

The Effect Of Sex Education On Adolescents' Sexual Behaviour Among Senior Secondary Schools Students

Rev. Fr. (Dr.) Augustine Owusu-Addo

Catholic University College of Ghana, Fiapre, P.O. Box 363, Sunyani

aoaddo58@aol.com

ABSTRACT: The study investigated on the effect of sex education on adolescents' sexual behaviour among senior secondary school students in Sunyani municipality. The study utilizes a descriptive survey design. The sample population consists of sixty students randomly drawn from six senior secondary schools in Sunyani municipality. The instruments used to elicit information from the respondents were questionnaires designed by the researcher. Descriptive statistical tools such as grand mean and arithmetic mean were used to interpret the data collected. The result shows that it is important to impact knowledge about sex education; sixty seven percent (67%) of the population lack the knowledge. From the survey, it was evident that sex education, when provided, is effective on adolescents, but most of them do not have the knowledge. Adolescents need to be provided accurate and correct information about Sex in order to form good attitude and beliefs toward Sex. Conclusively, sex education should be part of the school curriculum in order to educate adolescents. Parents should develop effective communication skills with their children, be their friends, and have a positive attitude toward Sex. The researcher established that the sex-related challenges (body changes, emotional changes and relationships) of adolescents in junior secondary school, sex education knowledge, sex education attitudes, skills and ways of teaching sex education to adolescents evolve the sex education needs of adolescents in secondary school. Sex education knowledge, attitudes, skills and ways of teaching sex education are ways sex education needs of adolescents could be met.

Keywords: Sex Education, Students, Adolescent, Secondary Schools

INTRODUCTION

Sex education, which is sometimes called sexuality education or sex and relationships education, is the process of acquiring information and forming attitudes and beliefs about Sex, sexual identity, relationships and intimacy. Sex education is also about developing young people's skills so that they can make informed choices about their behaviour, and feel confident and competent about acting on these choices. It is widely accepted that young people have a right to sex education. This is because it is a means by which they are helped to protect themselves against abuse, exploitation, unintended pregnancies, and sexually transmitted diseases. Providing an effective sex education helps to meet young people's rights to information about matters that affect them, their right to have their needs met and to help them enjoy their sexuality and the relationships that they form. To contribute to adolescent's full social and economic potential, young people need the knowledge and skills to make choices about when to have Sex and how to protect themselves from infection and unintended pregnancies. Comprehensive sex education curricular have been endorsed by various governmental agencies, educational organizations and teenage advocacy groups as the most effective educational method for reducing teenage pregnancy and helping prevent the spread of sexually transmitted diseases (STDs) among adolescent. Numerous surveys have suggested increased sexual experimentation by increasing numbers of teenagers at younger ages each year. Often, the outcome of this behaviour can have adverse consequences such as unplanned pregnancy and sexually acquired infections. It is necessary to understand some of the features of puberty and adolescence which increase the risk of STDs and their attendant complications. Sex education that works also helps equip young people with the skills to be able to differentiate between accurate and inaccurate information, and to discuss a range of moral and social issues and perspectives on Sex and sexuality, including different cultural attitudes and sensitive issues like sexuality, abortion and contraception. Akerele (2004) wrote that "sex is something you do, sexuality is something you are." This way of understanding Sex highlights the difference between the act of Sex and the individual experience of sexuality, which is an intrinsic part of who we are, one that can't be separated out of ourselves any more than our ethnicity or religious/spiritual beliefs. Sexuality is a natural and precious aspect of life, an essential and fundamental part of our humanity. For people to attain the highest standard of health they must first be empowered to exercise choice in their sexual and reproductive lives; they must feel confident and safe in expressing their own sexual identity.

Sex is probably one area of our lives about which we know so little. And whatever little we happen to know about Sex in bits and pieces through sources like friends, acquaintances and cheap sex books (Hoshi, 1987; Tjaden, 1988; Kumar, 1993). It is indeed ironical that while Sex is such an important aspect in our life, parents, elders and teachers hardly play any significant role in providing scientific knowledge. Since talking about Sex is a taboo in our society, the adolescents cannot freely approach his/her parents for guidance. Also, those who seek guidance from parents are not satisfied because they latter try to evade discussion or are not able to give satisfactory answers. A few of them try to gather information through books, films or from friends but a majority does not have access to such an information. Many a time, the adolescent receives wrong information and these myths and misconceptions are carried throughout their lifetime. Therefore, there is a need to provide adolescents with information so as to enable them to cope better with these changes. Though there is a need to educate the adolescents on sex education, parents oppose such educational programmes due to the fear that imparting sex education would lead to experimentation with Sex. Providing information through sex education is therefore about finding out what young people already know and adding to their existing knowledge and correcting any misinformation they may have.

Physical, psychological, and social attributes of adolescence make young people particularly vulnerable to HIV and other sexually transmitted infections (STIS) (Busari A.O.2003).Adolescents often are not able to comprehend fully the exposure to risk. Societies often compound young people's risk by making it difficult for them to learn about sex education and reproductive health. Moreover, many youths are socially inexperienced and dependent on others, peer pressure often influence them in a way that can influence their risk. When adolescent are not given or provided the necessary information about Sex, it places them at risk of getting pregnant, committing abortion or even contracting a sexually transmitted disease which make it a problem. Sex education primarily concerns with teaching on sex roles, conception, happy married life, child birth and prevention of sexually transmitted diseases. Where sex education is lacking, youths will be deprived of the knowledge of human reproductive system. There will be misuse of Sex for other things. There will be high spread of sexually transmitted diseases. There will also be an increase in the dangers of adolescent pregnancy. Finally, interpersonal relationship may be poor. So after considering the above problems that could result from lack of sex education, it was therefore considered imperative to find out the effect of sex education on adolescents in Sunyani municipality.

Objectives Of the study is To investigate on adolescents' knowledge about sex education.To ascertain the effects of sex education on adolescents.To identify the risk associated with sexual activity among adolescents, and To examine the attitude of adolescents toward sex education. Why the research questions are to answer the following questions What is the level of knowledge about sex education in adolescents? What are the effects of sex education on adolescents? What is the risk associated with sexual activity among adolescents? What are the strategies which could be adopted in the teaching of sex education?, and What are the aims of introduction or teaching of sex education in secondary schools

MATERIALS AND METHODS

Research Design

The study adopted a survey research design to evolve the sex education needs of adolescents in secondary schools in Sunyani municipality of Ghana. The design was considered appropriate since only a part or sample of the population was studied to represent the whole population. The study elicited information from a fairly large number of adolescents, parents and teachers of junior secondary schools in sunyani municipality.

