

# Performance of Religious Parents in Providing Sexual-related Information to their Children: The case of Thika West Sub-County, Kiambu County, Kenya

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**Abstract:** The purpose of this study was to find out how Kenyan Religious parents perform in providing sexual-related information to their children. A survey, involving 322 secondary school students in Kiambu County, Kenya was carried out, on five basic sexual-related questions. The students responses on their source of sexual related information was cross tabulated with the demographic information of parents religious denominations. The respondents were asked from which source they learnt names of sexual organs in mother tongue where only 9.6% learnt from parents, 2.8% from religious sources, 6.8% from the school curriculum, 6.8% from the media, 26.7% through self-discovery and 47.2% from the peer group. Out of those 9.6%, 1.9% were Catholics, 1.2% were Muslims, 3.1% Pentecostals, and 3.4 Protestants. The second question was the respondents' source of information about how babies are made, and only 9% and 2.2% responded on parents and religious sources consecutively. The rest 61.5% cited school curriculum, 11.2% self-discovery, 10.9% peer group, and 5.3 % media. Out of the 9% parents, 3.1% were Catholics, 3.1% Protestants, 1.6% Pentecostals, 0.9% Muslims and 0.3% SDAs. The third question was respondents' source of information about wet dreams where only 2.8% named parents and 3.1% religious sources. The other 55% learnt through school curriculum, peer group 22%, self-discovery 14%, and media 3.1%. Out of the 2.8% parents, 0.6 Catholics, 0.9% Protestants, 0.9 Pentecostals and 0.3, Muslims. The fourth question on sources of information about menstruation showed the school curriculum rank highest 56.8%, self-discovery 16.5%, peer group 9%, parents 8.1%, media 6.2% and religious sources 3.4%. Out of the 8.1% parents, 3.4% were Protestants, 2.8 % Catholics, 1.2% Pentecostals and 0.6% Muslims. The fifth question was on the source that calls for abstinence. As expected, Religious leaders led with 35.4%, the school 21.7%, parents 20%, self-10.6%, with media among the lowest at 6.8% and peer 4.6%. Out of the 20% parents 8.7% were Protestants, 7.8% Catholics, 2.8% Pentecostals and 1.6% Muslims. The findings led to the conclusion that although the parents supported by their religious faiths have all the primary rights to inform provide sexual-related information to their children, very little if any is provided. School curriculum provides only what is allowed and it is evident that students continue to source for what they lack from alternative sources like media and peers. It is also clear that media and peer are not encouraging abstinence. The study recommends that stakeholder be involved in developing a comprehensive sexuality education program and incorporate it the school's curriculum for teachers to handle. Failure to do so leaves the youth vulnerable to negative consequences of sexual behavior that hampers self-development and educational goals of the society.

## I. INTRODUCTION

### 1.1 Background Information

Human sexuality is what provides men and women with the capacity to enter into relationships with others. Sexual relations can make humans experience completeness and joy of living, but when mishandled, it can be a conduit of frustration, shame, regret and low self-esteem. As Jones D.N, (2011) asserts, sex was not created to be an encumbrance, a trap, or impediment to spiritual growth. She further posits that sexual urges are an expression of our humanity, that fundamental dimension of human beings that governs intimate, sensual, affective, emotional, and sexual relationships.

Knowledge about handling this unique but natural phenomenon of human experience is of paramount importance. Freud; Maslow et al (1992) states that we are sexual from birth, and sexual expression is a basic human need throughout our lives. Sexual expression is an essential component of healthy human development for individuals of all ages. At certain points in life, sexuality may manifest itself in different ways where each stage brings with it pressures for change and sexual development milestones. If sexual health is to be attained information about sexuality must be provided at all stages from childhood throughout adolescent stage.

Basic information at childhood stage includes knowledge of body parts by names and their use of those parts. Whereas colloquial terms are used to refer to sexual organs during childhood, information about the same need to be provided as children become of age. Other questions received from children when growing up is how babies are made, menstruation and wet dreams come along as they reach adolescence. The quality of information provided and the source of that information may have a bearing on the sexual behavior of the recipient in adult years (kahigi, 2018).

Despite the fact that different groups of people in the society concur on the importance teaching sexuality education as a guide to development of proper sexual behavior, the debate on who can be trusted with it still continues. Studies show that religious institutions are hesitant when it comes to providing sexual related information to the youth by other agents such as the school teachers. However sex and its relationship to a

meaningful spiritual life is a topic largely ignored, greatly disparaged in Eurocentric teachings in particular African American Churches, and largely misrepresented in the media and society (Jones, D.2011). Reality is that we live in a society where we are bombarded by sex and, unfortunately, religion has failed to put sexuality in any useful context (outside of marriage and procreation), while our communities and societies are ravaged by HIV/AIDS, unplanned pregnancies and widespread sexual abuse and dysfunction (Obare F.2013). The media has taken this sexual disconnect created by religion and turned it into a psychologically loaded abstraction of absurdity and has redefined sex to body parts and sexual acts (Jones D.2011).

