



Perceived Parental Behaviour, Religiosity and as Predictors of In-school Adolescent Sexual Risk Behaviour in Ibadan Metropolis: the Moderating Role of Peer pressure

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Abstract

Adolescent Sexual Risk Behaviour (ASRB) has often been associated with Sexually Transmissible Infections (STI), abortion, teen pregnancy, drop-out from schools and reduced employment opportunities. Recent findings indicate high incidence of ASRB in Nigeria. Studies have hitherto focused on peer influence with only few investigating the interaction of this with other factors such as perceived parental behaviour 'PPB' (parental psychological control 'PPC', behavioural control 'PBC', risk-taking 'PRT' and support 'PS') and religiosity. This study therefore examined PPB, religiosity and the moderating role of peer pressure as predictors of 'ASRB' among In-school adolescents in Ibadan Metropolis, Nigeria. The study employed a cross-sectional research design involving 1,589 participants, male (n=753), female (n=836) aged 13 to 19 years drawn from 10 private and 19 public secondary schools in three of the five Local Government Areas (LGA) in Ibadan Metropolis. The LGAs were selected using simple random sampling technique by balloting, while stratified and systematic random sampling techniques were used for selecting schools and the participants who completed self-reported copies of questionnaire. Structured questionnaire was used to obtain data on PPB, religiosity, peer pressure and ASRB. Data was analyzed using hierarchical regression, Respondents mean age was 15.41.71 years, 69.9% were Christians. Thirty percent were involved in risky sexual behaviour while over 50.0% watched pornographic films and videos. Parental Psychological Control (PPC), religiosity and peer pressure were major significant predictors of ASRB: (B = 0.11; B = 0.18; B =0.15) respectively. Peer pressure significantly moderated all PPB dimensions- PBC, PPC, PRT except PS (ct = 0.31; ct = 0.34; ct = 0.20). A focus on parent training and improvement of relationships between adolescents and their parents are much more beneficial; would help in reversing the high significance of peer pressure. The schools should integrate sex education into their curriculum, while the clergy should keep up their good work.

Keywords: Perceived parental behaviour, religiosity, peer pressure, adolescent sexual risk-behavior, Ibadan-Nigeria

Introduction

Sexual risk behavior is an important contemporary concern, especially for the self-destruction and societal ills it causes. Research has been ongoing on adolescent sexual risk behavior in the country and recent studies still report high rates of pre-



marital sexual activities among Nigerian adolescents. Omisore et al, (2024) in their study of adolescents' risk perception and prevalence of risky behaviors, submitted that over a fifth of the respondents perceived they were at moderate to great risk regarding partaking in risky sexual behavior. Also, in a narrative review of literature by Olawade et al., (2024) they found that numerous Nigerian teenagers, particularly those between the ages of 15 and 18, are at risk of sexually transmitted diseases and unwanted pregnancies as a result of multiple sexual partners, a lack of or ineffective use of condoms, and an early sexual debut. Hitherto, concerted efforts of researchers in the country have been on the contribution of peer pressure to adolescent risky sexual behavior, however not much has been done on how the perception of parental behavior influences this risky sexual behavior of the youth. Understanding ecological factors that influence the risky sexual behavior of adolescents is vital in designing and implementing sexual risk reduction interventions in specific contexts. Interventions undertaken without understanding the critical factors may not produce the desired results (Gibson et al., 2020). Previous studies have identified that adolescent risky sexual behavior was significantly and strongly associated with the perception of peers' involvement in sexual intercourse (Akintola, 2017). In most cases, studies have identified that parenting factors may indeed reduce or mitigate the adolescent decision to engage in risky sexual behavior. The researcher's personal observations of the in-school adolescents' sexual risk behaviour in Ibadan also aligned with some literature reporting these activities among them. Considering the inconsistency in the reports on causative factors and adolescents' outcomes in the extant literature, this study takes a look at the perceptions of the adolescents' parental behavior such as psychological control, behavioral control, support and parental risk-taking, and how these influence their risky sexual behavior. Also examined were the effects of religiosity and the moderating role of peer pressure on the adolescents' sexual risk behaviour among in-school adolescents in Ibadan, Metropolis.

