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The Nature of Communication between Parents and Their Teenage Children on the Teenagers' Sexuality: A Study of Day Secondary Schools in Uasin Gishu County, Kenya

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Abstract:

Every day we get grim reports of teenagers becoming pregnant, contracting HIV and other sexually transmitted diseases and even dying due to unsafe sex. One possible reason for this is inaccurate and inadequate information about sex that they get from unreliable sources such as the media and peers. Parents ought to be the primary source of information to their children about sexual issues. Yet, the influence of parent-teen communication on sexuality is not widely studied and documented, especially in the Kenyan context. This the study sought to establish the nature of communication between parents and their teenage children on the teenagers' sexuality. The study employed a mixed approach utilizing surveys of a final sample size of 240 Form 3 teenagers (144 boys, 96 girls) and 120 parents and case studies of participants recruited from survey sample. Quantitative and qualitative data were analysed separately with statistical analysis and thematic analysis, respectively. The major findings were: that parents do communicate with their children about sexual issues but it is generally very brief, covers mainly general issues and is usually unidirectional. The most talked about topics are: dating, relationships, good decision-making, HIV/AIDS and Sexually Transmitted Diseases. The findings were discussed with reference to the existing literature on the topic and also with reference to the Systems theory. In conclusion, this study reveals that sexual talk between parents and their children on sexuality is a complex task that requires particular communication skills and continuous attention. My recommendation to parents is that timely and honest communication is likely to enhance their teenage children's awareness about their sexuality and responsible sexual behaviour. Efforts should also be made by concerned stakeholders like the education sector to provide information, involve, and coordinate with parents in providing sex education to teenagers. Future research is needed to look into how the other sources of sexual information like the peers and the media can be used to complement parents' effort to communicate with their teenage children on sexuality.

Keywords: Nature, communication, parents, teenage children, teenagers' sexuality

1. Introduction

This paper presents findings on a study about the nature of communication between parents and their teenage children on the teenagers' sexuality. The main study was done in day secondary schools in Uasin Gishu County. This study was done from the perspective of Communication as a field of study and explored the issues particularly in relation to the tenets of interpersonal communication. According to Renney (2010), interpersonal communication is the purposeful and intentional engagement with others that fosters a shared meaning between individuals while fulfilling individual goals and basic interpersonal needs. Accordingly, in this study, interpersonal communication was operationalised as the purposeful and intentional engagement of information on sexuality between parents and their teenage children. In interpersonal communication, different sensory channels used by both the sender and the receiver usually take two distinct forms, that is, direct (verbal and non-verbal communication) and indirect channels (involve the receiver interpreting the sender's body language). (Knapp & Daly, 2002 as cited in Renney, 2010).

1.2. The Kenyan Context

In Kenya, almost 25% of the population constitutes of adolescents. This is about 9.2 million adolescents of the total population of 38.6 million people (NCPD, 2013). As in other parts of Africa, these young people face severe threats to their health and well-being. They are vulnerable to sexual assault, prostitution and early pregnancies (Muganda & Omondi, 2008).

Figures at the Kenya National Bureau of Statistics (2013) indicate that 37% of girls and 44% of boys aged 15-19 have already engaged in sexual activity. Out of these, 13% of girls and 9% of boys were reported to be sexually active. In a research conducted by Population Services International as part of the USAID-funded, AIDS Population and Health Integrated Assistance Program (APHIA) in April 2012, there is a significant increase in the childbearing rate among teenagers in Kenya, from 2.1% at 15 years to 36.2% at 19 years (USAID, 2012). A report by the African Journal of Reproductive health (2010), says that engaging in risky sexual behaviour has negative effects globally such as HIV/Aids, Sexually Transmitted Diseases, unwanted pregnancies and school dropouts that threaten the lives of teenagers aged between 10-19 more than any other age group.

According to the WHO technical report series 886 (1999b),the breakdown in traditional family systems, urbanization and the influence of mass media are some of the factors that lead to increased sexual activity. The media's portrayal of sex is often incomplete with little focus on relationships, responsibility and consequences. Sex is present in the songs teens listen to, the shows they watch on television and the internet and the magazines they read. The media consciously or subconsciously moulds the teenagers view and thoughts regarding sexuality. This is not to suggest however, that parents have no influence on their children's sexual behaviour (Boline & Whelehan, 2009). It is important to note that parents are the most important influence on children's lives regarding values, attitudes and beliefs on matters of sexuality.

Eldoret Municipality in Uasin Gishu County, Kenya, is positioned on the Trans African Highway where teenagers are exposed to different people from different backgrounds and mannerisms. This diversity entices and exposes teenagers to risky sexual behaviours which are a major threat to the health and survival of adolescents as some of this people have a reputation of being promiscuous and of questionable character, for example, the long distance truck drivers. Parents and other educators have a compelling reason for providing sexual education to their teens (UNICEF, 2005). According to the UNESCO report of (2010), teenagers learn a great deal about sexuality from their parents through both what they are taught and what they observe from their parents behaviour. This implies that even in families where open and active discussion of sex is avoided, lessons about sex still takes place. Most parents are not trained as educators, let alone biologists, sex educators or even psychologists, yet many feel that it is important that some sex education comes from home and try their best to put across information, attitudes and values about sexuality (Rosenthal *et al.*, 2006).

According to Nundwe (2012), parents and teenagers will always feel uncomfortable and experience difficulty when taking to each other about sex; These barriers to parent-teen communication however have to be broken, as young people can immensely benefit from candid discussions with their parents about sex. Moreover, the fear that parents have is baseless as studies have found that it is lack of sexual information, ignorance about sexual issues or unresolved curiosity that is harmful.

In view of the above discussion, it is clear that more research in this area. Yingling (2004) citing Warren (1995) maintains that we know little about parent-teenage communication about sex and the role that parents play in influencing their children's sexual orientation. It is against this background that this study sought to contribute to the existing body of knowledge on how parent-teen communication on sexual issues can be improved and used as one of the strategies of preventing problems associated with early sexual debut by teenagers.

1.3. Statement of the Problem

The problem for the study is conceptualized in three dimensions. To begin with, it is clear that many teenagers are sexually active worldwide (UNAIDS, 2008). In Kenya, the sexual behaviour of adolescents is recognized as an important health and social concern. According to the Kenya Demographic and Health Survey (KNBS and ICF Macro, 2010) and the Kenya National Bureau of Statistics (KNBS, 2013), adolescents now aged 15–19 were sexually active and had engaged in high risk sex. Early sexual involvement is a major concern as it threatens economic, social, physical and emotional wellbeing of teenagers hence the need for urgent intervention.

At the second level, the issue of sexuality may be conceptualized as being partly a communications issue: that is, the fact that, teenagers are exposed to lots of information from the media and elsewhere on sex that results in myths and misconceptions which may be carried throughout their lives, yet part of that information may be inaccurate or does not warn sufficiently about the dangers of early sexual debut hence an urgent need for reliable and adequate information about sexual issues (Moore & Rosenthal, 2006).