Population of the Study

The population of the study consisted of students (adolescent boys and girls) in secondary schools, teachers that teach these students in secondary schools and parents of these students that attend PTA meetings in the schools in sunyani municipality. This population comprised 81,020 students (adolescent boys and girls), 4,138 teachers and 7,902 parents of students in 276 secondary schools in sunyanimunicipalityTherefore the target population was 93,060

Sample and Sampling Technique

The sample size was 398; adolescent students in junior secondary schools; 300, teachers that teach junior students Sex related subjects 40, and parents that attend Parents Teachers Dialogue (PTD) meetings 43.The multistage sampling technique was adopted in the selection of the sample for the study. This is because large population is



involved in over a wide geographical region (Okafor 2002). The first stage involved the purposive sampling of three zones out of the six educational zones. These zones were selected because of their attraction that caused large migrants from other zones and state of the country, the educational zones selected has local government areas under them. The second stage involved the random selection of one district from each of the three educational zones using equal proportional allocation. The third stage involved the stratified random selection of 10 schools from each of the zones through balloting with replacement techniques. The sample fully represented the population and adequately reflected the urban and rural communities

Instrument for Data Collection

The instrument for data collection was questionnaire. The items were constructed based on the research questions and literature reviewed. The items in the questionnaire covered demographic data information of the respondents, as well as in depth information on adolescence development and their sex education needs in sunyani municipality. The questionnaire was made up of two parts. Part one focused on personal data of the respondents while part two had five sections A-E which dealt with the specific purposes of the study and addressed the research questions 1,2,3,4 &5. In all, the questionnaire contained 81 structured items on a 4 point response scale each assigned a numerical scale as follows: Strongly agree (SA) -4; Agree (A) -3; Strongly Disagree (SD) -2; Disagree (D)-1;

Validation of the Instrument

The questionnaire was subjected to face validation by three lecturers from the Faculty of Vocational Teacher Education, University of Ghana. The three lecturers were required to modify and restructure the questionnaire. Their comments, suggestions and corrections were used in producing the final copy of the instruments with 81 items as shown in appendix B

Reliability of the Instrument

The instrument (questionnaire) was administered on 20 respondents on sex education needs of adolescents in secondary school of Enugu state. This was to ensure that the respondents that were used in the reliability test are excluded from the study sample. The internal consistency of the instrument was determined by analyzing the data obtained from the respondents using Cronbach Alpha reliability test. Cluster one (items 1-31) gave an index of 0.74, cluster two (items 32-47) gave an index of 0.61, third cluster (items 48-60) gave an index of 0.78, cluster four (items 61-71) gave an index of 0.85, cluster five (items 72-81) gave an index of 0.82 while the overall clusters yielded a reliability index of 0.76.

Method of Data Collection

The researcher administered 398 copies of the questionnaire by herself with the help of three assistants inducted by her. The researcher told the assistants what to do on how to collect the instruments. Copies of the questionnaire that was administered to respondents like parents & teachers, they were allowed to go with it after two days, research assistants will bring it back, but for adolescents, they will fill and answer it there under the direction of the research assistants. Out of the 398 administered, 383 were retrieved representing 92.4% return rate.

Method of Data Analysis

Mean & standard deviation were used to answer the five research questions while t-test was used to test the null hypotheses at 0.05 level of significance. The four point response option assigned values as; strongly agreed(SA)-4, Agreed(A)- 3, Disagree(D)- 2, and Strongly Disagree(SD)- 1. Any item whose mean value was 2.5 and above was regarded as agreed, while those items whose mean value were below 2.5 regarded as disagreed. The hypotheses of no significant difference was accepted for items whose t-cal were greater than 0.05. on the other hand, the hypotheses of no significant difference was rejected for items whose t-cal were less than 0.05.

RESULTS

Table 1

Mean and Standard Deviation Ratings of Adolescents, Parents and Teachers on Sex Related Challenges (Body Changes, Emotional Changes and Relationships with the Opposite Sex of Adolescents in Junior Secondary Schools of sunyani municipality.

S/N	Items-- Physical body changes related challenges	AD N=300 \bar{X}	SD	PAR N=43 \bar{X}	SD	TR N=40 \bar{X}	SD	\bar{X}_G	SD	Rm
1	Breast development and need for bra	3.65	0.57	3.18	0.61	3.62	0.92	3.60	0.63	SA
2	Start of menstruation and need for sanitary pads and hygiene	3.41	0.70	2.78	0.60	3.35	1.04	3.34	0.75	A
3	Enlargement of hips and need for new clothes	3.36	0.76	3.15	0.82	2.84	0.97	3.28	0.80	A
4	Appearance of pubic hairs and need for shaving instruments and hygiene.	3.29	0.81	3.07	0.86	3.13	0.94	3.25	0.83	A
5	Erection with ejaculation and need for underclothes	2.88	1.00	3.07	0.88	2.60	0.85	2.87	0.98	A
6	Non deepening of voice; need for acceptance	3.24	0.83	2.81	0.77	3.24	0.93	3.21	0.83	A
7	Appearance of large Adam's apple; need for acceptance	2.83	1.03	2.75	0.98	2.21	0.88	2.75	1.02	A
8	Growth of facial hairs and body; need for hygiene.	3.33	0.82	2.70	0.89	3.20	1.02	3.25	0.87	A
9	Changes in shape and height; need for new sets of clothing.	3.06	0.86	2.94	0.73	3.08	0.91	3.08	0.85	A
10	Appearance of acne; need for adequate cream	3.27	0.78	2.86	0.69	3.28	0.93	3.23	0.80	A
Emotional changes related challenges includes;										
11	Being moody and restless	3.36	0.89	2.97	0.77	3.37	0.95	3.32	0.89	A
12	Self consciousness as a result of body changes	3.27	0.82	2.97	0.72	3.42	1.02	3.23	0.85	A
13	Need to love and be loved by someone	3.35	0.72	3.46	0.58	3.23	0.97	3.35	0.73	A
14	Seeking for self identity	3.02	0.90	3.21	0.64	3.33	0.74	3.07	0.86	A
15	Dealing with altered appearance	3.13	0.88	3.11	0.95	3.55	0.64	3.16	0.87	A
16	Increased aggressiveness by sexually matured boys	3.41	0.80	3.42	0.72	3.10	0.96	3.38	0.81	A
17	Confronting sexual attitudes and values	2.50	1.07	3.44	1.03	2.26	0.15	2.57	1.08	A
18	Quest for independence and freedom	3.58	0.61	3.48	0.78	3.00	0.80	3.51	0.67	SA
19	Dealing with sexual drive and feelings.	3.37	0.80	3.44	0.65	3.23	0.81	3.36	0.79	A

20	Gender inequality	3.21	0.82	3.06	0.98	3.02	0.99	3.20	0.86	A
21	Sex roles and gender stereotyping.	3.35	0.77	3.08	0.92	2.97	1.02	3.28	0.83	A
Relationship with the opposite sex related challenges includes										
22	Indulging in unwholesome behavior like smoking drinking alcohol to meet with peer group demands	3.21	0.84	3.08	0.97	3.47	0.68	3.22	0.84	A
23	Seeing things differently from others	3.28	0.76	3.26	0.81	3.62	0.77	3.31	0.77	A
24	Choosing to stay with peers instead of family	3.33	0.76	3.34	0.81	3.23	0.78	3.33	0.78	A
25	Constant argument with parents and family	3.43	0.69	3.55	0.65	3.18	0.89	3.42	0.71	A
26	Cultural challenge	3.44	0.70	3.56	0.75	3.31	0.84	3.44	0.72	A
27	Developing feeling phenomena	3.56	0.67	3.57	0.75	2.81	0.76	3.49	0.76	A
28	Sexual tension	3.52	0.69	3.55	0.72	2.75	1.06	3.45	0.76	A
29	Contacting STDs, HIV during relationships	3.20	0.91	3.11	0.93	2.84	0.74	3.15	0.92	A
30	Loosing focus in life due to relationship	3.36	0.67	3.53	0.58	3.34	0.81	3.38	0.68	A
31	Other people misunderstanding your friendship	3.31	0.67	3.37	0.57	2.92	0.70	3.27	0.70	A

NB: SD= Standard Deviation; A=Agreed; and N= Number of Respondents; D= disagree, AD –Adolescent, PAR= Parents, TR=Teachers, XG= Grand Mean.

