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RESEARCH ARTICLE

KNOWLEDGE AND ATTITUDE ASSOCIATED WITH TEACHING SEX EDUCATION AMONGST
SECONDARY SCHOOL TEACHERS IN MANGU L.G.A IMPLICATION FOR THE HEALTH OF
THE GIRL CHILD PLATEAU STATE, NIGERIA

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ABSTRACT

The study investigated knowledge and attitude associated with teaching sex education amongst secondary school teachers in Mangu LGA. Survey research design was employed for the study. The population for the study consisted all the secondary school teachers that teach subjects related to sex education. A total of 367 male and female secondary school teachers constituted the sample of the study. Simple random sampling technique with replacement was employed to compose the sample of the study. The instrument used for data collection was questionnaire. Face validation of the instrument was obtained through the judgement of five experts from Federal College of Education, Pankshin. A reliability index of .73 was obtained. The findings of the study revealed that secondary school teachers possessed high level of knowledge of sex education. Secondary school teachers had positive attitude towards the teaching of sex education. Age had statistical significant influence on knowledge of sex education among secondary school teachers in Mangu LGA. Gender had statistical significant influence on teachers attitude towards the teaching of sex education in Mangu LGA. Based on the findings of the study, the paper therefore recommended among others that secondary school teachers who play pivotal role in the teaching of sex education should be exposed to special trainings such as workshops, seminars and conferences so as to enhance their skills and competence of teaching sex education, and secondary school teachers who teach sex education should be paid special allowances so they can develop and maintain positive attitude towards the teaching of sex education.

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INTRODUCTION

Background to the Study

Sexuality or sex education is an important aspect of the life of all humans. Almost all people, including children and most importantly the secondary school students deserve to know about sex education. Since adolescent boys and girls deserve to know about sex education, there must be dedicated and knowledgeable teachers who can teach them sex education. Such teachers are in the secondary schools. Sex education is a subject that is supposed to be valued by teachers, students and

parents. Incidentally, sex education seems not to be valued by the society. This explains why Azuzu (2003) observes that currently, sexuality education in most Nigerian schools is perceived as "value free". Most of the content of sex education is amorous because of the misplaced emphasis on safe sex, which tends to erode the cultural reserve of sex to married couples. The secondary school students deserve access to desirable information and skills required to aid in developing responsible decision about sexuality especially during adolescence, because of the urge for sexual experimentation at this stage and increased development of sexual organs. Absence of sex education gives rise to adolescent sexuality. Ogbuagu and Charles (1993) and Oloko and Omoloye (1993) have observed that adolescents, particularly those in secondary schools are involve in pre-marital sexual activities. A major consequence of this increased sexual activity is out of wedlock

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pregnancies which may result in either abortion or childbirth. As though the problems of adolescent girls' pregnancies were not challenging enough, Dixon-Mueller (1993) has reported that there is increased in the number of sexually transmitted infections including Acquired Immune Deficiency Syndrome (AIDS) among adolescents arising from their sexual activeness. Secondary school teachers supposed to play critical role in the teaching of sex education, but unfortunately, it appears that most secondary school teachers in Nigeria lack the skills, competences and the correct attitude to teach sex education. This explains why Ajala (2002) observed that some of the secondary school teachers who teach sex education skip topics related to reproductive system, some of the teachers feel ashamed to mention male and female reproductive organs, some don't answer questions on male and female reproductive organs while some of them don't respond to questions related to sexuality. Teachers' negative attitudes towards the teachings of sex education may hamper its teaching. Ikorok (2004) suggests that for effective teaching of sex education, certain qualities are required of the teacher.