The third level of this problem is that, industrialization and urbanization has altered socio-cultural structures of the traditional family where sexual education used to be the responsibility of the family. Schools, NGOs and churches have now taken over as sex educators but even so, these institutions have different agendas resulting in conflicting messages. More attention therefore needs to be given to this age group by parents, to communicate with them about sexual matters and to understand their level of knowledge and perceptions towards sexuality, in order to be able to guide them appropriately. The extent to which parents and teenagers engage in communication about sexual issues, what their views are concerning sexual talk and whether parental communication on sexual issues can be used as a strategy to influence teenagers' sexual awareness and behaviour is not adequately researched, based on the literature review so far, especially in the Kenyan context.

1.4. Scope of the Study

Based on the above stated problem, the objective of the study whose findings are presented in this paper was to establish the nature of communication between parents and their teenage children on the teenagers' sexuality.

In terms of content, the following were looked at; frequency of discussion, time spent discussing, who initiates discussion, topics and the methods preferred for discussion.

In contextual scope, this study was done in Eldoret Municipality targeting teenagers aged 13-19 in Form Three in all day secondary schools located in the Eastern and Western divisions totalling to 2400. Also targeted in the study was at least one parent of either gender of each of the 2400 Form Three students currently in day secondary schools. It was conducted between the months of July 2012 and October 2012.

In methodological scope, this study used survey and case study methods and covered a sample of 240 Form Three students within the age bracket of 13-19 selected from nine sampled schools and 120 parents, making a total of 360 respondents. Stratified sampling was

used to select the schools, simple random sampling to select the students, purposive sampling to select the parents for interview and students for focus groups discussion.

2. Literature Review

Literature was reviewed under six main subheadings, firstly, was situating the study in Communication Studies and interpersonal communication. Secondly, sexual communication between parents and their (teenage) children and lastly communication about sexuality

2.1. Situating the Study in Communication Studies and Interpersonal Communication

This study focused on communication between parents and their teenage children on sexual issues. In this study, communication is defined as the process of human interaction that involves generating, organizing and sending ideas or feelings between one or more receivers. (McNamara, 2006).

Communication Studies can be categorized into four broad categories: intrapersonal, interpersonal, group communication and mass communication. Interpersonal communication is one of the many levels of communication. This study is situated within interpersonal communication as it explores communication between parents and their teenage children on sexual issues. Different scholars have defined interpersonal communication variously. This study adopted Pearson's (1993) definition that interpersonal communication is "a process of exchange where there is desire and motivation on the part of those involved to get to know each other as individuals." Interpersonal communication can be categorized by the number of participants involved (dyadic, group and public communication) or by the function or setting of the communication (organizational communication and family communication). This study was based on family communication. This study focused on parent-teen communication about sexuality as perceived by both parents and teenagers.

2.2. Sexual Communication between Parents and Their (Teenage) Children

Parent-teen communication is an appealing source for influencing adolescents' knowledge, attitudes and behaviour, as parents are an accessible and often willing source of information for their children (Botchway, 2004).During adolescence, communication between parents and adolescents tends to change dramatically with a tendency for adolescents to communicate less frequently with their parents. Parents however, should ensure that there is a continuous communication with their adolescents as this is a period when some children exhibit delinquent and violent behaviour, use of drugs, sex abuse and the like (Oshadumo, 2007).

Several researchers have found that positive general communication with parents is associated with less risky behaviour (Towela, 2006; Zimmerman, 2011; Nundwe, 2012). For a family to be able to share work, their joys, cries and worries among other experiences, there must be effective and constant communication in the family. Lack communication would mean that adolescents cannot tell their parents their problems, ask questions, learn, interact and get their problems solved. To sum up, parent-teen communication can be an effective way of either preventing or resolving most of the problems faced by young people. Parents can establish a pattern of reciprocal sharing of information, values and beliefs before their teenage children start confronting the twin tasks of integrating sexuality with issues of autonomy and independence.

2.3. Communication about Sexuality

Traditionally, parent-teen communication during adolescence has been painted as strained, infrequent and conflict laden. Currently however, research is painting a calmer picture. Although communication problems are likely to arise during adolescence, they tend to be short-lived in healthy families. Parent-teen communication can be most clearly understood when examined in the context of the overall relationship between parents and teenagers. Teenagers who feel their parents are warm, caring and supportive are more likely to delay sexual activity than their peers (Balter, 2000). The quality of communication, the supportive nature of parent-teen relationship requires further examination because of mixed findings.

Parents convey sexual attitudes to their children in a number of ways. Astudy by Raffaelli & Flood (1998) found that besides gender of parents and teens, demographic variables were largely non-significant in the final models. Instead relationship and attitudinal variables were linked to both mother-teen and father-teen sexual discussions. This implies that the nature of relationship between parent and teenage and the attitude they have has a great influence on the nature of parent-teen communication. Teenagers are especially concerned about their own sexuality but they may be too embarrassed or distrustful to ask their parents directly about those 'secret' matters (Wallace, 2008). Parents too may experience discomfort when discussing sex with their teenagers. Those embarrassments and the fear that they are not well placed to answer their teenager's questions are among the biggest reservations parents have about talking about sexual matters with their teens (Byers *et al.*, 2008). This study aims to explore how this reservations and hesitations can influence teenage sexual behaviour.

2.4. A Review of Related Theories

This study was guided by Bertalanffy's (1968) System Theory which has been fruitfully applied to several aspects of the communication field. Many communication theories reflect the tenets of system theory. This theory purports that 'A system is more than the sum of its parts.' Rather than reducing an entity (for example, the human body) to the properties of its parts or elements (for example, organs or cells), system theory focuses on the arrangement and relations between the parts. A system can be 'closed' (no material enters or leaves it) or it can be open (there is exchange of material). Applied to the family, it can be viewed as an 'open system.' where there is information exchange among the boundaries of the family system, its independent parts and the external environment. In relation to this study, when information exchange about sex at home is inadequate, teenagers will tend to open up to

systems outside the family such as the media and peers to get information they need. This theory was picked because of its depiction of communication as an ongoing process and ability to clearly show the inter-relationships and interactions within the family and with the external environment. In addition, apart from guiding in the data collection process, it also acted as a guide in examining the behaviour of one component part (parents and their sexual communication) on another component part (teenagers and their sexual behaviour.

2.5. A Review of Related Studies

According to AGI (2004), positive effects of parent-teen communication appear to be meditated by several critical factors such as: the frequency and specify of communications; the quality and nature of exchanges; parental knowledge, beliefs and comfort with the subject; the content and timing of communication; family structure and relationship quality (Simkin *et al.*, 2001). The studies reviewed documented generally positive results on impact of parent-teen communication on teenager's sexual attitudes, skills and behaviour. Despite this however, they do not clearly demonstrate a direct impact of parent-teen communication on adolescents' intentions, other mediators or sexual behaviour. When it comes to the consequences of parent-teen communication on sexuality, research is mixed (Bersamin *et al.*, 2008 in Wallace, 2008).

