

Chapter 3

Community-Based Study on the Influence of Parent Characteristics on Risky Sexual Behaviours among Adolescents 15-19 Years in Homa-Bay County, Kenya

By

Faith Muhonja; Margaret Keraka; Phoebe Ndayala

Abstract:

In Kenya, it is estimated that 1 in 4 (25 %) of children below 18 years have lost either one or both parents. While approximately 1 in 10 (10 %) of children 10-14 years are total orphans. For the children who have parents, majority (16 %) are absentee parents as they do not live together with their children. Consequently, this puts this cohort at a precarious state as they lack parental care and monitoring especially on issues related to sexual and reproductive health. Homa-Bay County has the worst indicators of high prevalence of risky sexual behaviors, such as high age specific fertility rate 178 per 1000 which is twice the national prevalence rate, (KDHS 2014). The article assesses the influence of parent characteristics on risky sexual behaviors among adolescents, 15-19 years, in Homa-Bay County, Kenya. Descriptive study design was employed. A sample size of 325 was calculated using Fisher's formula $n = z^2 pq/d^2$. Through systematic sampling, 306 (94%) respondents were interviewed. The study collected both quantitative and qualitative data by use of structured questionnaire and key informant interview guide respectively... Quantitative data were analyzed by use of Ms-excel package and Stata V 14. Chi-square and P-Value of $PV < 0.05$ determined the significance of the association. Findings were presented descriptively in form of bars and tables. In conclusion, the findings showed an association and influence of parent characteristic on adolescent risky sexual behaviors, $PV < 0.05$. The study recommends the need to factor in parent characteristics when designing adolescents' sexual and reproductive health promotion and education programs, strategies and policies.

Keywords: Adolescents, Homa-Bay County, Kenya, sexual behavior

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1.0: Introduction

Adolescents' risk sexual behavior refers to sexual behaviors that lead to unintended pregnancy and spread of sexual transmitted diseases and HIV/AIDS, (UNAIDS, 2015). Report from United Nations Population Fund indicates that, approximately, 28, 900 girls' aged (10-14) years and 349, 400 aged 15-19 years old became pregnant the same period, (UNFPA, 2015). Globally, risky sexual behavior is the second among the top ten risk factors in global burden of all diseases, (WHO, 2016).

In Kenya, statistics shows that between July 2016 and June 2017, about 378,000 pregnant girls age (10-19) were presented in health facilities across all counties, (NCPD, 2017). Risky sexual and reproductive health among young people is a major public health concern in Kenya because they represent 26% of the national population, (KDHS, 2015). Statistics indicate that the national mistimed pregnancy among women aged 15-49 years is 26% while among women 15-24 years remains high at 32 %. Worse still, the national prevalence of unwanted pregnancy among women ages 15-49 years stands at 17 %; that among women ages 15-24 years is almost twice the national prevalence at 30%, (KNAYS, 2015). Out of 1000 births in Kenya, 103 are delivered by adolescent girls aged 15-19 years old. The national adolescent prevalence of 18 % may present a less cautionary statistic; however, some counties are more disproportionately affected, (NCPD, 2017).

Homa-Bay County has a pregnancy rate of 40%, more than double the national statistic of 18%, (NACC, 2016 ; KDHS. 2015). More so, adolescents 10-19 years and youth 15-24 years claimed up to 28% and 52% of all new HIV infections in Homa-Bay County, (Kenya HIV Estimates, 2015).

Lack of parenting has been cited as a predictor to adolescents engaging in risky sexual and reproductive health behaviors. Given this high number of orphans in Kenya, (1:4), this could be the precursor to indicators of high prevalence of adolescents' risky sexual behaviors in. It is from this background that the article endeavors to establish the influence of parental support on risky sexual behaviors among adolescents 15-19 years in Homa-Bay County, Kenya.

1.2: Statement of the Problem

In Kenya, it is estimated that 1 in 4 (25 %) of children below 18 years have lost either one or both parents. While approximately 1 in 10 (10 %) of children 10-14 years are total orphans. For the children who have parents, majority (16 %) are absentee parents as they do not live together with their children. Despite the decline in risky sexual behavior among adolescents, (Girma et al., 2015), Homa Bay county is on an upward trajectory. Statistics indicate that Homabay County one in three (33%) adolescents 15-19 years would have had their first child, this is twice (178 per 1000) the national prevalence of 14.7%. The age specific fertility rate of adolescents in Homa Bay County is twice the national age specific rate 96 per 1000. More so, a half of adolescents in Homa Bay County is married by age 18 years old which is two years early than the national prevalence. Parent influence has been deemed to be a predictor of sexual behavior among adolescents through social bonding and change in adolescents' knowledge, attitude and practice.

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It is from this background that the study aims to assess the influence of parental support on risky sexual behaviors among adolescents 15-19 years in Homa-Bay County, Kenya.

