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Social dimension of risk behaviours among adolescent prostitutes: Insight from South-Western Nigeria

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Abstract: This study examined the social dimension of risk behaviours among adolescent prostitutes in Lagos metropolis, Nigeria. More specifically, it examined the relationship between educational attainment and use of drug among female adolescent sex workers, investigated the relationship between use of drug and tendency for criminal behaviour among female adolescent sex workers, examined the impact of drug use on the nature of sex of female adolescent sex workers, established the relationship between educational attainment and consistent use of male condom by female adolescent sex workers. Cross-sectional survey and in-depth interview research methods were adopted to generate both quantitative and qualitative data from the respondents. Findings of the study showed that 90.7% of the respondents joined the sex industry because of poverty and lack of other means of getting daily food. 98.6% of the respondents that participated in the research inquiry had knowledge about diseases that can be transmitted through sexual intercourse; while all the respondents had knowledge about the existence of HIV/AIDS, 91.7% of them identified sexual intercourse as a major route of HIV transmission. There was a significant relationship between the use of drug and nature of sex of female sex workers at P < 0.05. Specifically, 99.7% of the respondents used...
male condoms regularly in every sexual act, 5.5% of the respondents used female condoms at irregular intervals in every sexual act, while 84.8% compromised the use of condoms with financial rewards. Consequently, a high percentage of the population was assumed to be at risk of HIV/AIDS, while 7.2% of the sample had become pregnant while on the job and 3.1% of these pregnancies were terminated through induced abortion. Furthermore, 44.1% of the drug-addicted and low-income sex workers were found to be mostly involved in criminal activities while 60.3% of the sampled populations were victims of different types of violent sexual experience. In conclusion, socio-economic constraints are the primary factors that push adolescent girls into prostitution in Nigeria and these same factors hinder them from practicing safe sex within the sex industry. Thus, it is recommended that the Nigerian government should develop programmes that will reduce poverty level and unemployment trend, in order to reduce adolescent/adult prostitution with its attendant problems of HIV transmission and criminal activities in the country.

**Subjects:** Education - Social Sciences; Gender Studies - Soc Sci; Sociology & Social Policy

**Keywords:** adolescence; prostitution; risk behaviour; Nigeria

### 1. Introduction

Prostitution is conceived of as an act, practice or profession of offering the body for sexual relations in exchange for money (New Webster’s Dictionary, 2010, p. 802). The Encyclopedia Americana (2007) defined prostitution as “the performance of sexual acts with another person in return for the payment of a fee.” Adolescent prostitution is, therefore, prostitution embarked upon by children who are below the age of 20 and are supposed to be catered for by their parents. It is commonly acknowledged that acts of prostitution are performed by women for men; nevertheless, occasions arise when the acts are done by men for men. However, the context of this research work deals particularly with female adolescent prostitution, which is adjudged to be one of the major problems ravaging the contemporary global societies.

UNICEF considers adolescent prostitutes as young girls in the sex trade, who are between the age bracket of 8 and 16. (Jubilee Action Report, 2005). In the Nigerian milieu, prostitutes below the age of 18 are regarded as child prostitutes, since only persons above 18 years of age are statutorily regarded as adults. Adolescent prostitution is the “sexual exploitation of girls and teenagers” (Awake, 2003, p. 6). Available data show that approximately 1.5million children in India, 1 million in Asia, 100,000 children in the United States and 500 children in Latin America are engaged in prostitution (Healy, 2009, p. 35). Awake, 2003, p. 2) reported, “there were about 300,000 child prostitutes on the streets, in another land where drug trafficking flourishes”.

According to Jubilee Jubilee Action Report (2005, p. 10), up to 1 million female children join prostitution each year around the globe. However, the clandestine nature of child prostitution makes it impossible to calculate the exact number of working prostitutes; nonetheless, the International Labour Organization (ILO) analysis (1993-1994), estimates that between 0.25% and 1.5% of the total female population are engaged in this trade. Globally, child prostitution is illegal and it is also regarded as a barbarous crime, yet it persists.