According to Balter (2000), parents who set high standards and have high expectations for their adolescents, and enforce those standards with consistent discipline, tend to have fewer problems. This means that parents need to provide an atmosphere of acceptance and psychological autonomy where the teens views and individuality can develop freely, balanced and with clear messages of personal safety and responsibility. Karofsky *et al.*, (2001) reported a correlation between the level of adolescent-parent communication as perceived by the teenager and abstinence from initiation of sexual intercourse. High levels of communication with mothers were mostly associated with abstinence. The amount of parent-teen communication however declined as teens got older. The author suggests two possibilities: As communication declined at home, teenagers sought a replacement for intimacy with parents and then participated in sexual intercourse; as teenagers became sexually active, they were reluctant to discuss this.

2.6. Sexuality-Related Topics

According to Vuttanont (2010), adolescents discuss the topics of dating and sex with their parents less frequently than they do other topics. Whenever parents and adolescents engage in sexual discussions, some topics are more likely than others to be discussed. According to him, teens have reasonable knowledge of biological issues but are confused and uncertain about how to use contraceptives, avoid pregnancy and STDs, negotiate personal and intimate relationships and find sources of support and advice. A study done by Phetla *et al.*, (2008), found that due to the high prevalence of HIV, rural South African parents talked with their teenagers about how to reduce risks, with 98% of mother participants discussing condom use, and 58% talking about HIV testing. Kapungu *et al.*, (2010) indicated that messages by parents to their daughters were often more protective compared to boys. Akiwale *et al.*, 2009 in Sridawruang, 2011) found that Nigerian parents perceived life and relationship skills as most important topics followed by sexual health and lastly personal hygiene. Tanzanian parents mainly discussed HIV/AIDS because it was considered shameful (Wamoyi et al., 2010). This study therefore sought to establish what parents are saying and what they are not saying and their impact on adolescents' sexual behaviour.

3. Research Methodology

This study adopted a mixed design synonymously called mixed approach in research literature (Jwan & Ong'ondo, 2011). A mixed approach is a 'Pragmatic' paradigm that employs both qualitative and quantitative approaches in one study (Morgan, 2007). It employed descriptive survey and case study methods. The aim of adopting a mixed approach was to exploit the strengths of both approaches by combining them in one study and hence understanding of the issue under consideration more fully (Onwuegbuzie & Johnson, 2006).

The process involved two waves of data generation; quantitative data was generated first then followed by qualitative data. A quantitative study is a study that involves explaining phenomena by collecting numerical data that is analysed using mathematically based methods (Aliaga & Gunderson, 2000 as cited in Tashakkori & Teddlie, 2000). Questionnaires were used to generate quantitative general details from the large sample size. Qualitative research is an approach to inquiry that emphasizes a naturalistic search for relativity in meaning, multiplicity of interpretations, particularity, detail and flexibility in studying a phenomenon or the aspect(s) of it that a researcher chooses to focus on at a given time (Jwan & Ong'ondo, 2011, p.3). In this study, perspectives on frequency of discussion, what, how exactly, where and other specific details were studied qualitatively in order to establish the alternative interpretations of the existing manifestations of the subject.

A survey is a means of gathering information about a particular population by sampling some of its members, to analyse and discover occurrences usually through a system of standardized questions (Oso & Onen, 2005). Survey research design was used because the population to be studied was too large to observe directly or interview and it also enabled generalization. After employing survey method where quantitative data was collected, case studies followed for qualitative data generation. A case study is an empirical inquiry that investigates a contemporary phenomenon within its real life context, especially when the boundaries within the phenomenon and the context are not clearly evident (Yin, 2003, p.14). According to Gillham (2000, p.1), "a case can be an individual: it can be a group-such as family, a class, or office, or a hospital ward; it can be an institution...a town, an industry, a profession..." My study was an instrumental case study as the cases were of secondary interest entailing parents and teenagers who speak regularly about sexual issues and those that do not. This played a supportive role by adding more insights to the results generated in the survey thus facilitating more understanding of the issue under study (Stake, 2005).

Parents selected for interviews and students selected for FGDs formed the case studies A, B, C and D (data generation section). The aim of case studies was to collect qualitative data. Thereafter, the data generated was combined to answer the research problem.

3.1. Study Site

The study was conducted in Eldoret Municipality which is one of the fastest growing industrial towns in Kenya and the fifth largest after Nairobi, Mombasa, Kisumu, and Nakuru with an average area of 147.9 square kilometres. It is situated about half way between Nairobi and Kampala along the Great Trans-African highway. Eldoret Municipality has a population of approximately 289,380 in the 2009 census of which 100,000 are estimated to be teenagers (Eldoret Municipality Education Policy and Data Center (2007). It is divided into two divisions: Western division with two zones which are Kapyemit and pioneer and Eastern Division with three zones which are Kapsoya, Chepkoilel and Kibulgeny. Eldoret municipality is positioned on the Trans-African Highway where teenagers are exposed to people of all kind of mannerisms. This diversity entices and exposes the teenagers to risky sexual behaviours. It is also located within the Great Rift Valley which according to statistics has the highest adolescent fertility rates compared to other provinces (KDHS, 2003). It also has the biggest population with HIV prevalence (KAIS-2007; 2009). It was also ideal as it covers both urban and semi-urban areas within a small area.

3.2. Target Population

A population is the entire group of individuals, events or an object having common characteristics and from which a sample population is picked (Fraenkel & Wallen, 2000). This study targeted teenagers aged 13-19 currently in Form Three in all the 30 day secondary schools located in the Eastern and Western divisions of Eldoret municipality, totalling to approximately 2400 (Eldoret Municipal Council Education Department Report, 2010). The reason for picking on Form three students is that they are at the peak of adolescence, hence a good representative of the over 70% of the approximate (100,000) adolescents enrolled in Secondary schools. (Eldoret Municipal council Education Department, 2010 report). Also targeted in the study were 2400 parents, a parent of each of the 2400 targeted Form Three students, therefore, the total targeted population was 4800 respondents.

3.3. Sampling

Sampling is the processes of selecting a representative sample from a target population. To determine the sample size, Kerlinger (1986), notes that a sample size of between 10% and 30% will be a good representation of the entire population. The process began purposively by selecting the required number of schools in each division based on their proximity to Eldoret town for easy mobility. A total of 9 schools were sampled which comprised 30% of the schools. The sample size for students was arrived to as follows: n=10% of N (2,400 Form 3's in 9 schools); $10/100 \times 2400 = 240$ students. Table 1 shows sample size selection summary.

Division	Zone	Urban	No	10%N (sample size)	Peri-urban	No	10%N (sample size)
Western	Pioneer	Tuiyo	320	32	Racecourse	155	15.5
	Kapyemit	Wareng	310	31	Oasis	160	16
Eastern	Kapsoya	Kapsoya	315	31.5	Ilulla	240 320	24
	Chepkoilel	GKPrisons	300	30	Kamukunji		32
	Kibulgeny	Central	280	28	Kainukunji		32
Total				152.5			87.5
Total Sample size for students							240
1 Parent for each student sampled							240

Table 1: Sample size determination

The sampling framework started from the municipality to the municipality divisions, zones and school categories. Using stratified random sampling, the secondary schools were stratified into two divisions; Eastern and Western in the ratio of 3:2 as Eastern division had a slightly higher number of schools.