1.3: Objective of the Study

1. To assess the influence of parent characteristics on risky sexual behaviors among adolescents 15-19 years in Homa-Bay County, Kenya.

1.4: Justification of the Study

Homa-Bay County has a pregnancy rate of 40%, more than double the national statistic of 18%, (NACC, 2014; KDHS, 2015) Consequently, the county has 26% HIV prevalence, three times higher the national prevalence of 6.2%; (NACC, 2014). In addition, previous studies have concentrated on the prevalence of poor indicators of adolescents risky sexual behaviors without associating it with parent characteristics. Parents play a major role in rising up children and shaping their sexual and reproductive health behaviors. Given the upward trajectory of poor sexual and reproductive health indicators, there is need to carry out a study on the influence of parent characteristics on risky sexual behaviors among adolescents 15-19 years in Homa-Bay County, Kenya.

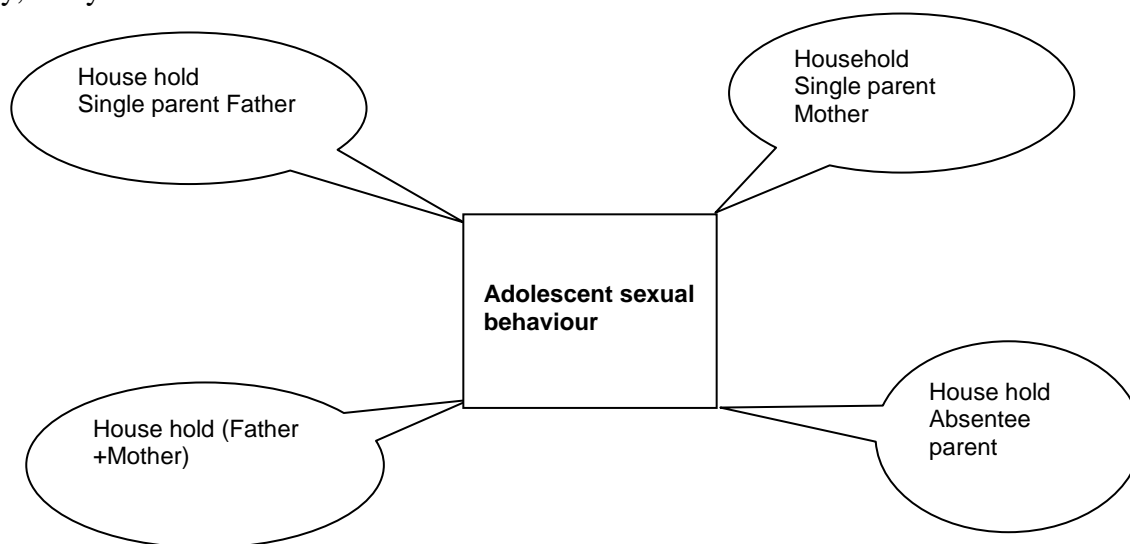


Figure1.1: Significance of Parenting Model-By Author (Faith Muhonja, 2020)

2.0: Review of Related Literature

Statistics indicate an association between parent characteristics and risky sexual behavior. This has been underscored on the fact that parent-child communication shapes the overall sexual behavior of the adolescent, (UNICEF, 2017)

A study in Tanzania echoed the need for parent-child relationship on the risky sexual behaviors, (Wamoyi et al. 2015). The success of the health promotion program was highly dependent on the parent-child interaction.

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Similar sentiments have also been voiced in an investigation that was done in Chile (Hanson et al., 2015) as well as in Los Angeles, where both of the studies recorded a strong significant association on the influence of biological parents on delay on engagement in sexual debut. Other studies have recorded differences in risky sexual behavior of adolescents in relation to the family settings; where children from families with both parents present and living together showed safe sexual behaviors in comparison with adolescents with absentee parents (Obare et al., 2016).

3.0: Methodology

Community-based cross-sectional descriptive study design was used. The study population was all adolescent 15-19 years old. The target population was adolescents 15-19 years within Homa-Bay sub-county, Homa bay County, Kenya. The inclusion criteria were all adolescents within Homa-Bay Sub County, and had resided there for more than six months and who had consented to take part in the study. The exclusion criteria were adolescents who met the inclusion criteria but mentally ill and or very ill to participate in the study. The study area was Homa-Bay sub-county, within Homabay County, Kenya. The County lies 0°15'South and 0°52'South, and between longitudes 34° East and 35° East. It covers 4,267.1 Km² and water surface area of 1,227 km². Homa Bay Sub County is situated former Nyanza Province in South Western Kenya along Lake Victoria. Homa Bay sub county has four wards, Homa Bay West; Homa Bay East; Homa Bay Arujo and Homa Bay central. The main health problems affecting the county include; Drug and substance Abuse (DSA), Sexually Transmitted Infections (STIs), teenage pregnancy, Sexual and Gender based violence (SGBV).