Many research findings have persistently described prostitution as a business or practice of providing sexual services to another person in return for payment of any kind of material needs such as those include not only money but also socio-economic and political dividends (See Olofinbıyı, Olofinbıyı, & Oyefara, 2016). The person who receives payment for sexual services is called a prostitute or sex worker, and the person who receives such services is known by a multitude of terms, but historically
most prostitution has been by females with males as clients (Månsson, 2008). The legal status of prostitution varies from country to country, from being permissible but unregulated, to a punishable, or to a regulated profession. Prostitution is sometimes referred to as “the world’s oldest profession”, which involves a practice of engaging in sexual activity, usually with individuals other than a spouse or friend, in exchange for immediate payment in money or other valuables (Sanger & William, 1999; Williams, 1984). The Gambia (2003) submitted that in the Netherlands, many prostitutes have become members of a professional service union, and in Scandinavia government regulations emphasize hygienic aspects, requiring a frequent medical examination and providing free mandatory hospitalization for anyone found to be infected with venereal disease. Prostitutes are very often poor and lack skills to support themselves; in many traditional societies, there are few other available money-earning occupations for women without family support. In developing African and Asian countries, prostitution has been largely responsible for the spread of AIDS and the orphaning of hundreds of thousands of children (World Health Organization Global Programme on AIDS; Geneva, 1989).

The rights of the adolescents to life and to proper development are being flagrantly abused. This has been attributed to many factors, including societal and economic factors. One of the results is the proliferation of prostitution among the adolescents, with its attendant problems of risk behaviours observed in a wide range of African societies. In recent years there has been a surge in the number of young girls living as teenage prostitutes (Weitzer, 2005). The lure into prostitution has captured girls that are runaways from broken homes, as well as those who suffered emotional drug and sexual abuse.; thus causing advocates, social workers, and policymakers to unite to establish prevention programmes and provide help to those girls living as prostitutes under the hands of men who represent themselves as their pimps (Interpol, 2010).

Limoncelli (2009) summits that adolescent prostitution is a problem in our community that many have failed to look at, considering the severity of its growing presence. He argues further that the number of girls living a life of prostitution has greatly increased over the last few years and is now beginning to draw local, national and international attention. The numbers and tragic stories of these young girls lured into this lifestyle, for various reasons, are beginning to cause society to stop and take notice. Girls as young as 11 years of age are being forced into a lifestyle of prostitution as a means of survival. In order to begin to work on addressing the problem of adolescent prostitution, it is important to understand the dynamics of this cycle of lifestyle choice today and why it has become so widespread. The community has to come together to address the reasons these young girls are prostituting and determine what are the best ways to successfully rescue them from unpromising life on the streets.

2. Adolescent prostitution, drug use and criminality

The review of research on adolescent prostitution worldwide offers several explanations for their involvement in criminality and drug use, which spans from society to society. Reports from various researches have persistently shown that adolescent prostitution is a relatively new field of interest, and consequently, there is a very little research work published on the issue of adolescent prostitution. We, however, need to know very much more about this category of people, the reality of their lives and the reasons for their active engagement in the use of drugs and criminality in the sex industry. Adolescents (people aged 10–19 years) constitute an important segment of a contemporary African population (Oyefara, 2011). In 1985, for instance, there were 122.4 million adolescents in the region. By 1990, this number had risen to 170.4 million and was projected to reach 223.7 million by the year 2010 (Njau, Radney, & Muganda, 1992). The current estimates of the United Nations show that at the beginning of the twenty-first century, about one out of every four people in Sub-Saharan Africa is between age 10 and 19 years (UN, 1999, quoted in Oyefara, 2011). These essential data show the high proportion of adolescents in the total population of Sub-Saharan Africa. Nigeria, the most populous country in Africa, shares with other countries in the region a youthful population structure, in which more than 40% of the total population is under the age of 20 (Oyefara, 2011). The National Population Commission report of 1998 revealed that adolescents make up around 30% of the total population of Nigeria (National Population Commission, 1998). The existing data at the national level
in the year 2000 showed that 27,805,138 (about 30 million) Nigerians were between age 10 and 19 years (Population, Health and Nutrition Information Project, 2002). On the basis of 2.89% annual growth rate, their numbers are expected to double within the next 25 years to nearly 73 million. In terms of size alone, this is a significant group. These are the leaders of the country in particular and the continent in general, treasures and hope of tomorrow (Omololu & Dare, 1997b).

