal government secondary schools. There is a moderate positive relationship in the level of self-esteem and safe sex behaviour based on gender, among federal government secondary school students. The hypotheses revealed that there is significant relationship between self-esteem and safe sex behaviour of federal government secondary schools' students. There is also a significant relationship between self-esteem and safe sex behaviour of federal government secondary schools' students based on gender. Based on the findings, the study concludes that self-esteem is a significant psychological factor in promoting safe sex behaviour among Federal Government Secondary School Students. From the findings, the study recommended among others that: Parents and teachers should encourage open communication with students on issues relating to self-esteem, sexuality, and personal values to strengthen their ability to make healthy and responsible sexual choices, secondary schools should provide gender-sensitive counselling programmes that address the unique challenges faced by male and female students while promoting self-confidence, assertiveness, and responsible sexual behaviour among both groups.

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I. Introduction

Adolescence is the transitional stage of development between childhood and adulthood, typically characterized by physical, cognitive, emotional, and social changes. The World Health Organization (WHO) (2014) defines adolescents as individuals aged 10 to 19 years. Within the Nigerian context, this age range largely overlaps with the period of secondary education, as most students enrolled in junior or senior secondary schools fall between the ages of 12 and 18 years (Federal Republic of Nigeria, (FRN) 2014). Consequently, in this study,

adolescents are defined as individuals aged 12 to 18 years and are currently enrolled in federal government colleges in Nigeria.

Adolescence is a transformative period marked by rapid physical, psychological, and social development. Adolescence, in particular, is a period when sexual thoughts, feelings, and behaviours are heightened, making young people more susceptible to external influences (Van de Bongardt, et al, 2022). During this stage, as observed by Chandra-Mouli et al, (2021), individuals often begin to explore their sexuality, which can have profound implications for their overall well-being. However, the increasing prevalence of early and risky sexual behaviours among adolescents has become a significant public health concern globally. These behaviors, which range from intimate acts like hugging and kissing to more complex activities such as sexual intercourse and pornography consumption, are influenced by a myriad of factors, including biological, psychological, and socio-cultural elements (Madigan et al, 2023). Understanding the dynamics of adolescent sexual behavior is crucial, as it directly impacts their physical health, emotional stability, and social development (Suleiman & Deardorff 2021 ; Patton et al 2022).

Human sexuality according to Diamond (2021), is a multifaceted construct that encompasses not only physiological aspects but also psychological, socio-cultural, and spiritual dimensions. It includes behaviors such as dating, foreplay, masturbation, pornography consumption, romantic relationships, and sexual intercourse. Sexuality is intrinsically linked to critical life aspects such as growth and development, human reproduction, family life, pregnancy, childbirth, parenthood, sexual response, sexual orientation, contraception, abortion, sexual abuse, and sexually transmitted infections (STIs), including HIV/AIDS (Goldfarb & Lieberman, 2021).

In contrast to the general negative consequences associated with early sexual debut, research by Harden, (2023) suggests a more benign influence of consensual sexual relationships in later adolescence (ages 17–19), particularly when coupled with the consistent practice of safe sex. However, as Moynihan et al, (2022) noted, starkly different picture emerges when considering non-consensual sexual experiences. Studies have robustly linked experiences of sexual assault and coercion to a range of detrimental academic outcomes, including significantly lower academic motivation, elevated rates of absenteeism, and a substantially increased risk of dropping out of school.

Gender also emerges as a critical moderating factor in the relationship between adolescent sexuality and academic performance. Evidence suggests that girls often face more pronounced academic penalties for early sexual activity compared to boys. This disparity is partly attributed to the heightened risks of unintended pregnancy, which can lead to school discontinuation in certain regions. Moreover, girls may experience more severe social stigma associated with early sexual activity, further hindering their educational progress (United Nations Educational, Scientific and Cultural Organisation, (UNESCO), 2023). Conversely, the effects of early sexual activity on boys' academic performance appear more varied, with some studies reporting no significant decline in GPA (Harden & Tucker-Drob, 2023). The recent body of research underscores the complex and context-dependent nature of the relationship between adolescent sexuality and academic outcomes. While early sexual debut and non-consensual sexual experiences are generally associated with negative educational consequences, consensual relationships in late adolescence appear to have minimal detrimental effects when safe practices are employed. Furthermore, gender plays a crucial role, with girls often facing greater academic vulnerabilities linked to early sexual activity.

