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Teenage prostitution — Child abuse: A survey of the Ilorin situation

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Summary

In the light of civilization that has come to erode some of the sexual constraints in the traditional African society's openness today toward sexuality and sexual expression, adolescents commence sexual activity at an increasing earlier age and the average marriage come much later. It is therefore not surprising that an increasing proportion of adolescents in Nigeria are engaging in teenage prostitution.

This study is an attempt to conduct a general survey into the nature of teenage prostitution in Nigeria and to provide information on the prevalence, factors, trends and characteristics of teenage prostitution. A semi-structured questionnaire was administered to 150 known teenage prostitutes. Among other things the finding suggest that childhood sexual abuse perhaps leads to prostitution. Half of the sample used in the study had their first sexual experience early in life, and about the same number lived with their parents when they began prostituting. Implications of the findings were discussed and suggestions made for further research.

Resume

En vue de la civilisation qui est venue bouleverser certaines contraintes sexuelles dans les sociétés traditionnelles africaines, et l'ouverture de la société à l'égard du sexe et de l'expression sexuelle, le début de l'activité sexuelle a un âge relativement bas et l'âge moyen de mariage venant plus tard. Ce n'est donc pas surprenant qu'une proportion croissante d'adolescents au Nigeria s'engage dans la prostitution juvénile.

Cette étude est une tentative de dégager un aperçu général dans la nature de la prostitution juvénile au Nigeria et de donner des informations sur la prévalence, les facteurs, le déroulement et les

caractéristiques de la prostitution juvénile. Un questionnaire semi-structuré a été distribué à 150 prostituées juvéniles connues. Parmi d'autres choses les découvertes suggèrent que l'abus sexuel juvénile conduit peut-être à la prostitution avec la moitié des questionnées ayant leur premier rapport sexuel dès le bas âge et l'autre moitié déclarant avoir vécu avec leurs parents ou tuteurs quand elles ont commencé à prostituer. Les implications des découvertes furent discutées et des conseils furent prodigués pour plus de recherche.

Introduction and background to the study

Adolescence is a time when autonomy is negotiated. It is also a time of sexual experimentation, which for some unfortunately results in unwanted pregnancies[1]. Research interest in adolescent fertility is novelty throughout the world but more so in developing countries like Nigeria. Interest in the various aspects of adolescent fertility is growing due mainly to researches reaching across many cultures and countries, that has provided some link between adolescent fertility and teenage prostitution and other social and medical problems[2,3,4]. Teenage prostitution is fast becoming a growing area of concern, and has drawn attention from medical, social sciences and those in the helping professions. Teenage prostitution and child sexual abuse is fast becoming common place in Nigeria judging from reports from newspapers and magazines. In Africa, studies in many countries, including Nigeria confirmed that adolescent fertility is strongly associated with high rates of abortion, child abandonment, still births, infant and maternal mortality and morbidity, high school drop-out rate among females which in many instances result in teenage prostitution[5,6,7].

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Several studies including that of Seng, identify child sexual abuse as a predictor of adolescent prostitution[2]. In a study which he carried out exploring the relationship between sexual abuse and adolescent prostitution his findings suggested that the relationship involves runaway behaviour as an intervening variable. The implication of this finding is that both sexually abused and runaway may lead to prostitution. In another study by Gibson-Alyette *et al.* [8] the characteristics and functioning of adolescent female prostitutes and non-prostitute delinquents were compared with normal female adolescents as control. The most salient finding in the study was that the adolescent prostitutes and delinquents displayed greater psychopathology. Other findings include the fact that prostitutes exhibit a more negative attitude towards men and are more likely to have been in a special education class. In another study by Earl and David[9] a semi-structured questionnaire was administered to 50 prostitutes matched by age, sex and socio-economic status. The findings showed that factors related to family background may be less important as potential determinant for entry into prostitution than influences related to financial gain, sexual orientation and early sexual experiences.

