Parental Involvement In Teenage Pregnancy Prevention: A Study Of Nyatike Sub-County, Migori County- Kenya

Awuor, Tabitha Auma

Prof. Wilson A.P. Otengah

School of Arts and Social Sciences, Rongo University, Kenya

Abstract: Teenage pregnancy is a global public health problem with medical, psychological, social and demographic implications most of which negatively affect the future of teenage girls. In view of this, teenage pregnancy has become a major policy concern for many countries worldwide, especially in Sub-Saharan Africa which has the highest number of teenage births. Teenage pregnancy however, still remain high in Kenya as well as other countries in Africa and other parts of the world despite the implementation of prevention interventions targeting comprehensive sex education in schools and access to birth control methods in the health facilities. Studies reveal that parental involvement is necessary for effective teenage pregnancy prevention due to the fact that parenting influence acquisition of behavior and social skills that shape the moral, self-discipline and responsibilities of young ones. This study sought to investigate parental involvement in teenage pregnancy prevention in Nyatike sub-county, Migori County, Kenya. The study sought to evaluate the extent to which parent-teen communication prevent teenage pregnancy. The target population was all parents of teenage girls, who had been residents in the study area for at least two years preceding data collection. Data was collected using a questionnaire that was administered to 138 parents. The study found that most parents, 66.67% were not comfortable when discussing sexuality issues with their girls. This translated to only 10.87% of the parents frequently discussing sex related issues with their children. Findings also revealed that most of the parents 49% were not very close with their daughters, and 62.32% parents felt that their teenage daughters were not open in sexuality discussions with them. The chi-square results also revealed that there was no association between parent-teen relational closeness, and discussion of sexuality issues ($\chi^2 = 0.344$ at 2 df and P<0.05). However, there was a weak association between parental comfort and sexuality discussion (χ^2 =11.547 at 1df and P>0.05 and Cramer's V of 0.289). Similarly, teenage girls' openness was also associated with sexuality discussions at $(\chi^2 = 8.9222)$ at 1df and P>0.05 and Cramer's V of 0.254). The study therefore concluded that parental involvement in sexuality communication with their daughters is limited in the study area. The study recommends that the Ministry of Labour and Social Protection through Childrens' Department should undertake parent-teen communication workshops in the study area to improve the quality of parent-teen communication on sexuality issues.

Keywords: parental involvement, teenage pregnancy prevention, parent-teen communication,

I. INTRODUCTION

Teenage pregnancy is a global public health problem with medical, psychological, social, economic and demographic implications most of which negatively affect the future of teenage girls. United Nations Population Fund (UNFPA) estimates that 21 million girls aged 15 to 19 years and 2 million girls aged under 15 years become pregnant in SubSaharan Africa every year (UNFPA, 2015). The World Health Organization (WHO) also reveal that approximately 16 million girls aged 15 to 19 years and 2.5 million girls under 16 years give birth each year in developing countries (WHO, 2016). Complications during pregnancy and childbirth are among the major causes of death for girls aged 15 to 19 years old globally (ibid). Kenya is among the Sub-Saharan African countries and it is not exempted from this global menace of teenage pregnancy. The age-specific fertility rate (ASFR) for females in Kenya aged 15-19 is 96 deliveries per 1,000 women (KDHS 2014) - a number greater than the universal ratio of 45 deliveries per 1,000 women (World Bank, 2014). Teenage pregnancy prevention is therefore considered a priority among policy makers and the public because of its high economic, social, and health costs for teenage girls and their families and also to the nations at large.

Teenage pregnancy can be reduced and prevented if teenagers get a comprehensive understanding of sexual abstinence, contraceptive methods and the adverse consequences of sexual intercourse. Research shows that it is the responsibility of parents and schools to teach teens about the negative effects of teenage pregnancy and the benefits of sexual abstinence and safe sex (Makundi, 2010, Sidze, et al., 2017). Increase in parent-teen communication about sex is associated with the delay of sexual initiation, increased condom use and more effective contraception use (Atienzo, Walker, Campero, Lamadrid-Figueroa & Gutierrez, 2009; Hadley et al., 2009). Another study also noted that frequency of parent-child communication about sex is a vital variable in determining parental impact on teenagers' sexual attitudes and behaviors (Afifi, Joseph & Aldeis, 2008). In addition, Martino, Elloitt, Corona, Kanouse and Schuster (2008) in their study found that parent-adolescent communication about sex-related topics is easier when the relationship is built on open and recurring communication. Although there are many different ways to prevent teenage pregnancy, comprehensive sex education by parents is one of the effective ways.

