



Prevalence and Associated Factors of Aphrodisiac drugs among Youths in Okrika Local Government Area of Rivers State

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ABSTRACT

This study investigated the prevalence and associated factors of aphrodisiac drugs among youth in Okrika Local Government Area of Rivers State. A descriptive cross sectional survey design was adopted for this study. The population of this study comprised of adolescents in Okrika Local Government Area of Rivers State. A sample size of 400 youths was determined using Taro Yamene formula for a finite population. A multi-stage sampling technique was adopted for the study in two stages. The instrument for collection of data was a self-structured questionnaire titled Prevalence and Associated Factors of Aphrodisiac Drugs among youth Questionnaire (PPSAQ). A reliable co-efficient of 0.81 was obtained using Pearson Product Moment Correlation. Data collected was analyzed using Statistical Products for Service Solutions (SPSS) version 25.0. The result showed that the prevalence of aphrodisiac drugs among youth in Okrika Local Government Area of Rivers State was 89(22.8%). The result indicated that there was a significant association between peer pressure ($p < 0.05$), sexual dysfunction ($p > 0.05$), lifestyles ($p < 0.05$) and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State. It was concluded that the prevalence of aphrodisiac drug use was significantly high and this was associated with peer pressure, having multiple sexual partners, having sexual dysfunctions and risky lifestyles. It was recommended amongst others that youths especially men with reported symptoms of sexual dysfunctions should visit the healthcare facility for early diagnosis and treatment to reduce the indiscriminate use of drugs.

Keywords: aphrodisiac drugs, sexual gratification, healthcare facility

INTRODUCTION

Throughout history, both men and women have persistently explored several methods to augment, preserve, and restore their sexual capacity or arouse their desire for the other sex. Health and sexual function are vital aspects of existence. Sexual health can have an impact on both sexes' general well-being and overall quality of life. A sense of psychological, bodily, and social well-being is provided by normal sexual functioning, which is one of the most important components of quality of life. Anger and a higher likelihood of marital violence are often associated with sexual dissatisfaction (Flynn et al., 2016;

Prabhakaran et al., 2018). The World Health Organisation (WHO) defines sexual health as "a state of physical, mental, and social well-being in relation to sexuality." In addition to the potential for enjoyable and safe sexual experiences free from compulsion, discrimination, and violence, it necessitates a positive and respectful attitude towards sexuality and sexual relationships (WHO, 2021). Any food or medication that stimulates the sexual urge, creates a desire for lust, and improves pleasure and performance is considered an aphrodisiac. This word comes from the Greek goddess of love, ÑAphroditaeí. These substances come from plants, animals, or minerals and have been man's passion from the beginning of time (Yakubu et al. 2005). Three categories of aphrodisiacs can be distinguished based on how they work: Those that heighten sexual arousal, potency, or libido may be misused or managed inappropriately Few of the chemicals utilised in traditional remedies across cultures to energise, vitalize, and enhance men's physical performance and sexual function are known to have pharmacological properties. These substances can be derived from both plants and animals. Research by Livingston et al. (2013) and Pitpitan et al. (2014) claimed that aphrodisiac drugs are among the most often abused and improperly used substances by young people, mostly for their sexual potency. The ease with which a person progresses through the phases of sexual desire, arousal, and orgasm, as well as their subjective satisfaction with the frequency and results of their own and their partner's sexual activity, are all considered aspects of sexual functioning. Sexual problems are often the result of intricate biological and medicinal interactions. Most people would immediately think of erectile dysfunction meds when discussing the usage of prescription drugs for sexual facilitation or enhancement. While adolescence is not typically linked to erectile dysfunction, some teenagers and young adults report using erectile dysfunction medication. When examining teenage sexual behaviour, other prescription drugs (mostly opiates and benzodiazepines) should also be taken into account because they may be used to encourage unwelcome sexual interaction. Teenage use and misuse of these drugs is influenced by a number of factors, including broad availability, low risk perceptions, and general views of popular use. Only 19% of boys in their late teens who participated in a Texas study stated taking sildenafil (Viagra) for the purpose of enhancing their sexual performance; the majority claimed doing so out of curiosity (42%) or peer pressure (30%). A quarter of the individuals had started using sildenafil at the age of 15 or 16, and the majority of them had first learned about the medication from friends (19%), family members (32%), or television commercials (42%). While sildenafil has been prescribed to treat ED, it can also be abused to try to improve or heighten erotic feelings (such as desire, gratification, and climax). For many centuries, people in human societies have utilised a variety of psychoactive substances, including alcohol and cannabis, for sex-related purposes. Alcohol appears to be the most often utilised substance for sex, despite the fact that several psychotropic chemicals are used for this reason. Actually, according to Morojele et al. (2016), there seems to be a direct correlation between alcohol usage and sex among men, who think the two are "a match made in heaven." Indeed, it seems that alcohol and sex have complicated interactions. For instance, whilst some people use alcohol as a means of financing sex or to perform gender roles in sexual settings, others utilise inebriation as a pretext for unscheduled sex (Livingston et al., 2013; Pitpitan, at al., 2014 & Rich et al., 2015). In a similar vein, Dumbili (2016) found that some people who use drugs and alcohol as aphrodisiacs also use them to dull or numb their minds so they won't remember messages about safe sex. Bars and other alcohol-consuming environments are conducive to sexual negotiations because sharing a drink with someone else opens up opportunities for sex, and heavy drinking is used "to become bolder in approaching females and to have lyrics" (Reid et al., 2012). It was discovered that one-third of the male and a quarter of the female participants in a study that examined the sexual uses of alcohol and other drugs in nine European cities did so on purpose in order to achieve sexual prolongation, enhance arousal, increase sensation, and derive sexual excitement (Mutchler et al., 2007). Heavy drinking is also thought to provide males who have sex with men the courage to overcome stigma. However, there is a severe drawback to using alcohol to enhance sexual experiences: the tendency for people to become so engrossed in the practice that they rarely stop (Mutchler et al., 2007). Thirty to forty percent of sexually active men struggle with issues related to men's sexuality, particularly premature ejaculation and erectile dysfunction (Nyarko et al., 2021). According to a study, 53% of men between the ages of 18 and 30 utilised aphrodisiacs as a result of ejaculating too soon (Danquah et al.,