The challenges of adolescence which include coming to grips with bodily changes, deciding what it means to be a man or woman in our society, developing a system of values (including sexual values) can be quite stressful. In the light of the civilization that has come to erode some of the sexual constraints in the traditional African societies and the society's openness towards sexual expression today, adolescent commencement of sexual activity at an increasingly earlier age and the marriage age coming much later[4,10], it is not surprising that an increasing proportion of adolescents are engaging in teenage prostitution. This often leads to unanticipated negative consequences like sexually transmitted diseases and teenage prostitution with all the medical risks associated. They also expose a large number of sexually active boys and men to the risk of sexually transmitted diseases[11,12,13].

Studies on the prevalence, predictive factors, trends and characteristics of teenage prostitution are virtually non-existent or at best very scanty in Nigeria. It is the concern of this study to carry out a survey of the factors, trends and characteristics of teenage prostitution in Ilorin, Nigeria.

Materials and methods

A semi-structured questionnaire was constructed by the authors to elicit information such as age, level of education and income from prostitution. Respondents were also asked with whom they lived, for how long they had been in prostitution and whether or not their parents were aware. The questionnaire is attached as appendix.

A Senior Nursing Officer (SNO) who had been in research for five years and been involved in sexually transmitted disease programme of the University of Ilorin Teaching Hospital (UIH) for three and a half years administered the questionnaire.

In administering the questionnaire to the prostitutes, she carefully selected two young men (who she knew were in the age range of those teenage prostitutes tended to patronise) to accompany her. The prostitutes saw these young men as potential customers and therefore tended to respond to question more willingly in their presence. The prostitutes were given incentives in the form of iron tablets and vitamins. This is based on another study that suggested that many of them appreciated iron tablets to build up their blood. The questionnaire was administered by the SNO in company of either of the young men in private. Confidentiality of information collected from all respondents were assured them. No name or picture was taken at any time during the period of administering the questionnaire. Home addresses of the respondents were not collected. All interviews and filling of questionnaire forms were conducted over a period of three months 7:30 pm and 11:30 pm each day until data collection was completed.

Data analysis was done using the SPSS Programme on the computer at the University of Ilorin Computer Centre. χ^2 statistics was used as appropriate although most of the data set were more of frequency distribution.

Results

One hundred and fifty teenage prostitutes were interviewed. Table 1 shows the age distribution of the subjects. Fifty three (35.3%) were 15 years of age or younger. Only 32 (22%) were living with their parents. Seventy two (48%) were living alone, mainly in hotels and small private rooms, usually in groups (Table II).

Fifty three (35.3%) claimed they had regular jobs during the day but majority (54.7%) had no other

jobs. There were no responses from 15 individuals (Table III).

Table I: Age and distribution of the subjects

Age (Years)	Number
13	7 (6%)
14	19 (6%)
15	27 (14%)
16	24 (15.3%)
17	21 (22.0%)
18	30 (24.0%)
19	22 (18.7%)
Total	150 (100.0%)

Table II: Social setting

Living with parents	32 (22%)
Living with relatives	45 (30%)
Living alone	72 (48%)
Total	150 (100%)

Table III: Economic setting

On regular job	53 (35.3%)
No other job	82 (54.7%)
No response	15 (10.0%)
Total	150 (100.0%)

The intention to marry in the future was explored (Table IV). Ninety (60%) of the 150 would like to marry while 45 (30%) definitely have decided not to marry. Fifteen (10%) were not yet sure whether or not they would like to marry.

Table IV: Issue of marriage

Wants to marry	90 (60%)
Will not marry	45 (30%)
Undecided	15 (10%)
Total	150 (100%)

Table V shows the age at which they had the first sexual experience and the age at which they commenced prostitution. Seventy-five (50%) had their first sexual experience before or at the age of 15

years. On the other hand, fifty-three (35.3%) of the 150 subjects commenced prostitution before or at the age of 15 years. The difference between age of first sexual experience and the age at commencement of prostitution was highly significant (1 df) = 6.009; ($P < 0.025$). One hundred and five (70%) of the 150 subjects enjoy prostitution while the rest, 45 (30%) disliked the business (Table VI). The majority, 81 (54%), engage in prostitution for financial reasons. The remaining 69 (46%) offered other reasons (Table VII).