Table 1 show the mean distribution of the opinions of the respondents on the sex related challenges of adolescents in secondary school. The Tables have three themes/units namely-physical body changes related challenges, emotional changes related challenges and relationship with the opposite Sex. Under physical body changes related challenges items 2,3,4,5,6,7,8,9 and 10 with corresponding mean of 3.34,3.28, 3.25, 2.87, 3.21, 3.25, 2.75, 3.08 and 3.23 respectively were all within the range of 2.50- 3.49 indicating that they were all agreed by the respondents as the physical body changes related challenges of adolescents. Item1 with mean of 3.60 was within the acceptance range of 3.50- 4.00 showing that the respondents strongly agreed on the physical body changes related challenge. Under emotional changes related challenges, items 11, 12, 13, 14, 15, 16, 17, 19, 20 and 21 obtained means above the acceptance range of 2.50- 3.49 which is within the agreed category showing that the respondents agreed on the emotional changes related challenges of adolescents. But item 18 with grand mean of 3.51was strongly agreed as also the emotional changes related challenge of adolescents. Relationship with the opposite sex related challenges have all the outlined 10 items within the agreed range of 2.50- 3.49. these are items 21, 22, 23, 24, 25, 26, 27, 28, 29, 30 and 31 with their corresponding mean of 3.22, 3.31, 3.33, 3.42, 3.44, 3.49, 3.45, 3.15, 3.38 and 3.27 respectively were agreed by the respondents as challenges encountered in relationships with the opposite Sex by adolescents. A cluster mean of 3.25 was obtained for table one indicating that the sex related challenges of adolescents were agreed by the respondent. The standard deviation ranged from 0.63-1.08. This showed that the respondents were close to one another in their responses.

Table 2 Mean and Standard Deviation Ratings by Adolescents, Parents and Teachers on Sex Education Knowledge Needd by Adolescents to Cope With their Sex Related Challenges (383)

NB: SD= Standard Deviation; A= Agreed; and N= Number of Respondents; D= disagree

S/N	Sex education knowledge needed includes;	AD N=300		PAR N=43		TR N=40		XG	SD	Rm
		\bar{X}	SD	\bar{X}	SD	\bar{X}	SD			
1	Sex organs and their function	3.20	0.74	3.35	0.57	3.13	0.90	3.21	0.74	A
2	Puberty and its signs.	2.84	0.94	2.95	0.95	3.42	0.55	2.91	0.93	A
3	Contraceptives and abstinence	3.07	0.86	3.26	0.53	3.34	0.78	3.12	0.83	A
4	Necessary hygiene practices	3.31	0.76	3.40	0.57	3.34	0.62	3.32	0.72	A
5	Physical body changes.	3.14	0.84	3.20	0.75	3.28	0.69	3.16	0.81	A
6	Good grooming	3.11	0.82	3.02	0.89	3.34	0.70	3.12	0.82	A
7	Care and management of bodies and emotional changes	3.47	0.66	3.44	0.69	3.42	0.82	3.46	0.68	A
8	Wholesome relationship with the opposite Sex	3.33	0.75	3.35	0.77	3.05	0.92	3.30	0.77	A
9	Sexually transmitted diseases and HIV/AIDs	3.17	0.74	3.42	0.58	3.26	0.91	3.18	0.75	A
10	Encouraging adolescents to acquire skills for life	3.10	0.76	3.24	0.64	3.02	0.59	3.11	0.73	A
11	Conception , pregnancy and its signs	3.16	0.76	2.95	0.82	3.02	0.75	3.12	0.77	A
12	Proper clothing for different occasions	2.83	0.91	2.64	0.90	2.86	0.81	2.81	0.90	A
13	Dangers of contraceptives	3.29	0.73	3.46	0.62	3.28	0.61	3.31	0.71	A
14	Materials needed for personal hygiene practices	3.01	0.85	2.88	0.91	2.62	0.82	2.96	0.86	A
15	The issue of homosexuality and lesbianism	2.04	0.74	2.03	0.73	2.36	0.71	2.36	0.68	D
16	Browsing and watch pornographic pictures	2.22	0.99	2.21	1.00	2.31	0.76	2.31	0.91	D

AD=Adolescent, PAR – Parent, TR=teachers, XG = Grand mean, Rem.= Remark

In table 2, the mean ratings of respondents on the sex education knowledge needed by adolescents to cope with their sex related challenges is presented. The data revealed that items 1-14 with corresponding mean of 3.21,2.91,3.12,3.32,3.16,3.12,3.46,3.30, 3.18,3.31,and 2.96, respectively were agreed by the respondents as knowledge needed by adolescent to cope with their Sex related challenges as revealed by their mean range of 2.50-3.49. But item 15and 16 with correspondent mean score of 2.36 and 2.31 respectively are less than the acceptance range of 2.50 – 3.49. These items were not accepted by the respondents as the sex education knowledge needed by adolescent to cope with their sex related challenges. However a cluster mean of 3.23 was obtained for research Question 1. This shows that majority of the sex education knowledge needed by adolescents to cope with their Sex related challenges outlined were agreed by the respondents. The standard deviation of the items in the table were between 0.68- 0.93 indicating that that the responses of the respondents are close to one another and to the mean.

Table 3

Mean and Standard Deviation Ratings by Parents, Teachers, and Adolescents on the Attitudes Required by Adolescents to Cope with the Sex Related Challenges (N=383)

S/N	Items – Sex education attitudes required	AD N=300 \bar{X} SD		PAR N=43 \bar{X} SD		TR N=40 \bar{X} SD		\bar{X}	SD	Rm
1	Assertiveness	3.14	0.85	3.17	0.64	3.23	0.67	3.15	0.81	A
2	Self confidence	2.67	1.02	3.08	0.99	2.60	0.52	2.71	1.02	A
3	Respectfulness	2.88	1.01	2.64	1.05	2.86	0.90	2.85	0.99	A
4	Accessibility of sound sexuality information.	2.69	0.92	2.66	1.06	2.52	1.05	2.67	0.96	A
5	Having improved parent-child communication	2.81	0.96	2.88	1.00	2.76	0.91	2.81	0.96	A
6	Being polite to the opposite Sex.	2.78	0.98	2.75	0.95	2.97	0.82	2.80	0.92	A
7	Sound mind	2.84	0.95	2.86	0.81	3.02	0.71	2.86	0.90	A
8	Maintaining clean appearance	2.78	0.92	2.82	0.91	2.91	0.68	2.80	0.93	A
9	Being responsible	2.69	0.96	3.66	1.05	2.6	0.87	2.80	1.07	A
10	Being sensitive	2.65	1.05	2.86	0.47	2.81	0.89	2.65	0.91	A
11	Depending on peers for sexuality information	2.31	0.65	2.02	0.83	2.40	0.86	2.25	0.79	D
12	Dressing indecently	2.22	0.73	2.21	0.85	2.30	0.65	2.24	0.89	D
13	Improved self control	2.74	0.88	2.66	0.90	3.34	0.78	2.79	0.97	A