All findings and theoretical evidence about adolescents point to the fact that the adolescent period is characterised by various transitory problems and the individual at this stage has to develop the appropriate coping strategies, otherwise everybody stands the risk of getting involved in one form of criminal behaviour or the other (Adams, 2002). Moreover, Hecker Geleerd looked at the adolescents as altruistic, solitary, idealistic, cynical, callous, sensitive, ascetic, pessimistic, optimistic, enthusiastic, indifferent, libertine and blindly submissive to a leader (see Olaogun & Ogundare, 2008).

All of the above implies that adolescent period is said to be demanding, and to stress this more, Friendberg (1959) cited in Okpukpan (2006) noted that adolescence is a period of search for emotional and economic independence. It is a time for individuals to utilise a more mature and complex level, the ability to give and take, communicate with others and trust them, and to learn what is harmful and what is good for themselves and others. With respect to risk behaviours among prostitutes, several scholars have submitted that most prostitutes use drugs frequently in order to be active towards subduing their depression and stigmatization in the sex industry. Drug use involves the intake of chemical substances to change reality, alter behaviour and produce stimulation, relief or relaxation, unnecessary confidence or reactions; all that is contrary to the normal human behaviour (see FMHHS, 1992). The use of drugs such as alcohol or marijuana among adolescent prostitutes is associated with a greater likelihood of involvement in all types of delinquent offences as well as myriads of risky sexual behaviours (Gilbert, 1996). Results as shown in Table 1 of this study revealed that 124 (42.8%) of the respondents who participated in the research work used alcohol/cigarette, 46 (15.9%) of them used alcohol/cigarette/Indian hemp, 37 (12.8%) used the only cigarette, but 36 (12.4%) gave no response to the question, 31 (10.7%) of the respondents used alcohol, while 16 (5.5%) used marijuana. The outcome of the research work showed that the majority of the respondents who participated in the research work used different types of drugs, and some in combination. The findings, thus, go on to buttress Gilbert’s findings (Gilbert, 1996) that an appreciable number of adolescent prostitutes in Nigeria engage in the use of drugs. The study identified sexual offences, murder of clients, deliberate spread of HIV/AIDS, reckless abortion, street fighting, public drinking, violence, theft, harbouring of criminals, keeping of weapons for criminals, as well as serving as agents for ritual perpetrations as the most prevalent criminal acts among adolescent prostitutes in Lagos metropolis, Nigeria. Clearly, with this study, we have been made to know that adolescents who use drugs are more likely to engage in a wide variety of risk behaviours in the sex industry. For now, it is important to know that drug use and criminal acts are closely knit and tend to occur together. The adolescent sex industry in Nigeria points to a fundamental injustice in the current materialist world

| Type of drug used and purpose for which it is used | Frequency | Percentage |
|-----------------------------------------------|-----------|------------|
| Alcohol                                       | 31        | 10.7       |
| Cigarette                                      | 37        | 12.8       |
| Marijuana                                     | 16        | 5.5        |
| Alcohol/cigarette                              | 124       | 42.8       |
| Alcohol/cigarette/Indian hemp                  | 46        | 15.9       |
| No response                                   | 36        | 12.4       |
| Total                                         | 290       | 100.0      |

Table 1. Percentage distribution of respondents by the type of drug used and for what purpose.
order. It is an indication of a global willingness to sacrifice society’s most vulnerable members for the sake of socio-economic and sexual gratifications. The truth is that with the involvement of the adolescents in prostitution, their future is being mortgaged (Marjorie, 1992). Unless there is a change in the economic situation of Nigeria, prostitution and other related offences will continue to thrive across posterities.