Table 1 summarizes how the schools were categorized into eastern and western zones and how within each division they were further categorized into urban and peri-urban. From Eastern zones, 5 schools were selected: Kapsoya, Chepkoilel, Kibulgeny, Ilulla and Kamukunji, 3 urban and 2 peri-urban as shown on the table, while western zones, 4 schools: Tuiyo, Wareng Racecourse and Oasis, 2 urban and 2 peri-urban, the total number coming to 9 schools selected for the study. Two hundred and forty (240) parents were sampled as shown on the table. To get to at least one parent of each of the 240 sampled students, first, the students selected were asked to request their parents verbally to participate in the study. They were further given telephone numbers to callin case of any questions. From a sample of 240, 170 agreed through their children to participate in the study. These were issued with questionnaires through the students. 145 questionnaires were brought back, but after going through them, 120 were picked. Purposive sampling technique was then used to select parents eligible for interviews and students eligible for focus group discussions. Eligibility criteria for teenagers included: Willingness to participate and provide accurate information, be in the age bracket of 13-19 and currently in Form 3 in a day secondary school within Eldoret municipality. For the parents, they had to have a teenager currently in Form three and who was also participating. They also had to be willing to participate in the study.

4. Data Generation Techniques

The research instruments used in collecting data were questionnaires, interviews and focus group discussions, used at different stages and with different groups as explained below.

4.1. Questionnaire

A questionnaire is an instrument used to gather data, which allows measurement for or against a particular viewpoint (Kothari, 2008). In the first stage of data generation, we used survey questionnaires. The questionnaire was administered initially to all the sampled participants although there were different questionnaires for parents and teenagers.

This study used questionnaires because they could address a much broader range of research topics than other methods like interviews and FGDs (Singleton *et al.*, 1993 in Sridawruang, 2011). In this study, the questionnaires provided broad information on aspects such as the topics discussed, methods used and how the talk is done. They also enabled easy coding of data gathered and, therefore made analysis straight forward and low in cost.

4.2. Interviews

Interviews are oral face to face interactions which are particularly suitable for intensive investigation (Kothari, 2008). They formed the second stage of data generation, after the initial generation of data from questionnaires, the parents were divided into two groups - those who communicate regularly with their teenagers on sexuality 65 (54.14%) and those who do not 55(45.8%). From these two groups, 5% of each category was selected purposively to be interviewed. The final number came to 3 for those who do and 3 who don't, totalling to 6 parents. It should be noted that parents who communicate regularly with their children and those who do not and children who communicate regularly with their parents formed the case studies A and B.

The aim of in-depth interviews for parents in this study was to collect extensive and intensive data on parent-teen communication on sexual issues. They also allowed a great deal of information to be gathered in a short period of time. They also enabled us to seek clarification through probing. The questions that were asked were confidential between the researcher and the respondents. According to Creswell & Plano Clark (2007) when more individuals participate in in-depth interview, it would mean a researcher obtaining less depth from each participant.

4.3. Focus Group Discussions

Kamberelis and Dimitriadis (2005) as cited in Jwan and Ongo'ndo (2011) define focus group discussions as collective conversations or group interviews (p.91). They are applied research methods useful for exploration and discovery while getting an in-depth interpretation of the topic or learning more about groups of people who are often misunderstood. In this study, focus group discussions were the third stage of data generation. Teenagers were also grouped into two groups depending on whether they communicated regularly or not. Five percent (5%) of each category were chosen to take part in focus group discussions forming case studies C and D.The FGDs were employed in order to provide effective insights into the views of teenagers on parent-teen communication on sexual issues (Hyde *et al.*, 2005).

This study held four focus group discussions, two for boys, two for girls, involving between 5 to 7 teenagers and lasted for approximately 1 hour as per (Hyde *et al.*, 2005). Two focus group discussions for each gender were held for those who communicate regularly with their parents on sexual issues and two for those who do not. A male facilitator was recruited to elicit open answers from male students; an assistant facilitator took notes and recorded the conversation. The principal researcher facilitated the female students group.

5. Data Collection Procedure

Before embarking on data collection, a letter was sent to the sampled schools seeking permission to collect data. This letter had a copy of the Ministry of Higher Education, Science and Technology permit. The same documents were also sent to the District Education office two weeks before the actual date of data collection to enable early preparation by the respondents. On the day of the data collection, with permission, the respondents were explained to the purpose of our visit and also assured of confidentiality. Questionnaires were administered to the students and later to the parents. Filling of the questionnaire for students was done in our presence so as to give clarification where necessary.

Telephone numbers for parents to call were given to the students whose parents were participating for any clarification. Parents who communicate with their teenagers on sexuality regularly and those who do not were then sampled and the same for students, this was based on analysis of the questionnaire data. These formed 4 cases; A B C and D. The researcher then did interviews with the parents and FGDs with the students.

6. Data Analysis

Quantitative data was analysed using (SPSS) software. After entering the data in the computer, it was cleaned by running frequencies of all the variables to check for incorrectly coded data. Incorrectly coded data was double checked with the raw data in the questionnaire and corrected. For easy interpretation and understanding; descriptive statistics was employed to explain the results from the survey. Descriptive statistics is a component of statistics that gives numerical and graphic procedures to summarize a collection of data in a clear and understandable way (Powell, 1989).

Descriptive statistics were used to determine frequencies and percentages of all items and analysed further by age, gender, level of education, employment status (parent questionnaire), frequency of sexual discussion, time spend discussing sexual issues, person who initiates the discussion, topics discussed and method used. Frequency distribution tables were used to communicate the key findings. Therefore, for easy viewing, key findings were clearly summarized into tables. Data in the frequency distribution tables was presented in the form of frequencies and percentages. We then wrote the study findings based on these summaries.

The interview and focus group data were analysed manually using thematic analysis technique. Thematic analysis is the search for themes of relevance to the research topic under which reasonably large amounts of data from different sources such as observations, interviews and documents can be organized (Hammersely and Woods, 2001). The process involved several stages: first the qualitative data recorded on tapes was transcribed into text and merged with data that had been noted down. Re-familiarisation of the transcripts was then done by studying them thoroughly in order to form a general idea of implication.

The data was then copied into separate files for the purpose of editing the new copies. Each transcript was gone through, highlighting chunks of data and assigning those words or phrases (codes) that captured a particular issue relevant to the study. Similar codes were then grouped together to avoid unnecessary overlaps and repetitions. After repeated reflection and discussion with supervisors and peers, different categories and codes were grouped into themes through a cut and paste technique.

Lastly, narration was done by reporting the story of the participants in paraphrased statements and a few direct quotations for credibility purposes.

7. Ethical Considerations

A written authority was sought from Moi University and the Ministry of Higher Education, Science and Technology to conduct the study. Verbal consent was also sought from the schools' principals to involve the students in the study. They were shown copies of the research permit and asked for permission to conduct research in their schools. With their permission, verbal consent from the student participants was also sought.

