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Influence of parent-teacher interactions on the initiation of sexual practices among teenagers: A qualitative study of Kawuku Secondary School, Mukono District, Uganda

Ssuka Jonathan Kizito ^A	Α	Lecturer, TEAM University and Project Officer, VODA, Uganda
Mbabazi Scovia G ^B	В	Lecturer, Faculty of Health Sciences, Uganda Martyrs' University
Omona Kizito ^c	С	Lecturer, Faculty of Health Sciences, Uganda Martyrs' University

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Abstract

Introduction: Several studies recommend a multisectoral approach to promote positive sexual behaviors among young people. Minimal literature exists on the influence of parent-teacher interaction on sexual behaviors of young people.

Objective: To examine the influence of parent-teacher interaction on initiation of sexual practices among teenagers in Kawuku Secondary School (S.S.), Mukono District, Uganda

Methods: Qualitative phenomenological design was used. The respondents were: 12 parents who had children in the school, six teachers who had been in the school for at least three years and 18 teenagers 13-19 years of age from the school. In-depth structured interview and focus group discussions (FGDs) were held. We looked at whether parents interacted with teachers on matters regarding their children's sexual behaviors, the frequency and content discussed and how this impacted on the sexual decisions and practices of young people concerned.

Results: Interaction facilitated the flow of protective information and guidance that delayed sexual debut and improved the sexual behaviors among the teenagers. Most of the teenagers whose parents were in close interaction with their teachers attributed their present sexual behaviors to the raised consciousness and continuous monitoring and communication from either party. A number of barriers hindered effectiveness of parent-teacher interaction. These included lack of appropriate sexual information among parents, parents' fear to discuss sexual experiences with young people, poor parenting, limited confidentiality among teachers and so on.

Conclusion: When parents have the right sexual information and interact well with teachers on matters regarding sexual behaviors of their children, positive sexual behaviors and delayed sexual debut among teenagers is facilitated.

1. Introduction

1.1 Background of the study

Early sexual initiation is defined differently by various scholars. For instance, Durowade et al. (2017) defined it as having had first sexual intercourse at or before the age of 14 years by teenagers. The problem of early sexual debut remains a serious recurring public health issue with negative psychosocial and health outcomes. The age at which adolescents initiate their first sexual debut is increasingly becoming lower and varies from place to place among different individuals (Durowade et al., 2017).

The average age of first sexual debut is said to be 16 years and this young age makes it a serious public health issue (WHO, 2018). The World Health Organization (2018) estimated that over 16 million teenagers are sexually active and that many are affected by teenage pregnancy and Sexually Transmitted Diseases (STDs). This is partly attributable to the lack of proper sexual information and guidance from caretakers to young people.

In Africa, it is indicated that 45% of women aged 20-24 years reported to have become pregnant for the first time by the age of 18 years. Of these, areas affected by wars experience the biggest proportion of girls with unwanted teenage pregnancy. This is attributable to the lack of sufficient and correct information on reproductive health, sexual harassment practices inflicted on young girls and the vicious cycle of poverty. Poverty, in particular, has left many young people fending for survival, putting them at risk of indulging in risky sexual practices (Economic Policy Research Centre, 2020).

Research shows that in East Africa, almost 10% of young women give birth by the age of 16 years (Neal et al., 2015). Reports from Uganda indicate that almost half of women aged 20–49 married before they were 18 years which is evidence for early sexual initiation. It is further stated that rural girls fare worse than their urban counterparts in many ways. For example, rural adolescent girls are more likely to initiate their sexual debut during their teenage years and are also more likely to be victims of teenage pregnancy. Uganda reports the highest proportion of women giving birth before the age of 20 (63%) (UBOS, 2011, 2012, 2014; ICF International, 2012).