The development of sexual self-concept and identity also plays a significant role in shaping adolescents' self-worth (Russell et al, 2021). Self-esteem, self-perception, self-concept, and sexual self-concept are closely related constructs that collectively describe how individuals view and evaluate themselves. Self-concept represents the broad understanding one has about personal identity, abilities, and roles. Furthermore, Russell et al, (2021) state that self-perception refers to the process through which individuals interpret their own behaviours and characteristics, shaping their self-concept. Self-esteem is the evaluative or affective dimension of the self-concept, reflecting the degree of self-worth and personal value an individual attaches to themselves. Sexual self-concept, a domain-specific extension, concerns how individuals perceive and evaluate themselves as sexual beings, influencing attitudes and behaviours related to sexuality (Kotiuga et al, 2023). These constructs are interdependent, self-perception shapes self-concept, which in turn influences self-esteem and domain specific evaluations such as sexual self-concept. Thus, self-esteem often serves as a summary indicator of one's overall self-evaluation across these interconnected dimensions (Kotiuga et al, 2023)..

Moreover, studies have shown that most injuries sustained by adolescents relates to risky taking thoughts and behaviour from unprotected sex (Awoyemi, 2017). In the same vein, Nnachi (2017), stated that Nigeria has come to be a place where sexual life is very active, irrespective of school setting. Some male and female students are indicted for certain degrees of promiscuous life. Again, record has shown relationship between male and female students from very early age often years has been reported, some of which ended in sexual intercourse resulting to early pregnancy, abortion, poor school attendance, dropout, lack of concentration in academic activities, poor performance, feeling of failure, unhappiness and worries. It is based on this background that the

researchers investigated on self-esteem and safe sex behaviours among adolescents in federal government secondary schools.

Statement of the Problem

The issue of adolescents engaging in risky sexual behaviors is a pressing public health concern in Nigeria, with far-reaching implications for their physical, emotional, and social well-being (Adebowale, 2021). The risky sexual behaviours include behaviours such as : early sexual debut, unprotected sexual intercourse, multiple sexual partner, sex under the influence of drugs and or alcohol, casual sexual encounter, sex with high risk partners, inconsistent condom use and transactional sex. The consequences of these behaviours may be severe, ranging from sexually transmitted infections (STIs) and unintended pregnancies to psychological distress and school dropout, especially among female adolescents. Evidence has shown that many adolescents seem to be exposed to socio-environmental factors that encourage early sexual debut and unsafe sexual practices. These factors include media influence, peer pressure, interpersonal attraction, parental socio-economic status, religious beliefs, social media and gender dynamics. Globally, with the exception of Nigeria, self-esteem has been identified as one of the psychological determinants of adolescent sexual behaviour. High self-esteem could be regarded as a protective factor that fosters responsible decision-making, resilience, and overall well-being, while low self-esteem appears to increase vulnerability to risky behaviours, as individuals may seek external validation or engage in self-destructive patterns (Ahn et al, 2023).

It seems there is a notable lack of empirical evidence on the relationship between self-esteem and sexual behaviours, particularly in the context of safe and unsafe sex practices. Without a clear understanding of this relationship, efforts to design effective interventions and prevention strategies may be misdirected or ineffective. The absence of context-specific research on self-esteem and sexual behaviour especially in South Eastern states in Nigeria may hinder the development of culturally relevant approaches to adolescent sexual health counselling. This gap could be addressed given the potential for self esteem to serve as either a protective factor or a vulnerability marker in this population. While global studies provide valuable insights the unique cultural, religious and socio-economic dynamics of Nigeria necessitate localized research to inform tailored interventions. For instance, the strong influence of traditional values and religious beliefs in Nigeria may shape adolescents' perceptions of self-worth and sexual behaviour in ways that differ significantly from Western contexts (Izugbara& Wekesah, 2021). Hence, the problem of the study is what is the relationship between self-esteem and safe sex behaviours among adolescents in federal government secondary schools?

Purpose of the study

The study examined self-esteem and safe sex behaviours among adolescents in federal government secondary schools.

Specifically, the study determined the:

1. Relationship between self-esteem and safe sex behaviour scores of adolescents of Federal Government secondary school
2. Relationship between the level of self-esteem and safe sex behaviours based on gender among federal government secondary schools.

