

UNIVERSITY OF CAPE COAST

INFLUENCE OF CHILD-REARING PRACTICES, PEER PRESSURE AND
GENDER ON ADOLESCENTS' SEXUAL ADVENTURISM IN GHANA

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2020

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University of Cape Coast

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BY

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Thesis submitted to the Department of Guidance and Counselling of the
Faculty of Educational Foundations, College of Education Studies, University
of Cape Coast, in partial fulfilment of the requirements for the award of
Doctor of Philosophy degree in Guidance and Counselling.

SEPTEMBER 2020

DECLARATION

Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

Candidate's Signature: Date:

Name:

Supervisors' Declaration

We hereby declare that the preparation and presentation of the thesis were supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Principal Supervisor's Signature: Date:

Name:

Co-supervisor's Signature: Date:

Name:

ABSTRACT

This study examined the influence of child-rearing practices, peer pressure, and gender on sexual adventurousness among adolescents in Ghana. The descriptive survey design was adopted for the study. The study covered adolescences in Junior High Schools in Ghana between the ages of 12 and 19 years. A total of 525 adolescents were selected to participate in the study using the multistage sampling approach. The main instrument for data collection was a questionnaire. Data gathered were analysed using means and standard deviation, multivariate linear regression, multivariate multiple regression, simple moderation analysis and three-way interaction moderation analysis. The results revealed that peer pressure was found to be high among the respondents. Sexual Adventurism was also found to be high. Child-rearing practices, peer pressure, and gender significantly and independently predicted sexual adventurousness. Parental discipline and gender acted as significant moderators in the relationship between peer pressure and sexual adventurousness. Again, only in the presence of discipline could monitoring and warmth moderate the relationship between peer pressure and sexual adventurousness. The study recommended that parents incorporate reasonable discipline in shaping their children's behaviours against sexually deviant activities. It was also recommended that Guidance and Counselling coordinators should plan and organize programmes which center on reducing the prevalence of peer pressure and sexual adventurousness. Conclusions drawn from the study included bringing out a better understanding of the role that discipline and peer pressure play in influencing adolescents' sexual adventure.

KEY WORDS

Child-rearing practices

Peer pressure

Sexual Adventurism

Adolescents

ACKNOWLEDGEMENTS

I am grateful to my Principal Supervisor, Prof. Joshua A. Omotosho and my Co-Supervisor, Rev. Dr. Kwasi Otopa Antiri for their immense contribution that ensured the successful completion of this work.

My sincere gratitude goes to all members of the Department of Guidance and Counselling, especially the Head of Department for their significant support in diverse ways to ensure early completion of this work

My profound appreciation also goes to Mr. Frank Quansah and Mr. Simon Akatuti for their assistance. Finally, to my husband, Dr. Francis Eyiah-Bediako for his support in every form and encouragement.

DEDICATION

To my husband, Dr. Francis Eyiah-Bediako and my daughters, Blessing A.

Eyiah-Bediako and Matilda O. Eyiah-Bediako.

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CHAPTER ONE

INTRODUCTION

Background to the Study

Adolescence is a transitional stage of physical and psychological development. Adolescence is usually associated with the teenage years. The first use of the term 'adolescence' appeared in the fifteen century which was a derivative of the Latin word 'adolescere', which means to grow into maturity (Sigelman & Rider, 2009). This stage is characterised by major pubertal and biological changes which include changes to the sex organs, height, weight, and muscle mass, as well as major changes in brain structure and organization. Adolescence marks a time of sexual maturation, which manifests in social interactions as well. While adolescents may engage in casual sexual encounters (often referred to as hookups), most sexual experiences during this period of development takes place within romantic relationships (Manning, Longmore, & Giordano, 2000).

In terms of sexual identity, adolescence is when most adolescents begin to recognize and make sense of their feelings. The relationships adolescents have with their peers, family, and members of their social sphere play a vital role in the social development of an adolescent. The emerging sexuality that accompanies adolescence poses fundamental challenges for young people. These include adjusting to the altered appearance and functioning of a sexually 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 self (Manning et. al., 2000). The challenge is accentuated by the unfamiliar excitement of sexual arousal, the attention connected to being sexually attractive, and the new level of physical intimacy and psychological vulnerability created by sexual encounters (Manning, et. al., 2000).

Both sexual ideation and activity increase over the adolescent period (Halpern, Udry, Campbell & Schindran, 1993). Teenagers engage in a spectrum of sexual behaviours ranging from fantasy and self-stimulation to various forms of intercourse with erotic fantasy being the most common sexual behaviour in that period. This was confirmed by Coles and Stokes (1985) who found that 72 percent, out of a non-representative sample of 13–18-year-olds, acknowledged having sexual fantasies and 46 percent boys and 24 percent girls reported masturbating (Coles & Stokes, 1985). Leitenberg, Detzer, and Srebnik (1993) also reiterated that 67 percent of males and 34 percent of college female students reported masturbating at age 15.

In the United States, for example, adolescents engage in physically intimate behaviours even if they do not have intercourse. In a sample of ethnic minority 14–17-year-olds who had not yet had intercourse, 86 percent had kissed, 47 percent had rubbed their body against another, and 16 percent had engaged in genital touching (Miller, Norton, Kurds, Hills, Schranefeldt, & Young, 1997). The majority of US adolescents experience intercourse by age 18. In national surveys, 50 percent of 9th–12th graders reported they had had sex (Blum, Buhurry, Shew, Bearing, Seiving & Resnick, 2000; Centre for Disease Control, 2000). The likelihood of intercourse increases with age, so

that by 12th grade, approximately two-thirds of students have had sex. This is likely an underestimation, as school-based surveys exclude high school dropouts and youth enrolled in alternative schools, who are more likely to be sexually active (CDC, 2000). In a multiethnic sample of 12-15-year-olds, Smith and Udry (1985) found that white adolescents followed a typical progression from necking, to petting above the waist, to genital touching, to intercourse. A similar sequence emerged in a primarily white adolescent (Miller, Nonton, Fan, & Christopherson, 1998).

However, not all sexual intercourse is voluntary, particularly for girls. Among 17–23-year-old female participants in the National Survey of Children, it was indicated that seven percent had been “forced to have sex against (their) will or raped” at least once (Miller, Mon-son, & Norton, 1995). Similarly, the 1995 National Survey of Family Growth indicated that among 15–19-year-old girls who have had sex, seven percent said their first intercourse was non-voluntary and another 24 percent said it had been voluntary but unwanted. Rates of sexual coercion were especially high among girls who initiated sex before age 13: one-fifth or 20% said their first intercourse was non-voluntary and another half said it was voluntary but unwanted (SIECUS, 1997).

An examination of biological, psychological, and socio-cultural factors that influence adolescent sexual behaviour reveals that puberty encompasses dramatic changes in hormone levels, body shape, and physical size. Research has linked both the stage of pubertal development and timing of puberty to adolescent sexual behaviour. Among 7th and 8th grade boys, pubertal development over a six-month period was associated with concurrent changes

in sexual ideation and pre-coital behaviour; also, pubertal stage predicted the transition to intercourse (Halpern et al., 1993). Among girls, pubertal stage predicted level of sexual experience the following year (Whitbeck, Conger, & Kao, 1993). For both genders, earlier pubertal onset relative to peers was associated with greater sexual experience (Flannery, Rowe, & Gulley, 1993; Miller, Norton, Fan, & Christopherson, 1998). Among girls, early menarche was associated with a younger age at first intercourse (Magnusson, 1988; Miller et al., 1997). Among boys, advanced pubertal maturation relative to peers was associated with earlier first intercourse (Capaldi, Crosby, & Stoolmiller, 1996).

Pubertal hormones may underlie the relation between pubertal development and sexual behaviour. Testosterone administration increases sexual interest and behaviour in women (Sherwin, Gelfand, & Brender, 1985) and in men with low testosterone levels (Kwan, Greenleaf, Mann, Crapo, & Davidson, 1983). Similarly, cross-sectional studies by Udry and colleagues demonstrated an association between androgen levels and both sexual motivation and behaviour in early adolescence (Udry, Billy, Morris, Groff, & Raj, 1985; Udry, Talbert, & Morris, 1986). Among boys, initial testosterone levels were associated with concurrent and subsequent sexual behaviour, but changes in testosterone did not predict changes in sexual ideation or behaviour (Halpern et al., 1993). Among post-menarcheal girls, pubertal development significantly predicted non-coital behaviour and intercourse, but testosterone levels did not (Udry & Campbell, 1994). Thus, rather than exerting a direct influence on sexual behaviour, hormones may operate indirectly by stimulating physical maturation and sexual attractiveness.

It is important to emphasize that these strong sexual urges experienced by adolescents cannot be directly seen and thus, even these adolescents are mostly unconscious of it. However, some manifestations of certain behaviours of adolescents observed in schools, homes, playgrounds, etc. can be used as indicators of the experiences of these adolescents. In worst cases the effects of these behaviours and actions are seen because sexual experimentation is one of the means used by adolescent to understand their maturity and deal with the changes that plague them (Slater & Robinson, 2014). Paramount of the effect of this experimentation is teenage pregnancy (Jayakody, Sinha, Tyler, Khadr, & Viner, 2011).

In Ghana, teenage pregnancy has been a major concern. Teenage pregnancy has become an educational and social predicament due to the number of teenagers mostly school going girls becoming pregnant. It is most often common to see some girls turning up to write their exams pregnant during the Basic Education Certification Examination (BECE). In the Eastern region, for example, 33 females failed to sit their exam as a result of pregnancy in 2009. The Regional Education Directorate of Brong Ahafo revealed that 77 girls were found to be pregnant during the Basic Examination Certificate Education (BECE) examination in 2010, 111 girls in 2011; by 2012, those numbers had increased to 170. In the Techiman Municipal Girl-Child Unit, 28 pregnancies at the primary and 75 at Junior High School (JHS) levels were recorded during 2012/2013 academic year (Ayibani, 2013).

The statistics are much higher and worrisome in other regions of Ghana. In the Western Region of Ghana, adolescent pregnancy was reported to be high as 14,445 out of the total of 33,365 pregnancies representing 42.9%

in 2010. The Northern Region recorded 13%, 11% and 10% of adolescent pregnancy cases within the periods of 2011 to 2013 respectively. Report from Upper Denkyira West District Health Directorate (UDWDHD) recorded 482 pregnancies among late teenagers and 5 pregnancies among early teenagers and in 2011 recorded 204 pregnancies among late teenagers with 4 pregnancies among early teenagers. In 2013, UDWDHD indicated that 483 pregnancies were recorded among late teenagers and 7 pregnancies among early teenagers (Ghana Statistical Service (GSS), 2014).

The Ashanti Regional Directorate of Health recorded 67 deaths in 2013 as a result of teenage pregnancy, a figure which is a little above the 60 deaths recorded in 2012. In 2013 alone, 21,171 teenagers who reported at the various health centres were detected to be pregnant whilst 20,720 cases in 2012 were recorded nationwide. The average age of these girls was 12. Statistics by the Regional Health Directorate from January to June, 2013 in the Brong-Ahafo Region revealed that about 235 girls between the ages of 10 and 14 visited the antenatal clinic. A further 6,084 late teens between the ages of 15 to 19 years within the same period also patronised the antenatal clinic (Ayibani, 2013). A compilation of GHS annual health report of the Tamale Metropolis for the past five years further indicated a steady rise of teenage pregnancy cases with a very sharp increase from 21% for the 2012 to 2016 period (1393 to 1756 cases) to 25% (1310 – 1756) from 2015 to 2016 (Ghana Statistical Service, 2014).

In Ghana, adolescents between the ages of 12 and 19 years contribute 6.6% of the total fertility (GSS, 2014). Furthermore, in Ghana, as much as 12% of adolescent girls between the ages of 15 and 19 have had a child. It is

estimated that 1 out of every 10 births occur among adolescent girls in Ghana (Awusabo-Asare & Abane, 2004). About 13% of women between ages 15 and 19 years have already given birth to their first child in Ghana. The highest childbearing rate among adolescents (23%) is in the Central and Northern Regions of Ghana with the lowest rate (7%) occurring in Western and Greater Accra Regions (Ghana Statistical Service (GSS), 2008). The 2014 GDHS reports that 14% of adolescents between the ages of 15 and 19 years have already started childbearing, 11% have given birth to their first child and 3% were pregnant during the survey (GSS, 2014). The report also indicated that the proportion of adolescents who have begun childbearing increases with age; 1% at age 15 to as high as 31% at age 19 years. The regions with the highest childbearing rate as indicated in the report were the Volta, Brong Ahafo and the Central Regions (Ghana Statistical Service, 2014).

When children go through puberty, there is often a significant increase in parent–child conflict and a less cohesive familial bond. Despite changing family roles during adolescence, the home environment and parents are still important for the behaviours and choices of adolescents (Aufseeser, Jekielek, & Brown, 2006). Adolescents who have a good relationship with their parents are less likely to engage in various risk behaviours, such as smoking, drinking, fighting, and/or unprotected sexual intercourse (Aufseeser et. al., 2006).

Parent-child relationships, parental control, and parent-child communication have all been implicated in adolescent sexual behaviour. Better parent–child relationships are associated with postponing intercourse, less frequent intercourse and fewer sexual partners (Miller, Benson, & Galbraith, 2001). Effects of mother-child relationship quality have emerged

for both sons and daughters (Jaccard, Dittus, & Gordon, 1996; Weinstein & Thornton, 1989), and the quality of the father–child relationship is influential for boys (Feldman & Brown, 1993). Effects of parent-child closeness have been found among blacks and whites and in multiethnic samples (Dittus & Jaccard, 2000).

Parental control is also related to adolescent sexual activity. Typically, better monitoring is associated with postponing intercourse (Jacobson & Crockett, 2000) or less frequent intercourse (Benda & DiBlasio, 1994), although not all studies find this pattern (East 1996). Presumably, parental monitoring and supervision reduce adolescent intercourse by restricting opportunities for sexual activity; however, some studies indicate that sexual activity is more likely when parental control is excessive (Miller, McCoy, Oslon & Wallace, 1986) or intrusive (Upchurch, Aneshensel, Sucoff & Leveystorms, 1999).

Research on parent–adolescent communication and adolescent sexual activity has yielded complex and often contradictory findings. The impact of parent–child communication appears to depend on openness of the communication, a clear focus on sexual topics, the quality of the parent–child relationship, and the parent’s values regarding adolescent sexual activity (Miller, Benson, & Galbraith, 2001). Adolescents’ perceptions of parental disapproval of sex are associated with postponing intercourse (Sieving, McNeely, & Blum, 2000). These effects are enhanced when the parent-child relationship is close, indicating that values are more easily transmitted within supportive parent–child relationships (Dittus & Jaccard, 2000).

The form of parent-child relationships, parental control and parent-adolescent communication are frequently seen in the child-rearing or parenting process. Parenting refers to the aspects of raising a child aside from the biological relationship (Davies, 2000). A parenting style is the overall emotional climate in the home (Spera, 2005). Authoritative parents rely on positive reinforcement and infrequent use of punishment. Parents are more aware of a child's feelings and capabilities and support the development of a child's autonomy within reasonable limits. There is a give-and-take atmosphere involved in parent-child communication and both control and support are balanced (Spera, 2005). Parents who practice authoritarian parenting style have a rigid set of rules and expectations that are strictly enforced and require rigid obedience. When the rules are not followed, punishment is most often used to promote future obedience (Fletcher, Walls, Cook, Madison, & Bridges, 2008). There is usually no explanation of punishment except that the child is in trouble for breaking a rule (Fletcher, et al., 2008).

Permissive or indulgent parenting is less popular in middle-class families than in working-class families. In these family settings, a child's freedom and autonomy are highly valued, and parents tend to rely mostly on reasoning and explanation (Kilmann, Carranza & Vendemia, 2006). Parents are undemanding, so there tends to be little, if any punishment or explicit rules in this style of parenting. Children of permissive parents are generally happy but sometimes show low levels of self-control and self-reliance because they lack structure at home (Fletcher, et al., 2008). An uninvolved or neglectful parenting style is when parents are often emotionally absent and sometimes

even physically absent (Brown, & Iyengar, 2008). They have little or no expectation of the child and regularly have no communication. They are not responsive to a child's needs and do not demand anything of them in their behavioural expectations. Children of uninvolved parents suffer in social competence, academic performance, psychosocial development and problem behaviour (Brown, & Iyengar, 2008).

A growing body of evidence cites family system as the center of learning. The family system theory suggests that individuals cannot be understood independently of their family members since families are systems which are interconnected and interdependent (Gavazzi, 2012). Through family interactions, parents may have influence on child sexual behaviour and in so doing transmit values, knowledge and attitudes about sex. Coulshed and Orme (2006) found that adolescent females raised in households characterized by uninvolved and permissive parents, are likely to be involved in concurrent sexual relationships. Sieving, NcNeely and Blum (2000) averred that parents' attitudes about adolescent sex predict their children's sexual attitudes and behaviour. Thus, adolescents' perceptions of parental disapproval of sex are associated with postponing intercourse. These effects are enhanced when the parent-child relationship is close, indicating that values are more easily transmitted within supportive parent-child relationships (Dittus & Jaccard, 2000).

Consistent associations have been found between family structure (especially living in a single-parent family) and earlier first intercourse (Miller et al., 1997). Single parents who date may be salient role models. In a study of recently divorced mothers and their adolescent children, maternal dating had a

direct positive relation to sons' level of sexual experience. For daughters, the effect was mediated by girls' permissive sexual attitudes (Abbott, & Dalla, 2008). The sexual behaviour of family members is also associated with adolescent sexual activity. Teenagers whose mothers initiated sex and childbearing at younger ages are more likely to have sex (Kowaleski-Jones & Mott, 1998) and to experience early sexual debut (Larson, & Wilson, 2004). Moreover, the presence of older sexually active siblings, especially teenage sisters who are pregnant or parenting, is related to younger siblings' sexual experience, earlier first intercourse, and pregnancy risk (Widmer, 1997).

In as far back as 1993, Sharif (1993) found that in Ghana, parents encouraged their daughters into premarital sex, appreciate to receiving gifts from their daughters' sexual partners and see nothing wrong when their daughters exchange sex for money. Consistent with this finding, in the urban, semi-urban and rural areas of Dares Salaam, Shinyanga, Iringa, Mbeya, and Tanzania (Fehringer, Babalola, Kennedy, Kajula, Mbwambo, & Kerrigan, 2013) found that parents were involved in promoting sexual promiscuity among their daughters. Parents were reported to be silent when their daughters come home with money, food, clothes and other consumer goods, yet knowing that they were unemployed. In Malawi, the context within which money or resources are exchanged demonstrates the expression of traditional courting practices and the way love between two people is socially communicated (Poulin, 2007). In a South African study, Holborn and Eddy (2011) documented that owing to lack of proper guidance non- commitment from African parents or guardians, adolescent females become pregnant even before they complete their Grade 12.

Steinberg and Monahan (2007) suggest that adolescence is the time when we are most susceptible to peer influence, but also that it provides a great opportunity to practice the skills required to avoid influences that may be detrimental to us, and stay true to ourselves. According to Nicholas (2008), adolescent females may learn behavioural patterns from outside world. During the transition, adolescents are easily influenced through beliefs, attitudes and experiences of people within the environmental settings (Louw, Van Ede & Louw, 2009). Drawing from Bandura's social learning theory, through observing and imitating significant others, adolescent females may find it easy to engage in sexual promiscuity. Through imitation and vicarious learning, peer influence and the role played by mass- media, could outweigh parental influence especially when parents are not exemplary in their conduct (Ryckman, 2008; Schultz & Schultz, 2013). The work by Erik Erikson highlights that identity confusion during adolescence is likely to engulf the mind of girls about the values to uphold to buffer against risk factors (substance abuse, multiple partners and unwanted pregnancy) when parents do not provide necessary coaching (Bee & Boyd, 2003). Hence they become easily influenced by their peers to explore unhealthy sexual practices and conform to the expectations of peers, which make them to be drug abusers and leave school prematurely (Nicholas, 2008).

Peer pressure is commonly associated with episodes of adolescent risk taking because these activities commonly occur in the company of peers (Steinberg & Monahan, 2007). Affiliation with friends who engage in risk behaviours has been shown to be a strong predictor of an adolescent's own behaviour (Spear, & Kulbok, 2001). A 17 year- old girl from Gaborone,

Botswana, who was involved with a 37 year old, was quoted as saying “It is all about peer pressure, we compete with the type of cell phone, our hair styles, the type of vehicles our boyfriends drive and the amount of money they have” (Leclerc- Madlala, 2013, p. 18). Smith, Udry, and Morris (1985) also found that pubertal indices and best friends’ sexual behaviour each predicted the sexual behaviour of boys and girls; among girls, the impact of friend’s sexual behaviour was particularly pronounced at advanced stages of pubertal development.

Maughan-Brown (2012) also found that adolescent females in Khayelitsha, Cape- Town, who see nothing wrong in concurrent relationships, for as long as their basic needs are met and they do not lack transport to go to school, they are comfortable in sharing taxi-drivers, these ones are determined and goal- oriented. Gender also has a clear effect on the amount of peer pressure an adolescent experiences: girls report significantly higher pressures to conform to their groups in the form of clothing choices or speech patterns. Additionally, girls and boys reported facing differing amounts of pressures in different areas of their lives, perhaps reflecting a different set of values and priorities for each gender (Maughan-Brown, 2012).

Most frequently, parents and peers are two competing socializing sources for the sexually developing adolescent (Sennott & Mollborn, 2011). Most adolescents engage in sexual activity out of curiosity, need for acceptance and due to peer influence (Jayakody et al., 2011). Most do not have factual information from right sources and thus turn to the sources they believe are readily available such a peers for information on sex (Bogani et al., 2014). In line with this theory of social learning, empirical evidence has consistently

shown that peers are a powerful source of influence in adolescence (Brechwald & Prinstein, 2011; Veenstra, Dijkstra, Steglich, & Van Zalk, 2013). Whereas Erik Erikson explains the adolescence stage as one which revolves around peers, groups and formation of accepted identity, Sigmund Freud argues that at this stage, sexual energies centers around the genitals (Veenstra et al., 2013).

Several studies have concluded that parents can buffer influence of peer norms on sexual intention or initiation (Fasula & Miller, 2006; Van de Bongardt, de Graaf, Reitz, & Dekovic, 2014; Whitaker & Miller, 2000). Poor parent-child relationships may enhance susceptibility to peer influences or increase the propensity to associate with deviant friends. Mechanisms may differ for girls and boys (Whitbeck, Conger, & Kao, 1993). Thus, regardless of the parenting style, peer pressure also influences the degree to which children, especially girls, conform to expected gender roles (Juvonen & Wentzel, 1996). Other scholars like Beyers, Veryser, and Verlee (2015) in their study found that parenting did not act as buffer to peer influence on sexual initiation.

The relationship among child-rearing practices, peer pressure and gender appears interesting with regards to how it interacts to influence sexual adventurism of adolescents. It is important, therefore, to investigate the influence of child-rearing practices, peer pressure and gender on adolescents' sexual adventurism.

Statement of the Problem

Studies conducted in urban poor communities in sub-Saharan African countries like Ghana and Kenya have reported early ages at first sex, multiple sexual partnerships, teenage pregnancy, and youth resolving some of their

unintended pregnancies with induced abortions (Dodoo, Zulu, & Ezeh, 2007; Henry & Fayorsey, 2002; Ngom, Magadi, & Omuor, 2003; Zulu, Dodoo, & Ezeh, 2002). In Ghana, the proportion of adolescent childbearing slightly increased from 13.3 % in 2008 to 14.2 % in 2014 (Ghana Statistical Service (GSS), 2014). The total abortion rate stands at 0.4 abortions per woman, with double the number of abortions occurring to women in the urban settings (0.6 abortions per woman) compared to rural women (0.3 abortions per woman) (Sundaram, Juarez, Bankole, & Singh, 2012). Romantic relationships tend to increase in prevalence throughout adolescence. By age 15, 53% of adolescents have had a romantic relationship that lasted at least one month over the course of the previous 18 months (Carver, Joyner, & Udry, 2003).

Results from the 2010 Edulink: Urban Health and Poverty study, conducted in urban poor localities in Accra, show that about 80% women had their first sexual encounter during adolescence compared to 63 % of men. This is comparable to the proportions of women and men in Ghana who stated the same; about 77 % of females and 56 % of males (Biney, 2013; GSS, 2008). Young women and men in this community also encountered unintended pregnancies, and half reported inducing or attempting to induce an abortion to resolve that pregnancy (Biney, 2013).

Significant people in the lives of adolescents include their parents or peers, who through conversation communicate their permissive views about sex, this can lead to them forming "arousable" and "agentic" sexual self-concepts that may result in sexual adventurous behaviours, including initiating sex early (O'Sullivan, Mckeague, Dudley, Hearn, Varela, & Miller, 2006). This suggests that adolescents engagement in some form of sexual activities

leading to teenage pregnancy, to some extent, are induced by peers and improper child-rearing practices by parents (Carver, Joyner, & Udry, 2003).

A qualitative study conducted in 2002 in Ga Mashie, an urban poor community in the capital of Accra, reported that girls engaged in sex at early ages, experienced unintended pregnancies, and ended some of those pregnancies with induced abortions. The study was conducted with focus group discussions with adolescents ages 12 to 19 in Ga Mashie in 2002. Adolescents noted several factors they believed either encouraged or deterred their engagement in sex. These sex “influencers” were poverty, sexually explicit media, and friends. The “preventers” were family, positive social institutions (specifically school and church), and personal choice (Henry & Fayorsey, 2002).

Understanding adolescents’ views on what encourages or deters sex is important given the average age at first sex in Ghana. The Survey conducted in Ga Mashie show comparable results that over 40 percent of girls and about 20 percent of boys ages 15 to 19 in Ga Mashie reported having had sexual intercourse, similar to national rates; and these data suggest that a large proportion of Ghanaians have sex before age 20, and more females than males start sex during adolescence (Henry & Fayorsey, 2002).

These results point to adolescents’ susceptibility to sexually transmitted infections, including HIV, and the risk of unintended pregnancies as expected outcomes because contraceptive use is low among them, just as in the rest of the Ghanaian population. Unintended pregnancies may result in unsafe induced abortions, unwanted childbearing, and the associated risks of maternal and infant mortality (Henry & Fayorsey, 2002).

Poverty was a key reason for adolescents engaging in sex, as mentioned by three of the groups with girls. One girl noted that children from poor families tend to engage in sex in order to get money. In a community where poverty exists, girls are at risk of engaging in sex for basic necessities (or even for lavish possessions) that their parents cannot provide (Dodoo, Zulu, & Ezeh, 2007).

The study also indicated that, four out of the eight groups agreed that the family were essential preventers of sex. One 18-year-old in-school boy said: "...when your parents give you all you need and they love you, you will not need anything from anybody and you will not be influenced into sex." Other studies have shown that parents play a major role in their adolescents' sexual development. These roles may take the forms of parents' voicing their attitudes toward adolescent sex, encouraging abstinence, or even providing a two-parent home (Abbott, & Dalla, 2008).

Anecdotal evidence indicate that a number of school-going adolescents engage in sexual adventurous behaviours such as masturbating in class, leaving classroom whilst teaching and learning is on-going to have 'quick sex' and back to class to continue learning. Again, some school-going girls become pregnant and continue to do one of these things: continue attending school with the pregnancy till they deliver, return to school after delivery, or dropout of school for good. There are also incidences of some adolescent pupils going to examination centres with their pregnancies. Adolescent pupils are also fond to be sexually touching each other in class and even trying to kiss one another. There have also been instances where adolescent pupils try to assist their friends to induce abortions for their unintended pregnancies. Others also out of

peer pressure leave their homes and move into the homes of their sexual partners because their friends are doing so.

Studies have been conducted on child-rearing practices, peer pressure and sexual behaviours of adolescents. While some scholars have looked at child-rearing practice and how it affects sexual behaviours of adolescents (e.g., Beyers, Veryser, & Verlee, 2015; Cacodcar, Dubbashi, & Joglekar, 2015; Sonia & Amar, 2012; Sneed, Strachman, Ngugen, & Morisky, 2009), others have investigated peer pressure and its effect on sexual behaviours (Brechtwald & Prinstein, 2011; Carver, Joyner, & Udry, 2003; O'Sullivan et al., 2006). Findings from these studies have indicated that child-rearing practices and peer pressure independently influences adolescents' sexual behaviours.

Ugoji and Ebenuwa-Okoh (2015) further examined the joint effect of parenting styles and peer pressure on sexual activities of adolescents and found that the two variables significantly affect adolescents' sexual activities. This present study, however, emphasizes the influence of child-rearing practices, peer pressure, and gender on sexual adventurism. There seems to be a literature gap to that respect due to: (1) Sexual adventurism goes beyond sexual activities by including sexual attitudes, sexual intentions, and sexual experimentation, (2) most of these previous studies were qualitative in nature and thus, all conclusions drawn was not based on any statistical inference, (3) none of these studies examined the role of gender even though gender has been found to be associated with sexual behaviours, (4) there is uncertainty as to whether parenting moderates the relationship between peer pressure and sexual behaviours of adolescents.

It is of essence again to state that these previous studies were conducted in the international world. Therefore, their findings are likely to be less valid in the context of Ghana. This is because child-rearing practices and levels of peer pressure are likely to differ between Ghana and the international countries due to discrepancies in culture, values and beliefs. This is supported by an observation by Smith and Udry (1985) which revealed that differences exist in the timing and sequencing of sexual behaviours in blacks and whites. With regards to context, little is known about how child-rearing practices and peer pressure influences sexual behaviours. Whiting, Burbank and Ratner (1986) have also argued that human societies differ greatly in the cultural rules regulating sexual behaviour and the vigour with which they are enforced. For instance in some cultures, premarital sex is encouraged because pregnancy allows a determination of the fertility of potential marriage partners. In other cultures, premarital sex is strongly discouraged, especially for girls, because virginity is highly prized.

The only known study is that of Bingenheimer, Ashanti, and Ahiadeke (2015) who revealed that having more friends increased the odds of engaging in sexual activity among younger adolescents in South-Eastern Ghana. Child-rearing practices were not examined, however. Again, Bingenheimer et al. (2015) collected their data from adolescents in market places within the selected communities. This study would, nevertheless, gather data from adolescents in their respective schools. It is against this background that this study seeks to investigate the influence of child-rearing practices, peer pressure, and gender on sexual adventurousness among adolescents in Ghana.

Purpose of the Study

The main purpose of the study is to examine the influence of child-rearing practices, peer pressure, and gender on sexual adventurousness among adolescents in Ghana. Specifically, the study sought to:

1. Explore the child-rearing practices of parents as perceived by adolescents.
2. Explore the levels of peer pressure among adolescents.
3. Explore the levels of sexual adventurousness among adolescents.
4. Examine the relationship between child-rearing practices and adolescents' sexual adventurousness.
5. Examine the relationship between peer pressure and adolescents' sexual adventurousness.
6. Examine the relationship between gender and adolescents' sexual adventurousness.
7. Investigate the effect of child-rearing practices, peer pressure and gender on adolescents' sexual adventurousness.
8. Determine the role of child-rearing practices in the relationship between peer pressure and adolescents' sexual adventurousness.
9. Determine the role of gender in the relationship between peer pressure and adolescents' sexual adventurousness.

Research Questions

The following research questions have been raised to guide the conduct of the study:

1. What are the types of child-rearing practices of parents as perceived by adolescents?

2. What are the levels of peer pressure among adolescents in Ghana?
3. What are the levels of sexual adventurism among adolescents in Ghana?

Hypotheses

The following hypotheses have been formulated to further guide the conduct of the study:

H₀1: There is no significant relationship between child-rearing practices and adolescent sexual adventurism.

H_A1: There is a significant relationship between child-rearing practices and adolescent sexual adventurism.

H₀2: There is no significant relationship between peer pressure and adolescents sexual adventurism.

H_A2: There is a significant positive relationship between peer pressure and adolescents sexual adventurism.

H₀3: There is no significant relationship between gender and adolescents sexual adventurism.

H_A3: There is a significant relationship between gender and adolescents' sexual adventurism.

H₀4: There is no significant influence of peer pressure, child-rearing practices, and gender on adolescents' sexual adventurism.

H_A4: There is a significant influence of peer pressure, child-rearing practices, and gender on adolescents' sexual adventurism.

H₀5: Child-rearing practices do not significantly moderate the relationship between peer pressure and adolescents' sexual adventurism.

H_{A5}: Child-rearing practices significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness.

H₀₆: Gender does not significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness.

H_{A6}: Gender significantly moderates the relationship between peer pressure and adolescents' sexual adventurousness.

Significance of the Study

The outcome of the study would be beneficial to parents as the findings will bring to light the influence of peer pressure on their adolescents that drives them into sexual adventurousness. It is anticipated that the study will provide information to parents to help them know the type of child-rearing practices that draws their adolescent children to go into sexual adventurousness. This will help parents to restructure their child-rearing practices to benefit their adolescent children to guide them in terms of their sexual adventure.

The study will be of benefit to the Ghana Education Service and curriculum developers in the inclusion of adolescent behaviour and characteristics and what leads to their sexual adventurousness. This will give more education to adolescents in school to help them understand their developmental stage.

The outcome of the study will serve as an invaluable source of information to counsellors; as to how to guide and educate different categories of clients such as young and older adolescents who come to seek help. Also, it will serve as a source of information for educational field trips such as guidance conference and seminars.

Policy makers and opinion leaders may also benefit from the study as it will inform them on how to enact policies that will guide adolescent's challenges that is associated with family background, upbringing and peer pressure as they face sexual adventure.

Again, the study may be of benefit to adolescents as it will help them to understand what influences them to be either more adventurous or less adventurous in sexual activities.

Finally, it will provide relevant literature for future research. This is because it may be a source of information for other students and corporate bodies who want to embark on similar research. It will also raise related issues for future research.

Delimitation

Sexuality is a natural phenomenon which is associated with all human kind. Every individual, both male and female, adults and adolescents will in one time or the other experience or have experienced some form of sexual adventure and has or will have ventured into sexual adventurism of a sort. The study however limits itself to only adolescents. This is as a result of how critical and delicate their stage of development is. The study would be adolescents in the various Junior High Schools in Ghana. Specifically, nine Junior High Schools would be selected from three regions in the country. The study would not include adolescents who have dropped out of school or have never been to school. This is due to the difficulty and feasibility in locating them (adolescents who are not in school).

Limitations

The nature of the study is likely to come with some critical limitations. Investigating an issue about sex and its components (such as sexuality) is sensitive and as a result gathering information could be problematic. Respondents might feel uncomfortable in responding to the questions. Also, there could be violation of the rights of the participants which is an ethical issue in conducting research. Again, respondents may feel reluctant in responding to the instrument and as a result may end up providing false responses to the questions. This can affect the validity of responses provided and consequently the conclusion drawn from the study. However, efforts were made by the researcher to create a conducive environment in order to ensure that respondents feel comfortable in responding to the instrument.

Also, the study was limited to adolescents who were still in school. Therefore, adolescents who were not in school or had dropped out as at the time of data collection did not participate in the study. Hence, generalising the findings of the study to all adolescents in Ghana can be erroneous. Caution should be taken in generalising the findings of the study.

Definition of Terms

Adolescent: for the purpose of the study, adolescent will be referred to as children with ages from 12 to 19 years.

Child-rearing practices: child-rearing is the process of promoting and supporting the physical, emotional, social, financial, and intellectual development of a child from infancy to adulthood. In the context of this study, child-rearing practices comprise in terms of discipline, emotional warmth, and the monitoring practices which parents adopts in the upbringing of their

children. In some instances, child-rearing and child-upbringing are used interchangeably.

Sexual adventurism: The emerging sexuality that accompanies adolescence adjusting to the altered appearance and functioning of a sexually 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 self. Sexual adventurism in this study is used to denote adolescents' sexual intentions, sexual attitudes and self-efficacy they have in engaging in sexual activities.

Organization of the Study

The study will be organized into five chapters. Chapter one provides an overview of the background to the study which serves as the basis for the entire study. This is followed by statement of the problem as well as purpose of the study, and research questions and hypotheses to be investigated. The chapter concluded with the significance and delimitation of the study.

Chapter Two will focus on the review of related literature. It will discuss comprehensively Freud's psychosexual theory, Erikson's theory of psychosocial development, Bundara's Social Cognitive Theory, Pillar Theory, and Self Determination Theory.

Chapter Three will dwell on methodology highlighting research design that will be utilized to execute the research. It will also look at sampling procedures, instruments for data collection, its validity and reliability, and finally, statistical tools for analysis of data. Chapter Four will report on the results from the analysis of the data to be obtained from the field work. This

will be followed by discussion of the results making reference to studies that support the findings of the current study.

Chapter Five will focus on the summary of the study, conclusions, and practical implications for counselling, recommendations, and limitations of the study. It will end with suggested areas for further research.

CHAPTER TWO

LITERATURE REVIEW

This chapter presents a review of related literature on all the issues and variables that are relevant to the study as well as give a summary. Areas and topics that were reviewed were conceptual review, theoretical review and empirical studies of the work. Theories reviewed were Freud's Psychosexual Development, Erikson's Psychosocial Development, Bandura's Social Cognitive, Pillar by Baumrind and Self-determination by Deci & Ryan.

Conceptual Review

Peer pressure

Peer pressure is the direct influence on people by peers, or the effect on an individual who gets encouraged to follow their peers by changing their attitudes, values or behaviours to conform to those of the influencing group or individual. It causes an individual to change in response to a feeling of being pressured or influenced from a peer or peer group. Peer conformity in young people is most pronounced with respect to style, taste, appearance, ideology, and values. Peer pressure is commonly associated with episodes of adolescent risk taking because these activities commonly occur in the company of peers (Steinberg & Monahan, 2007).

Affiliation with friends who engage in risk behaviours has been shown to be a strong predictor of an adolescent's own behaviour. Peer pressure can also have positive effects when youth are pressured by their peers toward

positive behaviour, such as volunteering for charity or excelling in academics. The importance of peers declines upon entering adulthood. Peer pressure similarly compels students of all ethnic backgrounds to engage in other at-risk behaviors such as cigarette smoking, truancy, drug use, sexual activity, fighting, theft, and daredevil stunts. Again, peer group values and attitudes influence, more strongly than do family values, the level of teenage alcohol use (Steinberg & Monahan, 2007).

Adolescents

Adolescence is one of the periods when both the immediate and long term effects are important. Some periods are important for physical and some for psychological effects. Accompanying these rapid and important physical developments, especially during the early adolescent period, rapid mental development occur. These give rise to the need for mental adjustment and the necessity for establishing new attitudes, values and interests (Hurlock, 2007).

Sanrock (2007) opined that adolescence is a period of transition from childhood to adolescence. It is complex and multidimensional; involves a number of biological, cognitive and socio-emotional changes. The biological changes are the growth spurt, hormonal changes, and sexual maturation that come with puberty, increase in abstract, idealistic, and logical thinking. They begin to think in more egocentric ways, often sensing that they are onstage, unique and invulnerable. In response to these changes, parents place more responsibility for decision making in the young adolescent's shoulders. Among the socio-emotional changes, they undergo a quest for independence, conflicts with parents, and a desire to spend more time with peers. Conversation with friends become more intimate and include self-disclose.

Increased sexual maturation produces a much greater interest in romantic relationship. Young adolescent's experience greater mood swings than they did when they were children.