Homa-Bay County was purposively chosen due to high poor indicators of adolescent sexual of reproductive health. Homa-bay Sub-county was purposively chosen due to high adolescent population rate. Stratified sampling was employed where the sub-county was stratified in the four administratively existing wards: East, West, South and Central. The two wards (50%), West and central were randomly identified. A representation proportion of 50 % of villages from every ward were randomly considered for the study; where 50 % of households from each village were included in the study. The study adapted the standard Fischer's Formula is $n = Z^2 pq/d^2$ formula; a sample size of 325 was determined. All the households with eligible adolescents 15-19 years were mapped out to generate a sampling frame of 1292. A sampling interval of arrived at by dividing the total number of population in the sampling frame 1292 by the sample size of 325, equals 3.975. Through systematic sampling, every 4th household with eligible adolescent was selected in the study, where a total of 312 (96%) participants were interviewed. Research instruments were structured questionnaire and key informant interview guide. Quantitative data was collected from the participants by use of a structured closed ended interviewer led questionnaire. Qualitative data was gathered by use of key informant interview guide. Quantitative data was analyzed by used of Ms-excel package and Stata V 14. Chi-square and p-value of ≤ 0.05 were used to determine significance.

For Sample Size determination, the study adapted the standard Fischer's Formula is $n = Z^2 pq/d^2$

4.0: Results

4.1: Characteristics of the Respondents

Majority 198 (64.71%) of the participants were male while 108 (35.29%) were female, with an N=306. Majority 88 (28.76%) of the participants were 19 years old, followed by the 16 years old at 62 (20.26%) and then the 17 years old at 58 (18.95%); lastly the 18 years old at 54 (17.65%) and the 15 years old registered 44 (14.38%) participants. The minimum age of 15 years and maximum age of 19 years, with a mean age of 17.26 and a standard deviation of 1.4 was recorded, (figure 1.2).

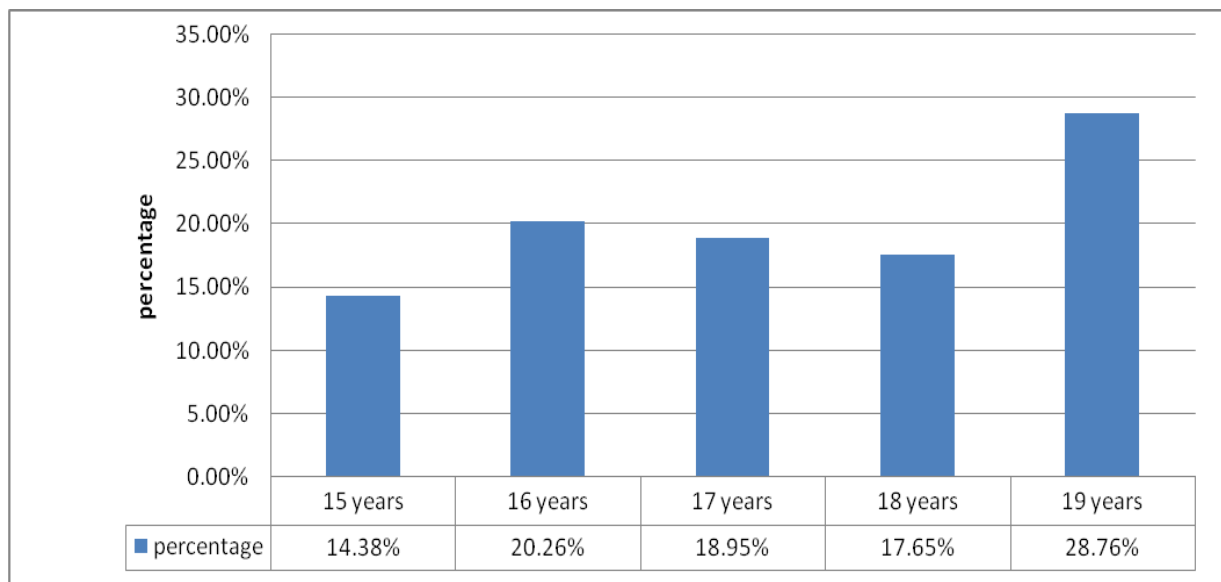


Figure 1.2: Age of the respondents. (Source: Field Survey 2020)

4.2: Parental Characteristics of the Participants.

Findings showed that majority, 198 (65%) of the respondents had both their parents alive, followed by single mother at 77 (25%); single father and total orphan was reported at 10 (3%).and 21 (6%) respectively. Findings indicate that in every 10 adolescents, 4 did not have both parents, this means that 40% of adolescent in Homa-bay sub-county in Kenya are missing out on parental support from both parents. Worse still, more than a quarter of households are headed by single mothers with 8% of adolescents are total orphans living with relatives or worse still living as house hold heads, (figure 1.3).