Theoretical Framework



Diana Baumrind's Theory of Parenting Style is employed as the framework for this study. The different styles encompass the various parental behaviors under investigation. The construct of parenting style is used to capture normal variations in parents' attempts to control and socialize their children (Baumrind 1991, Esplin 1993). Two points are critical in understanding this definition. First, parenting style is meant to describe normal variations in parenting. In other words, the parenting style typology Baumrind developed should not be understood to include deviant parenting, such as might be observed in abusive or neglectful homes. Second, Baumrind assumes that normal parenting revolves around issues of control. Although, parents may differ in how they try to control or socialize their children and the extent to which they do so, it is assumed that the primary role of all parents is to influence, teach and control their children. Parenting style captures two important elements of parenting, parental responsiveness and parental demand (Maccoby & Martin 1983). Parental responsiveness (also referred to as parental warmth or supportiveness) refers to "the extent to which parents intentionally foster individuality, self-regulation and self-assertion by being attuned, supportive and acquiescent to children's special needs and demands". Parental demand (also referred to as behavioral control) refers to "the claims parents make on children to become integrated into the family whole, by their maturity demands, supervision, disciplinary efforts and willingness to confront the child who disobeys". Categorizing parents according to whether they are high or low on parental demandingness and responsiveness creates a typology of four parenting styles: indulgent, authoritarian, authoritative, and uninvolved. Each of these parenting styles reflects different naturally occurring patterns of parental values, practices, and behavior. Indulgent parents (also referred to as "permissive" or "nondirective") are more responsive than they are demanding. Authoritarian parents are highly demanding and directive, but not responsive. Authoritative parents are both demanding and responsive while uninvolved parents are low in both responsiveness and demand. In addition to differing in responsiveness and demand, the parenting styles also differ in the extent to which they are characterized by a third dimension - psychological control.



Psychological control refers to control attempts that intrude into the psychological and emotional development of the child (Barber 1996, Tang et al., 2024) through the use of parenting practices such as guilt induction, withdrawal of love or shaming with consequential effects on the child. Peer pressure could moderate where monitoring is perceived to be excessive or in perceived psychological control by parents.

Furthermore, the Religious Attributional Activity Theorists, Spilka et al., (1985) maintained that intrinsic needs for meaning, mastery or control and self-esteem stimulate an attributional search when such needs are challenged by environmental conditions. This theory postulates situations where people perceive that such needs are better met through religious than natural explanations. In short, religion often provides people with sense of meaning, control and an enhancement of self-esteem. However, Spilka et al. (1985) recognized that whether a religious attribution is triggered or not depends in part on whether the person has a predisposition toward religious explanations e.g. his/her religiousness. The theorists gave predisposition towards religion as a part of the explanations for engaging in religious activities. This confirms the fact of religiosity being a personality or dispositional variable which must have been formed in the course of development or socialization. Hence, some adolescents exhibit religiosity as an extension of family values or a reflection of socialization while some do so to conform and others to find meaning in life or situations. These, have implications for either engaging in sexual risk behavior or not.

Literature Review

A number of empirical research show that certain parenting behaviors are associated with specific adolescent internalizing such as social withdrawal or depression and externalizing - violence, and aggression outcomes (Centers for Disease Control and Prevention (CDC), 2023 as cited in Akintola et al. 2025). Research has indicated that parenting behaviors influence the development and maintenance of problem



behaviors among adolescents (Akintola, 2017). Parental behavioral control involves managing adolescent activities in an attempt to regulate their conduct and provides them with guidance for appropriate social behavior (Esplin 2013, Baumrind 1996). Furthermore, research suggests that behavioral control can protect against problem behaviors. For example, higher levels of fathers' behavioral control and mother-adolescent relationship were stable concurrent predictors, the mother-adolescent relationship was a robust longitudinal predictor of adolescent substance use (Shek et al., 2020) less adolescent truancy, less marijuana use, an increase in the age of an adolescent's first sexual intercourse, as well as decreased sexual risk behavior (Sharma 2020, Dodge et al., 2006, Shawon et al., 2023) and less frequent engagement in early sexual intercourse (Dittus et al., 2023). In addition, parental control appeared to prevent escalation in externalizing problems among adolescents who reported affiliating with deviant peers. For example, among adolescents who reported deviant peer associations, only those whose parents used low behavioral control increased their externalizing problems (Bai et al., 2020). Parental psychological control such as threatening, guilt induction, withdrawal of love or shaming, yelling, or screaming in response to misbehavior, is thought to contribute to more frequent externalizing behaviors that trivialize violence or aggression (Chou 2024). Studies demonstrate psychological control is linked to behavior problems ranging from conduct disorder to depression, low self-esteem and sexual risk behavior (Akintola, 2017). For instance, researchers found that the use of psychological control by either parent in a two-parent household was related to greater adolescent depression and externalizing behavior (Zahra & Dawood 2024). These studies show that psychological control predicted higher levels of both internalizing and externalizing problems over time for adolescents reporting high antisocial peer affiliations, but not for those with few antisocial peers (Havewala et al., 2021). In other words, adolescents' interactions with deviant peers tend to exacerbate rather than attenuate problems associated with negative family relations.