Berk (2007) was of the view that the changes of puberty are dramatic and momentous. Within few years, the body of the school-age child is transformed into that of a full-grown adult. Genetically influenced hormonal processes regulate puberty growth. Girls, who have been advanced in physical maturity since the prenatal period, reach puberty, on average, two years earlier than boys. The physical changes that take place during the early years of adolescence affect the individual's behavioural level, lead to revaluations and a shifting judgment of value. A child enters early adolescence with the physical appearance of a child and within a few years, has the physical appearance of an adult. The changes of puberty are set in motion by an elaborate process in the endocrine system (Bhatt, 2007).

Hall (1904) the first psychologist who formulated a theory of adolescence proposed that the major physical changes that takes place at this time cause major psychological changes. He believed that young people's efforts to adjust to changing bodies ushered a period of storm and stress. Hall (1904) saw adolescence as a period of intense, fluctuating emotions, from which young people may emerge morally stronger. Adolescence can be on top of the world one moment and down in the dumps the next. Early adolescence is a time when high and low emotion occurs more frequently (Rosenblum & Lewis, 2003). With little or no provocation, they may blow up at their parents, siblings, projecting their unpleasant feelings on to another person. Identity negative emotions can reflect serious problems. Rates of depressed moods

become more frequent in girls during adolescence (Nolen-Koeksema, 2004). Conflict between parents and adolescents especially between mothers and sons, is the most stressful. Early maturing adolescents experience more conflict with their parents (Collins & Steinberg, 2006). Conger and Peterson (1984) highlighted the urge for risk taking behaviour during adolescence and glandular changes. The physiological and bodily changes that occur at this time are due to increased output of the gonadotropic hormones of the anterior gland. This gland, located in the brain, governs and controls the hormone balance of the body. The gonadotrophic hormone stimulates the activity of the gonads or sex glands increasing the production of sex hormones and the growth of mature sperm and ova in males and females respectively. This sex hormones-testosterone in male and estrogen in female-in combination with other hormones of the body stimulate the growth of bone and muscles and lead to the growth spurt.

The period of adolescence is a stormy one in which several types of problems emerge in all societies irrespective of its culture. The adolescents are highly sensitive to personal remarks and very much conscious of their self-esteem. They easily get emotional, frustrated, aggressive, and violent and go to the extent of facing any situation. The common unpleasant occurrences often taking place among the adolescents are delinquency, antisocial activities like thefts, robberies, sex crimes, running away from homes and sometimes even committing suicide and dying (Rajamanickam, 2007).

Mathew (2006) opined that adolescents face many problems of demands, uncertainties and competition. Those who are unable to face these demands experience more mental health problems. The main problems of

adolescents are to have economic interference to get rid of parental interference, fulfillment of desires, how to spend leisure, and which philosophy of life to adopt. They are often worried about their social behaviour and try to escape from others' criticisms. This worry gives birth to undesirable elements in them such as carelessness, less care of others, comfort, giving rude replies, short tempered and express displeasure, interfering in other's conversation, quarrelling with guardians for getting more freedom, beating the younger children in home, rejecting other people's advice (Davoudi & Kumar, 2008).

Tamizharasi and Manickaraj (2006) exhorted that adolescence is the period of preparation for adult life. Hurlock (2007) viewed that as adolescents approach legal maturity, they are anxious to shed the stereotype of teenagers and to create the impressions that they are near adults. Dressing and acting like adults, are not always enough. So they begin to concentrate on behaviour that is associated with the adult status-smoking, drinking, using drugs and engaging in sex. They believe that this behaviour will create the image they desire.

The unrealistically high aspirations the young adolescent has for himself, family and friends are in part responsible for some of the heightened emotionality of early adolescence. With increased social and personal experiences and with increased ability to think rationally, the older adolescents see himself, family, friends and life in general in a more realistic way (Devadas & Jaya, 2007).

Acceptance of the cultural stereotype of teenagers as sloppy, unreliable individuals who are inclined towards destructiveness and antisocial behaviour

has led many adults who must guide and supervise the lives of young adolescents to dread this responsibility and to be unsympathetic in their attitudes toward and treatment of normal adolescent behaviour (Rueter & Conger, 1995).

The social circle of an adolescent is very wide contrary to childhood, and becomes interested in opposite sex. Believes in making friendships and attaches him closely to a group (Pressley & Cormick, 2007).

Sexual Adventurism

Human sexual activity, human sexual practice or human sexual behaviour is the manner in which humans experience and express their sexuality. People engage in a variety of sexual acts, ranging from activities done alone (e.g., masturbation) to acts with another person (e.g., sexual intercourse, non-penetrative sex, oral sex, etc.) in varying patterns of frequency, for a wide variety of reasons. Sexual activity usually results in sexual arousal and physiological changes in the aroused person, some of which are pronounced while others are more subtle. Sexual activity may also include conduct and activities which are intended to arouse the sexual interest of another or enhance the sex life of another (Rosenthal, 2012).

Human sexual activity has sociological, cognitive, emotional, behavioural and biological aspects; these include personal bonding, sharing emotions and the physiology of the reproductive system, sex drive, sexual intercourse and sexual behaviour in all its forms. In some cultures, sexual activity is considered acceptable only within marriage, while premarital and extramarital affairs are considered a taboo. Some sexual activities are illegal either universally or in some countries or subnational jurisdictions, while some

are considered contrary to the norms of certain societies or cultures (Rosenthal, 2012). Adolescents engage in a spectrum of sexual behaviours ranging from fantasy and self-stimulation to various forms of intercourse. These include sexual fantasy, masturbation and sexual intercourse.

A sexual fantasy, also called an erotic fantasy, is a mental image or pattern of thought that stirs a person's sexuality and can create or enhance sexual arousal (Leitenberg & Henning, 1995). Sexual fantasy can be created by the person's imagination or memory, and may be triggered autonomously or by external stimulation such as erotic literature or pornography, a physical object, or sexual attraction to another person. Anything that may give rise to a sexual arousal may also produce a sexual fantasy, and sexual arousal may in turn give rise to fantasies (Leitenberg & Henning, 1995).

Sexual fantasies are nearly universal, being reported in many societies across the globe. However, because of the nature of some fantasies, the actual putting of such fantasies into action is far less common, due to cultural, social, moral, and religious constraints (Kasemy, Desouky, & Abdelrasoul, 2016). In some cases, even a discussion by a person of sexual fantasies is subject to social taboo and inhibitions. Some people find it convenient to act out fantasies through sexual role-play. A fantasy may be a positive or negative experience, or even both. It may be in response to a past experience and can influence future sexual behaviour. A person may not wish to enact a sexual fantasy in real life, and since the process is entirely imaginary, they are not limited to acceptable or practical fantasies, which can provide information on the psychological processes behind sexual behaviour (Kasemy, Desouky, & Abdelrasoul, 2016).

In general, the most common fantasies for men and women are: reliving an exciting sexual experience, imagining sex with a current partner, and imagining sex with a different partner. There is no consistent difference in the popularity of these three categories of fantasies. The next most common fantasies involve oral sex, sex in a romantic location, sexual power or irresistibility, and rape (Davis, Shaver, & Vernon, 2004).

The sexes have been found to contrast with respect to where their fantasies originate from. Men tend to fantasize about past sexual experiences, whereas women are more likely to conjure an imaginary lover or sexual encounter that they have not experienced previously. Male fantasies tend to focus more on visual imagery and explicit anatomic detail, with men being more interested in visual sexual stimulation and fantasies about casual sex encounters, regardless of sexual orientation (Birnbaum, 2007).

On the other hand, women's fantasies tend to be more focused upon mental sexual stimulation and contain more emotion and connection. Thus, women are more likely to report romantic sexual fantasies that are high in intimacy and affection, for instance associating their male partner with heroism and viewing them as chivalric rescuers (Birnbaum, 2007).

Much research has been conducted which has highlighted several gender differences in sexual fantasies. Some of the patterns which have frequently emerged include men's greater tendency to report sexual fantasies falling in the following categories: exploratory, intimate, impersonal, and sadomasochism (Rudman, & Heppen, 2003). Exploratory fantasies include those of homosexual encounters and group sex, whilst fantasies of watching others engage in sexual intercourse and fetishism are classed as impersonal

sexual fantasies. Women are also likely to report fantasies involving the same-sex partner, or those with a famous person, although both sexes have been found to prefer intimate fantasies over the other three types outlined, including fantasies of oral sex and sex outdoors (Rudman, & Heppen, 2003).

Erotic fantasy is the most common sexual behaviour in adolescence. In a non-representative sample of 13–18-year-olds, 72 percent acknowledged having sexual fantasies (Coles & Stokes, 1985). Erotic fantasies serve several important functions for adolescents: along with creating pleasant sexual arousal and expressing sexual needs, they provide insight into sexual desires and preferences and are an opportunity to “rehearse” sexual encounters (Katchadourian, 1990).

Masturbation is the sexual stimulation of one's own genitals for sexual arousal or other sexual pleasure, usually to the point of orgasm (Coleman, 2012). The stimulation may involve hands, fingers, everyday objects, sex toys such as vibrators, or combinations of these. Mutual masturbation (mutual manual stimulation of the genitals between partners) can be a substitute for sexual penetration. Studies have found that masturbation is frequent in humans of both sexes and all ages, although there is variation. Various medical and psychological benefits have been attributed to a healthy attitude toward sexual activity in general and to masturbation in particular. No causal relationship is known between masturbation and any form of mental or physical disorder (Coleman, 2012).

Masturbation involves touching, pressing, rubbing or massaging a person's genital area, either with the fingers or against an object such as a pillow, inserting fingers or an object into the vagina or anus, and stimulating

the penis or vulva with an electric vibrator, which may also be inserted into the vagina or anus. It may also involve touching, rubbing, or pinching the nipples or other erogenous zones while masturbating. Both sexes sometimes apply lubricating substances to intensify sensation (Coleman, 2012).

Reading or viewing pornography, sexual fantasies, or other erotic stimuli may lead to a desire for sexual release such as by masturbation. Some people masturbate by using machines that simulate intercourse. Men and women may masturbate until they are close to orgasm, stop for a while to reduce excitement, and then resume masturbating. The most common masturbation technique among males is to hold the penis with a loose fist and then to move the hand up and down the shaft. This type of stimulation is typically all that is required to achieve orgasm and ejaculation. The speed of the hand motion will vary, although it is common for the speed to increase as ejaculation nears and for it to decrease during the ejaculation itself.

Female masturbation involves the stroking or rubbing of a woman's vulva, especially her clitoris, with an index or middle finger, or both. Sometimes one or more fingers may be inserted into the vagina to stroke its frontal wall where the G-spot may be located. Masturbation aids such as a vibrator, dildo or Ben Wa balls can also be used to stimulate the vagina and clitoris. Many women caress their breasts or stimulate a nipple with the free hand and anal stimulation is also enjoyed by some. Personal lubricant is sometimes used during masturbation, especially when penetration is involved, but this is not universal and many women find their natural lubrication sufficient (Coleman, 2012).

Common positions include lying on back or face down, sitting, squatting, kneeling or standing. In a bath or shower a female may direct tap water at her clitoris and vulva. Lying face down one may use the hands; one may straddle a pillow, the corner or edge of the bed, a partner's leg or some scrunched-up clothing and "hump" the vulva and clitoris against it. Standing up, a chair, the corner of an item of furniture, or even a washing machine can be used to stimulate the clitoris through the labia and clothing. Some masturbate only using pressure applied to the clitoris without direct contact, for example by pressing the palm or ball of the hand against underwear or other clothing. Women can stimulate themselves sexually by crossing their legs tightly and clenching the muscles in their legs, creating pressure on the genitals. This can potentially be done in public without observers noticing. Thoughts, fantasies, and memories of previous instances of arousal and orgasm can produce sexual excitation. Some women can orgasm spontaneously by force of will alone, although this may not strictly qualify as masturbation as no physical stimulus is involved (Hallikeri, Gouda, Aramani, Vijaykumar, & Ajaykumar, 2010).

Mutual masturbation involves two or more people who sexually stimulate each other, usually with the hands. It can be practiced by people of any sexual orientation, and can be part of other sexual activity. It may be used as foreplay, or as an alternative to sexual penetration. When used as an alternative to penile-vaginal penetration, the goal may be to preserve virginity or to avoid risk of pregnancy. Mutual masturbation can be practiced in pairs or groups with or without actually touching another person. Non-contact mutual masturbation occurs when two people masturbate in the presence of each other

but not touching. Contact mutual masturbation is where one person touches another person to masturbate. The other person may do the same during or after. Non-contact group is where more than two people are masturbating in the presence of each other in a group but not touching each other. Contact group occurs when more than two people physically touch each other to masturbate as a group. Mutual masturbation foreplay also occurs when the manual stimulation of each other's genitals eventually leads to sexual intercourse (Hallikeri, et. al., 2010).

Sexual coercion is “the act of using pressure, alcohol or drugs, or force to have sexual contact with someone against his or her will. The act of using pressure to have sexual contact in this case can mean physical pressure, verbal pressure or emotional pressure. Physical pressure can include hitting, kicking and slapping the victim; holding the victim down; continuing with the sexual behaviour after the culprit has been told to stop; and even continuing to kiss the victim as he/she tries to pull away (Struckman-Johnson, Struckman-Johnson & Anderson, 2003).

Verbal pressure includes behaviours like threatening to use physical force against the victim, yelling at the victim, name calling, tricking, lying, blackmailing and badgering the victim. Emotional pressure is used much more frequently than physical and verbal pressure and is the most subtle of all the sexual coercion tactics. Using emotional pressure includes the perpetrator convincing the victim that he/she cares more for the victim than he/she actually does, threatening a breakup, wearing the victim down by using the same tactic over and over again, making the victim feel obligated to participate in sexual acts, guiltling the victim participating, utilizing peer

pressure and even the perpetrator using his/her position of authority over the victim (Struckman-Johnson et. al., 2003).

But sexual coercion includes so many more sexual acts than merely intercourse. Sexual coercion includes kissing, caressing, petting, oral sex, genital touching and any other sexually laden behaviour that makes the victim feel uncomfortable (Struckman-Johnson et. al., 2003).

Although majority of research studies emphasize poverty as the primary factor leading adolescent females to be promiscuous. Leclerc-Madlala (2013) discovered that even girls from affluent families get involved in intergenerational or age-desperate relationships (i.e. romantic relationship between young females and older male partners). For example, a 17 year- old girl, from Gaborone, Botswana, who was involved with a 37 year old, was quoted as saying:

“It is all about peer pressure, we compete with the type of cell phone, our hair styles, the type of vehicles our boyfriends drive and the amount of money they have” (Leclerc- Madlala, 2013).

A sharp contrast is brought by Cockcroft, Kunda, Kgakole, Masisi, Laetsang, Ho-Foster, and Andersson, (2010) with respect to adolescent females who resist intergenerational relationships despite their harsh economic circumstances. These authors established that there were still school-girls in Botswana who had a number of strong attributes such as a sense of self-worth, assertiveness and ideal-self who reported to have respect for marriage and believed that any older man must be treated as a parent. From this finding, this could imply that there are adolescent females who are resilient and optimistic in African communities. In other words, they refute the idea of being

degraded, treated as sex objects and always hidden by their partners to avoid stigma in Zulu or Xhosa community, when a female is in concurrent relationship (Cockcroft et al., 2010).

Gender

Gender is a term that refers to social or cultural distinctions associated with being male or female. Gender identity is the extent to which one identifies as being either masculine or feminine (Diamond, 2002). Children become aware of gender roles in their earliest years. They come to understand and perform these roles through socialization, which occurs through four major agents: family, education, peer groups, and mass media. Socialization into narrowly prescribed gender roles results in the stratification of males and females. Each sociological perspective offers a valuable view for understanding how and why gender inequality occurs in our society. Gender role refers to society's concept of how men and women are expected to act and how they should behave. These roles are based on norms, or standards, created by society (Diamond, 2002).

Girls typically think of virginity as a gift, while boys think of virginity as a stigma. In interviews, girls said that they viewed giving someone their virginity as like giving them a very special gift. Because of this, they often expected something in return such as increased emotional intimacy with their partners or the virginity of their partner. However, they often felt disempowered because of this; they often did not feel like they actually received what they expected in return and this made them feel like they had less power in their relationship. They felt that they had given something up and did not feel like this action was recognized (Carpenter, 2002).

Child-rearing practices

Child-rearing practices is the process of promoting and supporting the physical, emotional, social, and intellectual development of a child from infancy to adulthood. It refers to the intricacies of raising a child and not exclusively for a biological relationship. The most common caretaker in parenting is the father or mother, or both, biological parent(s) of the child in question, although a surrogate may be an older sibling, a step-parent, a grandparent, a legal guardian, aunt, uncle or other family member, or a family friend (Brooks, 2012).

Developmental psychologist Diana Baumrind identified three main child-rearing practices in early child development: authoritative, authoritarian, and permissive. These child-rearing practices were later expanded to four, to include an uninvolved parenting. Authoritative parenting is positively related to mental health and satisfaction with life. Authoritative parents rely on positive reinforcement and infrequent use of punishment. Parents are more aware of a child's feelings and capabilities and support the development of a child's autonomy within reasonable limits. Authoritarian parents are very rigid and strict. High demands are placed on the child, but there is little responsiveness to them. When the rules are not followed, punishment is often used to promote and insure future obedience. There is usually no explanation of punishment except that the child is in trouble for breaking a rule. This parenting style is strongly associated with corporal punishment, such as spanking. Permissive, or indulgent, parents are undemanding, so there tends to be little if any punishment or explicit rules in this style of parenting. These parents say that their children are free from external constraints and tend to be

highly responsive to whatever the child wants at the time. Uninvolved or neglectful parents are often emotionally or physically absent. They have little to no expectation of the child and regularly have no communication. They are not responsive to a child's needs and have little to no behavioural expectations. If present, they may provide what the child needs for survival with little to no engagement (Baumrind, 1971).

Theoretical Review

Freud's Psychosexual Stages of Development

Freud proposed that psychological development in childhood takes place during five psychosexual stages: oral, anal, phallic, latency, and genital. These are called psychosexual stages because each stage represents the fixation of libido (roughly translated as sexual drives or instincts) on a different area of the body. As a person grows physically certain areas of their body become important as sources of potential frustration (erogenous zones), pleasure or both (Hyde & DeLamater, 2003).

Freud believed that life was built round tension and pleasure. Freud also believed that all tension was due to the build-up of libido (sexual energy) and that all pleasure came from its discharge. In describing human personality development as psychosexual, Freud meant to convey that what develops is the way in which sexual energy of the Id accumulates and is discharged as we mature biologically. The Ego and Superego develop in order to exercise this control and direct the need for gratification into socially acceptable channels. Gratification centres in different areas of the body at different stages of growth, making the conflict at each stage psychosexual (Hyde & DeLamater, 2003).

Oral Stage (Birth to 1 year): In the first stage of personality development, the libido is centred in a baby's mouth. It gets much satisfaction from putting all sorts of things in its mouth to satisfy the libido, and thus its id demands. At this stage in life are oral, or mouth orientated, such as sucking, biting, and breastfeeding. According to Freud, oral stimulation could lead to an oral fixation in later life such as smokers, nail-biters, finger-chewers, and thumb suckers. Oral personalities engage in such oral behaviours, particularly when under stress (Hyde & DeLamater, 2003).

Anal Stage (1 to 3 years): The libido now becomes focused on the anus, and the child derives great pleasure from defecating. The child is now fully aware that they are a person in their own right and that their wishes can bring them into conflict with the demands of the outside world (i.e., their ego has developed). Freud believed that this type of conflict tends to come to a head in potty training, in which adults impose restrictions on when and where the child can defecate. The nature of this first conflict with authority can determine the child's future relationship with all forms of authority (Pike, 2001).

Early or harsh potty training can lead to the child becoming an anal-retentive personality who hates mess, is obsessively tidy, punctual and respectful of authority. This is all related to pleasure got from holding on to their faeces when toddlers, and their mum's then insisting that they get rid of it by placing them on the potty until they perform. The anal expulsive, on the other hand, underwent a liberal toilet-training regime during the anal stage (Pike, 2001).

Phallic Stage (3 to 6 years): At this stage sensitivity now becomes concentrated in the genitals and masturbation (in both sexes) becomes a new source of pleasure. The child becomes aware of anatomical sex differences, which sets in motion the conflict between erotic attraction, resentment, rivalry, jealousy and fear which Freud called the Oedipus complex (in boys) and the Electra complex (in girls). This is resolved through the process of identification, which involves the child adopting the characteristics of the same sex parent (Reiss, 1960).

Latency Stage (6 years to puberty): At this stage no further psychosexual development takes place during this stage (latent means hidden). The libido is dormant. Freud thought that most sexual impulses are repressed during the latent stage, and sexual energy can be sublimated (re: defence mechanism) towards school work, hobbies, and friendships. Much of the child's energy is channelled into developing new skills and acquiring new knowledge, and play becomes largely confined to other children of the same gender (Reiss, 1960).

Genital Stage (puberty to adult): This is the last stage of Freud's psychosexual theory of personality development and begins in puberty. It is a time of adolescent sexual experimentation, the successful resolution of which is settling down in a loving one-to-one relationship with another person in our 20's. Sexual instinct is directed to heterosexual pleasure, rather than self-pleasure like during the phallic stage. For Freud, the proper outlet of the sexual instinct in adults was through heterosexual intercourse. Fixation and conflict may prevent this with the consequence that sexual perversions may develop. For example, fixation at the oral stage may result in a person gaining

sexual pleasure primarily from kissing and oral sex, rather than sexual intercourse (Reiss, 1960).

Freud's contributions to the understanding of Sexual Development

Prior to 1890, it was widely thought that sexuality began at puberty. This changed with the advent of Sigmund Freud. His theory, aptly known as the psychosexual theory of development, involves the idea that personality development is centered on the effects of the sexual pleasure drive on an individual's psyche. The term libido refers to a person's drive or desire for sex. At each stage of development a particular body part is sensitive to erotic stimulation. These erogenous zones are the mouth, the anus, and the genital region.

According to Freud, the child must resolve a conflict during each psychosexual stage in order to advance to the next stage. If that conflict is not resolved, the child will fixate in this stage, and this will affect the child's adult personality.

Sexuality in Childhood (Birth to Age 2): The capacity for a sexual response is present from birth. Male infants, for example, get erections, and in fact, boy babies are sometimes born with erections. Vaginal lubrication has been found in female infants in the 24 hours after birth (Masters, Johnson, & Kolodny, 1982). Infants and young children have many other sensual experiences, including sucking on their fingers and toes, the first intimate relationship that children experience is with the mother or the primary caretaker. This relationship involves many of the tactile senses and includes being rocked and cuddled, being bathed, cleaned and diapered. These experiences may establish preferences for certain kinds of stimulation that persist throughout life.

Masturbation: Infants have been observed fondling their genitals, and the rhythmic type of manipulation associated with adult masturbation appears at age 2 ½ to 3 (Martinson, 1994). There is some question as to the infant's goal with self-stimulation, but it is thought to be pleasurable. In fact, there are cultures in which parents fondle infant's genitals in order to keep them quiet (Hyde & DeLamater, 2003).

Orgasms from masturbation are possible even at a young age although boys cannot actually ejaculate until puberty. Masturbation, even at this age, is both normative and may even be optimal. This was discovered as early as the 1940s through the work of Rene Spitz, an attachment theorist who studied the effects of inappropriate experiences of early care. Spitz (1949) compared infants with optimal and dysfunctional relationships with their mothers. He found that those infants with more optimal relationships were more likely to engage in masturbation, reinforcing the idea that masturbation is normative and healthy.

Infant masturbation tends to be a singular experience, but it is not uncommon for infants to masturbate alongside one another, reminiscent of the idea of parallel play. In later infancy there may be some infant to infant sexual encounters, in which children may pat, stroke or gaze at one another (Hyde & DeLamater, 2003; Lidster & Horsburgh, 1994).

Sexuality in Early Childhood (Ages 3 to 7): The early childhood years are marked by an increased interest in the environment as well as an increase in sexual exploration. As children become more social beings, their sexual interactions expand from self-focused activities, such as genital stimulation and masturbation, to other-focused activities. By interacting socially, children

begin to do what is socially acceptable and to learn privacy boundaries. For example, although the incidence of masturbation continues in frequency, children begin to learn that masturbation is something that is done in private. This stage also marks the beginning of both heterosexual and homosexual behaviour. They may also have increased need for privacy while bathing and dressing (Pike, 2001).

In addition to increasing social interaction, there is more curiosity about the world in general and this extends to sexual realms. For example, three and four-year-olds are curious about where babies come from and ask these difficult questions (Pike, 2001).

Increasing Curiosity about Sex/Heterosexual Behaviour: During this timeframe, and most specifically around the ages of 4 to 5, children's sexuality becomes social. This is most frequently exhibited in play, with children holding hands and kissing, likely imitating the adults around them or media they are exposed to. In early childhood, children become more curious and they explore other children and adults' bodies because of their curiosity. At this age children have increased interest in the differences between adult and children's bodies, pretending to be mommy or daddy and "playing doctor" role. "Playing doctor" generally involves children examining one another's genitals or engaging in fondling or touching. This behaviour is considered normative if children are willing participants and are close in age, although it can be uncomfortable for some parents, who see it as a prelude to more adult sexuality (Heins, 2004; Kennedy, 2004; Pike, 2001).

By about age 5, most children have formed a concept of what marriage is. This comes from direct observation in their households as well as the

influence of media. The concept of marriage is specifically a platonic one at this age. Children also seem to understand the idea that people marry those of another gender, and “playing house” is common. By about age four, girls may become intensely attached to their fathers and boys to their mothers (Hyde & DeLamater, 2003; Pike, 2001).

Sexual Knowledge and Interests: At age 3 to 4 children first begin to recognize that there are genital differences between boys and girls. They notice these differences and may question them (Hyde & DeLamater, 2003). Other children may bring up new ideas about sex. Five- to seven-year-olds often increase their use of sexual or obscene language, and this is frequently to test parental reaction.

At about the age of 7, children generally give up wanting to “marry” mom or dad. They begin to become closer to the parent of the same sex. Children in this age group become more reticent about asking questions (Pike, 2001).

Homosexual Behaviour: During later childhood, sexual play may involve members of the same gender. This generally involves touching or fondling (Martinson, 1994). Such play is normative and does not appear to mediate the development of adult sexuality.

Sexuality in Adolescence (Age 13 to 19): Of all the developmental timeframes discussed so far, adolescence is indisputably the time in which sexual maturation, interest and experience surge. This increased interest is caused by continued focus and awareness of body changes and rising hormone levels. There is also the cultural expectation that teens begin to prepare for

more adult roles through dating and some degree of more intimate contact, which may or may not be sexual intercourse (Hyde & DeLamater, 2003).

Freud's Genital Stage of Development (puberty onwards): In the genital stage libidinal energy once again focuses on the genitals and interest turns to relationships, specifically to romantic and sexual relationships with peers. This stage spans both adolescent and adult years. Attitudes towards premarital intercourse generally fall into four categories (Reiss, 1960).

1. **Abstinence:** a standard in which premarital sexual intercourse is considered wrong, regardless of circumstances.
2. **Double Standard:** a standard in which males are considered to have greater right to premarital intercourse.
3. **Permissiveness without affection:** a standard in which premarital intercourse is considered right for both sexes regardless of emotional involvement.
4. **Permissiveness with affection:** a standard in which premarital intercourse is considered right for both sexes if part of a committed relationship.

There seems to be somewhat of a trend towards more casual sexual encounters beginning during adolescence and continuing in college. This phenomenon is colloquially known as friends with benefits, in which two people may have a sexual relationship without demanding or expecting the commitment of a romantic relationship (Hyde & DeLamater, 2003).

Erikson's Theory of Psychosocial Development

Erickson (1964) postulated eight stages of psychosocial development, some of which has some bearing on the current study. The eight stages are

Trust versus Mistrust, Autonomy vs. Shame/Doubt, Initiative vs. Guilt, Industry vs. Inferiority, Identity vs. Role Confusion, Intimacy versus Isolation, Generativity versus Stagnation, Integrity versus Despair as discussed below.

Trust versus Mistrust: Erikson's theory of psychosocial development begins in infancy with the developmental crisis of trust versus mistrust. This is the hallmark experience of connection and intimacy against which other experiences will be judged. By striking a balance between trust and mistrust within that is developed at this point not just a certainty, focus, or commitment to ideas alone but also loyalty to others through one's identification with them. It is partly for this reason that some have argued that intimacy precedes identity and perhaps especially so among girls. The virtue of fidelity becomes ever harder to maintain over time, surprisingly, because of the advances in one's, ability to entertain possible and various ideological perspectives. Fidelity reflects the ability to maintain allegiance despite the contradiction of value systems that emerge over time (Erikson, 1964). This is the stage at which decisions must be made about who one is and who one is going to be; but perhaps more difficult, this is a time of choosing with whom one will form an allegiance and from whom one must turn away in order to maintain ideological consistency (Erikson, 1964).

Autonomy vs. Shame/Doubt: As toddlers (ages 1–3 years) begin to explore their world, they learn that they can control their actions and act on their environment to get results. They begin to show clear preferences for certain elements of the environment, such as food, toys, and clothing. A toddler's main task is to resolve the issue of *autonomy vs. shame and doubt* by working to establish independence. This is the “me do it” stage. For example, we might

observe a budding sense of autonomy in a 2-year-old child who wants to choose her clothes and dress herself. Although her outfits might not be appropriate for the situation, her input in such basic decisions has an effect on her sense of independence. If denied the opportunity to act on her environment, she may begin to doubt her abilities, which could lead to low self-esteem and feelings of shame.

Initiative vs. Guilt: Once children reach the preschool stage (ages 3–6 years), they are capable of initiating activities and asserting control over their world through social interactions and play. According to Erikson, preschool children must resolve the task of *initiative vs. guilt*. By learning to plan and achieve goals while interacting with others, preschool children can master this task. Initiative, a sense of ambition and responsibility, occurs when parents allow a child to explore within limits and then support the child's choice. These children will develop self-confidence and feel a sense of purpose. Those who are unsuccessful at this stage—with their initiative misfiring or stifled by overcontrolling parents—may develop feelings of guilt.

Industry vs. Inferiority: During the elementary school stage (ages 6–12), children face the task of *industry vs. inferiority*. Children begin to compare themselves with their peers to see how they measure up. They either develop a sense of pride and accomplishment in their schoolwork, sports, social activities, and family life, or they feel inferior and inadequate because they feel that they don't measure up. If children do not learn to get along with others or have negative experiences at home or with peers, an inferiority complex might develop into adolescence and adulthood.

Identity vs. Role Confusion: In adolescence (ages 12–18), children face the task of *identity vs. role confusion*. According to Erikson, an adolescent’s main task is developing a sense of self. Adolescents struggle with questions such as “Who am I?” and “What do I want to do with my life?” Along the way, most adolescents try on many different selves to see which ones fit; they explore various roles and ideas, set goals, and attempt to discover their “adult” selves. Adolescents who are successful at this stage have a strong sense of identity and are able to remain true to their beliefs and values in the face of problems and other people’s perspectives. When adolescents are apathetic, do not make a conscious search for identity, or are pressured to conform to their parents’ ideas for the future, they may develop a weak sense of self and experience role confusion. They will be unsure of their identity and confused about the future. Teenagers who struggle to adopt a positive role will likely struggle to “find” themselves as adults.

Intimacy versus Isolation: A reading of many developmental psychology text books might lead one to think Erik Erikson did not see others playing a central role in development after trust is formed and before intimacy is brought to the table. At this point in the young adult’s life, finding another person with whom to develop an intimate sexual relationship becomes the goal. Love is the virtue to be developed. An intimate relationship involves sacrifice, compromise, and an ethical strength to commit one-self to a relationship (Erikson, 1963).

However, in order for one to give her or his complete self to the relationship, there has to be a self to give, just as for one to identify with others in the formation of an identity, there must have developed some

interpersonal connections that have been given priority. In other words, the development of identity is crucial in order to successfully navigate this stage of psychosocial development, but identity also was dependent on an earlier form of connectedness. Yet truly intimate relationships involve sharing of one's life, work, goals, and ideologies (Erikson, 1988), which require more complex cognitive and identity development than have been present prior to adolescence. For intimacy to occur, cognitive developments such as mature perspective-taking abilities are necessary but not sufficient (Selman, 1980).

If identity has not begun to be established, mature love cannot grow because individuals will bring little to the relationship in terms of a unique self. In this case fear of engulfment can occur and the individual may retreat into isolation as has been well described by Kohut (1971) and Winnicott (1965). Clearly, this is not the first stage in which love has surfaced; however if love was lacking in one's earlier stages, if connectedness at prior stages was weak and insincere, the young adult at this point is likely to disengage from this normative pursuit of connection, choosing solitude instead of intimacy (Erikson, 1964).

Generativity versus Stagnation: The seventh stage of psychosocial development finds a mature adult dealing with the challenge of generativity versus stagnation. The virtue to be developed is care through a broadening concern for what one has created (Erikson, 1964). Generativity is the need to selflessly guide the next generation (McAdams & de St. Aubin, 1992; Schlein, 1987).

This can be accomplished through either applying this drive to the individual's own offspring or by feeling responsible for the larger society

(Erikson, 1988). The mature adult wants to be useful and effective, contributing to the world. Adults feel a need to impart their own knowledge and teach younger generations (Erikson, 1964).

The counter pull of stagnation can occur when the adult focuses internally, ceasing further psychosocial development. The adult falls into a repetitive routine within the social and work worlds, with the only concern and focus being on oneself (Erikson, 1964).

Integrity versus Despair: The eighth stage of psychosocial development finds an aging adult entering twilight of his or her life. The developmental crisis of this stage is to find a balance between integrity and despair. The virtue to be developed is wisdom based on accumulated knowledge and mature judgment through life (Erikson, 1964).

As adults reflect upon their lives, one challenge is to appreciate and integrate previous life experiences while minimizing feelings of despair or resentment. However if the adult feels as though her or his life has been wasted, feelings of discontentment can become overwhelming. Despair can not only contaminate the self but also drive away significant others, further strengthening the associations between despair, isolation, and feelings of failure. As an individual reviews his or her life story, the developmentally ideal result is a sense of acceptance and overall integrity for a life well lived (Erikson, 1964).

Underlying Assumptions of the Theory: Erik Erikson's eight stages of psychosocial development include several core assumptions that set the foundation for the larger theory. The first assumption is that although the stages are linear and generally occur at certain ages, rates of progression

through the eight stages will vary depending on individuals' internal (i.e., biological) and external (i.e., social and cultural context) circumstances and prior experiences. People continue to develop, in part, because biological changes propel them into new tasks imposed by new contexts and accompanying interpersonal demands. Thus, the stages and their corresponding age ranges are not meant to be restrictive or finite but rather represent the central developmental crises that individuals most commonly deal with at particular points in the life cycle (Erikson, 1964).

A second element of this first assumption about the diversity of developmental pathways is that the residual experiences of past crises reactions as well as the seeds of subsequent developmental crises are present in every stage: Prior crisis resolutions provide the foundation upon which current developmental crises are played out; each crisis reaction and resolution, then, sets the stage for future crises. For example, although individuals in their late twenties and early thirties tend to face head on the developmental crisis of intimacy versus isolation, the residue of trust versus mistrust struggles from earlier stages and the identifications that emerged from the crisis of identity versus role confusion inform how intimacy is approached (e.g., how much trust is bestowed on others) and with whom (typically people consistent with the identifications chosen earlier) (Erikson, 1964).

All of which brings us to a second important assumption. Each stage should not be looked at as a success or failure but as a process, the results of which are the strengths and virtues we carry with us (and continue to cultivate) throughout life. It is true that each stage represents a crisis, but it is the individual's ability to strike a balance between the two poles that facilitates

growth and development. An individual should and will experience struggles at each stage of her or his psychosocial development. This is because like the effect of fire on metal, challenges and strong reactions to each crisis make the resultant resolution and virtues stronger. The fourth assumption is that life demands constant rebalancing. No crisis resolution is finite and immutable. That the individual finds a balance between the two poles during the initial crisis resolution does not mean that the issues just overcome will not arise again later. New life stages provide multiple opportunities to rework prior crisis resolutions (Erikson, 1964).

The fifth and final assumption that we highlight is not one that stands out in most discussions of the Erikson's model of psychosocial development, namely, that life is about a weaving back and forth between developmental priorities. Each priority reflects a greater or lesser emphasis on connectedness and individuation, but at no point can the developmental crises that reveal these priorities be seen in isolation from each other. Just as each crisis has a positive and negative reaction, each crisis also reflects the need to establish a balance that leans either more toward connectedness or more toward individuation (Erikson, 1964).

Notably, as Selman's model of interpersonal negotiation strategies reveals, as individuals mature, the width of the gap between connection and individuation narrows. Selman and Schultz (1990) suggest that based on how individuals respond to conflict in terms of which participant changes or transforms his or her own needs and wants the person can be characterized as acting in more self-transforming or other-transforming ways. As people mature from their use of egocentrism toward the use of cooperation as

interpersonal conflict resolution approaches, these two styles (self- and other-transforming) become less extreme or distinct.

Like the Eriksons' stages, which are viewed for the most part as occurring in a predictable sequence, Selman (1980) also presents a series of states in which social cognition, namely perspective-taking abilities; unfold in a predictable fashion across the lifespan. In Selman's final stage of social cognitive maturity, collaborative interpersonal negotiation strategies emerge wherein the self- and other-transforming styles become indistinguishable because collaboration reflects accommodation and assertiveness simultaneously. Similarly, as individuals approach the stages or developmental priorities of generativity and integrity, it becomes hard to determine whether these stages reflect expressions of connection or separation because these priorities reflect both. That is, both models illustrate that as the individual matures, there is a developmental movement toward unity where previously in development there were clearly competing poles and clearly evidenced tension between them (Selman, 1980).

Identity vs. role confusion: Erik Erikson's stages of psychosocial development provide another useful platform for us to further understand the motivational forces behind peer influence. Each of Erikson's eight stages of development represents a life challenge which builds upon the successful accomplishment of the previous stage. For adolescents, the challenge is 'identity' verses 'role confusion', and Erikson suggests we are intrinsically motivated towards achieving a resolution (Kroger, 2000). During this stage, adolescents are thought to consider for the first time – 'who am I?', 'who do I want to be?' and 'who does society expect me to be?' According to Erikson

(1964), this search for identity often involves exploring extremes and testing limits before choosing a life path. Delinquent and self-destructive tendencies are seen as possible, and maybe even natural, aspects of the journey. Erikson goes on to discuss the need for youth to find stable relationships outside those with their families – a concept he labels 'fidelity'.

It may be suggested, then, that conformity to peer influence in adolescence is motivated by this search for identity. Those questions we ask ourselves about who we want to be provides motivation for wider experiences and the search for fidelity leads us to look to others. This search for wider experiences is possibly the most researched area with regards to conformity to peer influence. Studies such as that by Monahan, Steinberg and Cauffman (2009) find that adolescents, especially those in middle adolescence, are very open and susceptible to involvement in antisocial behaviours. One possible rationale behind this is that youth are motivated to explore varied experiences through others in order to define their identity.

Identity Agents: More recent research adopting Erikson's idea that identity formation is a major challenge during adolescence looks at the process more so as a product of influence through collaboration. Schachter and Ventura (2008) introduced the idea that adolescents actively participate in the identity formation of their peers, and motivate them to conform to influences through confirmation and support. Peers who involve themselves in this form of influence have been labelled 'identity agents'. In contrast to research that supports Erikson's theory; studies on identity agents have primarily focused on the positive outcomes of peer influence. For example, one study found that adolescents were motivated to conform to the positive study habits of their

peers who offered social support and confirmation (Sugimura & Shimizu, 2010). While this idea of identity agents is relatively new, research thus far appears promising. The idea of confirmation as motivation towards conformity to peer influence is also relevant to self-esteem.