In Kenya, religious institutions are adamant that such a sensitive topic that impacts on morality must be left to the parents under their guidance. But Kangara L. (2004) asserts that the churches, even in the advent of HIV/AIDS, are not very comfortable in discussing sexuality issues or creating a favorable space for the young adults within the church to explore their sexuality. In an era of sexual freedom, religious institutions still hamper dispensation of sex education that can guide and assist its members towards surviving in the global sex culture (Moran, P.2000.). While churches need to preserve the sanctity of marriage, such an objective can only be attained if people possess adequate knowledge of their sexuality and how to express it in a changing society. The irony is that many religious traditions affirm sexuality as a divinely bestowed blessing and assist people in developing the capacity for caring, supportive, non-coercive, and mutually pleasurable sexual relationships Jones D.(2011)..

Parents are the members of the religious faiths, and their decisions and performance in various aspects of their social life are partly grounded in the doctrines of their religious affiliations. According to 1999 census by on Nairobi churches by Daystar University survey, Summary Report, it is estimated that between 70-80 percent Kenyans are Christians. Catholic and Protestant churches have the most followers and are very conservative theologically and morally. Kariuki, B. (un.d) posits that Kenya is a center for the independent church movement, with over five hundred groups ranging from African denominations to prophetic cults. This means that majority of parents are aware of their denominations stand on sexuality education and are influenced in their stand on the matter.

It is also expected that the parents and their religious leaders serve as the role models of the sexual morality they expect of their children. But whereas we expect to have a society in which sexuality is policed by the doctrines of religious faiths professed, with believers upholding the religious doctrines of abstinence, fidelity/faithfulness in marriage the trend of sex and increase in fornication (amongst Christians and non-Christians) indicates that the religion is, to some extent, losing its grip on adults (Christine P et al, 2019). Yet, the same adults use religion as their reason for opposing comprehensive sexuality education in schools to the children who are

cognizant to how parents behave. Some children are victims of sexual abuse by family members and religious leaders without having a clue of what was happening to them as they lack sexual information (African Population and Research Centre, 2020).

Covid-19 pandemic, seem to have brought into the open serious gaps in family institutions in matters of sexuality education. Cases of child abuse were highest in this period with child sex exploitation manifesting itself in pregnancy cases never experienced before. It is worth noting that while the perpetrators included fellow teenagers out of school due to the pandemic, close family members including parents were involved (Ministry of Education reports, 2020). Yet the narrative has been that the family should be left with the responsibility of providing sexuality education to their children supported by their religious doctrines.

What is clear is that the two institutions of the church and the family's time to acknowledge contemporary social changes that need adjusting ways of doing things. Technology driven globalization has increased the interconnectivity of people and accelerated the spread of ideas, information, and perceptions in almost every aspect of social life. (Agbemenu, K.et al 2011). This has resulted in significant social and cultural changes particularly for some groups of young people in the context of sexual values, norms and behaviors. Yet all these is taking place, while at the same time, religious and socio-cultural traditions remain entwined and continue to have profound effects on collective ideals and moral standards around sexual behavior, sexuality and gender.

Cases of premarital pregnancies in the year 2020 is almost a pandemic in itself. In Kenya, 900,000 girls aged 10 to 19 were reported pregnant at health facilities in 2018 and 2019 (Kahurani, E. 2020). The scenario is worse for within the short period of lockdown from movement and closure of schools due to Covid-19 reported in Kenya, the government reported a surge in sexual and gender-based violence with adolescents mostly being defiled. Thousands of school girls from all 47 counties were impregnated during the lockdown, when it was expected the school going children are safest at home with their parents and other relatives.

The authorities in most cases blamed parents/ guardians for not taking care of the teenagers, while parents confess to having no clue on what was happening and even called for help (The Standard, 17th June,2020; GSR in the classroom, 1st October,2020). What seems to have been the case is that students were more exposed to sexuality content more than the parents and probably religious leaders could imagine, given that curiosity will lead them to look elsewhere for what they lack from parents. A study by Kahigi C.M (2015) showed that students relied on media and Peers for sexuality information because what the school offered was economical, the parents' information on sexuality was vague and hostile, while for the religious institutions sexuality education was almost nonexistent. The same study showed that the students

supported the idea of schools to provide sexuality education to enable them avoid pitfalls from lack of knowledge.

### *1.2 Problem Statement.*

The background information shows that sexuality enhances human relationships and everyone requires socialization on how to conduct themselves. While it is accepted that parents are the primary teachers of sexual related information to their growing children, and that majority of families in Kenya belong to a particular religious faith that advises them on standards of sexual morality, young people continue to suffer from consequences of irresponsible sexual practices. It is also clear that while sexuality information is accessible from other sources like media, peer group and self-discovery, the youth are also at risk of sexual abuse in their own homes by family members. It is therefore important to find out how much of the very basic sexuality information gets transmitted by religious parents to their children. This would enable us to see how the parents are performing in their role of transmitting sexual related information to the youth.

### *1.3. Purpose of the Study*

The purpose of this study was to establish the extent to which parents provide basic sexuality information based on their religious affiliations.

### *1.4. An Overview of Church and Parents Involvement in Sexual Related Information*

Today there are more than one billion 10 to 19-year-olds in the world growing up in circumstances quite different from those of their parents (Moran, J.2000.). They face both the benefits and risks of mobile Internet access. The environment in which they are making decisions about their sexual and reproductive health is rapidly changing and often uninformed choices continue to hamper their development into fully empowered individuals useful to their society. Popular culture including movies, music and television often underpins notions of young women who are taken without consent, and subsequently fall in love with their 'conqueror'.