Parental warmth and support (inductive reasoning, and parent-child communication) can facilitate positive adolescent adjustment. Researchers have consistently found them to be associated with enhanced behavioral outcomes. Moreover, parental support during adolescence appears to protect adolescents from the negative consequences of adversities in their lives (Shek et al., 2021). Support behaviors include parental warmth, the use of inductive reasoning, and communication. Parental support and warmth are the extent to which the adolescent is loved and accepted, usually measured by items such as how often the mother or father listened carefully to their child's point of view and helped them with something important (Maccoby & Martin 1983). Higher levels of parental support are associated with significantly reduced sexual risk behavior, alcohol use and substance use (Dou et al., 2020, Keyzers et al., 2019, Hindelang et al., 2001). Further, researchers found parental support was associated with decreases in externalizing behaviors and increases in self-esteem over time (Zhu et al., 2024). Overall, findings suggest that higher levels of parental support are positively associated with adolescent outcomes. Research has consistently shown that higher levels of perceived parental support are associated with lower levels of adolescent delinquency, sexual risk behavior, aggression, or other adjustment problems (Dou et al., 2020, Keyzers et al., 2019, Akintola, 2017). Researchers have also found that parental support during adolescence predicted lower levels of depressive symptoms and irritability among young adults (Boele et al., 2023).

Researchers have examined how supportive parental behavior influences adolescent outcomes in high-risk community contexts. For example, one research study suggests that supportive parental behaviors buffer adolescents from the negative effects of high-risk community contexts (Quiroga et al., 2015). Potter and Font (2022) reported the protective influence that parent connectedness has in preventing the adolescent from engaging in risky behavior including sexual risk-taking. Overall, these studies underscore the importance of parental support on the well-being of adolescents,



since it functions as a protective factor when examining various adolescent behavioral outcomes (Akintola, 2017).

The fourth dimension of parental behavior developed by the researcher in line with cultural factors and prevalence is parental risk-taking. Parental risk-taking among Nigerians includes behaviors such as neglectful parenting (low control and low acceptance) and daring acts like asking under-aged children to peddle food items, making them beg on the streets for money, sending them on long distance errands, making them travel long distances alone (could put them under the care of unknown drivers) all acts which encourage risky sexual behavior or expose the children to rape (Akintola, 2017). Researchers have found an association between such parenting style and delinquent acts ranging from vandalism and petty theft to assault and rape (Wallace, 2023). Positive perceptions towards the relationship with the parents, especially the mother, influence the delay of the onset of sexual relations among adolescents (Maina et al., 2020). Unstimulated home environment and negative peer group could consequently interact to predispose the adolescents to disruptive behaviour and risky sexual behaviour (Adimora et al. 2018).

Hypothesis

- Peer pressure will significantly moderate the relationships of perceived parental behavior, religiosity and adolescent sexual risk behavior among In-school adolescents in Ibadan Metropolis.

Methods

Design and Participants The design adopted for the study is Cross-Sectional Survey Research Design. The sample was selected adolescents from ages 13 – 19 years (15.4 ± 1.71), drawn from 10 private and 19 public secondary schools from three of the five local governments within the Ibadan metropolis. About 1,700 students of Junior Secondary School 3 to Senior Secondary School 3 participated in the study.



Simple Random, Stratified and Systematic Sampling Techniques were used (Krejcie & Morgan 1970). Sampling Table was used as a guide to determine the exact size needed to represent the population. Schools already exist as two strata (public and private) in each local government. Selection from each stratum by Simple Random Technique reflected the ratio at which both strata (public and private schools) exist in each local government. About 1,590 questionnaires were eventually analyzed for the study-male (n=753), and female (n=836).

Measures

Perceived Parental Behavior: This was measured with the Perceived Parental Behavior Scale (Henry & Peterson 1995, Peterson & Rollins 1987, Zhang et al., 2016). It is a 13-item scale based on parent behavior measures. It is rated on a 4-point response pattern ranging from Strongly Disagree (1), Disagree (2), Agree (3) and Strongly Agree (4). The scale originally measured parental support, parental behavioral control/monitoring and psychological control as factor components of parental behavior (Akintola, 2017). The items in the scale are averaged into subscale scores that represent each dimension of parental behavior in reference to each parent. However, five culturally (local) relevant items generated from the Focal Group Discussion with the adolescents were added to make the items 20. An item analysis was conducted to determine the psychometric properties of the scale and also confirm construct validity. The whole perceived parental behavior scale yielded a reliability coefficient of .73, equal length Spearman-Brown of .65 and Guttman Split-half of .65. Factor Analysis, using principal component analysis followed by Varimax Rotation procedure yielded 5 factors with Eigen values greater >1. Items that had a loading of at least .40 and above were retained. All the five items added had loadings over .40. Item number 12 loaded on both factors 1 and 3 but appropriate for factor 3. The total Variance explained by the five factors (Parental Support, Parental Monitoring, Parental Risk Taking, Guilt Induction and Punitiveness) was 69.5% (Akintola, 2017). A theme that recurs among the items constituting a factor was used to name each factor and also phrase the new factor or dimension



(Parental risk-taking) that emerged with the introduction of the new items. Factors 4 and 5 which are Parental Guilt Induction and Punitiveness respectively were grouped together as Psychological Control (Henry & Peterson 1995) while Factor 1 was Support, 2-Behavioral control/Monitoring and 3- Parental Risk-Taking which is the new factor that emerged; hence the scale now has four dimensions as against the original three dimensions. A composite score on each dimension of the perceived parental behavior was obtained for both parents of an adolescent to determine their dominant dimension (highest score) which they were labeled with.