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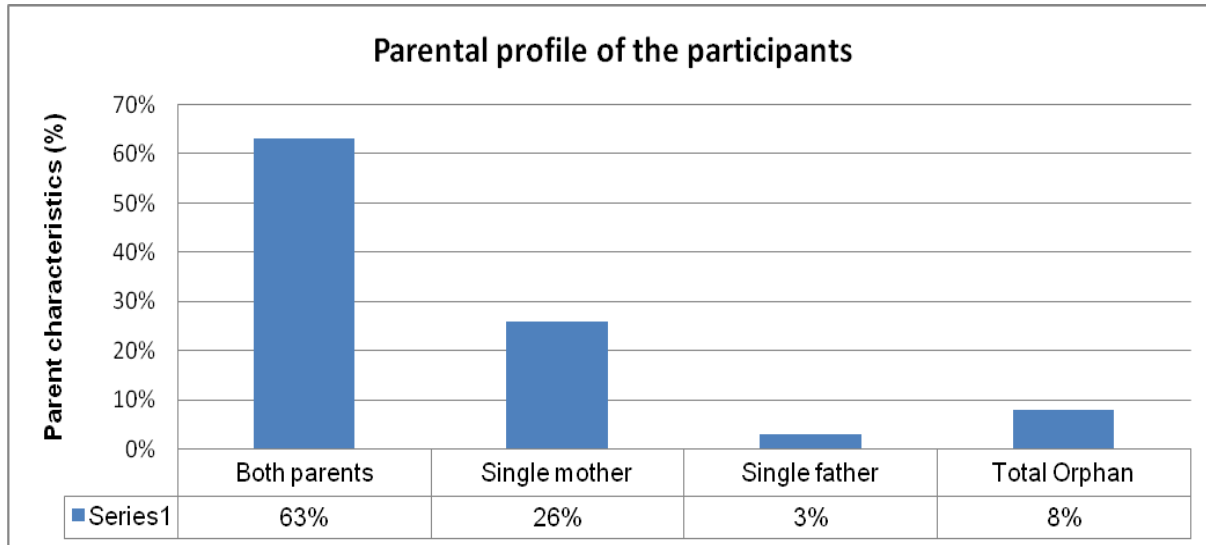


Figure 1.3: Parental Characteristics of the Respondents. (Source: Field Survey 2020)

4.3: Adolescents’ Sexual Intercourse Profile

It is unfortunate to report that most 190 (62%) of that adolescents ages 15-19 years old are engaging in sexual intercourse against a minority of 116 (38%) who reported not to have ever engaged in sexual intercourse. This means that out of 10 adolescents aged 15-19 years, 6 are sexually active, figure 1.4

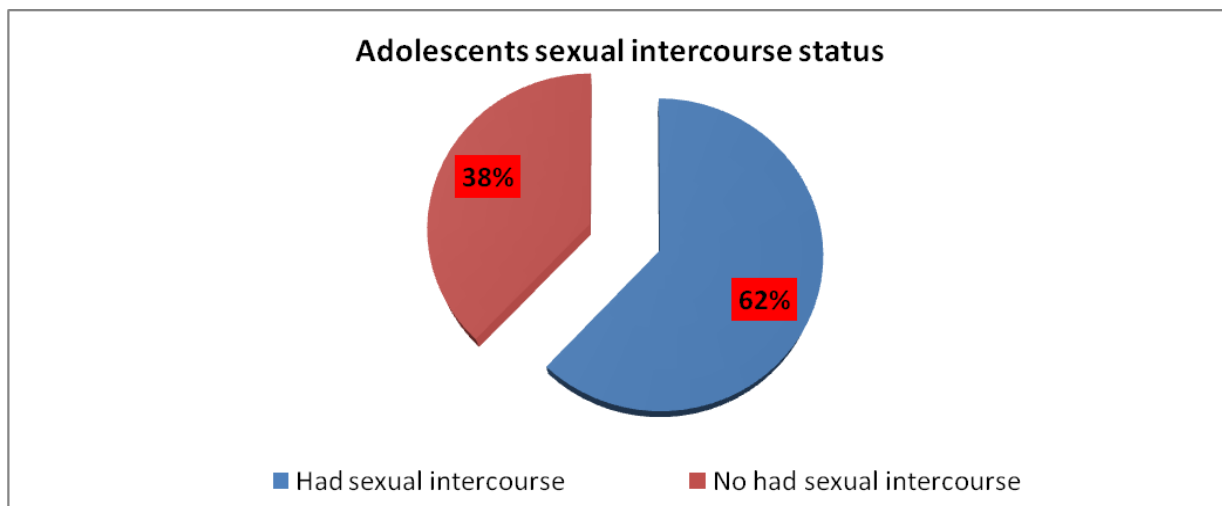


Figure 1.4: Adolescents sexual intercourse profile. (Source: Field data 2020)

4.4: Adolescent Parent Status and Sexual Behavior

4.4.1: Both Parent Alive Versus Sexual Debut

All the adolescents with different parent characteristics engaged in sexual intercourse at relatively earlier ages, with the youngest age being 10 years old. The mean age of those with

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both parents engaging in sexual intercourse was 16 years old while those with no both parents; their mean age was 15 years old. This implies that adolescents without both parents engage in sexual intercourse one year earlier those children with both parents. Findings records that there was no statistical association between the age at first sexual intercourse and parent status, (figure 1.5).

