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Date Fighting and Sexual Risk Behaviours among Adolescents attending Public Schools in Ibadan, Nigeria

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The study seeks to examine the prevalence of date fighting and its role in sexual risk behaviours among 1079 boys and 1211 girls in 22 public secondary schools in Ibadan Nigeria. About 60% (1367) reported to have ever experienced at least a form of date fighting. Risk factors for date fighting in boys include, non use of condom at last sex, (OR: 3.67; 95% CI: 3.23-4.22) current alcohol usage (OR: 1.67; 95% CI: 1.99-2.05) belonging to a gang (OR: 4.09; 95% CI: 4.29-5.95) and multiple sex (OR: 3.39; 95% CI: 4.20-5.05). Among girls, the risks include multiple sexual partners (OR: 2.44; 95% CI: 1.67-3.88) history of CSA (OR: 3.01; 95% CI: 3.23-6.05) hawking after school hours (OR: 2.22; 95% CI: 2.76-5.96). A well designed and integrated psycho-educational intervention regarding date fighting and its inherent association to sexual risk behaviors should be part of the overall adolescent's reproductive health campaign in Nigeria.

Key words: *date fighting, sexual risk behaviour, adolescents, public schools*

Nigerian adolescents are particularly vulnerable to sexual risk behaviours in view of increasing reports of unprotected sex, unwanted pregnancy and HIV and AIDS infection among them (Olley, 2008; Ajuwon, Olley, Akintola, & Akin-Jimoh, 2004; Slap, Lot, Huang, et al., 2003; Orji & Esimai, 2005). Few studies have however focused on the role of date fighting on these risk behaviors.

Violent behaviours especially those related to dating and intimate partner relationships among adolescents have received tremendous empirical attention among contemporary health scientists due to its implication in social and public health problems. These behaviors, which include, physical fighting, bullying, intimidation and threat mostly occur within communities, homes and schools and were found to be associated with a myriad of reproductive and health problems (Ackard, & Neumark-Sztainer, 2002; Berenson; San Miguel & Wilkinson, 1992) Eaton, Davis, Barrios, Brener & Noonan, 2007; Foshee, 1996; Ghavez-Ayala, & Lazcano-Ponce, 2007; Henton, Cate, Koval, Lloyd & Christopher, 1983; Kreiter; Krowchuk, Woods,Sinal, Lawless & DuRant, 1999; Ramisetty-Mikler, Goebert, Nishimura, & Caetano, 2006; Rivera-Rivera, Allen-Leigh, Rodriguez-Ortega, Rivera-Rivera, Allen, Threasher, Chavez, Fernandez-Ortega, Galal &Lazcano-Ponce, 2005; Robert; Heather, Mark, Morrow, Thomas, D'Agostino, Wagoner, & Mitra, 2007; Silverman; Raj, & Clements, 2004; Silverman; Raj, Mucci, & Hathaway, 2001).

Date fighting has been reported common among adolescents with prevalence ranging from 1.8% for boys and 4.2% for girls in a study among adolescents in Vermont, USA (Kreiter et al, 1999).Foshee (1996) found that at least one episode of date fighting was reported among approximately 37% and 40% dating boys and girls high school students respectively in North Carolina, USA. Similarly Berenson, Miguel and Wilkinson (1992) reported that between 7% and 26% of pregnant adolescences cents reported violence during pregnancy, usually by a boyfriend or family member.

Factors consistently documented to be associated with date fighting include gender, early age at both dating and sexual debut, number of male sexual partners;

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number of pregnancy; alcohol before last episode of sex and forced sex (Berenson et. al,1992; Henton, et. al.,1983; Kreiter, et. al, 1999). For example, Henton, et. al., (1983) reported that majority of adolescents who have experienced date violence had this when they were 15 years of age coinciding with their sexual debut. Malik et al (1997) found a preponderance of girls over boys to perpetrate date fighting, but that a preponderance of sexual date fighting was observed among adolescent boys than girls. Other potential risk factors for date fighting include the use of alcohol older age and use of injectable drugs (Kreiter et al., 1999).