3. Influence of educational attainment on the use of the drug among female adolescent sex workers

Several studies have submitted that education stands out as a major factor that influences behaviour and that can be used to effect behaviour modification in youths and in society as a whole. However, education has been construed as a factor thought by many to have been frequently influencing the use of drugs among female adolescent sex workers in Nigeria. Nevertheless, findings from this research work have proved otherwise showing that education does not have any significant influence on the use of drugs among commercial sex workers. Findings have established that majority of the respondents in the study location are literate to a certain degree of educational qualification, but their degree of literacy as noted in this study has not in any way recorded to have influenced the respondents’ use of drugs.

Education is not seen as an important determinant of drug use among female adolescent sex workers. Analysis of educational attainment and the use of drugs by adolescent prostitutes in Table 2 shows a negative relationship between adolescent prostitutes’ educational level and drug use. This shows that the level of educational attainment of about or above 60% of the respondents (female adolescent sex workers) that participated in the research work is not significantly related to the use of drugs at 0.596 level of significance.

Findings from quantitative research work also revealed that 124(42.8%) of the respondents that participated in the research work used alcohol/cigarette, 46(15.9%) of them used alcohol/cigarette/Indian hemp, 37(12.8%) used only cigarette, but 36(12.4%) gave no response to the question, 31(10.7%) of the respondents used alcohol, while 16(5.5%) used Indian hemp. The outcome of the study revealed that the majority of the respondents that participated in the research work used different types of drugs, and some in combination. These results, thus, go on to buttress the findings that an appreciable number of female adolescent sex workers are actively involved in the use of drugs; and their level of education is not stated to have influenced such habit, because some of them claimed that they used drugs to suppress their stigma and intimidation from people and to be able to have strength so as to withstand the stress of sexual activities.

Discussions with an in-depth interview participant stated that:

“taking drugs is a matter of interest...She probed further that the well-educated ones among them frequently use drugs, and there are those with zero level of education that are not conformed to the use of drugs in the business”.

| Table 2. Relationship between educational attainment and use of drugs. |
|---------------------------------------------------------------|
| Use of drug                                               | Yes   | No    | Total |
|---------------------------------------------------------------|
| Educational attainment                                      |       |       |       |
| None                                                        | 2     | 1     | 3     |
|                                                               | 66.7% | 33.3% | 100.0%|
| Primary                                                     | 16(88.9%) | 2(11.1%) | 18(100.0%) |
| Secondary                                                   | 214(86.3%) | 34(33.5%) | 248(100%) |
| Tertiary                                                    | 5(4.3%)    | 0(0.0%) | 5(100%) |
| Total                                                       | 237(86.5%) | 37(13.5%) | 274(100%) |

\[ X^2 = 1.888^*, df = 3, Asymp. Sig (2-sided) = 0.596, contingency coefficient = 0.083 \]
According to an 16-year old adolescent sex worker in an in-depth interview:

“Education is not in anyway included among those factors that may influence sex workers’ use of drugs. She stated, for example, that even the well-educated fellows outside the world of prostitution are engaged in the use of drugs despite that they know the adverse effects of taking drugs; and some of these people are even our regular customers in the sex industry. She stated further that these educated clients are always under the influence of drugs/alcohol each time they are coming to buy sex from us”.

An in-depth interview with another female adolescent sex worker revealed that “education does not influence the use of drugs among sex workers, stating that taking drugs is a personal issue for individual interests in the industry. But to this young adolescent sex worker, the use of drugs is an endemic culture among sex workers because it aids and abets their business enterprise”.

When questions were asked on whether education can influence the use of drugs among commercial sex workers in the study location, a 19-year old sex worker said:

“Education does not influence the use of drugs in any forms. She stressed that we have a large number of educated people that use drugs indiscriminately without being reminded by whatsoever degree they are holding. Educational attainment of prostitutes does not determine the extent to which they must use drugs.