The teacher should possess accurate and scientific knowledge relating to sexuality education in such areas as reproduction, body image, friendship, marriages, growth and development. He should be emotionally stable, honest, and accessible and should have positive attitude towards sex education. Nigerian culture like most traditional cultures, considers it a taboo to discuss sexual matters. It is feared that such action will breed immorality and sexual promiscuity (Ikorok, 2004). Such action in the actual sense breeds in ignorance or lack of knowledge of sexuality education. Partial or low knowledge as Florio and Stafford (1969) observe confers unwarranted sense of security which beclouds one's alertness to risk, danger and hazard associated with premarital sex. This unwarranted sense of security according to Okafor (1997) could be very dangerous among secondary school students most of who are in their adolescence period, a period known to be characterised by experimentation of sex and peer group worshipping. These characteristics may often open up informal channels of sex education from which incorrect information about sex and reproduction may be received by most girl-child.

Culture forbids teachers and parents, especially mothers who should be the first sexuality educators for their children from giving them the appropriate information on sexuality education such that youths grope in the dark and fall prey to preventable sexually-related-problems such as syphilis, gonorrhoea, including HIV and AIDS, unwanted pregnancies and abortion. The attendant consequences of abortion have predisposed many adolescent girls to infertility, pelvic inflammatory diseases and pre-mature death. The question then is whether the secondary school teachers have good knowledge of sex education which they teach as well as portray positive attitude toward the teaching of sex education. This is what this paper is set to explore.

Aims of the Study

The aims of this study was to determine the knowledge and attitude associated with teaching sex education among secondary school teachers in Mangu LGA.

Objectives of the study

Specifically, the objectives of the study were to:

1. Ascertain the level of knowledge of sex education among age 20-30 and 31+ secondary school teachers in Mangu LGA.
2. Find out the attitudes associated with teaching sex education among male and female secondary school teachers in Mangu LGA.

Research Questions

In order to guide the study, the following research questions were posed:

1. What is the level of knowledge of sex education among age 20-30 and 31+ secondary school teachers in Mangu LGA?
2. What are the attitudes associated with teaching sex education among male and female secondary school teachers in Mangu LGA?

Hypotheses

The following null hypotheses were formulated and tested at .05 level of significance.

1. There is no statistical significant difference in the level of knowledge of sex education among age 20-30 and 31+ secondary school teachers in Mangu LGA.
2. There is no statistical significant difference in the attitude associated with teaching sex education among male and female secondary school teachers in Mangu LGA.

MATERIALS AND METHODS

This section presents the description of the research design, the population for the study, the sample and sampling techniques, instrument for data collection and method of data collection. In order to achieve the purpose of the study, a survey research design was employed. The population of the study consisted of all secondary school male and female teachers that teach subjects related to sex education in Mangu LGA. The sample of the study consisted of 367 male and female secondary school teachers in Mangu LGA. The random sampling technique of balloting with replacement was adopted to compose the sample for the study. The instrument used for data collection was questionnaire. A 46-item knowledge and attitude associated with teaching sex education questionnaire (KAATSEQ) was used. The questionnaire was categorised into three sections - A,B and C, Section A contained two socio-demographic variable: sex and age, Section B elicited information on teachers' level of knowledge of sex education. This section required the respondents to indicate their level of knowledge by responding to response options of true or false. Section C contained information on teachers' attitudes towards the teaching of sex education. This section provided the response categories of: Strongly Agree (SA), Agree (A), Disagree (D), and Strongly Disagree (SD). Face validity of the instrument was obtained through the judgments of five experts drawn from the departments of Health and Physical Education and Educational Foundations from the Federal College of

Education, Pankshin. The experts were given a draft copy of the questionnaire. Based on the inputs, corrections and suggestions made by the experts, the final copy of the questionnaire was produced. The reliability of the questionnaire was determined through the outcome of the pretest using split-half method. A reliability index of .73 was yielded, which was considered appropriate for the present study.

Method of Data Collection

The researcher and three trained research assistants visited some secondary schools in Mangu LGA and distributed the questionnaire. The procedure for filling the questionnaire was explained to the teachers by the researcher and the three trained research assistants. Thereafter, the filled questionnaires were collected back on the spot.

