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SEX EDUCATION CONTRAVERSRY:
VIEWS OF YOUTH AND TEACHERS IN KENYA

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ABSTRACT

This study reports data collected from 1,361 students in all parts of Kenya between the ages of 15 and 25 years. Information is also presented from another study of 237 teachers. The investigation was aimed at soliciting the opinions of students and teachers on the subject of sex education: what it means, who should be taught and who should teach the subject. The related problems of pregnancy and abortion among school girls and venereal disease among students are also discussed with comparative data from other countries.

It is found that both groups of respondents believe that young people urgently need information about sex. The students feel that they are not receiving adequate information from their parents or other family members, so that sex education should be provided by the schools. However, not all teachers consider themselves competent to teach sex education.

Education planners and other responsible persons in Kenya need to rethink how this important subject can best be taught to the youth of the country.

SEX EDUCATION CONTRAVERSY:
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IN KENYA

INTRODUCTION

Literature supporting or opposing sex education is plentiful in many countries of the world, with arguments for and against based on medical, religious or cultural grounds. In Kenya, however, there has been little public discussion on the subject, and this has been highly emotional and generally without facts. Most of this debate has been limited to unclear coverage in the press and letters to the editor.

Questions have been raised as to whether sex education is necessary and to whom it should be directed. What should be the content of sex education? Who should teach what to whom: should parents teach their children, teachers their students or specially trained teachers teach special classes, and then at what level? These are important questions which must be seriously considered in any country which is planning to introduce a sex education programme.

Yet, although in many countries this debate has been fuller, and perhaps more sober and detached, than in Kenya, the young people who are supposed to be the target group for sex education programmes have very rarely been consulted. In traditional African societies, children and young people were supposed to be taught certain values but not to participate in their formulation. (22, vol.3) In fact some people in Kenya seem to expect young people to be ignorant about sexual matters and not to even have any opinions on the subject.

To help correct this situation, young Kenyans between the ages of 13 and 25 were interviewed for this study using a questionnaire. Ideas and opinions concerning sex education were solicited from, 1,361 young Kenyans in 8 schools, and a separate questionnaire on the same subject was administered to 237 teachers.¹

1. For a complete description of the methodology used, see Gachuhi (10), pp. 3 - 5.

THE PROBLEM OF DEFINITION: WHAT DOES SEX EDUCATION MEAN?

The literature on sex education has failed to come up with a clear definition of the term. Most sex educators seem to define the subject quite broadly with their emphases depending on their own social and cultural backgrounds and the needs which they consider most acute. As an example of how broadly sex education is viewed by most writers on the subject, Isadore Rubin states:-

Sex education is NOT merely a unit in reproduction, teaching how babies are conceived and born. It has a far richer scope and goal: to help the youngster incorporate sex most meaningfully into his present life, to provide him with some basic understanding of virtually every aspect of sex by the time he reaches full maturity, to help him to recognise the existence of different sex patterns so that he can interact harmoniously with those whose sex norms differ from his own, and to teach him critical judgement in dealing with ethical controversy.... The aim of sex education should be to indicate the immense possibilities of human fulfilment that sexuality offers, rather than primarily to control and to suppress sex expressions. (30,p17)

Donald Taylor has defined sex education as:-

Acts and process which develop and cultivate human sexuality as it relates to the sum total of one's feelings and behaviour, not only as sexual beings, but as male and female.... The constituent parts of sexuality include (1) the human body, (2) feelings, (3) ego, (4) conscience and (5) self-image. Their development and functioning are the proper concern of parents, sex educators, clinicians and researchers. Their cultivation takes place in the context of a relationship. (35,p.4)

Dorothy Dallas has complained about the vagueness of the concept of sex education:-

Sex education is a wide, all-embracing and all but meaningless term; various synonyms have been coined and employed, but have failed to replace it in common usage. Its interpretation has become sharply polarised on the one hand, associated with anatomical diagrams and bold explanations of physiological processes, while on the other, the vaguer realms of 'personal relationship' are explored.... Close examination of objectives in sex education /are called for/; since we are irrevocably stuck with the term, it needs clarification and an extension of its meaning, especially as an interdisciplinary exercise. (4,p.9)

How sex education is defined and what is taught under the heading of sex education is limited by the concepts and the values of the society in which consideration of the subject takes place. As Rubin writes, "no educator can undertake to change the moral climate of his community, or to cut down the rate of illegitimacy or venereal disease". (30,p.17)

Our consideration of sex education is further limited by the very incomplete state of knowledge on the subject and a general feeling of insecurity in dealing with it. However, the formulation of sex education programmes must be approached seriously and some working definition of the subject be formulated. This author views sex education as a process for assisting people, both old and young, to know and appreciate their own sexuality and to see the role which sexuality plays in the development of the individual, the community and the society as a whole.