It is indicated by several scholars that by the time adolescents complete high school, 60% of them have had sexual intercourse (Renzaho et al., 2017). This is attributable, among many other factors, to lack of appropriate sexual information and guidance, media exposure and rampant poverty (Baumgartner et al., 2009; Acharya et al., 2010; Durowade et al., 2017). This exposes young people to greater risks of Sexually Transmitted Diseases and Sexually Transmitted Infections (STD/STI), teenage pregnancy and related consequences.

Communication about sexuality issues with young people by their caretakers is regarded as very crucial for improving their knowledge, attitudes and decisions related to sexual activities. It is indicated by several scholars that regular sexual communication with young people sharpens their decision-making capacity and improves their sexual negotiation skills which lessens risks of engaging in dangerous sexual behaviors (Bastien et al., 2011). Several studies confirmed that regular communication with young people by their caretakers on sexuality issues allows them to delay sexual intercourse and improve on the general sexual behaviors. These positive behaviors include use of condoms, reducing the number of sexual partners and use of contraceptives as a means of preventing unwanted pregnancies and elimination of contraction of STDs especially among sexually active young people (Namisi et al., 2009).

Despite of these studies on sexuality communication with young people, little, if any, is documented on the influence of the role that can be jointly played by both parents and teachers as one strategy for continuous guidance to young people on matters related to their sexuality. Several studies suggested a stakeholder approach to the problems of early sexual debut and teenage pregnancy to include parents, teachers, nurses and other stakeholders who have the greatest influence and spend the most time with the teenagers (Economic Policy Research Centre, 2020). The fact that teachers spend almost more time with these young people as compared to their parents creates a need for joint effort between parents and teachers working together in molding the sexual behaviors of the teenagers as they grow. There was a need to understand how this interaction influences the initiation of sexual practices and the general sexual behaviors of teenagers.

The aim of this study therefore, was to examine how parent-teacher interaction influences the initiation of sexual practices among teenagers in Kawuku S.S and how this interaction can be adequately utilized to delay and promote good sexual behaviors among teenagers in Kawuku S.S, Mukono District, Uganda. Based on these findings, strategies for promoting the utilization of this interaction were to be identified and the gaps for future research are identified.

1.2 Secondary objective

The purpose of the study was to examine the influence of parent-teacher interaction on initiation of sexual practices among teenagers at Kawuku S.S.

1.3 Specific objectives

The study specifically sought:

- To find out the perception of teenagers on parent-teacher interactions related to their sexual life in Kawuku S.S.
- To establish the contribution of parent-teacher interactions on initiation of sexual practice among teenagers, in Kawuku S.S.
- To examine the influence of parent-teacher interactions on the sexual behaviors of teenagers in Kawuku S.S.

2. Literature review

2.1 Information - motivation - behavioral

To examine teenagers' vulnerability to risky sexual behaviors, operationalized here as early sexual initiation, the researchers adopted two theoretical models: The Information-Motivation-Behavioral Skills (IMB) model developed by Fisher and Fisher (1992). This model has demonstrated effectiveness in predicting risk behaviors, including sexual initiation, and has been particularly useful in designing HIV intervention programs. The model specifies that individuals will engage in self-protective behaviors, such as delaying sexual debut, when they know that such behaviors reduce consequences of sexual activity such as pregnancy and risk of infection. They become motivated to engage in the behaviors and have the requisite skills and self-efficacy to do so (Fisher & Fisher, 1992; Sunny et al., 2019).

Several studies (Bastien et al., 2011) showed that school environment, community norms and participation in community festivals are positively or negatively associated with risky sexual behaviors; the majority of these studies found that school-based programs, and the resources made available to students within schools, reduced the likelihood of early sexual debut and other risky sexual behaviors. In this study, the parent-teacher interaction as a school-community based program has been studied to highlight how it influences the teenagers' sexual initiation stage.

