Adolescent decision-making about sex and sexual relationships among the perspective of displaced adolescent in camps in Benue state, Nigeria

#### Abstract

Maslow's Theory provides a useful framework for studies evaluating concerns about decisionmaking based on human needs. This study assessed adolescents' decision-making about sex and sexual relationships during times of displacement in Benue State, Nigeria. It used a qualitative approach, collecting data using an interview guide structured using the Maslow hierarchy of needs. Pre-coded themes were used in the thematic analysis. Displaced adolescent girls' ambivalence in decision-making, low self-esteem, and vague aspirations significantly influence their decision to remain in sexual relationships or have sex. The participants' engagement in sex was often influenced by the need to satisfy get basic needs or a promise fulfilled, while male deciding power overruled for sex in general and safe sex practices. These results underscore the necessity for interventions that not only attend to the physiological, safety, and social requirements but also disrupt dominant gender norms, boost self-esteem, and foster defined future goals among displaced girls.

### Introductions

There has been increased research and understanding on adolescent sexual behavior in recent years (1,2). As one grows into teenage hood, they are faced with the desire to express feelings of affection, love, and intimacy in ways that meet societal expectations—those of their partners and themselves(3). For girls living in areas faced with conflicts and displacement, studies reveal these settings, they consistently balance competing sexual and reproductive health and rights (SRHR) risks against broader livelihood opportunities(4). Research in these settings has also reported an increase in reports of unexpected pregnancies, STIs, including HIV, and other SRHR issues(5). Thus, understanding how adolescent girls navigate decisions about their sex life and relationships is of importance to inform adolescent health educational interventions in conflict-affected and low-resource areas. Exiting literature on adolescent sexual behavior has focused on their social, cognitive, emotional, and perceptions about sexual readiness(2,6). In Africa, must research has explored safe sex practices and factors that motivate or discourage sex practices in times of displacement mainly using a quantitative approach(2,7,8). Nevertheless, the extent to which

teenagers' lived experiences influence their decision-making around sex and sexual relationships is still poorly understood. Further, research that use a framework such as Maslow's hierarchy of human needs, which establishes a clear conceptual foundation and provides a systematic outline, is limited in its application to adolescent decision-making about sex and sexual relationships.

According to Maslow, human needs fall into five categories, and motivation for a need strongly depends on its level on the triangle. To him, needs in the lower categories are strongest. These hierarchy of needs from top to bottom includes: physiological needs, safety needs, social needs, esteem needs, and self-actualization(9). The strongest needs must be at least partly satisfied before a person will be motivated to work towards the higher categories(10). By adopting a qualitative approach, this study seeks to shed light on the interplay between the adolescent lived experiences, needs, and the choices they make about sex and relationships in times of displacement.

### Methodology

The study was carried out in the primary health care (PHC) center, located in a displaced settlement called Daudu in Benue State, Nigeria. It used an Interpretative phenomenological analysis (IPA) qualitative approach to explore the adolescent girls' experiences on decision-making in the context of sex and sexual relationships. Between 19<sup>th</sup> August 2023 and 22<sup>nd</sup> November 2023 Twelve (12) girls who acknowledged ever being in a relationship, could communicate in pidgin English or English and were between the ages of 15 and 19 were purposefully selected for the study. These participants, were chosen following a visit to the clinic. They were informed about the study and those that showed interest were scheduled for an interview. For those under 18 years of age, their parents were contacted for consent before the participants were enrolled in the study. The interview guide was created to assess the participant demographic and how each need on the Maslow hierarchy influences her decision to have sex and sexual relationships. The instrument was piloted to check clarity and relevance with three youths that visited the facility before the study period.

For data collection, each participant was invited into the nurse office, were they shared their experiences in private with the interviewer. Each interview took a maximum of 45 mins. Permission was gotten from the participants to make recordings and written scripts using codes

(p1-p12). We also assured each participant of confidentiality and anonymity before the study. Bothe verbal a written consent was gotten from participants before the study.

Data analysis used a deductive thematic approach guided by pre-coded themes, including Maslow's hierarchy of needs (physiological needs, safety needs, social needs, esteem needs, and self-actualization) and decision for safe sex. To validate the data, a member-checking of the findings of the data analysis was done with six members to validate their interpretations and check that their interpretations aligned with their perspectives.