Method of Data Analyses

The data generated for the study were analysed using frequencies and percentages to answer the research questions posed on the level of knowledge of sex education while mean was employed to answer the research question posed on attitude associated with teaching sex education. Percentages using modified Ashur's (1997) criteria for describing level of knowledge were utilized for providing answer to the research question posed on level of knowledge of sex education. In this regard, a proportion of less than 20 percent was considered "very low level of knowledge", 21-39 percent "low", 40-59 percent "Average", 60-80 percent "high" and above 80 percent very high level of "knowledge". On the other hand, means were used to answer research questions posed on attitude associated with teaching sex education. Likert Scale of summated rating was employed. The criterion mean of 2.5 was derived by adding all the weighted points divide by four. That is $4+3+2+1 = \frac{10}{4} = 2.5$. Thus, a positive response was considered if the mean was equal to or greater than 2.5. Conversely, it was considered negative if the mean was less than 2.5.

Chi-square and t-test statistics were used to test the null hypotheses postulated for the study. The hypotheses were rejected where the calculated values are equal to or greater than the table value. On the other hand, the hypotheses were accepted if the table values are greater than the calculated values.

RESULTS

In presenting the major findings relevant to the present study, the answers to the research questions are provided first using percentages and means. This is followed by testing of the postulated hypotheses using chi-square and t-test statistics. The results in Table 1 show that the secondary school teachers possessed high level of knowledge that: trichomoniasis is a sexually transmitted infection (age 20-30 = 82.35% > age 31+ = 53.29%), sex education is not a strong strategy for promoting sexual desires (age 20-30 = 76.47% > age 31+ = 64.46%), candidiasis is a sexually transmitted infection (age 20-30 = 74.11% > age 31+ = 60.91%), sex education is a strong strategy for controlling the spread of HIV/AIDS (age 20-30 = 62.94% < age 31+ = 75.63%), discussing sexual matters should not be put off until just a child's marriage (age 20-30 = 61.70% < age 31+ = 84.77%) and that sex education is not about teaching students how to have sex without pregnancy (age 20-30 = 67.64% < age 31+ = 68.02%). On the other hand, the table reveals that secondary school teachers possessed average level of knowledge that gonorrhoea when untreated can lead to salpingitis (age 20-30 = 42.35% > age 31+ = 50.25%), and that sexual information are better obtained from friends (age 20-30 = 58.82% > age 31+ = 50.76%). The overall results indicate that both age 20-30 secondary school teachers possessed high level of knowledge of sex education (age 20-30 = 64.53% > age 31+ = 60.41%).

Table 2 above reveals that secondary schools teachers do not discourage their students from asking questions related to sexuality (male $\bar{x} = 2.52 < \text{female } \bar{x} = 3.11$), don't feel embarrass to respond to questions on both male and female reproductive organs (male $\bar{x} = 2.90 < \text{female } \bar{x} = 3.09$), do

Table 1. Knowledge of Sex Education Amongst Age 20-30 and 31+ Secondary School Teachers in Mangu LGA