Many governments, Kenya included, have come up with teenage pregnancy prevention interventions, most of which, target sexuality education in schools and provision of adolescent friendly reproductive and health care services in the health facilities. These interventions include formulation of policies such as: Policy Framework for Education and Training 2004, Education Sector Policy on HIV and AIDS 2013, National School Health Policy 2009, National Guideline for the Provision of Youth-Friendly Services 2005 and National Adolescent Sexual and Reproductive Health Policy 2015. These policies have made it possible for sexuality education to be provided in Kenya's schools. Teenagers are also able to access information about different types of contraceptives especially condoms which have been made easily available for them by the health providers. Despite all these efforts, the level of teenage fertility remains unacceptably high in Kenya (Kenya National Bureau of Statistics, 2015). Little attention however, is given to parental involvement in pregnancy prevention as there is no evidence of any intervention directly targeting empowerment of parents in offering sexuality education.

The persistence of teenage pregnancy in Kenya could be as a result of lack of comprehensiveness in sexuality education offered in schools as revealed in 2011 review of sexuality education curricula by UNESCO and UNFPA in Kenya (UNESCO & UNFPA, 2012). It could also be attributed to ineffective implementation of policies (Sidze, et al., 2017) and the little attention given to the parents' role in teenage pregnancy prevention regardless of the fact that it is key in ensuring success of teenage pregnancy prevention programs (Overton, 2012; Makundi, 2010; The National Campaign to Prevent Teen and unplanned Pregnancy, 2010). The aforementioned clearly shows that there is need for a lot more efforts to be put in place if teenage pregnancy is to be prevented. This is why it was important to conduct this study in order to evaluate the extent to which parent-teen communication on sexuality influenced teenage pregnancy prevention in Nyatike sub-county, an area that suffers from high rates of school dropouts due teenage pregnancies (NAYA, 2015).

The purpose of this study was to investigate parental involvement in teenage pregnancy prevention in Nyatike subcounty, Migori County. The specific objective was to evaluate the extent to which parent-teen communication on sexuality influenced teenage pregnancy prevention. The variables studied included relational closeness, initiators of sexual talks, comfort in sexuality discussions, frequency of discussions and openness of teenagers in sexuality discussions.

II. METHODOLOGY

This study adopted a Descriptive Cross-Sectional Survey Design. The study was undertaken in Nyatike Sub-county, in Migori County, Kenya. It is one of the eight Sub-Counties within Migori County. Other sub-counties include; Rongo, Awendo, Uriri, Suna East, Suna West, Kuria East and Kuria West. Nyatike Sub-county borders Lake Victoria, Suna West and Ndhiwa sub-county which is situated in Homabay County. It covers an area of 677.7 km^2 with an approximate population of 144,625 people, and a total of 30,422 households (KNBS, 2009). It is a rural area and the major economic activities are farming, fishing and gold mining in Macalder area.

The target population for this study comprised of all parents of teenage girls aged 13-19 years old. Only those parents who had been staying in the study area for at least two years participated in the survey. This was based on the assumption that the true picture of what happens in the study area can only be obtained through interviewing the long term residents of the area. Data was collected using a questionnaire which was administered to 138 parents of teenage. The sample size was determined using a formula proposed by Krejcie & Morgan 1970. In addition data was also collected from the school heads and area chiefs within the study area using key informant interview guides so as to obtain their opinions and thoughts on the research question.

Sampling process began by clustering the study area into the seven wards that make up Nyatike sub-county. In the second stage, the clusters were grouped into three according to the major economic activities then three wards were randomly selected to represent each group. The third stage of sampling involved proportionate distribution of the sample size across the three wards. Finally snowball sampling was employed to select the specific households in each of the selected study area. Within each selected household, a questionnaire was administered to only one parent of teenage girls even in cases where there were more than one parent. In case the researcher got into a household with teenage girls but parents absent, the next eligible household was selected for replacement. Apart from the use of a questionnaire, data was also collected from 18 key informants using key informant interview guides. The key informants included the study area chiefs and school heads drawn from both primary and secondary schools in the study area. Quantitative data from questionnaires was analyzed using descriptive statistics and displayed in frequency distribution tables, charts and graphs. Qualitative data was analyzed using thematic analysis.