Religiosity Fundamentalism Scale "REL" (Wiggins 1996) was used to elicit information on the adolescents' religious inclinations. The scale is one of 13 scales identified by content analysis of the item pool of the MMPI, the Minnesota Multiphasic Personality Inventory. The REL scale consists of 12 declarative statements that respondents are asked to endorse as true or false. The 12 items are distributed as ordered in the full MMPI within 163 MMPI items included in the baseline questionnaire. The internal consistency of the REL scale as assessed by Cronbach's alpha is satisfactory; 0.82 for girls and 0.81 for boys, and test-retest reliability of 0.95 for males and 0.93 for females has been reported. The scale was adapted to suit this study with now a response format of Strongly Disagree, Disagree, Agree, Strongly Agree to allow for adequate variance in responses and thus increase its validity. Also, two items not relevant to this culture were removed and the score of the 10th item was reversed. Revalidation of the scale yielded a Coefficient alpha of .69, Split half reliability of .68 and equal length Spearman-Brown of .68.

Peer Pressure: Peer pressure was measured by Peer pressure Inventory (Bradford & Clasen, 2002). This also was measured on a continuum scale. Scale is structured in such a way that each item is presented in both positive and negative forms. Positive items are presented on the left side of the scale so that low scores on the continuum scale are indicative of positive pressure and the high scores indicative of negative pressure since peer pressure is often associated with negative peer influence. The scale measures peer conformity, family involvement, school achievement and



misconduct as factor component of peer pressure. A composite score is obtained for each participant. Scores below the mean indicate positive pressure while scores above the mean depict negative pressure.

Adolescent Sexual Risk Behavior: A similar procedure was used by the researcher to develop the instrument that was used to measure Adolescent Sexual Risk Behavior. This consists of 12 items to assess adolescents' involvement in sexual risk-taking, that is, if they have ever engaged in sexual risk behaviors and how often they do so (Akintola, 2017). The 12-item scale is in Likert format with a five-point response option ranging from never (0) once (1), 2-4 times (2), 5-7 times (3) to very often (4). Scores above the mean value of 4 at the standard deviation of 4.5 were regarded as being high on sexual risk behavior while lower scores than the mean were regarded as being low Procedure The researcher obtained a letter from the office of the Commissioner for Education which was addressed to the local inspectors of education in the five local governments in Oyo state from whom the lists of all secondary schools in Ibadan metropolis were collected (Akintola, 2017). A simple random sampling technique by balloting was used to select three of the five local government, schools selected by systematic random sampling from the existing two strata (public and private) and the participants (students) were also systematically randomly selected. Permission was obtained from school authorities; consent forms were given to parents and assent forms to the adolescents before data were collected with the use of copies of self-reported questionnaire.

Data Analysis

Hierarchical Regression analysis was used for the hypothesis generated.

Results

Hypothesis: Which states that peer pressure will significantly moderate the relationships of perceived parental behaviour, religiosity and sexual risk behaviour among adolescents was tested using hierarchical multiple regression analysis. Before

the moderation analysis, a regression analysis was done to show the independent and joint predictions of religiosity and perceived parental behaviour on adolescent sexual risk behaviour. The result is presented in Table 1. while the moderation analysis is presented in Table 2.

TABLE 1. Summary of Hierarchical Multiple Regression Analysis Showing the Influence of Parental Behaviours and Religiosity on Sexual Risk Behaviour among Adolescents within Ibadan Metropolis

Predictors	Step 1			Step 2		
	Beta	t-value	Sig	Beta	t-value	Sig
Religiosity	-.18	-7.08	< .001	-.18	-7.34	< .001
Parental Psychological Control				.10	3.99	< .01
Parental Behavioural Control				.01	.23	> .05
Parental Risk-taking				-.03	-.92	> .05
Parental Support				-.05	-1.85	> .05
R		.18			.20	
R ²		.03			.04	
ΔR ²		.03			.01	
F		50.25			33.33	