S/N	Items	Age 20-3-				Age 31+			
		n = 170				n = 197			
		Correct		Incorrect		Correct		Incorrect	
	f	%	f	%	f	%	f	%	
1	Discussion of sexual matters should be put off until just a child's marriage	105	61.76	65	38.23	167	84.77	30	15.22
2	Sexual information are better obtained informally from friends	100	58.82	70	41.7	100	50.76	97	49.23
3	Sex education is a strong strategy for promoting sexual desires	130	76.47	40	23.52	127	64.46	70	35.53
4	Sex education is a strong strategy for controlling the spread of HIV/AIDS	107	62.94	63	37.05	149	75.63	48	24.36
5	Sex education is a strategy for advancement of women's reproductive right	114	67.05	56	32.94	80	40.60	117	59.39
6	Sex education is about teaching students how to have sex without pregnancy	115	67.64	55	32.35	134	68.02	63	31.97
7	Teaching sex education can lead to promiscuity among students	135	79.41	35	20.58	118	59.89	79	40.10
8	Gonorrhoea when untreated can lead to salpingitis	72	42.35	98	57.64	99	50.25	98	49.70
9	Trichomoniasis is a sexually transmitted infection	140	82.35	30	17.64	105	53.29	92	46.70
10	Genital warts are sexually transmitted diseases	99	58.23	71	41.76	143	72.58	54	27.41
11	Sex education is a strategy for controlling over population	114	67.05	56	32.94	80	40.60	117	59.39
12	Candidiasis is a sexually transmitted disease	126	74.11	44	25.88	120	60.91	77	39.08
13	Chlamydia is one of the sexually transmitted infections	104	61.11	66	38.82	115	58.37	82	41.62
14	Chancroid is not a sexually transmitted infection	75	44.11	95	55.88	129	65.48	68	34.51
	Overall %		64.53		35.47		60.41		39.59

Table 2. Attitude Associated with the Teaching of Sex Education Amongst Male and Female Secondary School Teachers in Mangu LGA

S/N	Items	Male	Female
		n = 190	n = 177
		\bar{x}	\bar{x}
15	Parents should strongly oppose the teaching of sex education	2.60	2.74
16	Religious leaders should strongly oppose the teaching of sex education	2.86	2.86
17	I feel embarrassed when students ask me questions related to sex	2.63	2.76
18	I don't feel comfortable to mention the name penis when teaching sex education	2.76	2.65
19	I don't respond to students questions that are related to sexuality	2.51	3.04
20	I don't feel comfortable to mention the organ vagina when teaching my students	2.52	3.11
21	I often skip topics that deal with male and female reproductive system	2.57	2.80
22	I feel embarrassed to respond to questions on both male and female reproductive systems	2.90	3.09
23	I discouraged my students from asking questions related to sexuality	3.02	2.98
24	I don't like teaching sex education at all	2.79	3.14
Overall Mean \bar{x}		2.71	2.91

Table 3. Chi-square Analysis Verifying the Difference in Knowledge of Sex Education Amongst Age 20-30 and 31+ Secondary School Teachers in Mangu LGA

Variables	Cal χ^2	Tab. χ^2	Level of significance	df	Decision
Age					
Discussion of sexual matters should be put off until just a child's marriage	25.17	3.84	.05	1	Rejected
Sexual information are better obtained informally from friends	2.37	3.84	.05	1	Accepted
Sex education is a strong strategy of promoting sexual desires	6.24	3.84	.05	1	Rejected
Sex education is a strategy for controlling the spread of HIV/AIDS	6.96	3.84	.05	1	Rejected
Sex education can be a strategy for controlling over population	25.60	3.84	.05	1	Rejected
Sex education is a strategy for advancement of women's reproductive right	4.64	3.84	.05	1	Rejected
Sex education is about teaching students how to have sex without pregnancy	0.00	3.84	.05	1	Accepted
Teaching sex education can lead to promiscuity among students	20.37	3.84	.05	1	Rejected
Gonorrhoea when untreated can lead to salpigitis	2.27	3.84	.05	1	Accepted
Trichonomiasis is a sexually transmitted infection	34.70	3.84	.05	1	Rejected
Genital wart is not a sexually transmitted disease	8.35	3.84	.05	1	Rejected
Candidiasis is a sexually transmitted infection	7.17	3.84	.05	1	Rejected
Chlamydia is one of the sexually transmitted disease	0.77	3.84	.05	1	Accepted
Chancroid is a sexually transmitted diseases	16.86	3.84	.05	1	Rejected
	11.53	3.84	.05	1	Rejected

Table 4. Summary of t-test Verifying the Difference in Attitude Associated with Teaching Sex Education Amongst Male and Female Secondary School Teachers in Mangu LGA

