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Knowledge, Awareness, and Perception of Sex Education among Secondary School Students in Owerri-West LGA, Imo State, Nigeria

Okere, S. G.[1,2]; Osunwoke, P. I.[1]; Ilikannu, S. O.[3]; Oyaromade, A.[4]; Ekemini-Udo, P.[5]; & Irhiogbe, W. O.[6]

[1]Department of Environmental Health Science, School of Health Technology, Federal University of Technology, Owerri, Imo State, Nigeria. [2]Department of Public Health Sciences, Faculty of Basic Medical Sciences, College of Medical Sciences, Rivers State University, Rivers State, Nigeria. [3]Department of Obstetrics and Gynaecology, Federal Medical Centre Asaba, Delta State, Nigeria. [4]Department of Obstetrics and Gynaelogy, Federal Medical Centre, Gusau, Zamfara State, Nigeria. [5]Department of Pharmacy, Ibom Multispecialty Hospital, Akwa Ibom State, Nigeria. [6]Department of Obstetrics and Gynecology, Edo State University, Auchi, Edo State, Nigeria.

Corresponding Author: sandraokere123@gmail.com

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Abstract

Despite the inclusion of Family Life and HIV Education (FLHE) in Nigeria's secondary school curriculum, sex education remains a concern among students in Imo State. This study assessed knowledge, awareness, and perception of sex education among secondary school students in Owerri-West Local Government Area (LGA), Imo State. The research was conducted in five government-owned secondary schools using a descriptive cross-sectional design, involving 300 students selected through proportional sampling (60 students per school). Data were collected via a structured questionnaire and analyzed using descriptive statistics and weighted Likert-scale scoring. Of the 300 respondents, females accounted for 57% (n = 172) and males for 43% (n = 128), with the majority aged 13–16 years (74%). Most respondents were indigenes of Imo State (95%) and Christians (91%). Awareness of sex education varied across schools, with Army Day Secondary School recording the highest awareness (46%). Despite these differences, overall knowledge of sex education was high across all schools, with weighted averages ranging from 4.02 to 4.62, particularly on the prevention of premarital sex, early marriage,

STIs, and unsafe abortion. Perceptions were largely positive, with most students agreeing that sex education is important and should be taught at the secondary level (WA = 4.10–4.57). Schools were identified as the primary source of sex education, though parental involvement was also acknowledged. In conclusion, Owerri-West secondary students demonstrate strong knowledge and positive attitudes toward sex education, yet awareness gaps persist. It is recommended that schools strengthen FLHE implementation through trained teachers, supported by active parental engagement and consistent policy monitoring.

Keywords: Sex Education, Knowledge and Awareness, Secondary School Students, Owerri-West LGA, Imo State, Nigeria.

Introduction

Sex education is a vital component of adolescent health and development; however, empirical evidence indicates that many Nigerian adolescents lack adequate and accurate knowledge of sexual and reproductive health issues (Cheetham and Gelperin, 2018; Olawade *et al.,* 2024). Studies across Nigeria show that a significant proportion of adolescents initiate sexual activity before the age of 18, often without sufficient information, thereby increasing their vulnerability to sexually transmitted infections (STIs), unintended pregnancies, unsafe abortions, and school dropout (Olawade *et al.,* 2024, NPC, 2019; WHO, 2024). Nigeria continues to record one of the highest adolescent fertility rates in sub-Saharan Africa, estimated at over 100 births per 1,000 girls aged 15–19, reflecting persistent gaps in sexuality education and access to reproductive health services (NPC, 2019; UNFPA, 2021).

Although the Nigerian government has approved the Family Life and HIV Education (FLHE) curriculum for secondary schools, evidence suggests that its implementation remains inconsistent due to cultural, religious, and institutional barriers (Nwokocha *et al.,* 2015; Cheetham and Gelperin, 2018). In many secondary schools, sex education is inadequately taught, superficially integrated into other subjects, or entirely omitted. Teachers often lack adequate training, instructional materials, and confidence to effectively deliver sexuality-related content (Shobayo *et al.,* 2023; Akande *et al.,* 2024). Consequently, many adolescents rely on peers, social media, and other unsupervised sources for sexual information, increasing their exposure to misinformation and risky sexual behaviors (Onyeonoro *et al.,* 2011; WHO, 2024).