Research Questions

Two research questions were posed to guide the study

1. What is the relationship between self-esteem and safe sex behaviour rating scores of adolescents in federal government secondary schools?
2. What is the relationship between the level of self-esteem and safe sex behaviour of adolescents based on gender in federal government secondary schools?

Research Hypotheses

The researchers formulated the following null hypotheses for the study and were tested at 0.05 level of significance.

1. There is no significant relationship between self-esteem and safe sex behaviour ratings of adolescents in federal government secondary schools.
2. There is no significant relationship between self-esteem and safe sex behaviour of adolescents in federal government secondary schools based on gender.

Empirical reviewed

Adolescence is a dynamic and formative developmental stage typically occurring between the ages of 10 and 19 (WHO, 2022). It represents a transitional phase from childhood to adulthood characterized by significant physical, psychological, emotional, and social changes. Adolescents experience the onset of puberty, cognitive advancements, identity formation, and increased autonomy. This phase according to UNICEF (2021), is

commonly categorized into three stages: early adolescence (10–13 years), middle adolescence (14–16 years), and late adolescence (17–19 years) each with distinct developmental tasks and behavioural expressions. The adolescent is an individual navigating multiple transitions simultaneously, biological (puberty), psychological (self-concept and emotional regulation), and social (changing roles and expectations). According to Bleidorn (2022), adolescence is a crucial period in which individuals confront Erikson's psychosocial stage of identity vs. role confusion, where the resolution of identity crises significantly shapes self-perception and future behaviour. Similarly, Steinberg (2020) noted that adolescents begin to engage in more abstract and reflective thinking, which enhances their ability to form personal values, evaluate risks, and make autonomous decisions depending on their self-esteem.

Self-esteem, defined as one's overall evaluation of self-worth or self-value, plays a pivotal role during adolescence. This stage is marked by heightened self-awareness and sensitivity to social comparisons, which makes adolescents particularly vulnerable to fluctuations in self-esteem (Orth & Robins, 2022). Positive self-esteem in adolescence may be linked to better mental health, stronger interpersonal relationships, and healthier coping strategies, while low self-esteem could be associated with anxiety, depression, substance use, and risky behaviours (Bleidorn, 2020). Self-esteem is an aspect of an individual's psychological well-being. It is defined as the overall evaluation of one's self-worth or personal value. It encompasses both positive and negative perceptions of oneself and reflects the degree to which individuals feel confident, respected, and satisfied with their abilities, appearance, and social relationships (Orth 2022).

Self-esteem as described by Harris, (2023), is not a static trait but rather a dynamic construct that can fluctuate over time in response to life experiences, social interactions, and internal thought processes. Self-esteem is often conceptualized as having two primary dimensions:

Global (Trait) Self-Esteem and

Domain-Specific (State) Self-Esteem

1. Global (Trait) Self-Esteem: This refers to a person's broad, enduring, and cross-contextual sense of overall self-worth. It is a stable personality characteristic that represents how one generally feels about the self, apart from specific situations or domains (Bleidorn, 2021).

2. Domain-Specific (State) Self-Esteem: This pertains to an individual's self-evaluations in particular areas of life, such as academic performance, physical appearance, social acceptance, and athletic competence (Wouters et al, 2022). Fluctuations in domain-specific self-esteem (e.g., feeling less competent after a work failure) can temporarily influence one's global self-esteem.

A crucial distinction lies in its stability. While global self-esteem demonstrates considerable rank-order stability (people tend to maintain their relative position in a group over time), it is also dynamic and follows a predictable life-span trajectory (Orth & Robins, 2022).

The Development and Trajectory of Self-Esteem Across the Lifespan Longitudinal and cross-sectional studies have revealed that self-esteem does not remain static. A well-documented finding is that self-esteem follows a curvilinear trajectory across the lifespan:

Adolescent sexual behaviour refers to the diverse range of activities through which young people express their sexuality, spanning from non-intimate actions such as hugging, holding hands, and kissing to more intimate behaviours like sexual intercourse, oral sex, and other forms of sexual activity. During adolescence, individuals undergo significant physical, emotional, and cognitive changes, which often lead to heightened curiosity about sexuality and romantic relationships. This period is characterized by exploration and experimentation, as adolescents seek to understand their identities and establish their place within social and cultural contexts (Sawyer, 2022). As a result, adolescent sexual behaviour is not only a reflection of individual desires but also a product of broader societal influences, including family dynamics, peer relationships, media exposure, and cultural norms. This behaviour is shaped by a complex interplay of biological, psychological, social, and cultural factors, making it a multifaceted aspect of adolescent development (Kågesten et al., 2021).