In an in-depth interview discussion with a “madam” of one of those brothels visited on the question whether education can influence the use of drugs among commercial sex workers, she said:

“Well, I don’t think so, because those who are not even primary school educated among my girls do not use drugs, while you find some with a tertiary level of education taking drugs like food in the industry. To me, using drugs is a matter of interest; but one thing I know about the use of drugs and sex workers is that it brings out an action in those that use it and gives them confidence against any form of stigmatization they may encounter in the business.

Findings from this study have also shown that the association between alcohol consumption and HIV infection has been documented (See Mbulaithe et al., 2000) and sex workers that use alcohol are at high risk for HIV infections through unsafe sex. There is a need to understand the link between substance use and the level of education of sex workers. It is also known that the intersect between sex work and drug use has fuelled the HIV infection in Nigeria.

The above data show that female adolescent sex workers in Lagos metropolis are constantly engaged in the use of drugs, and their level of education has been observed to have produced no significant influence on the rate at which they use drugs within the sex industry.

The generated data on the table above shows that the Null Hypothesis (H₀) is accepted while the Alternate Hypothesis (H₁) is rejected. Thus, the relationship is statistically not significant at 0.596 level of significance. More so, the X²Cal = 1.888, df = 3 and P > 0.05. Thus, the contingency coefficient of the two variables is at 0.083. This shows or means that about or above 60% of the respondents (female adolescent sex workers) that participated in the research work stated that educational attainment is not related to the use of the drug.

3. Influence of educational attainment on the consistent use of male condom by female adolescent sex workers

The results on the chi-square Table 3 indicates that the educational attainment of female adolescent sex workers cannot in any sense influence their consistent use of condoms in the study location. This is evident upon the result of the test of the hypothesis that is statistically not significant at 0.05 level of significance. This show that majority of the respondents (female adolescent sex workers) do not use condoms consistently.
adolescent sex workers) in the study location posited that there is no significant relationship between their educational attainment and its influence in their consistent use of condom.

The condom was commonly referred to as “tool of the trade” by commercial sex workers. The condom use was prevalent with the sex workers; about 99.7% of the respondents were recorded for using male condoms regularly and 5.5% with female condoms at irregular intervals. Almost every sex worker interviewed admitted to condom use (both male and female condoms). It appeared that it was a norm to use condom among the sex workers, and the sex workers insisted on condom use with the clients on regular basis. While it was normative, the group norms were frequently deviated by almost all sex workers on occasions of better financial ground. In this situation, It was difficult for majority of the sex workers to use condoms consistently with all their clients. These are the several situations in which condom is not used by sex workers. It should be noted that no findings from this study revealed that the educational qualification of the female adolescent sex workers influences their consistent use of condoms in their day-to-day encounter with clients.

When questioned about “on what conditions will you allow flesh-to-flesh service with your clients”:

More money is attractive to the economically starved sex workers and condom use can be traded for the extra cash. Clients believing that condoms interfere with sexual pleasure are willing to pay more money to avoid condom use. Money, Myths and wrong beliefs about safe sexual behaviour and protective acts place the sex workers in potential danger by not adopting safer sex norms and not insisting on condom use all the time. “When he tempts me with money and drinks, I compromise on the rubber”

The above expression shows that female adolescent sex workers compromise the use of condoms with money. Hence the use of condoms by sex workers is more influenced by the ability of the clients to pay more money than the usual price, rather than educational qualification.

Findings revealed that Condom use is inconsistent for oral sex. Though the trend is changing, many sex workers admit to non-use in many settings. Notable among the situations is the intoxication of either the sex workers or clients. Condom use with the regular partner or boyfriend is also said to be low.