Table 1 reveals religiosity as the first model introduced that significantly predicted sexual risk behaviour among adolescents ($F(1, 1584) = 50.25, p < .001$) ($\beta = -0.18, t = -7.08, p < .001$), adolescents sexual risk increased with declining religiosity. The inclusion of the parental behaviour variables to the religiosity model yielded an increase in R^2 value (co-efficient of determination) from 0.03 to 0.04, a significant 1% increase was observed in the variance predicted in the model ($\Delta R^2 = 0.01, R^2 = 0.04, F(5, 1584) = 33.33, p < .001$). Religiosity ($\beta = -0.18, t = -7.34, p < .01$) and parental psychological control ($\beta = 0.1, t = 3.99, p < .01$) were found to be significant predictors of adolescent sexual risk behaviour while the influence of parental behavioural control ($\beta = 0.01, t = .23, p > .05$), parental risk taking ($\beta = -0.03, t = -.92, p > .05$) and

parental support ($\beta=-0.05$, $t=-1.85$, $p>.05$) were not significant. This suggest that adolescents sexual risk behaviour increases when religiosity is low and parental psychological control is high but (sexual risk behaviour) decreases or decline as religiosity increases and parental psychological control decreases. Based on the findings, the hypothesis is partially accepted.

Table 2 Showing Summary of Hierarchical Multiple Regression Analysis of Moderation Influence of Peer Pressure on the Relationships of Parental Behavior, Religiosity and Sexual Risk Behavior

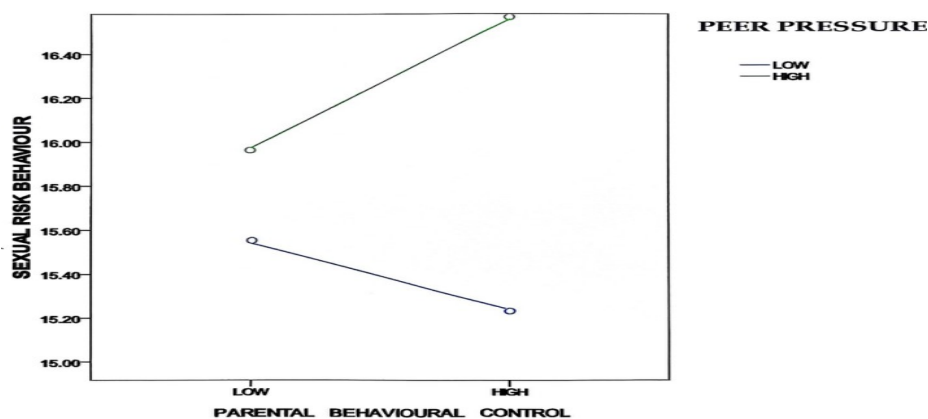
Predictors	Model 1 Step 1			Model 2 Step 2		
	Beta	t-value	Sig.	Beta	t-value	Sig.
Parental risk taking	.01	.51	>.05	-.18	-2.79	<.05
Parntal monitoring	-.03	-1.02	>.05	.10	1.37	>.05
Parental psychological control	.14	4.53	<.01	-.05	-.71	>.05
Parental support	-.06	-2.36	<.05	.05	.76	>.05
Religiosity	-.17	-6.79	<.00	-.02	-.40	>.05
Peer pressure	.15	6.11	<.00	.45	2.12	<.01
Peer pressure X religiosity				-.50	-2.62	<.05
Peer pressure X parental monitoring				.31	3.30	<.01
Peer pressure X parental risk taking				-.20	-2.03	<.05
Peer pressure X parental psychological control				.34	2.88	<.01
Peer pressure X parental support				-.20	-1.91	>.05
R		.26			.28	
R ²		.07			.08	
AR ²		0.07			0.01	
F-Ratio		18.44			12.53	

Table 2 shows that the combination of parental behaviour variables (psychological control, behavioural control, support and psychological risk), religiosity and peer

pressure yielded a significant 26% in explanatory power and coefficient of determination for the psychosocial prediction of sexual risk behaviour among adolescents ($F(3,1584) = 18.44, p < .001$). Parental psychological control, parental support, religiosity and peer pressure, significantly predict sexual risk behaviour among the in-school adolescents ($B = 14, t = 4.53, p < .01$; $B = -0.64, t = -2.40, p < .05$; $B = -0.17, t = -6.78, p < .001$; $B = 0.15, t = 6.10, p < .001$) respectively. The moderation of the relationship between sexual risk behaviour and parental behaviour and religiosity by peer pressure contributed significant 2% ($R^2 = .02, \Delta R^2 = .02, F = 12.53, p < .001$) increase in the prediction of sexual risk behaviour and size of the coefficient of determination in the model.

Peer pressure moderated the parental behavioural control, risk taking and parental psychological control except only support ($\beta = 0.31, t = 3.30, p < .01$; $\beta = 0.20, t = 2.03, p < .05$; $\beta = 0.34, t = 2.88, p < .01$) respectively and religiosity ($\beta = 0.50, t = 2.62, p < .05$) thus confirming the hypothesis. The graphs of these relationships are depicted in Figs 4.4-4.7 and the interaction scores also presented in tables.