Factors Influencing Sexual Behaviour

Psychological Factors

Psychological factors, such as self-esteem, body image, and emotional well-being, may significantly influence adolescent sexual behaviour. Adolescents with higher self-esteem and a positive self-image may be more likely to engage in healthy sexual behaviours, while those with low self-esteem may be more susceptible to peer pressure and risky sexual practices (Mburano, 2022). Furthermore, mental health issues, such as depression and anxiety, have been linked to earlier sexual initiation and increased engagement in risky behaviours (Zimmer-Gembeck, 2021).

Social and Cultural Factors

Social and cultural contexts play its own role in shaping adolescent sexual behaviour. Peer influence is particularly significant, as adolescents often seek validation and acceptance from their social groups. Family dynamics also play a crucial role. Adolescents who grow up in supportive and communicative families are more likely to delay sexual activity and engage in safe sex practices (Wight, et al. 2021). Cultural norms and religious beliefs further influence adolescent sexual behaviour. In some cultures, conservative attitudes toward sexuality may lead to limited access to sexual health education, while in others, more liberal attitudes may encourage open discussions about sexuality and safe sex practices (UNESCO, 2023).

Family and Cultural Influences are also factors influencing sexual behaviour. As Wight, et al. (2021) suggested, family dynamics play a critical role in shaping adolescent sexual behaviour. Recent longitudinal studies confirm that adolescents in supportive families are more likely to delay sexual activity. Cultural attitudes remain polarized, with some societies becoming more open while others maintain restrictive norms. Current research emphasizes how migration and globalization are creating new cultural dynamics around adolescent sexuality (UNESCO, 2023).

Experimentation

Experimentation which is another characteristic of this stage of development can influence sexual behaviour. The digital age has transformed adolescent experimentation with sexuality. Recent studies highlight how social media platforms and dating apps have created new avenues for sexual exploration (L'Engle, 2021). However, experimentation can lead to risky behaviors when adolescents lack access to accurate information. The pandemic period saw increased online sexual activity among adolescents, with both positive and negative outcomes (Livingstone, 2023). This underscores the need for digital literacy programs in sexual health education.

Risks Associated with Early Sexual Debut

Risk associated with early sexual debut includes:

Unintended Pregnancies

Unsafe Abortions

Psychological Trauma

Social and Educational Consequences

Early sexual debut, defined as engaging in sexual activity during adolescence (typically before the age of 18), is associated with a range of adverse physical, emotional, and social outcomes. These risks are particularly pronounced in contexts where adolescents lack access to comprehensive sex education, contraceptives, and supportive care services. Adolescents who engage in early sexual activity are at a heightened risk of contracting sexually transmitted infections (STIs), including HIV/AIDS, chlamydia, gonorrhea, and syphilis. This risk is exacerbated by factors such as inconsistent condom use, multiple sexual partners, and limited knowledge about STI prevention (UNICEF 2021). According to WHO (2023), adolescents account for a significant proportion of new STI cases globally, with young women being particularly vulnerable due to biological and social factors. The lack of access to sex education and stigma surrounding STIs further compound the problem. Many adolescents are unaware of the symptoms of STIs or the importance of regular testing, leading to untreated infections that can have long-term consequences, including infertility and chronic health conditions (WHO, 2023).

Gender Differences in Self-Esteem and Sexual Behaviour

A current study highlights evolving gender dynamics in the self-esteem and sexual behaviour relationship. As revealed by Diamond (2021), adolescent girls with low self-esteem may be 1.8 times more likely to engage in transactional sex for social validation, with pandemic-era studies showing exacerbated trends. Conversely, Waling & Pym (2023), suggested that boys with low self-esteem may demonstrate increased "performance masculinity" behaviors, including unprotected sex and sexting, to compensate for perceived inadequacies. These patterns persist across cultures but manifest differently based on gender norms and sexual scripting (Kågesten, 2021).