A meeting was held with the Form Threes in the company of their class teachers to explain about the research, and their rights to voluntary consent. The participants were also assured that their responses would be used in complete confidentiality and anonymity and for academic purpose only. After that, with the help of the same class teachers students who wished to participate were recruited, purely on voluntary basis. All the students who were to participate in the study were later given questionnaires for their parents and asked to explain to them the same rights. The respondents were also assured of getting feedback from the research if they needed it after the study. This was aimed at securing co-operation from them.

In this study, anonymity was ensured by the participants being asked not to disclose their names on the questionnaires while confidentiality was maintained by storing data in a lockable place to avoid illegal access to information. For scientific honesty, an independent statistician entered the data from the questionnaires into the SPSS software programme. The results were produced independently by the statistician to avoid my subjective collaboration.

8. Trustworthiness of the Study

Bassey (1999) citing Lincoln and Guba (1985) defines trustworthiness as, "ensuring that the research process is truthful, careful and rigorous enough to qualify to make the claims that it does (p.129)." Terminologies used to demonstrate trustworthiness in quantitative and qualitative research are different but mean the same thing. Internal validity/ credibility means the extent to which the study actually investigates what it claims to investigate and reports what actually occurred in the field. Reliability/dependability is the extent to which the research procedure is clear to enable other researchers replicate the study and get similar results. Objectivity/confirmability means how neutral the researcher is and to what extent s/he influences the findings (Yin, 2003)

To ensure internal validity of the questionnaire, questions were formulated in simple language and clear instructions also given on how to answer the questions. A lot of consultation with experienced personnel in research methodology was also done. Their advice, criticism and comments were incorporated in the instruments so as to achieve a good measurable standard before the final administration. External validity was ensured as all Form Three students were given equal chance to participate in the study if they so wished. Also, all the persons who agreed to participate in the study completed questionnaires. Generalising the findings to the entire population was therefore justified.

To ensure reliability of the survey instrument, piloting was done in one day secondary not sampled in the study that had similar characteristics to the sampled schools. The research instruments were administered to the same pilot group twice after a given interval. This ensured the questionnaire could capture the information required. The Cronbach's coefficient alpha was 0.73 implied that the research instruments were reliable and hence adopted to collect data(Nunnally, 1978). Reliability was also ensured by ensuring the physical and psychological environment where data was collected was made comfortable and private. For confidentiality names were not to be written on the questionnaires.

In terms of trustworthiness of qualitative data; first, to ensure credibility, summarized points from the discussions were given to each focus group for verification. This ensured findings that were firmly grounded in the data (Stake, 1995). During interviews, credibility was enhanced by reframing, expanding and asking indirect questions (May, 1989). Secondly, to ensure transferability, detailed background information on the participants and the context of the research was given to enable readers draw their own conclusions around the generalizability of findings to the whole target population.

Thirdly, dependability was ensured by making a detailed description that involved recording actual speech acts and giving subsequent comments. Organization of this thesis was done in such a way that colleagues and research supervisors could clearly follow the steps and decisions made and understand the rationale behind each step and decision. Lastly, for confirmability; working in high school and

knowing some Form Three students in the sampled schools, there was a possibility of influencing some students to participate in the focus group discussions. To minimize biasness, similar personal attributes such as friendliness were exhibited to all respondents.

9. Findings

The study sought to establish the nature of communication between parents and their teenage children on teenagers' sexuality. The sub-themes in table 2were chosen to discuss this.

Nature of parent- teen communication		Never	About once a year	2-3 times a year	Several times a year	Very frequently
Frequency of discussion on	Parents	6(5.0%)	12(10.0%)	25(20.8%)	63(52.5%)	14(11.7%)
sexual issues	Teens		146(60.8%)	35(14.6%)	14(5.8%)	45(18.8%)
Time spent discussing sexual issues		Less than 30 minutes	30min-1hour	1-2hours	More than 2 hours	
	Parents	59(49.2%)	39(32.5%)	8(6.7%)	14(11.7%)	
	Teens	159(66.3%)	31(12.9%)	20(8.3%)	30(12.5%)	
Person who initiates the discussion		Parents	Teens			
	Parents	97(80.8%)	23(19.1%)			
	Teens	103(42.9%)	137(57.1%)			

 Table 2: Nature of parent-teen communication on sexual issues

 Source: Survey Data

Majority of parents 63(52.2%) out of 120 reported to talking with their teenagers several times a year, something that most teenagers 146 (60.8%) out of 240 disagreed with, admitting that it only occurs once a year. The implication of this is that, though parents feel they have talked, teenagers feel otherwise. When asked on the time spent discussing sexual issues at home, the majority of parents 39 (32.5%) and teenagers 159 (66.3%) responded that it takes less than 30min. From the responses, it is obvious that it's parents who normally initiate this discussion. On who initiated the conversations, a good number of parents 97 (80.8%) reported that they did, while 23 (19.1%) reported that the teenager did. For teenagers; 103 (42.9%) reported that parents did, while 137 (57.1%) reported that teenagers did. From the responses, we can say that the sexual conversations are normally initiated by parents.

During focus group discussions and interviews, when respondents were asked whether it was easy for them to talk about sexual issues with each other, there were mixed responses. Majority of the respondents admitted that talking about sexual issues is not easy. To quote some teenagers:

- \rightarrow It is not easy at all especially if your parents are strict. (Female student, U)
- \rightarrow It is not easy to approach your parents with sexual issues; it would take a lot of guts. (Male student, U)
- \rightarrow It is easy if you have a good relationship with your parent. (Male student, V)

One of the teens said it depended on how one relates with one's parent. According to him:

 \rightarrow If your parent is harsh, then it would be hard but if he is friendly then it would be easy. (Female student, W) According to another teen:

 \rightarrow It depends with how comfortable your parents are with the subject, if they are the types that talk to you about sexual issues then it would be easy to approach them. (Male student, W)

For parents, there were also mixed responses, with others saying it was not easy and others saying it was. Those who said it was not easy cited embarrassment. To quote a few:

You have to master a lot of confidence before talking about this issue as the topic is embarrassing. (Parent, B)

 \rightarrow I am usually afraid of how my kids will think of me, if I start talking about sexual issues. (Parent, C)

Some said it was easy. One parent had this to say:

 \rightarrow Of course it is, there's nothing under the sun, which a parent cannot discuss with their child and that they feel comfortable talking with their children. (Parent, A)

From this, we see that, talking about sexuality with either your parent or teenager is easy or hard depending on your relationship. If it is warm and close, it will be easy probably because of less tension. Itcan also be seen thatmany teens do not talk to their parents on sexual issues and their reasons include: Harshness and baseless suspicion. To quote some students:

- → My parents are the suspicious type if you start talking to them about sexual issues they will think you've started misbehaving. I therefore shun from such topics at all cost. (Female student, X)
- → My parents don't understand me, so I never bother to tell them anything that concerns me, I'd rather talk to my elderly friends if I have a serious issue bothering me. (Male student, Z)
- → I find my parents especially my mum harsh, any time I want to ask something, I freak out because I don't know how they will react, so I rarely ask them something of that nature. (Female student, Z)