Many of the available studies have suggested a stakeholder approach in promoting positive sexual behaviors to include parents, teachers, nurses and other stakeholders who have the greatest influence and spend the most time with the teenagers (Economic Policy Research Centre, 2020). The study emphasized the importance of various stakeholders like the community, the school, the health facilities and the parents working hand in hand to help the young people addressing their day to day sexual problems that put them at risk of engaging into early sexual practices (Economic Policy Research Centre, 2020).

2.2 Parent-teacher interaction

Parent-teacher interaction in this case was used to mean communication between parents and teachers on sexual matters of the young people under their control. Other scholars define parent-teacher interaction as a way to engage parents in developing interaction between family, school and community. It is a channel to raise parental awareness regarding benefits of parental engagement in educational process of children. In views of Akhter (2016), parental engagement consists of collaborations between families, schools and communities, raising parental awareness of the benefits of involving them in their children's education, and providing them with the skills to do so. Parents-teacher interaction helps parents in defining the boundaries and functions of school, community and family in educational process of children (Tabong et al., 2018). Contrary to that, Anderson (2017) defined this interaction as a way to create conditions in which children learn more effectively and they take education beyond the school boundaries.

Parents and teachers interact because of their shared responsibility for the welfare of the children in their care. Research indicates that teachers value parental involvement in their students' education. There is also evidence that parents place a great deal of trust in their children's teachers. This interaction, with significant influence on the learning outcomes of students, occurs within a complex set of legal frameworks and cultural contexts (Anderson, 2017). This study therefore, aims at using this interaction on molding the sexual behaviors of teenagers as a way of creating an environment to delay sexual initiation.

2.3 Early sexual initiation

Although most people in contemporary developed nations experience sexual initiation sometime during adolescence, the relative timing during adolescence varies from country to country. In the United States, 40.8% of tenth-graders (usually 15-years-old) reported having had sexual intercourse in 2001. Early sexual initiation is taken to be normal in some communities, especially in some states of the U.S. (Nield et al., 2013).

Early sexual debut is defined by different scholars in various ways. However, most definitions define it as having had first sexual intercourse at or before age 14 years. Early sexual debut exposes young people to risks such as HIV, other STIs and to teenage pregnancy (Durowade et al., 2017).

How one defines 'early' sexual intercourse, however, is not clear. Whether "early" debut should be defined according to the statistical distribution of age at first intercourse within the country of residence, or whether 'early' should be defined by a developmentally driven health standard that reflects adverse consequences to the individual stemming from physical and/or emotional immaturity, has not been adequately examined in the literature (Economic Policy Research Centre, 2020; Motoyama et al., 2016; Mugumya & Omona, 2020).

In a study whose aim was to explore the association between early sex initiation and subsequent unsafe sexual behaviors and risks among Chinese female undergraduates (Li et al., 2015), out of 4,769 participants, 863 (18.1%) reported having had sexual intercourse. The mean age of sexual debut was 19.3 (± 1.7) years. Females initiating sex earlier were more likely to have first sex with men who were not their "boyfriends" and less likely to take contraception, to use a condom at first encounter or to use contraception consistently in the past year (Li et al., 2015).

In the U.S., sexual debut before age 16 is generally considered early, based on both the statistical distribution and positive associations with sexually transmitted infections, unintentional pregnancy, and psychological and social problems (Langille, 2007). This view is similar to those of Eaton et al. (2008) and Cavazos-Rehg et al. (2009). The World Health Organization (WHO, 2018) defined early sexual intercourse as intercourse initiated before the age of 15 years. In this study, the investigators also defined early sexual debut as debut before the age of 15 years.

2.4 Perceptions on the parent-teacher interaction

In a study where researchers used in-depth interviews among young people in South Africa, it was found that most of adolescents had positive attitudes to parent-adolescent communication. Respondents wanted parents to talk about sex, but discussions with parents on sexual behavior topics were rare (Muhwezi et al., 2015; Mugumya & Omona, 2020).