NB: *SD= Standard Deviation; A= Agreed; and N= Number of Respondents; D= disagree*
AD=Adolescent, PAR = Parents, TR=teachers, XG= Grand mean, RM= Remarks,
SA=Strongly Agree

Table 3 indicates that the respondents agreed that items 1,2,3,4,5,6,7,8,9,10 and 13 with corresponding grand mean of 3.15,2.71,2.85,2.67,2.81,2.80,2.86,2.80, 2.65,2.80 and 2.79 respectively are sex education attitudes required by adolescents to cope with their sex related challenges. But items 11 and 12 with the grand mean of 2.24 and 2.25 shows that the respondents did not accept them as sex education attitudes required by adolescents to cope with the sex related challenges.

Table 4

Mean and Standard Deviation Ratings by Adolescents, Parents and Teachers on Sex Education Skills Required by Adolescents to Cope with their Sex Related Challenges (N=383)

S/N	Items	AD N=300 \bar{X} SD		PAR N=43 \bar{X} SD		TR N=40 \bar{X} SD		XG	SD	Rmk
1	Physical body changes related skills	2.73	0.92	2.55	0.91	2.94	0.98	2.73	0.92	A
2	Communication skills	3.36	0.78	3.31	0.87	3.31	0.93	3.35	0.81	A
3	Coping skills like accepting what one cannot control.	3.34	0.66	3.37	0.77	3.44	0.60	3.39	0.67	A
4	Embracing healthy self esteem	3.50	0.71	3.55	0.75	3.28	0.76	3.49	0.72	A
5	Self disclosure skill	Emotional changes related skills needed includes								
5	Goal setting skill	3.35	0.75	3.33	0.87	3.31	0.61	3.34	0.75	A

6	Decision making skill	3.00	0.83	3.06	0.86	3.39	0.67	3.04	0.83	A
7	Risk taking skill	3.13	0.80	3.13	0.78	3.34	0.68	3.16	0.79	A
Relationship with the opposite sex related skill										
8	Listening skill	3.30	0.67	3.20	0.50	3.21	0.90	3.27	0.68	A
9	Negotiation skill	3.03	0.73	3.13	0.62	3.10	0.79	3.04	0.89	A
10	Relationship skill	3.25	0.83	3.40	0.61	3.23	0.78	3.26	0.80	A
11	Refusal skill	3.53	0.64	3.62	0.49	3.27	0.83	3.52	0.65	SA

NB: *SD= Standard Deviation; A= Agreed; N= Number of Respondents; D= disagree, SA=strongly agree, AD=Adolescent, PAR= Parents, TR=Teachers, XG= Grand mean.*

Table 4 shows that the mean ratings of the respondents' responses on item 11 with grand mean value of 3.52 were strongly agreed as the relationship with the opposite sex skill needed by adolescents to cope with Sex related challenges. While items 1-10 with grand mean value that ranged from 2.75 to 3.49 which were within the real limit of number 2.50 to 3.49 on 4-point rating scale, revealed that the remaining 10 identified skills were agreed by the respondents. This shows that adolescents need the skills outlined in junior secondary schools to cope with their physical body changes and emotional changes Sex related challenges. The grand standard deviation values of the 11 items ranged between 0.65 to 0.93 indicated that the responses are close to one another and to the mean.

Table 5
Mean and Standard Deviation Ratings by Adolescents, Parents and Teachers on the Ways of Teaching Sex Education Needs to Adolescents in Junior Secondary Schools in SUNYANI MUNICIPALITY(N=383)

S/N	Items Ways of teaching sex education include;	AD N=300 X_{SD}		PAR N=43 X_{SD}		TR N=40 X_{SD}		XG	SD	Rm
1	Showing relevant video film	3.45	0.72	3.28	0.72	3.34	0.79	3.42	0.72	A
2	Reading real life stories of people whom Sex has destroyed	3.30	0.75	3.17	0.74	3.32	0.62	3.29	0.74	A
3	Giving handouts to students.	3.32	0.70	3.22	0.67	3.36	0.75	3.31	0.70	A
4	Telling personal stories relating to dangers of illicit and unprotected sex	3.14	0.87	2.95	0.85	3.34	0.70	3.14	0.85	A
5	Allow opportunities to ask questions	2.72	1.05	2.37	0.98	3.02	0.78	2.71	1.03	A
6	Having sex education as a course or subject in the school	2.55	1.00	2.26	0.83	3.13	0.77	2.57	0.98	A
7	Using counseling methods	2.89	0.89	2.88	0.93	3.00	0.90	2.90	0.89	A
8	Using role play method	3.27	0.73	3.17	0.64	3.36	0.67	3.27	0.72	A
9	Using lecture method	2.98	0.92	2.88	1.04	2.94	0.73	2.96	0.92	A
10	Using discussion method	3.24	0.82	3.20	0.84	2.97	0.88	3.21	0.83	A

NB: *SD= Standard Deviation; A= Agreed; and N= Number of Respondents; D= disagree, SA= strongly agreed, AD- Adolescents, PAR= Parents, TR=Teachers, XG= Grand mean.*

Table 5 revealed that the ways of teaching sex education needs to adolescents in junior secondary schools which was outlined were all agreed by the respondents. The grand mean value of the 10 items ranges from 2.57 to 3.47 which fell within the real limit of number 2.50 – 3.49 on 4-point rating scale. The standard deviation equally shows the relevance of the methods identified as different ways of teaching sex education needs of the adolescents.

Testing of Hypotheses

Hypothesis One

There is no significant difference in the mean responses of teachers and adolescents on the sex related challenges of adolescents in junior secondary schools in sunyani municipality.

Data relevant to hypothesis 1 are presented in Table 6.