- → My parents act like we shouldn't talk about sexual issues to the extent that when program starts with sexual undertones in it like the common soap operas they will walk out or pretend to be busy. So we rarely talk. As an individual I also feel matters to do with ones sexuality are private. (Male student, V)
- \rightarrow No, I get everything I need from magazines and the internet and again my father is rarely there and so I don't get the opportunity to talk to him about any issue. (Male student, W)

For those who had said they do talk with their parents, some reasons cited included; easiness of parents to be talked to and good relationship with parents. To quote some students:

- \rightarrow My parents are friendly, open, easy to talk to and not judgmental; I talk to them any time I feel like. I have seen my friends who are not talked to go astray. (Male student, X)
- \rightarrow Both my parents talk to us about sexual issues at any opportune time. I feel it's because they are saved (my dad is a pastor) and maybe feel they are obliged to do so. (Male student, Y)
- \rightarrow My mother is always reminding us not to bring shame to the family by sleeping with boys and getting pregnant. She is not the shy type and will say anything. So we talk regularly. (Female student, Z)

Unlike teenagers, majority of the parents admitted that they do talk to their children on sexual issues but not regularly. According to some parents:

I do it anytime when my mind is triggered to it. For example if I have watched something disturbing that involves a young person. (Parent, A)

 \rightarrow I do it regularly, in fact with both my daughter and son, I have been doing it since they were younger and I haven't stopped. In this century a parent cannot afford not to talk with their children. (Parent, B)

For the few who said they did not talk to their children, reasons cited included; assuming that teens will know things on their own or will be taught at school and their culture not allowing such talk. Some parents opined that:

I don't, my culture (kalenjin) doesn't allow parents and their kids to talk sexual issues. It's the responsibility of the grandparents. (Parent, D)

 \rightarrow I rarely talk to my teens about sexual issues; I only do it once in a while. I guess I assume too much that he will get to know things on his own as I did or be taught in school. (Parent, E)

However, during the interview, it was discovered that though parents claim they do communicate, the communication is general and not detailed. For teenagers, they mostly talked with their parents while alone with them, while doing a chore together, during bedtime or family gatherings and while watching something on TV related to teen sexual issues. Some students averted that:

When doing domestic chores together or during family gathering. (Female student, U)

 \rightarrow When watching TV or video programmes related to sexual issues. (Female student, V)

For parents, neighbourhood experiences, impulsiveness and change in behaviour are what triggered sexual talk. To quote a few parents on the same:

- → When something happens in our neighbourhood that involves a young person. For example a boy being said to have impregnated a girl. (Parent, A)
- → I think there's no planning when it comes to parent-teen communication. I discuss sexual issues anytime my mind is triggered to it. For example, after seeing something related to young people and their sexual issues or when I notice unusual behaviour. (Parent, B)

On the question of how exactly the issue is approached, majority of teenagers respondents agreed that mostly the approach is general and not specific. For example, teenagers cited using something they have watched on TV, or their friends' experiences. Some students said:

 \rightarrow Generally, I pretend that a friend of mine is facing an issue and ask my mother what she should do. (Female student, X)

 \rightarrow I use something I have watched on TV as an excuse to ask what I want to ask. (Female student, Y)

For parents they cited, giving experiences from their teenagehood and giving examples of people who have messed up their lives. According to some parents:

- → Since I never want to look like I am putting a lot of emphasis on sexual topics, I start by talking generally about other issues first. (Parent, A)
- \rightarrow I do it generally by giving examples of young people who have messed up their lives in the neighbourhood or television or any other place. I tell them to be cautious so that the same does not happen to them. (Parent, B)

Respondents were also asked on what influences effective parent-teen sexual communication. The most cited influences were; openness, warm relationship, being comfortable, availability and approachability of parents. Some parents opined that:

A warm and close relationship will improve communication between you and your kids. I would say openness. (Parent, A)

 \rightarrow Level of approachability on the part of the parent. If you are perceived as approachable your kids will talk to you. (Parent, C) In some teenagers' words:

- \rightarrow When parents are honest, frank and comfortable communication will be effective. (Male student, X)
- \rightarrow Parents should be readily available for their children and be ready to listen. (Female student, U)

From the above, we can say that, for teenagers, approaching parents for sexual discussions is easy or hard depending on approachability of parents. For parents, sexual talk needs a lot of confidence and is embarrassing but mandatory. When it occurs, it is usually triggered by television programmes, change in behaviour and approached in a general manner.

9.1. Topics which Parents and Teenagers Discussed

Topics as part of nature of sexual discussion attracted various response as shown in table 3.

Topics		Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Dating	Parents	25(20.8%)	64(53.3%)	11(9.2%)	-	20(16.7%)
Dating	Teens	61(25.4%)	65(27.1%)	18(7.5%)	85(35.4%)	11(4.6%)
How to have good relationships	Parents	15(12.5%)	86(71.7%)	9(7.5%)	3(2.5%)	7(5.8%)
How to have good relationships	Teens	93(38.8%)	50(20.8%)	21(8.8%)	11(4.6%)	65(27.1%)
Making good decisions about becoming	Parents	3(2.5%)	45(37.5%)	25(20.8%)	30(25.0%)	17(14.2%)
sexually active	Teens	84(35.0%)	39(16.2%)	17(7.1%)	15(16.2%)	85(35.4%)
HIV/AIDS, STDs	Parents	23(19.2%)	71(59.2%)	9(7.5%)	-	17(14.2%)
HIV/AIDS, STDS	Teens	90(37.5%)	64(26.7%)	5(2.1%)	11(4.6%)	70(29.2%)
How to deal with near process to have say	Parents	18(15.0%)	62(51.7%)	24(20.0%)	9(7.5%)	7(5.8%)
How to deal with peer pressure to have sex	Teens	69(28.8%)	45(18.8%)	70(29.1%)	40(16.7%)	16(6.6%)
How to know when one is ready to have	Parents	3(2.5%)	11(9.2%)	29(24.2%)	62(51.7%)	15(12.5%)
sex	Teens	25(10.4%)	20(8.3%)	69(28.8%)	40(16.7%)	86(35.8%)
Condema and contractions	Parents	3(2.5%)	26(21.7%)	6(5%)	60(50%)	25(20.8%)
Condoms and contraceptives	Teens	21(8.8%)	45(18.8%)	76(31.7%)	11(4.6%)	87(36.2%)

Table 3: Topics Discussed Source: Survey Data

From table 3 above, it is clear that the most popular topics for both parents and adolescents were; dating, where 61 (25.4%) out of 240 students strongly agreed and 65 (27.1%) agreed, out of 120 parents 64 (53.3%) agreed, relationships, 93 (38.8%) students strongly agreed and 86 (71.7%) parents agreed, HIV/AIDS and STDs, 90 (37.5%) students strongly agreed and 64 (26.7%) agreed, for parents, 71 (59.2%) also agreed, how to deal with peer pressure to engage in sex, 62 (51.7%) students and 62 (51.7%) parents agreed. However, it can be seen that good decision-making was only popular with parents and not students.