In Nigeria, anecdotal evidence revealed that date fighting occurs mostly in neighborhoods, schools and during traditional festivals, where most youths converge. Albeit previous studies among adolescent in this population have found that sexual coercion, especially Child sexual Abuse (CSA) is very high and constitute a risk factor to sexual risk behaviours (Olley, 2008; Ajuwon et al., 2004) Exploring other risk factor is urgently needed in other to address the increasing wave of illicit sex among youths in Nigeria, with its consequential HIV and AIDs transmission.

This study therefore examines the prevalence date fighting its association to sexual risk behaviours among adolescents in Ibadan, Nigeria.

Methods

Design and Sample

This study is a cross sectional survey among adolescents in Ibadan North Local Government of Oyo-State of Nigeria. Two thousand two hundred and ninety (1079 boys and 1211 girls, representing 54% of all eligible adolescents school attendees from all the 22 senior secondary schools within the locality participated in the study. All students were encouraged to participate in the study after informed consent and provided they were older than 15 years. Participants were similar to non-participants by ethnicity and gender. The study was approved by the ministry of education in Oyo-State who gave directives to all head of schools concerned to for cooperate.

Data Collection

Participants completed a self-administered, confidential questionnaire about their health behaviors and life time sexual experiences (Olley, 2008) Questions about the occurrence of date fighting were similar to those used in Kreiter et al (1999) among adolescents in US. They were asked about life time involvement in physical fight and that whether their last physical fight was with a girl friend, boyfriend, or other dating partner. For the purpose of this study, two categories of adolescents were determined based on responses to the questions: those involved in a physical fight with a boyfriend, girlfriend or date and those who never involved in a physical fight or if involved, were not with a boyfriend, girlfriend or date.

Information on current sexual activities sought to identify whether the adolescents had "had sex within three months preceding the study"; "used condom at last sex"; "number of sexual partners" "had sex with a partner who used intravenous drugs"; "had sex after heavy use of alcohol or other drugs"; "had sex with a partner known to you for less than 1 day". For the questions about number of sex partners, the choices ranged from "0" to "6 or more partners". "Six was used as the default value for those who filled in "6 or more." Information on other related behaviors such as current alcohol and tobacco use, history of STD infection and type; and pregnancy among the adolescents were also sought. Socio-demographic information obtained included chronological age, ethic grouping, and religion; whether parents' stays together; whom do adolescents lived with; hawking of wares after school periods; fathers and mothers' educational status. Information was also requested from respondents as to their membership of gangs.

Data collection took place during normal school period with the author and three research assistants (graduate level psychology students) administering the questionnaire. Students were told they could leave any questions blank and that

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their answers would remain anonymous and confidential. The authors and research assistants remained in the classroom during administration, and transported the completed questionnaires from the schools.

Statistical Analysis

Bivariate analyses used the Cramer's V tests and θ coefficients to test the strength of association between two categorical variables. Second, variables found to be significantly associated (P<.001) with reported date fighting among the adolescents were entered into multiple logistic regression analysis with a forward stepwise inclusion of independent variables, using the likelihood ratio approach. Analyses were performed using SPSS for Windows 7.0 (SPSS, Inc, Chicago, IL).

Results

Background Characteristics

Eighty-two percent of respondents were Yoruba, the predominantly tribe in Ibadan. Most respondents were from low-socio economic class, indicated by the fact that 61% of their fathers and 65% of their mothers have not had beyond secondary school education. The majority of students (70%) reported living with both parents, while (11% vs. 4%) were staying with mother and father alone respectively and the rest did not live with their parents. Almost two-thirds (63%) of the students were within the 15-16 years bracket, while the rest were 17 -20 years.