Fig. 1: The moderation of the relationship between parental behavioural control and sexual risk behaviour by peer pressure.

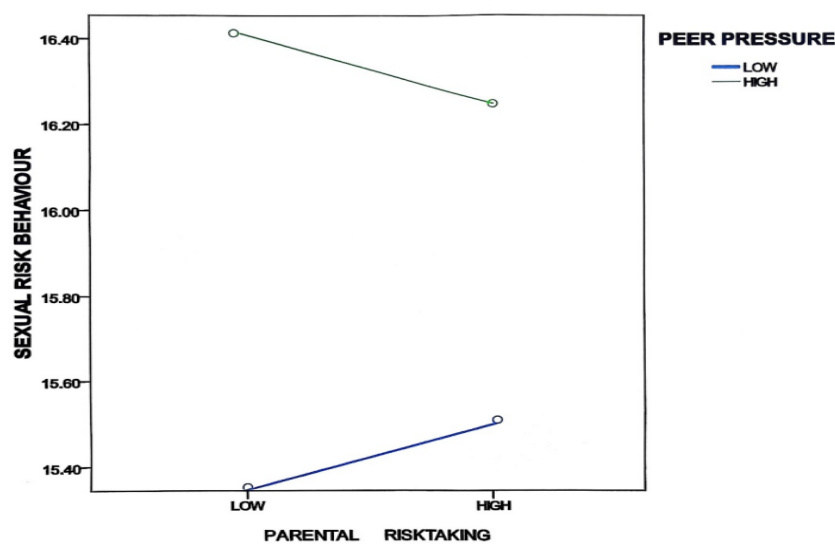


Descriptive table showing the mean scores on sexual risk behaviour based on the interaction between parental behavioural control and peer pressure

Peer Pressure	Parental Behavioural Control	Mean
Low	Low	15.55
	High	15.23
High	Low	16.04
	High	16.66

The result in the table shows that sexual risk behaviour increased when parental behavioural control and peer pressure are high. However, sexual risk behaviour decreases when behavioural control is high under low peer pressure.

Fig.2. The moderation of the relationship between parental risk taking and sexual risk behaviour by peer pressure.



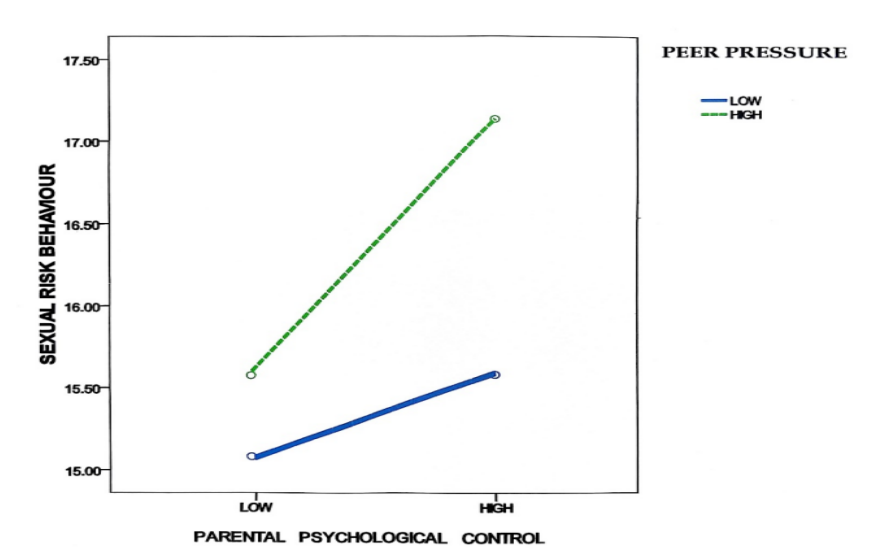
Descriptive showing the mean scores on sexual risk behaviour based on the interaction between parental risk-taking and peer pressure

Peer Pressure	Parental Risk-Taking	Mean
Low	Low	15.23
	High	15.55
High	Low	16.42
	High	16.28

The result in the table also indicates that sexual risk behaviour is reduced when parental risk taking and peer pressure are low. However, sexual risk behaviour increased when both parental risk taking and peer pressure were high. the sexual

risk-taking is even much higher with low parental risk-taking and high peer pressure, indicating less streetwise experience with pressured adolescents.

Fig. 3. The moderation of the relationship between parental psychological control and sexual risk behaviour by peer pressure.