In Owerri-West Local Government Area (LGA) of Imo State, they have reportedly been a rise in sexual risk behaviors among secondary school students, including early sexual initiation and low contraceptive use (Onyeonoro *et al.,* 2011; Olawade *et al.,* 2024). However, there is limited empirical evidence on students' awareness of sex education, the extent to which sexuality education is formally incorporated into school curricula, and those responsible for delivering such instruction within this

locality. This lack of localized data hinders effective educational planning, curriculum implementation, and adolescent health interventions (Cheetham and Gelperin, 2018; WHO, 2024). This study, therefore, seeks to assess sex education awareness among secondary school students in Owerri-West LGA, examine the inclusion of sex education in the school curriculum, and identify the individuals responsible for teaching sexuality education in schools.

The study is significant to students, educators, parents, policymakers, and public health practitioners. Comprehensive sex education has reportedly been shown to delay sexual debut, improve contraceptive use, and reduce unintended pregnancies and STIs among adolescents (Akande *et al*., 2024). By identifying knowledge gaps and evaluating curriculum implementation in Owerri-West LGA, this study provides evidence to support targeted school-based interventions, improved teacher training, and stronger collaboration among schools, families, and policymakers. Ultimately, the findings may contribute to more effective implementation of national sexuality education policies and improved adolescent health outcomes in line with Sustainable Development Goal 3 (WHO, 2024).

Materials and Methodology

Area of Study

The study was carried out in secondary schools in Owerri-West Local Government Area of Imo state. Owerri West is a Local Government Area of Imo State, Nigeria. Imo State, Nigeria, is generally located at 5°29′N and 7°2′E, with its capital, Owerri, at these coordinates; the state spans about 4°45'N to 7°15'N and 6°50'E to 7°25'E, nestled in Nigeria's South-East region.

Research Design

A descriptive cross-sectional study was adopted for this study to assess the perception and knowledge of sex education among selected secondary school students in Owerri West L.G.A., Imo State. A structured, approved questionnaire developed by the departmental committee was used to collect data. The schools of interest have classes from Junior Secondary School One (JSS1) to Senior Secondary School Three (SSS3).

Population of the Study

The population for this study comprises all secondary school students in Owerri-West LGA, Imo State. Five (5) government-owned secondary schools, with a total of 300 students, were the target population. They include Army Day Secondary School, Nekede Secondary School, Comprehensive Secondary School, Ihiagwa Secondary School, and Eziobodo Technical Secondary School.

Sampling Size Determination

The study population consisted of 1,800 secondary school students in the Owerri-West Local Government Area, Imo State. To obtain a representative sample, a random sample was

selected, and the Taro Yamane (1967) formula for finite populations was used to determine the sample size.

$$n = \frac{N}{1 + N(e)^2}$$

Where:
n = Sample size
N = Population size
e = Level of precision (0.05)
The calculated sample size was 327 students. However, to ensure effective data management, minimize non-response, and maintain proportional representation across the selected schools, the sample size was rounded down to 300 students, resulting in 60 per school.

Data Collection

Data were collected using a structured questionnaire. The items were constructed based on the research questions and literature reviewed. The questionnaire covered demographic data for the respondents, as well as in-depth information on adolescent development and their sex education needs in Owerri West. The questionnaire had two sections: Section one focused on respondents' personal data, while Section two focused on the determinants of their knowledge of sex education.

Reliability and Ethical Clearance

The questionnaire was issued to 60 co-gender respondents on sex education in each secondary school in Owerri West L.G.A. This was to ensure that the respondents who were used in the reliability test were exclusively students from the study sample. A total of 300 questionnaires were randomly distributed to students across all classes in Owerri West L.G.A, Imo State, to be answered before it was deemed reliable. Consents were obtained from the school authorities, and all information gathered from the study area was used strictly for research purposes, with a high level of confidentiality.

Method of Data Analysis Collection.