Table 6

t-test Analysis of Mean Responses of Teachers and Adolescents on the Sex Related Challenges of Adolescents in Junior Secondary Schools

S/N	Physical body changes related challenges	TR (N=40)		AD (N=300)		t-cal	Rmk
		Mean	SD	Mean	SD		
1	Breast development and need for bra	3.11	0.82	3.10	0.83	0.137	NS
2	Start of menstruation and need for sanitary pads hygiene	3.45	0.61	3.46	0.61	-0.125	NS
3	Enlargement of hips and need for new clothes	3.17	0.81	3.13	0.84	0.526	NS
4	Appearance of pubic hairs; need for shaving instruments and hygiene.	2.58	0.89	2.58	0.88	-0.029	NS
5	Erection with ejaculation; need for underclothes.	2.62	0.89	2.72	0.89	-0.224	NS
6	Non deepening of voice; need for acceptance	2.56	0.90	2.56	0.92	0.050	NS
7	Growth of facial hairs and body; need for hygiene.	2.38	0.92	2.31	0.93	0.742	NS
8	Appearance of large Adam's apple; need for acceptance.	3.11	0.79	3.13	0.79	-0.232	NS
9	Changes in shape and height; need for new sets of clothing.	3.00	0.75	3.02	0.76	-0.254	NS
10	Development of acne; need for adequate cream	3.06	0.71	3.07	0.73	-0.071	NS
	Emotional changes related challenges						
11	Being moody and restless	3.29	0.69	3.29	0.71	0.056	NS
12	Self-consciousness as a result of body changes	3.34	0.69	3.31	0.72	0.355	NS
13	Need to love and be loved by someone	3.00	0.74	3.12	0.76	0.109	NS
14	Seeking for self identity.						
15	Dealing with the altered appearance	2.98	0.80	3.56	0.95	0.056	NS
16	Confronting sexual attitude and values	3.13	0.90	3.50	0.64	0.015	S*
17	Increased aggressiveness by sexually matured boys	2.50	0.88	3.44	0.07	0.000	S*
18	Quest for freedom and independence	3.41	1.07	3.10	0.80	0.360	NS
19	Dealing with sexual drive and feelings.						
20	Gender inequality	3.58	0.80	3.00	0.61	0.000	S*
21	Sex roles and gender stereotyping.	3.37	0.61	3.23	0.80	0.341	NS
	Relationship with the opposite sex related challenges						
22	Indulging in unwholesome behaviors like smoking, drinking alcohol to meet with peer group demands	3.24	0.80	3.02	0.99	0.131	NS
23		3.35	0.83	2.97	0.77	0.007	S*

22	Seeing things differently from others						
23	Choosing to stay with peers instead of family	3.21	0.84	3.47	0.84	0.066	NS
24	Constant argument with parents and family	3.28	0.79	3.63	0.79	0.014	S*
25	Cultural challenge	3.33	0.76	3.23	0.76	0.472	NS
26	Developing feeling phenomena						
27	Sexual tension	3.43	0.69	3.18	0.69	0.390	NS
28	Contacting STDs, HIV during relationship	3.44	0.70	3.31	0.70	0.304	NS
29	Loosing focus in life as a result of relationships	3.56	0.67	2.82	0.67	0.000	S*
30	Other people misunderstanding your friendships	3.53	0.69	2.75	0.69	0.000	S*
31		3.20	0.91	2.75	0.91	0.020	S*
		3.36	0.67	3.34	0.68	0.829	NS
		3.31	0.67	2.92	0.68	0.002	S*
	Grand total	2.73	0.78	3.00	0.79	0.080	NS

NB: *SD*= Standard Deviation; *A*= Agreed; and *N*= Number of Respondents; *t-cal*= *t*-test calculated; *NS*= Not significant, *S** = Significant

Table 6 above show that in all the 31 items, *t-cal* was greater than level of significance of 0.05 in ten items in physical body changes challenges, seven out of eleven items in emotional changes challenges and five out of ten items in relationship related challenges. Therefore the null hypothesis of no significant difference in the mean responses of teachers and parents on the sex related challenges of adolescents in junior secondary schools was accepted for 22 items. All in physical body changes and challenges, 7 in emotional changes challenges and 5 in relationship with the opposite Sex. On the other hand, the *t-calculated* (*t-cal*) values of the remaining 9 items was less than the level of significance 0.05. This indicated that there was significant differences in the mean rating of the responses of teachers and adolescents on the sex related challenges of adolescents.

Hypothesis 2:

There is no significant difference in the mean responses of teachers and parents on the sex education knowledge needed by adolescents to cope with their sex related challenges.

Data relevant to hypothesis 2 are presented in Table 7.

Table 7

t-test Analysis of Mean Responses of Teachers and Adolescents on the Sex Education Knowledge Needed by Adolescents to Cope with their Sex Related Challenges

S/N	Sex education knowledge include	TR (N=40) Mean	SD	PAR (N=43) Mean	SD	t-cal	Remark
1	Sex organs and their functions	2.76	1.00	2.69	0.74	1.050	NS
2	Puberty and its signs	3.26	0.70	3.30	0.71	-0.683	NS
3	Contraceptives and abstinence	3.16	0.74	3.13	0.77	0.471	NS
4	Necessary hygiene practices.	3.31	0.63	3.25	0.69	0.899	NS
5	Physical body changes.	2.89	0.78	2.86	0.82	0.397	NS
6	Care and management of their body and emotional changes	2.95	0.75	2.95	0.76	-0.024	NS
7	Wholesome relationships with the opposite Sex	2.92	0.89	3.00	0.87	-0.941	NS
	Sexually transmitted diseases and						

8	HIV/AIDS	3.19	0.87	3.22	0.85	-0.321	NS
9	Encouraging adolescents to acquire skills for life	2.76	0.82	2.78	0.85	0.207	NS
10	Conception, Pregnancy and its signs and birth.	2.96	0.78	2.93	0.77	0.439	NS
11	Proper clothing for different occasions.	3.16	0.76	3.02	0.75	0.284	NS
12	Dangers of contraceptive	2.83	0.91	2.86	0.81	0.849	NS
13	Good grooming	3.28	0.73	3.29	0.61	0.954	NS
14	Materials needed for personal hygiene practices.	3.01	0.85	2.62	0.82	0.048	S*
15	The issue of homosexuality and lesbianism.	3.36	0.68	3.26	0.68	0.395	NS
16	Browsing and watching pornographic pictures	2.76	0.92	2.97	0.88	0.008	S*
Grand total		2.88	0.79	2.88	0.80	0.18	NS

NB: SD=Standard Deviation; A= Agreed; and N= Number of Respondents; t-cal= t-test calculated; NS= Not significant, S= Significant

Table 7 above shows that in 14 out of 16 items, t-cal was greater than level of significance of 0.05. Therefore the null hypothesis which states that there is no significant difference in the mean responses of teachers and adolescents on the sex education knowledge needed by adolescents to cope with their Sex related challenges was accepted in 14 items, while on the remaining two items, t-cal is less than the level of significance. This indicates that there were significant difference in the mean rating of the responses of parents and teachers on the knowledge outlined as the sex education knowledge needed by adolescents to cope with their sex related challenges.

Hypothesis 3:

There is no significant difference in parents and teachers' mean responses on the sex education attitudes required by adolescents to cope with their sex-related challenges.

Data relevant to hypothesis 3 were presented in Table 8.