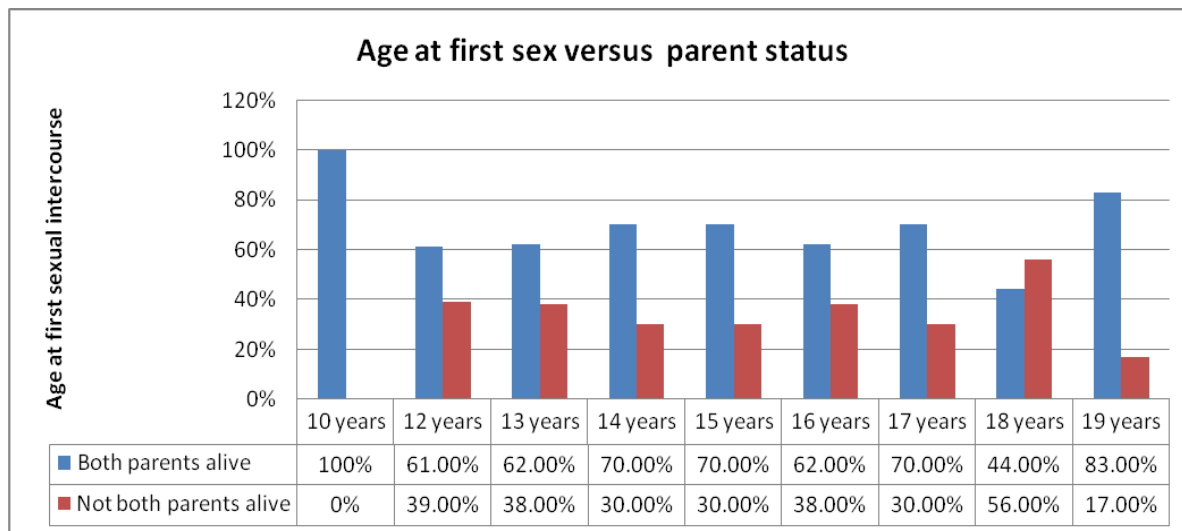


Figure: 1.5: Age at First Sexual Intercourse. (Source: Field Data 2020)

4.4.2: Both Parent Alive Versus Safe Sexual Intercourse

The study recorded a strong statistical association between adolescents whose fathers were still alive and practice of safe first sexual intercourse; compared to those adolescents whose fathers were not alive at a PV 0.021 (1) DF X^2 17 at 95% C.I. The level of education of a father had an influence on the type of relationship adolescents engaged in at PV 0.0021.

Table 1.1: The Influence and Association of Parent Characteristics and Adolescent Engaging in Sexual Intercourse

Parent Characteristic	Category	Sexually active	Not sexually active	DF	Chi-square	P-Value
		Fre. (%)	Fre. (%)			
Both parents alive N=306	Both parents	104 (34.34)	82 (26.78)	1	$X^2(1)$ =17.0137	0.021
	No both parents	86 (28.17)	36 (11.70)			

Source: (Field survey2020)

Figure 1.6: records that adolescents with single parent mother were more likely to have their first sexual intercourse compared to all other parental characteristics. Notably, adolescents who were total orphans were more likely to engage in unsafe first sexual intercourse than other adolescents with both or single parent.

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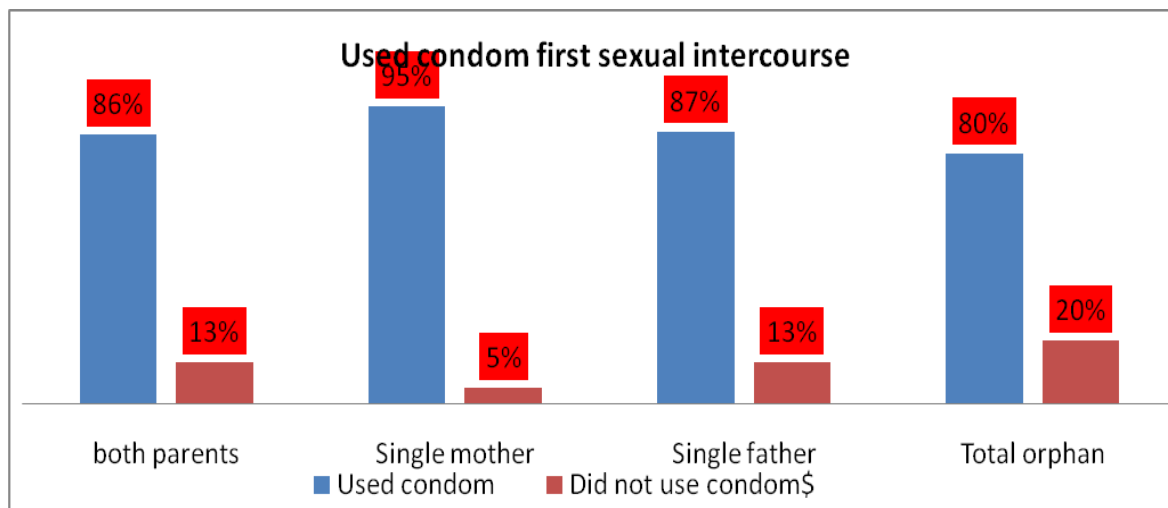