III. RESULTS AND DISCUSSIONS

GENDER DIFFERENCE IN CLOSENESS BETWEEN PARENTS AND THEIR CHILDREN

A previous study found that relational closeness between parents and adolescents is one of the predictors of communication on sexuality issues. This study therefore sought to establish the difference in gender and relational closeness of parents to their teenage girls in Nyatike Subcounty. Most of the parents 49% reported that they are not very close to their teenage girls. Among those who are not very close, 13% were males while 36% were female. On the other hand 39% of parents were very close with their teenage girls, among which 36% were females and 3% males while only 12% of parents admitted not being close at all with their teenage girls, 9% being males and only 3% being females as shown in Table 1.

		Closeness b	Total		
		very close not very not close a		not close at	
			close	all	
Gender	Male	4(3%)	18(13%)	13(9%)	35(25%)
	Female	50(36%)	49(36%)	4(3%)	103(75%)
Total		54(39%)	67(49%)	17(12%)	138(100%)

 Table 1: Comparison of Gender and Closeness between parents and their teenage girls

These findings indicate that majority of parents in the study area were close to their teenage girls except that the degree of closeness differs as some are very close while some are just close. The finding also revealed that among parents who were close to their teenage girls, majority 88% were females while only 16% were males. It is also clear that only a few males are very close with their teenage girls. This could be attributed to the fact that mothers spend much time with their children at home as compared to fathers who spend much of their time away from home. Probably it could also be that teenage girls are closer to their mothers than fathers. On the other hand, only 3% of mothers report not being close at all with their daughters. This could be attributed to step motherhood or mothers who are very busy to spend time with their daughters.

These findings were supported by an earlier study which observed that mothers continue to remain deeply involved in the lives of their children (Laursen, et al., 2000) and one way of involving themselves in teenagers' lives is through spending time with them (Hofferth, et al., 2007). Another study also revealed that as children attain teenage, they start undergoing important physical and social changes associated with puberty which lead them to organize their attachment behaviors towards their mothers (Duchesne & Larose, 2007).

The study also revealed that majority of parents, 69.57%, were the initiators of sex related discussions with their teenage girls. However, 14.49% of parents reported that neither them nor their daughters initiated such discussions. Another 11.59% of the parents noted that teenagers are the ones who initiated such discussions. Only 4.35% of the parents said that such discussions were iniated by both them and their teenage daughters as revealed in Figure 1.

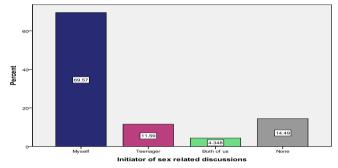


Figure 1: The initiator of sex related discussions

Probably a higher percentage of parents were the initiators of sex related discussions because the teenage girls were shy to initiate sex talks with their parents. Those who reported that sex talks were initiated by teenagers could be attributed to the parents not being comfortable to initiate. It could also be attributed to closeness between these parents and their daughtes which made the girls to feel free to initiate sexuality discussions. Those who reported that no one initiated sex talks could be attributed to lack of relational closeness or fear and discomfort in both the parent and the teenager. On the other hand, the smaller percentage of parents who reported that they both initiated sex talks could be attributed to being relationally close with the teenage girls, openness by both of them, or being inquisitive of what the other knows about sexuality.

This finding concurred with the findings of Izugbara (2008) which posited that in Nigeria parents preferred to be the initiators and dominators of sexual related discussions and perceived that if their child did so, it meant they were sexually active or planning to be. This finding is equally supported by the findings of Wamoyi, Fenwick, Urassa, Zaba, Stones (2010) who found in rural Tanzania, sexuality communication was most often unidirectional, initiated by parents and took the form of warnings or threats or sometimes gossip. These findings affirmed the assertion of the key informants that parents were in a better position to initiate and discuss sexuality related issues with their teenage children because of the respect they get from their children. The key respondents unanimously stated that teenagers tend to avoid doing whatever their parents fail to approve.