One of the factors associated with sexuality communication relates to timing and parental perceptions that their children have already had their sexual debut. One study in Tanzania found that parents tended to wait until their daughters were in secondary school to initiate discussions about sexuality, due to the assumption and expectation that those still in primary school were not sexually active (Maly et al., 2017). Consequently, it was reported that there is increased secrecy in sexual relationships and also increased difficulty in seeking and accessing sexual information and contraceptives for fear of being found to be sexually active. A study conducted among women in Nigeria reported that 41% of respondents believed sexuality education should commence between the ages of 6-10 years, whilst 32% favored starting discussions with children between the ages of 11-15 years (Acharya et al., 2018). Others, however, based the decision to initiate a discussion related to sexuality on observations of changes in behavior which are perceived to indicate the onset of sexual activity (Wanje et al., 2017).

Similarly, a study of Nigerian parents found that parents preferred to be the initiators and dominators of discussions and perceived that if their child did so, it meant they were sexually active or planning to be. Parents in this study reportedly used imprecise terminology and tended to employ warnings and threats about sexuality rather than engage their child in dialogue (Baumgartner et al., 2009). In rural South Africa, similar findings were reported concerning the style of communication which tended to be perceived as being judgmental, proscriptive, and negative towards young people's sexuality (Boonstra et al., 2011). According to the respondents in this study, it was not the act of discussing sexuality with parents that young people were opposed to per se; rather, it was the style that was focused on and identified as a barrier to discussion.

In rural South Africa, similar findings were reported concerning the style of communication which tended to be perceived as being judgmental, proscriptive, and negative towards young people's sexuality (Boonstra et al., 2011). According to the respondents in this study, it was not the act of discussing sexuality with parents that young people were opposed to per se; rather, it was the style that was focused on and identified as a barrier to discussion.

In terms of preferences, findings from studies found that young people prefer sexuality communication to take place with parents of the same sex. The South Africa-Tanzania (SATZ) study conducted among young people aged 11-17 years reported that overall, 44% of participants preferred to communicate with mothers about sexuality, while 15% preferred fathers (Breuner, 2016). Mothers were the preferred communication partner by the majority of female adolescents in both Tanzania and South Africa. In Cape Town,

31% preferred discussing with mothers, and 22% stated a preference for fathers, while in the other two sites, a greater proportion of males preferred discussing with fathers in comparison to mothers (47% and 27% in Dar es Salaam and Mankweng, respectively). Another study in Tanzania found that among in- and out-of-school males, 11% and 10% respectively selected fathers as a preferred partner for communicating about sexuality (Wamoy et al., 2010). Among in- and out-of-school females, the study found that mothers were the first choice by both groups, with 44% and 37% of in- and out-of-school females reporting mothers as the preferred sexuality communicator, respectively. From a parental perspective, a study of Nigerian parents found that they also preferred same sex discussions with their children (Crichton et al., 2012).

In spite of these findings which tend to favor mothers as the preferred sexuality communicators, qualitative findings suggest that mothers are not always perceived in a positive light. For instance, focus group findings from young people in Ghana aged 14-17 years classified mothers into four categories: those who are approachable (and in the minority), those who tended to brush off questions and suggest that such discussions should take place with someone else (such as another family member), those who reacted by shouting when sexuality discussions are initiated, and those who seemed to have difficulty maintaining confidentiality and were subsequently labeled 'gossipers' (Donaldson et al., 2013). In these focus group discussions, it was also found that fathers were often labeled as 'tyrants' who lacked listening skills and were prone to threaten or take action against their children's friends of the opposite sex.

Studies also investigated young people's perspectives on barriers to sexuality communication with their parents. A number of studies identified parental lack of knowledge of sexual and reproductive health as a barrier to communicating with their children. For instance, one study in Nigeria found that 64% of secondary school students perceived their mothers as lacking sufficient knowledge, while 87% thought fathers lacked knowledge (Honig et al., 2012). In identifying other barriers to communication, this study found that 62.3% thought that their parents are too preoccupied to talk about sex, while 59% believed their parents would argue if they were to talk about sex. In addition, 30% thought their mother would think they were interested in experimenting with sex if they were to talk about it, whilst 69% believed their father would get this impression.