2015). In Nigeria, teens and young adults (students) are increasingly purchasing and using medications without a prescription, which is a serious problem. This includes the sale of aphrodisiacs. According to Nyarko et al. (2021), there is a significant rate of aphrodisiac purchases. Aphrodisiacs, often known as sex-enhancing medications, are widely used, mostly by young people, for the primary purposes of pleasure and maintaining an erection.

The usage of aphrodisiac medicines has become commonplace in Okrika Local Government Area, with little regard for the potential negative effects. This is due to the fact that early people needed to be sexually satisfied and/or satisfy someone else beyond their natural ability, which necessitated the usage of medications known as aphrodisiacs or other sexual enhancement products. Aphrodisiac drug misuse can result in potentially preventable health risks, ranging from disease states to death. Additionally, there is growing evidence of the prevalence of adverse medication reactions in recent years. Young adults abusing aphrodisiacs for recreational purposes, knowing or not of the detrimental health effects, frequently employ self-medication, as seen in the case of adults and children living in Rivers State's Okrika Local Government Area. Men and women who are eager to engage in longer sexual activity and who are seeking fulfilment or satisfaction from their sexual experience may search for sexual enhancers as an added effort to prolong their time in bed. As a result, aphrodisiac compounds, which elicit sexual excitement and satisfaction in both men and women who are of sexually active age, can be found in both food and medication products. The usage of sex enhancement medicines is a result of an increasing urge for sexual pleasure. The use of substances and pharmaceuticals for sex enhancement has become so ingrained in society that even the government, families, and law enforcement agencies are oblivious to efforts to combat it. While some governments are less concerned about the rising use of substances, others around the world have formally proclaimed that particular drugs are banned consumables. It is against this background that this study sought to investigate the prevalence and associated factors of aphrodisiac drugs among youths in Okrika Local Government Area of Rivers State.

METHODS AND MATERIALS

Study Design: A descriptive cross sectional survey design was adopted for this study.

Population of the Study: The population of this study consisted of youths in Okrika Local Government Area of Rivers State.

Sample and sampling techniques: The sample size of the study was 400 youths determined using Taro Yamene formula for a finite population.

Stage one: simple random sampling technique was used to select five communities from the Okrika Local Government Area of Rivers State. This was done balloting without replacement. The selected communities are Abam, Okochiri, Kalio town, Abuloma, and Kalio-Ama town respectively.

Stage two: purposive sampling technique was employed to select youths within age 15-40years in Okrika Local Government Areas who are exposed to sex driving drugs.