Social Cognitive Theory by Bandura

The social learning theory of Bandura emphasizes the importance of observing and modelling the behaviours, attitudes, and emotional reactions of others. Bandura (1977) states: “Learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effects of their own actions to inform them what to do. Most human behaviour is learned observationally through modelling: from observing others one forms an idea of how new behaviours are performed, and on later occasions this coded information serves as a guide for action” (Bandura, 1977).

Social learning theory explains human behaviour in terms of continuous reciprocal interaction between cognitive, behavioural, and environmental influences. The component processes underlying observational learning are: (1) Attention, including modelled events (distinctiveness, affective valence, complexity, prevalence, functional value) and observer characteristics (sensory capacities, arousal level, perceptual set, past reinforcement), (2) Retention, including symbolic coding, cognitive organization, symbolic rehearsal, motor rehearsal), (3) Motor Reproduction, including physical capabilities, self-observation of reproduction, accuracy of feedback, and (4) Motivation, including external, vicarious and self-reinforcement (Bandura, 1977).

Bandura's Theory on Adolescent Development

Bandura (2002) focused on individuals' *beliefs* about their ability to succeed at a task, or their sense of *self-efficacy*. This led to his development of social cognitive theory, which says that personality results from the interaction of an individual's thoughts with inner qualities, self-beliefs, and environmental cues. His research determined convincingly that individuals who believe they can succeed at a task are more likely than others to actually succeed.

According to Bandura (2002),

We find that people's beliefs about their efficacy affect the sorts of choices they make in very significant ways. In particular, it affects their levels of motivation and perseverance in the face of obstacles. Most success requires persistent effort, so low self-efficacy becomes a self-limiting process. To succeed, people need a sense of self-efficacy, strung together with resilience to meet the inevitable obstacles and inequities of life.

His theory throws light on the adolescence as an important transitional phase in the life course, that adolescence presents a host of new challenges. Adolescents have to manage major biological, educational, and social role transitions concurrently. Learning how to deal with pubertal changes, emotionally invested partnerships, and the emergence of sexuality becomes a matter of considerable importance. The theory of Bandura is applicable in the current study.

Foundation of human agency: Among the mechanisms of human agency, none is more central or pervasive than beliefs of personal efficacy. This core belief is the foundation of human motivation, well-being, and accomplishments. Unless people believe they can produce desired effects by their actions, they have little incentive to act or to persevere in the face of difficulties. Whatever other factors serve as guides and motivators, they are rooted in the core belief that one has the power to effect changes by one's actions (Bandura, 2002).

Belief in one's efficacy is a key personal resource in self-development, successful adaptation, and change. It operates through its impact on cognitive, motivational, affective, and decisional processes. Efficacy beliefs affect whether individuals think optimistically or pessimistically, in self-enhancing or self-debilitating ways. Such beliefs affect people's goals and aspirations, how well they motivate themselves, and their perseverance in the face of difficulties and adversity (Bandura, 2002).

Efficacy beliefs also shape people's outcome expectations whether they expect their efforts to produce favourable outcomes or adverse ones. In addition, efficacy beliefs determine how environmental opportunities and impediments are viewed. People of low efficacy are easily convinced of the futility of effort in the face of difficulties. They quickly give up trying. Those of high efficacy view impediments as surmountable by self-development and perseverant effort. They stay the course in the face of difficulties and remain resilient to adversity (Bandura, 2002).

Efficacy beliefs also affect the quality of emotional life and vulnerability to stress and depression. And last, but not least, efficacy beliefs

determine the choices people make at important decisional points. A factor that influences choice behaviour can profoundly affect the courses lives take. This is because the social influences operating in the selected environments continue to promote certain competencies, values, and lifestyles. Many meta-analyses have been conducted across diverse spheres of functioning in both laboratory and field studies, with diverse populations of varying ages and socio demographic characteristics, in different cultural milieus, and for both individual and collective efficacy (Bandura, 2002). The evidence from these meta-analyses shows that efficacy beliefs contribute significantly to level of motivation, socio-cognitive functioning, emotional well-being, and performance accomplishments (Bandura, 2002).

Adolescent development: Each period of human development brings with it new competency requirements, challenges, and opportunities for personal growth. As an important transitional phase in the life course, adolescence presents a host of new challenges. Adolescents have to manage major biological, educational, and social role transitions concurrently. Learning how to deal with pubertal changes, emotionally invested partnerships, and the emergence of sexuality becomes a matter of considerable importance. Adolescents must manage not only pervasive physical changes but difficult educational transitions as well. The transition to middle-level schools involves a major environmental change that taxes personal efficacy (Bandura, 1964; Petersen, 1988; Rutter, Graham, Chadwick, & Yule, 1976).

Management of sexuality: With achievement of reproductive maturity, which is occurring earlier than it did in the past, adolescents must learn how to manage their sexuality long before they are ready to take on the functions of

parenthood. While the mass media serve up a heavy dose of sprightly sexual activity, mainly by unmarried partners in uncommitted relationships, societal practices largely foster sexual ignorance and unpreparedness (Brown, Childers, & Waszak, 1990).

Unlike most other activities, sexual unpreparedness does not dissuade sexual ventures. Teenagers engage in a high rate of sexual activity and are initiating it at a younger age (Brooks-Gunn & Furstenberg, 1989). Early sexual activity is more prevalent among adolescents from disadvantaged backgrounds and those who have low educational aspirations (Brooks-Gunn & Furstenberg, 1989).

Our society has always had difficulty providing comprehensive sex education and contraceptive services for its youth. Nor is much sexual guidance provided in the home. Because many parents do a poor job of it, most youngsters pick up their sex information and a good deal of misinformation late in their development primarily from peers and, to a lesser extent, from the media and from the adverse consequences of uninformed sexual experimentation (Koch, 1991).

Moreover, socially oriented efforts at sex education are often thwarted by sectors of the society that lobby actively for maintaining a veil of silence regarding protective sexual practices in the belief that such information will promote indiscriminate sexuality. They vigorously oppose sex education programs in the schools that talk about contraceptive methods. Even adults who view sexual development more open-mindedly are uneasy talking frankly about sexual matters with their children and evade the subject as much as possible. They have learned to talk a good line, but they convey anxious

attitudes about sexual relations. Many impart sexual information to their children only after they suspect their children have already learned “too much” from other sources (Bandura & Walters, 1959).

Because of anxious evasion and moral opposition, efforts at sex education are usually couched in desexualized generalities about reproduction processes that leave much ignorance in their wake. The net result is that teenagers in our society are more sexually ignorant and are getting pregnant at higher rates than in other societies that address the informational, attitudinal, and interpersonal aspects of sexual development openly and provide ready access to contraceptive services (Bandura & Walters, 1959).

Most efforts to prevent the adverse consequences of early sexual activity center on educating teenagers about sexual matters and contraceptive use, encouraging them to postpone sexual intercourse, and providing the sexually active ones with contraceptive services (Bandura & Walters, 1959).

It is widely assumed that if teenagers are adequately informed about sexuality they will take appropriate self-protective action. Heightened awareness and knowledge of risks are important preconditions for self-directed change. Unfortunately, information alone does not necessarily exert much influence on sexual behaviour. Translating sexual knowledge into effective self-management of sexuality requires social and self-regulative skills and personal efficacy to exercise control over sexual situations (Bandura & Walters, 1959).

As Gagnon and Simon (1973) have correctly observed, managing sexuality involves managing interpersonal relationships. Sexual risk reduction calls for enhancing efficacy rather than simply targeting a specific behaviour

for change (Bandura, 1994). The major challenge is not teaching teenagers sex guidelines, which are easily achievable, but equipping them with skills that enable them to put the guidelines into practice consistently in the face of counteracting social pressures. Difficulties arise because knowledge and intentions often conflict with interpersonal pressures and sentiments. In these interpersonal predicaments, the sway of allurements, heightened sexual arousal, desire for social acceptance, coercive pressures, situational constraints, fear of rejection, and personal embarrassment can override the influence of the best informed judgment (Bandura, 1994).

The weaker the perceived self-efficacy to exercise personal control, the more such social and emotional influences can increase the likelihood of early or risky sexual behaviour. In managing sexuality, people have to exercise influence over themselves as well as over others. This requires self-regulative skills in guiding and motivating one's behaviour. Self-regulation operates through internal standards, evaluative reactions to one's conduct, use of motivating self-incentives, and other forms of cognitive self-guidance. Self-regulative skills thus form an integral part of sexual self-management. They partly determine the social situations into which people get themselves, how well they navigate through them, and how effectively they can resist social inducements to risky sexual behaviour (Bandura, 1994).

It is easier to wield control over preliminary choice behaviour that may lead to difficult social predicaments than to try to extricate oneself from such situations while enmeshed in them. This is because the beginning phase involves mainly anticipatory motivators that are amenable to cognitive control. The entanglement phase includes stronger social inducements to engage in

unprotected sexual behaviour, which are less easily manageable (Bandura, 1994).

The influential role played by efficacy beliefs in the management of sexual activities is documented in studies of contraceptive use by teenage women at high risk for unwanted pregnancy because they often engage in unprotected intercourse (Kasen, Vaughan, & Walter, 1992; Longmore, Manning, Giordino, & Rudolph, 2003).

A low sense of self-regulatory efficacy in the presence of social pressures promoting risky sexual practices spells trouble. Indeed, the psychosocial profile of teenagers who engage in unprotected intercourse includes a low sense of efficacy to exercise self-protective control in sexual involvements, association with peers who sanction intercourse and are risky in their own sexual behaviour, and misconceptions about the prevalence of unprotected intercourse among students their age (Walter, Vaugh, Gldis, Ragin, Kasen & Cohall, 1993). This combination of psychosocial influences overrides beliefs about personal susceptibility to sexually transmitted diseases (STDs) and about their severity. Perceived efficacy and peer influence similarly predict whether or not teenagers intend to become sexually active in the next year, have multiple partners, and use condoms (Walter et al., 1993). Values about sexual involvement at their age also affect behavioural intentions. Whether sexual values and standards determine peer affiliations or affiliations shape sexual standards remains to be determined. There is every indication that these types of influences operate directionally (Bandura & Walters, 1959).

Gilchrist and Schinke (1983) applied the main features of the generic self-regulative model of personal change to teach teenagers how to exercise self-protective control over sexual situations. They received essential factual information about high-risk sexual behaviour and self-protective measures. Through modelling, they were taught how to communicate frankly about sexual matters and contraceptives, how to deal with conflicts regarding sexual activities, and how to resist unwanted sexual advances.

Pillar Theory by Diana Baumrind

The family system theory suggests that individuals cannot be understood independently of their family members since families are systems which are interconnected and interdependent (Gavazzi, 2012). Through family interactions, parents may have influence on a child's sexual behaviour and in so doing transmit values, knowledge and attitudes about sex. The four parenting styles pioneered by Baumrind (1971) are authoritative, authoritarian, permissive, and uninvolved parenting styles (Gavazzi, 2012).

According to *Merriam-Webster Learner's Dictionary* (2009), child-rearing is defined as, "The process of taking care of and raising children." When one reads, this definition sees child-rearing as the practices and styles of raising one's children. Each parent raises his or her children differently from other parents – as long as the methods used are appropriate, loving and safe, this is good. Parenting is challenging enough, but the battles one picks, the praise one gives and the issues one feels are important help determine one's child-rearing style, as explains the New York University Child Development Center (1991). Key factors associated with child-rearing styles include warmth, rules, behaviour control, supportive responsiveness and expectations.

Parenting styles affect children's traits such as achievement, independence, curiosity, self-reliance, self-control and friendliness.

Different cultures and countries approach raising children from different philosophies and beliefs. Some may focus on teaching children to be more independent while others tend to focus more on expressing their love for their children. Different cultures raise their children according to a set of expectations. In the behavioural realm, children of White and Asian parents are expected to learn self-control. Latino, American Indian and Black fathers want their children to become independent, assertive and show a willingness to claim responsibility when they make mistakes (Struckman-Johnson et. al., 2003).

In the realm of affection, the parents of Asian-Pacific, West African and Arabic children stop showing physical affection to their children as they become toddlers. Other cultures use bathing, hair and skin care rituals as a way of showing affection, according to Global Post's Everyday Life.

Parenting practices in different regions of the world vary widely. For instance, fathers in the Congo – pygmy dads – spend a significant part of their days in child-rearing activities. They hold and even nurse their babies, according to the Education website. In Kenya, parents will strap their children on their backs. As soon as the babies show they can move on the ground, they are expected to get around on their own. (<https://nobullying.com/parenting-styles/>)

Chinese parents stop putting their babies in diapers when the babies reach 6 months of age. Instead, the babies are clothed in crotchless pants – and, in cooperation with their parents' expectations, they learn how to control

their bladders and bowels. When a baby has an accident, they are not punished.

In Japan, parents don't intervene when their children are fighting. Instead, the parents practice what is called "mimomoru," or watchful waiting. In this way, children learn to resolve disputes on their own. In Australia, crawling babies are free to play on the floor unrestrained. Australian parents believe that, as babies play, they learn, according to *Raising Children*. As a two-year-old begins to show more independence, Australians consider this time to be, not terrible, but terrific. Parents are encouraged to give their young children quiet time if the children have given up day-time naps.

Parenting experts break child-rearing styles down into four basic categories: Authoritative, which means parents have high expectations for their children, yet express love and are responsive to their children. Authoritative child-rearing emphasizes warmth and responsiveness to children's needs, but parents also maintain high behavioural expectations.

According to Dr. Anita Gurian of the NYU Child Development Study Center, parents who raise their children in this style set limits and allow natural consequences as a means of modifying behaviour. They are sensitive to their child's point of view and temperament, and they may adjust consequences or expectations accordingly. Parents also explain why certain rules are important rather than citing their authority as the reason why children should obey. According to Dewar (2011), Gurian and most peer-reviewed psychology publications, authoritative parenting is considered the "gold standard" and typically produces independent, confident children who are well-adjusted, creative and cooperative.

Authoritarian parents are those in which children are expected to obey unquestioningly. These parents direct their children throughout the day and bring fast consequences for failure to comply, according to Global Post's Everyday Life. Authoritarian child-rearing emphasizes obedience above all else. Sensitivity to the individual child or circumstances is not part of the authoritarian approach. Authoritarian parents aim to control children's behaviour through constant direction and swift consequences. According to Dr. Gwen Dewar (2011) of ParentingScience.com, children raised in this style are expected to obey parents regardless of the situation, and negotiation and discussion are not tolerated. This style is also characterized by rigid adherence to rules, regardless of whether those expectations are realistic. Dewar, (2011) says children raised in this style tend to rely on authority figures to make decisions for them, and they also have higher rates of depression, anxiety and poor self-esteem.

Uninvolved parents don't express love or warmth to their child. Nor do they place any expectations on the child, who, in the most extreme cases, becomes responsible for meeting their own basic needs. Uninvolved child-rearing is most harmful. Not only is parental warmth and responsiveness absent, but few expectations or demands are placed on the child. Children learn not to rely on parents for anything; in extreme cases, this can include basic needs such as food and clean clothing. Parents remain unresponsive to their children, showing little to no affection or encouragement. The lack of limits also means children receive no guidance or examples of appropriate behaviour. According to Dewar (2011), such children are most likely to have

poor self-esteem and lack the ability to cooperate. Most juvenile offenders were raised in this style of parenting.

Permissive type is the type in which parents don't place many expectations on their children. Parents do express love and warmth toward their children, but discipline inconsistently. Children are indulged regardless of their behaviour. Permissive or indulgent child-rearing involves lots of love, support and sensitivity, but parents have few expectations and make few demands of the child. Limits and rules are poorly enforced, and children are given significant freedom to do as they like. Parents don't correct poor behaviour through discipline or instruction, and they frequently indulge the child's demands regardless of behaviour, Gurian says. Maintaining control over the child's behaviour is not as important as it is in authoritarian and authoritative child-rearing. According to Dewar (2011), children raised in this style tend to have very high self-esteem, but they are also less achievement-oriented and more likely to encounter problems with drugs and alcohol.

Self-determination Theory by Deci and Ryan

Within self-determination theory, it is the needs for relatedness and autonomy that are most relevant to the study of peer influence. Self-determination theory (SDT) is a theory of human motivation based on three basic psychological needs; autonomy, relatedness and competence. The theory suggests that psychological well-being and development are dependent upon these three needs being met (Deci & Ryan, 2008). Therefore, as humans we are motivated to work towards satisfying these needs. The various aspects of SDT have been applied in a variety of settings including education (Guay, Ratelle, & Chanal, 2008), parenting (Joussemet, Landry, & Koestner, 2008)

and cultural practices (Chirkov, Ryan, Kim, & Kaplan, 2003). In this discussion around peer influence, there are two needs in particular which are seen as especially important.

The first is relatedness. That is, the need to feel connected and close to others (Veronneau, Koestner, & Abela, 2005). According to SDT, humans are motivated to satisfy this need. This provides a viable explanation for the motivational power of peer influence in that as humans, we desire to feel related to others and this motivates us to behave in ways that are consistent with those around us. As a result, we can foster peer relations and satisfy the innate need for relatedness.

The second need that is particularly relevant to peer influence is that of autonomy. While this may at first seem counterintuitive, it is in fact the motivation to achieve autonomy from parental influence that may lead an individual to be more susceptible to peer influence. Therefore, the motivational power of peer influence may stem from the adolescents need for autonomy from parental influence.

Empirical Review

This section presents empirical studies that are related to the current study. Empirical Review focused on studies on adolescents and adolescent characteristics, Studies on Child-rearing Practice, studies on adolescent Sexuality and Gender.

Studies on adolescents and adolescent characteristics

According to a two year study conducted by ‘The International Institute of Population Science, Mumbai and The Population Council, Delhi, in an attempt to “what makes generation next tick” over 55,000 youngsters

between ages of 15 and 29 across six states of Maharashtra, Andhra Pradesh, Bihar, Jharkhand, Rajasthan and Tamil Nadu on 'Youth in India: Situation and Needs' the study offered interesting insights into the young mind. Friends are important, but so is parental approval. Many preferred not to mingle with the opposite sex for fear of upsetting their parents. The careful attitude associated with youth is missing and stress has been acknowledged to be a major part of their young lives, nearly one in six youth showed signs of stress, while men tend to worry about jobs and money. Women fret over lack of education opportunities; 11.2 percent men and 14 percent women perceived themselves to be depressed (*Times of India, 2009*).

Majed and Fatema (2009) evaluated the difference and relationships between stress with aggression, social anxiety and social skills across adolescents of Kuwait and Indian samples. It was found that the level of stress among Indian adolescents is higher than those of Kuwait, because of the surrounding environment of the sample of India facing many economical and sociological problems.

Misra's (2006) study on "Need Assessment of Adolescents in Bageshwar District, Uttaranchal", on a sample of both boys and girls in the age range of 14-18 years showed that with the onset of puberty, the feelings and emotions, which the adolescents went through as follows: 10.66 percent felt lack of attention, while 47.54 percent felt lack of confidence in themselves; 14.75 percent felt lonely, whereas 27.88 percent felt stressed because of the confusion and changes occur in their bodies. The response regarding time spending is as follows: 50.82 percent claimed spending most of their time with the family whereas, 40.16 percent said they were with their friends most of the

time, while 9.02 percent spent time alone without the company of friends and families.

Botsari (2005) studied on “Risk / Protective Effects on Adolescent Depression, Role of Individual, Family and Peer Factors”. The gender, age differences, family and peer risk factors for adolescent depression were examined. The results with a sample of 52 adolescents in grades 7-12 showed that : (a) girls were more vulnerable to depressive symptoms than boys, (b) the effect of self-perception of scholastic competence on depression was stronger for boys than for girls, while physical attractiveness and parent relation were more significant for girls than boys, (c) the effect of relationships with parents on the adolescents’ psychological adjustment weakened during adolescence, being always stronger for girls than for boys.

On the contrary, the significance of classmate support increased with increasing age, boys and girls equally benefited from supportive relationships with their peers, (d) early adolescents’ parent relation influence perceived classmate support, whereas in late adolescence family and peers appear to form two wholly independent “social worlds”. The findings of the study revealed that low self-perception of scholastic competence, dissatisfaction with physical appearance, more conflicted family relationships and low social support from classmate have risk enhancing effects on depression of adolescents and depressive disorders constitute one of the major mental health problems. Body image has been the subject of much debate and investigation especially during adolescence. Body image is an important element reflecting adolescents’ experience and their understanding of their development. It is thought to be relating to many aspects of human development including

personality development and familial relationships. It is an indicator of adolescent component of identity development (Botsari, 2005).

The results of Palmqvist and Santa Virta's (2007) research on "What friends are for: The relationship between body image, substance use, and peer influence among Finnish adolescents", indicated that there was a significant difference between boys and girls in how they experience their body image in all their body-image dimensions. In searching dimension, the girls were more occupied with (Palmqvist & Santa Virta, 2007).

Sexual Behaviour and Sexual Practices

Masturbation: Masturbation allows teenagers to explore their sexuality in a safe and private way, and is generally regarded as a normative activity (Katchadourian, 1990). In one survey, 46 percent of boys and 24 percent of girls reported masturbating (Coles & Stokes, 1985); among college students, 67 percent of males and 34 percent of females reported masturbating at age 15 (Leitenberg, Detzer, & Srebnik, 1993). However, masturbation remains a taboo topic in the United States. This taboo is apparent in a content analysis of sex-related items published in *Seventeen* magazine: masturbation was not mentioned at all in 1974 and appeared in less than 5 percent of items in 1984 and 1994 (Carpenter, 1998).

"Making out": Most United States adolescents engage in physically intimate behavior even if they do not have intercourse. In a sample of ethnic minority 14–17-year-olds who had not yet had intercourse, 86 percent had kissed, 47 percent had rubbed their body against another, and 16 percent had engaged in genital touching (Miller et al., 1997). In a multiethnic sample of 12-15-year-olds, Smith and Udry (1985) found that white adolescents followed a typical

progression from necking, to petting above the waist, to genital touching, to intercourse. A similar sequence emerged in primarily white adolescents (Miller et al., 1998). In contrast, black adolescents showed no predictable sequence of sexual behaviors, and many reported intercourse prior to heavy petting thus, the timing and sequencing of sexual behaviors appear to differ for blacks and whites (Smith & Udry, 1985).

Sexual Intercourse: The majority of US adolescents experience intercourse by age 18. In recent national surveys, 50 percent of 9th–12th-graders reported they had had sex (Blum et al., 2000; CDC, 2000). The likelihood of intercourse increases with age, so that by 12th grade; approximately two-thirds of students have had sex. This is likely an underestimate, as school-based surveys exclude high school dropouts and youth enrolled in alternative schools, who are more likely to be sexually active (CDC, 2000).

The prevalence of adolescent intercourse differs by race and ethnicity. Among participants in the National Survey of Adolescent Health (Add Health), less than half of white (46 percent) and Hispanic (47 percent) high school students reported sexual intercourse, compared to two-thirds (67 percent) of blacks (Blum et al., 2000).

Similarly in 1995, 88 percent of black males aged 17-19 reported engaging in sex, compared to 64 percent of non-black males (Ku, Sonenstein, Lindberg, Bradner, Boggess, & Pleck, 1998). Among females aged 15–19 in 1995, 60 percent of non-Hispanic blacks, 56 percent of Hispanics, and 51 percent of non-Hispanic whites reported intercourse (Singh & Darroch, 1999). Boys tend to initiate intercourse earlier than girls: in 1999, 45 percent of 9th-grade boys but 33 percent of 9th-grade girls reported intercourse (CDC, 2000).

Historical Trends in Sexual Intercourse: Decreases in the age of pubertal onset over the twentieth century, combined with an increase in the age of marriage in recent decades have resulted in a span of over ten years between sexual maturity and marriage (Brooks-Gunn & Paikoff, 1997). This extended interval makes premarital sex likely. Historical data on premarital intercourse indicate that adolescent sexual activity increased during the twentieth century, especially for white females. By 1979, about half of white high school seniors of each gender reported having sex (Chilman, 1986). Although rates of sexual activity among teenagers appear to have leveled off, recent data show a continued trend towards earlier ages at first intercourse among adolescents who do initiate sexual activity. In 1995, 19 percent of teenage girls engaged in sex before age 15, almost double the proportion in 1988 (Child Trends, 2000).

Sexual Partners: Two-thirds of girls and half of boys aged 14–18 report having fewer than two sexual partners in their lifetime (CDC, 1992; cited in Santelli et al., 1998). However, 13 percent of high school girls and 19 percent of high school boys report having four or more lifetime partners (CDC, 2000). Among sexually active adolescents, older youth are more likely to have multiple partners: 21 percent of 12th-graders compared to 12 percent of 9th-graders reported four or more partners (Crockett, Raffaelli, & Moilanen in Blackwell Handbook of Adolescence (2003)2000). Thus, although most adolescents engage in serial monogamy, because their relationships are often short-lived, they may have several partners over time (Moore & Rosenthal, 1993).

The Prevalence of Sexual Coercion: Researchers have started to take a good look into the where, when and how of sexual coercion. They discovered that

sexual coercion leaps and bounds more frequently with college students than any other cohort because of the college lifestyle. Fun as it may be at times, the college lifestyle provides the perfect setting for sexual coercion to happen (Miller, Monson, & Norton, 1995).

Researchers found that both men and women are perpetrators and victims of sexual coercion. And shockingly, approximately 70% of college students surveyed reported they have been sexually coerced and 33% of college students surveyed admitted to having used sexually coercive behaviors against their partners. Of the college students who have been sexually coerced, roughly 70% stated they knew their perpetrators, further clarifying the perpetrators were either a boyfriend/girlfriend, a friend or an acquaintance. This indicates the vast majority of those who experienced victimization of sexual coercion knew their perpetrator. To make the prevalence statistics even scarier, in 59% of the instances, the victim had previously consented to sexual activity with their perpetrators, 40% of which consented on the day of the coercive incident (Miller, Monson, & Norton, 1995).

The sexual acts reported by victims of sexual coercion that were most frequently used, included kissing and vaginal intercourse. The tactics that perpetrators reported utilizing most frequently were alcohol and drugs, emotional manipulation, and lying. The perpetrators also claimed their main reason for committing sexual coercion was their extreme sexual arousal. These first-hand reports indicate that sexual coercion is not about power, but about sex (Miller, Monson, & Norton, 1995).

Not all sexual intercourse is voluntary, particularly for girls. Among 17–23-year-old female participants in the National Survey of Children, 7

percent had been forced to have sex against their will or raped at least once (Miller, Monson, & Norton, 1995). Similarly, the 1995 National Survey of Family Growth indicated that among 15–19-year-old girls who have had sex, 7 percent said their first intercourse was non voluntary and another 24 percent said it had been voluntary but unwanted. Rates of sexual coercion were especially high among girls who initiated sex before age 13: one-fifth said their first intercourse was non-voluntary and another half said it was voluntary but unwanted (SIECUS, 1997).

Research since the 1980s has yielded a wealth of data about certain aspects of adolescent sexual behavior, particularly intercourse. About two-thirds of US teens experience first sexual intercourse by 12th grade; thus, initiating intercourse is a normative experience for teenagers (SIECUS, 1997).

Studies on Child-rearing Practice

Coulshed and Orme (2006) found that adolescent females raised in households characterized by uninvolved and permissive parents, are likely to be involved in concurrent sexual relationships. Permissive parents are characterized by less demands (Kilmann, Carranza & Vendemia, 2006) and research indicates that their children have difficulties with self-control and demonstrate egocentric tendencies that can interfere with proper development of peer relationships as their parents tend to be irresponsible in instilling values and morals (Kopko, 2007).

As far back as 1993, Sharif found that in Ghana, parents encourage their daughters into premarital sex, appreciate to receiving gifts from their daughters' sexual partners and see nothing wrong when their daughters exchange sex for money. Consistent with this finding, in the urban, semi-urban

and rural areas of Dar es Salaam, Shinyanga, Iringa, Mbeya, and Tanzania, (Fehringer, Babalola, Kennedy, Kajula, Mbwambo, & Kerrigan, 2013) found that parents were involved in promoting sexual promiscuity among their daughters. Parents were reported to be silent when their daughters come home with money, food, clothes and other consumer goods, yet knowing that they were unemployed. In Malawi, the context within which money or resources are exchanged demonstrates the expression of traditional courting practices and the way love between two people is socially communicated (Poulin, 2007).

Because parents are laissez-faire, this may impact negatively on the cognitive, emotional and empathy developments of the adolescents which will in turn result in poor academic achievement and school involvement (Aunola, Stattin & Nurmi, 2000; Carlo, McGinley, Hayes, Batenhot & Wilkinson, 2007). On the other hand, uninvolved parents do not guide their children nor discipline them. They have “I don’t care attitude” and their adolescent females tend to display personalities which could be associated with poor educational performance, anti-social behavior, delinquency, self-confidence, and maladjustment (Louw & Louw, 2007). In the same view, in a South African study, Holborn and Eddy (2011) documented that owing to lack of proper guidance non- commitment from African parents or guardians, adolescent females become pregnant even before they complete their Grade 12.

According to Nicholas (2008), adolescent females may learn behavioral patterns from outside world. During the transition adolescents are easily influenced through beliefs, attitudes and experiences of people within the environmental settings (Louw, Van Ede & Louw, 2009). Drawing from

Bandura's social learning theory, through observing and imitating significant others, adolescent females may find it easy to engage in sexual promiscuity. Through imitation and vicarious learning, peer influence and the role played by mass-media, could outweigh parental influence especially when parents are not exemplary in their conduct (Ryckman, 2008; Schultz & Schultz, 2013). For example, when parents are involved in extramarital affairs, adolescent females' locus of control tends to be externalized and they are likely to experience confusion regarding healthy sexual practices (Brooks, 2006).

This finding accords with the qualitative study by Irin (2014) among adolescent females in Kenya, who left school prematurely to be in multiple sexual relationships with older men because their own mothers were prostitutes.

The work by Erik Erikson highlights that identity confusion during adolescence is likely to engulf the mind of girls about the values to uphold to buffer against risk factors (substance abuse, multiple partners and unwanted pregnancy) when parents do not provide necessary coaching (Bee & Boyd, 2003).

Hence they become easily influenced by their peers to explore unhealthy sexual practices and conform to the expectations of peers, which make them to be drug abusers and leave school prematurely (Nicholas, 2008).

Many adults are uncomfortable with the idea of teen sexuality, and prefer to remain in ignorance or denial. But in the United States, 46 percent of all high school age students, and 62 percent of high school seniors, have had sexual intercourse; almost nine million teens have already had sex (Martinez, Copen, & Abma, 2011).

Young people begin to have sex at about the same age in most industrialized countries. Adolescent sexual development is important for the process of identity formation and the establishment of romantic and social relationships among peers (Guilamo-Ramos, & Bouris, 2009). Since 1991, there have been declines among high schoolers in the percentages of students who ever had sexual intercourse, who had sexual intercourse for the first time before age 13, who have had sexual intercourse with four or more persons in their lifetime, and who report being currently sexually active (Gavin, McKay, Brown, Lola, Shrinidhi, 2008).

The pregnancy rate for U.S. teens aged 15-19 reached 67.8 pregnancies per 1000 young women: its lowest point in more than 30 years, down 42 percent from its 1990 peak of 116.9 per thousand (Kost & Henshaw, 2012). The birth rate for U.S. teens aged 15-19 reached its lowest point in 2009 (39.1 births per thousand young women) in nearly seven decades; the 2009 rate was 37 percent below its most recent peak in 1991 (61.8 per 1000) (Martin, Hamilton, & Ventura, 2011).

Widespread concerns about adolescents' exposure to sexually explicit images sent by smart phone or internet commonly known as "sexting" — appear to be based on exaggerated reports. A national survey of 1,560 minors aged 10-17 revealed that roughly 7 percent had received "nude or nearly nude" pictures or videos, and only about 2 percent had appeared in or created such images. Females were more likely to create or appear in such images, and over half of such images were generated between senders and recipients as part of a romantic relationship. Few minors reported distributing these images widely (Mitchell, Finkelhor, & Jones, 2011).

According to the National Research Council and Institute of Medicine, in the U.S. today, "Most adolescents are thriving, but many engage in risky behavior, develop unhealthful habits, and experience physical and mental health conditions that can jeopardize their immediate health and contribute to poor health in adulthood (National Research Council and Institute of Medicine, 2009).

Thirty-nine percent of all sexually active U.S. high school students did not use a condom at last intercourse. Six percent of all U.S. high school students had sexual intercourse before age 13. Almost 14 percent of all U.S. high school students have had sexual intercourse with 4 or more partners over their lifetimes (Surveillance Summaries, 2010). Data are limited on sexual behaviors of middle school students. Based on an average of reports from 10 states and 6 large local school districts, 19.8 percent of middle scholars have ever had sexual intercourse (Surveillance Summaries, 2010).

Despite recent declines, birth rates to teens in the U.S. remain as much as eight times higher than in other developed countries. In 2009 approximately four percent (410,000) of females aged 15-19 gave birth (Martin, Hamilton, & Ventura, 2011).

The abortion rate for U.S. teen females aged 15-19 in 2008 (the most recent year for which national data are available) was 14.3 per thousand females of that age, and this age group accounted for 16.2 percent of all abortions (Pazol, Zane, & Parker, 2011). New HIV infections increased by 21 percent among U.S. adolescents and young adults aged 13-29, from 15,600 in 2006 to 18,800 in 2009 (the most recent time period for which data is available); within this age group, new HIV infections increased 48 percent

among Black/African American males who have sex with other males, from 4,400 to 6,500 (Prejean, Song, & Hernandez, 2011).

A 2004 national representative survey in Ghana indicated that nearly 75% of sexually active adolescent girls and 33% of sexually active boys reported receiving money or gifts in exchange for sex (Moore, Biddlecom, & Zulu, 2007) which is a usual component of “boy-girl-friend” relationships in Ghana and other African countries. Irrespective of the risks associated with being an adolescent, talking about sex and sexual activities is not openly encouraged in Africa probably because sex is considered a sacred adult affair that is enshrined in secrecy.

According to (Baku, Adanu, & Adatara, 2017), in Ghana, cultural taboos prevented education of adolescents on sexuality. Among the Akans, for instance it was a taboo to talk about sexual issues with a child because they believed that the child could be “spoilt”. Even if the child wanted to find out certain things about sex, they would tell the child that he/she was not matured enough to know about such issues. Due to the taboos associated with sexuality education, some parts of the body could not be mentioned because it was considered a taboo to do so. For that matter, they expressed such things using euphemisms. For example, they prefer to call the penis “manhood”. Some sexual discussions only took place with the girl after menarche. No education is given to boys on their sexuality (Baku, Adanu, & Adatara, 2017).

Ghanaian culture considers sexuality as sacred; that is, it is something that should not be discussed with children and adolescents. In Ghana, teaching of sex education to children is generally seen as introducing them to early sexual intercourse and, subsequently, pregnancies. The understanding and

tolerance for sex education among Ghanaian parents are nonexistent. Culture, thus, accounts for this intolerance for sex education (Owusu, 2012).

However, there is some evidence of parent-adolescent sexuality discussion in some Ghanaian homes. A nationally representative data from Ghana showed adolescent communication with family and nonfamily members (Kumi-Kyereme, Awusabo-Asare, Biddlecom, & Tanle, 2007).

Studies on adolescent Sexuality and Gender

Research on sexual behaviors consistently finds differences by gender. Males are more likely to have first sexual intercourse at a younger age, more frequent sexual intercourse, and an overall larger number of sex partners (Petersen & Hyde, 2010). In contrast, females have first sexual intercourse at an older age and a lower reported number of sex partners (Christopher & Sprecher, 2000).

This research highlights the stark gender differences in sexual behavior beginning in adolescence. As an added complexity in understanding adolescent sexual outcomes research finds that females who have early onset of sexual experience are more likely to experience casual sex. Manning et al. (2006) found that 88% of high school males and 84% of high school females expressed attitudes supportive of premarital sex. Males report more permissive attitudes towards casual sex and extramarital sex compared to females. They also report lower levels of anxiety, fear, or guilt associated with premarital sexual relations (Petersen & Hyde, 2010).

However, despite general sexual attitudes being more permissive, males are more likely to reinforce the sexual double standard identifying sexually experienced females as less desirable. This double standard

negatively impacts females and often times they are at risk of being negatively labeled due to their casual sex experiences. Females perceive strong norms that sexual behavior should occur within the context of romantic relationships (Collins 2009; Oliver & Hyde, 1993).

Research indicates that gender differences in regards to sexual attitudes may stem from early experiences and learned gender roles. Females are socialized to be more concerned with interpersonal relationships and relationship status. Thus, females are more conservative in their sexual attitudes preferring the intercourse to take place in context of a committed relationship versus a non-committed setting. Women were more likely to be motivated to have sexual intercourse because of emotional value for their partner and were more likely to comply with unwanted sexual acts as a form of relationship maintenance (Christopher & Sprecher, 2000). This research highlights the importance of examining adolescent sexual attitudes. Although both males and females participate in non-committed sexual relationships the motivations for the sexual act may drastically differ. Gender differences in sexual behavior are important to address as females are more negatively impacted by casual sex experience in comparison to males. Females are socialized to view sex as something that should occur in a committed relationship and their attitudes towards sex reflecting this socialization found that females expect and desire sexual relations to take place in committed relationships, whereas males are more accepting of non-committed sexual relations. In a survey on forming romantic relationships female respondents indicated more relationship interest following casual sex in comparison to males, 48% of women and 36% of men reported desiring a relationship.

Previous research has shown men have more permissive attitudes towards sex (Chara & Kuennen 1994) and desire more sex partners. During their lifetime women reported they would prefer to have five sex partners in comparison to men's preference of 18. Males were also found to be more likely to agree to casual sex with a stranger than women.

Anderson's (1989) research highlighted the different sex codes for inner city youth, specifically black male adolescents. Anderson (1989) argued that lack of employment and a harsh economic environment contributed to black adolescents seeking to establish their manhood in other ways. Due to their inability to support a family, Anderson (1989) states casual sex offered an alternative route to manhood by proving their manliness by having sex with and potentially impregnating multiple females. Giordano et al. (2009) tested Anderson's "player hypothesis" and found that black male adolescents are more likely to be described as players, a label emphasizing the casual nature of sexual experience and large number of sexual partners. Their research also found that adolescents who are identified as players are more likely to engage in more sexual risk taking behavior regardless of race (Giordano et al. 2009).

Conceptual Framework for the Study

Miles and Huberman (1994) define a conceptual framework as a visual or written product, one that "explains, either graphically or in narrative form, the main things to be studied; the key factors, concepts, or variables and the presumed relationships among them". It is primarily a conception or model of what is out there that a researcher plans to study.

In this study, the identified variables were child-rearing practices, peer pressure and gender which are the independent variables, and sexual

adventurism which is the dependent variable. The conceptual framework depicts the relationship between the independent variables and the dependent variables and how their relationships affect one another. In this study, they include the relationship between Child-rearing practices and adolescents' sexual adventurism; the relationship between peer pressure and adolescents' sexual adventurism; and the relationship between gender and sexual adventurism. It also depicts the effect of Child-rearing practices, peer pressure and gender on adolescents' sexual adventurism, and the role of Child-rearing practices and gender play in the relation between peer pressure and adolescents' sexual adventurism. That is whether the introduction of Child-rearing practices and gender could strengthen or weaken the relationship between peer pressure and adolescents' sexual adventurism.