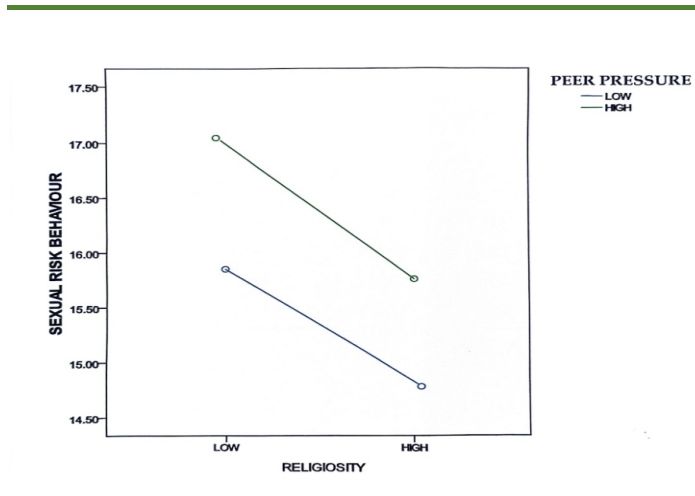


Descriptive Showing the Mean Scores on Sexual Risk Behavior Based on The Interaction Between Parental Psychological Control and Peer Pressure

Peer Pressure	Parental Psychological Control	Mean	Std. Error
Low	Low	15.18	.31
	High	15.60	.27
High	Low	15.60	.39
	High	17.10	.30

The result in the table shows that sexual risk behavior increased when parental psychological control and peer pressure are high and decreases when both of them are low. The fact of having the same mean value of 15.60 when either is high or low depicts same effect on the adolescents.

Fig.4. The moderation of the relationship between religiosity and sexual risk behaviour by peer pressure.



Descriptive showing the mean scores on sexual risk behaviour based on the interaction between religiosity and peer pressure

Peer Pressure	Religiosity	Mean	Std. Error
Low	Low	15.85	.26
	High	14.78	.23
High	Low	17.08	.26
	High	15.76	.27

Peer pressure also moderates the relationship of religiosity and sexual risk behaviour. Sexual risk behaviour decreases when religiosity is high and peer pressure is low. However, sexual risk behaviour among adolescents increases when religiosity is low and peer pressure is high.

Discussion

The main purpose of this study was to investigate the prediction of sexually risky behavior by the adolescents' perception of their parental behavior and also examine the effect of their religiosity on their sexual behavior, as well as look into the moderating role of peer pressure in the relationships of these factors. From the first analysis carried out and contrary to expectations and trends of research findings on the variable – parental behavior, it was found not to predict sexual risk behavior except for parental psychological control (Akintola, 2017). The significance of psychological control is in line with literature. Some studies that have examined the



link between psychological control and sexual risk behavior (Ahmed et al., 2023, Steiner 2021, Zhang et al., 2024, Chigbu et al., 2022) relative to the major literature that have examined behavioral control as a predictor of sexual risk behavior; in all these studies, results suggested that psychological control is a predictor of increased sexual risk behavior, especially for girls (Akintola, 2017). Indeed, adolescents whose parents use psychologically controlling techniques are at increased risk of making decisions that are developmentally immature and ill-founded (Norman 2017, Mulya et al., 2021). In contrast, healthy adolescent parent relationship qualities are likely to facilitate the development of healthy autonomy and communication, protecting against maladaptive peer influences (Carapeto et al., 2025).

Religiosity on the other hand offer protection against sexual risk-taking in adolescence and emerging adulthood (Koletić et al., 2021). Religiosity was found to be a protective factor for youth sexual behavior and this positive association was still evident even after controlling for other covariates. Youth who were highly religious had significantly higher odds of abstaining compared to their counterparts who were not religious (Somefun 2019). She concluded that religiosity is a protective factor for sexual abstinence among youth in Nigeria and that policymakers can work around using religious institutions for behavioral change among youth in the country. All the foregoing on the effect of religiosity is supported by the findings of the current study which revealed adolescents sexual risk decreased with increased religiosity. Rostosky et al. (2004) and Calatrava et al. (2021) lent credence to the findings of these findings where they substantiated that religiosity delays the sexual debut of adolescent females even though findings are mixed for adolescent males. Nigerians generally and their adolescents are highly religious and this could have had a slight cushion effect on the psychological control of the parents. Otherwise, a much higher significance of the control would have been observed on the adolescents' sexual risk behavior. It can be inferred then that religiosity is helping to douse the effects of psychological control where such doctrine as "honouring your parents", and "children, obey your parents in the Lord" is promoted.



In line with abundance of research documented, peer pressure was found to be highly correlated and predictive of Adolescent sexual risk behaviour in this study. Nsimbeet al. (2024) in their study, when factors of family structure, wealth, education and popularity were controlled, a female's close group of friends had most influence on the timing of sexual debut. Gardener and Steinberg (2005) from their research affirmed the effect of peer pressure on adolescent risk - taking, sexual risk-taking inclusive. Literature attested to the detrimental effect of peer pressure on adolescent sexual risk behaviour (Chigbu et al., 2021; Cimino & Cerniglia, (2025) Namwiyiri et al., 2023) Whereas, if Nigerian parents had been more supportive, the influence of peer pressure on the adolescents would have been reduced. Ideally, parents should be more influential. Researchers from their studies confirmed that low warmth, high harsh discipline leads some children to lag in developing social-cognitive skills and competence. (Gonzales & Dodge 2010; Wiggers & Paas 2022; Yang et al, 2023).