Table 1: Socio-demographic characteristics of the students

Characteristics	Boys (*n* = 1079)	Girls (*n* = 1211)	Total (*n* = 2290)
Age Grade			
14-16 years	57%	68%	63%
17 and above	43%	32%	37%
Religion			
Christian	65.4%	62.8%	64.0%
Islam	33.9%	37.0%	35.5%
Others	0.6%	0.2%	0.4%
Family Type			
Polygamy	38.2%	36.4%	37.2%
Monogamy	61.8%	63.6%	62.8%
Parent Stay Together			
Yes	79.1%	81.8%	80.5%
No	20.9%	18.2%	19.5%
Educational Level Father			
No Education	9.3%	11.4%	10.4%
Primary Education	24.0%	22.3%	23.1%
Secondary Education	25.7%	28.6%	27.2%
Tertiary Education	41.4%	37.7%	39.3%
Educational Level Mother			
No Education	20.9%	21.3%	21.1%
Primary Education	18.4%	16.4%	17.4%
Secondary Education	26.6%	26.3%	26.4%
Tertiary Education	34.1%	36.0%	35.1%
Hawk after School			
Yes	18.7%	17.3%	17.9%
No	81.3%	82.7%	82.1%
Belonging to a Gang			
Yes	2.7%	2.1%	2.4%
No	97.3%	97.9%	97.6%

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Prevalence of Date Fighting

Of the 2290 adolescents, 1367 (59.7%) reported to have ever experienced at least a form of date fighting. There is a preponderance of males (62% vs. 38%) over females in the experience of date fighting. Females were disproportionately more likely to have experienced date fighting while visiting (47% vs. 19%) and occurred more often (32% vs. 26%) with older friends. Males experienced more date fighting (56% vs 12%) than females, while attending parties. Other date fighting occurred within the neighborhood, usually on the street and involved more with males (14% vs 5%) than females.

Pattern of Sexual Risk Behaviors

Pattern of sexual behavior showed that five hundred and sixty four (24.6%) of the adolescents; 359 (64%) males; 205 (36%) females reported to have ever had sex. In the three months preceding the study, 392 (17%) including 251 (64%) males and 141 (36%) females reported to have had sex. The mean age for sexual debut for males was 13.82 (±2.9) years, while for males it was 13.10 (±4.0) years. In describing the first time sexual intercourse occurred, 81 (23%) of the boys said they wanted it, 249 (69%) said they did not want it but occurred, while 29 (8%) reported they were raped. Among the girls, 23 (11%) wanted it; 156 (76%) did not want it but occurred, while 26 (13%) were raped. Seventy three (13%) respondents 47 boys and 26 girls did not use condom at their last sexual intercourse within three months to the study. Forty-two (8%) respondents reported to have ever contracted an STD, the commonest been gonorrhea (62%). Thirty-four (6%) girls reported ever been pregnant, while 41(7%) of boys reported to have made a girl pregnant. Boys were more likely than girls to report having had sexual intercourse for the first time before age 12 (42% vs. 9 %), and boys had a greater number of lifetime partners for sexual intercourse than girls (mean: 4.2 vs. 2.4 partners. Among the adolescents who have ever had intercourse, 88% said that the last time had been in a home setting, including their own home (40%), their partner's home (22%), and a friend's home (26%). Boys were more likely than girls to report having had sex in their own home (44% vs. 26%) and correspondingly, girls were more likely than boys to report having had sex in their partner's home (55% vs. 32%). Few students reported having had sex in hotels (3%), cars (1%), or other places (1%).

Gender Difference in Date Fighting and Associated Sexual Risk Behaviors

It was hypothesized that boys and girls would differ in regards to sexual risk behaviors that would be associated with date fighting, therefore, bivariate analyses were performed separately for each gender. In analyzing the relationship between date fighting and sexual behaviors (see table 2), date fighting was associated more strongly in boys with older age, non condom use at last sex, multiple sexual partner, alcohol use, history of STD, current tobacco use and belonging to a gang. For girls, date fighting was associated with being sexually active, multiple sexual partners, non condom use at last sex, hawking after school, history of CSA, history of STD, and having been forced to have sex. Ever been pregnant was not associated with date fighting.