Method for Data Collection

The instrument for collection of data was a self-structured questionnaire. The questionnaire titled Prevalence and Associated Factors of Aphrodisiac Drugs among Youths Questionnaire (PPSAQ) comprised of section A, B, and C respectively.

Validity/Reliability of the instrument: The instrument was presented for face, content and constructs validity from the supervisor and three other experts. The validated instrument was presented for reliability test using test-retest method. Scoop of 20 copies of the questionnaire was administered as a sample in Eleme Local Government Area with similar characteristics. The instrument was considered reliable as the internal consistency coefficients of 0.81 was obtained using Pearson Product Moment Correlation

Method for data Analysis: Data collected was analyzed using Statistical Products for Service Solutions (SPSS) version 25.0. Descriptive statistical tools such as frequency count, percentage, and chi square were employed test the null hypotheses at 0.05 level of significance.

RESULTS

The sample size for the study was 400 but the analysis was based on 390 (97.5%) because the researcher was not able to retrieve all copies of the questionnaires.

Table 1: Prevalence of Aphrodisiac drugs

S/N	Variables	Yes	No
		Freq (%)	Freq (%)
1	I use certain food items to boost my sexual desire	155 (39.7)	235 (60.3)
2	I use certain drugs such as sildenafil to boost my sexual gratification	50 (12.8)	340 (87.2)
3	I take tramadol to enable me perform sexually well	89 (22.8)	301(77.2)
4	I inhale drugs to boost my sexual satisfaction	49 (12.6)	341 (87.4)
5	I take India hemp for the purpose of sexual gratification	148 (37.9)	242 (62.1)
6	I use certain illicit drugs for the purpose of sexual activity	86 (22.1)	304 (77.9)
7	I take Anafranil drugs to enable me have prolong erection	64 (16.4)	326 (83.6)
8	I take other drugs to enhancing me sexually	72 (18.5)	318 (81.5)
	Grand total	89(22.8)	301(77.2)

Table 1 shows the prevalence of aphrodisiac drugs among youth in Okrika Local Government Area of Rivers State. The result showed that the prevalence of aphrodisiac drugs among youth in Okrika Local Government Area of Rivers State was 89(22.8%).

Table 2: Chi-square test significant association between peer pressure and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State

Variables	Use of aphrodisiac drugs		Total Freq (%)	χ^2 P-value df	Decision
	Yes Freq	No (%)			
Use of aphrodisiac drugs as result of peer pressure					
Never	19(9.0)	191(91.0)	210(100)	90.498	Rejected
Rarely	12(15.6)	65(84.4)	77(100)	0.000	
Sometimes	58(56.3)	45(43.7)	103(100)	2	
Total	89(22.8)	301(77.2)	390(100)		

***Significant, p<0.05**

The result in table 2 above revealed that there was a significant association between peer pressure and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State (X^2 value = 90.498; df =2; p<0.05). Therefore, the null hypothesis which stated that there is no significant association between peer pressure and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State was rejected.

Table 3: Chi-square test significant association between multiple sexual partners and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State

Variables	Use of aphrodisiac drugs		Total Freq (%)	χ^2 P-value Df	Decision
	Yes Freq	No (%)			
Use of aphrodisiac drugs as a result of multiple sexual partner					
Never	31(13.8)	193(86.2)	224(100)	79.926	Rejected
Rarely	2(4.0)	48(96.0)	50(100)	0.000	
Sometimes	55(54.5)	46(45.5)	101(100)	3	
Always	1(6.7)	14(93.3)	15(100)		
Total	89(22.8)	301(77.2)	390(100)		

***Significant, p<0.05**

The result in table 3 above revealed that there was a significant association between multiple sexual partners and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State (X^2 value = 79.926; df =3; p<0.05). Therefore, the null hypothesis which stated that there is no significant association between multiple sexual partners and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State was rejected.

Table 4: Chi-square test significant association between sexual dysfunction and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State

Variables	Use of aphrodisiac drugs		Total Freq (%)	χ^2 P-value Df	Decision
	Yes Freq	No (%)			
Use of aphrodisiac drugs as result of sexual dysfunction					
Never	64(23.7)	206(76.3)	270(100)	3.954	Accepted
Rarely	23(24.7)	70(75.3)	93(100)	0.138	
Sometimes	2(7.4)	25(92.6)	27(100)	2	
Total	89(22.8)	301(77.2)	390(100)		

***Non Significant, p>0.05**

The result in table 4 above revealed that there was no significant association between sexual dysfunction and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State (X^2 value = 3.954; df =2; p>0.05). Therefore, the null hypothesis which stated that there is no significant association between sexual dysfunction and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State was accepted.