Conceptual Framework

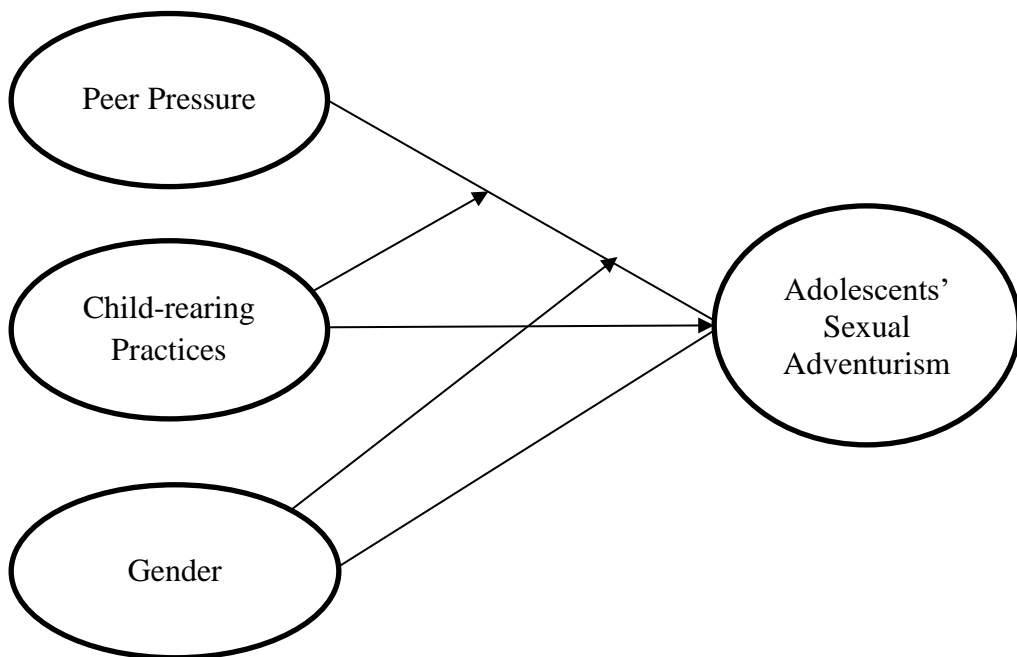


Figure 1: A conceptual framework showing the relationships among child-rearing practices, peer pressure, gender, and adolescents' sexual adventurism.

Summary of Key Issues in Literature Review

From the empirical review above, it can be deduced that boys and girls with ages ranging from 14-18 years showed that with the onset of puberty, the feelings and emotions, which the adolescents go through are lack of attention, lack of confidence in themselves; loneliness, and stressed because of the confusion and changes occur in their bodies (Misra, 2006). Most United States adolescents engage in physically intimate behavior, even if they do not have intercourse (Miller et al., 1997). Black adolescents showed no predictable sequence of sexual behaviors, and many reported intercourse prior to heavy petting thus, the timing and sequencing of sexual behaviors appear to differ for blacks and whites (Smith & Udry, 1985).

Adolescent females raised in households characterized by uninvolved and permissive parents, are likely to be involved in concurrent sexual relationships (Coulshed & Orme 2006). Uninvolved parents do not guide their children nor discipline them. They have “I don’t care attitude” (Louw & Louw, 2007).

Males are more likely to have first sexual intercourse at a younger age, more frequent sexual intercourse, and an overall larger number of sex partners (Petersen & Hyde, 2010). In contrast, females have first sexual intercourse at an older age and a lower reported number of sex partners (Christopher & Sprecher, 2000).

There seems to be a literature gap with respect to the fact that: (1) Sexual adventurousness goes beyond sexual activities by including sexual attitudes, intentions, and sexual experimentation, (2) none of these studies examined the role of gender even though gender has been found to be

associated with sexual behaviours, (3) there is an uncertainty as to whether parenting moderates the relationship between peer pressure and sexual behaviours of adolescents.

It is of essence again to state that large proportions of these previous studies were conducted in foreign countries- that is, outside Ghana. Therefore, their findings are not likely to be directly applicable in the context of Ghana. This is because child- rearing practices and levels of peer pressure are likely to differ between Ghana and the international countries due to discrepancies in culture, values and beliefs. With regards to context, it appears little is known about how child - rearing practices and peer pressure influence sexual behaviours.

CHAPTER THREE

RESEARCH METHODS

This chapter presents the procedures and techniques used in collecting data for the research. The chapter begins with a description of the research design of the study. It also examines the area of study, population, sample and sampling procedures, data collection instrumentation as well as reliability and validity issues. Lastly, procedures for data collection and data analysis are discussed.

Research Design

Cooper and Schindler (2002) define research design as the path researchers follow in carrying out their study. The research design spells out the basic strategies that the researcher adopts to develop information that is accurate and interpretable. Bless and Higson-Smith (2000) acknowledge that every research work requires a research design that is carefully tailored to meet the exact needs of the researcher as well as the problem.

Descriptive Survey design was adopted for this study. This design was chosen because it lends itself to gathering information from a larger population, and providing descriptive and inferential information on the main variables of the study. It also helps to obtain information that concerns the current status of phenomena. Fraenkel and Wallen (2006) have asserted that the purpose of descriptive survey is to observe, describe and document aspects of a phenomenon as it naturally occurs. Descriptive survey obtains answers

from a large group of people through the use of a set of carefully designed and administered questionnaire (Fraenkel & Wallen, 2006).

One advantage of the descriptive design is that it often employs the method of randomization so that errors may be estimated when population characteristics are inferred from observations of samples. Another advantage is that it helps researchers to understand phenomena more completely and identify the relationships between variables to enable the researcher make predictions. However, one disadvantage is that it is susceptible to distortions through the introduction of biases in the measuring instrument.

Despite this disadvantage, the descriptive design was used for this study since its advantages outweigh the disadvantages. Again, the descriptive design was used due to the fact that the study meets the characteristics of that design type. Adolescent sexuality and sexual adventurousness and its relationship with peer pressure, child-rearing practices and gender are already in existence and the researcher is concerned with the relationships among these existing variables. The researcher is also concerned with the description of the relationships among these variables of interest.

Additionally, quantitative approach was utilised in the study. Although qualitative approach provides detailed and comprehensive description of phenomenon, the quantitative approach was employed to statistically examine the influence of child-rearing practices, peer pressure, and gender on adolescents' sexual adventurousness through some standardised means. The aim, therefore, is to generalise the findings obtained from the sampled adolescents to the entire adolescents' population (Creswell, 2014).

Area of the Study

The area of the study covered all basic schools in all the three geographical zones in Ghana namely, the Northern, Middle and Southern Zones. The respondents comprised adolescents in the basic schools in the country.

The selected schools have similar characteristics as the other schools in the country. Pupils in these schools have friends who they communicate and play with, and as well learn with. Most, if not all, of these pupils are under the guidance of their parents or guardian, irrespective of the level of care giving. These individuals are mostly around a particular stage which is heavily influenced by our culture.

It is perceived that the main characteristics of these pupils include high incidence of sexual urges, sexual fantasies, and sexual relations. These often lead to teenage pregnancy, abortions, sexual abuse, etc. According to WHO (2009), adolescence is a critical period of development with regard to self-consciousness, gender, sexuality, exploration, risk taking and the desire for experimentation, especially with sex, drugs and alcohol. Sex is a natural phenomenon and the sexual urge is difficult to control. As a result of this, when there are factors like peer pressure, lack of parental control, and ineffective child upbringing, it is difficult to determine the extent to which these adolescents will engage in sexual adventure.

Due to this, it was important to find out the extent to which adolescents engage in sexual adventurism, and the factors which urge them into going into it. Have peer pressure they experience, the type of child-rearing practices they receive and their gender have any influence on their quest to be sexually

adventurous? There was the need to conduct this type of study using adolescents.

Population

The target population was all Junior High School students in Ghana. Accessible population was all public Junior High School students between the ages of 12-19 years selected from the Northern, Ashanti and Central regions of Ghana, of which the total number was 2,492.

At the time of the study the country had ten regions. The country was divided into three geographical zones namely, Northern, Middle and Southern Zones. The Northern zone is made up of three regions: Northern Region, Upper East Region and Upper West Region. The Middle zone also comprises three regions: Brong Ahafo Region, Ashanti Region, and Eastern Region. The Southern zone covers four regions: Central Region, Western Region, Greater Accra Region and Volta Region. The study was targeted at nine schools (three from each geographical zone). The total number of students within these nine schools was 2,492.

Sampling Procedure

A multistage approach was used to select the sample. The multi-stage was as follows: stratified sampling (1st stage), simple random sampling (2nd Stage), simple random sampling (3rd stage) and systematic sampling (4th stage) (Table 1). According to Gonzalez and Miles (2001), in multi-stage sampling, sample selection is carried out in stages, using smaller and smaller sampling units at each stage. It takes the nested structure of the population or an area into account. The target population is divided into naturally-occurring clusters

or non-overlapping groups (i.e. strata). From these clusters and strata, a simple random sampling was used to select participants.

Table 1- *Stages in the Sampling Procedure*

Stages	Sampling Procedure	Rationale
1 st stage	Stratified random sampling	This was to enable the investigator sample from each zone. Three regions were selected afterwards.
2 nd stage	Simple random sampling	Selecting three Metropolis/District, each from a region. All Metropolis/District had equal chance of being selected
3 rd stage	Simple random sampling	Selection of three schools from each Metropolis/District. All schools had equal chance of being selected
4 th stage	Systematic sampling	Used to roll-in participants from each school. Participants were given equal chance of being part of the study

In adopting multi stage sampling, stratified sampling was used in the first place. To Gonzalez and Miles (2001), stratified sampling is useful when we want to improve the precision in a heterogeneous target population. In other words, this sampling approach is useful when we want to study subpopulations (male/female, geographic regions, racial groups, etc.). This will produce reliable estimates for the subpopulations and also improve the sampling efficiency and thereby improving the reliability of overall estimates of the target population. It will also ensure that different parts of the population are appropriately represented in the sample. The study used the stratified national zone due to the fact that subpopulations such as geographic regions were considered and also to ensure that different parts of the

population are appropriately represented in the sample. These were taken into consideration for generalization purposes. District Assembly in Ghana are Metropolitan, Municipality or District according to Act 462 of the 1992 Constitution of Ghana.

The study employed simple random sampling method to select a Metropolis/Municipality/District in each of the three regions selected from the three zones. The random selection came up with the Tamale which is a metropolis in the Northern region, Atwima Nwabiagya which is a district in Ashanti region, and Cape Coast which is a municipality in Central Region. Basic schools within these metropolis/municipality/district were considered for the study. Participants in the metropolis, district and the municipality had similar characteristics based on their developmental stage irrespective of the type of District Assembly they are located.

Using the three geographical zones as strata (i.e., Northern, Middle and Southern zones), a region was selected from each of the three zones by using the simple random sampling technique. Precisely the lottery method was used in selecting the regions in each zone. Under this method, all the items of the population were numbered or named on an identical paper slips and then these slips were mixed in a container. Here, the selection was purely based on chance and every item had an equal chance of getting selected. This was done by putting all the regions in each zones into a container and after carefully shaking it, a region was randomly picked by putting a hand into the container. This was done for the other two remaining zones. The main benefit of the simple random sample was that each member of the population had an equal chance of being chosen for the study. This means that it guarantees that the

sample chosen is representative of the population and that the sample is selected in an unbiased way.

The next stage was also a simple random sampling stage. After the lottery method was used at the stage to select the three regions, the Northern Region, Ashanti Region and the Central Region were selected. Each region selected has a number of districts, metropolitans, and municipalities. Using the lottery method again, one metropolis or district was selected from each region.

In the Northern Region, the Tamale metropolis was selected, in the Ashanti Region, Atwima Nwabiagya district was selected, and in the Central Region, Cape Coast metropolis was selected. In each of the three metropolises selected, basic schools in these metropolises are in circuit basis. In order to get a circuit of school in each metropolis, the lottery method was again employed to select a circuit in each metropolis.

The Tamale metropolis has 15 circuits and out of that, the Changli Circuit was selected. The Changli Circuit has six public Junior High Schools and applying the lottery method, three schools were selected. The selected schools are Nuyira Islamic Junior High School with population of 287 pupils, Sarkiya Islamic Junior High School with population of 205 pupils, and Methodist Experimental Junior High School with population of 215 pupils.

In the Middle Zone, Ashanti Region was selected and the Atwima Nwabiagya District was picked. This district has 10 circuits of Junior High Schools. Applying the lottery method, the Abuakwa Circuit was selected and again 3 Junior High Schools from the circuit was selected. The schools selected were Abuakwa D/A Junior High School 'A' with population of 689

pupils, Abuakwa D/A Junior High School ‘B’ has population of 548 pupils, and Abuakwa D/A Junior High School ‘D’ with population of 271 pupils.

From the Southern Zone, Central Region was selected and the Cape Coast Metropolis was picked, this Metropolis has 6 circuits of schools. Applying the lottery method, the Cape Coast Circuit was selected and three basic schools were selected. The selected schools were, Mensah Sarbah Junior High School with population 70 pupils, St. Paul Catholic Junior High School with population of 132 pupils, and Amanful Junior High School with population of 75 pupils. Table 2 shows the total number of pupils in each school selected.

Table 2- *Population Distributions (N=2,492)*

Zones	Region	Metropolis	Circuit	Schools	No. of Pupils
Northern	Northern	Tamale	Changli	Nujira	287
				Islamic JHS	
				Sarkiya	205
				Islamic JHS	
				Methodist	215
				Experimental JHS	
<i>Sub-total I</i>					<i>707</i>
Middle	Ashanti	Atwima Nwabiagya	Abuakwa	Abuakwa	689
				D/A JHS.	
				‘A’	
				Abuakwa	548
				D/A JHS.	
				‘B’	
				Abuakwa	271
				D/A JHS.	
				‘D’	
<i>Sub-total II</i>					<i>1508</i>
Southern	Central	Cape Coast	Cape Coast	Mensah	70
				Sarbah JHS	
				St. Paul’s	132
				Catholic JHS	
				Amanful	75
				JHS	
<i>Sub-total III</i>					<i>277</i>
Grand Total					2,492

In each school, systematic random sampling technique was used to sample the respondents to participate in the study. The list of the students from Form 1-3 was collected in each school. The names of the pupils were arranged alphabetically to ensure that all the students had equal probability of being selected. In addressing the issues of gender, the selected schools' attendance registers which had separate list of males and females in each class was used in rolling in participants for the study. The number of students to select from each school was based on their population. However, before this was done the total sample size was estimated.

According to Godwin (2010), a sample is a subset of a population that is used to represent the entire group as a whole. According to Bartlett, Kotrlik, and Higgins (2001), sample size determination is the act of choosing the number of observations or replicates to include in a statistical sample. The sample size is an important feature of any empirical study in which the goal is to make inferences about a population from a sample.

The sample was determined based on the estimate provided by Creswell (2012). Creswell has stated that for survey research, a minimum sample of 350 should be used. According to Creswell, this minimum sample is based on the size needed for statistical procedures that ensure that the researcher uses a good estimate of the characteristics of the population. Glenn (1992), however, asserted that it is necessary for adjustment to be made in sample sizes in cases where the sample consists of several subgroups. Therefore, Glenn recommended 50% increase in the sample in such situations. Based on Glenn's observation, the researcher increased the sample size by 50%. This led to a sample size of 525 to be used for this study. This is

important as an increase in sample size improves the generalisability of the findings from the sample to the population. Table 3 provides the details of the sampling distribution.

Table 3- *Sampling Distribution (n=525)*

Schools	Sample to be selected	Interval (n th)	Where to start
Nujira Islamic JHS	61	4	2
Sarkiya Islamic JHS	43	4	1
Methodist Experimental JHS	45	4	2
Abuakwa D/A JHS. 'A'	145	4	4
Abuakwa D/A JHS. 'B'	115	4	3
Abuakwa D/A JHS. 'D'	57	4	2
Mensah Sarbah JHS	15	4	1
St. Paul's Catholic JHS	28	4	3
Amanful JHS	16	4	3
Total	525	-	-

Table 3 shows the result of a systematic sampling procedure performed to roll-in participants from each school. Description in Table 3 provides the sample size selected from each school, at what interval and where on the list the sampling started in each school.

In Nujira Islamic JHS, for example, 61 pupils were sampled with an interval of 4. The selection in each of the schools was done with an interval of 4. For each of the schools, a list was first generated and using an interval of 4, the sample was taken using different starting point. Abuakwa D/A JHS 'A'

had the highest sample due to the fact that they had the highest population proportion. Only 15 respondents were sampled from Mensah Sarbah JHS. A sample of 43 was taken from Sarkiya Islamic JHS, 45 from Methodist Experimental JHS, 115 from Abuakwa D/A JHS 'B', 57 from Abuakwa D/A JHS 'D', 28 from St. Paul's Catholic JHS, and 16 from Amanful JHS.

Data Collection Instrument

The main instrument for the data collection was a questionnaire. According to Crawford (1990), a well-designed questionnaire is essential to a successful survey. A good questionnaire is one which helps directly achieve the research objectives, provides complete and accurate information; is easy for both interviewers and respondents to complete, and is so designed as to make sound analysis and interpretation possible and is brief.

Questionnaire was used for this study because it is less costly and can be administered to a large number of people with the shortest possible time (Creswell, 2012). In addition, the researcher does not necessarily need to be present during data collection but can train other people to do the questionnaire administration (Newman, 2007). In this study, for example, the researcher plans to bring on board some colleagues to help in the administration of the instrument.

Creswell (2012) was of the view that the self-report nature of questionnaire increases the risks of respondents giving false information which in turn affects the validity of the results. Efforts, however, will be made by the researcher to assure respondents of confidentiality and anonymity of data gathered, and also to seek for their consent, even though participation would be voluntary. By ensuring that, it is expected that respondents would, at

best, provide accurate responses to the items on the questionnaire (Neuman, 2007).

The questionnaire comprised of a number of standardised scales which were of interest to the researcher. The first part, however, comprised the demographic characteristics of respondents which included gender, age of respondents, and respondent's class in school. In measuring the child-rearing practices, standardised scale called Parental Rearing Style Questionnaire for Adolescents (PRSQ-A), was adapted from Gerlsma, Arrindell, van der Veen, and Emmelkamp (1991). For sexual adventurousness, a standardised scale called Youth Sexual Intention Questionnaire (YSI-Q) and developed by Muhammad, Shamsuddin, Amin, Omar, & Thuramy (2017) was used. For peer pressure, a scale was developed by the researcher of this present study. The researcher named the scale "Peer Pressure Scale (PPS)".

Parental Rearing Style Questionnaire for Adolescents (PRSQ-A)

The parental rearing style questionnaire for adolescents was developed by Gerlsma, Arrindell, van der Veen, and Emmelkamp in 1991. The authors developed this instrument based on the weaknesses in Engna Minnen Beträffande Uppfostran questionnaire (EMBU), a self-report measure intended assess adults' recollection of their parents' childbearing behaviour. The EMBU was developed by Perris, Jacobsson, Lindstrijm, Von Knorring and Perris (1980). In the context of internal validity, however, Gerlsma et al. (1991) argued that memory is notoriously faulty and that data based on memories should be interpreted cautiously and considered generally reconstructive rather than veridical. The problems of validity raised whenever retrospective data are concerned, can at least in part, be counteracted in a

longitudinal research-design. Assessment of childrens' current perceptions of parenting while living at home, and comparing these with their memories after having left home would provide an important indication of the validity of retrospective accounts of parental rearing styles, e.g. EMBU data.

Gerlsma et al. (1991) argued again from two dimensions: it is unclear whether the "readability" (i.e. the level of difficulty with which an inventory can be comfortably read with adequate comprehension by readers at a particular grade level) of the adult version is acceptable for adolescents (e.g., Andrasik, Heimberg, Edlund & Blankenberg, 1981), on the relevance of this point). Second, it cannot be assumed that the dimensional framework obtained with one type of sample can be applied to another type; rather than be taken for granted, this should be empirically demonstrated (e.g. Eysenck, 1973, p. 130).

In the development and validation of the PRSQ-A, healthy (i.e. non-patient) volunteers were recruited from 30 (out of a pool of 90) different primary and secondary schools located in five Dutch urban communities. Only pupils in the 8th grade of primary school or first year of secondary school were asked to participate. The final sample comprised 1153 children (545 boys and 569 girls; data on sex were missing in 39 cases) varying in age from 10 to 15 years with mean age 12.4 (S.D. 0.76). Most (84.3%) children indicated they were living with both parents; 10% lived with mother only and 1% with father only; 12% of the parents were divorced. The questionnaires, together with a background demographic sheet, were group-administered during class hours.

Factor analysis of the original adult form of the EMBU, using data of a large sample of non-institutionalized phobics (N = 841) revealed four first-

order factors: Rejection, Emotional Warmth, Overprotection, and Favouring Subject. Of the 81 items constituting the questionnaire, 64 were scaled across these factors, the remaining were unscaled (Arrindell et al., 1983). After critical analysis, 56 items were modified and maintained after the analyses and ultimately making up the instrument. To explore the convergent validity of the PRSQ-A, the Parental Bonding Instrument (PBI) was also administered. The 25-item PBI measures the dimensions of Care and Overprotection, for which extensive reliability and validity data have been reported (e.g. Parker, 1983, 1984).

The internal consistencies of the different scales were determined with Cronbach's alpha coefficient. To ascertain the relative independence of the PRSQ-A scales with respect to each other, the interscale correlations were determined. To examine the convergent validity of the PRSQ-A, correlations between its scales and homologous PBI scales were computed. Should the original factor structure of the adult form of the EMBU be retrieved, it was expected that the EMBU Emotional Warmth and Rejection scales would be substantially related to the PBI Care scale. Since Arrindell et al. (1983) found a moderately high positive correlation between the EMBU Overprotection and Rejection scales, a similar relationship was expected between EMBU-A Rejection and PBI Protection. In view of these expectations, correlations were tested one-tailed.

Following confirmatory analysis, 54 items of the original item-pool of 81 were maintained, i.e. 19 for Rejection, 19 for Emotional Warmth, 11 for Overprotection and 5 for Favouring Subject. The alpha coefficients for the Rejection and Emotional Warmth scales were high ($\alpha = 0.86$ and $\alpha = 0.88$

respectively for both fathers and mothers). Compared to these values, the alpha coefficient for Overprotection turned out to be smaller ($\alpha = 0.62$ for father and $\alpha = 0.60$ for mother). The alpha coefficients for Favouring Subject were moderate (i.e. $\alpha = 0.57$ for fathers, and $\alpha = 0.58$ for mothers). This may be attributable to the small number of items which makes up this scale ($i = 5$); the scale had acceptable interitem-correlations (mean $r = 0.25$ for both father and mother).

The instrument after its development has been used by several authors in conducting studies in several jurisdictions (e.g., Cheng & Furnham, 2004; Rai, Pandey, & Kumar, 2009). Rai et al. (2009), for example, examined the perceived parental rearing style and personality among Khasi adolescents. In quantifying their variables, the PRSQ-A was used to measure the perceived parenting rearing style of the respective adolescence.

Adaptation of PRSQ-A

As earlier indicated the PRSQ-A instrument was adapted for the conduct of this study. Out of the four hypothetical dimensions as stipulated by Gerlsma et al. (1991), three of them were adapted. The dimension named “Favouring subject” was excluded based on three reasons: (a) this dimension measured the extent to which parents discriminated with among their children (e.g., Do you feel that your father/mother loves you more than your brother(s) and sister(s)?) The items under this dimension (Favouring subject) are not major components of childrearing practices of parents and thus, do not directly feature in the study, (b) again, in real practice parents hardly discriminate among their children (c) the dimensions yielded a low reliability coefficient (i.e. $\alpha = 0.57$ for fathers, and $\alpha = 0.58$ for mothers) even though it was

accepted by the authors due to the inter-item correlations. However, scholars have recommended that scales with low reliability coefficient should be rejected (DeVellis, 2003; Pallant, 2010).

The three remaining dimensions were rejection, emotional warmth and overprotection. The rejection and overprotection scales were renamed as discipline, autonomy and monitoring. A critical look at the “rejection” dimension of the PRSQ-A, shows that virtually, all the items were issues based on how parents discipline their children. Also, the name “rejection” looks as if the scale measures rejection. In actual sense, the scale measures the extent to which children are disciplined by their parents hence, the need to change the name from “rejection” to “discipline”. Similarly, the “overprotection” scale was renamed autonomy/monitoring. This was necessary because the word “overprotection” is once again sounds so negative. The researcher believes that the items under the scale (overprotection) measure more of autonomy/monitoring and less of overprotection. It is important to note that the renaming the scales do not have any impact on the items of the scale and the validity of the response as well.

Whereas the original instrument had 54-items (49-items excluding the “Favouring subject” scale), the final form of the scale, as used in this study, had 32-items with a four point Likert scale (Strongly disagree, disagree, agree, strongly agree). This suggests that some of the items were eliminated. The “discipline” scale had 10-items, emotional warmth scale had 12-items and autonomy/monitoring had 10-items.

Some items in the original scale were excluded because it did not measure the construct of interest. Items like “Would your father/mother like

you to be different?”, “Does your father/mother tell you off when there are other people present?”, “Does your father/mother ever strike you?”, “Does your father/mother ever treat you in a way that makes you feel small?” and “Does your father/mother think that you have to try and go far in the world?” were unclear and did not clearly communicate what the scale intends to communicate. Other items were also modified in structure to communicate clearly to the respondents. For each scale, there was a mixture of positive and negative questions. This is to ensure that the respondents read and respond well to the instrument.

Youth Sexual Intention Questionnaire (YSI-Q)

The YSI-Q was developed by Muhammad, Shamsuddin, Amin, Omar, and Thurasamy (2017) in Malaysia. The instrument was developed based on the Theory of Planned Behaviour which posits that individual behaviour is determined by his or her personal intention on performing a particular behaviour. The items were also constructed based on literature reviews, expert opinions and in-depth discussions with youths. Initially, 25 items were constructed and later remained 20 items after the validation process. The respondents were requested to give their answers for each item using a 4-point Likert-type scale of 1 (strongly disagree), 2 (disagree), 3 (agree) and 4 (strongly agree). The midpoint neutral answer was avoided in this questionnaire in order to minimise response bias. Midpoint responses are frequently chosen by respondents because they are indecisive, reluctant to answer, or the question does not apply to them (Raaijmakers, 2000). The four point responses have been shown to be optimal for youths (Borgers, Hox, & Sikkel, 2004). Using the Theory of Planned Behaviour as the framework, the

YSI-Q was developed to measure four constructs: permissive attitude towards sexual activity, perceived social norms, perceived self-efficacy and sexual intention. All of the constructs reflected the same behaviour which was premarital sexual activity (Ajzen, 2006).

The validity of YSI-Q was assessed using content validity, face validity, exploratory factor analysis (EFA), reliability analysis and confirmatory factor analysis (CFA). For content validity, a panel of experts that included an Adolescent Psychiatrist, a Family Medicine Consultant who specialised in adolescent health, a Community Health Physician and a Clinical Psychologist reviewed and revised the items. These content experts were asked to assess the appropriateness of items for the respective constructs (DeVon, Block, Moyle-Wright, Ernst, Hayden, & Lazzara, 2007). Face validity was used to review grammar, syntax, organisation and appropriateness of the questionnaire (DeVon, Block, Moyle-Wright, Ernst, Hayden, & Lazzara, 2007). This was done by three college students, two females and one male, on separate occasions. These students were different from the group of students who were involved in subsequent analyses. They were requested to give their opinion on the meaning of the items and to suggest suitable phrases to match their age specific lingo if there was any problem with the items.

Data for subsequent factor analysis was extracted from a larger study (N=1026) on Youth Sexual Intention and Activity among college students in Malaysia. The students were randomly selected from twelve colleges in Klang Valley, Malaysia and aged between 18 and 22 years. Married students and students who did not give their consent were excluded from this study. From the data set, 150 samples were randomly selected for exploratory factor

analysis (EFA) and another 200 samples for confirmatory factor analysis (CFA). The two groups of samples were independent, whereby 150 samples were selected first and followed by the selection of the 200 samples from the remaining 876 samples. These sample sizes met the minimum requirement of five samples per item for the EFA (Henson & Roberts, 2006) and of sufficient size for the CFA with a theoretical model containing four constructs (Hair, Black, Babin, & Anderson, 2010).

Exploratory factor analysis (EFA) was performed on the first independent 150 samples. Using SPSS, factor analysis began with a decision on the number of factors to be extracted based on an eigenvalue of more than 1, scree plot and parallel analysis. The use of multiple criteria, including parallel analysis, was suggested as an optimal approach in determining the number of factors for extraction (Henson & Roberts, 2006). Subsequently, factor analysis was run using principal axis factoring with promax rotation. Items with a factor loading of less than 0.6 or incorrectly placed based on their theoretical meaning were removed from the questionnaire (Matsunaga, 2010). This was followed by the reliability analysis using Cronbach alpha coefficients for each construct that were established prior to the assessment of construct validity (Hair, Black, Babin, & Anderson, 2010).

Confirmatory factor analysis (CFA) was the final part of the validation process, using Analysis of Moment Structure (AMOS) to support the measurement model. This was done on the second independent group of 200 samples. A good model fit was indicated by these indices: the ratio of chi-square to degree of freedom (χ^2/df) <5.0, root mean square error of approximation (RMSEA) \leq 0.08, comparative fit index (CFI) >0.9, Tucker

Lewis Index (TLI) >0.9 , and $p >0.05$ for the chi-square test (Hair, Black, Babin, & Anderson, 2010). Convergent validity reflects the degree of items in each construct, is interconnected by matching their theoretical connection and was based on three criteria: factor loadings >0.5 , average variance extracted (AVE) for each construct >0.5 and composite reliability (CR) >0.7 ((Hair, Black, Babin, & Anderson, 2010). An instrument is considered as having good discriminant validity when the items are unrelated theoretically and are indeed unrelated in the measurement model. Discriminant validity was achieved when AVE values for any two constructs were greater than the squared correlations between the two construct (Hair, Black, Babin, & Anderson, 2010).

The overall Cronbach's alpha value for all 20 items was 0.93. The reliability analysis for the sexual intention construct (5-items) was 0.93, attitude construct (5-items) was 0.89, social norms construct (6-items) was 0.94 and self-efficacy construct (4-items) was 0.90. All values were higher than 0.7 (Matsunaga, 2010), suggesting adequate internal reliability. The final YSI-Q contained 20 items with five items for sexual intention, five items for attitude, six items for social norms and four items for self-efficacy. The YSI-Q showed acceptable psychometric properties, and has good internal reliability and convergent and discriminant validity.

Adaptation of YSI-Q

The YSI-Q had four subscales which included sexual intention, attitude, social norm, and self-efficacy. In adapting YSI-Q, one of the original scales was rejected and thus, not added as one of the scales for this study. Specifically, the "social norm" subscale was excluded in this study. Social norms cover perceived social pressure on performing the behaviour, approval

or disapproval from others, and what is being practiced by significant others (Guilamo-Ramos, Jaccard, Dittus, Gonzalez, & Bouris, 2008). In the context of sexual activity, perceived social norms may include societal pressure to practice premarital sex, approval from significant others such as parents, and common sexual activity practiced or beliefs held by their peers. This does not reflect the focus of the construct “sexual adventurousness” in this present study.

The rejection of one scale which had 6 items suggests that the items will be left with 14. More items were added to the existing items to make a total of 30 items. Sexual intention subscale had 9-items, attitude had 10 items and self-efficacy had 11 items. For sexual intention scale 4 new items were added, 5 new questions were added to the attitude dimension and 7 questions added to the self-efficacy scale. Some of the new questions include: “I constantly look for sexual opportunities”, “I have plans of engaging in sexual acts (e.g., kiss, fondle, etc)”, “I sometimes watch pornographic materials”, “I am unable to say no to sex” and “I see sex as a duty I must perform”. The increase in the number of items is significant as wider behavioural characteristics of the behaviours of interest can be represented. This increases the construct validity (Nitko, 2001). Again, reliability will also be improved once more items are added to the existing ones (Nitko, 2001).

Some of the questions on the YSI-Q were modified for easy understanding. It must be noted that the YSI-Q was validated using youth between 18-22 years and thus, the questions were constructed in that regard. This study uses adolescents between the ages of 12-19 years. Therefore, the questions have been crafted in a simple language to make it clear for all the

respondents. For instance, question like “I intend to have sex with my partner” has been changed to “I desire to engage in sexual activities”.

Lastly, the response options to the original questionnaire (YSI-Q) have been modified. The original scale had a four-point, Likert-type scales ranging from strongly disagree, disagree, agree, and to strongly agree. The researcher felt that using an agreement type of Likert scale did not really reflect behaviour of a person. Based on this, “strongly disagree” was changed to “untrue of me”, “disagree” to “somewhat untrue of me”, “agree” to “somewhat true of me” and “strongly agree” was modified to “true of me”.

Peer Pressure Scale (PPS)

The peer pressure scale is a self-designed scale meant for the purposes of measuring the level of peer pressure among adolescents in Ghana. The scale was developed based on observations of the researcher on the behavioural characteristics of pupils in the school setting. The researcher is a professional teacher and has taught for a number years. Therefore, the researchers’ practical experience in the school setting influenced the kind of questions to craft to elicit responses to measure the pupils’ level of peer pressure. Previous literature also influenced the form of questions to be asked (Brechtwald & Prinstein, 2011; Carver, Joyner, & Udry, 2003; O’Sullivan et al., 2006; Ugoji & Ebenuwa-Okoh, 2015).

It is important to state that these studies had one of their variables to be peer pressure and thus, used some means to measure the construct. Based on this foundation (experience and literature), the researcher constructed 22-items which is intended to measure the level of peer pressure of adolescents. Two of the items were deleted after the factor analysis due to low factor loadings of

.34 and .32. The items were measured on a four point likert- type scale (untrue of me, somewhat untrue of me, somewhat true of me, and true of me). Some of the items include: “I give in to sexual relationships to be accepted by my friend”, “My best friend encourages me to get into sexual relationship”, “My entire friends have sexual partners and I feel obliged to do so”, “I enjoy watching pornography with my friends”, etc.

Ensuring Validity (During the Instrument Development Stage)

Validity describes the soundness and usefulness of the results generated by an instrument given the context in which it is applied. Validation involves collecting and analyzing data to assess the accuracy of an instrument and is essential to the success of any research endeavor. A content validity evidence of a data collection instrument (e.g., questionnaire) refers to the appropriateness of the content of the instrument. Content validity is a judgment regarding how well the instrument represents the characteristics to be assessed.

Goh and Law (2002) stated that in research project the concept of construct validity refers to the assessment of the validity of the research methods. Construct validity helps the researcher to judge the effectiveness of the measurement procedures like the effectiveness of the questionnaires and the techniques used for designing the research questionnaires. Amin (2005) pointed out that content and construct validity should be determined by an expert. The supervisors being an expert, copies of the questionnaire were sent to them. Suggestions given by the experts were taken into consideration.

As part of ensuring validity, plot-testing was conducted to ensure that the instrument was capable of efficiently and reliably collecting valid data. A Junior High School in the Abura Circuit of Cape Coast Metropolis in the Central Region was selected for the study. The school selected had characteristics as the rest of the schools selected. Some of these characteristics include: same age cohort, same family settings/backgrounds, same experiences of peer pressure, etc. Thirty pupils were selected for the pre-test. This was purposely conducted in order to find out the weaknesses and problems with the instrument. Modifications were made to come out with an efficient and reliable data. Ambiguous and misleading questions were modified to be clear enough to elicit the appropriate responses from the pupils. Efforts were also made to use simple language which most if not all, of the respondents were able to decipher and respond accordingly.

Confirmatory Factor Analysis (CFA) was conducted to validate the instrument used for the data collection. The scales which made up the questionnaire were Child-rearing practices Scale, Peer Pressure Scale, and Sexual Adventurism Scale. Although the Child-rearing Scale and Sexual Adventurism scale were standardized, they were adapted and modifications were made to them and hence, they were validated. The validation result found the Child-rearing Scale and Sexual Adventurism Scale as effective and good in terms of eliciting valid and reliable information (see Appendix B).

The Peer Pressure Scale was developed by the researcher and also needed to be validated. It must be said that the instrument has already gone through a number of stages such pilot-testing, supervisor authentication, to ensure its validity and reliability. This was not enough for validity and

reliability of the scales to be established. Estimations made confirmed the establishment of validity and reliability for the scale. The results from the CFA revealed that, apart from two items, all the other items loaded very well from .56-.89. The two items were (1) “I feel loved when I am in the company of my peers” (2) “When I don’t want to have sex, my friends say I am not matured”.The Average Variance Extracted (AVE) value of .59 showed the establishment of convergent validity since AVE value was greater than .50 (Hair, Hult, Ringle & Sarstedt, 2014). Discriminant validity was established using Maximum Shared Variance (MSV) ($MSV=.47$) since the MSV value was less than the AVE value (see Appendix D).

Ensuring Reliability (During the Instrument Development Stage)

Reliability is the extent to which a questionnaire, test, observation or any measurement procedure produces the same results on repeated trials. In short, it is the stability or consistency of scores over time or across raters. The wording of the questions in the research instrument plays a vital role in determining the reliability of the research instrument. The test question should not be too easy or too difficult for anyone to answer. The wording of the questions should be chosen after considering the level of the respondents.

Estimating reliability of items cannot be overlooked because every investigator considers it necessary in gathering objective and accurate information. There is the need, therefore, to estimate the reliability of responses of the construct of interest (Quansah, 2017). Stangor (2004) stipulates that the reliability of a measuring instrument is the extent to which the instrument is free from error, thus measuring consistency over time the variables of interest.

The most common method of assessing internal consistency reliability estimates is through the use of coefficient alpha. Cronbach's alpha is a reliability coefficient that measures inter-item reliability or the degree of internal consistency or homogeneity between variables (Zikmund, 2003 p 300). The reliability co-efficient of the instrument was calculated using the Cronbach Alpha formula and this was calculated from the pretest. The reliability co-efficient for the Child-rearing practices was 0.81, that of Peer Pressure was 0.80 and that of Sexual Adventurism was 0.81. The Cronbach Alpha method was used because all the scales on the questionnaire were on a Likert scale (Cronbach, 1951).

Data Collection Procedure

A letter of introduction from the Department of Guidance and Counselling was taken to the office of the Ghana Education Service to seek permission to administer the questionnaire at the selected Junior High Schools. Approval letter given at the Ghana Education Service directorate was then sent to the selected schools where the questionnaire was administered. With assistance from the school authorities, dates were fixed to administer the questionnaire to the sampled students. The administration and collection of the questionnaire were done the same day in each of the selected schools. A period of one month was devoted for this exercise.

Again, due to the location of the schools, and taking the size of the sample into consideration, the researcher sought the assistance of some colleagues to help in the data collection. These people were given guidelines as to how to go about the collection of the data. Support from the heads of

schools and teachers were also sought. Similarly, the heads and the teachers were also given orientation on the collection of the data.

Ethical Issues/Considerations

It was necessary for every researcher to put into consideration ethical issues governing the research. When the research process includes surveys of human participants, it is necessary to establish certain code of ethics for maintaining the dignity and autonomy of the participants. Creswell and Clark (2007) opined that a researcher should abide by some code of ethics in research that involves human participation. The research should be designed and conducted in a way that ensures quality, contribution to societal development, knowledge enhancement and integrity.