How Young People Understand Sex Education

The young people who participated in this survey were asked what they understood by the term sex education, and their responses were correlated with their level of education, their age and their sex. The respondents either gave no answer or expressed different concepts of sex education which reflected important valid aspects of the subject and would be included in an actual sex education programme. Five respondents were an exception to this. They answered that sex education was "teaching children not to play with their private parts", but they do not constitute a statistically significant portion of the total sample.

Except for this insignificant group, the respondents could be broken down between those who showed some valid understanding of sex education and those who either did not understand the concept or for some other reason failed to reply at all. Of the total sample, 76 per cent had at least some idea of what should be taught in a sex education course and only 24 per cent apparently did not know what the term meant. The responses of 52 per cent of the young people were grouped under the heading "Give young people knowledge of sex and how to manage it". These results are shown in Table 1.

Table 1. How the total sample of young people understand sex education.

Response	Number	Percentage
Give young people knowledge of sex and how to manage it	706	52%
Internal organs and their functions, understanding sexual organs, etc.	119	9%
Mature understanding between the sexes, reproduction	64	5%
Knowledge of how to take care of families, good morals, good family life	24	2%
Helping nature, formation of child at conception	11	1%

Response	Number	Percentage
Birth control, disease prevention	40	3%
Advantages and disadvantages of sex, how to conduct sex to achieve happiness	46	3%
Sociological understanding of sex	15	1%
Teach children not to play with their private parts	5	0%
No reply	331	24%
Total	1,361	100%

Years of education seems to be positively correlated with a valid concept of sex education, as shown in Table 2. Of those with nine years or less education, 32 per cent did not give any definition of sex education; while of those with ten years or more education, only 22 per cent gave no response.

Table 2. Understanding of sex education by years of schooling.

Response	Years of Education					
	9 years or less		10 - 12		13+	
	No.	%	No.	%	No.	%
Give young people knowledge of sex and how to manage it	159	47%	362	53%	185	55%
Internal organs and their functions, understanding sexual organs, etc.	28	8%	61	9%	30	9%
Mature understanding between the sexes, reproduction	16	5%	28	4%	20	6%
Knowledge of how to take care of families, good morals, good family life	6	2%	14	2%	4	1%
Helping nature, formation of child at conception	2	1%	6	1%	3	1%
Birth control, disease prevention	11	3%	17	2%	12	4%
Advantages and disadvantages of sex, how to conduct sex to achieve happiness	7	2%	29	4%	10	3%
Sociological understanding of sex	3	1%	11	2%	1	0%

Response	Years of Education					
	9 years or less		10 - 12		13+	
	No.	%	No.	%	No.	%
Teach children not to play with their private parts	0	0%	5	1%	0	0%
No reply	108	32%	148	22%	75	22%
Total	340	101%	681	100%	340	101%

In Table 3 the respondents' understanding of sex education is broken down by sex. We note from this table that 36 per cent of the female respondents failed to give a definition of sex education, while only 19 per cent of the males failed to..

Table 3. Understanding of sex education by sex.

Response	Sex					
	Male		Female		Not Given	
	No.	%	No.	%	No.	%
Give young people knowledge of sex and how to manage it	554	57%	151	40%	1	11%
Internal organs and their functions, understanding sexual organs, etc.	88	9%	31	8%	0	0%
Mature understanding between the sexes, reproduction	39	4%	25	7%	0	0%
Knowledge of how to take care of families, good morals, understand adult body functions	20	2%	4	1%	0	0%
Helping nature, formation of child at conception	6	1%	5	11%	0	0%
Birth control, disease prevention	32	3%	7	2%	1	1%
How to conduct sex to achieve happiness	35	4%	11	3%	0	0%
Sociological understanding of sex	8	1	7	2%	0	0%
Teach children not to play with their private parts	4	0%	1	0%	0	0%
No Reply	186	19%	138	36%	7	78%
Total	972	100%	380	100%	9	100%

The young people's responses to the question of what is sex education are broken down according to their ages in Table 4. This table shows that respondents below the age of 14 were much more likely to fail to give a definition of sex education than respondents 14 and over. However, only 4 pupils below 14 were interviewed which is not an adequate sample. Among the age groups 14 and over for whom the samples were larger, the proportions who did not answer the question were about the same as the proportion of the total sample.