Descriptive statistics were used to analyze data in this study. Responses from the five-point Likert scale questionnaire were evaluated using the weighted-average method, also known as Likert scoring. Each response was assigned a numerical value from 1 to 5, where 1 indicated ‘’*Strongly Disagree*’’ and 5 indicated ‘’*Strongly Agree’’*. The weighted average for each item was calculated by multiplying each response's frequency by its assigned weight, summing the products, and dividing by the total number of respondents. This approach allows for a more nuanced interpretation of participants’ opinions by accounting for varying degrees of agreement. Compared with simple mean scoring, weighted averages provide a more accurate representation of respondents’ perceptions, knowledge, and attitudes measured through the Likert scale.

Results and Discussion

Results

Socio-Demographic Characteristics of the Respondents

The results show that of the 300 respondents, 172 (57%) were females and 128 (43%) were males. Ihiagwa Secondary School and Nekede Secondary School showed a relatively balanced gender distribution. However, Army Day Secondary School and Comprehensive Secondary School Obinze recorded a higher proportion of female respondents. Most respondents fell into the 13–14 years (35%) and 15–16 years (39%) age groups, accounting for 74% of the total sample. The majority of respondents, 284 (95%), are indigenes of Imo State, while only 16 (5%) were from other states. Christianity was the dominant religion among respondents, accounting for 273 (91%), while 27 (9%) belonged to other religions. Religious beliefs can significantly influence attitudes toward sex education, particularly in conservative Christian settings where open discussions about sexuality may be discouraged.

Table 1: Demographic Distribution of the Respondents

Characteristic	Ihiagwa SS	Army Day SS	Eziobodo TS	Comprehensive SS Obinze	Nekede SS	Total
Gender						
M	29 (48%)	18 (30%)	24 (40%)	22 (37%)	35 (58%)	128 (43%)
F	31 (52%)	42 (70%)	36 (60%)	38 (63%)	25 (42%)	172 (57%)
Total	60 (100%)	60 (100%)	60 (100%)	60 (100%)	60 (100%)	300 (100%)
Age group						
11-12 yrs	4 (7%)	6 (10%)	13 (22%)	3 (5%)	7 (12%)	33 (11%)
13-14 yrs	21 (35%)	24 (40%)	16 (27%)	25 (42%)	19 (32%)	105 (35%)
15-16 yrs	21 (35%)	24 (40%)	21 (35%)	26 (43%)	25 (42%)	117 (39%)
17-18 yrs	14 (23%)	6 (10%)	10 (17%)	6 (10%)	9 (15%)	45 (15%)
Total	60 (100%)	60 (100%)	60 (100%)	60 (100%)	60 (100%)	300 (100%)
State of Origin						
Imo	60 (100%)	54 (90%)	60 (100%)	58 (97%)	52 (87%)	284 (95%)
Others	0 (0%)	6 (10%)	0 (0%)	2 (3%)	8 (13%)	16 (5%)
Total	60 (100%)	60 (100%)	60 (100%)	60 (100%)	60 (100%)	300 (100%)
Religion						
Christianity	60 (100%)	45 (75%)	60 (100%)	60 (100%)	48 (80%)	273 (91%)
Others	0 (0%)	15 (25%)	0 (0%)	0 (0%)	12 (20%)	27 (9%)
Total	60 (100%)	60 (100%)	60 (100%)	60 (100%)	60 (100%)	300 (100%)

Level of Sex Education Awareness among Selected Secondary Schools

Army Day Secondary School, Obinze, recorded the highest level of awareness, with 46% agreeing or strongly agreeing, although a high proportion (38%) strongly disagreed. Comprehensive Secondary School Obinze demonstrated a generally positive attitude, with 45% of respondents agreeing or strongly agreeing, and minimal disagreement. At Ihiagwa Secondary School, responses were moderate and evenly distributed, with 42% agreeing or strongly agreeing, indicating average awareness and acceptance. Nekede Secondary School had a high level of neutral responses (53%), suggesting uncertainty or limited exposure to sex

education, though 36% still agreed or strongly agreed. Eziobodo Secondary Technical School showed the lowest level of awareness and acceptance, with 62% disagreeing and only 32% agreeing or strongly agreeing, indicating strong resistance to sex education.