Group	No	\bar{x}	SD	Level of significance	df	t.cal	t-tab	Decision
Male	190	2.71	.17					
Female	177	2.91	.18	.05	365	2.70	1.96	Rejected

not dislike teaching sex education (male $\bar{x} = 2.79 < \text{female } \bar{x} = 3.14$), do not refuse to respond to students' questions that are related to sexuality (male $\bar{x} = 2.51 < \text{female } \bar{x} = 3.04$), and don't skip topics that deal with male and female reproductive systems (male $\bar{x} = 2.57 < \text{female } \bar{x} = 2.80$). The overall results show that both male and female secondary school teachers have positive attitudes towards teaching sex education (male $\bar{x} = 2.71 > \text{female } \bar{x} = 2.91$).

Table 3 above shows that the overall calculated chi-square value of 11.53 at 3.84 degrees of freedom is greater than the table chi-square value of 3.84 at .05 level of significance (cal. $\chi^2 = 11.53 > \text{tab } \chi^2 = 3.84, p > .05$). Since the overall calculated chi-square value is more than the table chi-square value, the null hypothesis of no significant difference was rejected. This implies that age has statistical significant influence on the knowledge of sex education among age 20-30

and 31+ secondary school teachers in Mangu LGA. Results in table 4 reveal that the calculated t-value of 2.70 at 365 degrees of freedom is more than the t-table value of 1.96 at .05 level of significance (t-cal = 2.70 > t-tab = 1.96 p > .05). Since the calculated t-value is more than the table t-value, the null hypothesis of no significant difference was rejected. This implies that there is no statistical significant difference in the attitude associated with the teaching of sex education among male and female secondary school teachers in Mangu LGA.

Findings of the Study

The findings of the study are:

1. Secondary school teachers possessed high level of knowledge of sex education
2. Secondary school teachers had positive attitude towards the teaching of sex education

3. Age has statistical significant influence on knowledge of sex education amongst secondary school teachers in Mangu LGA.
4. Gender has statistical significant influence on teachers' attitude toward the teaching of sex education amongst secondary school teachers in Mangu LGA.

DISCUSSION

The results of the study show that secondary school teachers' knowledge of sex education was high. The high level of knowledge of secondary school teachers is not surprising, but expected because most of the teachers have been teaching sex education as a subject in their schools. It is therefore expected that the teachers should have sufficient knowledge of the subject matter they teach. This finding agrees with that of Davou (2010) who found that 95.2 percent of the secondary school students had a very high knowledge of sex education. On the other hand, this finding contrasts with that of Okafor (1997) who found that secondary school students possessed average level of knowledge of sex education. The difference in the findings may be adduced to the subjects' level of educational attainment. Since secondary school teachers play pivotal role in the teaching of sex education, they are more likely to have access to information related to sex education than the secondary school students. The finding also differed with the findings of Igbokwe and Charles (2004) whose study revealed that primary school teachers had low level of knowledge of family planning methods.

The finding that secondary school teachers had positive attitudes towards the teaching of sex education is surprising and not expected because most secondary school teachers face opposition from parents, religious leaders and traditional leaders who consider it a taboo to discuss sexual matters with adolescents for fear that such discussions will breed immorality and sexual promiscuity. Nevertheless, this finding corroborates that of Abiye (2004) who found that teachers had positive attitudes toward the teaching of sex education. This finding on the other hand, negates that of Ajala (2002) whose study revealed that subject teachers of religious study, moral education and guidance counsellors often do not feel comfortable with discussing some sex education topics with the students and do not know how to address their concerns and issues. This problem led to a situation where some teachers develop negative attitudes of skipping some topics related to sex education.