2.5 Contribution of parent-teacher interactions on initiation of sexual practices among teenagers

A number of studies found out that communication about sexuality between parents or caregivers and offspring is a strong protective factor for a range of sexual behaviors, including a delayed sexual debut, particular for females (Hindine & Fatusi, 2009). Studies focusing on parent-child communication have focused on a range of processes that may influence effectiveness in decreasing sexual risk behavior among young people such as frequency of discussions and perceptions of quality and comfort of communication (Hoffman et al., 2006; Honig et al., 2012).

The timing of communication is also of importance and is most likely to be effective prior to sexual debut to reinforce protective factors but may also facilitate behavior change in those already sexually active (Johnson-Motoyama, 2016). The content of the message and how it is transmitted have also been identified as being particularly important (Magowe et al., 2017). Some studies have investigated the perceptions of young people or parents separately, whilst other studies have sought to examine differences in selfreports (Boonstra et al., 2011; Breuner et al., 2016; Crichton et al., 2012). Historically, the taboo nature of sexuality discussions between adults, in particular parents, and young people in sub-Saharan Africa has been well documented (Donaldson et al., 2013; Hindine & Fatusi, 2009). In several countries in sub-Saharan Africa, direct parental involvement in the sexual socialization of children in the past has been described as minimal. Rather, the extended family, including grandparents and aunts, were instrumental for imparting the necessary knowledge and skills relevant for sexual relationships (Hoffman et al., 2006). With increased urbanization and social change processes, however, the family unit and consequently adolescent socialization may be impacted.

Kim et al. (2009) examined factors that promote parentchild discussions about sex topics among a sample of 1,066 dyads of African-American mothers and their 9 to 12-yearold children who participated completing computeradministered surveys. After controlling for all other covariates, mothers' sexual communication responsiveness (i.e., knowledge, comfort, skills, and confidence) was the most consistent predictor of discussions. Mothers with higher responsiveness had significantly increased odds of discussions about abstinence, puberty, and reproduction, based on both mother and child reports. In addition, a child's age, pubertal development, readiness to learn about sex, and being female were positively associated with an increase in the odds of discussions in most models. Findings indicate that encouraging parents to talk with their children early may not be sufficient to promote parent-child sex discussions. Parents also need the knowledge, comfort, skills, and confidence to communicate effectively and keep them from avoiding these often difficult and emotional conversations with their children.

2.6 Influence of parent-teacher interaction on teenagers' sexual behavior after initiation

Adolescents who have a positive relationship with their parents are less likely to initiate sex early (Johnson-Motoyama et al., 2016; Magowe et al., 2017). There is growing evidence showing that various parenting dimensions like connectedness, love, material support, behavioral control, monitoring, and parent-adolescent communication are positively associated with reduced levels of risk-taking among adolescents (Bastien et al., 2011).

The 10–14 age range is a time of change, vulnerability and opportunity for adolescents to learn and develop skills to help them build patterns of health-maintaining behaviors. It is a time when adolescent can best be protected from potential risks by parents or caregivers who are closely

involved in their lives (WHO, 2018).

Literature from Uganda on the role of parent-adolescent communication in promoting healthy sexual behavior among adolescents is scarce (Economic Policy Research Centre, 2020). Other than some attempts of 'Ssenga' (biological sisters of fathers) and 'Kojja' (biological brothers of fathers) (UBOS, 2001), the little information available suggests that parents are ill-prepared for this task (Kibombo et al., 2008). Like elsewhere in sub-Saharan Africa (SSA), parental discussions of sexuality issues with their children are a taboo (Muhwezi et al., 2015; Miller et al., 2016).