Table V: Age at exploration

Age group — >	< 15 years	16 - 19 years	Total
Age at first sexual experience	75	75	150
Age at starting prostitution	53	97	150
Total	128	172	300

$$\chi^2 (\leq 1 \text{ df}) = 6.009 \quad P < 0.025$$

Table VI: Reaction to prostitution

Enjoy prostitution	105 (70%)
Dislike prostitution	45 (30%)
Total	150 (100%)

Table VII: Reasons for prostitution

Financial needs	81 (54%)
Other reasons	69 (46%)
Total	150 (100%)

The issue of the risk of sexually transmitted diseases was explored. Table VIII shows that 90 (60%) knew about sexually transmitted disease, 45 (30%) did not know anything about it, while 15 (10%) offered no response. Table IX showed that 105 (70%) heard about AIDS while the remaining 45 (30%) never heard about it. Seventy-five (50%) were afraid of AIDS while the remaining 75 (50%) were not.

Seventy five (50%), mainly those who were afraid of AIDS, used condom as preventive, 60 (40%) relied on traditional methods while the remaining 15 (10%) did not use anything or know what to do (Table X).

Table VIII: Knowledge of sexually transmitted disease (STD)

Knows about them	90 (60%)
Do not know about them	45 (30%)
No response	15 (10%)
Total	150 (100%)

Table IX: Knowledge of AIDS

(a) Knows about it	105 (70%)
Never heard about it	45 (30%)
Total	150 (100%)
(b) Afraid of AIDS	75 (50%)
Not afraid of AIDS	75 (50%)
Total	150 (100%)

Table X: Precaution against STD

Uses contraceptives (condom)	75 (50%)
Uses traditional methods	60 (40%)
Do not know what to do	15 (10%)
Total	150 (100%)

Discussion

In Nigeria, prostitution is regarded as a shameful act and nobody wants to be openly identified as a prostitute. The trend in our data clearly suggests that the issue of child sexual abuse and adolescent prostitution in Nigeria is one that should attract the attention of both the medical professional, social scientists and the social services agencies. A situation where 35.3% percent of total respondents were sexually active to the extent of being prostitutes by age 15 years demands urgent attention. The challenge here is not merely to motivate these adolescents to use effective contraceptives devices but to aggressively reduce incidence of widespread child sexual abuse and teenage prostitution. This finding is consistent with assertion by Seng that childhood sexual abuse often leads to prostitution[2]. It is difficult to say whether there is an increase in prostitution among teenagers, but sex education may help to reduce it's prevalence and prevent attendant complications.

The finding that about 52 per cent of the total respondents began prostituting when they were living with either their parents or with some relatives is

worthy of note. It is probable that factors such as poverty, family background, and traditional extended family practices in Nigeria where children are not cared for and provided for by their natural parents but are sent to relatives in the extended family structure may result in child neglect. Equally worthy of note is the fact that 54 per cent of all respondents took to prostitution purely for financial considerations. This is consistent with findings by Earle and David that a more important determinant for entry into prostitution is related to financial gain, sexual orientation and early sexual experience[9].

Majority (60%) of the respondents were aware of sexually transmitted disease. Seventy percent claimed to have heard about AIDS, whereas only half of them were actually aware that AIDS is both deadly and incurable. When asked how the respondents hoped to protect themselves from STD only half responded that they will make use of contraceptives. As many as 15% said they did not know, while 40% claimed that they would employ traditional medicine to prevent STD. These findings suggest that teenagers who begin sexual activity at an increasingly earlier age and with more partners have a very high risk of exposure to one or more sexually transmitted diseases.

The challenge is sexual health education, emphasizing the need to be aware of dangers of early sexual experience. The need to teach proper parenting of teenagers to parents and the need to channel the energy of these young individual in more productive ways should be explored. The social agencies such as the Ministry of Social Development should take a keen interest in such issues and in teenage prostitution.