Table 8

t-test analysis of mean responses of parents and teachers on the sex education attitudes required by adolescents to cope with their sex-related challenges

TR (N=42)		PAR (N=40)		t-cal	RM
Mean	SD	Mean	SD		
3.17	0.92	2.76	1.00	0.746	NS
3.08	0.91	2.88	0.96	0.412	NS
2.64					
2.66	0.85	2.84	0.93	1.021	NS
2.88	0.83	2.90	0.89	0.905	NS
2.75	0.95	2.78	1.04	0.621	NS
2.86	0.85	2.86	0.90	0.331	NS
2.82	0.89	2.96	0.99	0.586	NS
2.88	1.05	2.81	0.87	0.712	NS
3.66	0.47	2.62	0.89	0.000	S*

Attitudes	2.86	1.07	2.81	0.93	0.805	NS
Required includes;	2.57	0.96	2.89	0.95	0.138	NS
Assertiveness	2.66	0.90	3.34	0.78	0.000	S*
Self-confidence	3.08	0.91	2.60	0.82	0.020	S*
Respectfulness						
Accessibility of sound		0.89	2.64	0.96	0.66	NS
sexuality information.						
Having improved parent-child communication and						
relationships.						
Improved self-control						
I was being polite to the opposite Sex.						
Sound mind.						
Maintaining clean appearance.						
Being responsible.						
Being sensitive.						
Depending on peers for information						
Dressing indecently						

Grand total

NB: *SD= Standard Deviation,*

S=significance, A=Agreed; and N= Number of Respondents; t-cal= t-test calculated; NS= Not significant*

Table 8 above shows that in all the 10 items, t-cal was greater than level of significance of 0.05 in ten items. Therefore the null hypothesis which states that there is no significant difference in the mean responses of parents and teachers on the sex education attitudes required by adolescents to cope with their Sex related challenges was upheld in the 10 items above. But in three items t-cal was less than the level of significance, therefore there was a significant difference in the mean response of teachers and parents on the sex education attitudes required by adolescents to cope with their sex related challenges.

Hypothesis 4:

There is no significant difference in the mean responses of teachers and adolescent on the sex education skills required by adolescents to cope with their sex related challenges.

Data relevant to hypothesis 4 are presented in Table 9.

Table 9

t-test analysis of mean responses of teachers and adolescents on the sex education skills required by adolescents to cope with their Sex related challenges

S/N	Physical body changes related skills included	TR (N=40)		AD (N=300)		t-cal	Remark
		Mean	SD	Mean	SD		
1	Communication skill	3.42	0.70	3.36	0.74	0.927	NS
2	Coping skill like accepting what one cannot control	3.32	0.76	3.32	0.78	-0.008	NS
3	Embracing high self esteem	3.34	0.75	3.29	0.78	0.732	NS
4	Self disclosure skill	3.31	0.74	3.25	0.78	0.786	NS
	Emotional changes related skills						
5	Decision making skill	3.27	0.70	3.22	0.74	0.784	NS
6	Goal setting skill	3.14	0.85	3.08	0.88	0.777	NS

7	Risk taking skill	3.14	0.79	3.07	0.85	0.951	NS
Relationship with the opposite sex related skills							
8	Relationship skill	3.14	0.84	3.23	0.73	0.851	NS
9	Negotiation skill	3.36	0.84	3.37	0.84	-0.090	NS
10	Listening skill	3.34	0.73	3.34	0.74	0.075	NS
11	Refusal skill	3.0	0.72	3.11	0.73	-0.198	NS
Grand Total		2.90	0.76	3.24	0.79	0.474	NS

NB: SD= Standard Deviation; A= Agreed; and N= Number of Respondents; t-cal= t-test calculated; NS= Not significant, S= Significant

Table 9 above shows that in all the 11 items, t-cal was greater than level of significance of 0.05 in all the items. Therefore the null hypothesis which states that there is no significant difference in the mean responses of teachers and adolescents on the sex education skills required by adolescents to cope with their Sex related challenges was upheld in all the items above.

Hypothesis 5:

There is no significant difference in the mean responses of teachers and parents on different ways of teaching sex education needs of adolescents. Data relevant to hypothesis 5 were presented in Table 10.

Table 10

t-test analysis of mean responses of teachers and parents on different ways of teaching sex education needs of adolescents

S/N	Items	TR (N=40)		PAR (N=43)		t-cal	Remark
		Mean	SD	Mean	SD		
1	Showing relevant video film	3.36	0.64	3.39	0.69	-0.226	NS
2	Reading real life stories of people whom sex has destroyed	3.24	0.78	3.27	0.83	-0.267	NS
3	Giving handouts to students	3.43	0.68	3.46	0.63	-0.294	NS
4	Telling personal stories relating to dangers of illicit and unprotected Sex	3.36	0.75	3.29	0.78	0.731	NS
5	Allow opportunities to ask questions	3.32	0.59	3.29	0.59	0.450	NS
6	Having sex education as a course or subject in the school	3.17	0.81	3.11	0.81	0.491	NS
7	Using counseling methods	3.00	0.77	2.97	0.74	0.264	NS
8	Using role play method	2.87	0.75	2.86	0.79	0.124	NS
9	Using lecture method	3.10	0.57	3.19	0.55	-1.069	NS
10	Using discussion method	3.09	0.65	3.11	0.65	-0.217	NS
Grand Total		3.19	0.69	3.19	0.71	-0.001	NS

NB: SD= Standard Deviation; A= Agreed; and N= Number of Respondents; t-cal= t-test calculated; NS= Not significant, S= significance

Table 10 above shows that in all the 10 items, t-cal was greater than level of significance at 0.05 in ten items. Therefore the null hypothesis which states that there is no significant difference in the mean responses of teachers and parents on different ways of teaching sex education needs of adolescents was upheld in all the items above. This indicates teachers and parents do not differ in their mean ratings on different ways of teaching sex education needs of adolescents.

H0₁: There were no significant differences in the mean ratings of the responses of adolescents and teachers on the 22 out of the 31 challenges identified as it relates to their physical body changes, emotional changes and relationship with

the opposite Sex. On the other hand, the t-calculated (t-cal) value of the remaining 9 items was less than the level of significance 0.05. This indicated that there were significant differences in the mean rating of the responses of teachers and adolescents on the sex related challenges of adolescents.

H0₂: There were no significant differences in the mean ratings of the responses of adolescents and teachers on 14 out of 16 identified sex education knowledge needed by adolescents to cope with their Sex related challenges, while on the two remaining knowledge, there were significant differences in the mean responses of teachers and adolescents on the sex education knowledge needed by adolescents to cope with their sex related challenges.

H0₃: There were no significant differences in the mean response of parents and teachers on 10 out of 13 identified sex education attitudes required by adolescents to cope with their sex related challenges. But in three items, therefore there was a significant difference in the mean response of teachers and parents on the sex education attitudes required by adolescents to cope with their sex related challenges.

H0₄: There were no significant differences in the mean response of teachers and adolescents on the 11 sex education skills required by adolescents to cope with their sex related challenges. Therefore the null hypothesis which states that there is no significant difference in the mean responses of teachers and adolescents on the sex education skills required by adolescents to cope with their sex related challenges is accepted.

H0₅: There were no significant difference in the mean responses of teachers and parents on the 10 different ways of teaching sex education needs to adolescents. This indicates that teachers and parents do not differ in their mean ratings on different ways of teaching sex education needs of adolescents.