In as much as parents admitted to discuss sexuality issues with their teenage daughters, majority of parents 66.67% were not comfortable with such discussions while only 33.33% reported to be comfortable in discussing sexuality related issues with their teenage daughters as shown in Figure 2 International Journal of Innovative Research and Advanced Studies (IJIRAS) Volume 5 Issue 9, September 2018

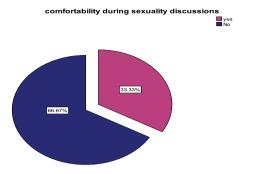


Figure 2: Comfort in Discussing Sexuality Issues

The discomfort experienced by parents could be attributed to consideration of sex discussions with children a taboo. It could also be due to the fact that parents believed that such talks make their girls to become sexually active. On the other hand, a few had no problem with discussing sexual related issues and felt comfortable. This could suggest that this category of parents considered it their responsibility to explain to their teenage girls everything they need to know about their sexuality and that they do it often hence the comfort. It could also be due to the trust and closeness between these parents and their teenage girls.

These finding was in line with the findings of Poulsen et al, (2010), that parents fear talking about sexuality with their children as they believe that discussing sexuality with children lead to early sexual experimentation. It was equally supported by the findings of Mbugua (2007) who noted that sociocultural and religious barriers like residual traditional barriers, inhibitions due to European Christianity, reliance on sex education books and reliance on school teachers to offer such sex education make parents uncomfortable to discuss such issues with their teenage children. In addition, the findings also concurred with the results of Bastien et al (2011) study which found that some parents perceived discussions about sexuality between parent and children as being shameful, immoral or inappropriate given the sensitive nature of sexuality. Jerman & Constantine (2010) also found that parents report embarrassment or anxiety in talking about sex, particularly during their children's later adolescence (age 14-18), when many young people are engaging in sexual behavior. Al these are consistent with the most recent study by Achille et al., which revealed that parents still find it difficult to hold sexuality discussions with their children in the home environment (Achille, et al., 2017).

The study also revealed that that most of the parents, 49.28% noted that they sometimes discuss sexuality related issues with their teenage girls. Less than a third, 24.64% of parents always discussed sexuality related issues with their teenage daughters. On the other hand, 15.22% of the parents did not discuss sexuality related issues with their teenage girls at all and only 10.87% of parents reported that they had frequent discussions of sexuality related issues with their teenage daughters as shown in Figure 3.

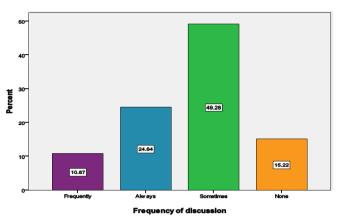


Figure 3: Frequency of discussing sex related issues with teenage girls

Results in Figure 3 could be attributed to the fact that parents waited until they saw something in their teenage girls that could ignite sexuality discussions. On the other hand the parents who either always or frequently talked with their teenage girls about sexuality issues could be attributed to the fact that this teenage girls were already sexually active or that the parents intended to protect their girls from the consequences of premarital sex. Those parents who did not talk to their teenage girls about sexuality issues exhibited signs of giving up on their sexually active girls while some thought that their girls were too young for sexuality talks. Some parents were also embarrassed about sexuality talks with their girls hence they completely avoided it.

These findings were in agreement with Wamoyi et al. (2010) who found that frequency of communication between parents and their teenagers range from once in a day to once a month or several months. These results also corroborated a report by Achille, et al., (2017) in which 76.4% of parents declared that they rarely talked about sexuality with adolescents. Among the key informants, it emerged that most parents wait for their teenage girls to get pregnant before they talk to them about the dangers of unprotected premarital sex. Lack of closeness between parents and their teenage girls also emerged as a factor contributing to limited sexuality discussions. The teachers reported that most of the times, the parents were surprised and were in disbelief when summoned in school to be informed of their children pregnancy status. They admitted to the teachers that they had not known that their children were already involved in intimate relationship and that they had not talked to them on sex related issues. As one primary school head teacher noted that;

"Some parents are not aware of what goes on in their daughter's lives, one day a parent fainted when I called her to inform her of her daughters' pregnancy. I was surprised that she had not known when it was already very clear that the girl was pregnant.'