What was revealed during focus group discussion and interviews corroborated the findings of the questionnaire but with the addition of other issues like physical changes. To quote some students:

- \rightarrow About relationships and attraction to the opposite sex. (Male student, U)
- \rightarrow Premarital sex and consequences of getting pregnant while still in school. (Female student, X)
 - \rightarrow Changes happening to me as a girl. (Female student, Y)

Morals and values we should uphold as girls. (Female student, Z)

 \rightarrow How to behave in case of peer pressure to misbehave (Male student, V).

Parents' responses corroborated with the teens responses but there were extra additions such as HIV/AIDS, keeping wrong company and hygiene. Some parents averted that:

→ Cautioning about engaging in romantic relationships. I tell my son to wait that things will fall in place at the right time. (Parent, C)

Deadly diseases like HIV/AIDS&STIs, how to relate with members of the opposite sex and morals and values they need in life. (Parent, A)

 \rightarrow I tell my daughter to beware of men with bad intentions and not to accept free gifts or rides. (Parent, F)

10. Discussion

Data analysis and interpretation revealed the following major findings: when asked how often sexual talk takes place, 63 (52.5%) parents reported several times a year while 146 (60.8%) students reported once a year. Sexual talk therefore does take place, but is not meaningful to the teenagers because it is general, scanty, unidirectional and takes as little time as possible.

This is in line with a study done by which found that parents are more likely to communicate general and less obscene topics than topics that seem to condone sexual relationships such as sexual partners; condoms and family planning. Various studies also found that parents often evaluate themselves positively than their teenagers when it came to sexual talk (Miller *et al.*,2009; Luwaga, 2004).

A surprising finding in this study was that parents are for sexual talk with teenagers but are limited by inadequate communication skills. Another important new finding in this study is that majority of parents, 97(80.8%) agreed that it is parents who initiate sexual discussion. This is contrary to a study by Walker(2001) in the UK which found that parents relied on their children to start discussing sex. In summary, it has been shown that, parent-teen communication plays an important role in adolescent adaptation.

11. Conclusion

Overall, the study revealed that parents do speak to their children about sexual issues but the talk is general and scanty and with teenagers as passive listeners. Most talk starts at onset of puberty at home and is triggered by T.V/ radio programs and neighbourhood experiences. Popular topics are dating, relationships, good decision-making and HIV/AIDS and STDs. Most preferred method of

carrying out the sexual talk is discussion; culture, religion, personal beliefs and gender inhibit talk on sexual issues. Family structure/marital status, affect sexual talk with less talk in single parent homes. Unemployed and self-employed parents talk more on sexual issues.

The findings in this study are consistent with the family systems theory that guided this study. The theory guided the researcher to examine the influence of the behaviours of sub-systems (that is, parents and their communication) on the behaviours of other separate, but conjoined parts (teenagers' sexual behaviour and awareness (Bertalanffy, 1968). It has been established that parent-teen sexual communication if done effectively and on time can be used as one of the strategies in curbing negative sexual adolescent outcomes.

12. Recommendations

This study revealed that though parents claim to be talking to their teens about sexual issues, the teenagers feel otherwise, as the message is scanty, takes very little time, is unidirectional and repetitive. It is therefore important that efforts be made in the education sector by the ministry of education to include sex education as part of the curriculum so as to complement parents' efforts. Schools can also come up with parent-teen sex education schemes emphasizing learning together and practicing communication skills in how to have a sex talk. Parents also ought to validate what topics or issues teens already know to avoid being repetitive.

13. Suggested Further Studies

In this study, other sources of sexual communication like peers and the media have been looked at as having a negative influence on teenagers' sexual behaviour. These are aspects situated more in group and mass communication. Future research can look into how this other sources can be used to compliment parent's efforts as these sources cannot possibly only have a negative influence.

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15. References

- i. AGI (2004). Readings on Teenagers and sex education. New York: Oxford UP.
- ii. Amoran, O. E., & Fawole, O. (2008). Parental influence on reproductive health behaviour of youths in Ibadan, Nigeria. African Journal of Medical Science, 37(1), 21-7.
- iii. African Journal of Reproductive Health (2010): Maternal and Reproductive Health Issues Volume 14, Special Issue, September.
- iv. Balter, L. (2000). Parenthood in America: An encyclopaedia, (Vol 1). Santa Barbara, California, USA.
- v. Bastien, S., Kajula, L. J. & Muhwezi, W. W. (2011). A review of studies of parent-child communication about sexuality and HIV/AIDS in sub-Saharan Africa. African Journal of Reproductive Health, 8(25).
- vi. Bertalanffy, V. L. (1968). General systems theory: Foundations, development, application. New York:Braziller.
- vii. Boline, A., & Whelehan, P. (2009). Human sexuality: Biological, Psychological and cultural perspectives. New York: Routledge.
- viii. Botchway, A.T. (2004). Parent and adolescent male's communication about sexuality in the context of HIV/AIDS-A study in the Eastern Region of Ghana. Unpublished Master's thesis. University of Bergen, Bergen, Norway.
- ix. Byers, E. S., Sears, H. A., Weaver, A. D. (2008). Parents' reports of sexual communication with children in kindergarten to Grade 8. Journal of Marriage and Family, 70, 86–96.
- x. Creswell, J. W., & Plano Clark, V. L. (2007). Designing and conducting mixed methods research. Thousand Oaks, CA: Sage.
- xi. Crooks, R., & Baur, K. (2008). Our sexuality. New York, NY: Cengage.
- xii. Eldoret Municipal Council Education Department (2010) report. Department of Education. Eldoret Municipality.
- xiii. Eldoret Municipality Education Policy and Data Center created March (2007).
- xiv. Fraenkel, J. R., & Wallen, N. E. (2000). How to design and evaluate research in education. New York: McGraw-Hill Higher Education.
- xv. Gillham, B. (2000). Case study Research Methods. London: Continuum.
- xvi. Hammersely, M., Gomm, R., and woods, P. (2001). Research Methods in Education: Handbook. Milton Keynes: Open University'.
- xvii. Hyde, A., Howlett, E., Brady, D., & Drennan, J. (2005). The focus group method: Insights from focus group interviews on sexual health with adolescents. Social Science & Medicine, 61, 2588-2599.
- xviii. Jwan, J.O. & Ong'ondo, C.O. (2011). Qualitative research: An Introduction to Principles and Techniques. Eldoret, Kenya: Moi University Press.
- xix. Kapungu, C. T., Baptiste, D., Holmbeck, G., McBride, C., Robinson-Brown, M., Sturdivant, A., Paikoff, R. (2010). Beyond the "birds and the bees": Gender differences in sex-related communication among urban African-American adolescents. Family Process.49(2):251–264. Karofsky, P. S., Zeng, L., Kosorok, M. R., (2001). Relationship between adolescent-parental communication and initiation of first intercourse by adolescents. Journal of Adolescent Health, 28 (1):41–45.
- xx. Kenya Demographic and Health Survey (2003), Nairobi, Kenya: Central Bureau of Statistics and Ministry of Health; and Calverton, MD, USA: ORC Macro.