An in-depth interview with a 16-year old female sex worker suggested that:

“Education has nothing to do with the use of condoms by adolescent sex workers. As we are all in this business, I can tell you that both literate and illiterate members of this brothel have a better understanding of the use of condom. Even in villages around the country, where people are stark illiterates, yet they consistently use condom for sexual practice. Any prostitutes that want to prove her level of education as regards condom use is only playing with her business, while hunger and suffering may be the reverse of that act. Either you are educated

| Educational Attainment | Use male condom | Yes | No | Total |
|------------------------|----------------|-----|----|-------|
| None                   |                | 3(100.0%) | 0(0.0%) | 3(100.0%) |
| Primary                |                | 19(100.0%) | 0(0.0%) | 19(100.0%) |
| Secondary              |                | 261(99.6%) | 1(0.4%) | 262(100.0%) |
| Tertiary               |                | 5(100.0%) | 0(0.0%) | 5(100.0%) |
| Total                  |                | 288(99.7%) | 1(0.3%) | 289(100.0%) |

$X^2 = .103$, df = 3, Assymp. Sig (2-sided) = 0.991, contingency coefficient = .019

Source: 2013 Ethnographic Fieldwork
or not, whatever the request of your clients will determine your choice of condom. The use of condom is a universal campaign to ensure safer sex for all”.

It has been firmly established that female adolescent sex workers are still highly vulnerable to various kinds of sexually transmitted infections despite the fact that they have adequate knowledge of the use of condoms and other contraceptives in their sexual encounters. Findings in this study have come a long way asserting that educational qualification of sex workers does not influence the trend in their consistent use of condoms.

Contrary to the result obtained above, in the previous table, the relationship in the above table is statistically not significant at 0.05 level of significance. Thus, the Null Hypothesis (H0) is accepted while the alternate hypothesis (H1) is rejected. The $\chi^2 = 0.103^a$, df = 3 and P > 0.05. (0.991), the contingency coefficient of the two variables is 0.019. This shows that majority of the respondents (female adolescent sex workers) posited that there is no relationship between their educational attainment and its influence in their consistent use of the male condom.

5. Use of drug and nature of sex of female adolescent sex workers

Findings from this study have established that the use of drugs does impact on the nature of sex of female adolescent sex workers. There is evidence to corroborate this finding from Table 5, which shows that the use of drugs is significantly related to the nature of sex of female adolescent sex workers at 0.05 level of significance. Data on whether adolescent sex workers are involved in use of drugs as shown in table 5.45 above confirm that 237(81.7%) of the respondents said that they had used sex-supporting drug before, 37(12.8%) said they had not used them before, while 16(5.5%) of the respondents that participated in the enquiry gave no response to the question asked of them. The outcome of the research revealed that over 50% of the respondents that participated in the research inquiry used sex-supporting drugs in the business. Results from this table, therefore,

| Reasons for oral/anal sexual practice with clients | Frequency | Percentage |
|---------------------------------------------------|-----------|------------|
| Financial reward                                  | 157       | 54.1       |
| when on drug                                      | 4         | 1.4        |
| Financial reward/when on drug                     | 127       | 43.8       |
| No response                                       | 2         | 0.7        |
| **Total**                                         | **290**   | **100.0**  |

| Use of drug | Yes | No | Total |
|-------------|-----|----|-------|
| Vaginal intercourse | 119(78.8%) | 32(21.2%) | 151(100.0%) |
| Oral intercourse | 1(100.0%) | 0(00.0%) | 1(100.0%) |
| Vaginal/Oral | 107(96.0%) | 4(3.6%) | 111(100.0%) |
| Vaginal/Anos | 1(50.0%) | 1(50.0%) | 2(100.0%) |
| Vaginal/Oral/Anal | 9(100.0%) | 0(00.0%) | 9(100.0%) |
| **Total** | **237(86.5%)** | **37(13.5%)** | **274(100.0%)** |

$\chi^2 = 20.798^a$, df = 4, Assymp. Sig (2-sided) = 0.000, contingency coefficient = .266
confirm the findings from scholars like Burfeind and Bartusch (2006), Oyefara (2007) and Davidson (2001) that sex workers are actively involved in the use of drugs. They argue further that prostitution and drug use are associated and tend to occur together. On the Data about the reason why the respondents would allow oral/anal sexual practice with their clients, 157 (54.1%) claimed that the reason is for financial reward, 127(43.8%) said for financial reward/when on drug, but 4(1.4%) said they allowed it when on drug, while 2(0.7%) of the respondents gave no response to the question asked of them. The outcome of the findings as shown in Table 4 suggests that prostitutes are strictly in the business for financial gains; and that the use of drugs influences the sexual behaviour of commercial sex workers.