DISCUSSION

Sex related Challenges (body changes, emotional changes and relationships) of Adolescents in Junior Secondary School of sunyani municipality

The discussion of this study was done under the following sub-headings: the sex related challenges (body changes, emotional changes and relationships) of adolescents in junior secondary school of sunyani municipality ; the sex education knowledge needed by adolescents to cope with the sex related challenges; the attitudes needed by adolescents to cope with their sex related challenges; the skills required by adolescents to cope with their sex related challenges and different ways of teaching sex education needs to adolescents. Findings of this study on research question one in table 1 revealed that the respondents agreed on the 31 identified items of the sex related challenges being faced by adolescents in Junior secondary schools in sunyani municipality. The challenges were in three units- physical body changes challenges, emotional changes challenges and relationships with the opposite sex related challenges. Which means that development of breast; need for bra, start of menstruation; need for sanitary pads and hygiene, enlargement of hips; need for new clothes, appearance of pubic hairs ; need for shaving instruments and hygiene, erection with ejaculation; need for underclothes, non deepening of the voice; need for acceptance, growth of facial hairs and body; need for hygiene, appearance of large Adam's apple; need for acceptance, changes in height and shape; need for new sets of clothing, development of acne; need for adequate cream are the physical body changes Sex related challenges. Being moody and restless, self consciousness as a result of the changes, need to love and be loved by someone, seeking for self identity, dealing with the altered appearance, confronting sexual attitudes and values, increased aggressiveness by sexually matured boys, quest for freedom and independence, dealing with sexual drive and feelings, gender inequality, sex roles and stereotyping are the emotional changes Sex related challenges and indulging in unwholesome behaviours like smoking, drinking alcohol to meet with peer group demands, seeing things differently from others, choosing to stay with peers instead of family, constant argument with parent and family, cultural challenge, developing feeling phenomena, sexual tension, contacting STDs and HIV during relationships, losing focus as a result of relationships, other people misunderstanding your friendship are relationship with the opposite sex related challenges of adolescent in junior secondary schools in sunyani municipality.

These findings are in agreement with the findings of Moore (1993) who stated that challenges of the boys may be different from that of the girls, some of the challenges includes teenage motherhood,(adolescent pregnancy), body changes, dropout of school, pain in the testis, pornographic photos, addiction adolescents, adjusting to the altered appearance, functioning of the maturing body, learning to deal with sexual desires, confronting sexual attitudes and

values, experimenting with sexual behaviours and integrating these feelings, attitudes and experiences into a developing sense of adulthood. However, Erickson (2007) findings showed that the major pubertal and biological changes include those of sex organs, heights, weights, and muscle masses, including major changes in brain structures and organizational role, priming the body to behave in a certain way once puberty begins, and an activation role, referring to changes in hormones during adolescence that trigger behavioral and physical changes. Christie et al (2005), and Hill (2008), were not distinct. They pointed out that these biological characteristics are triggered by the pituitary gland which secretes a surge of hormonal agent into the blood stream, initiating a chain reaction. In physical body, changes manifest in appearance of pubic, facial and body hair, deepening of voice, roughening of the skin around the upper arms and thighs and increased developing of the sweat glands. He went on to explain that secondary sex changes involve elevation of the breast, widening of the hips, developing of pubic and underarm hair, widening of the aureole, and of the nipples, all these changes comes with their challenges; physically, emotionally and how they relate with their peers

Sex Education Knowledge needed by Adolescents to Cope with the Sex related Challenges

Findings of this study revealed sex education knowledge needed by adolescents to cope with the sex related challenges. This showed that the respondents agreed on the items of the instrument except in item 15 and 16. This means that the sex education knowledge adolescents need includes: Puberty and its signs, Sense organs and its function, contraceptives and abstinence, necessary hygiene practices, physical body changes, care and management of their body and emotional changes; wholesome relationship with the opposite Sex; sexually transmitted diseases and HIV/AIDS; encouraging adolescents to acquire skills for life. Conception, pregnancy, its signs and births; danger of contraceptives, proper clothing for different occasions, good grooming and materials needed for personal hygiene practices. however, the issue of homosexuality and lesbianism; and browsing the internet to watch pornographic video are not accepted by respondents as the sex education knowledge needed by adolescents to cope with their sex related challenges.

This is in consensus with Simon, et al (2008), who subscribed that the typical of such experience of relationship increases throughout the teenage years as well. They said that this constant increase in the likelihood of a long-term relationship can be explained by sexual maturation and the development of cognitive skills necessary to maintain a romantic bond such as care-giving and appropriate attachment, although these skills are not strongly developed until late adolescence. Seiffge-Krenke, et al (2002) also stated that the age of consent to sexual activity varies widely among international jurisdictions, ranging from 12 to 21 years. They proved that adolescents often date within their demographics in regards to race, ethnicity, popularity, and physical attractiveness. They also affirmed that there are traits in which certain individuals, particularly adolescent girls, seek diversity. In their opinion, while most adolescents date people approximately their own age, boys typically date partners the same age or younger, girls typically date partners the same age or older. Halpern, et al (2004), agree with these views and specifically elucidated in their research' Prevalence of partner violence in same-sex romantic and sexual relationships in a national sample of adolescents', that dating violence is fairly prevalent within adolescent relationships. Expatriating the results of their work, they typified that 10-45% of adolescents were reported having experiencing physical violence in the context of a relationship, while one-third to a quarter of adolescents were reported having experience psychological aggression, although this did not result in a medical visit.

The Sex Education Attitudes needed by Adolescents to Cope with their Sex related Challenges

Findings of this study equally indicated that the respondents agreed in all the items of the instrument above except item 27 and 28. This means that the sex education attitudes required by adolescents to cope with their sex related challenges are: Being assertiveness; self confidence; respectfulness; accessibility of sexuality information; having improved parent-child communication and relationships; having improved self control, being polite to the opposite Sex; sound mind; maintaining clean appearance, being responsible and being sensitive. However, depending on friends/peers for sexuality information; and dressing indecently in order to attract the opposite were not accepted as sex education attitudes required by adolescents to cope with their sex related challenges.

This is in agreement with Maccoby, et al (2000), who stated that sex education is involving a comprehensive course of action by the school, calculated to bring about the socially desirable attitudes, practices, and personal conducts, on the

part of children and adults, that will best protect the individual as a human and the family as an institution. Halpern, et al (2001) who had earlier postulated that adolescence marks a time of sexual maturation which manifests in social interaction as well. Explaining that while adolescents may engage in casual sexual intercourse, often referred as hookups, most sexual experience during this period of development takes place within romantic relationships where kissing, hand holding, and hugging signify satisfaction and commitment. They regretted that among young adolescence, "heavy" sexual activity, marked by genital stimulation, is often associated with violence, depression, and poor relationship quality; albeit, they concluded, this effect does not hold true for sexual activity in late adolescence that takes place within a romantic relationship. Grello, et al (2003), postulated that sexuality and sexual desire usually begins to intensify along with onset of puberty. They opined that the expression of sexual desire among adolescents (or any one for that matter), might be influenced by family values, culture and religion they have grown up in, social engineering, social control, taboos, and other kinds of social mores.