In the past, boy – girl relationship was either for courtship or for any other socially approved form. Recently, relationships between unmarried youths have become a common phenomenon, and in most cases go with little or no marital intentions. Social relationships among the youths have become a common event. Boys and girls make and become friends openly. They go together, attend parties, have their leisure's together and indulge in sexual activities. Unlike before, today's adolescents or youths display free and open approach to sex (Mmaduakonom, 2019).

Young boys and girls openly go together, cluster their hands as a sign of love and friendship and openly discuss as individuals that are emotionally attached. Teenagers and youths spend a good quota of their leisure time with one another. Sometimes, game parlors and pool halls cater for their trade (Nnachi, 2017). Youths enjoy relationships of the same and opposite sex.

Researches show that many secondary school and undergraduate students engage in sex (Ukoha, 2014). Perhaps, the society seems more permissive now than before. Among the girls, it is an insignificant number that is found in the world of virgins at the time of marriage (Sandier, et al, 2016). Sexual encounters among the young ones start as early as ten years of age or even earlier. This situation is considered as unfortunate and attracts further reflection (Mmaduakonam, 2019).

From every indication, there seems to be a change in the tone of societal morality in relation to people's perception towards sex. A research carried out in US by Melvin Zelnik, Young Kim and John Kantner about unmarried young women and reported by Sandler, et al, (2019) reveals as follows:

1. By age 16, one in five has engaged in sex relations.
2. By age 19, two - thirds have engaged in sex relations.
3. More than nine out of ten have had sex prior to marriage.
4. By age 17, one in ten has been pregnant at least once.
5. One fourth becomes pregnant before age 19.
6. Eight out of ten of these conceive prior to marriage.
7. Blacks are more likely than whites to become pregnant as teenagers. But between 1971 and 1976, because of their increased sexual activity, the proportion of white teens conceiving increased considerably.
8. By using legal abortion, however, the proportion of whites giving birth declined substantially.

Despite cases of threat of a variety of sex related diseases, there seem to be increasing cases of sex related activities by the youths in Nigeria and elsewhere. Research carried out by the World Health Organisation (WHO) cited in Nnachi (2017) indicated that more than two thirds of the adolescents and young people aged between 15 and 19 years in many countries of the world have sexual intercourse at one time or the other. According to the WHO's research, more than half of the Sexually Transmitted Diseases (STDs) occur in young people below the age of 25 years. Young people are the greatest victims of STDs because of the reckless approach of going about their sexual matters. By the age of twelve, sexual experimentation involving breast fondlings, kissing and holding of hands has already started for some adolescents, leading to the actual sexual activities.

Safe Sex

The contemporary understanding of safe sex behavior has evolved into a multidimensional framework that encompasses comprehensive protection strategies, the innovative integration of technology, a fundamental emphasis on consent, and a critical awareness of underlying structural inequities. Recent research frames safe sex behaviors as multifaceted protective strategies that extend beyond mere physical precautions to encompass the critical psychosocial dimensions of sexual health

Beyond individual behaviors and technological solutions, contemporary research increasingly acknowledges critical structural considerations that significantly impact safe sex outcomes. Post-pandemic research has illuminated the existence of STI testing deserts, affecting a concerning 42% of rural communities, thereby limiting access to crucial diagnostic and preventative services. Moreover, research consistently reveals that Black, Indigenous, and People of Color (BIPOC) youth face disproportionately greater barriers to accessing essential prevention resources, with a reported 3.2 times greater likelihood of encountering such obstacles (Zhang & Wang, 2024).

Conversely, evidence suggests that universal healthcare systems are associated with demonstrably better safe sex outcomes, showing a 28% improvement compared to systems with fragmented access (Sales, 2024). These findings underscore the critical role of equitable access to healthcare and resources in promoting population-level sexual health and safe sex behaviors.

The integration of digital health is further revolutionizing prevention efforts. Artificial Intelligence (AI) powered chatbots are proving effective in improving PrEP adherence by providing personalized reminders and support, leading to a reported 42% increase in adherence (Siegler & Sullivan, 2023). Block-chain-enabled sexual health passports offer a secure and confidential means for individuals to share their STI testing results, potentially facilitating more open and informed communication between partners. Moreover, the use of Virtual Reality (VR) based safe sex simulations provides immersive and interactive learning experiences, demonstrating a significant 73% skill retention rate in practicing safe sex behaviors even after six months (Brawner, 2023) These digital tools are particularly valuable in reaching younger generations and underserved communities with engaging and accessible information and resources.