Contemporary world needs contemporary ways of doing things and these calls for a lot of research to establish how to deal with contemporary sexuality matters. Too few young people begin their sexual lives with anything approaching adequate preparation and this can have harmful consequences. A lack of appropriate sexuality education leaves many people vulnerable to coercion, abuse and exploitation, unintended pregnancy and sexually transmitted infections (STIs), including HIV/AIDS (Kenya Demographic and Health Survey 2003). According to United Nations agencies, access to comprehensive sexuality education is grounded in the fundamental human rights of having the right to education, the right to health, the right to sexuality and moreover, the right to non-discrimination, the right to privacy all of which, on the overall impacts the right to life. A denial of comprehensive sexuality education constitutes a denial of these fundamental rights (WHO, 2017).

Research from around the world shows that comprehensive sexuality education in schools is absolutely the best way to prepare children for adulthood. A study on sexuality education programs in Kenya by African Population and Health Research Center (APHRC) in conjunction with Guttmacher (2017) showed that good quality sex education can lead to a decrease in unintended pregnancies and sexually transmitted infections. This is because Sex education leads to change of behaviors such as later start of sexual activity with a reduced number of partners and increased contraceptive and condom use. Importantly research clearly shows that it does not lead to an increase in sexual activity among young people. The study also revealed that Young Kenyans Misinformed about Sex and Sexuality

It is evident is that Sexuality education has long been source of anxiety for parents, especially those with strong religious beliefs and this affects their communication. But for those who are able to talk about it need to know that adolescents welcome the idea. A study by Fisher, T.D (1982) indicated that teenagers whose parents talk to them about sex tend to be less sexually active and more likely to use an effective method of contraception. The same study showed that failure of adults to provide sexual instruction to the youth is due in part to religious sanctions and in the other part to their own inadequate knowledge base. DiIorio, C., K. Resnicow, W. N. Dudley, S. Thomas, D. T. Wang, D. F. Van Marter, B. Manteuffel, and J. Lipana. (2000) showed that the mother's degree of efficacy beliefs, along with her expected outcomes associated with talking about sex, the importance of religious beliefs to her, and the age and sex of her adolescents were important factors associated with talking with them about sex.

Coyne, Beasley T. and V. J. Schoenbach. (2000) study on the African-American Church as a Potential Forum for Adolescent Comprehensive Sexuality Education investigated the attitudes and beliefs of clergy from African-American churches towards sexuality education and the provision of sexuality education in their churches. The respondents' highest priority issues were drugs, violence, HIV/AIDS, pregnancy and alcohol. Many (76%) had discussed one or more of these issues in church. All respondents wanted additional health seminars for their adolescents, though some clergy (30%) excluded some sexual topics (i.e., anal sex, bisexuality, homosexuality, masturbation, and oral sex. The study recommended that the church should be considered as a potential forum for providing comprehensive sexuality education for African-American adolescents. Jones D.L (2011) Thesis on A Strategy for Successful Christian Sexual Education Ministry in the African American Church, suggested that use of parents to provide sexuality education was necessary. The clergy reported lack of confidence in the quality of parent discussions about sex with their children. The results proved to be a motivational incentive for church leadership to support and to aid in building the communication structure between parents and their children.

As governments realize the need for children to be informed on sexual related information to curb the ever increasing premarital pregnancies among adolescents, United Kingdom (UK) introduced Sex and Relationship Education (SRE), and was made compulsory for 11 year olds from September 2020. Although it involves teaching children about reproduction, sexuality and sexual health, does not promote early sexual activity or any particular sexual orientation, there has been a backlash from religious communities with some pulling out their children from SRE classes Ritu, (2016). Why many educators hail this as a much-awaited progressive move, there has been outrage from some groups of parents, who on the grounds of their religion, argue that sex education should not be a part of the school curriculum. The ambition is at least substantively evident in age-appropriate programs like one offered in St. Jan de Doper elementary school in Utrecht in the Netherlands, where children as young as kindergarteners learn about the pleasures as well as risks of feeling close to others.

When it comes to Africa, reports by various agencies indicate a need to address the sexuality problem as well. An estimated 7.5 million adolescent women in Sub-Saharan Africa who are sexually active don't want to be pregnant. By one estimate nearly one-fifth of all African girls and women between 10 and 19 become pregnant. Nearly four in 10 girls younger than 18 in Sub-Saharan Africa are married, and African women generally face some of the highest rates of sexual violence in the world according to APHRC(2017). It is this kind of scenario that made 21 governments in Eastern and Southern Africa to agreed in 2013 to ramp up sexuality education and youth-oriented reproductive health services in their countries, largely to respond to the HIV threat to young people (UNESCO, 2013). Each of the countries signed that agreement, leading to the courses their schools offer today. A 2019 Population Reference Bureau (PRB) scorecard of youth-oriented family planning policies in 15 Sub-Saharan African countries found that 13 supported the provision of sexuality education. Nigeria discouraged sexuality education altogether. Uganda, despite calling its course "sexuality education," requires students to commit to sexual abstinence.

Even with pervasive social attitudes in many cases that limit what can be discussed in class, some African nations are taking creative steps toward education that could support not only healthy sexuality but better gender relations and a reduction in sexual violence in the world's most youthful continent. Rwanda and Zambia, in fact, abide by what the United Nations argues young people most need in an increasingly crowded and challenging world of human relationships. In those countries, schools offer something actually labeled, perhaps reflecting aspiration more than technical accuracy CSE.

