

Sexual Self-Esteem as a Predictor of Risky Sexual Behaviour among Female Students Attending Teacher Training Colleges in Kenya

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ABSTRACT:

This study sought to investigate sexual self-esteem as an indicator of risky sexual behaviour among female students attending teacher training colleges in Kenya. The study focused on second-year female students in the 29 public teacher training colleges in Kenya. Using ex post facto research design, data was collected through a personally delivered questionnaire from 350 female students in 13 public teachers' training colleges in Kenya and subsequently analysed using simple regression statistic at 0.05 alpha level. The findings revealed a linear and significant relationship ($F = 7.894; 1,345; P < .05$) between sexual self-esteem and risky sexual behaviour. The study further revealed that the beta value ($\beta = .150$) was statistically ($t = 2.810; P < .05$), the findings implied that sexual self-esteem had a positive effect on risky sexual behaviour, and the impact was statistically significant. The adjusted R^2 value ($R^2 = 0.22$) further revealed that Sexual self-esteem could account for 22% of the variation in risky sexual behaviour among female students. These findings have important implications and lessons in regard to reducing incidences of risky sexual behaviour among female teacher trainees, specifically, stakeholders in teacher training colleges including, college administrators, counsellors, and sexual health practitioners, within the colleges. These should develop and adopt strategies suggested in this study to address the challenge of sexual risk-taking among female teacher trainees.

Key Terms: Sexual self-esteem, Risky sexual behaviour, female college students, teacher training colleges

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Introduction

Risky sexual behaviour has been reported as a worldwide social and public health concern, especially due to the worrying trends in the prevalence of HIV/AIDS, particularly among young women (UNAIDS, 2013). The increase of unintended pregnancies and sexually transmitted infections, particularly the Aids pandemic, have become a global concern, and the most important health issue for adolescents and young adults (WHO, 2019). Moreover, according to UNAIDS (2008) young people in the African continent are the most affected by the consequences associated with risky sexual behaviour. Moreover, supporting evidence suggests that young women are more vulnerable to risks of contracting sexually transmitted infections and HIV/AIDS than their male counterparts (UNAIDS 2013; Ramjee, & Daniels 2013). The disproportionate impact of infections on females has been attributed to several factors which include biological, social, psychological, behavioural and economic (Baeten et al., 2007; Ramjee, & Daniels 2013).

A number of studies on risky sexual behaviours of students in college and university campuses reflect the extent of high-risk sexual behaviours present in higher learning institutions both in developed and developing countries (Dolphin, Fitzgerald, & Pooley 2017; McDonald, McDonald, Zanna, & Fong, 2009; Muhammad 2011). According to Guttmacher Institute (2011), 562,000 young unmarried women in the U.S.A got pregnant. The report further indicated that 553,000 of those pregnancies were among young women aged between 15 and 22 years which implies that a proportion of the young women were within the college-going age bracket. Studies conducted earlier in U.S.A (Davidson, Moor, Earlee, & Paris 2008) indicated that risky sexual behaviour among college students was the major cause of premarital pregnancies and prevalence of STI'S, especially among the female students. Moreover, Dolphin et al. (2017) reported that 31% of the young women

who sought abortion in England were college students aged 24 years and below. Dolphin et al. (2017) further opined that risky sexual activities, especially among college students, are becoming a major concern in England. McDonald et al. (2009) made similar observations in Canada.

The situation in Kenya is not better. According to the country's 2009-2010 National AIDS Strategic Plan, university and college students were found to be at a higher risk of STIs due to their exposure to unsafe sex. Moreover, Kenyan women in the 19-24 age brackets have been identified as being at the greatest risk of sexually transmitted infections owing to their sexual risk-taking behaviour tendencies (Mberia, & Mukulu, 2011). However, the data on the prevalence of risky sexual behaviour among students in middle-level colleges in Kenya, and particularly in teacher training colleges is very scanty; therefore the need to avail such data informed the current study.

Needless to say, issues concerning sexuality are among the most pertinent issues in life (WHO 2019); therefore, sexual health requires an understanding of the complex factors that shape human sexual behaviour. Many factors have been cited as causes for risky sexual behaviour among female students in colleges. For example, alcohol and drug use (Alamrew, Bedimo, & Azage, 2013), educational status of parents (Fentahun, & Mamo, 2014), Female students living away from their parents (Fentahun, & Mamo, 2014,) social-economic status of female students (Tura, Alemseged, & Dejene (2012)), and peer influence. Moreover, Snell (2001) suggested that sexual self-esteem could be linked to sexual risk-taking behaviour among young people. This study addressed itself to an investigation of the extent to which sexual self-esteem may explain sexual risk-taking behaviour among female students attending teacher training colleges in Kenya. In

order to achieve this goal, the following null hypothesis was formulated and tested at 0.05 level of significance:

H₀: There is no statistically significant influence of sexual self-esteem on risky sexual behaviour among female students in public teacher training colleges in Kenya.