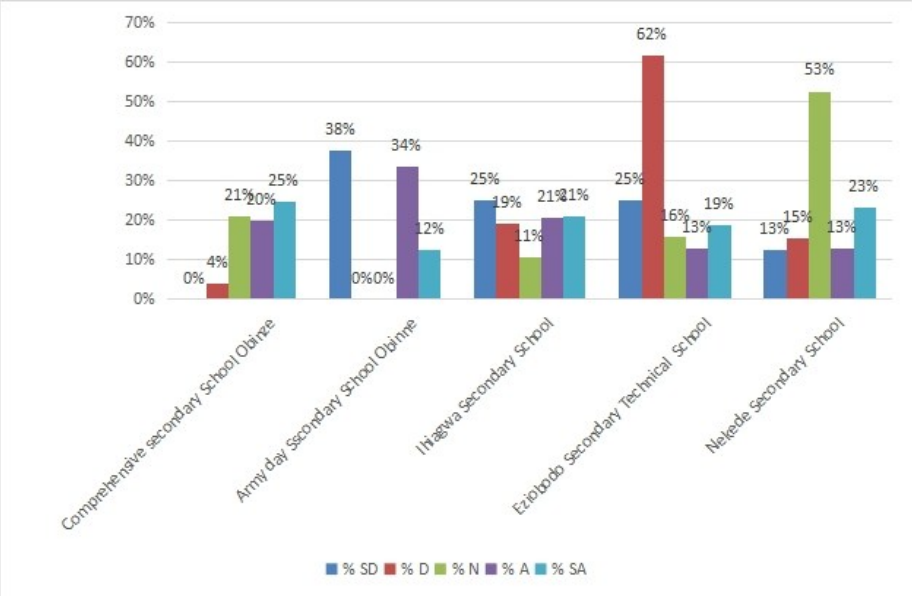


Figure 1: Bar Chart Showing Respondents' Level of Sex Education Awareness Across Selected Secondary Schools.

Knowledge of Sex Education Across the Five Schools

The results in Table 3 indicate a generally high level of knowledge of sex education among students across the five secondary schools. In Comprehensive Secondary School Obinze, students demonstrated a strong understanding of the preventive role of sex education, with the highest weighted average recorded for the item *"Sex education prevents premarital sex"* (WA = 4.55), followed by *"Sex education prevents early teenage marriage"* (WA = 4.40). Knowledge relating to STI/HIV prevention (WA = 4.05) and improved health decision-making (WA = 4.03) also reflected acceptable levels.

Similarly, Army Day Secondary School Obinze showed strong knowledge across key indicators, with the reduction of illegal abortion recording the highest weighted average (WA = 4.47), followed by prevention of early teenage marriage (WA = 4.35) and premarital sex (WA = 4.17). In Ihiagwa Secondary School, all assessed items recorded weighted averages above 4.00, indicating consistently strong knowledge.

The highest overall knowledge scores were observed at Eziobodo Secondary Technical School, particularly in the prevention of premarital sex (WA = 4.62) and early teenage marriage (WA = 4.50). Nekede Secondary School also demonstrated strong knowledge, especially regarding STI/HIV prevention (WA = 4.30) and informed health decision-making (WA = 4.28). Overall, the findings show that students across all schools possess strong knowledge of the benefits and importance of sex education.

Table 3: Knowledge of Sex Education Across the Five Schools

School	Knowledge Items	Weighted Avg (WA)	Interpretation
Comprehensive Secondary School Obinze	Sex education prevents premarital sex	4.55	Strong knowledge
	Sex education prevents early teenage marriage among girls	4.40	Strong knowledge
	STI/HIV infection results from improper sex education	4.05	Moderate knowledge
	Sex education helps teens make better health decisions	4.03	Moderate knowledge
	Sex education reduces illegal abortion	3.85	Moderate knowledge
Army Day Secondary School Obinze	Sex education reduces illegal abortion	4.47	Strong knowledge
	Sex education prevents early teenage marriage	4.35	Strong knowledge
	Sex education prevents premarital sex	4.17	Strong knowledge
Ihiagwa Secondary School	Sex education prevents early teenage marriage	4.23	Strong knowledge
	STI/HIV infection results from improper sex education	4.15	Strong knowledge
	Sex education prevents premarital sex	4.10	Strong knowledge
	Sex education helps teens make better health decisions	4.07	Strong knowledge
	Sex education reduces illegal abortion	4.05	Strong knowledge
Eziobodo Secondary Technical School	Sex education prevents premarital sex	4.62	Strong knowledge
	Sex education prevents early teenage marriage	4.50	Strong knowledge
	Sex education can reduce deaths from sexual activity (STI, abortion, AIDS)	4.43	Strong knowledge
	Sex education helps teens make better health decisions	4.43	Strong knowledge
	Sex education reduces illegal abortion	4.02	Moderate knowledge
Nekede Secondary School	STI/HIV infection results from improper sex education	4.30	Strong knowledge
	Sex education prevents premarital sex	4.28	Strong knowledge
	Sex education helps teens make better health decisions	4.28	Strong knowledge
	Sex education reduces illegal abortion	4.23	Strong knowledge
	Sex education prevents early teenage marriage	4.22	Strong knowledge