Figure 1.6: Condom Use at First Sexual Intercourse. (Source: Field Data 2020)

Table 1.2: There was no statistical significant association between parent characteristics and the practice of last safe sex, PV 0.0746, X^2 3, 2DF.

Table 1.2: The Influence and Association of Parent Characteristics and Adolescent Using a Condom

Parent Characteristic	Category	Condom use	No condom use	DF	Chi-square	P-Value
		Fre. (%)	Fre. (%)			
Both parents alive N=306	Both parents	52(27.21)	55(29.25)	2	$X^2(1)$ =3.251	0.0746
	No both parents	47(24.49)	36(19.05)			

Source: (Field Survey2020)

Follow up on whether adolescents had a safe last sexual intercourse, the level the percentage of those who practiced safe sex dropped in comparison with the first sexual intercourse rates among adolescents with both parents and single parent mother, while those of single parent father and total orphans remained unchanged. Nevertheless, the orphans were still last in practice of safe sex Figure 1.7

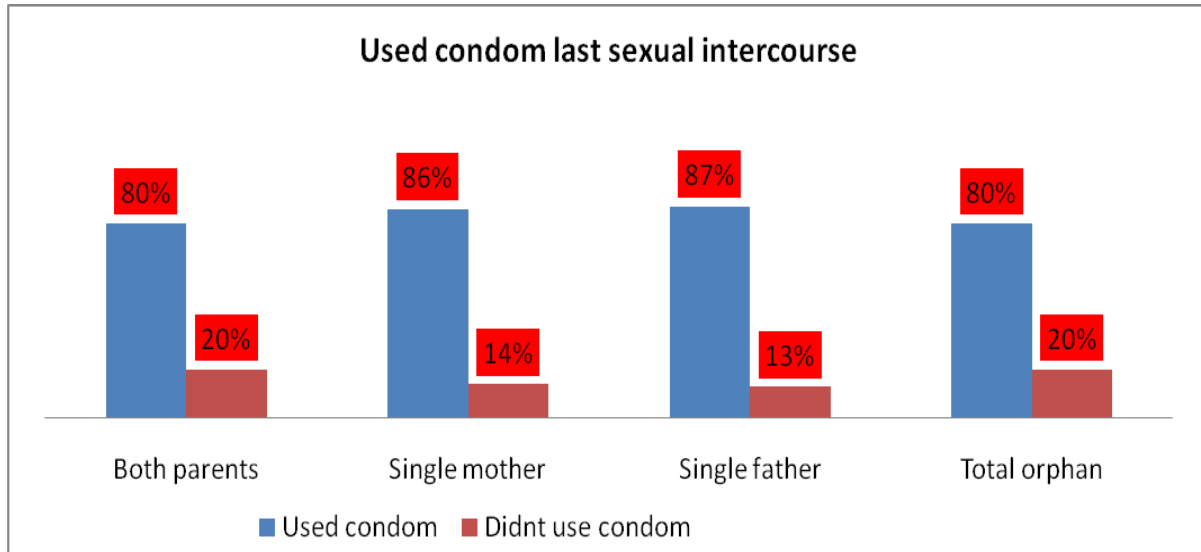


Figure 1.7: Condom Use at Last Sexual Intercourse. (Source: Field Data 2020)

4.4.3: Parent Characteristics Verses Multiple Sexual Partners

There was no statistical significant relationship between adolescents having multiple sexual partners and parent characteristics. Majority 126 (66%) of the adolescents had one sexual partner; with 22 (12%) of the adolescents reporting to having sexual intercourse with more than five sexual partners, PV 0.082, X^2 5, 3 DF, (figure 1.7). However, there was a significant association between number of sexual partners and mother occupation at PV 0.010 with the mothers' education level recording no statistical relationship with number of sexual partners at PV 0.439, 2 DF, X^2 3 (figure 1.8)