The finding that age had statistical significant influence on knowledge of sex education is surprising and not expected because one expect both the older and the younger teachers to possess the same level of knowledge since all of them teach the subject in their schools. However, this finding is in line with Okafor's (1997) findings that age had statistical significant influence on the knowledge of sex education among secondary school students in Anambra State. This finding further disagrees with that of Igbokwe and Charles (2004) who found that age had no statistical significant influence on the level of knowledge of family planning among primary school teachers in Nsukka LGA. The finding that gender had statistical significant influence on attitude towards the teaching

of sex education among secondary school teachers is surprising and unexpected because both male and female secondary school teachers in developing countries are not quite motivated and ill-equipped with the appropriate skills to teach the subject. This could give rise to portraying negative attitudes towards teaching of sex education amongst secondary school teachers. This finding is in contrasts with that of Ikechukwu (2004) whose study revealed that gender had no statistical significant influence on the practice and attitudes of safe sex among secondary school students in Enugu East LGA. The difference in the findings may be adduced to the disparity in the level of education as well as influence of location amongst the subjects.

Implication for the Health of the Girl-Child

Health is wealth; a healthy girl-child is an empowered individual. For the girl-child to be empowered, she must have a high level of knowledge of sex education and cultivate positive attitude towards safe sex. The knowledge of sex education can be obtained from competent, skilled and serious minded teachers. Reproductive health information emanating from sexuality education is a veritable tool that can promote the health of the girl-child and the health of the girl-child is the mean to her empowerment. A healthy and empowered girl-child promotes the development of a nation. The high level of knowledge of sex education possessed by secondary school teachers who teach sex education connotes that when that knowledge is transmitted to the girl-child, it will promote positive reproductive health of the girl-child which can in turn promote the development of an empowered girl-child. When a girl-child is healthy, fit and empowered, her contribution to national development is certain. When teachers transmit appropriate sexual information to the girl-child, it will help stamp out the misconceptions and ignorance which more often than not, confer unwarranted sense of sexual security that have over the years becloud the girl-child's alertness to risk, dangers and hazard associated with premarital sex. The ignorance that paves way to unwarranted sense of sexual security has predisposed the girl-child to unwanted pregnancy and its attendant complications such as abortion, infertility, pelvic inflammatory disease, vesico-vaginal fistulae and maternal mortality. These are capable of undermining the reproductive health of the girl-child.

Sexuality education provided by knowledgeable and skilled teachers of the girl-child would prevent the high rate of teenage pregnancy, illegitimate birth among adolescents and sexually transmitted infections including HIV and AIDS. The absence of these challenges would promote the health of the girl-child. The girl-child that is exposed to sexuality education from a competent teacher may have sufficient knowledge to take the right approach to safe sexual behaviour and to make vital modification in life-style as the teachers would provide accurate information to help the girl-child develop positive and healthy attitudes, values, goals and practices that would enable her express her sexual impulse and behaviour in a socially and acceptable manner. Secondary school teachers who possess high level of knowledge and positive attitudes toward the teaching of sex education may be capable of providing appropriate knowledge, correct myths and misconceptions and progression of life and enhance overall well-being of the girl-

child. This therefore calls for the need to expose the girl-child to sex education under skilled and competent teachers that have positive attitudes toward teaching sex education so as to enhance the health of the girl-child.

Conclusion and Recommendations

Based on the findings of the study, it was concluded that secondary school teachers possessed high level of knowledge of sex education. Secondary school teachers had positive attitudes towards the teaching of sex education. Age has statistical significant influence on knowledge of sex education among secondary school teachers. Gender has statistical significant influence on the teachers' attitudes towards the teaching of sex education. Based on the findings of the study, the following recommendations are proffered.

1. Secondary school teachers who play pivotal role in the teaching of sex education should be exposed to special training, workshops, seminars and conferences on sex education so as to update their skills.
2. Teachers who teach sex education should be motivated by way of giving them special allowances so they can be encourage to develop and maintain positive attitudes towards the teaching of sex education.
3. Health educators, institutions, churches and other proponents of sex education should design better educational strategies of teaching sex education so as to increase the level of knowledge of sex education among secondary school teachers.

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