Despite the social changes that have occurred in the lives of Kenyans, religious institutions continue to celebrate an era of chastity and sexual conservatism. In an era of sexual freedom, religious institutions still hamper dispensation of sex

education that can guide and assist its members towards surviving in the global sex culture. Society must also recognize that a majority of adolescents will become involved in sexual relationships during their teenage years. A study by Karamat, A.H and Naidoo, A. (1999) on "Sex Education Sources and Attitudes about Premarital Sex of Seventh Day Adventist Youth", where 37 youths were surveyed about their sex education and attitudes towards premarital sex. Analysis indicated differences between their attitudes and actual sexual behavior. While 70% endorsed the church's prohibition on premarital sex, 54% had engaged in premarital sex.

While parents may believe that not teaching children about sex means they won't have sex, evidence shows that the reverse is true according to Karin Hulshof, Regional Director for UNICEF East Asia and Pacific. Studies show that adolescents were at elevated risk for negative

In Kenya, opposition from certain groups of the societies cause bureaucratic shifts and changes within relevant ministries, while the challenges within the administrative and pedagogic dimension see a disconnect from the development of context-specific curricula to how they are imparted within the schools and out-of-schools. Teachers are yet to be trained to undertake the lessons if and when it is allowed by the stake holders.

Another angle of opposition is enhanced by the stigma on the centrality of sexuality where it is feared to stir up premature sexual activities among young people. These complexities are fueled and shaped by religious strongholds, which provide advice on moral, behavioral, and cultural codes of society. Oginde, (2018) disagrees that churches and parents oppose comprehensive sexuality education. From a point of ignorance and naivety – having buried their heads in the sand with regard to child sexuality. He posits that many parents and family organizations are in full support of wholesome sex education. Instead, concern is that, unlike traditional sex education, CSE is highly explicit. But this opposition has not prevented the youth from engaging in sexual activities as studies reveal.

A study by D'Sidze (2017), showed that while most teachers focused on abstinence and avoided teaching about contraceptives, a quarter of the students aged 15-17 had sexual intercourse at least once. The opponents of sexuality education aver that it is the responsibility of the parents to provide this kind of information. However, studies show that this is not the case, particularly when one listens to the youth. In the Kisumu, Nairobi and Mombasa studies for example, nearly a third (30%) reported that they did not receive this information from their parents

A study by Saratu Ajike (2016) on Sexuality Education in Christian Homes, of 400 young people (15-24 years old) were selected randomly from six (6) different churches, showed a high level (91.8%) of sex education knowledge; more than half (55%) were between 15 to 19 years; 52% were females and 75% of respondents' parents were educated at the tertiary

level. Only 73 (18%) of the respondents were educated about sex at home often and 99 (24.8%) never did. It can thus be concluded that the prevalence of sexuality communication between young people and their parents in Christian homes is low.

A similar study by Kahigi C.K (2015) showed that most respondents across the community, civil society and government agencies preferred that parents be the first to provide sexuality information to their children, because of their pivotal role in early childhood development. However, some observed that “this is a conversation that is not happening.” Indeed, while student respondents felt that their parents supported sexuality education, a member of a youth organization opined that discussing topics related to sexuality was difficult for parents, who often feel embarrassed or do not want to admit that their children need such information.

As mentioned in the introduction, Covid-19 year 2020 exposed the problem in contemporary sexual scenario. A quick analysis by Elizabeth Kahurani (Kenya Health Information System, 26 June 2020) showed that Nairobi County was leading with 11,795 teenage pregnancies in the period Jan-May 2020. This is higher than last year’s figures reported in the same period. Kakamega County is a close second with 6,686, Machakos County that has been the focus of the latest public outcry on teen pregnancy ranks number 14 with 3,966 cases registered this year. From all the counties, the total numbers reported for the period January-May 2020 are 15,143. It is important to note that the KHIS data only captures cases reported in the health sector and so it is possible that there are many other pregnant girls who are not counted because they have not been to the health centers.

Cases of rebellious students running away from home were reported and those that returned home retaliated that they were bored with lockdown and went to blow off some steam. Media houses reported seven girls that went missing in November (daily Nation, Standard and -14th November 2020) after being enticed by sex trafficking syndicates in Nairobi. On return after two weeks, three of the teenagers claimed to have been lured by promises of auditioning for acting, only to find them drugged and used for porn videoing.

‘Students’ Horror Orgy’ was another media house headline news after 44 teenagers and one adult were busted by the police in a wild party where alcohol, bang and assorted drugs were being smoked freely as they engaged in sex orgies in a Nairobi home (Citizen Tv news 20, Dec, 2020). They were found to have come from three counties, Kiambu, Machakos and Nairobi on invitation by one of their friends. Another twenty six teenagers had been arrested in a ‘brothel’ in Kakamega where cameras had been set ready to record as they performance played sex as a group (Daily Nation, 20th September, 2020). In all cases these adolescents implicated their peers who have contact with immoral adults as well as watching porn scenes using the gadgets provided to enable them learn via internet from home.

By looking at the cases cited above, the need for more education to the teenagers become apparent. The responsibility need not be left to a particular agent but it needs to be approached by all stakeholders. Teenage pregnancy is a blow to bodies and aspirations of young mothers and a recipe for poverty cycle in low income families where most belong. It is clear that if societies have to invest in the youth, an essential aspect of this investment must be provision of comprehensive sexuality education (CSE) which imparts critical information and skills for life. These not only include knowledge on pregnancy prevention and safe sex, but also understanding bodies and boundaries, relationships and respect, diversity and consent.