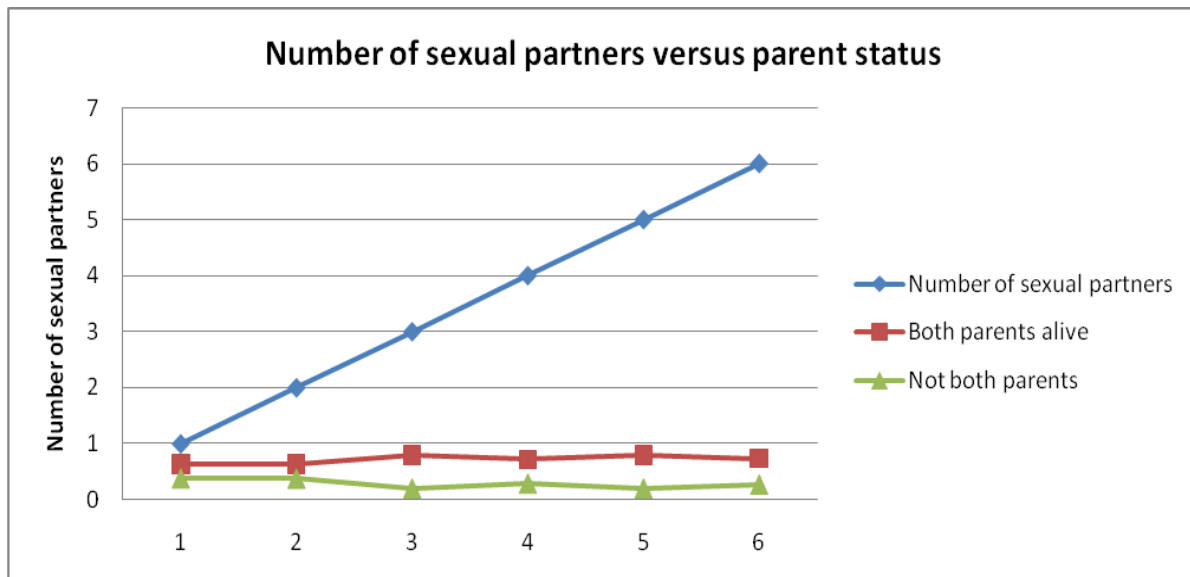


Figure: 1.8: Number Of Sexual Partners. (Source: Field Data 2020)

1.4.4.4: Parent Characteristics versus Planned Sexual Intercourse

Over 80 % of adolescents indulging in sexual intercourse is planned endeavor. The findings indicate that the adolescent who have parents are more likely to plan their sexual; intercourse compared to orphans. Nevertheless, adolescents living with single parent mothers plan more with only 1 in 10 sexual intercourse encounters being random. In comparison to other parent characteristics claiming 2 as random sexual intercourse encounters in every 10 that happen, (figure 1.9).

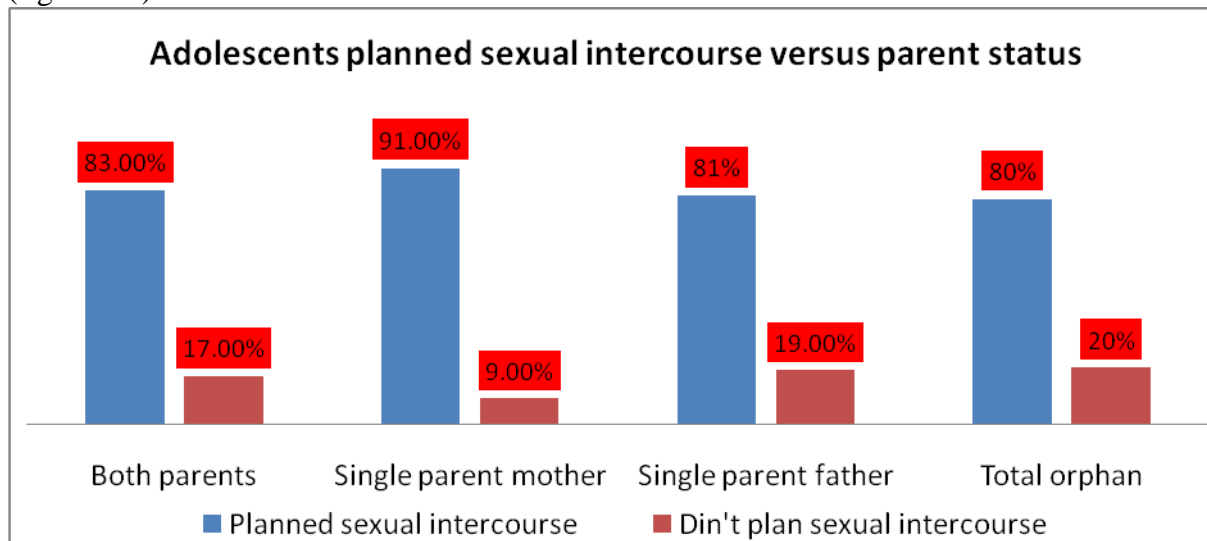


Figure1.9: Planned Sexual Intercourse. (Source: Field Data 2020)