Seeking Sexual Health Information

Contemporary research, exemplified by the work of Berkowitz, (2023), underscores the profound impact of sexual health literacy. The capacity to obtain, process, and understand essential sexual health information for informed decision-making directly correlating with tangible benefits such as reduced rates of sexually transmitted infections (STIs), an increase in proactive preventive behaviors, and an overall enhancement of sexual wellbeing. As the sexual health landscape continues to morph, a nuanced understanding of its essential components and the

transformative influence of digital technologies becomes paramount in fostering a healthier and more informed populace.

The recognition of asymptomatic transmission potential for numerous STIs necessitates a shift towards proactive testing and open communication. Finally, awareness of site-specific infection risks, encompassing oral, genital, and anal transmission, allows for targeted counselling for prevention strategies and a more holistic understanding of sexual health risks, as highlighted by the comprehensive guidelines provided by Workowski, (2023).

Moral and Religious Values

Safe sex behaviour among adolescents is best understood as a product of both normative value systems and internal psychological capacities. Moral and religious values provide structured guidance regarding acceptable sexual conduct, while self-esteem determines the extent to which individuals are able to adhere to such guidance. The interaction between these constructs is therefore central to explaining patterns of responsible or risky sexual behaviour.

Moral and religious values function as external regulatory frameworks, establishing expectations such as abstinence, fidelity, and responsibility in sexual relationships. Self-esteem, by contrast, represents an internal evaluative mechanism, reflecting an individual's sense of worth, confidence, and personal agency (Wright et al, 2021).

II. METHODOLOGY

The design of study adopted was a correlational research design. The population of the study consist of 5345 students in senior secondary school 2 (SS II) in the Federal government secondary schools in the South East Zone. The sample size for the study was 372 SSII students using Taro Yamane's formula for sample determination and stratified random proportionate sampling technique. The instruments for data collection were adapted (Index of Self Esteem (ISE) by Walter Hudson 1982 and (Safe Sex Behaviour Questionnaire (SSBQ) developed by Dilori 1992). The instruments adopted a four point points rating scale of Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD). The instruments for data collection. The researchers submitted the instruments for face and content validity to three experts, two from Guidance and Counselling option: Department of Educational Foundations and one in Measurement and Evaluation; Science Education Department all in Faculty of Education, Ebonyi State University, Abakaliki. Pearson Product Moment Correlation Coefficient statistical tool was used to answer the research questions, while Linear Regression was used to test the hypotheses at 0.05 level of significance.

III. Results

The results of the data analysed according to the research questions and corresponding hypotheses were presented below:

Research Question 1

What is the relationship between self-esteem and safe sex behaviour rating scores of adolescents in Federal Government Secondary Schools?

Table 1: Relationship between self-esteem and safe sex behaviour rating scores of adolescents in federal government secondary students

Scores	N	Computed r	r ²
Self Esteem	352	0.726	0.527
Safe Sex Behaviour	r=0.726	r ² =0.527	

The results presented in Table 1 reveal a correlation coefficient (r) of 0.726 between self-esteem and safe sex behaviour among adolescents in Federal Government Secondary Schools. This indicates a strong positive relationship between the two variables. The finding implies that adolescents with higher levels of self-esteem are more likely to exhibit safe sex behaviours. Furthermore, the coefficient of determination ($r^2 = 0.527$) shows that approximately 52.7% of the variance in safe sex behaviour is guided by students' self-esteem. This suggests that self-esteem is an important factor associated with safe sex behaviour among the adolescents studied.

Research Question 2

What is the relationship between self-esteem and safe sex behaviour based on gender among adolescents in Federal Government Secondary School?

Table 2: Relationship between self-esteem and safe sex behaviour based on gender among adolescents in federal government secondary school

Gender	N	Computed r	r ²
Male	175	0.721	0.519
Female	177	0.731	0.535

The results presented in Table 2 indicate correlation coefficients of 0.721 and 0.731 for male and female students respectively. These values indicate strong positive relationships between self-esteem and safe sex behaviour for both genders. This finding suggests that higher self-esteem is associated with increased safe sex behaviour among both male and female adolescents.

The coefficients of determination (r²) for male and female students were 0.519 and 0.535 respectively. This implies that approximately 51.9% of the variation in safe sex behaviour among male students and 53.5% among female adolescents can be explained by their levels of self-esteem. The findings therefore indicate that self-esteem is positively related to safe sex behaviour irrespective of gender.