The family unit continue to have a big influence on right versus wrong on matters concerning the upbringing of children. As studies show, while the Kenyan church seems to be losing its grip on the individual, its impact on the Kenyan family form and structure continues to be strong. Kihiko (undated) maintains that while western culture is increasingly changing the values of, especially, underdeveloped societies, and the family is still a respected unit in Kenya and functioning as ideal. Therefore, by and large sexuality approaches differs greatly by religion and by the culture in which that belief system is found. But it is apparent that what the children are told by parents and what they choose to do are two different things Karamat & Naidoo (1999).

#### *The Youth and Sexual Related Information*

Rarely do the adults consider the opinion of the youth when making decisions about sexuality information. As consumers of whatever is provided, it is important to include their views in the final decision for what they face today is different from what the adult generation faced at the same age. Studies continue to show that young people yearn for sexuality information all over the globe, not just out of curiosity but as a tool for their survival. Modern youth are living under circumstances that provide them with access to age-inappropriate sexuality information from many sources, such as media, peers, immoral family members and hypocritical religious leaders. In order for sex education to be effective, it needs to reach young people before they become sexually active. It needs to be age-appropriate and delivered in a participatory and engaging way that is based on science and facts (APHRC) Robert Engelmann

Sex education can be controversial as its opponents claim that children are being taught how to have sex thereby undermining the institution of marriage. Karin (2016) asserted that when the media and politicians prioritize the voices of religious parents and groups who seek to control their children, especially girls, we fail these children. The media, politicians, teachers, parents and religious institutions have failed to let the youth speak up about their desires and needs.

A 2019 report on comprehensive sexuality education in Sub-Saharan Africa, a collaborative effort by Forum for African Women Educationalists (FAWE) and the African Population and Health Research Center (APHRC), concluded that most

countries lack frameworks for monitoring and evaluating CSE programs and fail to engage adolescents as stakeholders in designing the programs. The results indicated that adolescents were marginally interested in obtaining more information about sexuality topics while parents were significantly more interested in their adolescents obtaining more information on sexuality topics.

The same report showed that adolescents were knowledgeable about sexual functioning, and were not greatly concerned about the sexual issues presented. Mother, school, and friends were both adolescents' first and current sources of sexuality information. They preferred mother, school, and church in that order. Parents reported that mother, school, and father were adolescents' current sources of sexuality information. Parents preferred mother, church, and father. The important thing to note is that adolescents want sexuality information but parents are not comfortable in doing it. A program in some schools in Burundi makes available "school aunts" and "school fathers," school staff is chosen with student input, to counsel students who ask for help on matters of sex or sexual violence. The program is modeled on family tradition in the country, where trusted paternal aunts teach girls about sex while fathers are tasked with the responsibility for boys. This is an example of proactive parents with understanding that the youth require sexuality information to prepare them for adult life.

Estelle M; Sarah K; Stephen M; Caroline P; Martin M; Muga. Akilinora B; and Chimaraoke (1999) on students' attitude to religious opposition to sexuality education indicated that almost all students (99%) believed that sexuality education should be taught in schools. The main reason for their support was the need to know how to avoid getting HIV or other STIs (cited by 69%). The higher proportions of students citing many of the reasons in Homa Bay county than in Nairobi and Mombasa Counties reflect the relatively high risks of unintended pregnancy and HIV in that region, which perhaps lead students to recognize the multiple benefits of sexuality education in addressing various issues that they perceive as prevalent in their area.

A study by D'Sidze, (2017), showed that while most teachers focused on abstinence and avoided teaching about contraceptives, a quarter of the students aged 15-17 had sexual intercourse at least once. As noted above where parents are reluctant to talk to their children on matters sexuality, studies show that adolescents thought their parents expect that their children will learn sexuality education in school, at least supplemental if not primarily, while on the other hand some teachers expect parents to provide this information at home. This to the adolescents creates an information gap among adolescents. Most respondents across the community, civil society and government agencies preferred that parents be the first to provide sexuality information to their children, because of their pivotal role in early childhood development. However, some observed that "this is a conversation that is not happening."

Other studies support the above sentiments, particularly when one listens to the youth. Sidze, E.M; Stillman, M; Keogh, S. Mulupi, S., Egesa, C.P., Leong, E. Mutua, M. Muga, W., Bankole, A. and Izugbara, O. (2017) results of a study on Sexuality Education Policies and Their Implementation in Kenya, in Kisumu Nairobi and Mombasa showed, nearly a third (30%) reported that they did not receive this information from their parents. Indeed, while student respondents felt that their parents supported sexuality education, a member of a youth organization opined that discussing topics related to sexuality was difficult for parents, who often feel embarrassed or do not want to admit that their children need such information. Yet even among those who preferred that parents play the role of primary educators on these topics, many believed that parental responsibility should be augmented by other sources in school, community and even religious institutions:

Key informants expressed their support for sexuality education, but emphasized the need for better teacher training to equip individuals with the knowledge and capacity to address key sensitive issues with professionalism and empathy. Certain respondents advocated for the role of community members, such as grandparents and community health workers, as well as the church, as traditional sources of information with deep knowledge of societal norms and expectations. However, some respondents cautioned that religious dogma (i.e., prohibition of discussion of sex and insistence on virginity and abstinence) may undermine comprehensive sexuality education. Programs within their churches, for example, youth choir, clubs and they do attend Sunday afternoon activities but in all these forums, they have never attended a sexuality discussion forum. They also indicated that most of what they know for example, teenage pregnancy, HIV/AIDS, STDs is mostly from school and the media. Another important conclusion that can be drawn from this study is all the adolescent involved in the focused group discussions came from homes which are Christian oriented and only two girls said their parents have mentioned about issues of sex before marriage and the emphasis was on how to protect themselves from teenage pregnancy.