Table 4. Understanding of sex education by age.

Response	Age in Years											
	Up to 13		14-17		18 - 20		21 - 24		25+		Not given	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Give young people knowledge of sex and how to manage it	2	50%	116	57%	259	51%	271	53%	31	40%	27	52%
Internal organs and their functions, human reproduction	0	0%	16	8%	41	8%	45	9%	14	18%	3	6%
Mature understanding between the sexes, reproduction	0	0%	6	3%	26	5%	24	5%	7	9%	1	2%
Knowledge of how to take care of families, good morals, good family life	0	0%	10	5%	8	2%	6	1%	0	0%	0	0%
Helping nature, formation of child at conception	0	0%	2	1%	5	1%	4	1%	0	0%	0	0%
Birth control, disease prevention	0	0%	7	3%	17	3%	16	3%	0	0%	0	0%
How to conduct sex to achieve happiness	0	0%	3	1%	17	3%	20	4%	4	5%	2	4%
Sociological understanding of sex	0	0%	0	0%	7	1%	6	1%	2	3%	0	0%

Response	Age in Years											
	Up to 13		14 - 17		18 - 20		21 - 24		25+		Not given	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Teach children not to play with their private parts	0	0%	0	0%	2	0%	3	1%	0	0%	0	0%
No reply	2	50%	44	22%	128	25%	118	23%	20	26%	19	36%
Total	4	100%	204	100%	510	100%	513	101%	78	101%	52	100%

How Teachers Understand Sex Education

In a separate study, 237 primary and secondary school teachers from all over Kenya were asked what "does the term sex education mean to you?" Data from this study are still being analysed and will be presented later under the auspices of the Institute for Development Studies, University of Nairobi, but the responses to a few questions were extracted which are comparable to questions asked in the survey of young people. Comparing Table 5 to Table 3, about the same proportion of male teachers failed to reply (19.8 per cent) as male pupils (19 per cent), but a much higher proportion of female teachers (52.8 per cent) failed to reply compared to the female pupils (36 per cent).

Table 5. Teachers responses to the question, 'What does sex education mean to you?'

Response	Sex					
	Male		Female		Total	
	No.	%	No.	%	No.	%
Knowing more about sexual organs, birth control, etc.	59	35.3%	7	10.0%	66	27.9%
Education about the two sexes, etc.	36	21.6%	17	24.3%	53	22.4%
Teaching young people rudimentary knowledge of sex	15	9.0%	4	5.7%	19	8.0%
Knowing about oneself and changes occurring during development	10	6.0%	2	2.9%	12	5.1%
Use of sexual organs for pleasure	4	2.4%	1	1.4%	5	2.1%
Differences between men and women	7	4.2%	1	1.4%	8	3.4%
Biological, social psychological aspects of sex	4	2.4%	1	1.4%	5	2.1%
No reply, don't know, etc.	32	19.8%	37	52.8%	70	29.5%
Total*	167	100.7%	70	99.9%	237	100.6%

* Multiple responses were allowed, so percentages may total more than 100.

IS THERE A NEED FOR SEX EDUCATION IN KENYA?

As shown in Table 1, 24 per cent of the young people who were interviewed failed to give a definition of sex education. However, when the same respondents were asked if they thought there was a need for sex education in Kenya, 86 per cent answered in the affirmative, while only 7 per cent said there was no need and 6 per cent did not answer. When the teachers were asked the same question, 75 per cent thought there was a need for sex education, 4 per cent did not think the need existed and the remaining 21 per cent did not answer. The responses to this question are shown in Table 6.

Table 6. Is there a need for sex education?

Response	Pupils					Teachers						
	Male		Female		Sex Not Given	Male		Female		Total		
	No.	%	No.	%		No.	%	No.	%			
Yes	846	87%	313	82%	7	78%	86%	137	52%	41	57%	75%
No	65	7%	34	9%	0	0%	7%	9	5%	1	1%	4%
Don't know	3	0%	2	0%	1	11%	0%	11	7%	5	7%	7%
No Reply	57	6%	32	9%	1	11%	6%	10	6%	23	33%	14%
Total	971	100%	381	100%	9	100%	99%	167	100%	70	100%	100%

The young people who had responded that there is a need for sex education were asked their reasons for believing that such a need exists, and they gave a wide variety of responses. Of the total sample, 36 per cent gave the following reasons which were considered interrelated and grouped together: "people will know after how long one can have children", "avoid regular pregnancies" and that sex education would help one to "know the pleasures and problems of sex". Table 7, where the reasons given for feeling that there is a need for sex education are broken down according to the sex of the respondents, shows that 40 per cent of the young men's responses fell into this category but only 22 per cent of the young women's responses.