The sex workers interrogated through in-depth interview declared that their most important sexual function is to provide what spouses, other sexual partners and friends do not like or refuse to provide for their intimate sexual partners. A sex worker is expected to satisfy certain needs of the men, while other sexual partners refuse or do not like to practice with their partners based on moral, religious or intimidating grounds. The sex workers accept this very kind of behaviour professionally under the influence of drugs and financial enticement. Typically, findings confirmed that clients who take alcohol or other drugs are in the habit of demanding more often of oral sex and anal sex.

According to one of the respondents:

“a client once said this…. my wife is sick and that she will refuse if I ask her to put my dick(penis) in the mouth. She always says it is disgusting. I come only for this and I’m ready to pay for it. It is indicated that the clients want from us what normal girls, wives or women do not give. Do we have a choice?” We need good money to make life better and the only strength we have to withstand all these kinds of sexual behaviour is obtained from the use of drugs.

“Sometimes, clients are drunk and say ‘I want to come in the mouth’; and they are ready to pay extra cash and it suits us.”

An in-depth interview with a ~19-year old female prostitute, who has accumulated 4 years work experience in the industry revealed that: The sex workers perform several sexual acts to please the customers. Some of which include vaginal sex, Oral sex, Anal sex, Group sex and Talking Filth.

The relationship in the above table is statistically significant at 0.05 level of significance. Thus, the Null Hypothesis (H₀) is rejected while the alternate hypothesis (H₁) is accepted. The $X^2 = 20.798^\circ$, df = 4 and P < 0.05. (0.000). the contingency coefficient of the two variables is 0.266. This shows that about 50% of the respondents (female adolescent sex workers) posited that the use of the drug does impact on the nature of sex of female adolescent sex workers.

6. Conclusion

More than half of the populations in developing countries is under the age of 20; people in this age group are or will become the parents of the next generation (Ladepo, 2003). Adolescence has, traditionally, been a brief interlude between puberty and adulthood. The study reveals that adolescents are vulnerable to various kinds of life-threatening challenges; some of which have been observed to have slid them into prostitution in the study area. Several research inquiries have persistently indicated that adolescent prostitutes in contemporary global societies are actively involved in a wide range of undesirable activities such as sexual offences, use of drugs, HIV/AIDS risk, street fighting, public drinking, violence, theft, harbouring of criminals, keeping of weapons for criminals, serving as agents for ritual perpetration, other than the prostitution business that the society knows about them.
There is much evidence to argue that prostitution is evil as it provides a viable medium for a wide range of crime perpetuations, which have remained obscure in human society from time immemorial. The study, therefore, draws the attention of coercive security apparatus of the state to the criminal activities being manifested through brothels, flats, street pick-ups, street girls, call girls, night bride, mobile vans as well as other hidden populations that are difficult to access. This will certainly go a long way checking and putting the business of prostitution under control in Nigeria. Consequently, the future of adolescent girls may be salvaged and reformed, both at home and abroad. The study also shows that most of these problem behaviours associated with adolescent prostitutes can be linked to the influence of their peers, social instability of adolescent neighbourhood, changes in social behaviour resulting from urbanization, reduced family influence, poor socio-economic background, unchecked poverty, severe unemployment, material deprivation, increased exposure to mass media, and lack of guidance and appropriate information, both home and abroad (See Akinnawo, 1995; Odejide, Ohaeri, Adelekan, & Ikuesan, 2007). However, the current efforts made by this study leave a wide room for contributions from societies, governments, non-governmental organizations, parents, and the young people themselves, and so, the effects of such efforts can be maximal. Until we can re-educate society about prostitution and its real consequences and put more resources together to ameliorate the conditions of young girls in prostitution, the future looks bleak for them, whether in Nigeria or abroad.