Table 2: *Bivariate Analysis between Date Fighting and Sexual Risk Behaviours*

Variables	Boys Cramer's V	P	Girls Cramer's V	P
Sexually active	.307	.001	.365	.001
Multiple sexual partner	.312	.001	.289	.001
Hawking after school	.098	.076	.340	.001
Non condom use at last sex	.271	.001	.256	.001
History of CSA	.091	.111	.238	.001
History of STD	.127	.001	.145	.001
Currently alcohol use/tobacco use	.249	.001	.069	.001
Belonging to a gang	.247	.001	.046	.041
History of Pregnancy	.049	.059	.058	.058

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Risk factors for Date Fighting

All variables that were significantly associated (P <.001) with date fighting in bivariate analyses were entered into multiple logistic regression models. Four variables correctly classified 95% of the boys who reported date fighting, compared with boys who had not reported date fight (Table 3). For each increase in non use of condom at last sex, there was an increased risk of being involved in a date fight of three fold (OR: 3.67; 95% CI: 3.23-4.22) for each boy, compared with those who used condom in their last sex. The risk of being involved in a date fight increased one time (OR: 1.67; 95% CI: 1.99-2.05) for each current alcohol usage, with boys who did not use alcohol as reference group. Compared with those boys who never belonged to a gang, the risk of date fighting increased 4 folds (OR: 4.09; 95% CI: 4.29-5.95) among boys who belong to a gang. Adolescent boys who reported multiple sex partners were three times (OR: 3.39; 95% CI: 4.20-5.05) more likely also to have been involved in date fighting compared with boys with none or one partner.

Table 3: Sexual Risk Behaviours Associated With Date Fighting among Adolescents Boys Compared to Adolescents Boys Who Never Experience Date Fighting.

Variable	Adjusted OR	95% CI	Partial r	P
Multiple sexual partner	3.39	4.20- 5.05	.101	.001
Non Condom Use at last Sex	3.67	3.23- 4.22	.165	.001
Currently alcohol use	1.67	1.99- 2.05	.056	.002
Belonging to a gang	4.09	4.29- 5.95	.152	.001

CI indicates confidence interval. 95% were classified correctly by this model.

When adolescent girls who had been involved in date fighting (table 4) were compared with those who had never experienced date fighting, three variables correctly classified 95% of the girls in these two categories. Compared with girls without a partner or one partner, there was a 2.31 (OR: 2.44; 95% CI: 1.67-3.88) increased risk to experienced a date fight among girls with multiple sexual partners. The risk for engaging in date fighting was three-times as likely (OR: 3.01; 95% CI: 3.23-6.05) to have occurred with adolescent's girls with the history of CSA than those without CSA. Also risk for date fight increased in two fold (OR: 2.22; 95% CI: 2.76-5.96) for girls who hawk after school hours compared to girls who do not hawk after school hours.

These associated variables with date fighting in both boys and girls remained significant after controlling for age, family type and parents staying together.

Table 4: Sexual Risk Behaviors Associated With Date Fighting Among Adolescent Girls Compared to Adolescent Girls Who Never Experience Date Fighting

Variable	Adjusted OR	95% CI	Partial r	P
Multiple sexual partners	2.44	1.67- 3.88	.125	.002
History of CSA	3.01	3.23-6.05	.270	.001
Hawking after School	2.22	1.67-3.88	.189	.001

CI indicates confidence interval. 95% were classified correctly by this model.

Discussion

In view of observable increasing trend of date fighting and sexual risk behaviours in Europe and United States, this study sought to document the prevalence of date fighting and its correlates among adolescents in Ibadan, Nigeria. Significant findings were that: (1) more than half of the adolescents have ever experienced at least a form of date fighting, (2) there is a preponderance of males over females in the experience of date fighting, (3) date fighting was associated more strongly in females with being sexually active, having multiple sexual partners, non condom use at last sex, hawking after school, history of CSA, history of STD, having been forced to have sex, or having been pregnant, (4) date fighting for males was associated with older age, non condom use at last sex, multiple

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sexual partner, alcohol use, history of STD, current tobacco use and belonging to a gang.