Table 7. Why is there a need for sex education? Young people's responses broken down by sex.

Responses	Male		Female		Sex Not Given		Total	
	No.	%	No.	%	No.	%	No.	%
Know after how long one can have children, avoid regular pregnancies, know pleasures and problems of sex	410	42%	83	22%	1	11%	494	36%

Response	Male		Female		Sex Not Given		Total	
	No.	%	No.	%	No.	%	No.	%
Enlighten young people and impress the old that times are changing	45	5%	20	5%	0	0%	65	5%
Avoid fatherless children	39	4%	28	7%	0	0%	67	5%
Girls anxious about sex but find out wrong way, avoid abortion	40	4%	16	4%	2	22%	58	4%
Many children grow up with idea that sex is bad	26	3%	28	7%	1	11%	55	4%
Enables couple to get child of desired sex	11	2%	1	0%	0	0%	13	1%
Helps those women who cannot stand on their own	5	0%	1	0%	0	0%	6	0%
Eliminates idea that kissing girls can cause pregnancy	2	0%	1	0%	0	0%	3	0%
Other responses	231	24%	108	28%	1	11%	340	25%
Don't know, refused to answer	88	9%	57	15%	3	33%	148	11%
No reply	75	8%	38	10%	1	11%	114	8%
Total	972	100%	381	99%	9	99%	1361	99%

When the respondents' reasons for feeling there is a need for sex education are compared with their level of education, it appears that those with less education are more likely to mention reasons in the cluster identified above. Thus 44 per cent of those with 9 years or less education mentioned these reasons, and only 33 per cent of those with 10 to 12 years education and 34 per cent of those with over thirteen years.

Table 8. Why is there a need for sex education? Young people's responses broken down by years of education.

Responses	9 years or less		10 - 12		13+		Total	
	No.	%	No.	%	No.	%	No.	%
Know after how long to have a child, avoid regular pregnancy, know pleasures and problems of sex	150	44%	227	33%	117	34%	494	36%
Enlighten young people and impress the old that times are changing	10	3%	33	5%	22	6%	65	5%
Avoid fatherless children	10	3%	39	6%	18	5%	67	5%
Girls anxious about sex but find out wrong way, avoid abortion	13	4%	36	5%	9	3%	58	4%

Responses	9 years or less		10 - 12		13+		Total	
	No.	%	No.	%	No.	%	No.	%
Many children grow up with the idea that sex is bad	13	4%	34	5%	8	2%	55	4%
Enables couple to get child of desired sex, different methods which would not affect women	2	1%	9	1%	2	1%	13	1%
Helps women who cannot stand on their own	0	0%	3	0%	3	1%	6	0%
Eliminates idea that kissing girls can cause pregnancy	0	0%	1	0%	2	1%	3	0%
Other responses	66	19%	187	27%	87	26%	340	25%
Don't know, refused to answer	33	10%	69	10%	46	14%	148	11%
No reply	43	13%	45	7%	26	8%	114	8%
Total	340	101%	683	99%	340	101%	1363	99%

When the reasons for feeling there is a need for sex education were compared to the ages of the respondents, the same cluster of responses was mentioned by the largest number of young people in each age category, but the proportion was much greater in the 14 to 17 year age group. Responses in the group "know after how long to have a child, avoid regular pregnancy, know pleasures and problems of sex" were mentioned by 25 per cent of those up to 13, by 60 per cent of those 14 to 17, by 34 per cent of those 18 to 20, by 31 per cent of those 21 to 24 and by 27 per cent of those over 25.

Those respondents who had stated that there is no need for sex education were also asked for reasons to support their opinion. No single reason was given by more than 2 per cent of the young people. The reason most often given (by 2 per cent or 22 respondents) was that sex education would "create immorality in the young". A further 8 per cent did not know or refused to answer, and very small numbers said that "it is unnatural", that it is "bad for young people", that it "encourages sins and is against God" or that "if mishandled it would spoil young girls". No reply at all was recorded for 86 per cent of the respondents.

WHO SHOULD BE RESPONSIBLE FOR TEACHING SEX EDUCATION?