The ethical dimensions of every research and how they would be addressed are imperative to talk about. This research took into account the issues of informed consent/assent, anonymity, confidentiality, privacy and protection of vulnerable participants. Neuman (2007) posits that researchers must not compel anyone into participating in research. Participation must be voluntary at all times. Taking Neuman's position into consideration, before the distribution of questionnaires, the researcher met the "gate keeper" of the various schools (head teachers) where opportunity was taken to discuss the importance of the study with them. Their co-operation and assistance was sought and specific dates fixed for the commencement of the study. After this meeting, assent forms were given to the pupils below 18 years to be sent home for their parents to endorse the participation of their child in the study. However, the child was also allowed to decide whether to participate or not

after the approval of the parents. Those above 18 were allowed to give consent.

The researcher also ensured respect and integrity in dealing with the respondents in order to receive an effective response from them (Creswell, 2012). In this study, the respondents' privacy was given by seeking their consent first. In this regard, the purpose of the study was made clear to the respondents as well as its significance. These helped respondents to voluntarily participate in the data collection exercise. That is, respondents were made aware of the fact that they were at liberty to withdraw from the study at any point in time with or without any given reason. While this was to build confidence in the respondents of protecting the information they provided, this right ended after the instrument has been submitted. This is because it was impossible to trace the respondents' questionnaire since there was no indicator to trace their questionnaire.

The issue of anonymity was also not compromised. Anonymity protects privacy by not disclosing a participant's identity after information is gathered. Respondents were assured of their anonymity since names and other personal details were not associated with specific responses given. To Neuman (2007), even if a researcher cannot guarantee anonymity, he or she should always protect participant confidentiality. For this study, respondents were assured of their confidentiality. The information they provided would not be disclosed to any third party other than its intended purpose, which is an academic exercise (Creswell, 2012).

The researcher also made telephone calls and prior visits to management so that data gathering periods was scheduled at convenient hours

in order not to unduly interrupt their work schedules before undertaking the research. An earlier contact was made with the pupils prior to the data collection. Due to the sensitive nature of the topic, the researcher together with the research assistants visited the schools and had an interaction with the students. This was to create a little bit of rapport with the respondents to ensure that the participants provided accurate information as possible.

During the data collection process, the researcher ensured the protection of vulnerable participants (Creswell, 2012). A study of this nature was likely to lead to non-protection of vulnerable participants in the sense that the presence of the teachers in the data collection process was likely to indirectly coerce the pupils in responding to the instrument. This may end up reducing the validity of the responses provided by the respondents since the pupils may provide false information. In order to address this issue, the teachers were allowed to excuse the pupils during the data collection.

Data Processing and Analysis

The collected questionnaires were assessed for its completeness after the data gathering. Respondents who did not respond to majority of the questions were eliminated. The questionnaires were then numbered chronologically by giving each a serial number (e.g., 001, 002, 003,...). The data was then coded into Statistical Product and Service Solution (SPSS version 23) computer software. Data entry errors were screened for and corrections made where necessary. For the inferential analysis, outliers were also checked for. The normality assumption together with the respective assumption for each statistical tool employed was also checked. All inferential analyses were done using an error margin of .05 and a confidence interval of

95%. It was expected that the data for this study (when collected) would be normally distributed and thus, would meet the normality assumption. However, if it happens that the data did not meet the normality criteria, the non-parametric version of the statistical tool would be used.

Descriptive statistics such as frequencies, percentages, means and standard deviations were used to analyse data gathered to answer all the research questions. The purpose for the use of descriptive statistics as a tool of analysis is to describe the phenomenon of interest (Sekaran, 2003). Again, descriptive statistics involves the transformation of new data into a form that would provide information that describes factors of a particular situation which is achieved through the ordering and manipulation of raw data collected (Sekaran, 2003). The hypotheses were tested using inferential statistics. This was to assist the researcher in understanding how the variables relate to each other and whether or not there are significant differences between two or more groups (Sekaran 2003).

To examine the level of peer pressure, the respondents rated 22-items on a scale of 1-4 (“untrue of me-1”, “somewhat untrue of me-2”, “somewhat true of me-3”, and “true of me-4”). A benchmark of 2.5 $[(1+2+3+4)/4]$ was set based on the scale employed to compare the obtained mean with. Mean scores above 2.5 suggest that there was peer pressure among adolescents in Ghana and mean values below 2.5 depict low levels of peer pressure among adolescents.

Also in determining the child-rearing practices, the respondents rated 32-items on a scale of 1-4 (strongly disagree-1, disagree-2, agree-3, and strongly agree-4). A benchmark of 2.5 $[(1+2+3+4)/4]$ was set based on the

scale employed to compare the obtained mean with. With the exception of 5-items, the rest were all positively worded items indicating that a higher mean depicts that the child-rearing practice is highly used by the respondents' parents. Similar computations were done to establish the sexual adventurousness among the respondents.

Hypothesis one which states that “there is no significant relationship between child-rearing practices and adolescents' sexual adventurousness” was tested using multiple regression. Multivariate Multiple Regression is used to explain the relationship between two or more predictors and a number of criterion variables such that both the predictors and the criterion variable are continuous in nature (Creswell, 2012). In the case of this study, child-rearing practices as a variable have three levels- discipline, emotional warmth, autonomy/monitoring- which are continuous and was used as predictors. Adolescents' sexual adventurousness, with three dimensions, was used as the criterion and it is continuous.

Hypothesis two which states that “there is no significant relationship between peer pressure and adolescent sexual adventurousness” was tested using Multivariate Linear Regression (Gravetter & Wallnau, 2007).

Hypothesis three which also states the “there is no statistically significant relationship between gender and adolescents' sexual adventurousness” was tested using Multivariate Linear Regression (Gravetter & Wallnau, 2007). Regression analysis is a statistical tool used for the investigation of relationships between variables. Regression analysis is used to estimate the strength and the direction of the relationship between two linearly related variables that is the “independent” variable and the “dependent” variable.

Precisely the linear regression was applied here. It was used to find the relationship between peer pressure and adolescents' sexual adventurousness (Creswell, 2012).

Hypothesis four which states that "there is no significant influence of child-rearing practices, peer pressure, and gender on adolescent's sexual adventurousness" was also tested using multiple regression analysis. As earlier stated, Multivariate Multiple Regression is used to explain the relationship between two or more predictors and a number of criterion variables such that both the predictors and the criterion variable is continuous in nature (Creswell, 2012). In the case of this study, child-rearing practices (three levels: discipline, emotional warmth, autonomy/monitoring), peer pressure, and gender was used as predictors. Adolescents' sexual adventurousness, with three levels, was used as the criterion and it was continuous.

Hypothesis five which states that "child-rearing practices do not significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness" was tested using three-way interaction moderation analysis (Hayes PROCESS) (Hayes, 2013). Moderation analysis was conducted to find out if a third variable (s) (i.e., child-rearing practices in the case of this study) could strengthen or weaken the relationship between a predictor (i.e., peer influence) and an outcome variable (i.e., adolescents' sexual adventurousness) (Hayes, 2013). Summary of the data analysis in relation to the research questions and hypothesis are shown in Table 4.

Hypothesis six which states that "gender does not significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness" was tested using simple moderation analysis (Hayes PROCESS)

(Hayes, 2013). Moderation analysis was conducted to find out if a third variable (i.e., gender in the case of this study) could strengthen or weaken the relationship between a predictor (i.e., peer influence) and an outcome variable (i.e., adolescents' sexual adventurousness) (Hayes, 2013).

Summary of the data analysis in relation to the research questions and hypotheses is shown in Table 4.

Table 4- *Summary of Data Analysis*

Details	Research Question/ Hypotheses	Type of data	Statistical Analysis
Research Question 1	What are the <i>child-rearing practices of parents</i> as perceived by adolescents?	Quantitative	Mean/Standard deviation
Research Question 2	What are the levels of <i>peer pressure</i> among adolescents in Ghana?	Quantitative	Mean/Standard deviation
Research Question 3	What are the levels of <i>sexual adventurousness</i> among adolescents in Ghana?	Quantitative	Mean/Standard deviation
Hypothesis 1	There is no significant relationship between <i>child-rearing practices</i> and <i>adolescent sexual adventurousness</i> .	Quantitative	Multivariate Multiple Regression
Hypothesis 2	There is no statistically significant relationship between <i>peer pressure</i> and <i>adolescents sexual adventurousness</i> .	Quantitative	Multivariate Linear Regression
Hypothesis 3	There is no significant relationship between <i>gender</i> and <i>adolescents sexual adventurousness</i>	Quantitative	Multivariate Linear Regression
Hypothesis 4	There is no significant influence of <i>peer pressure, child-rearing practices, and gender</i> on <i>adolescents' sexual adventurousness</i>	Quantitative	Multivariate Multiple Regression
Hypothesis 5	<i>Child-rearing practices</i> do not significantly moderate the relationship between <i>peer pressure</i> and <i>adolescents' sexual adventurousness</i>	Quantitative	Three-way Interaction Moderation Analysis (PROCESS)
Hypothesis 6	<i>Gender</i> does not significantly moderate the relationship between <i>peer pressure</i> and <i>adolescents' sexual adventurousness</i>	Quantitative	Simple Moderation Analysis (PROCESS)

CHATER FOUR

RESULTS AND DISCUSSION

The general purpose of the study was to examine the influence of child-rearing practices, peer pressure, and gender on sexual adventurism among adolescents in Ghana. This chapter presents the results and the discussions. Out of 525 questionnaires administered, 504 were retrieved as correctly and completely filled. This resulted in a response rate of 96%. Hence, the analysis presented here was based on the 504 questionnaire forms retrieved. This chapter first presents the demographic characteristics of the respondents. These are followed by the analysis of the main data presented in line with the objectives of the study.

Demographic Characteristics of Respondents

The demographic characteristics of the respondents included age, gender, place of residence, and class. For age, the youngest respondent was 11 years old and the oldest was 19 years. The mean age was 15 years with a standard deviation of 1.29. Nearly 13.3% of the respondents were 11-13 years old, 77.4 % were aged from 14-16 years, and 9.3% were within the ages of 17 and 19 years (Table 5).

The percentage of female respondents was 54% and that of the male respondents was 46%. The majority of the respondents resided in urban communities (74.6%) while the remaining 25.4% indicated that they resided in rural communities. The largest proportion of the respondents was in JHS 3

(68.8%), the next large proportion of respondents (21.6%) in JHS 2 while 9.5% was in JHS 1.

Table 5- *Demographic Characteristics of Respondents (n=504)*

Demographic Data	Frequency	Percentage
Gender		
Male	232	46.0
Female	272	54.0
Total	504	100.0
Place of Residence		
Urban	376	74.6
Rural	128	25.4
Total	504	100.0
Class		
JHS 1	48	9.5
JHS 2	109	21.6
JHS 3	347	68.9
Total	504	100.0
Age group		
11-13 years	67	13.3
14-16 years	390	77.4
17-19	47	9.3
Total	504	100.0

Source: Field Survey (2019)

Analysis of Main Data

This section of the report dwells on the analysis of the data to address the objectives of the study. The analysis of the main data section comprised of two parts. The first part presented results and findings on the research questions whereas the other section focused on the testing of the hypotheses.

Adolescents' Perception of Parents' Child-rearing practices

Research Question One: What are the child-rearing practices of parents as perceived by adolescents?

The study sought to explore the child-rearing practices of parents as perceived by adolescents. The results in this section provide findings on three dimensions of child-rearing practices: discipline, emotional warmth, and monitoring. The respondents rated 32 items on a scale of 1-4 (strongly disagree-1, disagree-2, agree-3, and strongly agree-4). A benchmark of 2.50 $[(1+2+3+4)/4]$ was set based on the scale employed to compare the obtained mean with. Before the analysis, all the negatively worded items were reverse coded. Tables 6 to 8 provide details of the results.

Table 6- *Adolescents Perception of Parental Discipline*

Statements	Mean	SD	Level
My parents do not tolerate mistakes at home	2.60	1.06	High
My parents punish me for the little wrong things I do	2.55	.89	High
I am punished for every mistake that I do at home	2.38	.97	Low
I am beaten more than necessary when I go wrong	2.33	1.01	Low
When something happens, my parents do not allow me to explain myself	2.21	1.07	Low
I am severely punished for doing wrong even when it is not my fault	2.14	1.00	Low
My parents say unpleasant things about me to others when I do something wrong (e.g., <i>You are naughty</i>)	1.83	.96	Low
My father or mother does not talk to me when I do something wrong	1.79	.94	Low
My parents sometimes send me to bed without food as punishment for wrongdoing	1.79	.94	Low
When I do something wrong my parents do not care about it	1.67	.93	Low
Mean of Means	2.26	.40	Low

Source: Field Survey (2019)

Table 6 presents results on the respondents' perception of parental discipline. On the whole, parental discipline was reported to be low ($M=2.26$, $SD=.40$). It was found out that “*parents do not tolerate mistakes at home*” ($M=2.60$, $SD=1.06$), and that “*parents meted out punishment for the little wrong things they (adolescents) did*” ($M=2.55$, $SD=.97$). Further results revealed that respondents “*are not punished for every mistake that they do at home*” ($M=2.33$, $SD=1.01$). It was again found out that “*parents did not allow them (adolescents) to explain themselves when something happens*” ($M=2.21$, $SD=1.07$). Also, respondents disagreed to the statement that ‘*my parents say unpleasant things about me to others when I do something wrong*’ (e.g., *you are naughty*) ($M=1.83$, $SD=.96$). The respondents additionally, disagreed to the statement that when “*when I do something wrong my parents do not care about it*” ($M=1.67$, $SD=.93$).

The findings in Table 6 indicated that the respondents highly rated only two of the statements. The parental discipline perceptions which had the highest rating was “*My parents do not tolerate mistakes at home*”. This was followed by “*My parents punish me for the little wrong things I do*”. The rest of the statement had little support from the adolescents. This is to say that the adolescents provided low ratings for the majority of the items. These statements include “*I am punished for every mistake that I do at home*”, “*I am beaten more than necessary when I go wrong*”, “*When something happens, my parents do not allow me to explain myself*”, and “*I am severely punished for doing wrong even when it is not my fault*”. Due to the little support for majority of the statement, the overall parental discipline was low, indicating

that the adolescents perceived that there was little discipline given to them by their parents.

Table 7- *Adolescents Perception of Parental Emotional Warmth*

Statements	Mean	SD	Level
My parents are proud of me when I do something good	3.40	.87	High
My parents show me so much love	3.23	.89	High
My parents do well to provide my needs for me	3.14	.94	High
My parents like being with me	2.85	.97	High
If I am unhappy, my parents try to console me	2.81	1.01	High
My parents are always busy to pay attention to me	2.54	1.08	High
My parents allow me to have different opinions	2.39	1.00	Low
I am not able to discuss my personal issues with my parents	2.26	1.08	Low
My parents do not understand my feelings or emotions	2.22	.98	Low
I sometimes feel that my parents do not like me	1.99	1.05	Low
My parents are not friendly or welcoming	1.83	1.05	Low
My opinions are not considered in decision making at home	1.18	.97	Low
Mean of Means	2.87	.38	High

Source: Field Survey (2019)

Table 7 provides results on adolescents' perception of parental emotional regulation. Generally, the respondents reported that "*their parents showed them enough warmth*" ($M=2.87$, $SD=.38$). The adolescents reported that "*their parents were proud of them anytime they do something good*" ($M=3.40$, $SD=.87$) and "*showed them so much love*" ($M=3.23$, $SD=.89$). To the respondents, "*parents did well to provide their needs for them*" ($M=3.14$,

$SD=.94$). It was found that “*they were consoled when they were unhappy*” ($M=2.81$, $SD=1.01$). However, it was reported by the adolescents that “*parents were busy to pay attention to them*” ($M=2.54$, $SD=1.08$). Respondents affirmed that their “*parents allowed them to have different opinions*” ($M=2.39$, $SD=1.00$) and thus, “*their opinions were considered in decision making*” ($M=1.18$, $SD=.97$). Further analysis revealed that “*their parents liked them*” ($M=1.99$, $SD=1.05$) and as well “*friendly or welcoming*” ($M=1.83$, $SD=.99$).

Table 8- *Adolescents Perception of Parental Monitoring*

Statements	Mean	SD	Level
My parents tell me not to learn bad things from friends	3.40	.86	High
My parents questions me on whatever I do or wherever I go	3.08	.90	High
My parents tell me what I should do at home	3.07	.88	High
My parents want to know my friends	3.00	.89	High
My parents expect a lot from me in whatever activity I engage in	2.99	.95	High
My parents want to know whatever am doing at any point in time (e.g. <i>playing with friends</i>)	2.94	.95	High
What I wear and how I should look like is of interest to my mother or father	2.93	1.00	High
My parents want to find out what I do when in school	2.92	.96	High
My parents interfere in everything I do	2.71	.95	High
My parents do not give me privacy at home	2.16	1.05	Low
Mean of Means	2.92	.60	High

Source: Field Survey (2019)

Table 8 throws more light on adolescents’ perception of parental monitoring. Reports indicated that parents, generally, monitored the activities

of their children ($M=2.92$, $SD=.60$). Looking at the results in detail, it was found that the following statements were the most highly rated: “*parents questioned their wards on whatever they do or wherever they go*” ($M=3.08$, $SD=.90$), “*parents instructed their children on what they should do at home*” ($M=3.07$, $SD=.88$), “*parents were aware of their wards’ friends*” ($M=3.00$, $SD=.89$), and “*parents as well knew whatever their kids were doing at any point in time*” ($M=2.94$, $SD=.95$). That “*parents were interested in what their children wore and how they looked*” ($M=2.93$, $SD=1.00$) and “*what they did at school*” ($M=2.92$, $SD=.96$) were also rated high. Again, it was reported that “*parents interfered in the activities of their wards*” ($M=2.71$, $SD=2.16$) and this was also rated high by respondents. However, the statement that “*less privacy were given to children*” was rated low ($M=2.16$, $SD=1.05$).

Discussion of Research Question One

The findings of the study revealed that parental emotional warmth and monitoring were high among the parents of adolescents. Discipline of adolescents by parents was, however, found to be low. This implies that parents of adolescents in Ghana offer them enough warmth but at the same time monitor their activities. However, adolescents’ perceived parental discipline at home was reported to be low.

Different cultures and countries approach the raising of children from different philosophies and beliefs. As such, the results of this study might be different from those of studies outside Ghana. Whereas some may focus on teaching children to be more independent, others tend to focus more on expressing their love for their children. Different cultures raise their children according to a set of expectations (Struckman-Johnson et. al., 2003). In the

behavioural realm, children of White and Asian parents are expected to learn self-control. Latino, American Indian and Black fathers want their children to become independent, assertive and show a willingness to claim responsibility when they make mistakes. In the realm of affection, the parents of Asian-Pacific, West African and Arabic children stop showing physical affection to their children as they become toddlers (Coleman, 2012).

The finding of this study corroborates another study carried out in Ghana by Sherif (1993) who found that parents were liberal to their children even though they monitored and knew what their children did. From Sherif's point of view, parents encouraged their daughters into premarital sex, encouraged receiving of gifts from their daughters' sexual partners and saw nothing wrong when their daughters exchange sex for money. Consistent with this finding in Shinyanga, Iringa, Mbeya, and Tanzania, (Fehringer, Babalola, Kennedy, Kajula, Mbwambo, & Kerrigan, 2013) found that parents in the urban, semi-urban and rural areas of Dar es Salaam were involved in promoting sexual promiscuity among their daughters. Parents were reported to be silent when their daughters come home with money, food, clothes and other consumer goods, yet knowing that they were unemployed.

Peer Pressure among Adolescents in Ghana

Research Question Two: What are the levels of peer pressure among adolescents in Ghana?

The study sought to examine the level of peer pressure among adolescents in Ghana. Although the responses covered were 22-items, the analysis focused on only 20. This is because two of the items were rejected due to low factor loadings. The 20-items were rated on a scale of 1-4 ("untrue

of me:-1, “somewhat untrue of me”-2, “somewhat true of me”-3, and “true of me”-4). A benchmark of 2.50 $[(1+2+3+4)/4]$ was set based on the scale employed to compare the obtained mean with. Mean scores above 2.50 suggest that there was peer pressure among adolescents in Ghana and mean values below 2.50 depict low levels of peer pressure among adolescents. Details of the analysis are provided in Table 9.

Table 9- *Level of Peer Pressure among Adolescent in Ghana*

Statements	Mean	SD	Level
My friends encourage me to engage in sexual activities.	3.55	.86	High
I engage in sexual activities to gain respect from my friends	3.45	.93	High
I go along with the sexual demands of my friends just to make them happy	3.43	.93	High
When my friends are having sex with their partners, I feel pressured to do same.	3.38	.97	High
My friends give me plans of having sex with my boy/girlfriend	3.37	1.01	High
My friends approve of my sexual behaviour.	3.32	.95	High
I sometimes try to engage in the sexual acts that my friends engage in	3.32	.99	High
I feel pressured by my peers to have sex.	3.32	1.01	High
I don't want my friends to laugh at me so I give in to their pieces of advice on sexual activities.	3.32	1.01	High
Having friends who are sexually active is fun.	3.31	1.03	High
I have learnt sexual acts from my peers	3.25	1.07	High
There are things about sex that my friends tell me that I want to try.	3.22	1.11	High
I enjoy talking about sexual activities with my friends	3.18	1.05	High
My friend introduced me to sexual activities.	3.18	1.10	High
I enjoy watching pornography with my friends	2.78	1.09	High
I feel obliged to do what my friends do	2.70	.98	High
I feel I belong to a great group when I engage with them in sexual activities.	2.60	.93	High
My best friend encourages me to get into sexual relationship.	2.55	.94	High
I give in to sexual relationships to be accepted by my friend.	2.50	.88	High
Having sex gives me the opportunity to be like my friend.	2.49	.83	Low
Mean of Means	3.11	.35	High

Source: Field Survey (2019)

Table 9 presents the level of peer pressure among adolescents in Ghana. On the whole, peer pressure regarding sex was reported to be prevalent among adolescents ($M=3.11$, $SD=.35$). It was found out by the respondents that “*friends encouraged them to engage in sexual activities*” ($M=3.55$, $SD=.86$), and that these “*adolescents engaged in sexual activities to gain respect from their friends*” ($M=3.45$, $SD=.93$). The respondents claimed that “*they felt pressured to do what their friends did*” ($M=3.38$, $SD=.97$). Also, they felt that “*they have learnt sexual acts from friends*” ($M=3.25$, $SD=1.07$) and that “*they were introduced to sexual activities by friends*” ($M=3.18$, $SD=1.10$). The respondents, however, had somewhat high support for statements such as “*I enjoy watching pornography with my friends*” ($M=1.78$, $SD=1.09$), “*I feel obliged to do what my friends do*” ($M=1.70$, $SD=.98$), “*I feel I belong to a great group when I engage with them in sexual activities*” ($M=1.60$, $SD=.93$), “*My best friend encourages me to get into sexual relationship*” ($M=1.55$, $SD=.94$). There was little support for “*Having sex give me the opportunity to be like my friend*” ($M=1.49$, $SD=.83$).

Discussion of Research Question Two

Peer pressure was found to be high among adolescents in Ghana. Adolescents were found to be influenced by peers to engage in sexual activities. The finding is in line with a two-year longitudinal study jointly conducted by the International Institute of Population Science, Mumbai and the Population Council, New Delhi which involved 55,000 youngsters between ages of 15 and 29. The study was titled “*Youth in India: Situation and Needs*”. The study offered interesting insights on the thought patterns of the youth young minds. Friends are important, but so is parental approval. Many

preferred not to mingle with the opposite sex for fear of upsetting their parents. The careful attitude associated with youth is missing and stress has been acknowledged to be a major part of their young lives, nearly one in six youth showed signs of stress, while the males tend to worry about jobs and money. Females fret over lack of education opportunities; 11.2 percent males and 14 percent females perceived themselves to be depressed (*Times of India*, 2009). This explains why peer pressure was found to be high at this stage of their development.

The findings of this study supports that of Misra (2006) who explored the need assessment of adolescents in Bageshwar District, Uttranchal, using a sample of both boys and girls in the age range of 14-18 years. Just like the findings of this study, Misra found that the adolescents from 14 to 18 years value friendship and desired spending more time in the company of friends. Similar findings were also revealed by Botsari (2005), and Palmqvist and Santa Virta's (2007) indicating that peer pressure is high during the adolescent stage.

Adolescents Level of Sexual Adventurism in Ghana

Research Question Three: What are the levels of sexual adventurism among adolescents in Ghana?

The study examined the level of sexual adventurism in Ghana. Sexual adventurism was investigated from three dimensions: intentions, attitude, and self-efficacy to carry out sexual activities. The results presented address research Question 3. The respondents rated 32 items on a scale of 1-4 ("untrue of me"-1, "somewhat untrue of me"-2, "somewhat true of me"-3, and "true of me"-4). A benchmark of 2.50 $[(1+2+3+4)/4]$ was set based on the scale

employed to compare the obtained mean with. Mean scores greater than 2.50 means that indicate higher levels of the construct (i.e., sexual intentions, attitudes, and self-efficacy) whereas mean scores lower depicts otherwise. Tables 10 to 12 presents the detail of the analysis.

Table 10- *Adolescents Level of Sexual Intentions*

Statements	Mean	SD	Level
I would engage in sexual activities for money and other gains	3.60	.81	1 st
I constantly look for sexual opportunities	3.37	1.00	2 nd
I propose or accept proposals because I want to satisfy my sexual desires	3.30	1.06	3 rd
I intend to touch private part of the opposite sex when there is the opportunity	3.26	1.06	4 th
Most times, I want to have sex if I find a partner who is willing to do so with me	3.19	1.10	5 th
I desire to engage in sexual activities	3.19	1.12	6 th
I have plans of engaging in sexual acts (e.g., kiss, fondle, etc)	3.07	1.16	7 th
I would like to engage in sexual activities to see how it feels like	2.97	1.18	8 th
I have plan of knowing more about sex	2.91	1.22	9 th
Mean of Means	3.20	.76	High

Source: Field Survey (2019)

Table 10 highlights adolescents' level of sexual intentions as one of the dimensions of sexual adventurism. Sexual intentions of adolescents was generally high ($M=3.20$, $SD=.76$). The respondents reported that “*they would engage in sexual activities for money and other gains*” ($M=3.60$, $SD=.81$) and that “*they constantly look for opportunities to engage in sexual activities*” ($M=3.37$, $SD=1.00$). It was revealed that “*they proposed or accepted proposals to satisfy their sexual desires*” ($M=3.30$, $SD=1.06$) such that “*they*

are willing to ($M=3.19$, $SD=1.10$) and desired ($M=3.19$, $SD=1.12$) engage in sexual activities”. The respondents reported that “they would like to engage in sexual activities to see how it feels like” ($M=2.97$, $SD=1.18$) and also “have plans of knowing more about sex” ($M=2.91$, $SD=1.22$).

The sexual intentions of the adolescents that had the highest mean value was “I would engage in sexual activities for money and other gains”, and so was ranked 1st. It was followed in 2nd place by the statement “I constantly look for sexual opportunities” and in 3rd place by “I propose or accept proposals because I want to satisfy my sexual desires”. The statement with the least mean value ($M = 2.91$, $SD= 1.22$) was “I have plans of knowing more about sex”.

Table 11- Adolescents’ Attitude towards Sexual Behaviours/Activities

Statements	Mean	SD	Rank
I feel like masturbating	3.45	.93	1 st
I feel addictively drawn to certain sexual activities	3.43	.91	2 nd
I feel I should not live without sex	3.35	1.05	3 rd
I feel good engaging in sexual acts	3.33	1.01	4 th
I have strong sexual desires I have to satisfy	3.25	1.06	5 th
I like watching pornographic materials	3.22	1.08	6 th
My sexual energy needs not to be controlled	3.21	1.08	7 th
I wish I know more about sexual activities than I do know already	3.06	1.15	8 th
I often feel like having sex	2.74	1.26	9 th
Engaging in sexual activities is all that matters	2.45	.91	10 th
Mean of Means	3.25	.81	

Source: Field Survey (2019)

Table 11 highlights the attitude of adolescents towards sexual activities. The overall mean score of 3.25 revealed that adolescents have a positive attitude towards sexual activities ($M=3.25$, $SD=.81$). The respondents indicated that “*they sometimes feel like masturbating*” ($M=3.45$, $SD=.93$) and “*feel addictively drawn to certain sexual activities*” ($M=3.43$, $SD=.91$). In the views of the respondents, “*they had strong sexual desires they have to satisfy*” ($M=3.25$, $SD=1.06$) and “*often feel like having sex*” ($M=2.74$, $SD=1.26$). However, the respondents disagreed to the notion that “*engaging in sexual activities is all that matter*” ($M=2.45$, $SD=.91$).

Table 12- *Adolescents’ Perception of their Efficacy to Engage in Sexual Activities*

Statements	Mean	SD	Rank
I have a boyfriend/girlfriend I have sex with	3.40	1.01	1 st
I sometimes decide to find someone with whom to engage in sexual activity	3.37	.98	2 nd
Once I feel like having sex, I have to do it	3.31	1.06	3 rd
Sex is something I have to taste at this stage	3.31	1.07	4 th
Having sex is something I easily do	3.44	.98	5 th
Sex is a duty I must perform	3.28	1.10	6 th
I plan sexual activity with my boyfriend/girlfriend	3.25	1.12	7 th
I lose all power to protect myself when sexually approached	3.23	1.08	8 th
I am unable to say no to sex	3.22	1.08	9 th
I am sexually active	2.92	1.23	10 th
I have decided to have sex with more than one person at a time	2.37	.88	11 th
Mean of Means	3.19	1.05	

Source: Field Survey (2019)

Results in Table 12 highlight the adolescents’ perception of their efficacy to engage in sexual activities. It was revealed that, on the whole,

adolescents have high level of efficacy to engage in sexual activities ($M=3.19$, $SD=1.05$). The level of efficacy to engage in sexual activities that had the highest mean value was “*I have boyfriends/girlfriends whom I have sex with*” ($M=3.40$, $SD=1.01$) and so was ranked 1st. This was followed by the statement ‘*I sometimes decide to find someone with whom to engage in sexual activity*’ which was ranked 2nd, in 3rd place by “*once I feel like having sex, I have to do*” it ($M=3.31$, $SD=1.06$). The statement with the least mean value ($M=2.37$, $SD=.88$) was “*I have decided to have sex with more than one person at a time*”

Discussion on Research Question Three

The results showed that the level of sexual adventurousness was high among adolescents in Ghana. The adolescents were found to be high on intentions to engage in sexual activities, attitude towards sex, and efficacy of the adolescents to engage in sexual activities. The finding is consistent with that of a study by Miller, Monson, and Norton (1995) who found that, approximately 70% of college students surveyed reported they have been sexually coerced and 33% of them admitted to having used sexually coercive behaviours against their partners. Of the college students who have been sexually coerced, roughly 70% stated they knew their perpetrators, further clarifying the perpetrators were either a boyfriend/girlfriend, a friend or an acquaintance. To make the prevalence statistics even scarier, in 59% of the instances, the victim had previously consented to sexual activity with their perpetrators, 40% of which consented on the day of the coercive incident (Miller, Monson, & Norton, 1995). Although this study used adolescents and Miller et al. used university students who were of higher age, both results

pointed to the fact that pupils/students of school-going age were prone to engaging in sexual behaviours and activities.

Just like the findings of this study, the sexual acts reported by victims of sexual coercion that were most frequently used in the Miller et. Al. (1995) study included kissing and vaginal intercourse. The tactics that perpetrators reported utilizing most frequently were alcohol and drugs, emotional manipulation, and lying. The perpetrators also claimed their main reason for committing sexual coercion was their extreme sexual arousal. These first-hand reports indicate that sexual coercion is not about power, but about sex (Miller, Monson, & Norton, 1995).

The findings of this study corroborates those of a study by Sexual Information and Education Council of the United States (SIECUS, 1997) who found that the rates of sexual coercion were especially high among girls who initiated sex before age 13: one-fifth said their first intercourse was non-voluntary and another half said it was voluntary but unwanted. Research since the 1980s has yielded a wealth of data about certain aspects of adolescent sexual behaviour, particularly intercourse. About two-thirds of US teens experience first sexual intercourse by 12th grade; thus, initiating intercourse is a normative experience for teenagers (SIECUS, 1997).

Hypotheses Testing

The study also tested six hypotheses using inferential statistical analysis. Reverse coding was done to re-code all the negative items to positive ones. For the purposes of the inferential analysis, assumptions were tested for each of the hypotheses at the .05 level of significance, α .

Multivariate Normality

As part of satisfying the use of a parametric test tools for testing the hypotheses, the multivariate normality was conducted. Multiple indicators were used. These include: Kolmogorov-Smirnov, Z-skewness and Z-kurtosis. Table 13 presents the result.

Table 13- *Multivariate Normality*

Sexual Adventurism	Kolmogorov-Smirnov			Z-skewness	Z-kurtosis
	Statistics	Df	p-value		
Sexual Intent	.877	504	.158	-2.96	-3.08
Attitude	.907	504	.136	-2.81	-2.76
Efficacy	.859	504	.170	-1.25	2.45

Source: Field Survey (2019)

The result showed that the data were multivariately normal indicating that the normality assumption was not violated. The Kolmogorov-Smirnov test revealed the data for sexual intent ($p=.158$), attitude ($p=.136$) and efficacy ($p=.170$). This was confirmed by the values obtained from z-skewness and z-kurtosis. According to Martin and Bridgmon (2012) the value for z-kurtosis and z-skewness should be less than ± 3.29 . It is clear that the values for z-skewness and z-kurtosis did not violate the normality assumption.

Hypothesis One

H₀1: There is no significant relationship between child-rearing practices and adolescent sexual adventurism.

This hypothesis sought to examine the relationship between child-rearing practices and adolescent sexual adventurism. A Multivariate Multiple Regression analysis was conducted to test this hypothesis. The predictor was

child-rearing practices (3-dimensions) and the criterion was sexual adventurism (3-dimensions). It is important to emphasize that, certain specific assumptions underlying the use of multivariate multiple regression was explored to ensure that this statistical procedure could be used. These assumptions include multicollinearity, linearity, homoscedasticity and autocorrelation. A correlation matrix was developed to test for linearity and multicollinearity. Also, Durbin Watson *d* test was used to check for autocorrelation. Values obtained did not violate the assumption.

Table 14- *Correlation Matrix of Variables of Child-rearing practices and Sexual Adventurism*

	1	2	3	4	5	6
1 Discipline	1					
2 Monitoring	.135**	1				
3 Warmth	-.167**	.290**	1			
4 Sexual Intent	-.144**	.051	.072	1		
5 Attitude	-.132**	.071	.081	.812**	1	
6 Efficacy	-.157**	.058	.074	.750**	.784**	1

**Significant, $p < .001$ (2-tailed)

The results in Table 14 indicate that none of the relationships between the predictors (discipline, monitoring, and warmth) are above .80, suggesting that there is no multicollinearity in the data set (Pallant, 2010). It is constructive to state that there was linear relationship between the predictors and the criterion dimensions, indicating that the linearity assumption has been met. Once the assumptions were met the test was conducted.

Table 15- *Multivariate Test*

Effect		Value	F	df	Err. df	Sig.
Intercept	Pillai's Trace	.190	38.93*	3	498	.000
	Wilks' Lambda	.810	38.93*	3	498	.000
	Hotelling's Trace	.235	38.93*	3	498	.000
	Roy's Largest Root	.235	38.93*	3	498	.000
Discipline	Pillai's Trace	.026	4.47*	3	498	.004
	Wilks' Lambda	.974	4.47*	3	498	.004
	Hotelling's Trace	.027	4.47*	3	498	.004
	Roy's Largest Root	.027	4.47*	3	498	.004
Monitoring	Pillai's Trace	.006	.99	3	498	.397
	Wilks' Lambda	.994	.99	3	498	.397
	Hotelling's Trace	.006	.99	3	498	.397
	Roy's Largest Root	.006	.99	3	498	.397
Warmth	Pillai's Trace	.001	.19	3	498	.907
	Wilks' Lambda	.999	.19	3	498	.907
	Hotelling's Trace	.001	.19	3	498	.907
	Roy's Largest Root	.001	.19	3	498	.907

Overall Model: $F(3, 500) = 4.549, p = .004, R^2 = .033$; *Significant, $p < .05$

Table 15 presents the multivariate test for understanding the relationship between the predictors and the criterion. The overall model was found to fit the data, $F(3, 500) = 4.549, p = .004$. Discipline, monitoring and warmth explain about 3.3% of the variances in sexual adventurousness. The results revealed that discipline, monitoring and warmth together predicts the sexual adventurousness on a whole, $F(3, 498) = 38.93, p < .001$. Notwithstanding, discipline alone significantly predicted sexual adventurousness, $F(3, 498) = 4.47, p = .004$. The other two dimensions (i.e., monitoring and warmth) were not significant and independent predictors of sexual adventurousness.

Table 16- *Univariate Analysis on the Relationship between Child-rearing and Sexual Adventurism Dimensions*

Criterion	Parameter	B	Std. Error	t-value	Beta	Sig.	R ²
Sexual Intent	Intercept	30.68	3.35	9.157*		.000	.021
	Discipline	-.26	.08	-3.237*	-1.86	.001	
	Monitoring	.09	.07	1.322	.12	.187	
	Warmth	.05	.07	.622	.07	.534	
Attitude	Intercept	32.86	3.23	10.169*		.000	.021
	Discipline	-.24	.09	-3.009*	-1.62	.003	
	Monitoring	.11	.06	1.680	.14	.094	
	Warmth	.05	.07	.744	.08	.457	
Efficacy	Intercept	38.75	3.79	10.229*		.000	.026
	Discipline	-.33	.09	-3.560*	-2.63	.000	
	Monitoring	.11	.07	1.532	.18	.126	
	Warmth	.05	.08	.559	.08	.576	

Source: Field Survey (2019); *Significant, $p < .05$

The univariate test, as shown in Table 16, highlights the relationship between the set of predictors and the specific dimensions of sexual adventurism of adolescents. For sexual intention as a criterion, the discipline, monitoring and warmth explained about 2.1% of the variances of the intentions to engage in sexual activities. The result found that apart from discipline [$t(498) = -3.237$, $b = -.26$, $p = .001$] which had the significant and highest contribution to sexual intentions, none of the predictors (i.e., monitoring [$t(498) = 1.322$, $b = .09$, $p = .187$] and warmth [$t(498) = .622$, $b = .05$, $p = .534$]) significantly contributed to sexual intentions.

Further, the analysis showed that 2.1% of the variances in adolescents' attitude towards sex were explained by discipline, monitoring and warmth. Similarly, only discipline significantly contributed to the variances in attitude of adolescents towards sex, discipline [$t(498)=-3.009$, $b=-.24$, $p=.003$]. Monitoring [$t(489)=1.680$, $b=.11$, $p=.094$] and warmth [$t(498)=.744$, $b=.05$, $p=.457$], however, did not significantly predict adolescents' attitude towards sex.

Similar findings were also found with the efficacy to engage in sexual activities. Discipline, monitoring and warmth explained about 2.6% of the variations in adolescents' efficacy to engage in sexual activities. Discipline independently explained a greater and significant aspect of adolescents' efficacy to engage in sexual activities [$t(498)=-2.63$, $b=-.33$, $p<.001$]. Monitoring [$t(498)=.18$, $b=.11$, $p=.126$] and warmth [$t(498)=.08$, $b=.05$, $p=.576$] did not significantly contribute to the variances in the adolescents' attitude towards sex.