We found that keeping with the trend of what has previously been documented in other part of the world; adolescents attending public school in Ibadan have experienced date fighting. This finding is consistent with the other studies on adolescent dating violence (Ackard, & Neumark-Sztainer, 2002;Eaton, et. al, 2007; Foshee, 1996; Kreiter; et. al, 1999; Ramisetty-Mikler, et. al, 2006; Rivera-Rivera et. al, 2007; Rivera-Rivera et al, 2005; Silverman et al, 2001; Robert et. al, 2007; Silverman et. al, 2004), which have documented the occurrence of date fighting among middle and high school students in European and United States as well.

Our findings which associated date fighting among girls and having been pregnant, multiple male sexual partners, and forced sex, supports what was reported among adolescents in Vermont USA (Kreiter; et al, 1999). Similarly as documented among girls in our study and supporting the findings of Malik et. al (1997) where girls who experienced date fighting had used alcohol and drugs.

In contrast, among boys who reported date fighting on their last date, behaviors of sexuality, such as being sexually active, non condom use al last sex, multiple sexual partners, alcohol and drug use, were more likely to be predictive of date fighting. This is also supported by earlier contention of the association of date fighting with non condom use of last sex, multiple sexual partners, alcohol and drug use (Robert, et. al, 2007;Foshee, 1996; Kreiter, et. al, 1999;Berenson et. al,1992; Henton, et. al,1983; Malik et al, 1997).

It could be speculated that date fighting may lower inhibitions that may lead to less self-protective behavior that encourages high-risk sexual behaviours. Ever experience of CSA was a positive predictor of date fighting in both boys and girls, when one considers age of sexual debut among the adolescents, it could be difficult to determine whether CSA was in the context of a dating relationship. Both boys and girls can be victims of sexual violence within a dating relationship (Berenson et al, 1992; Henton, et. al, 1983, Malik, et. al, 1997). Peculiar finding from our study was the association between date fighting and hawking among the adolescents. While this finding is germane and novel, it brings to fur ore how street hawking could impact adolescents', sexuality, particularly among girls. There is perhaps no country worldwide where street hawing was rampant as in the present setting, this though may be inevitable due poverty level, but could be controlled with much protective education to reduce the risk of sexual risk behaviors.

There are several limitations to this study. First the cross sectionality design of the study makes causal inference difficult to ascertain. Second, the direct measure of date fighting was difficult as the study relied on self report of what constituted a date fight. Cultural variations regarding the definitions and stereotypes about date fight may also be a limitation. Albeit, this survey was limited to physical fight, involving kicks slap and box, excluding non invasive type of harassment and bullying. As a result, the prevalence of date fight in our study may have been underreported. The generalization of the findings is limited to adolescents of public schools in Ibadan, who are also socially disadvantaged. There is also the possibility that, the most resilient of the adolescents still remained in school as the difficult and most severe ones have dropped out of school.

Despite these limitations, our findings confirm that date fighting occurs among adolescents attending public school in Nigeria and is associated with certain sexual risk behaviors that are gender specific. It is imperative that predictors of dating fighting are identified and appropriate interventions can be instituted. Amidst a number of interventions for reproductive health issues for adolescents in Nigeria, few have emphasize date fighting and it's role in sexual risk behaviors. Educating adolescents on the inherent danger in date fighting could be another pointer to several efforts to reduce HIV and AIDS scourge in Nigeria. Suffice to say that a number of dating violence programs for both males and females have shown promise for changing attitudes and

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preventing date violence among adolescents elsewhere and look promising with the Nigerian adolescents. In another, dimension when reproductive health care providers are evaluating their female adolescents for sexual risk behaviours, a history of multiple sexual partners, CSA and hawking after school hours should alert the provider to probe for date fighting. The same evaluation is also necessary for boys who belong to a gang, multiple sexual partners and use alcohol. Finally when adolescents report date fighting, appropriate referral to a mental health facility should be done.

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