LITERATURE REVIEW

Sexual self-esteem is defined as “a subjective evaluation of the self-developed according to an individual’s past sexual experiences” (Snell 2001). Sexual self-esteem encompasses a positive attitude towards sexual experiences as well as the capacity to experience sexuality in a satisfying way. Researchers have visualised sexual self-esteem as closely related to self-esteem and also as a representation of a different dimension (van Bruggen, Runtz, & Kadlec, 2006). Research has suggested that levels of sexual self-esteem are predictive of overall sexual functioning as well as the desire to engage in sexual activities (Maheswari, & Maheswari, 2016).

For instance, Antičević, Jokić-Begić and Britvić (2017) surveyed a sample of 630 individuals within the 25-45 age bracket. Among other findings, the study revealed that single people had lower sexual self-esteem, lower sexual satisfaction and higher sexual depression than couples. Moreover, on average, couples enjoyed greater sexual satisfaction and had better sexual self-esteem.

Kheswa, Eeden, Rothmans and Bothman (2017) investigated the relationship between sexual values, attitude, self-esteem and mental health among adolescents in South Africa. Data was collected from a sample of adolescents within the 13-21 age brackets. A self-administered questionnaire was used as data collection instrument. The results suggested that the youths' self-

esteem significantly mediated between mental health, sexual values and attitude. The study concluded that mental health had indirect effects on values about sexuality through adolescent self-esteem. These findings have the implications that self-esteem has a significant impact on the sexual values of young people. The study emphasised on the importance of self-esteem on sexual values which directly impact on sexual behaviour. The current study proposed that the more specific aspect of self-esteem that is, sexual self-esteem could be a better predictor of sexual behaviour.

Enejoh et al. (2016) conducted a study in Nigeria whose purpose was to determine the impact of self-esteem on risky sexual behaviour among adolescent. The study revealed that adolescents with low self-esteem scores were 1.7 times more prone to engage in risky sexual behaviour compared to adolescents with high self-esteem. The study suggested that programs aimed at reducing risky sexual behaviour should consider intention to raise adolescent's self-esteem. The implication of this finding was that self-esteem negatively impacted on risky sexual behaviour. However, the study was carried out on adolescents attending secondary schools. Moreover, it investigated the general domain of self-esteem the current study targeted female trainees in colleges and focused on the more specific domain of sexual self-esteem.

A study by Aomo, Aloba, Raburu and Ogolla (2018), aimed at investigating the relationship between self-esteem and indulgence in behavioural problems among secondary school students in Kenya. The findings revealed a significant negative relationship ($r = -0.564$) between the variables. Although this study was not investigating risky sexual behaviours, the researcher noted that self-esteem was related to risky sexual behaviour problems. Moreover, this study focused on adolescent in secondary school.

Similarly, most studies have focused on adolescent in secondary schools as well as university students.

Studies on the relationship between self-esteem, and especially, the specific construct of sexual self-esteem among female students in teacher training colleges are indeed scarce. The current study sort to fill this gap with the aim of establishing whether sexual self-esteem is capable of predicting risky sexual behaviour.

METHODOLOGY

The study adopted *ex post facto* research design. Data was collected through a personally delivered questionnaire from 350 second-year female students attending public teacher training colleges. The questionnaire had three sections labelled A, B and C. Section A gathered respondents' biodata in regard to age, marital status and age of first sex debut. Sections B and C, on the other hand, collected data pertaining to respondents' level of risky sexual behaviour and sexual self-esteem, respectively.

Sexual behaviour section of the instrument comprised 15 Likert scale items with five response options labelled, Never; Rarely; Sometimes; Often, and Very often. The five

choices were allocated 1,2,3,4 and 5 points, respectively. Sexual self-esteem Scale comprised of 20 items. Out of the 20 Likert scale items in this part of the instrument, 10 items were stated positively while the rest were stated negatively. This helped to minimise the problem of response mindset by respondents. The items had five response categories, namely "Strongly agree", "Agree", "somewhat agree" "Disagree" and "Strongly disagree". The five response categories were allocated 5,4,3,2 and 1 scores, respectively, with regard to the positively stated items. Reverse scoring was done with respect to the negatively stated items. Data from the Likert scale items, specifically the sexual behaviour and sexual self-esteem scale were analysed through the arithmetic mean. Simple regression statistics was further computed to determine whether sexual self-esteem had a statistically significant influence on risky sexual behaviour at .05 alpha level.