Perception of Sex Education Across the Five Schools

As shown in Table 4, the perception of sex education among respondents across the five schools was largely positive. In Comprehensive Secondary School Obinze, students strongly agreed that sex education helps prevent sexually transmitted diseases (WA = 4.38), should be taught at the secondary school level (WA = 4.32), and is an important subject matter (WA =

4.27). The belief that sex education should be taught in schools due to parental limitations also recorded a high weighted average of 4.17.

In Army Day Secondary School Obinze, the strongest perception was that sex education should be taught at the secondary level (WA = 4.54). Other items such as parental inability to teach sex education (WA = 3.95) and prevention of STDs (WA = 3.67) reflected moderate but positive perceptions. Ihiagwa Secondary School respondents similarly showed strong agreement that sex education should be taught at the secondary level (WA = 4.30) and helps prevent STDs (WA = 4.18).

In Eziobodo Secondary Technical School, perception scores were notably high, particularly for STD prevention (WA = 4.55) and the importance of sex education as a subject (WA = 4.20). Nekede Secondary School recorded the most positive perceptions overall, with sex education being viewed as important (WA = 4.57), necessary at the secondary level (WA = 4.44), and essential due to parental limitations (WA = 4.32).

Table 4: Perception of Sex Education Across the Five Schools

School	Perception Items	Weighted Average	Interpretation
Comprehensive Secondary School Obinze	Sex education helps prevent STDs	4.38	Positive perception
	Should be taught in secondary level	4.32	Positive perception
	Sex education is an important subject	4.27	Positive perception
	Should be taught in school as some parents are incapable	4.17	Positive perception
Army Day Secondary School Obinze	Should be taught in secondary level	4.54	Positive perception
	Should be taught in school due to parental inability	3.95	Moderate perception
	Helps prevent STDs	3.67	Moderate perception
	Sex education is an important subject	3.58	Moderate perception
Ihiagwa Secondary School	Should be taught in secondary level	4.30	Positive perception
	Helps prevent STDs	4.18	Positive perception
	Should be taught in school due to parental inability	4.05	Positive perception
	Sex education is an important subject	3.93	Moderate perception
Eziobodo Secondary Technical School	Helps prevent STDs	4.55	Positive perception
	Sex education is an important subject	4.20	Positive perception
	Should be taught in school due to parental inability	4.10	Positive perception
	Should be taught in secondary level	4.10	Positive perception
Nekede Secondary School	Sex education is important	4.57	Positive perception
	Should be taught in secondary level	4.44	Positive perception
	Should be taught in school due to parental inability	4.32	Positive perception
	Helps prevent STDs	4.21	Positive perception

Who Teaches Sex Education Across the Five Schools?

Findings on who teaches sex education indicate a shared responsibility between parents and schools, with stronger emphasis on schools. In Comprehensive Secondary School Obinze, respondents strongly agreed that parents usually teach about sex and its implications (WA = 4.42), while also supporting the view that sex education should be taught at the secondary school level (WA = 4.32).

In Army Day Secondary School, Obinze, the strongest response was that sex education should be taught in secondary schools (WA = 4.54), while parental involvement recorded moderate agreement (WA = 4.02). Similarly, Ihiagwa Secondary School respondents strongly agreed with the school's responsibility (WA = 4.30) while also acknowledging parental involvement (WA = 4.23).