Discussion on the Testing of Hypothesis One

The results of the Multivariate Multiple Regression, on the whole, indicate that child-rearing affects or predicts adolescents' level of sexual adventurousness. However, only discipline plays the most significant role for child-rearing to influence sexual adventurousness level of adolescents. In other words, discipline alone, other than monitoring and warmth is strong enough in reducing the sexual adventurousness behaviours of adolescents. Informed by these results, it can be said that no matter the level of monitoring and warmth parents provide for their adolescent children, they would still engage in sexual adventurous behaviours and activities. This speaks to the fact that if

adolescents are not disciplined by their respective parents, there is the propensity that the adolescents would engage in sexual adventurous behaviours.

The results appear worrying as there has been various in several countries like Ghana advocating for child's right and avoidance of discipline of children of school-going age. In other words, reduced rate of discipline in schools and homes can contribute to increased rate of sexual activities.

In contemporary homes, parents restrain from disciplining their children. Evidence is provided from the earlier result in this study that discipline was low indicating that adolescents were not disciplined for wrong things done. The reasons underlying this decision not to discipline should be left for speculations. This coupled with the fact that these adolescents are not disciplined in schools increases the tendencies of sexual adventurous behaviours.

Several researches have been conducted and their findings support the findings of this study. In a study conducted by Coley, Votruba-Drzal, & Schindler, (2009), for example, found constructive parental monitoring as the most important and effective factor for mitigating the early onset of sexual activity for the adolescents. This was endorsed by this study indicating the fact that child-rearing practices of parents significantly influence sexual behaviours of their children. Other scholars have supported this idea in their study on ethnic and socio –economic groups, indicating that parents need to be involved with their child to provide effective and consistent discipline. This was explained by the fact that these activities of the parents help regulate the

sexual behaviours of their wards (Gorman-Smith et. al. 1999; Patterson, 1982; Patterson et. al. 1992).

The findings of this study also corroborates with a study conducted among Lao/Mien adolescents by Sieving, McNeely, and Blum (2000) who found that parental discipline, which included punishment, taking activities away, sending adolescents to their room, yelling or scolding, slapping or spanking and / or making the adolescent feel shameful when they behaved badly prevented adolescents from engaging in risky sexual activity for both boys and girls. This was found in the case of this study.

Hypothesis Two

H₀2: There is no significant relationship between peer pressure and adolescents' sexual adventurism.

This hypothesis sought to examine the relationship between peer pressure and adolescents sexual adventurism. To test this hypothesis, a Multivariate Linear Regression analysis was conducted. The predictor was peer pressure and the criterion was sexual adventurism (sexual intents, attitude towards sex, and self-efficacy). Prior to this analysis, a correlation matrix was done to check for the linearity assumption. Since there was a single predictor, multicollinearity assumption was not tested. The autocorrelation assumption was tested and met after obtaining *d* value of 1.9 (Durbin Watson test).

Table 17- *Correlation Matrix of Peer Pressure and Sexual Adventurism Dimensions*

	Peer Pressure	Sexual Intent	Attitude	Efficacy
Peer Pressure	1			
Sexual Intent	.692**	1		
Attitude	.655**	.812**	1	
Efficacy	.655**	.750**	.784**	1

**Significant, $p < .001$ (2-tailed).

Results as shown in Table 17 present information on the relationship between peer pressure and dimensions of sexual adventurousness. A statistically significant linear relationship was found between peer pressure and dimensions of sexual adventurousness. This suggests that the linearity assumption has not been violated. Hence, the multivariate linear regression can be conducted. Taking peer pressure and sexual intentions, for example, there exist a moderate positive relationship between the two, $r = .692$, $p < .001$. A strong positive relationship between peer pressure and attitude towards sexual activities were found, $r = .812$, $p < .001$. Again, a positive and moderate relationship was revealed between peer pressure and adolescents efficacy in engaging in sexual activities, $r = .655$, $p < .001$.

Table 18- *Multivariate Analysis*

Effect		Value	F	df	Err. df	Sig.
Intercept	Pillai's Trace	.101	18.719*	3	500	.000
	Wilks' Lambda	.899	18.719*	3	500	.000
	Hotelling's Trace	.112	18.719*	3	500	.000
	Roy's Largest Root	.112	18.719*	3	500	.000
Peer Pressure	Pillai's Trace	.527	185.327*	3	500	.000
	Wilks' Lambda	.473	185.327*	3	500	.000
	Hotelling's Trace	1.112	185.327*	3	500	.000
	Roy's Largest Root	1.112	185.327*	3	500	.000

Overall Model: $F(1, 502) = 460.430, p < .001. R^2 = .521$; *Significant, $p < .05$

The multivariate analysis which highlights on the effect of peer pressure on the composite of sexual adventurousness is shown in Table 18. The overall model was found significant, $F(1, 502) = 460.430, p < .001$. The result revealed that peer pressure is a significant predictor of sexual adventurousness, $F(3, 500) = 185.327, p < .001$. This suggests that peer pressure significantly contribute to adolescents engaging in sexual adventurous behaviours. Further analysis revealed that 52.1% of the variations in sexual adventurousness was explained by peer pressure ($R^2 = .521$).

Table 19- *Univariate Analysis of the Relationship between Peer Pressure and Sexual Adventurism Dimensions*

Criterion	Predictor	B	Std. Error	T	Beta	Sig.	R ²
Sexual Intent	Intercept	-14.79	2.047	-7.22*		.000	.477
	Peer Pressure	.78	.036	21.46*	.87	.000	
Attitude	Intercept	-7.36	2.066	-3.56*		.000	.427
	Peer Pressure	.71	.036	19.40*	.77	.000	
Efficacy	Intercept	-10.59	2.43	-4.37*		.000	.428
	Peer Pressure	.83	.043	19.45*	1.06	.000	

Source: Field Survey (2019); *Significant, $p < .05$

Table 19 presents result on the univariate analysis of the relationship between peer pressure and dimensions of sexual adventurousness. It was found that peer pressure is a significant predictor of adolescents' intentions to engage in sexual activities, $t(500)=21.46$, $b=.78$, $p < .001$. About 47.7% of the variations in adolescents' intentions to engage in sexual activities is accounted for by peer pressure.

Further analysis revealed that peer pressure significantly predicted attitude towards sexual activities, $t(500)=19.40$, $b=.71$, $p < .001$. It was clear that about 42.7% of the variances in attitude towards sexual activities was explained by peer pressure. Peer pressure was found to be a significant predictor of adolescents' efficacy to engage in sexual activities, $t(500)=19.45$, $b=.83$, $p < .001$. The analysis indicated that peer pressure accounts for 42.8% of the variations in adolescents' efficacy to engage in sexual activities.

Discussion on the Testing of for Hypothesis Two

The findings of the study have highlighted that peer pressure is a significant predictor of adolescents' level of sexual adventurousness. Enough evidence from this study has shown that peer pressure affects adolescents' intentions to engage in sexual activities, attitude towards sexual behaviours and their efficacy to engage in sexual activities. This underscores the dangers of peer pressure in influencing adolescent pupils to be sexually adventurous.

It must be established that adolescents at this stage are prone to making a lot of friends in schools, churches and from their immediate surroundings. Consequently, the activities of these adolescents center on their friends. This is where friends tend to influence them to engage in certain activities. Taking a clue from the results, it appears adolescents' sexual adventurousness is likely to be on the rise only if peers of the adolescents influence them to engage in sexual activities. I believe peer pressure exists in these contemporary times with the increasing rate and usage of social media and technology where peers can be influenced to engage in some behaviours including sharing of sexually seductive materials.

This result is explained with the fact that adolescence is a stage when most adolescents begin to recognize and make sense of their feelings. The relationships adolescents have with their peers, family, and members of their social sphere play a vital role in the social development of an adolescent. The emerging sexuality that accompanies adolescence poses fundamental challenges for young people. These include adjusting to the altered appearance and functioning of a sexually 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 self (Manning et. al., 2000).

Sexual ideation and activity increase over the adolescent period (Halpern, Udry, Campbell & Schindran, 1993). The challenge is accentuated by the unfamiliar excitement of sexual arousal, the attention connected to being sexually attractive, and the new level of physical intimacy and psychological vulnerability created by sexual encounters (Manning, et. al., 2000). Teenagers engage in a spectrum of sexual behaviours ranging from fantasy and self-stimulation to various forms of intercourse with erotic fantasy being the most common sexual behaviour in that period. This was confirmed by Coles and Stokes (1985) who found that 72 percent, out of a non-representative sample of 13–18-year-olds, acknowledged having sexual fantasies and 46 percent boys and 24 percent girls reported masturbating (Coles & Stokes, 1985). Leitenberg, Detzer, and Srebnik (1993) also reiterated that 67 percent of males and 34 percent of college female students reported masturbating at age 15.

The findings of this study agrees with the findings of Owens (2002) who found that peer pressure influences adolescents to engage socially unacceptable behaviours. Owens (2002) further reported that adolescents are far happier spending time with similarly aged peers as compared to adults. Simultaneously, conflict between adolescents and their parents increase at this time as adolescents strive to create a separation and sense of independence. This was explained by Collins and Larsen (1992) and Reese-Weber (2000) who pointed out that young adolescents easily conform to behavioural patterns of their peers.

Hypothesis Three

H₀₃: There is no significant relationship between gender and adolescents sexual adventurism

The third hypothesis sought to establish the relationship between gender and adolescent's sexual adventurism. The Linear Multiple Regression analysis was used test the relationship existing between gender and sexual adventurism. The predictor was the gender and the criterion was sexual adventurism (sexual intents, attitude towards sex, and self-efficacy). Since gender, as a variable, was categorical with 2-levels (i.e. male and female), dummy coding was done. Before the analysis, a point bi-serial correlation was conducted to examine the relationship among the predictor and the dimensions of the criterion. Since there was a single predictor, multicollinearity assumption was not tested. The autocorrelation assumption was tested and met after obtaining *d* value of 1.9 (Durbin Watson test).

Table 20- *Point Bi-serial Correlation Matrix of Gender and Dimensions of Sexual Adventurism*

	Sexual Intent	Attitude	Efficacy	Gender
Sexual Intent	1			
Attitude	.812**	1		
Efficacy	.750**	.784**	1	
Gender	.274**	.270**	.251**	1

** Significant, $p < .001$ (2-tailed).

The result of a point bi-serial correlation matrix was conducted to examine the linearity of the variables of the study. As shown in Table 20, positive linear relationship was found between gender and the dimensions of sexual adventurism. Hence, the assumption of linearity has not been violated.

Table 21- *Multivariate Analysis*

Effect		Value	F	Df	Err. df	Sig.
Intercept	Pillai's Trace	.913	1759.485*	3	500	.000
	Wilks' Lambda	.087	1759.485*	3	500	.000
	Hotelling's Trace	10.557	1759.485*	3	500	.000
	Roy's Largest Root	10.557	1759.485*	3	500	.000
Male	Pillai's Trace	.083	15.104*	3	500	.000
	Wilks' Lambda	.917	15.104*	3	500	.000
	Hotelling's Trace	.091	15.104*	3	500	.000
	Roy's Largest Root	.091	15.104*	3	500	.000

Overall Model: $F(1, 502) = 40.792, p < .001. R^2 = .082$; *Significant, $p < .05$

Table 21 presents the multivariate analysis on the effect of gender on sexual adventurism (i.e., sexual intentions, attitude towards sexual behaviours/activities, and efficacy to engage in sexual activities) among adolescents. It was revealed that gender is a significant predictor of sexual adventurism (as a composite), $F(3, 500) = 15.104, p < .001$. The extension of this finding has been provided in Table 22.

Table 22- *Univariate Analysis of the Relationship between Gender and Sexual Adventurism Dimensions*

Criterion	Predictor	B	Std. Error	T	Beta	Sig.	R ²
Sexual Intent	Intercept	26.75	.450	59.43*		.000	.073
	Male	3.91	.613	6.39*	55.80	.000	.
Attitude	Intercept	30.46	.434	70.11*		.000	.071
	Male	3.72	.591	6.29*	51.20	.000	
Efficacy	Intercept	34.10	.514	66.41*		.000	.061
	Male	4.06	.699	5.81*	65.69	.000	

Source: Field Survey (2019); *Significant, $p < .05$

Analysis in Table 22 provides information on the prediction of gender on the separate dimensions of sexual adventurousness (i.e., sexual intentions, attitude towards sexual behaviours/activities, and efficacy to engage in sexual activities). Because gender was a categorical variable, dummies were created and the female category was used as the comparison group. With this, males were found to have higher levels of intentions to engage in sexual activities as compared to female adolescents, $t(500) = 6.39, b = 3.91, p < .001$. For attitude towards sexual activities, male adolescents had higher levels than females, $t(500) = 6.29, b = 3.72, p < .001$. Similarly, male adolescents as compared to the females were also higher on the efficacy of engaging in sexual activities, $t(500) = 5.81, b = 4.06, p < .001$.

Discussion on the Testing of Hypothesis Three

The result, on a whole indicates that gender predicts sexual adventurousness such that male adolescents are more prone to engaging in sexually adventurous behaviours than female adolescents. The relationship between gender and sexual adventurousness appears to be longstanding and depicts how parents train and orient their children in the process of taking care of them. When it comes to sexual activities and behaviours, our society tend to shield female with the idea of wanting to protect the females from getting pregnant. Because males do not get pregnant, parents do not normally focus their attention on them when it comes to sexual activities.

The findings of this study confirms several previous studies conducted indicating that the stark gender differences in sexual behavior beginning in adolescence (Collins, 2009; Petersen & Hyde, 2010; Manning et al., 2006). Collins (2009), just like the findings of this, found that despite general sexual

attitudes being more permissive, males are more likely to reinforce the sexual double standard identifying sexually experienced females as less desirable. This double standard negatively impacts females and often times they are at risk of being negatively labeled due to their casual sex experiences. This I believe to so due to the fact that females are socialized to be more concerned with interpersonal relationships and relationship status. Thus, females are more conservative in their sexual attitudes preferring the intercourse to take place in context of a committed relationship versus a non-committed setting.

Christopher and Sprecher (2000), in their observation, revealed that women were more likely to be motivated to have sexual intercourse because of emotional value for their partner and were more likely to comply with unwanted sexual acts as a form of relationship maintenance. In this sense, it can mentioned that even in the quest of female adolescents being sexually adventurous, they become cautious of their emotional value. Hence, most female adolescent tend to withdraw from these behaviour until they become committed. For male adolescents, this tends to be otherwise. Male adolescent would, thus, just want to satisfy their sexual desires.

Previous research has shown men have more permissive attitudes towards sex and desire more sex partners. During their lifetime women reported they would prefer to have 5 sex partners in comparison to men's preference of 18. Males were also found to be more likely to agree to casual sex with a stranger than women. In terms of gender differences, male youths reported greater freedom as they received a higher level of autonomy compared to female youth. They also had a lower level of parental care, family

connectedness and parent-youth communication on sex than the female (Chara & Kuennen 1994).

Hypothesis Four

H₀4: There is no significant effect of peer pressure, child-rearing practices, and gender on adolescents' sexual adventurism.

This hypothesis sought to examine the effect of peer pressure, child-rearing practices, and gender on adolescents' sexual adventurism. A Multivariate Multiple Regression analysis was conducted to test this hypothesis. The predictors were peer pressure, child-rearing practices (3-dimensions), and gender and the criterion was sexual adventurism (3-dimensions). It is important to emphasize that certain specific assumption underlying the use of multivariate multiple regression was explored to ensure that the statistical procedure could be used. These assumptions include multicollinearity, linearity, homoscedasticity and autocorrelation. A correlation matrix was developed to test for linearity and multicollinearity. Again, Durbin Watson *d* test was tested to check for autocorrelation. Values obtained did not violate the assumption.

The results, as shown in Table 23, showed that none of the relationships between the predictors (peer pressure, child-rearing practices, and gender) are above .80 suggesting that there is no multicollinearity in the data set (Pallant, 2010). It is significant to state that there was linear relationship between the predictors and the criterion dimensions indicating that the linearity assumption has been met. Once the assumptions were met, the test was conducted.

Table 23- *Correlation Matrix of the Predictors and Criterion*

	Discipline	Monitoring	Warmth	Peer Pressure	Sex	Sexual Intent	Attitude	Efficacy
Discipline	1							
Monitoring	.135**	1						
Warmth	-.167**	.290**	1					
Peer Pressure	-.213**	.025	.102*	1				
Sex	-.019	.052	-.081	.198**	1			
Sexual Intent	-.144**	.051	.072	.692**	.274**	1		
Attitude	-.132**	.071	.081	.655**	.270**	.812**	1	
Efficacy	-.157**	.058	.074	.655**	.251**	.750**	.784**	1

** Significant, $p < .001$ (2-tailed).

Table 24- *Multivariate Test*

Effect		Value	F	df	Err. df	Sig.
Intercept	Pillai's Trace	.043	7.501*	3	496	.000
	Wilks' Lambda	.957	7.501*	3	496	.000
	Hotelling's Trace	.045	7.501*	3	496	.000
	Roy's Largest Root	.045	7.501*	3	496	.000
Discipline	Pillai's Trace	.002	.284	3	496	.837
	Wilks' Lambda	.998	.284	3	496	.837
	Hotelling's Trace	.002	.284	3	496	.837
	Roy's Largest Root	.002	.284	3	496	.837
Monitoring	Pillai's Trace	.003	.539	3	496	.656
	Wilks' Lambda	.997	.539	3	496	.656
	Hotelling's Trace	.003	.539	3	496	.656
	Roy's Largest Root	.003	.539	3	496	.656
Warmth	Pillai's Trace	.001	.086	3	496	.968
	Wilks' Lambda	.999	.086	3	496	.968
	Hotelling's Trace	.001	.086	3	496	.968
	Roy's Largest Root	.001	.086	3	496	.968
Peer	Pillai's Trace	.492	159.876*	3	496	.000
Pressure	Wilks' Lambda	.508	159.876*	3	496	.000
	Hotelling's Trace	.967	159.876*	3	496	.000
	Roy's Largest Root	.967	159.876*	3	496	.000
Male	Pillai's Trace	.045	7.811*	3	496	.000
	Wilks' Lambda	.955	7.811*	3	496	.000
	Hotelling's Trace	.047	7.811*	3	496	.000
	Roy's Largest Root	.047	7.811*	3	496	.000

Overall Model: $F(5, 498) = 22.317, p < .001. R^2 = .539$; *Significant, $p < .05$

Table 24 presented results on the multivariate analysis. The analysis revealed that discipline, monitoring, warmth, peer pressure, and gender predicted adolescents' sexual adventurousness, $F(3, 496) = 7.501, p < .001$. These predictors explained about 53.9% of the variations in sexual adventurousness. It

was found that only peer pressure and gender significantly and independently predicted sexual adventurism.

Table 25- *Univariate Test of the Prediction of on Discipline, Monitoring, Warmth, Peer Pressure and Gender*

Criterion	Parameter	B	Std. Error	T	Beta	Sig.	R ²
Sexual Intent	Intercept	-15.35	3.25	-4.72*		.000	.499
	Discipline	-.01	.06	-.08	-.04	.937	
	Monitoring	.03	.05	.73	.05	.467	
	Warmth	.01	.05	.26	.02	.797	
	Peer Pressure	.74	.04	19.89*	.83	.000	
	Male	2.04	.47	4.37	29.04	.000	
Attitude	Intercept	-9.09	3.28	-2.77*		.006	.452
	Discipline	.001	.06	-.01	.00	.998	
	Monitoring	.06	.05	1.20	.08	.231	
	Warmth	.03	.05	.48	.04	.631	
	Peer Pressure	.67	.04	17.90*	.73	.000	
	Male	2.01	.47	4.29*	27.72	.000	
Efficacy	Intercept	-10.33	3.87	-2.67*		.008	.447
	Discipline	-.05	.07	-.73	-.42	.466	
	Monitoring	.06	.06	1.05	.09	.295	
	Warmth	.01	.06	.16	.02	.870	
	Peer Pressure	.79	.04	17.85*	1.00	.000	
	Male	2.03	.56	3.66*	32.83	.000	

Source: Field Survey (2019); *Significant, $p < .05$

Table 25 presents the univariate results on the prediction of discipline, monitoring, warmth, peer pressure and gender on sexual adventurism. The results revealed that only peer pressure and gender significantly predicted

sexual intentions, attitude towards sex, and self-efficacy. Discipline, monitoring and warmth did not significantly predict any of the dimensions of sexual adventurousness. It was found that 49.9% of the variations in sexual intentions is accounted by discipline, monitoring, warmth, peer pressure and gender. About 45.2% of the variances in attitude to sex is explained by discipline, monitoring, warmth, peer pressure and gender. It was found that discipline, monitoring, warmth, peer pressure and gender explains 44.7% of the variations in efficacy to engage in sexual activities. Although peer pressure and gender both influences sexual adventurousness gender has the greatest influence regarding intentions to engage in sexual activities, attitude towards sex, and efficacy to engage in sexual activities.

Discussion on the Testing of Hypothesis Four

The findings revealed that peer pressure and gender are significant predictors of sexual adventurousness. This suggests that in as much as male adolescents are more likely to be influence adolescents engagement in sexual adventurous behaviours, peer pressure also plays a significant role in adolescents engaging in sexual activities.

Peer pressure was found as a significant predictor of sexual adventurousness and this explains the fact that friends and colleagues of adolescents can convince them to engage in sexual behaviours and activities. This was discussed by Steinberg and Monahan (2007), which they indicated that adolescence is the time when we are most susceptible to peer influence, but also that it provides a great opportunity to practice the skills required to avoid influences that may be detrimental to us, and stay true to ourselves. Nicholas

(2008), however, indicated that adolescent females may learn behavioural patterns from outside world.

During this transition, adolescents are easily influenced through beliefs, attitudes and experiences of people within the environmental settings (Louw, Van Ede, & Louw, 2009). Inferencing from Bandura's social learning theory, through observing and imitating significant others, adolescent females may find it easy to engage in sexual promiscuity. Through imitation and vicarious learning, peer influence and the role played by mass- media, could outweigh parental influence especially when parents are not exemplary in their conduct (Ryckman, 2008; Schultz & Schultz, 2013). The work by Erik Erikson highlights that identity confusion during adolescence is likely to engulf the mind of girls about the values to uphold to buffer against risk factors (substance abuse, multiple partners and unwanted pregnancy) when parents do not provide necessary coaching (Bee & Boyd, 2003). Hence they become easily influenced by their peers to explore unhealthy sexual practices and conform to the expectations of peers, which make them to be drug abusers and leave school prematurely (Nicholas, 2008).

Spear and Kulbok (2001), in line with this result, believed that affiliation with friends who engage in risk behaviours has been shown to be a strong predictor of an adolescent's own behaviour. A 17 year- old girl, from Gaborone, Botswana, who was involved with a 37 year old, was quoted as saying "It is all about peer pressure, we compete with the type of cell phone, our hair styles, the type of vehicles our boyfriends drive and the amount of money they have" (Leclerc-Madlala, 2013, p. 18).

Gender also explains some sexual behaviours exhibited by adolescents. For boys, research has shown that pubertal development over a six-month period was associated with concurrent changes in sexual ideation and pre-coital behaviour; also, pubertal stage predicted the transition to intercourse (Halpern et al., 1993). Among girls, pubertal stage predicted level of sexual experience the following year (Whitbeck, Conger, & Kao, 1993). For both genders, earlier pubertal onset relative to peers was associated with greater sexual experience (Flannery, Rowe, & Gulley, 1993; Miller, et. al., 1998). Among girls, early menarche was associated with a younger age at first intercourse (Magnusson, 1988; Miller et al., 1997). Among boys, advanced pubertal maturation relative to peers was associated with earlier first intercourse (Capaldi, Crosby, & Stoolmiller, 1996). These hormonal imbalances explain why gender predicts sexual behaviours of adolescents.

It is worthy to indicate that these strong sexual urges experienced by adolescents cannot be directly seen and thus, even these adolescents are mostly unconscious of it. However, some manifestations of certain behaviours of adolescents observed in schools, homes, playgrounds, etc. can be used as indicators of the experiences of these adolescents. In worst cases, the effects of these behaviours and actions are seen because sexual experimentation is one of the means used by adolescent to understand their maturity and deal with the changes that plague them (Slater & Robinson, 2014). Paramount of the effect of this experimentation is teenage pregnancy (Jayakody et al., 2011).

Hypothesis Five

H₀₅: Child-rearing practices do not significantly moderate the relationship between peer pressure and adolescents' sexual adventurism.

The study also sought to investigate the moderating role of child-rearing practices in the relationship between peer pressure and adolescents' sexual adventurousness. To test this hypothesis, a three-way interaction moderation (moderated moderation) was conducted. Moderation analysis was conducted to find out if a third variable (s) (i.e., child-rearing practices in the case of this study) could strengthen or weaken the relationship between a predictor (i.e., peer influence) and an outcome variable (i.e., adolescents' sexual adventurousness) (Hayes, 2013).

The moderators were discipline, monitoring and warmth. The predictor was peer pressure and the criterion was sexual adventurousness. The analysis used 5,000 bootstrap samples using 95% confidence interval. The analysis highlighted on six different models with each indicating the moderating variable. In the first three models, single moderators were used. The last three had double moderators (i.e., (1) Warmth and Monitoring, (2) Monitoring and Discipline, (3) Warmth and Discipline). Details are shown in Table 26.

Table 26- *Model Summary*

Model	Moderator	R	R ²	MSE	F	df1	df2	p-value
1	Monitoring	.723	.523	199.443	182.694*	3	500	.000
2	Warmth	.723	.523	199.528	182.544*	3	500	.000
3	Discipline	.728	.530	196.344	188.208*	3	500	.000
4	Monitoring & Warmth	.726	.527	199.296	78.979*	7	496	.000
5	Monitoring & Discipline	.746	.556	187.128	88.723*	7	496	.000
6	Warmth & Discipline	.736	.542	192.982	83.882*	7	496	.000

Source: Field Survey (2019), *Significant, $p < .05$

The results, as shown in Table 26, showed that all the models unveiled were significant. For model 1, monitoring was used as the moderating variable, warmth was used as the moderating variable for model 2, and in model 3, discipline was used as the moderator. Both monitoring and warmth were used as the moderators for the fourth model whereas monitoring and discipline were the moderators for the fifth model, and warmth and discipline were the moderators for the sixth model. Table 27 presents the details of each model.

Table 27- *Moderating Role of Child-rearing practices in the Relationship between Peer Pressure and Sexual Adventurism*

Model		Effect	Boot SE	t	Boot LLCI	Boot ULCI
1	Constant	-42.60	35.69	-1.268	-117.510	23.830
	Peer Pressure (PP)	2.40	.62	4.060	1.252	3.655
	Monitoring (MO)	.35	1.26	.301	-2.075	2.903
	PP*MO	-.003	.02	-.141	-.047	.039
2	Constant	-92.752	47.518	-2.192	-189.683	-3.612
	Peer Pressure (PP)	3.366	.818	4.474	1.842	5.034
	Warmth (WH)	1.761	1.428	1.433	-.924	4.613
	PP*WH	-.031	.025	-1.410	-.080	.015
3	Constant	-175.96	86.045	-2.692	-342.891	-5.306
	Peer Pressure (PP)	5.136	1.472	4.440	2.243	8.016
	Discipline (DP)	9.760	5.734	2.234	-1.496	20.882
	PP*DP	-.192	.098	-2.477	-.384	-.001
4	Constant	257.02	310.85	.991	-382.34	840.934
	Peer Pressure (PP)	-2.480	5.447	-.539	-12.765	8.691
	Monitoring (MO)	-11.886	10.332	-1.352	-31.538	9.543
	PP*MO	.200	.181	1.281	-.174	.543
	Warmth (WH)	-8.908	9.864	-1.127	27.082	11.271
	PP*WH	.145	.173	1.034	-.210	.464
	MO*WH	.360	.324	1.360	-.309	.974
	PP*MO*WH	-.006	.006	-1.270	-.017	.006
5	Constant	-502.47	197.36	-2.546	-890.23	-114.71
	Peer Pressure (PP)	10.600	3.55	2.989	3.63	17.568
	Monitoring (MO)	252.58	134.71	1.875	-12.094	517.26
	PP*MO	-4.294	2.38	-1.804	-8.97	.383
	Discipline (DP)	33.392	13.17	2.535	7.52	59.27
	PP*DP	-.601	.24	-2.533	-1.067	-.135
	MO*DP	-18.00	9.02	-2.00	-35.72	-.290
	PP*MO*DP	.314	.16	1.967	.01	.628
6	Constant	363.69	240.99	1.48	-116.75	847.13
	Peer Pressure (PP)	-3.84	4.058	-.89	-11.94	4.25
	Warmth (WH)	-162.49	79.40	-2.28	-318.79	-5.74
	PP*WH	2.71	1.34	2.17	.065	5.32
	Discipline (DP)	-28.31	16.22	-1.70	-61.28	4.05
	PP*DP	.45	.27	1.55	-.09	1.00
	WH*DP	11.44	5.31	2.38	.99	22.00
	PP*WH*DP	-.193	.09	-2.29	-.369	-.018

Source: Field Survey (2019)

Table 27 presents results on the moderating role of child-rearing practices in the relationship between peer pressure and sexual adventurousness. In Model 1, monitoring was not found as a significant moderator in the relationship between peer pressure and sexual adventurousness, $b=-.003$, $SE=.02$, $BootCI (-.047-.039)$. Similarly, warmth (Model 2) was also not found a significant moderator in the relationship between peer pressure and sexual adventurousness, $b=-.003$, $SE=.025$, $BootCI (-.080-.015)$. Discipline (Model 3), however, significantly moderated the relationship between peer pressure and sexual adventurousness, $b=-.192$, $SE=.098$, $BootCI [-.384(-.001)]$.

Further analysis was done on the conditional focal predictor at values of the moderator. This was done as a post-hoc for the significant moderation effect of discipline in the relationship between peer pressure and sexual adventurousness. The details are shown in Table 28.

Table 28- *Conditional Focal Predictor at Values of the Moderator*

Discipline	Range	Effect	Boot SE	t-value	Boot LLCI	Boot ULCI
Low	10-24	2.45	.120	20.39	2.209	2.681
Moderate	25-34	2.25	.101	22.38	2.055	2.451
High	35-40	2.06	.134	15.40	1.798	2.324

Source: Field Survey (2019)

Table 28 highlights on the details of the mediating role of discipline in the relationship between peer pressure and sexual adventurousness. The analysis, automatically, generated levels of discipline using scores from 10 to 24 as low discipline, 25 to 34 as moderate discipline and 35-40 as high discipline. These scores were generated from the 10-items measuring discipline on a four point scale. It was found that the effect of peer pressure on sexual adventurousness was

large for low discipline compared to moderate and high discipline, $b=2.45$, $SE=.120$, $BootCI (2.209-2.681)$. This picture has been painted in Figure 2.

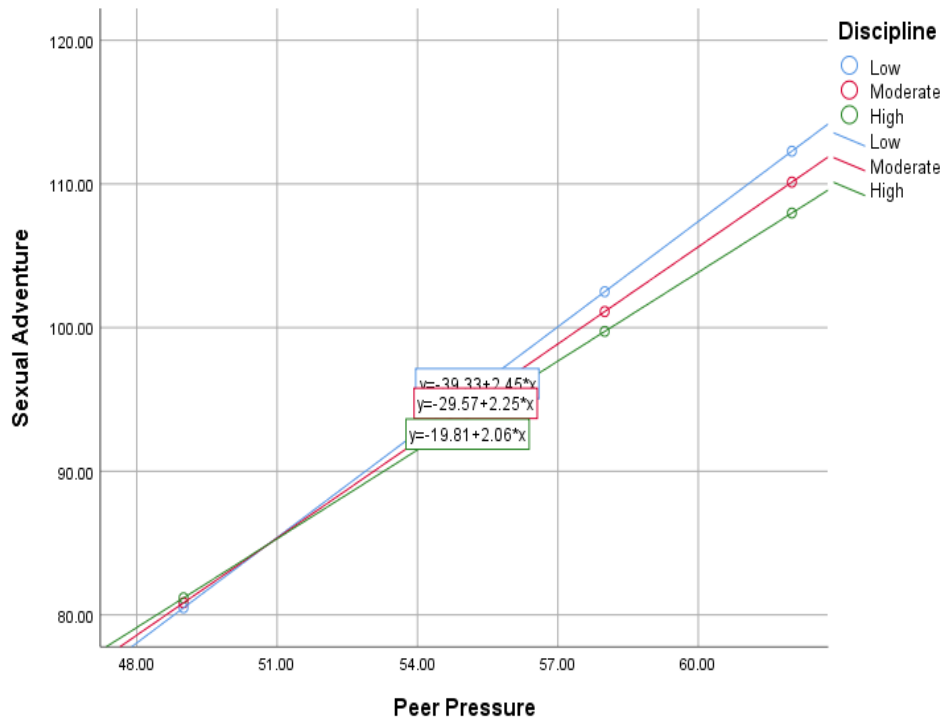


Figure 2: Moderating role of discipline in the relationship between peer pressure and sexual adventurism

Figure 2 highlights on the pictorial representation of the moderating role of discipline in the relationship between peer pressure and sexual adventurism. It can be observed that the line for low discipline is steeper than the lines for moderate and high discipline.

The role of double moderators was also examined in Table 27 showed in model 4 that warmth and monitoring together could not moderate the relationship between peer pressure and sexual adventurism, $b=-.006$, $SE=.006$, $BootCI (-.017-.006)$. Additional analysis revealed that for warmth (Model 5) to significantly moderate the relationship between peer pressure and sexual adventurism, discipline needs to be present ($PP*WH*DP$), $b=-.006$, $SE=.006$, $BootCI [-.017-(-.007)]$. Again for monitoring (Model 6) to significantly

moderate the relationship between peer pressure and sexual adventurism, discipline needs to be present (PP*WH*DP), $b=-.193$, $SE=.09$, *BootCI* [-.369-(-.018)].

Discussion on the Testing of Hypothesis Five

The results revealed that only discipline was able to act as a moderator in the relationship between peer pressure and sexual adventurism. Further indications showed that the effect of peer pressure on sexual adventurism was larger for low discipline and smaller for high discipline. This implies that adolescents can easily be influence by friends to engage in sexually adventurous behaviours when discipline is low. However, whenever discipline is high, the effect of peer pressure on sexual adventurism is small.

The results further revealed that monitoring and warmth can only moderate the relationship between peer pressure and sexual adventurism, only in the presence of discipline. This speaks to the fact that no matter the level of parental monitoring and emotional warmth, the prevalent of peer pressure can affect sexual adventurism. This seems to be different with the presence of discipline as a moderator.

Studies have shown that parental discipline is associated with adolescent sexual activity. Jacobson and Crockett (2000) reported that child discipline is associated with postponing intercourse even in the presence of peer pressure. Presumably, parental discipline reduce adolescent intercourse by avoiding opportunities for sexual activity; however, some studies indicate that sexual activity is more likely when parental discipline is excessive (Upchurch, Aneshensel, Sucoff & Leveystorms, 1999).

Hypothesis Six

H₀₆: Gender does not significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness.

The study also hypothesized that gender will not significantly moderate the relationship between peer pressure and adolescents' sexual adventurousness. This hypothesis was tested using moderation analysis by Hayes. The analysis used 5,000 bootstrap samples using 95% confidence interval. Gender was the moderators, the predictor was peer pressure and sexual adventurousness was the criterion variable. Table 29 and 30 highlight on the results.

Table 29- *Moderating Role of Gender in the Relationship between Peer Pressure and Sexual Adventurism*

Model	Effect	Boot SE	t-value	Boot LLCI	Boot ULCI
Constant	-20.11	7.306	-2.753	-39.32	-2.06
Peer Pressure	2.030	.132	15.368	1.71	2.37
Gender	-18.466	11.255	-1.641	-41.33	6.58
Peer Pressure* Gender	.436	.199	2.196	.007	.835

Overall Model: $F(3, 500) = 200.86, p < .001, R^2 = .547$

Table 29 presents the moderating role of gender in the relationship between peer pressure and sexual adventurousness. It was revealed that the overall model was significant, $F(3, 500) = 200.86, p < .001$. Further analysis revealed that peer pressure, gender, and the interaction term (peer pressure*gender) contributed about 54.7% of the variances in sexual adventurousness. Gender was found as a significant moderator in the relationship between peer pressure and

sexual adventurousness [b=.436, SE=.199, BootCI (.007-.835)]. The details of the interaction need to be provided to appreciate the complete moderating role.

Table 30- Conditional Effects of the Focal Predictor

Gender	Effect	Boot SE	t-value	Boot LLCI	Boot ULCI
Male	2.90	.325	8.93	2.26	3.54
Female	2.47	.148	16.62	2.17	2.76

Interaction: $F(1, 500) = 4.82$, R^2 change=.004

The results in Table 30 highlight the exact role of gender in moderating the relationship between peer pressure and sexual adventurousness. Interestingly, the results showed that the effect of peer pressure on sexual adventurousness is high in male adolescents, $b=2.90$, $SE=.325$, $BootCI(2.26-3.54)$ than in female adolescents, $b=2.47$, $SE=.148$, $BootCI(2.17-2.76)$. The graph gives a clear explanation for this result.

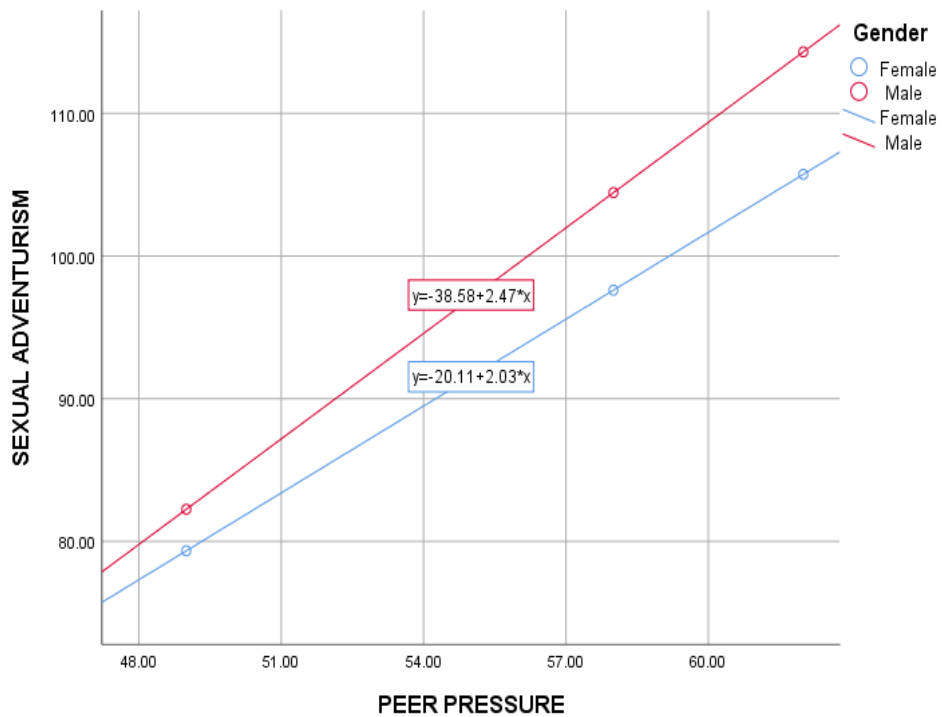


Figure 3: Moderating role of gender in the relationship between peer pressure and sexual adventurousness

The graph gives a clear pictorial representation of the moderation role of gender in the relationship between peer pressure and sexual adventurousness (Figure 3). From the graph, it can be observed that the peer pressure affects sexual adventurousness for both male adolescents and female ones. However, this effect is higher for males than females. This is evidential since the red line (males) is steeper than the blue line (females).