The Skills Required by Adolescents to Cope with their Sex Related Challenges

Findings of this study revealed that sex education skills required by adolescents to cope with their physical body changes challenges are embracing healthy self-esteem, communication skill, self disclosure and coping skills. For emotional changes challenges, the skill needed includes; decision making skills, goal setting skills and risk taking skills. Negotiation, Listening, Relationships and Refusal skills are needed by adolescents in relating with the opposite Sex. This is in line with Rytina, et al (2010), who observed that early in adolescence, cognitive development result in greater self-awareness, greater awareness of others and their thoughts and judgment, the ability to think about abstract, future possibilities, and the ability to consider multiple possibilities at once. As a result, they went on, adolescents experience a significant shift from the simple, concrete, and global self-descriptions typical of young children; as children, they defined themselves with physical traits whereas as adolescent, they define themselves based on their values, thoughts, and opinions. From these, adolescence can now conceptualize multiple 'possible selves' they could become, and long term possibilities and consequences of their choices. In agreement with these postulations, Marcia (2006), explained that exploring these possibilities may result in abrupt changes in self-presentation as the adolescent chooses or rejects qualities and behavioral, trying to guide the actual 'self' towards the ideal 'self' (who the adolescent wishes to be) and away from the feared 'self' (who the adolescent does not want to be). They elucidated that for many adolescents, these distinctions are uncomfortable, but they also appear to motivate achievement through behaviour consistent with the ideal and distinct from the feared possible selves. Marsh (1989) indicated that the distinctions in self-concept (differentiation) occur as the adolescent recognizes the contextual influences on their own behaviour and perception of others, and begins to qualify their traits when asked to describe themselves. However, recognition of inconsistent content in the self concept is a common source of distress in these years, but this distress may benefit adolescents by encouraging structural development.

Different ways of teaching Sex Education Needs to Adolescents

The findings of this study revealed that, the ways of teaching sex education needs to adolescents in upper basic schools includes: Showing relevant video film; reading real life stories of people whom Sex has destroyed; giving handouts to students; telling personal stories relating to dangers of illicit and unprotected Sex; allow opportunities to ask questions; having sex education as a course or subject in the school; using counseling methods; using role play method; using lecture method; and using discussion method. This is in consensus with Lynn (1994) who pointed out, in strict terms that, that the importance of sex education cannot be overemphasized as it cautions adolescents about the dangers that are inherent in bad sexual relationships. In his own viewpoint on the modalities and strategies of sex education, Hedges, et al (1995) specified that, if sex education is to achieve its aims and objectives, as denoted by Lynn (1994), the following modalities and strategies should be adopted in the teaching and learning of sex education in schools- the teachers should show the adolescents relevant video films; let them read real life stories of people whom Sex has destroyed or affected in a negative way; give them handouts; tell them any personal stories relating to the dangers of illicit and unprotected Sex you know; give them assignment to do on sex topics using the internet; allow them a lot of opportunities to ask questions- when they ask, the teacher should first see if another student will answer the question first, because, this will make the class lively and topic interesting and interactive, and more.

However, Sandler, et al (1980), expressed discontent on the inadequacy of some examined contents of sex education in some countries so far. According to them, such shallow sex education content for some of those countries which

claim to teach sex education in their schools, would not achieve the expected result because they do not connote the necessary desired information. They regretted that this could be as a result of lack of legal backings, and or refusal of parents and some religious bodies to teach sex education adequately in schools. Sandler, et al (1980), postulated that, naivety of adolescents after the supposed imparting of sex education knowledge, in schools through shallow curriculum, will be more dangerous than not teaching them at all. They propounded that adolescents- males and females- should have clear views of their life and body mechanisms to enable them become useful adults, and be able to play their required adult roles to the societies desirably. They pointed out the adolescent girls should have adequate knowledge of menstruation, conception, behaviors in husband's family such as importance of the family, marriage and related values; abstinence; method effectiveness; basic information on HIV/AIDS and other sexually transmitted diseases (STDs); birth control and how to access STDs and contraceptives services, including STDs prevention; how alcohol and drugs use affects behaviour; negative consequences of sexual intercourse and alcoholism; and how to resist peer pressures to have sexual intercourse or become drug addicts.

They further denoted that adolescents should know the signs and symptoms of STDs (knowing that it is not all STDs that are curable); have good sexual orientations in relation to practices; know which method can be purchased over the counter and which requires medical visits; the proper way to use condoms; the importance of using both a condom and a more effective birth control method to avoid pregnancy and STDs infections whose dangers will adversely affect their life expectations, dreams, and future well-beings, such as their education or apprenticeships, and main them completely for the remaining parts of their life. Voyer, et al (1995), and Wiseman, et al (1995), in their distinct researches, postulated similar viewpoints, but added that the knowledge enunciated above by Sandler, et al (1980), would be apposite for adolescent boys too because, according to them, adolescent boys would grow up to adults like their peer adolescent girls, and that such knowledge will be useful to both of them in living together as couple to manage their homes in their latter adult lives as husbands and wives. They noted also that such knowledge would assist both parties in rearing their own children who would also be girls and boys too.

However, Parents Television Council (2008) accepts teaching adolescent sex education in schools, but not to the magnitude of details as advocated by those experts above. The council expresses dismay that detailing such teaching would not do the adolescents and the societies any good. Vender, et al (1978) had, however, expressed long before Lynn (1994), Hedges, et al (1995), Voyer, et al (1995), and Wiseman, et al (1995), that adolescence detailed sex education programmers, would suffice. Harmer, et al (2003) believe that sex education duly given to adolescents will produce a better flock of adolescents in future generations, and advocated for inclusion of same in all school curricular and backing same with appropriate laws to enable it be reasonably and adequately enforced regardless of individualistic parochial views of some organizations and parents.

CONCLUSION

Five research questions were developed and answered by the study while five null hypotheses were formulated and tested at 0.05 level of significance. Descriptive survey design was adopted for the study and was carried out in sunyani municipality. The population consist of 93,060 respondents, these includes 81,020 adolescents, 4,138 teachers and 7,902 parents.. While multistage sampling technique was adopted in the selection of 300 adolescents, 43 parents, and 40 teachers making it 383 respondents as sample for the study. The instrument for data collection is a 81- item structured questionnaire in line with the specific purposes of the study, the responses option for the instrument were: Strongly Agreed, Agreed, Disagree and Strongly Agreed with corresponding values 4,3,2 and 1 respectively. The instrument was subjected to face validation by three experts. The lecturers were from University of Ghana . To obtain the reliability of the instrument, 20 copies of the questionnaire were trial tested on 20 similar respondents from Enugu state. Cronbach Alpha reliability test was used to establish the internal consistency of the instrument with overall reliability index of 0.76. The data for the study were collected by the researcher with the help of three research assistants. Out of the 398 copies distributed to the respondents, 383 copies were completely filled and returned representing 94.2 % return rate. Data collected were analyzed using mean and standard deviation for the research questions and t-test for testing the null hypotheses at 0.05 level of significance.

The findings of this study will serve as a guide to Home Economics department especially home management that treats emergent issues in the family. The current home economics curricula in the secondary schools need to be reviewed to incorporate sex education needs of adolescents. Home Economics teachers and students would find the findings of this study a valuable literature and a source for scholarly investigations and knowledge update. The

teachers require in-service training to update the knowledge of sex education needs of adolescents. Educational policy makers at the state and national level will be provided with research- based information that will be made available by this study for the formulation of necessary policies that will promote quality teaching and learning at the junior secondary school in sunyani municipality. The outcome of this study when published will make an immense contribution to the advancement in knowledge especially to our adolescents as they will gain ideas and understanding on how their body works and proper skills to adopt when in difficult situation.

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