#### Results

# Sociodemographic characteristic

The mean age of the participants was  $17.3\pm1.3$ . All participants had hard a primary education and could speak pidging English fluently. Up to 4 of the participants acknowledge to having more than 2 sexual partners. 3 had a living in partner, 2 lived alone while the other lived with a significant order. The mean age of sexual debut among the participants was  $14.0\pm3$  years.

# Physiological and safety needs and decision-making

Most participants compared how safe they were to their previous lives in the community. Five of the participants said they felt safer in the camp; however, seven of them felt they were not safe and attributed it to the type of accommodation, staying alone, and the uncertainties of events that happen in the camp, such as stampedes and scrambles for supplies.

To P2 "It wasn't safe in my village... I prefer it here, we can sleep in he night sometimes without hearing gunshot".

"But for the times when people start shouting at a thieve or when they are fighting at night, we are safe, "... sometimes strangers come in and we are afraid and start running". P4

"Our doors do not have good locks... Hmmmmm ahhhh.. even then, the thing used to build them is not strong. It just doesn't cover or head." P7

All the participants felt that they could not meet their basic physiological needs, including food, water, menstrual pads, and clothes. To the participants, sex seemed not to be a psychological need and was considered what could be used to get support. To them sex was majorly for male gratification. Participants agreed that they often needed assistance to get basic needs, particularly food, and sometimes needed to trade sex or ask for help from a sexual partner. Up to 7 of the participants said they had sex to get some promise fulfilled from their partners; however, the promises were hardly fulfilled, but they were hopeful and kept their relationships.

"...If a man gives you food, you will have to sleep with him. It's because of hunger. If you need money to buy things for your period or cream, clothes, or other things, there is no work. So if there is someone to help you with the money, I don't mind sleeping with him." P7

"...Sometimes you will sleep with him and you won't see the food or money. They will promise you."P2

### Love and belongings

We assessed participants' need for social and emotional connections and how it affects sexual relationships and sex. Motivation to get into a relationship was principally to find social support and to be loved. Five participants stated that they needed people to provide feeding support and other basic needs.

"My parents have traveled to the farm, and it's so lonely that I have to feed and care for myself. Sometimes I just need someone to talk to. My boyfriend used to come so that we could stay, and sometimes we have sex."P2

Three (3) participants acknowledge that their relationship was sometimes influenced by a friend who linked them to men for sexual relationships, commonly called "hook-ups," while six said their decision to have a relationship was solely their choice. Three said they were forced into relationships sometimes and agreed due to fear.

" my friends used to take me to some men. It has been helping me, too. Sometimes I get up to three thousand naira. It's a secret affair; my boyfriend does not know" P5

"If he has a character I can manage, I will date him. " If we are dating them, we can have sex."P3

Although the need for basic needs was the major reason for sex in most participants, love seemed not to be a major driver of sex, but a partner request as reported by 10 participants. The participants also had ambivalence in their decision-making when it came to sex. As they expressed, sometimes they did not really want to, but on a second thought, it had immediate benefits that made them change their minds. The desire to get promises fulfilled was a big motivation to engage in sex; however, most times, these promises were never fulfilled. The participants also had ambivalence in their decision-making when it came to sex. As they expressed, sometimes they did not really want to, but on a second thought, they had immediate benefits that made them change their minds.

"... if my man wants sex I will give him. Sometime, I don't wat to have sex but if I know that he has money to give me I will just do it" P5

# self-esteem and self-worth

When participants were asked how they thought about themselves, all participants compared themselves to others. Six (6) said they were important to their parents and siblings, while 2 acknowledged that despite being displaced, they loved themselves and where happy to be alive. To on participant,

"I am human; I may not live in the city, but I still like myself. I am not dead; I am alive, so I am happy.."P1

"I don't have fine clothes like some other girls; I am not fine, but my papa and mother are trying their best, and they like me." P6

Up to 11 participants felt they were not valued in their relationship because their partners did not meet most of their needs. For one participant, her partner valued her and did everything to make her happy; however, she felt he was not deserving of it. To another participant, she felt she had no choice but to give in to the sex demands of her partner, who provided some shelter for her. Must participants had regrets about their relationship, however, it was not up to them to end it as ladies. To one lady, moving away from the camp was the only way to end the relationship.