Table 5: Chi-square test significant association between lifestyles and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State

Variables	Use of aphrodisiac drugs		Total Freq (%)	χ^2 P-value Df	Decision
	Yes Freq	No (%)			
Use of aphrodisiac drugs as result of lifestyle					
Never	35(16.6)	176(83.4)	211(100)	12.026	Rejected
Rarely	18(25.0)	54(75.0)	72(100)	0.000	
Sometimes	20(32.8)	41(67.2)	61(100)	3	
Always	16(34.8)	30(65.2)	46(100)		
Total	89(22.8)	301(77.2)	390(100)		

***Significant, p<0.05**

The result in table 5 above revealed that there was a significant association between lifestyles and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State (X^2 value = 12.026; df =3; p<0.05). Therefore, the null hypothesis which stated that there is no significant association between lifestyles and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State was rejected.

DISCUSSION

The result showed that the prevalence of aphrodisiac drugs among youths in Okrika Local Government Area of Rivers State was 89(22.8%). The result of this study was expected because many youths prefer experimenting drugs especially for pleasure which results in the use of sex enhancing drugs. The result of this study is in line with the findings of Amoah et al. (2022) which reported that the prevalence of aphrodisiac drug use was high amounting to 23.4% of the participants had more than one partner during the same period and 17.6% in male only. Hafez et al. (2022) buttressed that the prevalence of aphrodisiac drug use was 85.5% and utilized without doctor’s prescription or orders. In Nigeria, studies of Adamu et al. (2022) added that the prevalence of aphrodisiacs use among adults in Sokoto metropolis was 138(67.6%) and up to 64(46.2%) of them have used it within the past one month. Also, Wada et al. (2023) gave an illustration that good proportion 508 reported ever using TM for sexual enhancement, with a prevalence of 64%. The result of this study was also in credence with the studies of Manortey et al. (2018) which illustrated that 52.6% reported ever using aphrodisiacs at some points in their lives for the purpose of sexual intercourse with a female. It is plausible because most youths tend to satisfy their female friends sexually and last long during sexual activity. Those youths who wish to have a prolonged sexual penetration with their female partner are likely to use aphrodisiac drugs. As at the time of this study, there were no prior studies contradicting outcome of this present study. Hence, the prevalence of aphrodisiac drugs use was significantly high.

The result of the study revealed that there was a significant association between peer pressure and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State (p<0.05). The result of this study is expected because peers compel their fellows to do what is required in the group which might be the use of aphrodisiac drugs. The outcome of this study is in consonance with studies of Odebode and Awoye (2022) which indicated in their study that negative use of drugs were found significantly associated with peer influence among youths. Harte and Meston (2011) reported that the prevalence of sexual enhancement drugs was independently associated with friends influence among youths. Ahmed et al. (2017) added that there was a significant association with sexual enhancement expectancy and risk behaviours. Studies of Suleiman et al. (2016) which illustrated that 22.6% of youths using aphrodisiac drugs were due to pressure to from their friends and colleagues. It is plausible because youths are most vulnerable group in the population which indulges in risky behaviours such as use of drugs. As at the time of this study, there were no contrary findings against the outcome for present study.

The result of this study indicated that there was a significant association between multiple sexual partners and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State ($p < 0.05$). The result of this study is necessary because youths who have more than one sexual partners derive means of satisfying them sexually which in turn puts them at chance of using aphrodisiac drugs. Amoah et al. (2022) reported that there was a significantly positive relationship between multiple sexual partner and use of sexual enhancing drugs ($p < 0.01$) and having multiple sexual partners was 2 times more likely to consistently utilize aphrodisiac drugs for sexual purposes. Adamu et al. (2022) affirmed that the use of aphrodisiac drugs was high among men (66.3%) and their partners were in support of it for sexual satisfaction. Hafez et al. (2022) agreed that in their study, consumption of aphrodisiac drugs was significantly associated with having multiple wives and life style of the studied sample where $P < 0.05$ as a common predictor. Wada et al. (2023) reported in their study that men with more than one wives are more likely to use sexual enhancement drugs to obtain sexual satisfaction as compared with those with only one wife and was significantly associated with it. Ahmed et al. (2017) reported that youths with more than one sexual partner are 2.10 times more likely to predict the use of sexual enhancement drugs. Harte and Meston (2011) asserted that the lifetime sex partners and lifetime number of one-night stands are independently associated with recreational use of aphrodisiac drugs. It is pertinent to note that the zeal for sexual satisfaction with more than one sexual partner may determine the use of sexual enhancement drugs. However, as at the time of this study, there were no prior studies contradicting the outcome of the current study indicating that multiple sexual partner is significantly associated with aphrodisiac drug use.