In Eziobodo Secondary Technical School, students emphasized the role of schools, with sex education at the secondary level scoring a weighted average of 4.10. Nekede Secondary School respondents showed strong agreement for both school-based teaching (WA = 4.44) and parental involvement (WA = 4.28 and 4.27). These are revealed in Table 5.

Table 5: Who Teaches Sex Education Across the Five Schools

School	Item	Weighted Average	Interpretation
Comprehensive Secondary School Obinze	Parents usually teach about sex	4.42	Strong role of parents
	Should be taught in secondary level	4.32	School responsibility
Army Day Secondary School Obinze	Should be taught in secondary level	4.54	Strong school role
	Do parents teach about sex?	4.02	Moderate parental role
	Parents usually teach about sex	4.02	Moderate parental role
Ihiagwa Secondary School	Should be taught in secondary level	4.30	Strong school role
	Parents usually teach about sex	4.23	Strong parental role
Eziobodo Secondary Technical School	Should be taught in secondary level	4.10	Strong school role
Nekede Secondary School	Should be taught in secondary level	4.44	Strong school role
	Parents usually teach about sex	4.28	Strong parental role
	Do parents usually teach about sex?	4.27	Strong parental role

Discussion

The socio-demographic profile of respondents in this study aligns with patterns commonly reported in sex education research among Nigerian secondary school students. The predominance of females (57%) over males (43%) is consistent with findings from studies conducted in Benin City and Lagos, where female participation ranged between 60% and 52% respectively (Asekun-Olarinmoye *et al.,* 2014; Ademuyiwa, 2023). Similarly, a study in

Asaba, Delta State, reported a higher female representation of 60.1% (Onyekachi *et al.,* 2024). This trend may be attributed to higher school retention rates among female adolescents, particularly in urban and peri-urban settings, as well as a greater willingness among females to participate in discussions related to sexual and reproductive health. Additionally, recent national trends indicate increasing female enrolment in secondary schools compared to males, which may further explain this pattern.

The majority of respondents were within the 13–16-year age bracket, which corresponds with the typical age range of junior and senior secondary school students in Nigeria (Ademuyiwa *et al.,* 2023). Similar age distributions have been reported in studies from Osun State (Asekun-Olarinmoye *et al.,* 2014), Lagos State (Ademuyiwa *et al.,* 2023), and Delta State (Onyekachi *et al.,* 2024). This consistency reinforces the appropriateness of this developmental stage for assessing awareness, knowledge, and perceptions of sex education, as adolescence is a critical period for sexual identity formation and initiation of risk behaviors. Internationally, studies from Ghana and Kenya have also focused on adolescents aged 14–18 years, recognizing this phase as crucial for effective sexuality education interventions (Kantande, 2017; Aklamanu, 2025).

Religiously, the overwhelming dominance of Christianity (91%) among respondents reflects the sociocultural and religious homogeneity of southeastern Nigeria, particularly Imo State, which is predominantly Christian. Previous Nigerian studies have noted that strong religious affiliations, especially Christianity, significantly influence attitudes toward sexuality and sex education, often promoting conservative views that may limit open discussions on sexual health topics (Onyeonoro *et al.,* 2011). These attitudes are often shaped by doctrinal beliefs that guide school policies, particularly in mission or church-owned schools. Similar findings have been reported in Ghana, where Christian moral frameworks strongly influence adolescent sexuality education (15). This religious context is important for interpreting students' awareness and perceptions of sex education and suggests that parental beliefs play a significant role in determining adolescents' exposure to sexuality education.

The findings of this study revealed notable variations in awareness of sex education across the five secondary schools. Students from Army Day Secondary School and Comprehensive Secondary School Obinze demonstrated relatively higher levels of awareness, while Eziobodo Secondary Technical School showed substantial resistance and low awareness. Such intra-state disparities have also been documented in other Nigerian studies, where awareness levels differed significantly between public, private, and mission schools (Asekun-Olarinmoye *et al.,* 2014; FME, 2014). These differences may reflect variations in school leadership, teacher attitudes, institutional mission, and parental influence, as beliefs about sex education often differ among educators and school administrators. In contrast, studies from Lagos State have reported higher overall awareness, largely attributed to urbanization, greater media exposure, and the presence of school-based health programs (Ademuyiwa, 2023).