1.4.4.3: Absentee Parents

4.4.3.1: Both Father and Mother

There was significant association between parent characteristics and adolescent i sexual behavior, $p = 0.032$, $X^2 = 15$, $1df$ at 95% C.I. Notably, 202 (66%) reported their father was still alive compared to 104 (34%) of the participants their father was not alive. This means that in every 10 adolescents, 3 of them their fathers are not alive. On the role of the father in adolescent sexual behavior, adolescents whose fathers were alive 187; 126(67.37%) reported to have ever had sexual intercourse, compared to whose fathers were not alive 117; 75 (64.10%) reported not to have ever had sexual intercourse, $PV = 0.500$; $X^2 = 7$, $2df$ (Figure 1.10)

The study reported relatively low absentee parent rates. Amongst the adolescents whose fathers were alive, 180 (89%) lived together with their fathers while 22 (11%) did not live with their fathers. This means that in every 10 adolescents, 1 does not live with their fathers. On follow up on the role of absentee father in adolescent sexual behavior, those who lived with their father 126; 111 (88.09%) had ever had sexual intercourse compared to 15 (11.19%) who reported not to have ever had sexual intercourse. In contrast, those who did not live together with their father 75; 15(90.66%) had ever had sexual intercourse compared to 7(9.3%) who reported not to have ever had sexual intercourse $X^2 = 1$; $PV = 0.0318$.

Findings on the role of the mother in adolescents' sexual behavior; the adolescents who reported that their mothers were alive, had better sexual behavior compared to those whose mothers were not alive. Only 11% of adolescents whose mothers were alive reported not to be living together. Similar findings were reported to those who were living together with their

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mothers compared to absentee mothers. There was a statistical significant association between absentee mothers and adolescent sexual behavior, PV 0.4931.

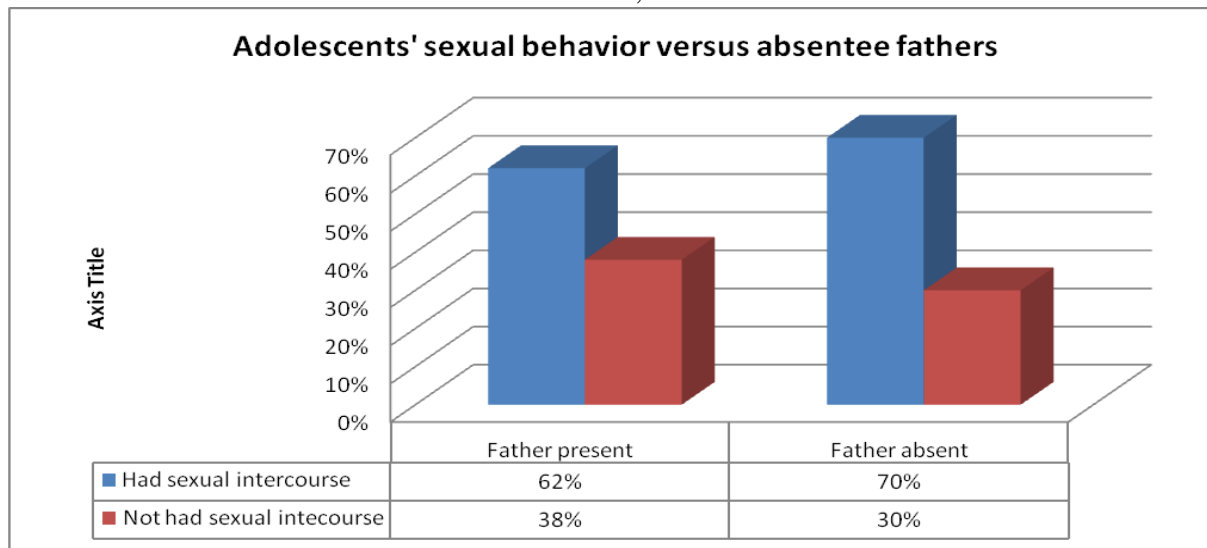


Figure 1.10: Sexual behavior against absentee parents. (Source: Field data 2020)

5.0: Discussion

The study documents that most (64%) indulge in sexual intercourse, with the youngest age being 10 years old. More so, these adolescents engage in risky sexual behaviors in essence that the over 30% have multiple sexual partners. Unfortunately, a considerable proportion does not have protected sexual intercourse which contributes greatly to their poor sexual outcomes. Notable, over 60% of households have both parents, which single parent mothers being more at 26% than single parent fathers at 3% while orphans claiming 8 5 of the participants. Findings have recorded significant association between parent characteristics and the adolescents' sexual behaviors. Absentee parents mimic the results of parents not alive in the adolescents' sexual behavior. Orphans have recorded the worst sexual behavior followed by single parent father.

6.0: Conclusion

The study found out that is a significant role parents play in the overall sexual behavior of adolescents. The study has managed to bring out the influence of various models of family

7.0: Recommendations

The adolescent sexual and reproductive health policy makers, strategists, program planners for health education and health promotion to inculcate the parent characteristics component in their framework for better outcome.

8.0 Competing interests

The authors declare that they have no competing interests.

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