- xxi. KNBS and ICF Macro. (2010). Kenya Demographic and Health Survey 2008/09. Calverton, Maryland: Kenya National Bureau of Statistics and ICFMacro.
- xxii. Kenya National Bureau of Statistics (2013). Kenya demographic and health survey Nairobi: Macro International.
- xxiii. Kerlinger, F. N. (1986). Foundations of Behavioural Research (3rd ed.). Harcourt College Publishers. Kothari, C. R. (2008). Research Methodology-Methods and Techniques (2rd ed.). Prentice Hall.
- xxiv. Luwaga, N.C. L. (2004). Parent-adolescent communication on sexuality in the context of HIV/AIDS in Uganda. Unpublished Masters Thesis, University of Bergen, Norway.
- xxv. May, K.A. (1989). Interview techniques in qualitative research: Concerns and challenges. In J. Morse (Ed.), Qualitative nursing research: A contemporary dialogue (pp.57-166). Rockville, MD: Aspen.
- xxvi. McNamara, C. (2006). Basics in Internal Organizational Communications. File:HE:/Basics in Internal Organizational Communications.htm.
- xxvii. Moore, R., & Rosenthal, D. (2006). Sexuality in adolescence: Current trends. London and New York: Routledge.
- xxviii. Muganda-Onyando, R., & Omondi, M. (2008). Down the Drain: Counting the Costs of Teenage Pregnancy and School Dropout in Kenya. Nairobi: Centre for the Study of Adolescence.
- xxix. National Council for Population and Development, Division of Reproductive Health, and Population Reference Bureau (2013). Kenya Adolescent Reproductive Health and Development Policy Implementation Assessment Report. Nairobi: Macro International.
- xxx. Nunnally, J. (1978). Psychometric theory (2nd ed). New York: MacGraw-Hill.
- xxxi. Nundwe, C. S. (2012). Barriers to Communication between Parents and Adolescents Concerning Sexual and Reproductive Health Issues: A Case Study of Kinondoni Municipality. Unpublished Masters Thesis, Muhimbili University, Kinondoni.
- xxxii. Onwuegbuzie, A. J., & Johnson, R. B. (2006). The validity issue in mixed research. Research in Schools, 13(1), 48-63.
- xxxiii. Oshadumo, L. O. (2007). Strategies for Enhancing Communication between Parents and Adolescent Children within Families in Kogi State. Unpublished Masters Research Project, University of Nigeria, Nsukka. Oso, Y. W. & Onen, D. (2005). A General Guide to Writing Research Proposal and Report. Kisumu, Kenya: Options Press and Publishers.
- xxxiv. Pearson, J. (1993). Communication in the family: Seeking satisfaction in changing times (Vol.2). New York: HarperCollins.
- xxxv. Phetla, G., Busza, J., Hargreaves, J. R., Pronyk, P. M., Kim, J. C., Morison, L. A., Watts, C., Porter, J. D., (2008).'They have opened our mouths': increasing women's skills and motivation for Sexual communication with young people in rural South Africa. AIDS Education and prevention, 20, 504-518.
- xxxvi. Powell, T. E. (1989). Program Development and Evaluation, Analysing Quantitative Data. Cooperative Extension Publications, Mifflin Street, Madison.
- xxxvii. Raffaelli, M., Bogenschneider, K., & Flood, M. F. (1998). Parent-teen communication about sexual topics. Journal of Family Issues, 19, 315-333.
- xxxviii. Renney, J. (2010).Mastering the Art of Interpersonal Communication: A Qualitative Study on How Individuals Become Masters of Interpersonal Communication. Unpublished Masters Thesis, University of Victoria, Columbia, Canada. Rosenthal, D. (2006). Sexuality in adolescence: Current trends. Routedge: New York.
- xxxix. Simkin, L., Blake, S. M., Ledsky, R., Perkins, C. Calabrese, J. M. (2001). Effects of a parent-child communications intervention on young adolescents' risk for early onset of sexual intercourse. Family Planning Perspectives, 33 (2), 52-61.
 - xl. Stake, R.E. (2005). Qualitative Case Studies. In Denzin, N. K. and Lincoln, Y. S. SageHandbook of Qualitative Research (3rded.)(pp.444-446). London: Sage Publications Limited. Sridawruang, C. (2011). The involvement of Thai parents in the sex education of their teenage children. University of East Anglia. School of Nursing and Midwifery. Faculty of Health. Tashakkori, A., & Teddlie, C. (2003). The past and future of mixed methods research: From data triangulation to mixed model designs. In A. Tashakkori & C. Teddlie (Eds.), Handbook of Mixed Methods in social and behavioral research (pp. 671-701). Thousand Oaks, CA: Sage. Towela, M. (2006). Dissertation on Parent-Child Communication on Sexual and Reproductive Health Issues in Malawi. Unpublished Masters Thesis, University of Malawi, College of Medicine, Malawi.
 - xli. UNAIDS (2008). Improving the Education Response to HIV and AIDS: Lessons of partner efforts in Coordination, harmonization, alignment, information sharing and monitoring in Jamaica, Kenya, Thailand and Zambia UNAIDS inter-Agency Task Team IATT on education publication.
 - xlii. USAID (2012). Youth in development: Realizing the demographic opportunity. Washington, DC: US Agency for International Development.
 - xliii. UNESCO (2010). Levers of Success: Case studies of national sexuality education programmes. Paris: United Nations Educational, Scientific and Cultural Organization. UNICEF (2005). Adolescent Development: Perspectives and Frameworks-A Discussion Paper. New York: UNICEF.
 - xliv. Vuttanont, U. (2010). 'Smart boys' and 'Sweet girls' Sex education needs in Thai teenagers: a mixed-methods study. Unpublished Doctoral Thesis, University College London, London.
 Wallace, S. (2008). Alcohol, Drugs and sex. What parents don't know and Teen's aren't telling. New York: Sterling publishing Co.
 - xlv. 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. BMC Public Health: Tanzania.

- xlvi. Whitaker D., Miller K. (2000). Parent-Adolescent Discussions about Sex and Condoms: Impact on Peer Influences of Sexual Risk Behaviour. Journal of Adolescent Research, 15 (2), 251-73. WHO (1999b).Technical report series NO.886. Programme for Adolescent Health and Development, Geneva: WHO (1999b).
- xlvii. Yin, R. K. (2003). Case Study Research Design and Methods (3rd ed.). London: Sage Publications. Yingling, J. (2004). A life time of communication: transformation through relational dialogues. Erlbaum Associates publisher: New Jersey.
- xlviii. Zimmerman, L. (2011). "South African Youth and Parents: A Mixed-Methods Examination of Family Communication about Sex, HIV and Violence" Psychology Dissertations, Paper 92. Georgia State University. Digital Archive @ GSU