In the moderation analysis, the perceived parental behaviour regression analysis revealed only the significance of parental psychological control in the prediction of adolescent sexual risk behaviour. However, in the moderating table and at the first step, it can be seen that when peer pressure was added, parental support on adolescent sexual risk behavior became significant; an indication of less effect of negative peer pressure on sexual risk in the face of parental support. Nevertheless, in the second step, the moderation shows that peer pressure significantly interacted with just parental behaviours of psychological control, behavioural control, risk-taking, and then religiosity. As initially indicated, parental psychological control is a high correlate of peer pressure (Crespo-López & Koning, 2026)). This was confirmed by this study where sexual risk behaviour was found to be high when parents employ high psychological control, and negative peer pressure is found to be high. That is sexual risk increases when parental psychological control and peer pressure are high and decreases when both are low. Even with low psychological control, when peer pressure is high, there is still slight increase in sexual risk behaviour, which however



is not comparable to the sexual risk exhibited when the psychological control is high; with high peer-pressure, sexual risk soars up. From the mean values, it appears both psychological control and negative peer pressure have same detrimental effect on the adolescents. In the moderation of Parental Behavioural control, Peer pressure and sexual risk behaviour, sexual risk behaviour was found to increase with high behavioural control and high peer pressure. Possible explanation for this could be that the adolescents solicit the assistance of their mates or connive with them to beat the stifling behavioural control being experienced from parents. The evidence that parental behavioural control is protective for teens is overwhelming (Yang et al. 2025). Parental behavioural control is theorized and usually reported to be related to lower levels of adolescent problem behaviours of various kinds (Dittus et al. 2023; Steinberg et al. 1994). This claim is not supported by this study. However, sexual risk behaviour decreases when peer pressure is low in spite of high behavioural control. To lend credence to the findings on behavioural control, studies found that parental monitoring was related only to very early sexual initiation (aged < 10 years) and not to subsequent initiation of sex or condom use (Debele 2022; Okonta 2025; Romer 1994). Their findings suggest that increased parental monitoring may be a much less effective strategy in settings where early sexual initiation is common. (Azie et al, 2023; Wouango et al. 2025) substantiated that behavioural control alone may be insufficient to encourage risk-reducing behaviour. Parents may also need to engage their children in specific communication about sexual risks. There is evidence that such communication is related to greater use of contraception by girls and less sexual activity overall. As for the moderation of parental risk-taking, peer pressure and the criterion variable, sexual risk increased when both parental risk-taking and peer pressure were high and reduced when both were low. However, the adolescents with low parental risk-taking scored higher when peer pressure is high. This could be due to their un-exposure and vulnerability.

Moderation of religiosity, peer pressure and sexual risk behaviour revealed that the criterion variable is reduced when both religiosity and peer pressure are low and it is



increased when both are high. With high religiosity and low peer pressure, the risk behaviour is at its lowest while with high peer pressure and low religiosity, the sexual risk is at its peak, which indicates the importance of both variables in the sexual risk behaviour of the adolescents. The initiation of sex diffuses through peer networks more rapidly among youth with favourable attitudes toward the behaviour (Clack et al. 2021). Also, Sakellariou, (2025) concluded from their study that higher levels of religiosity tend to delay sexual involvement more than those with lower levels of religiosity. It was further indicated that almost all studies of religiosity and teen sexual behaviour posit a unidirectional linkage whereby religiosity influences sexual behaviour.

Conclusion

In summary, this research has provided insight into the socialization variables of parenting and religiosity and their relationships with Adolescent Sexual Risk Behaviour in Ibadan city. The study also explored the potential moderating effect of Peer pressure between mentioned socialization variables and the adolescent sexual risk behaviour. Hierarchical regression model confirmed about 30% of the participants were involved in risky sexual behaviour. Furthermore, Adolescent Religiosity, Peer pressure and Parental Psychological Control strongly predicted adolescent sexual risk behaviour in Ibadan. Moderate predictions by parental risk-taking and support were observed while parental behavioural control was of little or no significance which could be due to strong significance of parental psychological control and peer pressure. It is identified or implied that a focus in parent training and the improvement of the relationships between adolescents and their parents (not permissive) is likely much more beneficial which help to reverse the high significance of peer pressure as was found in this study. The school should integrate Sex Education into their curriculum, while the Clergy should keep up their good work.

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