According to P5 "... my boyfriend does not give me money to buy the small things I need. I think he doesn't care much. ... I will keep going for hookup and have sex to get small money. If I tell him I don't want him again it will be a problem"

To another participants "*My boyfriend is trying, but he does not just have enough money. I hope for a better relationship but...*" P1

#### **Self-Actualization Needs**

Most of the participants had no clear-cut goals or aspirations. To P2 "*I would like to be a big woman in the future, have a car, and work in an office like this*".

To P10 "I want go to the city where I can find work. I will like to marry a rich man".

Two participants said they would like to further their education, while one said she would like to be a seamstress. All participants acknowledge that when they discussed their dreams and ambitions with boys/men, they tend to promise them they could assist, and most times they had sex with them.

"There was one guy I was dating; he promised to settle me in the city, as I have always dreamt. Now I don't know who he is; he just slept with me several times and was promising me" p10

# **Safe Sex Practices**

Participant acknowledges that they sometimes discussed condoms in their relationship. Despite acknowledging benefits of a condom, some participants expressed ambivalence in their decision-making about safe sex, often succumbing to immediate benefits or promises made by their partners.

" If I go out to meet a man for a date and he does not want a condom, I won't refuse; I need the money to survive". P5

Some of the participants said proposing condom use may make their partner feel like they are being suspected of some sickness or that they are immoral. For 10 of the participants, such discussion was initiated when they had one with them, although it was not used in some circumstances.

Six of the participants said discussion about condom use was initiated just about the time they were to have sex. Their partner's decision seemed to be final about the use of a condom.

" I wont like him to feel like I am suspecting him..... if I have condoms I will tell him lets use it however if I insist and he says no I will just do it". P9

"... this our men don't like condom, my man does not like it so we don't use it. Eerrh sometimes it pains me too because it will cause friction". P4

Self actualisation need( some Clear-cut goals and aspirations, Furthering education, Pursuing specific careers, Vague aspirations Becoming successful, Having a house, Working in an office, Skilled in a tradde, marrying a rich man.

Esteem(Valuation in relationships, Positive regard from parents and siblings Satisfaction in personal appearance, Feeling important to others, Regret within relationships, Dissatisfaction in relationships, Desire for emotional, fulfillment, non recognition of personal worth

Love and belonging(need for Social support Emotional connection, Companionship, Relationships based on choice, Support for feeding and basic needs. Influence of friends on relationships, Freedom to choose relationships, Overcoming loneliness through relationships)

Safety Needs(Adequate shelter Secured doors/locks Protection from violence Predictability and stability , Safety from stampedes and scrambles, Freedom from fear of gunshots)

Physiological needs(food for survival, item for personal hygiene(pads, body lotions) clothing

FIG 1: Maslow hierarchy needs of displaced adolescent that affect their decision about sex and sexual relationships.

# Discussions

The research emphasizes the fundamental physiological, safety, love and belonging, esteem, and self-actualization requirements that are relevant when adolescents in displaced settings are faced with the choice of whether or not to engage in sexual relationships or sex. The adolescent's sense of security was compromised as a result of the camp safety. Although the need for social support

and the ability to pay basic necessities influenced the decision to get into a sexual relationship, friendships also encouraged involvement through "hook-ups," with love playing a secondary role. The use of transactional sex to satisfy fundamental needs was noted amongst the participants. Although the participants recognized the significance of safe sexual practices, their decisions were tempered by ambivalence in order to satisfy their own needs as well as those of their partners.

Adolescent girls living in the camp faced physiological needs, basically the need for food, clothing, and products to cater for their personal hygiene, which made them prone to transactional sex or having sexual relationships. Although there is a complex interplay of factors that may motivate girls in these vulnerable situations to go into transactional sex(11,12), Studies have shown that the need for fundamental needs like food and water is a common factor associated with transactional sex in displaced persons(12,13). This is often aggravated by the sense of insecurity in most dispersed camps, as expressed in this study. In most cases, this causes fear and a sense of loneliness that may lead to a desire for love, affection increasing an adolescent girl's vulnerability. This is the case expressed by the participants in this study. Generally, the inability to meet basic needs leads to the use of sex as a means of survival, especially in places where male dominance exists due to gender norms(14). Studies have shown that cultural and societal norms around sexuality and gender roles significantly impact adolescents' sexual decision-making and risk-taking behaviors, which may lead to risky sexual behavior, including unprotected sex and the inability to have autonomy over their sexual health(15–17).