Conversely, studies from southeastern Nigeria have reported lower awareness levels due to

cultural taboos and limited formal instruction (9), findings that resonate with the low awareness observed in Eziobodo Secondary Technical School.

Internationally, similar challenges have been reported. In Kenya, Kantande (2017) observed that many secondary school students lacked basic awareness of comprehensive sexuality education, as school programs were often restricted to abstinence-focused messages. Likewise, Ghanaian adolescents demonstrated moderate awareness but limited depth of understanding, largely due to inconsistent school delivery and parental silence on sexual matters (Aklamanu, 2025). These findings suggest that the awareness gaps observed in this study reflect broader regional challenges rather than issues unique to Imo State.

Despite variations in awareness, students across all five schools demonstrated strong knowledge of sex education concepts, particularly regarding the prevention of premarital sex, early teenage marriage, sexually transmitted infections (STIs), HIV/AIDS, and unsafe abortion. This finding aligns with recent Nigerian studies reporting high levels of sexual health knowledge among secondary school students, especially in urban and semi-urban settings (Ademuyiwa *et al.,* 2023). This trend may be attributed to the Family Life and HIV Education (FLHE) programme introduced by the Federal Government of Nigeria, which integrates comprehensive sexuality and HIV education into the secondary school curriculum (FME, 2014).

Interestingly, the strong knowledge scores observed at Eziobodo Secondary Technical School contrast with the school's low awareness levels, suggesting that students may obtain sexual health information from informal sources, such as peers, the mass media, or religious programs. This pattern supports findings by Onyeonoro *et al.,* 2011), which reported that Nigerian adolescents often rely on peers and media as primary sources of sexual information when formal instruction is inadequate.

Compared with international contexts, the knowledge levels observed in this study appear relatively high. Studies from Uganda (Boozalis *et al.,* 2020) and Ghana (Aklamanu *et al.,* 2025) have reported persistent knowledge gaps regarding contraception, STI transmission, and reproductive physiology among adolescents. In Kenya, misconceptions about contraceptive effectiveness and consent remain common among secondary school students (Kantande *et al.,* 2017). The comparatively strong knowledge demonstrated in the present study suggests greater exposure to accurate sexual health information, even in settings with limited awareness. This aligns with findings of reported results in high knowledge of condom effectiveness despite low actual usage.

Overall, students in this study expressed overwhelmingly positive perceptions of sex education, viewing it as important, necessary at the secondary school level, and effective in preventing STIs and other sexual health problems. Similar positive attitudes have been reported in Lagos and other Nigerian settings (Ademuyiwa *et al.,* 2023). Comparable findings have also been reported in Uganda (Boozalis *et al.,* 2020) and Ghana (Aklamanu *et al.,* 2025) where adolescents supported the inclusion of sex education in school curricula despite cultural reservations. These positive perceptions indicate a readiness among adolescents to receive

structured and comprehensive sex education, underscoring the need for strengthened curricula, trained teachers, and supportive school environments.

Conclusion

The study revealed that secondary school adolescents in the selected areas have good knowledge and positive perceptions of sex education, with females more likely to engage and most students aged 13–16 years. Religious and cultural contexts influence exposure to sexual health information, and school-based instruction remains the primary source of accurate knowledge. Despite this, protective practices such as condom use remain low, highlighting a gap between knowledge and behavior. To address this, schools should strengthen comprehensive, age-appropriate sexuality education and ensure teachers are well-trained, while parents should be encouraged to participate actively in sexual health discussions. Policy support is essential for implementing and monitoring programs like the Family Life and HIV Education (FLHE), and targeted interventions should focus on schools with low awareness. Additionally, peer-led programs and media campaigns can help translate knowledge into safe sexual behaviors, ultimately reducing the risk of STIs, early pregnancy, and other adverse reproductive health outcomes.

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Project administration: OSG, ISO, OA and
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Data Analysis, Supervision and Visualization: OSG
Validation: All authors
Writing-original draft: OSG, OPI, ISO
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