Test of hypotheses

The hypotheses were tested at 0.05 level of significance

HO₁: There is no significant relationship between self-esteem and safe sex behaviour rating scores of adolescents in Federal Government Secondary Schools.

Table 5: Relationship between self-esteem and safe sex behaviour rating scores of adolescents of federal government secondary school.

Computed r (r)	r-Squared	Adjusted r-Square	Standard error	Beta	t-cal	P-Value	Dec.
0.726	0.527	0.526	3.43717	0.726	13.695	0.000	Sig.

The results presented in Table 5 show a correlation coefficient (r) of 0.726, indicating a strong positive relationship between self-esteem and safe sex behaviour. The calculated t-value of 13.695 and p-value of 0.000 were obtained. Since the p-value (0.000) is less than the stipulated level of significance of 0.05, the null hypothesis was rejected. Therefore, there is a statistically significant relationship between self-esteem and safe sex behaviour among adolescents in Federal Government Secondary Schools.

HO₂: There is no significant relationship between self-esteem and safe sex behaviour among adolescents Federal Government Secondary School students based on gender.

Table 6: Relationship between self-esteem and safe sex behaviour among adolescents in federal government secondary school based on gender.

Gender	Computed r (r)	r-Squared	Adjusted r-Square	Standard error	Beta	t	P-Value	Dec.
Male	0.721	0.519	0.517	3.45791	0.721	9.669	0.000	Sig.
Female	0.731	0.535	0.532	3.43602	0.731	9.644	0.000	Sig.

The results presented in Table 6 show correlation coefficients of 0.721 and 0.731 for male and female students respectively. The calculated t-values were 9.669 for males and 9.644 for females, while the corresponding p-values were both 0.000. Since the p-values are less than the 0.05 level of significance, the null hypothesis was rejected.

Therefore, there is a statistically significant relationship between self-esteem and safe sex behaviour among adolescents in Federal Government Secondary School students irrespective of gender.

IV. Discussion of findings

Relationship between self esteem and safe sex behaviour among adolescents

The results presented in Table 1 reveal a correlation coefficient (r) of 0.726 between self-esteem and safe sex behaviour among adolescents in Federal Government Secondary Schools. This indicates a strong positive relationship between the two variables. The finding implies that adolescents with higher levels of self-esteem are more likely to exhibit safe sex behaviours.

Their findings of the study are in consonance with that of Zimmer-Gembeck (2021) who found that adolescents with higher self-esteem and a positive self-image may be more likely to engage in healthy sexual

behaviours, while those with low self-esteem may be more susceptible to peer pressure and risky sexual practices (Mburano, 2022). Furthermore, mental health issues, such as depression and anxiety, have been linked to earlier sexual initiation and increased engagement in risky behaviours.

Relationship between self-esteem and safe sex behaviour among adolescents based on gender

The results presented in Table 2 indicate correlation coefficients of 0.721 and 0.731 for male and female students respectively. These values indicate strong positive relationships between self-esteem and safe sex behaviour for both genders. This finding suggests that higher self-esteem is associated with increased safe sex behaviour among both male and female adolescents.

These findings are in agreement with that of Diamond (2021), adolescent girls with low self-esteem may be 1.8 times more likely to engage in transactional sex for social validation, with pandemic-era studies showing exacerbated trends. Conversely, Waling & Pym (2023), suggested that boys with low self-esteem may demonstrate increased "performance masculinity" behaviors, including unprotected sex and sexting, to compensate for perceived inadequacies. These patterns persist across cultures but manifest differently based on gender norms and sexual scripting (Kågesten, 2021).

V. Conclusion

Based on these findings, the study concludes that self-esteem is a significant psychological factor in promoting safe sex behaviour among secondary school students. Enhancing students' self-esteem can contribute substantially to the reduction of risky sexual behaviours, prevention of sexually transmitted infections, reduction of unintended pregnancies, and promotion of healthy adolescent development.

VI. Recommendations

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

1. Parents and teachers should encourage open and effective communication with students on issues relating to self-esteem, sexuality, and personal values in order to strengthen their capacity to make healthy and responsible sexual decisions.
2. Schools should establish gender-sensitive counselling programmes that address the unique challenges faced by male and female students while promoting self-confidence, assertiveness, and responsible sexual behaviour among both groups.

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