FINDINGS AND DISCUSSION

The first level of data analysis involved the computation of Likert scale response averages to the 20 items in the sexual self-esteem scale. This analysis is presented in table 1.

Table 1: Respondents' mean score for Sexual Self-esteem mean scores

Sexual self-esteem	Mean Score M	Standard Deviation SD
I like to take care of my appearance	4.54	.935
I like the shape and figure of my body	4.30	1.167
People say I am good looking	4.27	.877
I feel comfortable with my sexuality	4.21	1.277
I am confident about being able to get a boyfriend	4.15	.996
I am confident that I can have a sexual relationship	4.13	1.031
I feel good about my sexual behaviour	4.10	1.080
I don't feel sexually attractive at all	4.02	1.366
Intimate partners would find me sexually satisfying	3.67	1.195
I don't think males find me attractive	3.66	1.414

Most of my friends are better looking than I am	3.64	1.286
I frequently feel ugly and unattractive	3.57	1.529
I don't think I could be comfortable in a sexual situation	3.52	1.334
I do or would enjoy engaging in sex	3.47	1.227
I am comfortable being affectionate with dating partners	3.10	1.398
Most of my friends are more sexually comfortable with their partners than I do	3.07	1.352
I do not feel comfortable having my partner look at me without my clothes on	2.95	1.527
It is very hard for me to know how to behave in a sexual situation	2.83	1.357
Grand Mean	3.60	1.245

A look at table 1 reveals that the grand mean score for sexual self-esteem was 3.60. This has the implication that the overall level of Sexual Self-Esteem is high. A closer look at the different measure of SSE, however, shows that the respondents rated themselves very highly in areas related to body image. For instance, caring for one's appearance was highly rated (mean = 4.54) followed by an appreciation of one's shape and body figure (mean = 4.30) and having a favourable report from other people in regard to one's look (mean = 4.27). Other SSE domains that were similarly rated very high included being comfortable with one's sexuality (mean = 4.21) and ability to get a partner and secure a sexual relationship whose mean score were 4.15 and 4.13 respectively. The aspects of SSE that were rated less favourably included; being naked in front of a partner, (mean = 2.95) and inability to know how to behave in a sexual situation (mean = 2.83). The findings of this study agree with findings of a similar study conducted by Lin and Lin (2018) who observed that college students in South Taiwan had high levels of body image (mean = 3.95) and self-esteem (mean = 4.13)

The analysis further sought to establish the levels of risky sexual behaviour among the respondents, then subsequently establish the influence of sexual self-esteem

on risky sexual behaviour among the respondents. Participants mean scores from responses to the risky sexual behaviour items were computed and subsequently summarised in table 2.

Table 2: Respondents' Mean Scores on Risky Sexual Behaviour

Risky sexual behaviour	Mean Score M	Standard Deviation SD
Sex without protection against infection	3.78	1.082
sex without protection against pregnancy	3.72	1.297
Sex with more than one partner	3.29	1.525
Having unexpected/unanticipated sex	3.20	1.395
Casual sex with a person not seriously engaged	3.15	1.123
Having cross-generational sex	2.97	1.565
sex after taking alcohol	2.78	1.431
Having unprotected oral	2.39	1.614

sex		
Having unprotected sex with a person known to abuse drugs	2.13	1.462
Sexual favours in exchange for gifts	2.07	1.373
Sex without a condom with unfamiliar people	1.96	1.295
Sex with a person you don't trust	1.89	1.126
Sex with a person having many sexual partners	1.61	1.054
Sex with an unfamiliar person	1.53	.922
Sex with more than one person in a group	1.45	.890
Grand Mean	2.53	1.280

respondents engaging in risky sexual behaviour was low. However, closer scrutiny of the mean scores reveals that the respondents had a high likelihood of exposing themselves to risky sexual behaviour through having sex without protection against infection (mean = 3.78) and pregnancy (mean 3.72). Other indicators of a high likelihood of being exposed to risky sexual behaviour were having sex with more than one partner, being engaged in unexpected sex, and having casual sex with an unengaged partner whose mean scores were 3.29; 3.20; and 3.15 respectively.