Moreover, the study also revealed that majority of parents, 62.32% felt that their teenage daughters were not open to talk with them about sexuality related issues and only 37.68% of parents felt that their children were free to talk to them about sex related issues as shown in Figure 4

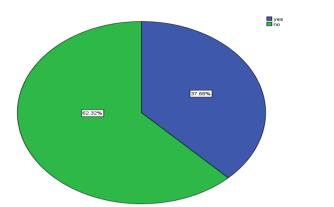


Figure 4: Parents view on their teenage girls' openness during sexuality discussions

The findings in Figure 4 could be attributed to teenage girls shying away from discussing sexuality issues with their parents for fear of being seen as sexually active by their parents. It could also be due to the fact that teenage girls preferred talking to their age mates rather than their parents on sexuality issues. An earlier study in Ghana had similarly observed that young people are reluctant to discuss sexuality with their parents since they tend to prefer to discuss these issues with their friends, because they feel shy, and also because they may fear physical punishment for discussing sexuality with their parents (Kumi-Kyereme, Awusabo-Asare, Biddlecom, Tanle, 2007).

Finally this study revealed that there was no association between parent-teen relational closeness and discussion of sexuality related issues with teenage girls at (χ^2 =0.344 at 2 df and P<0.05). However, there was a weak association between parental comfort and discussion of sexuality related issues with their teenage girls at (χ^2 =11.547 at 1df and P>0.05 and Cramers' V value of 0.289. There was also a significant though a weak association between teenage girls' openness and sexuality discussion with their parents at (χ^2 =8.9222 at 1df and P>0.05 and Cramer's V of 0.254) as was revealed in Table 2.

	Discussing	sexuality	related	issues with teenage					
	girls								
	Yes	No							
Closeness	Very	44	10						
between	close	52	15						
teenage	Not very	13	4						
girls and	close								
parents	Not close								
	Total	109	29						
χ^2 =0.344df=2P=0.05Not Significant									
Parental	Yes	44	65						
Comfort in	No	2	27						
sexuality									
discussions									
	Total	46	92						
$\chi^2 = 11.547$	χ^{2} =11.547 df=1P=0.05 Significant								
Cramer's V Test =0.289									
Teenage	Yes	48	61						
girls'	No	4	25						
openness in									
discussing									
sexuality									

issues									
	Total	52	86						
$\chi^2 = 8.922, df = 1, P = 0.05$ Significant									
Cramer's V=0.254									

 Table 2: Association between parent-teen relational closeness,

 teenage girl Openness and parental comfort, and discussion of

 sexuality related issues

The findings in table 2 could be attributed to the fact that sexuality discussion between parents and teenagers is only possible if the parents felt comfortable with such discussions. Comfort could translate to openness between the parents and teenagers in discussing sexuality which is often considered as a very sensitive topic. This results reflected the findings of Martino et al., (2008) which revealed that parent-adolescent communication about sex-related topics is easier when the relationship is built on open communication.

IV. CONCLUSION AND RECOMMENDATION

This study concluded that teenage girls' openness and parental comfort contributed to sexuality communication between parents more frequent and that those parents who never discussed sexuality with their daughters were either not comfortable or their daughters were not open to hold such discussions with them. This study therefore recommend that Ministry of Labour and Social Protection through the Department of Children Services in the study area should organize for parent-teen communication workshops to enable the parents and teenagers learn new communication skills and practice important communication techniques that can make them feel more open and comfortable in discussing sexuality issues thus promoting the sexual health of teenage girls.

REFERENCES

- Sidze EM et al., (2017). From Paper to Practice: Sexuality Education Policies and Their implementation in Kenya, New York: Guttmacher Institute. https://www.guttmacher.org/report/sexuality-educationkenya.
- [2] UNESCO and UNFPA (2012). Sexuality Education: A Ten-Country Review of School Curricula in East and Southern Africa, New York.
- [3] Achille OAA, Tonato BJA, Salifou K, Hounkponou AF, Hounkpatin BIB, et al (2017). Parents' Perceptions and Practices as Regards Adolescents' Sex Education in the Home Environment in the City of Come, Benin in 2015. Reprod Syst Sex Disord 6: 209. doi:10.4172/2161-038X.1000209
- [4] Afifi, T. D., Joseph, A. Aldeis, D. (2008). Why can't we just talk about it?: An observational study of parents' and adolescents' conversations about sex. Journal of Adolescent Research, 23, 689-721.
- [5] Atienzo EE, Walker DM, Campero L, Lamadrid-Figueroa H, Gutierrez JP. (2009). Parent-adolescentcommunication about sex in Morelos, Mexico:does it impact sexual behaviour? Eur J Contracept Reprod Health Care. 14(2):111–9. [PubMed: 19340706]