As expressed by the participants, the need for love and belonging made them engage in sexual relationships, indicating that emotional and sexual connections can significantly impact sexual relationships. Participants, however, had varied factors that motivated them into these relationships and sex. These included, friends as expressed by a majority and through their personal choices as expressed by a few. In many studies among adolescents, peer pressure has a significant part to play in influencing ones decision to have sex(18). Also fear of being physically abused has been documented as reasons for engaging in sex among displaced adolescents(19,20). The adolescent's acknowledged that fear and need to fulfill promises or desires as a reason for participating in sexual activity in this environment raises concerns about the exploitation that occurs as a result of power dynamics among these individuals.

Despite challenging circumstances, some participants maintain a positive self-perception, finding value in their existence. The feeling of self-worth was motivated by being important to their families and from being alive and maintaining a positive self-image. However, some participants felt undervalued in relationships due to their unmet needs. This made participants search for further support, like through "hook-ups," highlighting that the adolescents engage in multiple sex relationships. Generally, an individual's self-esteem and self-worth affect how they are valued in their relationships(21). Low self-esteem can lead to insecure romantic attachment, while the desire to meet basic needs can lead to riskier sexual behavior(21,22)

Although few participants had a specific goal (need to further educate, become a seamstress), Few studies have assessed self-actualization needs among displaced adolescents; however, studies among adolescent girls have opined that adolescents have no clear-cut goals(23). They were more susceptible to sexual exploitation in exchange for the opportunity to realize their aspirations, which further exemplifies the exploitation due to masculine supremacy in the study setting.

Participants also acknowledge the benefits of safe sex; however, there was ambivalence in their decision-making about sex, often succumbing to immediate benefits or promises made by their partners. This was evident in the participants' willingness to engage in unprotected sex to meet their needs. Participants also expressed poor autonomy as they felt reluctance to discuss condom use due to concerns about their partner's reaction. The power imbalances within the sexual relationships may drive the hesitancy for candid communication due to fear of rejection or accusations from their partner(8). This highlights the significance of confronting gender-based power differentials in sexual relationships in displaced environments. It also emphasizes the necessity of promoting open dialogue and educating participants about the necessity of making independent decisions regarding safe sexual practices for their own well-being.

## Conclusion

The Maslow hierarchy of needs can be used to assess adolescent decision-making about sex and sexual relationships. The findings suggest that aside from psychological and safety needs, adolescents in displaced settings are often faced with the choice of meeting their immediate needs or satisfying their desires by getting into sexual relationships or engage in sex. Also, they face

ambivalence in decision-making about sex due to reluctance to discuss condom use and the need for financial fulfillment. Generally, the adolescent sexual partner played a significant role in making decisions about the adolescent girls' sex live, showing that the adolescent girls had poor autonomy in their decision-making. These findings underscore the need for comprehensive sexual education and support systems to empower adolescents to make informed decisions about their sexual health and well-being.

# References

- Araz-Ledezma AB, Massar K, Kok G. Behavioural and environmental influences on adolescent decision making in personal relationships: A qualitative multi-stakeholder exploration in Panama. Health Educ Res. 2020;35(1):1–14.
- Larsson FM, Bowers-Sword R, Narvaez G, Ugarte WJ. Exploring sexual awareness and Decision-making among adolescent girls and boys in rural Nicaragua: A socio-ecological approach. Sex Reprod Healthc [Internet]. 2022;31(January 2021):100676. Available from: https://doi.org/10.1016/j.srhc.2021.100676
- Pinquart M. Ambivalence in adolescents' decisions about having their first sexual intercourse. Vol. 47, Journal of Sex Research. 2010. p. 440–50.
- Jennings L, George AS, Jacobs T, Blanchet K, Singh NS. A forgotten group during humanitarian crises: a systematic review of sexual and reproductive health interventions for young people including adolescents in humanitarian settings. Confl Heal 2019 131 [Internet]. 2019 Nov 27 [cited 2022 Nov 8];13(1):1–16. Available from: https://conflictandhealth.biomedcentral.com/articles/10.1186/s13031-019-0240-y
- Ivanova O, Rai M, Mlahagwa W, Tumuhairwe J, Bakuli A, Nyakato VN, et al. A crosssectional mixed-methods study of sexual and reproductive health knowledge, experiences and access to services among refugee adolescent girls in the Nakivale refugee settlement, Uganda. Reprod Health. 2019;16(1):1–11.
- 6. Cadely HSE, Spears E, Finnegan V, Kerpelman JL. Emotional and social cognitive predictors of sexual risk indicators among adolescents in committed and noncommitted

partnerships. J Adolesc. 2022;94(6):892-905.