This task is often relegated to other family members, notably paternal aunties in Buganda (Kibombo et al., 2008). In talking about sexuality, parents are often known to communicate with their children through arousal of fear. Parents in Uganda are known to be strict, particularly with girls, which prompts many to hide their intimate or sexual relationships, thereby exacerbating their vulnerability (Muhwezi et al., 2015; Mugumya & Omona, 2020). Knowledge about HIV transmission and prevention, pregnancy prevention and condoms seem to be very low among young adolescents (UBOS, 2011).

Further still, several researchers have begun to investigate parents' views on the media's role in influencing adolescent sexual behaviors (Collins et al., 2011) and the importance of both parents and the school system working with adolescents to delay sexual activity (National Academies of Sciences, Engineering, and Medicine, 2016).

In contrast, Dessiel, Berhane and Worku (2015) expressed that parents should be the primary source of sex education for their children, but they acknowledged that many parents have difficulty fulfilling that role due to both knowledge gap and cultural barriers which calls for a need to work hand in hand with teachers who spend most of the time with the teenagers. Such an approach is supported by ecological theorists who argue that to change the attitudes and behavior of adolescents successfully, one must consider not only the individual as the basis for change but also the various systems to which the child may be exposed.

3. Methodology

This was a purely qualitative phenomenological study design where in-depth structured interviews and focus group discussions (FGDs) were used. It was conducted among 36 participants, including: 12 parents who had children in the studied school; six teachers who had been in Kawuku Secondary School for at least three years and 18 teenagers between 13 to 19 years of age from that rural secondary school. Two focus group discussions were conducted among teenagers in groups of nine making a total of 18 altogether. A group of six parents who were almost in the same locality were involved in a focus group discussion whereas six out of 12 parents were individually interviewed. Six of the 18 teenagers who participated in the FGDs were interviewed on an individual basis before the FGD to obtain a deeper understanding of their perceptions about the phenomena under study.

Ethical considerations are very important in such research and were taken into account through obtaining informed consent from respondents and the maintenance of confidentiality.

4.0 Results and discussion

4.1 Perception of teenagers on parent-teacher interactions

Although some teenagers had issues with limited confidentiality and deprivation of their privacy by this interaction on matters related to their sexual health, the majority acknowledged the importance of this approach. They stressed that it provides them with appropriate avenues to get right information, support and guidance from trustworthy sources.

"I would prefer each one working on their own either at home for parents or teachers at school. Because parents at times reveal our private life to teachers who keep on talking about us! Whenever you make a mistake, the teacher relates it to what he/she knows about you... Sometimes, they get wrong information about us which we cannot refute. Our parents think whatever the teachers say is right yet teachers also sometimes get wrong information about us." [Participant 7, a female teenager aged 15].

"I did not take it bad because I knew that my parents have the responsibility to monitor my behavior and the teacher is also responsible for my future. So when I learnt that my parent and teacher interact and discuss about me... I just understood that now, at both home and school there is someone watching me. This has helped me to be careful and to modify my sexual behaviors." [Participant 9, a male teenager aged 18]

This is in the same lens as Honig's (2012), who argued that children need 'askable' adults in their lives from an early age and also in line with the guidelines from the World Health Organisation on the proper upbringing of children (WHO, 2018). Therefore, teenagers appreciate the need for parents and teachers working together to promote their (teenagers') delayed sexual debut and general sexual behaviors (Dessiel et al., 2015). In yet another study (Mugumya & Omona, 2020), it was found that parents were 1.56 times more likely to be actively involved in talking to their adolescents about sexuality education compared to other people (APR=1.56; CI= 1.22-1.99; p-value < 0.001). Having both parents made it 1.22 times more likely to equally talk to their children about sexuality and reproductive health (CPR=1.22; CI=1.07-1.40; p-value = 0.004). Mothers were 1.64 times more likely to be involved in teaching their children on this subject matter than fathers (APR=1.64; CI=1.15-2.34; p-value 0.006) (Mugumya & Omona, 2020).