- [6] Hadley W, Brown LK, Lescano CM, Kell H, Spalding K, Diclemente R, Donenberg G. Project Style study group (2009). Parent-Adolescent Sexual Communication: Associations of Condom Use with Condom Discussions. AIDS and Behavior.; 13(5):997–1004. [PubMed: 18841462]
- [7] Hofferth, S. L., Cabrera, N., Carlson, M., Coley, R. L., Day, R., & Schindler, H. (2007).
- [8] Resident father involvement and social fathering. In S. L. Hofferth & L. M. Casper(Eds.), Handbook of measurement issues in family research. (pp. 335–374). Mahwah: Erlbaum.
- [9] Duchesne, S., & Larose S. (2007). Adolescent attachment to mother and father and academic motivation and performance in early adolescence. Journal of Applied Social Psychology, 37,1501-1521.
- [10] Bastien S, Kajula L J & Muhwezi WW (2011). A review of studies of parent-child communication about sexuality and HIV/AIDS in sub-Saharan Africa: doi:10.1186/1742-4755-8-25
- [11] KNBS. (1999). Kenya National Bureau of Statistics: Population of Local Authorities.
- [12] Kenya National Bureau of Statistics (2015). Kenya Health and Demographic Survey 2014. https://dhsprogram.com/pubs/pdf/FR308/FR308.pdf
- [13] Jerman, P., & Constantine, N. A., (2010). Demographic and Psychological predictors of parent- adolescent communication about sex: A representative statewide analysis. Journal of Youth and Adolescence, 39, 1164-1174.
- [14] Kumi-Kyereme A, Awusabo-Asare K, Biddlecom A, Tanle A. (2007). Influence of social connectedness, communication and monitoring on adolescent sexual activity in Ghana. Afr J Reprod Health, 11(3):133-49.
- [15] Martino, S. C., Elloitt, M. N., Corona, R., Kanouse, D. E., & Schuster, M. A. (2008). Beyond the "big talk": The role of breadth and repetition in parent-adolescent communication about sexual topics. Pediatrics, 121, 612-618.

- [16] Mbugua, N. (2007). Factors inhibiting educated mothers in Kenya from giving meaningful sex-education to their daughters. Soc Sci Med, 64(5):1079-89.
- [17] Poulsen M.N, Miller KS, Lin C, Fasula A, Vandenhoudt H, Wyckoff SC, Ochura J, Obong'o CO, (2010). Forehand R. Factors associated with parent-child communication about HIV/AIDS in the United States and Kenya: a crosscultural comparison. AIDS Behavior; 14(5):1083–94.
- [18] Wamoyi J, Fenwick A, Urassa M, Zaba B, Stones W (2010). Parent-child communication about sexual and reproductive health in rural Tanzania: Implications for young people's sexual health interventions. Reprod Health, 7:6.
- [19] Makundi P.E (2010). Factors contributing to high rate of teen pregnancy in Mtwara region, Tanzania.
- [20] Izugbara CO: Home-based sexuality education: Nigerian parents discussing sex with their children. Youth & Society 2008, 39(4):575-600
- [21] Laursen, B., Wilder, D., Noack, P., & Williams, V. (2000). Adolescents' perceptions of reciprocity, authority, and closeness in relationships with mothers, fathers, and friends. International Journal of Behavioral Development, 24 (4) pp. 464–471.
- [22] Krejcie, R.V., & Morgan, D.W. (1970). Determining sample size for research activities. Educational & psychological measurement, 30, 607-610.
- [23] Overton S. (2012). Before It's Too Late: What Parents Need to Know About Teen Pregnancy and STD Prevention. www.droverton.org. amazon.com.
- [24] World Health Organization (WHO, 2016). Adolescent Pregnancy:http://www.who.int/maternal_child_adolescent /topics/maternal/adolescent_pregnancy.
- [25] Kenya National Bureau of Statistics (2015). Kenya Health and Demographic Survey 2014. https://dhsprogram.com/pubs/pdf/FR308/FR308.pdf
- [26] KNBS. (2014). Kenya Demographic and Health Survey Key Indicators. Nairobi.
- [27] World Bank. (2014). 2.17. Retrieved from www.worldbank.org:http://wdi.worldbank.org/table/2.17#