7. Policy recommendations

On the basis of findings in this study, both preventive and curative policy recommendations are more pragmatic in handling problems of adolescent prostitution in Lagos metropolis, Nigeria. In view of this, the following recommendations are suggested.

7.1. Awareness programmes

The level of awareness of the implications of adolescent prostitution should be heightened. There should be more enlightenment programmes by the government, health-related institutes, and NGOs emphasizing that adolescent prostitution can bring a nation and her future to ruin (See Akinnawo, 1995). The media, schools, churches, mosques, market, and relevant associations should be actively involved in this campaign. Town criers, which are important and reliable means of disseminating information in rural communities, should be co-operating in combating adolescent prostitution (See Ayodele, 2000b; Oyefara, 2011).

7.2. Policies formulation

The Federal Government of Nigeria should lift the embargo on employment and embark on a recruitment exercise for all categories of able-bodied youths who are willing to work, but remain totally unemployed. If Jobs could be given to thousands of unemployed youths, it is hoped that there would be a radical reduction in the incidence of prostitution in Nigeria. There are many more policies that the government should put in place to combat adolescent prostitution in Nigeria. These include Economic Policies aimed at eliminating poverty and hunger, which are the major causes of prostitution. Other policies that should be put in place are the Youth Welfare Policy addressing the peculiar problems of the adolescents, and rehabilitative and Adolescent Health Policy that will design the rehabilitative programs and support mechanism. These will be beneficial to those who are ready to quit prostitution or were rescued from traffickers and would discourage other adolescents from being enticed into prostitution. This will include counselling with an in-built strategy for behavioural change and cognitive restructuring and an alternative means of livelihood. This recommendation was made in Nigeria by the co-ordinator of the Task Force Against Human Trafficking (“FG Tackles Prostitution,” 2000).

7.3. Legislative measures

Nigeria should be made to have a signatory to some international instruments that contain provisions that condemn the sexual exploitation of girls and women. These include the Convention on the Elimination of All Forms of Discrimination Against Women of 1981 (Convention on the Elimination of All Forms of Discrimination Against Women [CEDAW 1979 cited in Blanchfield], 2011) and the Convention on the Rights of the Child of 1990 (Convention on the Rights of the Child [CRC, 1989 cited in Viljoen], 1998). In the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW 1979...
cited in Blanchfield, 2011), Article 6 provides that countries that have agreed to the provisions of this convention must do everything within their power to stop the selling or buying of women. They must also ensure that women are not being sold into prostitution or for any economic gain. The CRC in Article 34 provides that state parties must undertake to protect the child from all forms of sexual exploitation and sexual abuse. In that provision, state parties are enjoined to take all appropriate national bilateral and multilateral measures to prevent engagement of children in any unlawful sexual activity and exploitative use of children in prostitution (Interpol, 2010).

7.4. Educational reforms
The study has shown that education has a strong capacity to modify the behaviour of adolescents either negatively or positively, depending on the quality of information provided. Thus, education has a high potential for influencing the minds of the adolescent girls in a positive direction by providing appropriate information on sexual and reproductive health behaviour. Besides, guidance and counsellors in the schools should be made to provide information on the social ills of adolescent prostitution during school hours. In addition, adolescent girls while in schools should be made to play an active role in the educational programmes designed to modify their sexual and reproductive health behaviour so that they are not misled in their later adult lives. However, education stands out as a major factor that influences behaviour and can be used to effect behaviour modification in youths and in society as a whole. With improved education, various aspects of human life are handled better, thereby facilitating a rise in the general living standard of society.

Finally, it is hoped that by taking these positive steps towards solving the various problems of adolescent girls, the incidence of adolescent prostitution in Nigerian society can be minimized.

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