The influence of sexual self-esteem on risky sexual behaviour among female trainees was established using simple linear regression. This analysis is presented in table 3.

A look at table 2 reveals that respondents overall mean score was 2.53. It can be argued that the likelihood of

Table 3: Summary of Simple Linear Regression Analysis between Sexual Self-esteem and Risky Sexual Behaviour of Female Students in Teacher Training Colleges

Variable		r	r ²	Constant	df	F	p
Dependent	Risky sexual behaviour	.150	.22	1.296	1,345	7.894	.005*
Independent	Sexual self-esteem		Beta (β)	Regression coefficient		t	
			.150	.246		2.810	.005*

(* means Significant at .05 alpha level)

Scrutiny of table 3 reveals that the F value was statistically significant (F = 7.894, df = 1,345 P = .005) This has the implication that there was a linear relationship between sexual-self-esteem and risky sexual behaviour. Stated otherwise, it means that sexual self-esteem was capable of predicting risky sexual behaviour. The table further shows that the β value (β = .150) was positive and statistically significant (t=2.810, P = .005). This indicates that sexual self-esteem had a statistically significant influence on risky

sexual behaviour. An observation of the generated r value can lead to the deduction that sexual self-esteem accounted for 22% of the total variation in risky sexual behaviour. Based on these findings, the stated null hypothesis (H₀) was rejected, and the conclusion made that sexual self-esteem, and risky sexual behaviour was statistically dependent. The data implies that sexual self-esteem is a statistically significant predictor of risky sexual

behaviour among female trainees in teacher training colleges in Kenya.

The observed relationship between sexual self-esteem and risky sexual behaviour of female students in teacher training colleges in Kenya fail to agree with some findings of similar studies conducted earlier. For instance, Enejoh et al. (2016) found a significant negative relationship between self-esteem and risky sexual behaviour among Nigerian adolescents; this implied that low self-esteem was significantly associated with risky sexual behaviour. Earlier on, Byno (2006) reported no significant relationship between self-esteem and risky sexual behaviour. Similarly, Cameron (2015) in a study of the relationship between self-esteem and risky sexual behaviour among black college women in USA reported no significant relationship between self-esteem and risky sexual behaviour. However, it is worth noting that the three studies focused on the relationship between the general self-esteem construct (as measured by the Rosenberg self-esteem scale) and sexual behaviour, and not the specific construct of sexual-self-esteem which was the variable of focus in this study.

Goodman (2008), study, however, agrees with the current study. The study revealed that sexual self-esteem predicted pressured sex. This implied a positive relationship between sexual-self-esteem and sexual activity. Impett and Tolman (2006), associated higher sexual self-esteem among young women with more sexual satisfaction. It could be inferred that young women with higher sexual self-esteem place higher value on their sexual being and experiences, and by extension are willing to engage a sexual partner in discussing issues related to sexual encounters, such as satisfaction, emotions and willingness to participate in risks (Oattes, & Offman, 2007).

CONCLUSION AND RECOMMENDATIONS

The study hypothesis tested whether sexual self-esteem significantly influences risky sexual behaviour. The findings of the study showed that the relationship between sexual self-esteem and risky sexual behaviour was positive. The study also revealed that sexual self-esteem accounted for significant variation in the mean of risky sexual behaviour. This implies that promoting positive sexual self-esteem may have a positive impact on the sexual behaviour of female college students. Based on the foregoing results, it was concluded that sexual self-esteem influences risky sexual behaviour and a number of recommendations were proffered with a view to mitigating risky sexual behaviour among female teacher trainees.

First student counsellors in colleges should encourage female students to have a positive attitude towards themselves, accept their body image and avoid negative manipulation by the media, which tends to materialise the female in the contemporary society. This would help the female students to respect and value their bodies and hence engage in safer sexual practices.

Student counsellors, as well as tutors, should encourage female students to develop healthy lifestyles that will help them develop a realistic and healthy body figure. This would tend to increase satisfaction with body image and improve the subjective feelings and beliefs about their body image, consequently positively boosting their sexual self-esteem.

There is need for college administrators to acknowledge that such danger exists in college campuses and information alone is not enough deterrent for the young people to engage in risky sexual behaviour. College administrators should, therefore, engage the relevant professionals with a view to sensitising students on the dangers of risky sexual behaviour and to protect

themselves when engaging in sexual activities. This can be by way of seminars and workshops. Additionally, there is need for the managers of the teacher training colleges to avail contraceptives in their institution's health centres. This will be helpful in protecting trainees against sexually transmitted infections.

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