- Essayagh T, Essayagh M, Essayagh F, Rattal M, Bukassa G, Lemriss H, et al. Prevalence and determinants of intercourse without condoms among migrants and refugees in Morocco, 2021: a cross-sectional study. Sci Rep [Internet]. 2022;12(1):1–9. Available from: https://doi.org/10.1038/s41598-022-26953-x
- Bukuluki P, Kisaakye P, Mwenyango H, Palattiyil G. Adolescent sexual behaviour in a refugee setting in Uganda. Reprod Health [Internet]. 2021;18(1):1–11. Available from: https://doi.org/10.1186/s12978-021-01181-0
- 9. Hofstede. Critical analysis of Maslow 's Hierarchy of Need. 1984;
- Dohlman L, Dimeglio M, Hajj J, Laudanski K. Global brain drain: How can the maslow theory of motivation improve our understanding of physician migration? Int J Environ Res Public Health. 2019;16(7).
- Kassa GM, Arowojolu AO, Odukogbe AA, Yalew AW. Prevalence and determinants of adolescent pregnancy in Africa: a systematic review and Meta-analysis. Vol. 15, Reproductive Health. 2018.
- Miller JA, Smith EA, Coffman D, Mathews C, Wegner L. Forced Sexual Experiences and Sexual Situation Self-Efficacy Among South African Youth. J Res Adolesc. 2016;26(4):673–86.
- Atenchong N, Oluwasola T. Provision of sex-related education to children in camps for internally displaced people in Benue State, Nigeria : mothers ' attitudes and practices. Sex Educ [Internet]. 2023;00(00):1–12. Available from: https://doi.org/10.1080/14681811.2023.2195162
- Pichon M, Howard-Merrill L, Wamoyi J, Buller AM, Kyegombe N. A qualitative study exploring parent–daughter approaches for communicating about sex and transactional sex in Central Uganda: Implications for comprehensive sexuality education interventions. J Adolesc. 2022;94(6):880–91.
- Agu IC, Mbachu CO, Ezenwaka U, Eze I, Ezumah N, Onwujekwe O. Gender norms and ideologies about adolescent sexuality: A mixed-method study of adolescents in communities, south-eastern, Nigeria. Front Sociol. 2022;7.

- Stark L, Warner A, Lehmann H, Boothby N, Ager A. Measuring the incidence and reporting of violence against women and girls in liberia using the "neighborhood method." Confl Health. 2013;7(1):1–9.
- Titiyos, A., Hailegebriel, T., Habte, M., Adan, A., Kassaw, J., Miller, M. A, A., and O'Connell K. Sexual and Reproductive Health Knowledge, Attitudes, and Practices among Internally Displaced Persons in the Somalia Region of Ethiopia. 2020;
- Kassahun EA, Gelagay AA, Muche AA, Dessie AA, Kassie BA. Factors associated with early sexual initiation among preparatory and high school youths in Woldia town, northeast Ethiopia: A cross-sectional study. Vol. 19, BMC Public Health. 2019.
- Uche EE-M, Hanmer LC, Rubiano-Matulevich E, Jimena Arango D. The effect of armed conflict on intimate partner violence: Evidence from the Boko Haram insurgency in Nigeria. Vol. 153, World Development. 2022.
- 20. Duroch F, McRae M, Grais RF. Description and consequences of sexual violence in Ituri province, Democratic Republic of Congo. BMC Int Health Hum Rights. 2011;11(1).
- Goodson P, Buhi ER, Dunsmore SC. Self-esteem and adolescent sexual behaviors, attitudes, and intentions: a systematic review. J Adolesc Heal [Internet]. 2006 Mar;38(3):310–9. Available from: https://linkinghub.elsevier.com/retrieve/pii/S1054139X05002946
- 22. Health A. Beyond abstinence : what we need to do to decrease the risks of sexual behavior during adolescence. 2006;38:165–8.
- 23. Robert Cronin Yung Peng, Rose Khavari ND. 乳鼠心肌提取 HHS Public Access. Physiol Behav. 2017;176(3):139-48.