4.2 Contribution of parent-teacher interactions to the initiation of sexual practices among teenagers

While the interaction was not common to all participants, the study revealed that those teenagers, whose parents and teachers had been in close contact and who were watching them, claimed to have changed their sexual behaviors. Some teenagers attributed their sexual status on the communication they received either from both their parents and teachers or one of them. This interaction was mentioned for increasing availability of information, guidance and support to teenagers and a sense of being watched as a teenager.

"I think it has helped me to delay sexual practice because of their advice and warnings to me on how to control my sexual desires and keeping good friends." [Participant 14, a female teenager aged 15]

"Personally, I was very stubborn and my parents alone had failed to calm me down despite the punishments. Later my father asked the head-teacher to help them with me. I felt bad about it, but this later helped me because even up to now I have never had sex because of what they both told me. I was even selected and trained as a school counselor to help my fellow teenagers at school" [Participant 1, a male teenager aged 17].

This is consistent with earlier studies that emphasize parent involvement in preventing risky sexual behaviors among teenagers (Silk & Romero, 2014; Muwhezi et al., 2015).

4.3 Influence of parent-teacher interactions on the sexual behaviors of teenagers

The findings revealed that teenagers' sexual decisions are greatly influenced by regular communication from different guardians like parents and teachers. This was indicated by teenagers that after knowing they are being watched both at home and at the school, many became more considerate sexually.

"I regret losing my virginity at a tender age... I wish my parents had talked to me before initiation it would help me to delay. However, the regular guidance I obtain from my teachers and parents has helped me to change my sexual behaviors. I'm able even to encourage my fellow girls to keep their virginity." [Participant 3, a female aged 17]

"I'm still virgin... I attribute this to the guidance I receive from both my parents and sometimes from teachers. ... my parents are in close contact with my teachers. The parents fear discussing some issues with me but teachers do so." [Participant 18, a female teenager aged 16]

This is in line with what other research findings such as the ones by Mohajan (2018), Silk and Romero (2014), and Wamoy et al. (2010). They explained that parent's conversations with children regarding sex communication serves as a primary factor in children's understanding of sex, delaying of sexual debut, and a reduced risk that children will engage in risky sexual behavior.

This study found that there is need for training of parents and teachers on sex-related aspects of teenagers to enhance their capacity in facilitating awareness rising among teenagers about the risk factors for, and implications of early sexual initiation.

"I'm not aware of now that there is any programme to discuss the sexual behaviors of our children at school. But I think it should be a good practice if it is embraced by the school for teachers to work with parents. However, we parents need more training on sexual information and how to talk to young people." [Participant 17, a Parent]

This is in line with Kassahun et al.'s (2019) findings, that raising awareness among students on the risk factors associated with early sexual debut through teachers, parents, religious leaders and other stakeholders is important in promoting delayed sexual initiation and associated factors among preparatory and High School students. A respondent asserted:

"I think there should be a strong relationship between our parents and teachers for this interaction to be effective." [Participant 3, a female teenager]

5.0 Conclusion

The scope of developing sexuality education during a child's primary school years remains a relative challenge for both parents and teachers. Sexuality educations have limited legitimacy in many communities and thus can meet resistance from teachers tasked with its implementation. In order to enhance ownership of sexuality education, local concerns of stakeholders about the contents of the curriculum and the parent-teacher roles must be taken into consideration. Not addressing these challenges may continue to undermine sexuality education by both parents and teachers.

This study confirmed that when parents have the right sexual information and interact with teachers on sex-related matters of their children, it allows teenagers to obtain the necessary information from trusted sources. This promotes positive sexual behaviors and delays sexual debut among teenagers. The study, however, revealed a knowledge gap and a need for training of both parents and teachers on how to communicate with young people on sexuality-related matters. The findings, therefore, provide a basis upon which future studies and research programs can begin to draw on how this interaction can best be utilized in promoting good sexual behaviors of young people.

Conflict of interest

The authors declare no conflict of interest whatsoever.

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