In general, students' opinions regarding the sexuality education they received were positive where vast majority (93%) reported that it had been useful or very useful in their personal lives. Seventy-one percent of students said they enjoyed classes on sexuality education more than those on other subjects, while 25% enjoyed them about the same. They are reported that they want more information on contraceptive methods, including how and where to access them and the requested for participatory teaching methods. According to the key informants, the actors involved in the development of the curriculum and policies include teachers, government departments and ministries, United Nations bodies, civil society organizations, activists and professional groups, but not adolescents themselves. The exclusion of the views and experiences of students—the intended beneficiaries—is an

issue that commonly arises in the development and design of sexuality education programs, and is not unique to Kenya.

In schools students look up to teachers as people with authority and view them as knowledgeable and well-informed. It is possible to turn to them for accurate information on a range of issues all of which highlight the imperative that teachers be adequately trained to provide this information. The relationship between teachers and students is recognized as a unique entry point for school-based sexuality education. In an environment in which communication about SRH issues between parents and children is virtually nonexistent, teachers fulfill a key role

Like in many other studies, the media, including the Internet were a key source of out-of-school information on sex and reproductive health topics; almost all students said they had used media. Indeed, the Internet was the most commonly used source of information for males, followed closely by fathers and mothers. By far the top-rated source for females was their mothers. Respondents from civil society organizations cited the media as key to disseminating SRH information to both youth and the wider community and to offering young people a platform with which to voice their opinions and ideas about sexuality

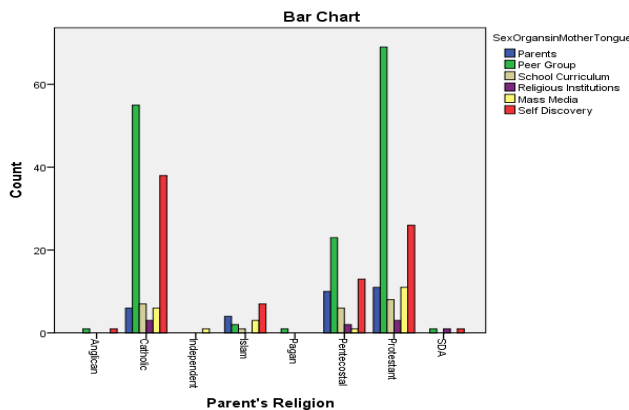
II. METHODOLOGY

The study used survey method of research. Descriptive survey was used to measure, classify, analyze, compare and interpret data. The target population was secondary school students with a sample size of 321 respondents. The study used questionnaires and data entered and analyzed using the Statistical Package for Social Sciences. The entered responses about their source of information on five sexuality questions were cross-tabulated with demographic data on the religious affiliation of the parents and the sexuality information being tested. The results are presented in bar charts and discussed.

III. DATA ANALYSIS

1. The first question was for respondents to tick on the source they learnt about names of sexual organs in their mother tongue. The responses are tabulated in figure 1 below.

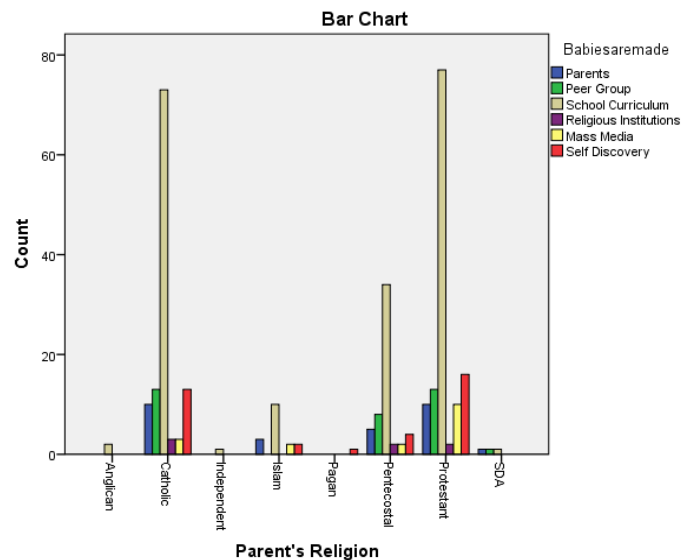
Figure 1: Parent's Religion \* Sex Organs in Mother Tongue Crosstabulation



The illustration in figure1 above shows that only a few of the respondents learnt about names of sexual organs in their mother tongue from their parents at only 9.6%, or religious sources 2.8%. Majority learnt from peers by 47.2% , Self-discovery 27.7%, School Curriculum 6.8%, Mass media 6.8%. Out of the parents their religious affiliations were, 3.4% were Pentecostals, 3.1% protestants, 1.9 Catholic and 1.2 Muslim. Considering that majority of respondents parents were Catholics and Protestants, this study concurs with other studies that the followers of the main denominations are conservative on sexual related information. This reflects a great omission on the part of the parents as they need to equip their children with proper language before they send them to school. As reported by some respondents, the parents used to refer to the organs in funny names, depending with their ethnic background that made the bigger children laugh at them. This discouraged them from trusting their parents as a source of their information and turned to the peers for the rest to learn more

2. The second question was to tick from the list, the source from which they learnt about how babies are made. Their responses are tabulated in figure 2 below.