Discussion on the Testing of Hypothesis Six

Evidence gathered from this study revealed that gender is a significant moderator in the relationship between peer pressure and sexual adventurousness. A post hoc analysis then found that the effect of peer pressure on sexual adventurousness is higher for male adolescents more than female adolescents. This suggests that for male adolescents, there is a higher likelihood that peer pressure can easily affect their sexual adventurous behaviours than for females. This is to say, that male adolescents have greater tendencies of being influenced by friends to engage in sexual activities and behaviours.

This result is not surprising and tends to confirm and reflect issues of gender and adolescents' sexuality. Previous studies conducted have consistently revealed that males are more likely to have first sexual intercourse at a younger age, more frequent sexual intercourse, and an overall larger number of sex partners (Petersen & Hyde, 2010). Collins's (2009) belief is that although adolescents, in general, make more friends at this stage, males make more friends and are more easily influenced by these friends. This explains why the effect of peer pressure on sexual adventurousness is larger for male adolescents than females.

In our contemporary societies, parents tend to give more advice to their female adolescents and consistently let them be aware of bad friends. In a typical Ghanaian community for instance, girls are taught to be conservative and protected by parents due to tendencies of becoming pregnant. For male adolescents, little advice is given to them such that they can leave home and come back anytime they want without being questioned or punished. In reality male adolescents are rather safeguarded on the basis of taking drugs. It is easy to hear a parent say to her daughter that “*if any man tells you that you are pretty, let him know that your parents have already told you that*”. I believe all these expressions limit the influence of peers on females in engaging sexual adventurous behaviours.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter presents the summary, conclusions and recommendations. The conclusions and recommendations are based on the findings of the study. It is the desire of the investigator that the findings, conclusions, and recommendations of this study will guide policy direction and inform practice for all stakeholders in this field.

Summary

Overview of the Study

This study examined the influence of child-rearing practices, peer pressure, and gender on sexual adventurousness among adolescents in Ghana. In an attempt to achieve this objective, the study was guided by these specific objectives:

1. Explore the child-rearing practices of parents as perceived by adolescents.
2. Explore the levels of peer pressure among adolescents.
3. Explore the levels of sexual adventurousness among adolescents.
4. Examine the relationship between child-rearing practices and adolescents' sexual adventurousness.
5. Examine the relationship between peer pressure and adolescents' sexual adventurousness.

6. Examine the relationship between gender and adolescents' sexual adventurism.
7. Investigate the effect of child-rearing practices, peer pressure and gender on adolescents' sexual adventurism.
8. Determine the role of child-rearing practices in the relationship between peer pressure and adolescents' sexual adventurism.
9. Determine the role of gender in the relationship between peer pressure and adolescents' sexual adventurism

The descriptive research design was adopted because it lends itself to gathering information from a larger population, providing descriptive and inferential information on the main variables of the study. Due to the nature of the study, it was limited to adolescences in Junior High Schools in Ghana between the ages of 12-19 years of age. The study was targeted to nine schools (three from each Northern, Middle and Southern zones).

The multistage approach was used to select the adolescents from the schools. The multi-stage was as follows: stratified sampling (1st stage), simple random sampling (2nd Stage), simple random sampling (3rd stage) and systematic sampling (4th stage). A total of 525 adolescents were selected to participate in the study. The main instrument for the data collection was a questionnaire which comprised standardised scale and self-developed scales. All protocols, including ethical considerations, were observed before the data collection commenced. Data gathered were analysed using means and standard deviation, multivariate linear regression, multivariate multiple regression, simple moderation analysis and three-way interaction moderation analysis.

Key Findings

The findings of the study, in this section, have been organised objective-by-objective. This allowed a clear distinction of the results.

Adolescents Perception of Parents' Child-rearing practices

On a whole, parental discipline was reported to be low. It was constructive to find out that parents do not tolerate mistakes at home, and that parents meted out punishment for the little wrong things they (adolescents) did. Further results revealed that respondents are not punished for every mistake that I do at home. The adolescence refuted the notion that parents did not allow them to explain themselves when something happens. Also, the adolescents disagreed that their parents say unpleasant things about them to others when they do something wrong (e.g., *you are naughty*). The adolescents additionally, opposed to the view that when they do something wrong their parents do not care about it.

Generally, the adolescents reported that their parents showed them enough warmth. The results revealed that parents of respondents were proud of them anytime they do something good and showed them so much love. To the adolescents, parents did well to provide their needs for them. It was found that they were consoled when they were unhappy. However, it was reported by the adolescents that parents were busy to pay attention to them. The adolescents affirmed that their parents allowed them to have different opinions and thus, their opinions were considered in decision making. Further analysis revealed that their parents liked their adolescents' children and as well were friendly or welcoming.

Reports indicated that parents, in general, monitored the activities of their children. It was concurred that parents questioned their wards on whatever they did or wherever they went, parents instructed their children on what they should do at home, parents were aware of their wards' friends, and parents as well knew whatever their children were doing at any point in time. It was instructive to know that parents were interested in what their children wore and how they looked and what they did at school. Interestingly, it was reported that parents interfered in the activities of their wards and thus, less privacy were given to children.

Peer Pressure among Adolescents in Ghana

Peer pressure regarding sex was reported to be prevalent among adolescents. It was averred by the respondents that friends encouraged them to engage in sexual activities, and as such these adolescents engaged in sexual activities to gain respect from their friends. The respondents claimed that they felt pressured to do what their friends did. To the respondents, they felt that they have learnt sexual acts from friends, and as such they were introduced to sexual activities by friends. The respondents also agreed to statements such as "I enjoy watching pornography with my friends", "I feel obliged to do so to do what my friends do", "I feel I belong to a great group when I engage with them in sexual activities", "My best friend encourages me to get into sexual relationship". The respondents, however, disagreed to the statement "Having sex give me the opportunity to be like my friend".

Adolescents Level of Sexual Adventurism in Ghana

Remarkably, the sexual intentions of adolescents in Ghana were generally high. The adolescents reported that they would engage in sexual

activities for money and other gains and that they constantly look for opportunities to engage in sexual activities. It was revealed that the adolescents proposed or accepted proposals to satisfy their sexual desires (such that they are willing to and desired engage in sexual activities). The respondents claimed that they would like to engage in sexual activities to see how it feels like and also have plans of knowing more about sex.

An overall analysis revealed that adolescents have a positive attitude towards sexual activities. The respondents indicated that they sometimes feel like masturbating and as well addictively drawn to certain sexual activities. In the views of the respondents, they had strong sexual desires they have to satisfy and often feel like having sex. However, the respondents disagreed to the notion that engaging in sexual activities is all that matter.

The adolescents made it clear that, on the whole, they have the efficacy to engage in sexual activities. Interesting, the respondents claimed that they have boyfriends/girlfriends whom they have sex with. The adolescents were of the view that once they felt like having sex, they had to do it and thus, they believed that sex is something they had to taste. It was revealed that the adolescents felt they had less power to protect themselves when sexually approached to the extent that they were unable to say “No” to sex. It was found, however, that the respondents have not decided to have sex with more than one person at a time.

Relationship between child-rearing practices and adolescent sexual adventurousism.

The results revealed that discipline, monitoring and warmth together predict the sexual adventurousism on a whole. Notwithstanding, discipline alone

significantly predicted sexual adventurousness. The other two dimensions (i.e., monitoring and warmth) were not significant and independent predictors of sexual adventurousness.

The univariate test highlighted on the relationship between the set of predictors and the specific dimensions of sexual adventurousness of adolescents. For sexual intention as a criterion, the discipline, monitoring and warmth explained about 2.1% of the variances of the intentions to engage in sexual activities. The result found that apart from discipline which had the significant and highest contribution to sexual intentions, none of the predictors (i.e., monitoring and warmth) significantly contributed to sexual intentions.

Further, the analysis showed that 2.1% of the variances in adolescents' attitude towards sex were explained by discipline, monitoring and warmth. Similarly, only discipline significantly contributed to the variances in attitude of adolescents towards sex. Monitoring and warmth however, did not significantly predict the attitude of adolescents' attitude towards sex.

Similar findings were also found with the efficacy to engage in sexual activities. Discipline, monitoring and warmth explained about 2.6% of the variations in adolescents' efficacy to engage in sexual activities. Discipline independently explained a greater and significant aspect of adolescents' efficacy to engage in sexual activities. Monitoring and warmth did not significantly contribute to the variances in the attitude of adolescents' attitude towards sex.

Relationship between peer pressure and adolescents sexual adventurousness.

The multivariate analysis indicated that the overall model was found significant. The result revealed that peer pressure is a significant predictor of

sexual adventurousness. This suggests that peer pressure significantly contribute to adolescents engaging in sexual adventurous behaviours. Further analysis revealed that 52.1% of the variations in sexual adventurousness was explained by peer pressure.

The univariate analysis found that peer pressure is a significant predictor of adolescents' intentions to engage in sexual activities. About 47.7% of the variations in adolescents' intentions to engage in sexual activities is accounted for by peer pressure. Further analysis revealed that peer pressure significantly predicted attitude towards sexual activities. It was clear that about 42.7% of the variances in attitude towards sexual activities was explained by peer pressure. Peer pressure was found as a significant predictor of adolescents' efficacy to engage in sexual activities. The analysis indicated that peer pressure accounts for 42.8% of the variations in adolescents' efficacy to engage in sexual activities.

Relationship between gender and adolescents sexual adventurousness

The multivariate analysis revealed that gender is a significant predictor of sexual adventurousness (as a composite). Male adolescents were found to have higher levels of intentions to engage in sexual activities as compared to female adolescents. For attitude towards sexual activities, male adolescents had higher levels than females. Similarly, male adolescents as compared to the females were also higher on the efficacy of engaging in sexual activities.

Effect of peer pressure, child-rearing practices, and gender on adolescents' sexual adventurousness

The multivariate analysis revealed that discipline, monitoring, warmth, peer pressure, and gender predicted adolescents' sexual adventurousness. These

predictors explained that 53.9% of the variations in sexual adventurousness. It was found that only peer pressure and gender significantly and independently predicted sexual adventurousness. The results revealed that only peer pressure and gender significantly predicted sexual intentions, attitude towards sex, and self-efficacy. Discipline, monitoring and warmth did not significantly predict any of the dimensions of sexual adventurousness. It was found that 49.9% of the variations in sexual intentions is be accounted by discipline, monitoring, warmth, peer pressure and gender. About 45.2% of the variances in attitude to sex is explained by discipline, monitoring, warmth, peer pressure and gender. It was found that discipline, monitoring, warmth, peer pressure and gender explains 44.7% of the variations in efficacy to engage in sexual activities. Although peer pressure and gender both influences sexual adventurousness, gender has the greatest influence regarding intentions to engage in sexual activities, attitude towards sex, and efficacy to engage in sexual activities.

Role of Child-rearing practices in the relationship between peer pressure and adolescents' sexual adventurousness

Monitoring was not found as a significant moderator in the relationship between peer pressure and sexual adventurousness. Similarly, warmth was also not found a significant moderator in the relationship between peer pressure and sexual adventurousness. Discipline however, significantly moderated the relationship between peer pressure and sexual adventurousness indicating further that the effect of peer pressure on sexual adventurousness was large for low discipline compared to moderate and high discipline.

Warmth and monitoring together could not moderate the relationship between peer pressure and sexual adventurousness. Additional analysis revealed

that for warmth to significantly moderate the relationship between peer pressure and sexual adventurousism, discipline needs to be present. Again for monitoring to significantly moderate the relationship between peer pressure and sexual adventurousism, discipline needs to be present.

Role of Gender in the relationship between peer pressure and adolescents' sexual adventurousism

The study revealed that the overall model was significant. Further analysis revealed that peer pressure, gender, and the interaction term (peer pressure*gender) contributed about 54.7% of the variances in sexual adventurousism. Gender was found as a significant moderator in the relationship between peer pressure and sexual adventurousism. The results showed that the effect of peer pressure on sexual adventurousism is high in male adolescents than in female adolescents.

Conclusions

The following conclusions were drawn from the findings of the study. Adolescents' perceived parental discipline was reported to be low. However, the Adolescents reported that their parents showed enough warmth to them and also monitored their activities. Peer pressure regarding sex was reported to be prevalent among Adolescent. Adolescents were found to have high sexual intentions, a positive attitude towards sexual activities and also have high efficacy to engage in sexual activities.

The results revealed that discipline, monitoring and warmth together predicted Sexual Adventurism. However, discipline alone significantly predicted Sexual Adventurism. Peer pressure is a significant predictor of sexual adventurousism. Gender is also a significant predictor of adolescents'

Sexual Adventure and that male adolescents were found to have high levels of sexual adventurousness than the female adolescents.

Discipline significantly moderated the relationship between peer pressure and Sexual Adventurism and that for warmth and monitoring to significantly moderate the relationship between peer pressure and sexual adventure, discipline needs to be present. It was revealed that the effect of peer pressure on Sexual Adventure is high in male adolescents than female adolescents.

Final Model of Conceptual Framework

Based on the key findings in relation to the proposed conceptual framework, the final model of the conceptual framework for the study did not have any change.

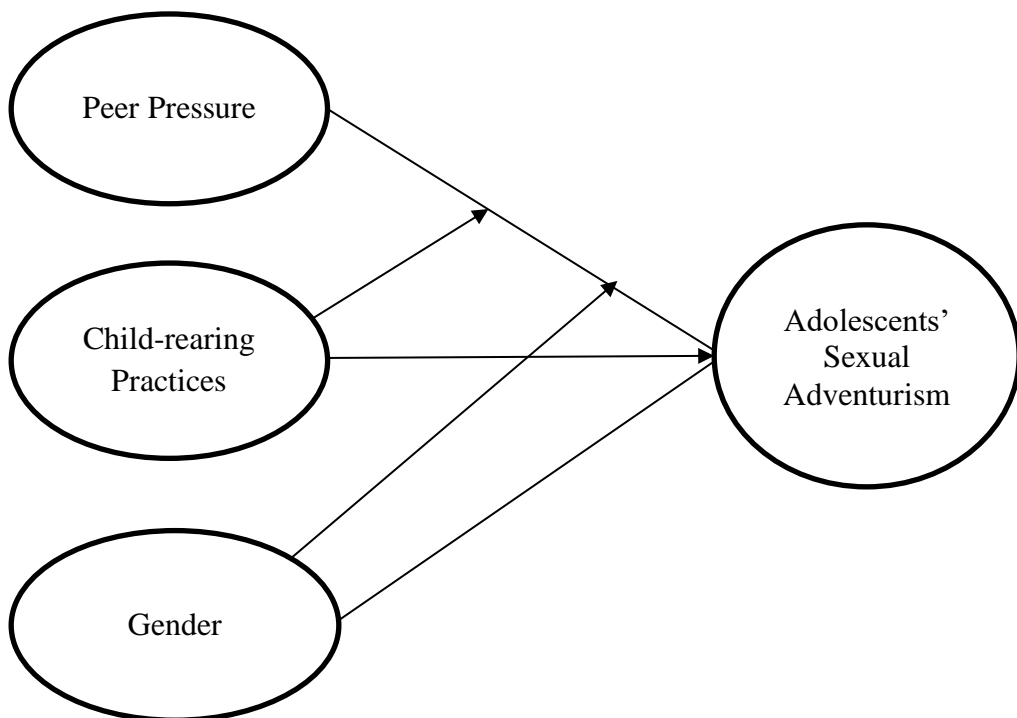


Figure 4: Final Model for the Conceptual Framework

Recommendations for Policy and Practice

Based on the finding that adolescents' perceived parental discipline is low and that parents show enough warmth and also monitored the activities of the adolescents, it is recommended to parents and guardians to incorporate reasonable disciplinary actions in taking care of their children in order to enhance proper upbringing of their adolescent children.

The findings of the study revealed that Peer Pressure regarding sex was prevalent among Adolescents. Again, the effect of peer pressure on sexual adventurousness is high in male adolescents than the female adolescent. It is recommended to parents and teachers to provide educative platforms both at home, school and the media to educate adolescents on peer pressure and sexual related issues.

The study also revealed that adolescents' level of sexual adventurousness was high and that male adolescents were found to have higher levels of sexual adventurousness than the female adolescents. It is recommended to Guidance and Counselling coordinators to develop strategies which would enable the adolescent pupils to channel their sexual energies into productive ventures such as physical activity, creativity and reading of non-sexual story books. Again to develop strategies that would help reduce the high level of sexual adventure by identifying what triggers their sexual urges such as pornography and make conscious effort to avoid watching them. Counsellors could also help adolescents to refrain from resorting to masturbation to satisfy their strong sexual urges by educating them to replace their sexual thoughts with more positive thoughts, to find ways to occupy their time such as taking up a new hobby or trying a new sport activity, and also spending more time with others.

Based on the findings that peer pressure among adolescents is high and that sexual adventurism was high among adolescents, it is recommended to adolescents to seek help from school counsellors to guide them deal with the challenges of peer pressure and sexual adventure.

Implications for Counselling

1. The finding that sexual adventurism is high suggest more counselling to guide adolescent clients to discover more about their sexuality and how the adolescents can overcome the strong sexual urges that leads them into sexual adventure by identifying what triggers their sexual urges such as pornography and make conscious effort to avoid watching them. Counsellors could also help adolescents to refrain from resorting to masturbation to satisfy their strong sexual urges by educating them to replace their sexual thoughts with more positive thoughts, to find ways to occupy their time such as taking up a new hobby or trying a new sport activity, and also spending more time with others.
2. Peer pressure was found to have significantly influenced Adolescents' sexual adventurism hence, it behoves on counsellors to help vulnerable adolescents to mitigate its negative effects by focusing more on educating adolescents on the influence of peer pressure on Adolescents' Sexual Adventurism.
3. School counsellors should make the effort to educate parents at PTA (parent teacher associations) on how parents can incorporate appropriate discipline in the upbringing of their adolescent children.
4. School counsellors should focus more on educating adolescents on the influence of peer pressure on adolescent adventurism.

Suggestions for Further Studies

Notwithstanding the findings of this study, it is suggested the scope of future studies should be expanded to encompass several schools in rural, urban and peri-urban areas. Such studies should increase the sample size for the study. Also, this study only focused on adolescents in Junior High Schools in Ghana. It means that adolescents who do not attend school were excluded. The researcher hereby recommends that further studies should be carried out to include not only school-going adolescents but those at home or dropouts.

The researcher also recommends that future studies be carried out to include the other home background variables such as single parents/ two-parent homes, socio-economic status, number of children etc

REFERENCES

- Abbott, D. A., & Dalla, R. L. (2008). It's a choice, simple as that: Youth reasoning for sexual abstinence or activity. *J Youth Stud, 11*(6), 629-49.
- Ajzen, I. (2006). *Constructing a Theory of Planned Behaviour questionnaire: Conceptual and methodological consideration*. Retrieved from <http://www.people.umass.edu/aizen/pdf/tpb.measurement.pdf>
- Amin, M. E. (2005). *Social science research: Conception, methodology and analysis*. Kampala, Uganda: Makerese University Press.
- Anderson, E. (1989). Sex codes and family life among poor inner-city youth. *The ANNALS of the American Academy of Political and Social Science, 51*(1), 59-78.
- Andrasik, F., Heimberg, R. G., Edlund, S. R., & Blankenberg, R. (1981). Assessing the readability levels of self-report assertion inventories. *Journal of Consulting and Clinical Psychology, 49*, 142-144.
- Arrindell, W. A., Emmelkamp, P. M. G., Brilman, E., & Monsma, A. (1983). Psychometric evaluation of an inventory for assessment of parental rearing practices: A Dutch form of the EMBU. *AcfaPsych-Africa Scandinavica, 67*, 163-177.
- Aufseeser, D., Jekielek, S., & Brown, B. (2006). *The family environment and adolescent well-being: Exposure to positive and negative family influences*. Retrieved from www.counselling-directory.org.uk/sex-addiction.html.
- Aunola, K., Stattin H., & Nurmi J. E. (2000). Parenting styles and adolescents achievement strategies. *Journal of Adolescents, 23*, 205-222.

- Awusabo-asare, K., & Abane, A. M. (2004). Adolescent sexual and reproductive health in Ghana: A synthesis of research evidence: Occasional report. *Allan Guttmacher*, 13, 1-9.
- Ayibani, I. T. (2013). *Adolescent pregnancy-A hindrance to harnessing the development potential of young people in Ghana*. Retrieved from <http://www.ghana.gov.gh/index.php/2012-02-08-08-3247/>
- Baku, E., Adanu, R., & Adatar, P. (2017) Socio-cultural factors affecting parent-adolescent communication on sexuality in the Accra Metropolis, Ghana. NUMID HORIZON, *International Journal of Nursing and Midwifery*, 1(2), 1–10.
- Bandura, A. (1964). The stormy decade: Fact or fiction? *Psychology in the Schools*, 2, 1224-231.
- Bandura, A. (1994). Social cognitive theory and exercise of control over HIV infection. In R. J. DiClemente, & J. L. Peterson (Eds.), *Preventing AIDS: Theories and methods of behavioural interventions* (pp. 25-59). New York, NY: Plenum.
- Bandura, A. (1977). *Social Learning Theory*. New York, NY: General Learning Press.
- Bandura, A. (2002). Social cognitive theory in cultural context. *Journal of Applied Psychology: An International Review*, 51, 269-290.
- Bandura, A., & Walters, R. H. (1959). *Adolescent aggression*. New York, NY: Ronald Press.

- Bartlett, J. E., Kotrlik, J. W., & Higgins, C. C. (2001). Organizational research: Determining appropriate sample size in survey research. *Information Technology, Learning, and Performance Journal*, 19(1), 43-50.
- Baumrind, D. (1971). Current patterns of parental authority. *Developmental Psychology*, 4(1& 2), 1-103.
- Bee, D., & Boyd, D. (2003). *Life-span development: Study edition*. (3rd ed.). Boston, MA: Allyn & Bacon.
- Benda, B. B., & DiBlasio, F. A. (1994). *An integration of theory: Adolescent sexual contacts*. New Delhi, India: Zulu Publication.
- Berk, L.E. (2007), *Human development*. New York, NY: McGraw-Hill Book Company.
- Beyers, W., Veryser, E., & Verlee, E. (2015). Parent and peer predictors of adolescents' sexual development: Can parents buffer peer influence? *European Journal of Developmental Psychology*, 12(5), 599-612.
- Bhatt, N. (2007). *Human development—A lifespan perspective*. Jaipur, India: Aavishkar Publishers.
- Biney A. A. E. (2013). *Developing a sexual self-concept scale for adolescents in Accra*. (Unpublished doctoral dissertation). University of Ghana, Legon, Accra, Ghana.
- Bingenheimer, J. B., Ashanti, E., & Ahiadeke, C. (2015). Peer influences on sexual activity among adolescents in Ghana. *Studies in Family Planning*, 46(1), 1-19.
- Birnbaum, G. E. (2007). Beyond the borders of reality: Attachment orientations and sexual fantasies. *Personal Relationships*, 14, 321–342.

- Bless, C., & Higson-Smith, C. (2000). *Fundamentals of social research methods* (3rd ed.). Cape Town, South Africa: Juta.
- Blum, R. W., Buhurry, T., Shew, M. L., Bearing, L. H., Sieving, R. E., & Resnick, M. D. (2000). The effects of race/ethnicity, income, and family structure on adolescent risk behaviours. *Sexuality, 2*(1), 36-45.
- Bogani, G., Cromi, A., Serati, M., Monti, Z., Apolloni, C., Nardelli, F., & Ghezzi, F. (2014). Impact of school-based educational programs on sexual behaviours among adolescents in Northern Italy. *Journal of Sex & Marital Therapy, 41*(2), 121–125.
- Borgers, N., Hox, J., & Sikkel, D. (2004). Response effects in surveys on children and adolescents: The effect of number of response options, negative wording, and neutral mid-point. *Qual Quant., 38*(1), 17–33.
- Botsari, E. M. (2005). Risk/protective effects on adolescent depression: Role of individual, family and peer factors. *Psychological Studies, 50*(1), 50-61.
- Brechwald, W. A., & Prinstein, M. J. (2011). Beyond homophily: A decade of advances in understanding peer influence processes. *Journal of Research on Adolescence, 21*, 166–179.
- Brooks, J. E. (2006). Strengthening resilience in children and youths: Maximizing opportunities in the schools. *Children and Schools, 28*(2), 69-76.
- Brooks, J. B. (2012). *The process of parenting* (9th ed.). McGraw-Hill Higher Education. ISBN 978-0-07-746918-4.

- Brooks-Gunn, J., & Furstenberg, F. F., Jr. (1989). Adolescent sexual behaviour. *American Psychologist*, *44*, 249-257.
- Brooks-Gunn, J., & Paikoff, R. (1997). Sexuality and developmental transitions during adolescence. Adolescent sexuality: Behaviour and meaning. In Schulenberg, J. L. Maggs, K., Hurrelmann, L., & Chassin, L. (Eds.). *Health risks and developmental transitions during adolescence* (pp. 190–219). Cambridge: Cambridge University Press.
- Brown, J. D., Childers, K. W., & Waszak, C. S. (1990). Television and adolescent sexuality. *Journal of Adolescent Health Care*, *11*, 62-70.
- Brown, L., & Iyengar, S. (2008). Parenting styles: The impact on student achievement. *Marriage & Family Review*, *43*(1-2), 14–38.
- Cacodcar, J., Dubbashi, A., & Joglekar, S. (2015). A cross-sectional study on child-rearing practices in rural Goa. *Journal of Krishna Institute of Medical Sciences University*, *4*(4), 64-73.
- Capaldi, D. M., Crosby, L., & Stoolmiller, M. (1996). Predicting the timing of first sexual intercourse for at-risk adolescent males. *Child Development*, *67*, 344–359.
- Carpenter L. M. (2002). Gender and the meaning and experience of virginity loss in the contemporary United States. *Gender and Society*. *16*, 345–365. doi:10.1177/0891243202016003005.
- Carlo, G., McGinley, M., Hayes, R., Batenhorst, C., & Wilkinson, J. (2007). *Parenting styles or practices? Parenting, sympathy, and prosocial behaviours among adolescents*. Lincoln, NE: Department of Psychology, University of Nebraska.

- Carpenter, L. M. (1998). From girls into women: Scripts for sexuality and romance in *Seventeen* magazine, 1974–1994. *Journal of Sex Research*, 35(2), 158–168.
- Carver, K., Joyner, K., & Udry J. R. (2003). National estimates of adolescent romantic relationships. *Theory, Research, and Practical Implications*, 5, 291–329.
- Centers for Disease Control and Prevention [CDC]. (2000). *Youth risk behaviour surveillance, United States*. Retrieved from www.diseasecontrolcen.us
- Chara Jr, P. J., & Kuennen, L. M. (1994). Diverging gender attitudes regarding casual sex: A cross-sectional study. *Psychological Reports*, 74(1), 57-58.
- Chaubey, S. P. (2007). *Developmental psychology*. New Delhi, India: Neelkamal Publications Pvt. Ltd.
- Cheng, H., & Furnham, A. (2004). Perceived parental rearing style, self-esteem and self-criticism as predictors of happiness. *Journal of Happiness Studies*, 5(1), 1-21.
- Child Trends (2002). *Preventing teenage pregnancy, childbearing, and sexually transmitted diseases: What the research shows. Research brief*. Washington, DC: Child Trends.
- Chilman, C. S. (1986). *Some psychosocial aspects of adolescent sexual and contraceptive behaviours in a changing American society*. In J. B. Lancaster & B. A. Hamburg (Eds.), *School-age pregnancy and parenthood: biosocial dimensions* (pp. 191–217). Hawthorne, NY: Aldine de Gruyter.

- Chirkov, V., Ryan, R. M., Kim, Y., & Kaplan, U. (2003). Differentiating autonomy from individualism and independence: A self-determination theory perspective on internalization of cultural orientations and well-being. *Journal of Personality and Social Psychology, 84*(1), 97-110.
- Christopher, F. S., & Sprecher, S. (2000). Sexuality in marriage, dating, and other relationships: A decade review. *Journal of Marriage and Family 62*(4), 999-1017.
- Cockcroft, A., Kunda, J. L., Kgakole, L., Masisi, M., Laetsang, D., Ho-Foster, A., & Andersson, N. (2010). Community views of intergenerational sex: Findings from focus groups in Botswana, Namibia and Swaziland. *Psychology, Health & Medicine, 15*(5), 507-514.
- Coleman, E. (2012). Masturbation as a means of achieving sexual health. In W. O. Bockting, & E. Coleman. (2002). *Masturbation as a means of achieving sexual health*. New York, NY: Routledge.
- Coles, R., & Stokes, G. (1985). *Sex and the American teenager*. New York, NY: Harper & Row.
- Coley, R. L., Votruba-Drzal, E., & Schindler, H. S. (2009). Fathers' and mothers' parenting practices and responding to adolescent sexual risk behaviours. *Child Development, 80*(3), 808–827.
- Collins, A. (2009). Toward a design science of education. In E. Scanlon, & T. O'Shea (Eds.), *New directions in educational technology* (pp. 15-22). New York, N.Y. Springer-Verlag.

- Collins, W. A., & Steinberg, L. (2006). Adolescent Development in Interpersonal Context. In N. Eisenberg, W. Damon, & R. M. Lerner (Eds.), *Handbook of child psychology: Social, emotional, and personality development* (pp. 1003-1067). Hoboken, NJ: John Wiley & Sons Inc.
- Collins, W. A., & Larsen, B. (1992). Conflict and the transition to adolescence. In C. U. Shantz & W. W. Hartup (Eds.), *Conflict in child and adolescent development* (pp. 216-241). Cambridge, England: Cambridge University Press.
- Conger, J. J., & Peterson, A. C. (1984). *Adolescence and youth*. New York, NY: Harper and Row.
- Cooper, D. R., & Schindler, P. S. (2002). *Business research methods* (8th ed). Boston, MA: McGraw-Hill/Irwin.
- Coulshed, V., & Orme, P. (2006). *Practice of social work* (3rd ed.). Englewood Cliffs, NJ: Prentice-Hall.
- Crawford, M. J. (1990). Use of qualitative research methods in general medicine and psychiatry: publication trends in medical journals 1990-2000. *International journal of social psychiatry*, 49(4), 308-311.
- Creswell, J. W. (2012). *Educational research: Planning, conducting and evaluating quantitative and qualitative research* (4thed.). Boston, MA: Pearson Publication.
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative and mixed methods approaches* (4thed.). London, UK: SAGE Publication Inc.
- Creswell, J. W. (2014). *Research design: Qualitative, Quantitative and mixed methods approaches*. Los Angeles, CA: Sage.

- Creswell, J., & Plano Clark, V. (2007). *Designing and conducting mixed methods research*. Thousand Oaks, CA: Sage.
- Crockett, L. J., Raffaelli, M., & Moilanen, K. (2003). Adolescent sexuality: Behavior and meaning. In G. R. Adams & M. D. Berzonsky (Eds.), *Blackwell handbook of adolescence* (pp. 371–392). Oxford, England: Blackwell.
- Cronbach, L. (1951). Coefficient alpha and the internal structure of tests. *Psychometrika*, *16*, 297-334.
- Crow, L. D., & Crow, A. (2008). *Human development and learning*. New Delhi, India: Surjeet Publications.
- Davies, M. (2000). *The Encyclopaedia of social work*. Englewood Cliffs, NJ: Wiley-Blackwell.
- Davis, D., Shaver, P. R., & Vernon, M. L. (2004). Attachment style and subjective motivations for sex. *Personality and Social Psychology Bulletin*, *30*, 1076–1090.
- Davoudi, F., & Kumar, M. (2008). What do victims of physical domestic violence have in common? A systematic review of evidence from Eastern Mediterranean countries. *Women's Health Bulletin*, *1*(2), 125-137.
- Deci, E. L., & Ryan, R. M. (2008). Self-determination theory: A macrotheory of human motivation, development, and health. *Canadian Psychology/Psychologie Canadienne*, *49*(3), 182-185.
- Devadas, R. P., & Jaya, N. (2007). *A textbook on child development*. New Delhi, India: Macmillan Ltd.

- DeVellis, R. F. (2003). *Scale development: Theory and applications* (2nded.). Thousand Oaks, CA: Sage.
- DeVon, H. A., Block, M. E., Moyle-Wright, P., Ernst, D. M., Hayden, S. J., & Lazzara, D. J. (2007). A psychometric toolbox for testing validity and reliability. *J NursScholarsh*, 39(2), 155–64.
- Dewar, G. (2011). Preventing summer learning loss: Research based tips. Retrieved from <http://www.parentingscience.com/summer-learning-loss.html>.
- Diamond, M. (2002). Sex and gender are different: Sexual identity and gender identity are different. *Clinical Child Psychology & Psychiatry*, 7(3), 320–334. Retrieved from (<http://www.hawaii.edu/PCSS/biblio/articles/2000to2004/2002-sex-and-gender.html>).
- Dittus, P. J., & Jaccard, J. (2000). *The relationship of adolescent perceptions of maternal disapproval of sex and of the mother-adolescent relationship to sexual outcomes*. Manuscript, Department of Psychology, State University of New York at Albany.
- Dodoo, F. N. A., Zulu, E. M., & Ezeh, A. C. (2007). Urban–rural differences in the socioeconomic deprivation-sexual behaviour link in Kenya. *SocSci Med.*, 64(10), 19–31.
- East, P. L. (1996). The younger sisters of childbearing adolescents: Their attitudes, expectations, and behaviours. *Child Development*, 67, 267–282.
- Erikson, E. H. (1963). *Childhood and society* (2nd ed.). New York, NY: Norton.

- Erikson, E. H. (1963). *Youth: Change and challenge*. New York, NY: Basic Books.
- Erikson, E. H. (1964). *Insight and responsibility*. New York, NY: Norton.
- Erikson, E. H. (1993). *Identity and youth crisis*. New York, NY: Norton and company.
- Erikson, J. M. (1988). *Wisdom and the senses*. New York, NY: Norton.
- Eysenck, H. J. (1973). *The measurement of intelligence*. Lancaster, PA: MTP.
- Fasula, A. M., & Miller, K. S. (2006). African-American and Hispanic adolescents' intentions to delay first intercourse: Parental communication as a buffer for sexually active peers. *Journal of Adolescent Health, 38*, 193–200.
- Fehringer, J. A., Babalola, S., Kennedy, C. E., Kajula, L. J., Mbwambo, J. K., & Kerrigan, D. (2013). Community perspectives on parental influence on engagement in multiple concurrent sexual partnerships among youth in Tanzania: Implications for HIV prevention programming. *AIDS care, 25*(2), 207-214.
- Feldman, S. S., & Brown, N. (1993). Family influences on adolescent male sexuality: The mediational role of self-restraint. *Social Development, 2*, 16–35.
- Flannery, D. J., Rowe, D. C., & Gulley, B. L. (1993). Impacts of pubertal status, timing, and age on adolescent sexual experience and delinquency. *Journal of Adolescent Research, 8*, 21–40.

- Fletcher, A. C., Walls, J. K., Cook, E. C., Madison, K. J., & Bridges, T. H. (2008). Parenting style as a moderator of associations between maternal disciplinary strategies and child well-being. *Journal of Family Issues, 29*(12), 1724–1744.
- Forhan, S. E., Gottlieb, S. L., Sternberg, M. R., Xu, F., Datta, S. D., McQuillan, G. M., Markowitz, L. E. (2009). Prevalence of Sexually Transmitted Infections among Female Adolescents Aged 14 to 19 in the United States. *Pediatrics, 124*(6), 1505–1512. <https://doi.org/10.1542/peds.2009-0674>.
- Fraenkel, J. R., & Wallen, N. E. (2006). *How to design and evaluate research in education* (6th ed.). New York, NY: McGraw-Hill.
- Gagnon, J., & Simon, W. (1973). *Sexual conduct, the social sources of human sexuality*. Chicago, IL: Aldine.
- Gavazzi, S. M. (2012). *Family systems theory*. Altha, FL: Springer.
- Gavin, L., McKay A. P., Brown, K., Lola, B., & Shrinidhi, I., (2008). Sexual and reproductive health of persons aged 10-24 years — United States, 2002-2007. *Morbidity and Mortality Weekly Report, 9*, 58-69.
- Gerlsma, C., Arrindell, W. A., van der Veen, N., & Emmelkamp, P. M. G. (1991). A parental rearing style questionnaire for use with adolescents: psychometric evaluation of the EMBU-A. *Personality and Individual Differences, 12*(12), 1245-1253.
- Ghana Statistical Service (GSS). (2008). *Ghana Health Service (GHS), ICF Macro (IM). Ghana Demographic and Health Survey [Internet]. Accra, Ghana: GSS, GHS, and ICF Macro, 2009*. Retrieved from http://pdf.usaid.gov/pdf_docs.pdf.

- Ghana Statistical Service (GSS). (2014). *Ghana Health Service (GHS). ICF International, Ghana Demographic and Health Survey [Internet]. Rockville, MD: GSS, GHS, and ICF International; 2015.* Available from <http://dhsprogram.com/pubs/pdf/FR307/FR307.pdf>
- Gilchrist, L. D., & Schinke, S. P. (1983). Coping with contraception: Cognitive and behavioural methods with adolescents. *Cognitive Therapy and Research, 7*, 379-388.
- Giordano, P. C., Longmore, M. A., Manning, W. D., & Northcutt, M. J. (2009). Adolescent identities and sexual behaviour: An examination of Anderson's player hypothesis. *Social Forces, 87*(4), 1813-1843.
- Glenn, D. I. (1992). *Determining sample size*. Gainesville, FL: Florida Cooperative Extension Services, University of Florida.
- Godwin, K. (2010). Grounded theory methods in social justice research. *The Sage Handbook of Qualitative Research, 4*(1), 359-380.
- Goh, C., & Law, R. (2002). Modelling and forecasting tourism demand for arrivals with stochastic nonstationary seasonality and intervention. *Tourism Management, 23*(5), 499-510.
- González, X., & Miles, D. (2001). Wage inequality in a developing country: decrease in minimum wage or increase in education returns. *Empirical Economics, 26*(1), 135-148.
- Gorman-Smith, D., Tolan, P. H., & Henry, D. (1999). The relation of community and family to risk among urban poor adolescent. In L. H. Cohen, L. N. Robins & C. Slomkowski (Eds.), *When and where: Influence of historical time and place on aspects of psychopathology* (pp. 349-367). Mahwah, NJ: Lawrence Erlbaum Associates.