Baby abandonment is another dimension worthy of attention. It is such teenage pregnancies that favour this practice. Babies of such mothers are sometimes thrown into the gutter. This indeed is the height of child abuse and must be prevented by all means. Adults who encourage teenage prostitution should receive the full penalty of the offence. Laws should be enacted to make the penalties more severe than they appear to be at the moment.

Admittedly the sample size in this study is relatively small due to logistic problems in identifying teenage prostitutes, it's value lies in emphasizing the need for a more comprehensive study to determine the extent of the problem, not only in Ilorin but also in various parts of Nigeria. We are not aware of any such comprehensive study on

which preventive measures could be based. Yet the magnitude of the problems must be defined before a meaningful preventive programme could be established.

References

1. Noel JL. The relationship of self concept and autonomy to oral contraception compliance among adolescent female. *Journal of Adol. Health Care (Sexually active teenagers)* 1988; 2 (3): 11-13.
2. Seng MJ. Child sexual abuse and adolescent prostitution: A comprehensive analysis. *Adolescence* 1985; 24, (95): 665-673.
3. Deisher RW, Farrow JA, Hope V, Litch Field C. The pregnant adolescent prostitutes. *AUM J. Dis. Child*, 1989; 143 (10): 1162-1165.
4. Gyepl-Garbah B. Adolescent fertility in Sub-Saharan Africa. The Pathfinder Fund, Boston, Massachusetts, 1985.
5. Akingba JB, Gbajumo SA. Procured abortion counting the cost. *J. of Nig. Med. Assoc.* 1972; 7 No. 2, 7 (2): Page 40-48.
6. Gachuchi JM. Teenage pregnancies — The psychosocial and economic consequences. Paper presented for the seminar of Adolescent Fertility Management. Nairobi (IPPF) October 20-31, 1980.
7. Njoku W. Social background of teenage mothers. Research Report Presented at the IPPF Seminar on Adolescent Fertility Management. Oct. 23-31, 1980.
8. Gibson-Ainyette T, Templer DI, Brown R, Veaco L. Adolescent female prostitutes. *Arch. Sex Beh.* 1988; 17: 665-675.
9. Earle CM, David H. A psycho-social study of male prostitution. *Arch. Sex Beh.* 1989; 18-25.
10. Adegoke AA. Correlates of pubertal problems among adolescents in Kwara State, Unpublished Ph.D. thesis, University of Ilorin, 1987.
11. Gilchrist MJR, Raush JL. Office microscopic examination for sexually transmitted disease. *Adol. Health Care*, 1988; 2: 83-92.
12. Urabes S, Yoshida S, Mizuguchi Y. Sexually transmitted disease among prostitutes in Funnovia, Japan. *Jpn. J. Med. Sci. Bio.* 1988; 41: 15-20.
13. Debra S. Contraceptive use. *Adol. Health Care* 1988; 1: 8-13.

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Teenage prostitution questionnaire: Appendix

1. With whom did you live as a child?
Both parents () Mother () Father ()
Relative ()
2. With whom are you living now?
Parents () Mother alone () Sister () Relative ()
Alone ()
3. When did you have your first sexual experience?
(a) Before 15 years () (b) At 15 years ()
(c) 16-19 years ()
4. At what age did you start prostitution?
(a) Before 15 years () (b) At 15 years ()
(c) After 15 years ()
5. Do you enjoy prostitution?
Yes () No () No Response ()
6. Do you still intend to marry?
Yes () No () Not Sure ()
7. Do you keep a regular job during the day time?
Yes () No () No Response ()
8. What led you into prostitution?
Financial () Others ()
9. Have you ever heard of sexually transmitted diseases?
Yes () No () No Response ()
10. Have you heard of AIDS?
Yes () No ()
11. Are you afraid of AIDS?
Yes () No () Unsure ()
12. How do you protect yourself against AIDS or Sexually Transmitted Diseases (STD) generally
(a) Contraceptives () (b) Traditional Methods () (c) Do not know ()