Figure 2: Parent's Religion \* How Babies are made -Cross tabulation

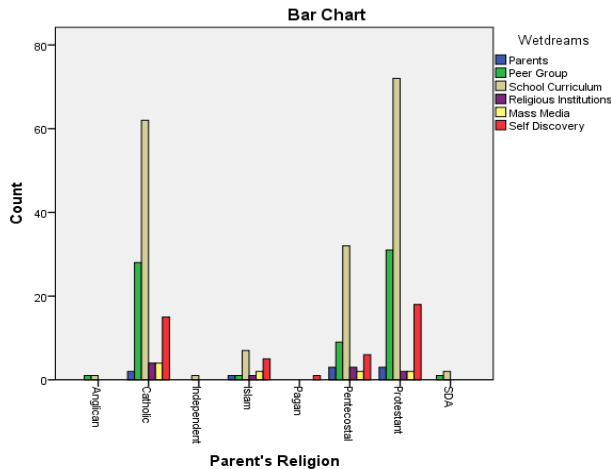


The results in figure 2. Illustrates that only 9% of parents talked to their children about how babies are made, and 2% of religious sources. Majority learnt through the school curriculum 61.5%, self-discovery 11.2%, peer group 10.9%, and mass media 5.3%. Of the 9% parents, 3.1 were Catholics, 3.1 Protestants, 1.6% Pentecostals, 0.9 Muslims and 0.3% SDAs. Research shows that at a certain point in a child's life, majority of children ask their parents where babies come from. They are either lied to or silenced, only for them to find out from other sources and may end up relying on the source as they grow up. This may arouse curiosity to experiment

exposing them to people that may take advantage of them as they grow up.

- The third question was on source of the respondent's information about wet dreams. The responses are shown in Figure 3 below.

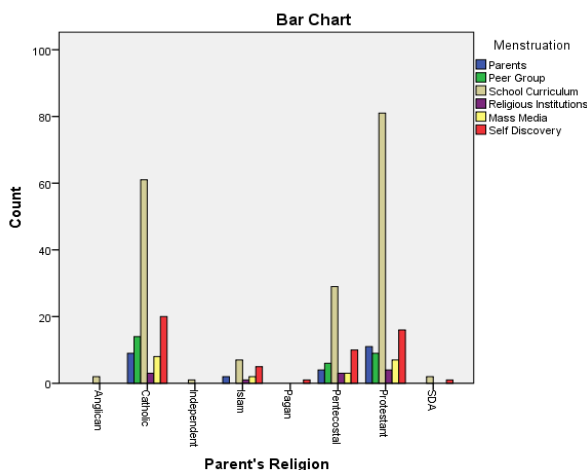
Figure 3: Parent's Religion \*Wet Dreams Cross-tabulation.



Data distribution in Figure 3 on source of information about Wet dreams shows that only 2.8% learnt through parents and 3.1% from religious sources. The rest 55% learnt through school curriculum, 22% through the peer group, 14% self-discovery and 3.1% mass media. Out of the 2.8%, 0.9 were Protestants, 0.9% Pentecostals, 0.6% Catholics and 0.8% Muslims. This is a serious disappointment for the children seeing that all parents, especially male parents understand how unnerving the first experience of wet dreams can be to a boy child.

- The fourth question was from what source students learnt about menstruation.

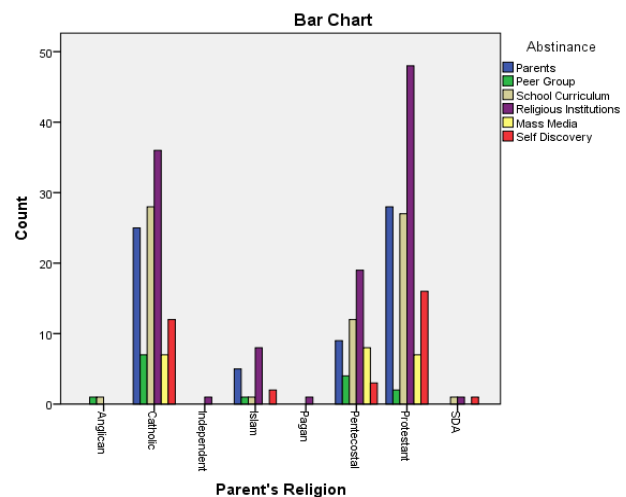
Figure 4: Parents' Religion \* Menstruation Cross tabulation



Results in figure 4 on sources of information about menstruation indicates that only 8.1% learnt through parents and 3.4% through religious sources. Majority learnt through school curriculum at 56.8%, 16.5% through self-discovery, 9% peer group and 6.2 % mass media. Out of the 8.1%, 3.4% were Protestants, 2.8% Catholics, 1.3% Pentecostals and 0.6% Muslims. Just like in the case of wet dreams, menstruation is a milestone for every human female on reaching puberty and every parent has the responsibility of teaching their children about it. Unfortunately, this omission has led to a natural process to be an incident of shame to many girls who are known to stay out of school once every month. A case of a girl committing suicide in Kenya for being shamed by a teacher in the presence of her classmates because she stained her dress is just one example (The Guardian, 11<sup>th</sup> September, 2019; The Standard, 13<sup>th</sup> September, 2019).