- Gravetter, F. J., & Wallnau, L. B. (2007). *Statistics for the behavioural sciences* (7th ed.). Belmont, CA: Thomson Wadsworth.
- Guay, F., Ratelle, C. F., & Chanal, J. (2008). Optimal learning in optimal contexts: The role of self-determination in education. *Canadian Psychology/Psychologie canadienne*, 49(3), 233-240.
- Guilamo-Ramos, V., & Bouris, A. (2009). Working with parents to promote healthy adolescent sexual development. *Prevention Researcher*, 16, 7-11.
- Guilamo-Ramos, V., Jaccard, J., Dittus, P., Gonzalez, B., & Bouris, A. (2008). A conceptual framework for the analysis of risk and problem behaviours: the case of adolescent sexual behaviour. *Soc Work Res.*, 32(1), 29–45.
- Hall, G. S. (1904). *Adolescence, its psychology and its relations to physiology, anthropology, sociology, sex, crime, religion and education*. New York, NY: Appleton Press.
- Hair, J. F., Black, W. C., Babin, B. J., & Anderson, R. E. (2010). *Multivariate data analysis* (7thed.). Upper Saddle River, CA: Pearson Prentice Hall.
- Hallikeri, V. R., Gouda, H. S., Aramani, S. C., Vijaykumar, A. G., & Ajaykumar, T.S. (2010). Masturbation: An overview. *Journal of Forensic Medicine and Toxicology*, 2 (2), 46–49.
- Halpern, C. T., Udry, J. R., Campbell, B., & Suchindran, C. (1993). Testosterone and pubertal development as predictors of sexual activity: A panel analysis of adolescent males. *Psychosomatic Medicine*, 55, 436–447.

- Hayes, A. F. (2013). *Introduction to mediation, moderation and conditional process analysis: A regression-based approach*. New York, NY: The Guilford Press.
- Heins, M. (2004). *Sex play: Parenting strategies*. Retrieved from <http://web.archive.org/web>.
- Henry, R., & Fayorsey, C. (2002). *Coping with pregnancy: Experiences of adolescents in Ga Mashi, Accra*. Macro, MD: Calverton.
- Henson, R. K., & Roberts, J. K. (2006). Use of exploratory factor analysis in published research. Common errors and some comment on improved practice. *EducPsycholMeas*, 66, 393–416.
- Holborn, L., & Eddy, G. (2011). *First steps to healing the South African family*. New York, NY: McGraw-Hill.
- Hurlock, E. B. (2007). *Developmental psychology a life–span approach*. New Delhi, India: McGraw Hill Publishing Company.
- Hyde, J. S., & DeLamater, J. D. (2003). *Understanding human sexuality*. New York, NY: McGraw-Hill.
- Irin, C. (2014). *Focus on vulnerability to HIV/AIDS infection*. Nairobi, Kenya: United Nations Press.
- Jaccard, J., Dittus, P. J., & Gordon, V. V. (1996). Maternal correlates of adolescent sexual and contraceptive behaviour. *Family Planning Perspectives*, 28(4), 159–185.
- Jacobson, K. C., & Crockett, L. J. (2000). Parental monitoring and adolescent adjustment: An ecological perspective. *Journal of Research on Adolescence*, 10, 65–97.

- Jayakody, A. S. M., Sinha, S., Tyler, K., Khadr, S. N., & Viner, R. M. (2011). Early sexual risk among black and minority ethnicity teenagers: A mixed methods study. *Journal Adolescent Health, 48*(5), 499–506.
- Joussemet, M., Landry, R., & Koestner, R. (2008). A self-determination theory perspective on parenting. *Canadian Psychology, 49*, 194-200.
- Juvonen, J., & Wentzel, K. R. (1996). *Social motivation: Understanding children's school adjustment*. Cambridge, UK: Cambridge University Press.
- Kasemy, Z., Desouky, D. E. S., & Abdelrasoul, G. (2016). Sexual fantasy, masturbation and pornography among Egyptians. *Sexuality & Culture, 20*, 626–638.
- Kasen, S., Vaughan, R. D., & Walter, H. J. (1992). Self-efficacy for AIDS preventive behaviours among tenth grade students. *Health Education Quarterly, 19*, 187-202.
- Katchadourian, H. (1990). Sexuality. In S. S. Feldman & G. R. Elliott (Eds.), *At the threshold: The developing adolescent* (pp.330–351). Cambridge, MA: Harvard University Press.
- Kennedy, K. (2004). *Sexual abuse or just playing doctor? MedHelp*. Retrieved from www.medhelp.org/forums/ChildBehavior/messages.
- Kilmann, P. R., Carranza, L. V., & Vendemia, J. (2006). Recollections of parent characteristics and attachment patterns for college women of intact vs. non-intact families. *Journal of Adolescence, 29*(1), 89-102.
- Koch, P. B. (1991). Sex education. In R. M. Lerner, A. C. & Petersen, & J. Brooks- Gunn (Eds.), *Encyclopaedia of adolescence* (pp. 1004-1006). New York, NY: Garland.

- Kohut, H. (1971). *Restoration of the self*. Madison, CT: International Universities Press.
- Kopko, K. (2007). *Parenting styles and adolescents*. Retrieved from www.parentingaren.org.
- Kost, K., & Henshaw, S. (2012). *U.S. Teenage pregnancies, births and abortions, national trends by age, race and ethnicity*. San Diego, CA: McGraw-Hill Publication.
- Kowaleski-Jones, L., & Mott, F. L. (1998). Sex, contraception and childbearing among high-risk youth: Do different factors influence males and females? *Family Planning Perspectives, 30*, 163–169.
- Kroger, J. (2000). Ego identity status research in the new millennium. *International Journal of Behavioural Development, 24*(2), 145-148.
- Ku, L., Sonenstein, F. L., Lindberg, L. D., Bradner, C. H., Boggess, S., & Pleck, J. H. (1998). Understanding changes in sexual activity among young metropolitan men: 1979–1995. *Family Planning Perspectives, 30*(6), 256–262.
- Kumi-Kyereme, A., Awusabo-Asare, K., Biddlecom, A., & Tanle, A. (2007). Influence of social connectedness, communication and monitoring on adolescent sexual activity in Ghana. *African Journal of Reproductive Health, 11*(3), 133–149.
- Kwan, M., Greenleaf, W. J., Mann, L., Crapo, L., & Davidson, J. M. (1983). The nature of androgen action of male sexuality: A combined laboratory and self-report study in hypogonadal men. *Journal of Clinical Endocrinology and Metabolism, 57*, 557–562.

- Larson, R., & Wilson, S. (2004). *Adolescence across place and time: Globalization and the changing pathways to adulthood: Handbook of adolescent psychology*. New York, NY: Wiley.
- Leclerc-Madlala, S. (2013). Why young women in southern Africa are going for riskier older men. *Exchange on HIV/AIDS Sexuality and Gender*, 4, 5-8.
- Leitenberg, H., & Henning, K. (1995). Sexual fantasy. *Psychological Bulletin*, 117, 469–496.
- Leitenberg, H., Detzer, M. J., & Srebnik, D. (1993). Gender differences in masturbation and the relation of masturbation experience in preadolescence and/or early adolescence to sexual behaviour and sexual adjustment in young adulthood. *Archives of Sexual Behaviour*, 22(2), 87–98.
- Lidster, C. A., & Horsburgh, M. E. (1994). Masturbation: Beyond myth and taboo. *Nursing Forum*, 29(3), 18-27.
- Longmore, M. A., Manning, W. D., Giordano, P. C., & Rudolph, J. L. (2003). Contraceptive self-efficacy: Does it influence adolescents' contraceptive use? *Journal of Health and Social Behaviour*, 44, 45-60.
- Louw, D. A., Van Ede, D. M., & Louw A. E. (2009). *Human development* (2nded.). Cape Town, South Africa: Kagiso Tertiary.
- Louw, D., & Louw, A. (2007). *Child and adolescent development*. Bloemfontein, South Africa: The University of Free State.
- Magnusson, D. (1988). *Individual development from an interactional perspective: A longitudinal study*. Hillsdale, NJ: Erlbaum.

- Majed, M. A., & Fatema, A. B. (2009). Difference and relationships between stress with aggressive, social skills and social anxiety among the genders of school going adolescents. *India Psychological Review, 72*, 3-10.
- Manning, W. D., Longmore, M. A., & Giordano, P. C. (2006). Hooking up: The relationship contexts of "non-relationship" sex. *Journal of Adolescent Research, 21*(5), 459-483.
- Manning, W. D., Longmore, M. A., & Giordano, P. C. (2000). The relationship context of contraceptive use at first intercourse. *Family Planning Perspectives, 32*(3), 104–110.
- Martin, J. A., Hamilton, B. E., & Ventura, S. J. (2011). Births: Final Data for 2009. National Vital Statistics Reports. U.S. Department of Health and Human Services, *National Vital Statistics System, 60*, 1-9.
- Martin, W. E., & Bridgmon, K. D. (2012). *Research methods for the social sciences: Quantitative and statistical research methods – from hypothesis to results*. Somerset, NJ: Wiley.
- Martinez, G., Copen, C. E., & Abma, J. C. (2011). Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, 2006-2010 National Survey of Family Growth. *Vital Health Stat, 23*(31), 12-24.
- Martinson, F. M. (1994). *The sexual life of children*. Westport, CT: Bergin & Garvey.
- Masters, W. H., Johnson, V. E., & Kolodny, R. C. (1982). *Human sexuality*. Boston, MA: Little Brown.

- Mathew, B. (2006). Parental disciplinary practices on academic stress and mental health among adolescent children. *Journal of Psychological Researches*, 50(2), 75-78.
- Matsunaga, M. (2010). How to factor-analyze your data right: Do's, don'ts, and how-to's. *Int J Psychol Res.*, 3(1), 97-110.
- Maughan-Brown, B. (2012). Variation in concurrent sexual partnerships and sexually transmitted diseases among African men in Cape Town, South Africa. *Sexually Transmitted Diseases*, 39(7), 537–542.
- McAdams, D. P., & de St. Aubin, E. (1992). A theory of generativity and its assessment through self-report, behavioural acts, and narrative themes in autobiography. *Journal of Personality & Social Psychology*, 62, 1003-1015.
- Merriam-Webster's Advanced Learner's English Dictionary (2009). Dictionaries: *Journal of the Dictionary Society of North America*, 30(1), 143-150.
- Miller, B. C., Benson, B., & Galbraith, K. A. (2001). Family relationships and adolescent pregnancy risk: A research synthesis. *Developmental Review*, 21, 1–38.
- Miller, B. C., McCoy, J. K., Olson, T. D., & Wallace, C. M. (1986). Parental discipline and control attempts in relation to adolescent sexual attitudes and behaviour. *Journal of Marriage and the Family*, 48, 503–512.
- Miller, B. C., McCoy, J. K., Olson, T. D., & Wallace, C. M. (1986). Parental discipline and control attempts in relation to adolescent sexual attitudes and behaviour. *Journal of Marriage and the Family*, 503-512.

- Miller, B. C., Mon-son, B. H., & Norton, M. C. (1995). The effects of forced sexual intercourse on white female adolescents. *Child Abuse and Neglect, 19*, 1289–1301.
- Miller, B. C., Norton, M. C., Curds, T, Hill, E. J., Schvaneveldt, P., & Young, M. H. (1997). The timing of sexual intercourse among adolescents: Family, peer, and other antecedents. *Youth & Society, 29*(1), 54–83.
- Miller, B. C., Norton, M. C., Fan, X., & Christopherson, C. R. (1998). Pubertal development, parental communication, and sexual values in relation to adolescent sexual behaviours. *Journal of Early Adolescence, 18*, 27–52.
- Miller, K. E., Sabo, D. F., Farrell, M. P., Barnes, G. M., & Melnick, M. J. (1998). Athletic participation and sexual behaviour in adolescents: the different worlds of boys and girls. *Journal of Health and Social Behaviour, 39*, 108–123.
- Miller, K. S., Dark, L. F., Wendell, D. A., Levin, M. L., Gray-Ray, P., Velez, C. N., & Webber, M. P. (1997). Adolescent heterosexual experience: A new typology. *Journal of Adolescent Health, 20*, 179–186.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded source book* (2nd ed.). Newbury Park CA: Sage.
- Misra, T. (2006). Parenting behaviour and juvenile delinquency among low-income families. *Victims & Offenders, 13*(3), 336-348.
- Mitchell, K. J., Finkelhor, D., & Jones, L. M. (2011). *Prevalence and characteristics of youth sexting: A national study*. Retrieved from publications.org/content/early.

- Monahan K. C., Steinberg L., & Cauffman E. (2009). Affiliation with antisocial peers, susceptibility to peer influence, and antisocial behaviour during the transition to adulthood. *Dev Psychol.*, *45*(6), 1520–1530.
- Moore, A. M., Biddlecom, A. E., & Zulu, E. M. (2007). “Prevalence and meanings of exchange of money or girls for sex in unmarried adolescent sexual relationships in Sub-Saharan Africa,” *African Journal of Reproductive Health*, *11* (3), 44–61.
- Moore, S., & Rosenthal, D. (1993). *Sexuality in adolescence*. New York, NY: Routledge.
- Muhammad, N. A., Shamsuddin, K., Amin, R. M., Omar, K., & Thurasamy, R. (2017). Questionnaire development and validity to measure sexual intention among youth in Malaysia. *BMC Public Health*, *17*(157), 1-10.
- National Research Council and Institute of Medicine. (2009). *Adolescent health services: Missing opportunities*. Washington, D.C: The National Academies Press.
- Neuman, W.L. (2007). *Basics of social research methods: Qualitative and quantitative approaches* (2nd ed.). Boston, MA: Allyn and Bacon.
- New York University Child Development Centre. (1991). *Child psychiatry: A developmental approach* (2nd ed., pp. 89-95). Oxford, UK: Oxford University Press.
- Ngom, P., Magadi, M. A., & Owuor, T. (2003). Parental presence and adolescent reproductive health among the Nairobi urban poor. *J Adolesc Heal Elsevier*, *33*(5), 369–77.

- Nicholas, L. (2008). *Introduction to psychology*, (2nded.). Cape Town, South Africa: University of Cape Town Press.
- Nitko, J. A. (2001). *Educational assessment of students*. Jersey City, NJ: Prentice Hall.
- Nolen-Koeksema, S. (2004). *Abnormal psychology*. New York, NY: McGraw-hill.
- O'Sullivan, L. F., Mckeague, I. W., Dudley, C., Hearn, K. D., Varela, Y., & Miller, K. (2006). The development of the sexual self-concept inventory for adolescent girls. *Psychol Women Q.*, 30, 139-49.
- Oliver, M. B., & Hyde, J. S. (1993). Gender differences in sexuality: A meta-analysis. *Psychological Bulletin*, 114(1), 29-51.
- Owens, P. E. (2002). No teens allowed: The exclusion of adolescents from public spaces. *Landscape Journal*, 21(1), 156-163.
- Owusu, S. A. (2012). *Cultural and religious impediments against sex education*, Feature Article, Cultural-and-Religious-Impediments against-Sex-Education 258360. Retrieved from <https://www.ghanaweb.com/GhanaHomePage/NewsArchive/>
- Pallant, J. (2010). *SPSS survival manual* (4thed.). New York, NY: McGraw Hill.
- Palmqvist, R., & Santa-Virta, N. (2007). What friends are for: The relationships between body image, substance use, peer influence among Finish adolescents. *Journal of Youth and Adolescence*, 35(2), 203-216.
- Papalia, D. E., Olds, S. W., Feldman, R. D., & Kruk, R. (2007). *A child's world: infancy through adolescence*. Ryerson, ON: McGraw-Hill Ltd.

- Parker, G. (1983). *Parental overprotection: A risk factor in psychosocial development*. New York, NY: Grune & Stratton.
- Parker, G. (1984). The measurement of pathogenic parental style and its relevance to psychiatric disorder. *Social Psychiatry, 19*, 75-81.
- Patterson, G. R. (1982). *Coercive family process*. Eugene, OR: Castalia.
- Patterson, G. R. (1992). Developmental changes in antisocial behaviour. In R. D. Peters, R. J. MacMahon & V. L. Quinsey (eds), *Aggression and violence throughout the lifespan* (pp.52-82). Newbury Park, CA: Sage.
- Patterson G. R., Reid J. B., Dishion T. J. (1992). *Antisocial boys*. Eugene, OR: Castalia.
- Pazol, K., Zane, S. B., & Parker, W. Y. (2011). Abortion surveillance — United States, 2008. *Morbidity and Mortality Weekly Report, 60*, 1-5.
- Perris, C., Jacobsson, L., Lindstrom, H., Von Knorring, L., & Perris, H. (1980). Development of a new inventory for assessing memories of parental rearing behaviour. *Acta Psychiatrica Scandinavica, 61*, 265-274.
- Petersen, A. C. (1988). Adolescent development. *Annual Review of Psychology, 39*, 583-607.
- Petersen, J. L., & Hyde, J. S. (2010). A meta-analytic review of research on gender differences in sexuality, 1993-2007. *Psychological Bulletin, 136*, 21-38.
- Pike, L. B. (2001). *Sexuality and your child ages 3 to 7*. Retrieved from www.extension.missouri.edu/publications/DisplayPub.aspx.
- Poulin, M. (2007). Sex, money and pre-marital partnerships in Southern Africa. *Social Science and Medicine, 65*, 2383-93.

- Prejean, J., Song, R., & Hernandez, A. (2011). *Estimated HIV incidence in the United States, 2006—2009*. Los Angeles, CA: Gregory Publication.
- Pressley, M., & Cormick, C. B. (2007). *Child and adolescent development for educators*. New York, NY: Guildford Publication.
- Quansah, F. (2017). The use of Cronbach Alpha Reliability estimate in research among students in public universities in Ghana. *Africa Journal of Teacher Education*, 6(1), 56-64.
- Raaijmakers, Q. A. W. (2000). Adolescents' midpoint responses on Likert-type scale items: neutral or missing values? *Int J Public Opin R.*, 12(2), 209-17.
- Rai, R. N., Pandey, R. C., & Kumar, K. (2009). Perceived parental rearing style and personality among Khasi adolescents. *Journal of the Indian Academy of Applied Psychology*, 35, 57-60.
- Rajamanickam, M. (2007). *Behavioural problems in adolescent period*. New Delhi, India: Authors Press.
- Reese-Weber, M. (2000). Middle and late adolescents' conflict resolution skills and siblings: Associations with inter-parental and parent-adolescent conflict resolution. *Journal of Youth and Adolescence*, 29(6), 697-711.
- Reiss, I. L. (1960). *Premarital sexual standards in America*. Glencoe, IL: The Free Press.
- Rosenblum, G. D., & Lewis, M. (2003). *Emotional development in adolescence*. In G. Adams, & M. Berzonky, M. (Eds). Blackwell handbook of adolescence (pp. 43-54). Altha, FL: McGraw-Hill.

- Rosenthal, M. (2012). Human Sexuality: From Cells to Society. *Cengage Learning* (pp. 134–135). Retrieved from <https://en.wikipedia.org/wiki/Special:BookSources/9780618755714>.
- Rudman, L. A., & Heppen, J. B. (2003). Implicit romantic fantasies and women's interest in personal power: A glass slipper effect? *Personality & Social Psychology Bulletin*, *29*, 1357–1370.
- Rueter, M, A., & Conger, R. D. (1995). Antecedents of parent adolescent development. *Journal of Marriage and the Family*, *57*, 435- 448.
- Rutter, M., Graham, P., Chadwick, O. F. D., & Yule, W. (1976). Adolescent turmoil: Fact or fiction? *Journal of Child Psychology and Psychiatry*, *17*, 35-56. Retrieved from <https://doi.org/10.1111/j.14697610.1976.tb00372.x>
- Ryckman, R. M. (2008). *Theories of personality*. Belmont, CA: Thomson Wadsworth.
- Santelli, J. S., Brener, N. D., Lowry, R., Bhatt, A., & Zabin, L. S. (1998). Multiple sexual partners among U.S. adolescents. *Family Planning Perspectives*, *30*, 271–275.
- Santrock, J. W. (2007). *Adolescence*. New Delhi, India: McGraw Hill.
- Schachter, E. P., & Ventura, J. J. (2008). Identity agents: Parents as active and reflective participants in their children's identity formation. *Journal of Research on Adolescence*, *18*(3), 449-476.
- Schlein, S. (1987). *A way of looking at things*. New York, NY: Norton Publishers.
- Schultz, D. P., & Schultz, S. E. (2013). *Theories of Personality* (10thed.). Queensland, Australia: Wadsworth Cengage Learning.

- Sekaran, U. (2003). *Research methods for business: A skill-building approach* (4th ed.). New York, NY: John Wiley & Sons.
- Selman, R. L. (1980). *The growth of interpersonal understanding*. London: Academic Press.
- Selman, R. L., & Schultz, L. H. (1990). *Making a friend in youth: Developmental theory and pair therapy*. Chicago, IL: University of Chicago Press.
- Sennott, C., & Mollborn, S. (2011). College-bound teens' decisions about the transition to sex: Negotiating competing norms. *Advances in Life Course Research, 16*, 83–97.
- Sexual Information and Education Council of the United States [SIECUS]. (1997). Male involvement in teen pregnancy. *Shop Talk School Health Opportunities and Progress Bulletin, 2*(8), 1-31.
- Sharif, H. (1993). AIDS education efforts begin to address plight of Tanzania youth. *AIDS Captions, 1*(1), 20-21.
- Sherwin, B. B., Gelfand, M. M., & Brender, W. (1985). Androgen enhances sexual motivation in females: A prospective crossover study of sex steroid administration in the surgical menopause. *Psychosomatic Medicine, 7*, 339–351.
- Sieving, R., McNeely, C., & Blum, R. (2000). Maternal expectations, mother–child connectedness, and adolescent sexual debut. *Archives of Paediatrics and Adolescent Medicine, 154*, 809–816.
- Sigelman, C. K., & Rider, E. A. (2009). *Human development*. Altha, FL: Wadsworth Cengage Learning.

- Singh, S., & Darroch, J. E. (1999). Trends in sexual activity among adolescent American women: 1982–1995. *Family Planning Perspectives, 31*(5), 212-219.
- Slater, C., & Robinson, A. J. (2014). Sexual health in adolescents. *Clinics in Dermatology, 32*(2), 189–195.
- Smith, E. A., & Udry, J. R. (1985). Coital and non-coital sexual behaviours of white and black adolescents. *American Journal of Public Health, 75*(10), 1200–1203.
- Smith, E. A., Udry, J. R., & Morris, N. M. (1985). Pubertal development and friends: A biosocial explanation of adolescent sexual behaviour. *Journal of Health and Social Behaviour, 26*, 183–192.
- Sneed, C. D., Strachman, A., Ngugen, C., & Morisky, D. E. (2009). The influence of parental monitoring and communication on adolescents' sexual behaviour and intentions. *Vulnerable Children and Youth Studies, 4*(1), 37-47.
- Sonia, G., & Amar, R. (2012). Factors of child-rearing practices: A qualitative analysis. *Journal of Psychology, 3*(2), 99-105.
- Spear, H. J.; Kulbok, P. A. (2001). Adolescent Health Behaviours and Related Factors: A Review. *Public Health Nursing, 18*(2), 82–93.
- Spera, C. (2005). Achievement. *Educational Review, 17*(2), 125-146.
- Spitz, R. A. (1949). *Autoeroticism: The psychoanalytic study of the child*. New York, NY: International Universities Press.
- Stangor, C. (2004). *Social groups in action and interaction*. New York, NY: Psychology Press.

- Steinberg, L. D., & Lavine, A. (1997). *You and your adolescent*. New York, NY: Harper Publishers.
- Steinberg, L., & Monahan, K. C. (2007). Age differences in resistance to peer influence. *Developmental Psychology*, *43*(6), 1531-1543.
- Struckman-Johnson, C., Struckman-Johnson, P. B., & Anderson, D. (2003). Tactics of sexual coercion: When men and women won't take no for an answer. *Journal of Sex Research*, *40*, 76–86.
- Sugimura, K., & Shimizu, N. (2010). The role of peers as agents of identity formation in Japanese first-year university students. *Identity*, *10*(2), 106-121,
- Sundaram, A., Juarez, F., Bankole, A., & Singh, S. (2012). Factors associated with abortion seeking and obtaining a safe abortion in Ghana. *Studies in Family Planning*, *43*(4), 273–86.
- Surveillance summaries (2010). Giardiasis surveillance—United States, 2009–2010. *Morbidity and Mortality Weekly Report: Surveillance Summaries*, *61*(5), 13-23.
- Tamizharasi, K. E., & Manickaraj, S. (2006). Enhancement of interest, motivation and decision making skills among higher secondary girls. *Journal of Psychological Researches*, *50*, 2, 101-108.
- Times in India* (2009). *India in Transition*. New Delhi, India: BiblioBazaar, LLC.
- Udry, J. R., & Campbell, B. C. (1994). Getting started on sexual behaviour. In A. S. Rossi (Ed.). *Sexuality across the life course* (pp. 187–207). Chicago, IL: University of Chicago Press.

- Udry, J. R., Billy, J. O. G., Morris, N. M., Groff, T., & Raj, M. (1985). Serum androgenic hormones motivate sexual behaviour in adolescent boys. *Fertility and Sterility*, *45*, 90–94.
- Udry, J. R., Talbert, L. M., & Morris, N. M. (1986). Biosocial foundations for adolescent female sexuality. *Demography*, *23*, 217–230.
- Ugoji, F. N., & Ebenuwa-Okoh, E. E. (2015). Parenting styles, peer group influence as correlate of sexual behaviour among undergraduate adolescents. *International Journal of Humanities Social Sciences and Education (IJHSSE)*, *2*(1), 103-110.
- Upchurch, D. M., Aneshensel, C. S., Sucoff, C. A., & Levy-Storms, L. (1999). Neighbourhood and family contexts of adolescent sexual activity. *Journal of Marriage and the Family*, *61*, 920–933.
- Van de Bongardt, D., de Graaf, H., Reitz, E., & Dekovic, M. (2014). Parents as moderators of longitudinal associations between sexual peer norms and Dutch adolescents' sexual initiation and intention. *Journal of Adolescent Health*, *55*, 388–393.
- Veenstra, R., Dijkstra, J. K., Steglich, C., & Van Zalk, M. H. W. (2013). Network–behavior dynamics. *Journal of Research on Adolescence*, *23*(3), 399-412.
- Véronneau, M. H., Koestner, R., & Abela, J. R. Z. (2005). Intrinsic need satisfaction and well-being in children and adolescents: An application of the self-determination theory. *Journal of Social and Clinical Psychology*, *24*, 280–292.

- Walter, H., Vaughn, R., Gladis, M., Ragin, D., Kasen, S., & Cohall, A. (1993). Factors associated with AIDS-related behavioural intentions among high school students in an AIDS epicenter. *Health Education Quarterly*, 20, 409-420.
- Weinstein, M., & Thornton, A. (1989). Mother-child relations and adolescent sexual attitudes and behaviours. *Demography*, 26(4), 563-577.
- Whitaker, D. J., & Miller, K. S. (2000). Parent-adolescent discussions about sex and condoms: Impact on peer influences of sexual risk behaviour. *Journal of Adolescent Research*, 15, 251-273.
- Whitbeck, L., Conger, R., & Kao, M. (1993). The influence of parental support, depressed affect, and peers on the sexual behaviours of adolescent girls. *Journal of Family Issues*, 14(2), 261-278.
- Whiting, J. W., Burbank, V. K., & Ratner, M. S. (1986). The duration of maidenhood across cultures. In J. B. Lancaster, & B. A. Hamburg. (Eds.), *School-age pregnancy and parenthood: Biosocial dimensions* (pp. 273-302). Hawthorne, NY: Aldine de Gruyter.
- Widmer, E. D. (1997). Influence of older siblings on initiation of sexual intercourse. *Journal of Marriage and the Family*, 59, 928-938.
- Winnicott, D. W. (1965). *Ego distortion in terms of true and false self*. New York, NY: International UP Inc.
- WHO. (2009). *Strengthening the health sector response to adolescent health and development* (pp. 1-12). Geneva, Switzerland: World Health Organisation.
- Zikmund, W. G. (2003). *Business research methods* (7th ed.). New Delhi, India: Thomson/ South-Western.

Zulu, E. M., Dodoo, F. N. A., & Ezeh, A. C. (2002). Sexual risk-taking in the slums of Nairobi, Kenya, 1993–8. *Popul Stud*, 56(3), 311–23.

APPENDICES

APPENDIX A
QUESTIONNAIRE

UNIVERSITY OF CAPE COAST

DEPARTMENT OF GUIDANCE AND COUNSELLING

Dear Respondent,

You have been selected to participate in this study aimed at examining the *“Influence of child-rearing practices, peer pressure and gender on adolescents’ sexual adventurism”*. Attached is the survey instrument to assess your opinion on issues related to the topic stated above. Your participation in this study is very important because it will help to achieve the goal of the study as just stated. Kindly spend some minutes to supply information on each item of this questionnaire as honestly as possible. All information gathered will be treated confidentially and would be used for the purpose of research only. That is why your name is not required.

Thank you for your anticipated cooperation.

Sylvia Eyiah-Bediako,

University of Cape Coast,

Cape Coast,

Ghana, West Africa.

Tel no.: 020 8232410/0243086038

Email: eyiahbediakosylvia@yahoo.com

SECTION A –SOCIO-DEMOGRAPHIC CHARACTERISTICS

INSTRUCTION: For each of the items numbered 1-4, please indicate your response by writing or ticking [] only the option most true of you.

1. Gender: Male [] Female []

2. Place of residence: Urban [] Rural community []

3. Age

(years):.....

.....

4. Class: JHS 1 [] JHS 2 [] JHS 3 []

5. SECTION B - CHILD-REARING PRACTICES

For each of the items labeled SD, D, A, and SA, please indicate your response by ticking [] only the option most true of you.

Strongly Disagree – SD, Disagree – D, Agree – A, Strongly Agree –SA

No.	Statements	Strongly Disagree	Disagree	Agree	Strongly Agree
	DISCIPLINE				
1.	My father or mother does not talk to me when I do something wrong				
2.	My parents punish me for the little wrong things I do				
3.	I am severely punished for going wrong even when it is not my fault				
4.	I am beaten more than necessary when I go wrong				
5.	When something happens, my parents do not allow me to explain myself				

6.	I am punished for every mistake that I do at home				
7.	My parents say unpleasant things about me to others (e.g., <i>You are naughty</i>)				
8.	When I do something wrong my parents do not care about it				
9	My parents sometimes send me to bed without food as punishment for wrongdoing				
10	My parents do not tolerate mistakes at home				
	EMOTIONAL WARMTH				
11.	My parents show me so much love				
12.	My parents are always busy to pay attention to me				
13.	If I am unhappy, my parents try to console me				
14.	My opinions are not considered in decision making at home				
15.	My parents like being with me				
16.	I am not able to discuss my personal issues with my parents				
17.	My parents do well to provide my needs for me				
18.	My parents do not				

	understand my feelings or emotions				
19.	My parents allow me to have different opinions				
20.	I sometimes feel that my parents do not like me				
21.	My parents are not friendly or welcoming				
22.	My parents are proud of me when I do something good				
	MONITORING				
23.	My parents interfere in everything I do				
24.	My parents want to know whatever am doing at any point in time (e.g. <i>playing with friends</i>)				
25.	What I wear and how I should look like is of interest to my mother or father				
26.	My parents tell me not to learn bad things from friends				
27.	My parents want to know my friends				
28.	My parents want to find out what I do when in school				
29.	My parents tell me what I should do at home				
30.	My parents questions me on whatever I do or wherever I				

	go				
31.	My parents expect a lot from me in whatever activity I engage in				
32.	My parents do not give me privacy at home				

Adapted from Gerisma, Arrindell, van der Veen, and Emmelkamp (1991)

SECTION C – PEER PRESSURE

For each of the items labeled, 'Untrue of me', 'Somewhat untrue of me', 'Somewhat true of me', 'true of me', please indicate your response by ticking [√] only the option that best apply to you.

No.	Statements	Untrue of me	Somewhat untrue of me	Somewhat true of me	True of me
1.	My friends encourage me to engage in sexual activities.				
2.	I give in to sexual relationships to be accepted by my friend.				
3.	My best friend encourages me to get into sexual relationship.				
4.	I enjoy talking about sexual activities with my friends				
5.	I have learnt sexual acts from my peers				
6.	Having friends who are sexually active is fun.				

7.	I feel obliged to do so to do what my friends do				
8.	My friends give me plans of having sex with my boy/girlfriend				
9.	I feel I belong to a great group when I engage with them in sexual activities.				
10.	I feel loved when I am in the company of my peers.				
11.	I sometimes try to engage in the sexual acts that my friends engage in				
12.	There are things about sex that my friends tell me that I want to try.				
13.	My friend introduced me to sexual activities.				
14.	I enjoy watching pornography with my friends				
15.	When I don't want to have sex, my friends say I am not matured.				
16.	I don't want my friends to laugh at me so I give in to their pieces of advice on sexual activities.				
17.	When my friends are having sex with their partners, I feel pressured to do same.				
18.	Having sex give me the opportunity to be like my friend.				
19.	I engage in sexual activities to gain respect from my friends				
20.	I feel pressured by my peers				

	to have sex.				
21.	My friends approve of my sexual behaviour.				
22.	I go along with the sexual demands of my friends just to make them happy				

Self-designed.

SECTION D – SEXUAL ADVENTURISM

Each of these items is followed by four options labeled “Untrue of me”, “Somewhat untrue of me”, “Somewhat true of me”, “True of me”, Please, indicate your response by ticking [√] only the option that best applies to you.

No.	Statements	Untrue of me	Somewhat untrue of me	Somewhat true of me	True of me
	SEXUAL INTENTION				
1.	I desire to engage in sexual activities				
2.	I would like to engage in sexual activities to see how it feels like				
3.	Most times, I want to have sex if I find a partner who is willing to do so with me				
4.	I constantly look for sexual opportunities				
5.	I have to engage in sexual activities for money				
6.	I intend to touch private part of the opposite sex when there is the opportunity				

7.	I have plans of engaging in sexual acts (e.g., kiss, fondle, etc)				
8.	I propose or accept proposals because I want to satisfy my sexual desires				
9.	I have plan of knowing more about sex				
	ATTITUDE				
10.	I often feel like having sex				
11.	I have strong sexual desires I have to satisfy				
12.	My sexual energy needs not to be controlled				
13.	Engaging in sexual activities is all that matters				
14.	I feel I should not live without sex				
15.	I feel addictively drawn to certain sexual activities				
16.	I feel like masturbating				
17.	I like watching pornographic materials				
18.	I feel good engaging in sexual acts				
19.	I wish I know more about sexual activities than I do know already				

	SELF-EFFICACY				
20.	Sex is something I have to taste at this stage				
21.	I sometimes decide to find someone with who to engage in sexual activity				
22.	Having sex is something I easily do				
23.	Sex is a duty I must perform				
24.	I am unable to say no to sex				
25.	I lose all power to protect myself when sexually approached				
26.	I have decide to have sex with more than one person at a time				
27.	I am sexually active				
28.	I plan sexual activity with my boyfriend/girlfriend				
29.	I have a boyfriend/girlfriend I have sex with				
30.	Once I feel like having sex, I have to do it				

Adapted from Muhammad, Shamsuddin, Amin, Omar, and Thurasamy (2017)

APPENDIX B

VALIDATION RESULTS

CHILD-REARING PRACTICES SCALE

Constructs	Items	Loadings	Sig.	AVE	Cr. Alpha	MSV
Discipline	q1	.62	.031	.59	.731	.52
	q2	.84	.010			
	q3	.49	.015			
	q4	.79	.015			
	q5	.60	.002			
	q6	.91	.008			
	q7	.82	.003			
	q8	.83	.001			
	q9	.73	.000			
	q10	.93	.031			
Emotional Warmth	q11	.76	.000	.65	.758	.58
	q12	-.69	.005			
	q13	.95	.000			
	q14	.91	.036			
	q15	.94	.000			
	q16	-.83	.040			
	q17	.69	.000			
	q18	.75	.021			
	q19	.74	.005			
	q20	.75	.000			
	q21	.78	.000			
	q22	.83	.000			
Monitoring	q23	.97	.000	.70	.732	.64
	q24	.64	.000			
	q25	.96	.000			
	q26	.80	.000			
	q27	.85	.000			
	q28	.78	.000			
	q29	.77	.000			
	q30	.82	.000			
	q31	.95	.000			
	q32	-.81	.018			

AVE- Average Variance Extracted; CR- Composite Reliability; MSV- Maximum Shared Variance;

PEER PRESSURE SCALE

Items	Loadings	Sig.	Remark	AVE	Cr. Alpha	MSV
Q1	.56	.000	Accepted	.59	.925	.47
Q2	.83	.000	Accepted			
Q3	.73	.000	Accepted			
Q4	.77	.000	Accepted			
Q5	.81	.000	Accepted			
Q6	.80	.000	Accepted			
Q7	.75	.000	Accepted			
Q8	.87	.000	Accepted			
Q9	.87	.000	Accepted			
Q10	.34	.000	Rejected			
Q11	.87	.000	Accepted			
Q12	.87	.000	Accepted			
Q13	.70	.000	Accepted			
Q14	.79	.000	Accepted			
Q15	.32	.000	Rejected			
Q16	.79	.000	Accepted			
Q17	.85	.000	Accepted			
Q18	.89	.000	Accepted			
Q19	.85	.000	Accepted			
Q20	.83	.000	Accepted			
Q21	.84	.000	Accepted			
Q22	.86	.000	Accepted			

SEXUAL ADVENTURISM

Constructs	Items	Loadings	Sig.	AVE	CR	MSV
INTENT	q1	.70	.000	.50	.890	.38
	q2	.74	.000			
	q3	.71	.000			
	q4	.71	.005			
	q5	.69	.000			
	q6	.69	.000			
	q7	.76	.000			
	q8	.71	.000			
	q9	.65	.000			
EFFICACY	q10	.71	.000	.59	.851	.37
	q11	.89	.018			
	q12	.89	.000			
	q13	.83	.000			
	q14	.72	.041			
	q15	.68	.000			
	q16	.73	.000			
	q17	.75	.000			
	q18	.72	.000			
ATT	q19	.76	.000	.58	.890	.44
	q20	.68	.0270			
	q21	.85	.000			
	q22	.69	.000			
	q23	.79	.000			
	q24	.82	.000			
	q25	.86	.000			
	q26	.69	.000			
	q27	.74	.000			
	q28	.83	.000			
q29	.69	.000				

APPENDIX C

ETHICAL CLEARANCE

UNIVERSITY OF CAPE COAST

INSTITUTIONAL REVIEW BOARD SECRETARIAT

TEL: 0558093143 / 0508878309/ 0244207814

C/O Directorate of Research, Innovation and Consultancy

E-MAIL: irb@ucc.edu.gh

OUR REF: UCC/IRB/A/2016/298

YOUR REF:

OMB NO: 0990-0279

IORG #: IORG0009096



20TH FEBRUARY, 2019

Ms Sylvia Eyah-Bediako
Department of Guidance and Counselling
University of Cape Coast

Dear Ms Eyah-Bediako,

ETHICAL CLEARANCE – ID: (UCCIRB/CES/2018/21)

The University of Cape Coast Institutional Review Board (UCCIRB) has granted **Provisional Approval** for the implementation of your research protocol titled **Influence of Child-rearing Practices, Peer Pressure and Gender on Adolescents' Sexual Adventurism**. This approval requires that you submit periodic review of the protocol to the Board and a final full review to the UCCIRB on completion of the research. The UCCIRB may observe or cause to be observed procedures and records of the research during and after implementation.

Please note that any modification of the project must be submitted to the UCCIRB for review and approval before its implementation.

You are also required to report all serious adverse events related to this study to the UCCIRB within seven days verbally and fourteen days in writing.

Always quote the protocol identification number in all future correspondence with us in relation to this protocol.

Yours faithfully,

for Samuel Asiedu Owusu, PhD

UCCIRB Administrator
ADMINISTRATOR
INSTITUTIONAL REVIEW BOARD
UNIVERSITY OF CAPE COAST
Date: 24/02/19