The result of this study revealed that there was no significant association between sexual dysfunction and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State ($p > 0.05$). The result of this study is expected because youth's in spite of the health condition may use sexual enhancing drugs if the need arises. The result of this study is in line with findings of Nyarko, et al. (2021) which reported that men's sexuality most especially premature ejaculation and erectile dysfunction is affecting 30 to 40% of sexually active men and was significantly associated with sexual dysfunctions. Danquah et al. (2015) affirmed that more than half of men (53%) with premature ejaculation are more likely to use sex enhancing drugs to participate sexual intercourse effectively. Amoah et al. (2022) reported that there was a significantly positive relationship between multiple sexual partner and use of sexual enhancing drugs ($p < 0.01$) and having multiple sexual partners was 2 times more likely to consistently utilize aphrodisiac drugs for sexual purposes. Hafez et al. (2022) buttressed that level of erectile dysfunction are significantly associated with the use of aphrodisiac drugs among men ($p < 0.05$) and 38.5% use the drugs for sexual intercourse. Wada et al. (2023) added that use of aphrodisiac drugs was traceable to previous or diagnose case of erectile dysfunctions in male. Studies of Nyarko-Sampson et al. (2017) asserted that premature ejaculation was perceived to be the main reason why some young men (51.33%) use sex enhancing drugs. Fatade et al. (2022) posited that prolonged sexual performance, use without erectile dysfunction or medical advice, treatment of erectile dysfunction and recreational purposes with an internal consistency. Chowdhury, et al (2018) founded that the prevalence of Premature Ejaculation (PE) and Erectile Dysfunction (ED) was 26.4% and 21.8% respectively.

The result of this study depicted that there was a significant association between lifestyles and aphrodisiac drug use among youths in Okrika Local Government Area of Rivers State ($p < 0.05$). The result of this study is required because youths who engage in risky or negative lifestyles are likely to use certain drugs during sexual activity to reach stage gratification. The result of this study is in credence with studies of Hafez et al. (2022) and Wada et al. (2023) reported that lifestyles (64%) was found as a significant predictor of sexual enhancement among youths and men and percentage of Nigerian men using the drugs was high. Chowdhury et al. (2018) revealed that a good proportion of youths with aphrodisiac drug use are traceable to risky sexual behaviour. Dumbili (2016) asserted that youth that engage in negative lifestyles reported consistent use of drugs including aphrodisiac drugs which has several consequences on sexual intercourse. Ahmed et al. (2017) reported that the reason for use aphrodisiac drugs was to have stimulation of love and the enhancement of sexual pleasure from my friends. It is plausible because youths are most vulnerable group in the population which indulges in risky behaviours such as use of

drugs. As at the time of this study, there were no contrary findings against the outcome for present study. Hence, lifestyles were significantly associated with aphrodisiac drug use.

CONCLUSION

In regards to this study, it was concluded that the prevalence of aphrodisiac drug use was significantly high and this was associated with peer pressure, having multiple sexual partners, having sexual dysfunctions and risky lifestyles. There is need to sensitization and educating youth on the negative consequences of using sexual enhancement drugs like aphrodisia.

RECOMMENDATIONS

Based on the outcome of this study, the following recommendations were made:

1. Youths especially men with reported symptoms of sexual dysfunctions should visit the healthcare facility for early diagnosis and treatment to reduce the indiscriminate use of drugs.
2. Health educators and other allied health professionals should organize health promotion programmes for youths and adolescents on the social and health implication of negative use of drugs and the need to seek for drug counselling.
3. Government through the ministry of health should inspect and monitor drug dealers on the sale of over the counter drugs which may lead to self-medications.
4. Health institutions should embark on extensive educational programmes to educate the public on the devastating health consequences from indiscriminate use of aphrodisiacs without medical indication.
5. Doctors and counsellors should organize community-based talk to orientate single and married men on the use of aphrodisiac herbs.

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