- The fifth question was about who, among the five agents of sexual related information advises the respondent to abstain from premarital sex. The responses are presented in figure 5 below

Figure 5: Parents' Religion \* Abstinence Cross-tabulation



Data in Figure 5.on agents of sexuality information that calls for abstinence illustrates that Religious sources lead by 35.4%, and parents by 20%. The peer group comes last with 4.7%. Mass media with 6.8%, and self-discovery at 10.6%. Out of the 20% parents calling for abstinence, 8.7% were Protestants, 7.8% Catholics, 2.8% Pentecostals and 1.6% Muslims. While it is good to encourage the youth from engaging in sexual activities, providing more sexual related information would make them understand why. Otherwise, the sources they rely on to learn what the parents do not tell are not expected to discourage them. In most cases media portrays sex as acceptable in commercial adverts which is quite misleading to young minds.



#### IV. STUDY FINDINGS AND RECOMMENDATIONS

The findings in this study have established that the performance of parents in dissemination of sexual related information to the children is very poor. The kind information assessed in this study is believed to be very basic and necessary for every growing human child.

##### 1. *Parents on names of sexual organs in mother tongue.*

The study established that few parents teach their children on the correct names of sexual organs. Considering that every child's socialization begins as early as at anal stage during toilet training, information like names of the sexual organs needs to come from the parent as they pass through the physical growth milestones. Shame of pronouncing the names of the organs transmits the message to the child that they are bad and shameful to talk about. When violated, children are fearful of telling the adults because it is shameful which leaves perpetrators to continue with the abuse. This may express the reason that led to two sisters to remain silent as the father, a pastor, sexually molested them in 2020. The matter came into the open only after both got pregnant for him (The Standard, 13th January, 2021)

##### 2. *Parent on how babies are made*

Information about how babies are made is one that earns or causes loss of trust in parents from their children. Respondents recorded answers received from parents on where babies come from; either they are bought from the market, collected from the forest etc, only for the children to learn the truth from other sources. This makes the children trust the other sources as dependable and stop coming to parents for such information. By the time they reach the grade of learning through the curriculum, they will have received a lot of misleading information from other sources or even sexually abused in silence as in the case cited above.

##### 3. *Parent and wet dreams*

It is expected that the children undergo physical changes while still at home and parents are expected to prepare them but results indicate the opposite. Wet dreams is a scary experience for boys when they reach teenage, with most imagining they have contracted a disease. It is therefore important to prepare the boys in good time, and better still if it is done by a man. Even before introduction of formal education, traditional families had well-formed structures that ensured boys learned about sexual development before it happened. Grandfathers, uncles and mature members of the extended family and the community were the major agents. Most of the intimate sexuality information was given during rites of passage to adolescents. However, today's, adolescent milestones finds modern youth in formal schools where they spend very little time with significant relatives. And what is clear is that they are not providing them with these very important information about things they are experiencing.

##### 4. *Parent and menstruation.*

Like in the case of boys and wet dreams, menstruation is a maturity milestone that every woman expects to cross. It is an experience that girls are meant to celebrate but only if they have been taught about it and its significance. Yet, results in this study shows few are taught about it by the significant adults and majority learn about it in school. Unlike wet dreams that take place at night when sleeping and can remain a private affair, menstruation involves shedding of blood and can be messy, embarrassing and thus traumatic. It requires sanitary towels and high level of hygiene and has been a cause for many girls dropping out from school, especially in Kenya. The issue has led to charitable NGOs to intervene and women leaders have been fighting for legislation of laws to have government offer sanitary towels to the girl child as a strategy to keep girls in schools.

##### 5. *Parent on abstention*

When it comes to calling for abstention, the study results show that the two institutions, Religion and Family are at their best in calling on the students to for abstain from sexual activity until marriage. This as good and all wish that the young adults heed the advice. It would be very hard for anyone to stay out of danger if they do not know what is likely to hurt them. The adolescents, need to be informed about handling the hormonal emotions that are experienced on maturity of sexual organs so as to understand the importance of self-control. Other agents of sexuality information are actively involved not only in teaching about sex but also glorifying it as good and pleasurable, something is barely even hinted by parents and the religious sources..

#### V. CONCLUSION

All in all, religious parents are not performing well in providing their young with sexual-related information. As a result, the adolescents continue to receive misleading information continue to suffer from negative consequences of irresponsible sexual behavior. They are left vulnerable to abusive adults and relatives before they come to understand what is happening to them, with many getting pregnant and contracting sexually transmitted illnesses.

#### VI. RECOMMENDATION

- Sexual-related information need to be provided in the schools by trained teachers and it need to be comprehensive but age appropriate. The youth can google for the most secrets kept from them posted by corrupt and immoral adults with ulterior motives. They are safer being taught the truth by the teachers than by the world.
- A sex education program needs to be developed by all stake holders, parents, religious organizations, health representatives and teachers/educators, so that all concerns are addressed.
- More research to be carried out on ways to filter inappropriate content is kept from the youth but even

if this may be difficult, the youth will have received useful information as they get taught.

- Sensitization of parents on how much the children are exposed to needs to be carried out as most are totally ignorant. Only then would they be able to fully appreciate the importance of providing comprehensive sexuality education.

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