In traditional African societies, parents and other adults in the community have taught young people about sex and related matters, and the role of parents was particularly important. (22, vol.3) However, in Kenya today, particularly in the urban areas, both parents may be employed, and children are cared for by nursemaids or sent to schools. With the growth of nursery, primary and other schools, many children spend a great deal of their time away

from home, but it is not at all certain that these institutions are willing or able to take on the parents' responsibilities in such areas as teaching children about sex.²

Writing about modern Western society, Vance Packard rejects the idea that parents can teach their children adequately about sex:-

It may be excruciatingly awkward for the parents to offer their adolescents plausible guidance on specific behaviour unless they are prepared... to assume their children will become involved in premarital intercourse....The parents find they must present a sense of their own sexuality to the children and admit to themselves the sexual nature of children. (26,p.391)

Wardell B. Pomeroy also argues that parents are often incapable of teaching their children about sex:-

Parents of teenage daughters are more than usually troubled and confused about how much sex information to give them and what kind they should provide. They are even more concerned about trying to direct the overt sex behaviour of their daughters, who often seem grown-up too soon. Parents are embarrassed when talking about sex, as they have always been, and certainly the daughters don't give them much help because they too are embarrassed and reluctant to discuss sex with parents. Most parents say nothing and keep their fingers crossed, or else mutter vague warnings and occasionally issue stern prohibitions, which are often out of proportion to what the situation warrants.³

In modern African society it is also difficult for parents to teach their children about sex. Thus in the issue of Drum for May 1971, a discussion is printed under the heading "Is Your Daughter on the Pill?":

Young mothers today are not yet able to teach children about sex, because they are torn between the past and the present and are too confused about what to teach their children...They themselves were never taught by their mothers and so they feel too embarrassed.

Rather than embarrassment, perhaps the main reason that many parents in Kenya cannot teach their children about sex is that they never learned about it themselves. In many cases, young people probably know more about sex than their parents do. (See Gachuhi,6.)

If it is accepted that sex education should not be left entirely to parents, one goes on to ask the question "what subjects should be taught to what age groups and by whom". A working group of the International Planned Parenthood Federation, meeting in 1969 to consider the question of who should

2. For a full discussion of the schools' inability to teach this subject at present, see Gachuhi,(11).

3. See Pomeroy, (28),p.9, and also (29) by the same author, especially the Introduction,pp.9-16.

be responsible for teaching sex education and how a programme should be initiated, expressed a concern that not enough research had been done and advised a cautious approach:-

...We too have anxieties...in relation to the use of unqualified or badly selected educators. For this reason we have stressed the word 'responsible'. There is undoubtedly a wide need for training of educators and other professionals, but we consider that careful study of criteria for and methods of selection is most necessary. We also feel that there has been far too little research into the effects of education relating to human sexuality, and we are very conscious of a general uncertainty about what subjects should be taught to what age groups and by whom. Furthermore, we are convinced that although in some areas it will be necessary and wise to give young people and adults specific information about human reproduction and allied matters, in other places it would seem inappropriate to do so at present, simply because the result might disturb rather than enlighten.

...We conclude that any group wishing to introduce responsible parenthood and sex education into their own country should take these prior steps:-

- (a) Study the needs of the community,
- (b) Ensure that the programme is in the hands of people of good standing in the community and has the backing of competent professional people,
- (c) Obtain the collaboration of community leaders, educators, religious organizations, professional and parent groups in the preparation of the programme,
- (d) Institute pilot projects and a process of evaluation before launching an extensive programme. (16)

Who Do Young People Think Should Teach About Sex?

The young people interviewed in this survey were asked who they considered competent to teach sex education. As shown in Table 9, 65 per cent of the respondents mentioned medical professionals, teachers, family planning officers or other authorities outside the home. Only 16 per cent mentioned parents or other relatives.

Table 9. Who should teach sex education? Young people's responses.

Response	Male		Female		Sex Not Given		Total	
	No.	%	No.	%	No.	%	No.	%
Doctors, sisters, nurses, medical officers	214	22%	61	16%	2	22%	277	20%
Special subject teachers, lecturers in subject	352	36%	117	31%	3	33%	472	35%
Family planning officers	44	4%	19	5%	0	0%	63	5%

Response	Male		Female		Sex Not Given		Total	
	No.	%	No.	%	No.	%	No.	%
Home economists	4	0%	3	1%	0	0%	7	1%
Authorities concerned	20	2%	7	2%	0	0%	27	2%
Nurses teach young women	20	2%	11	3%	0	0%	31	2%
Men teach young men	21	2%	11	3%	0	0%	32	2%
Parents teach their children	151	16%	70	18%	2	22%	223	16%
Relatives	2	0%	3	1%	0	0%	5	0%
Nobody	13	1%	6	2%	0	0%	19	1%
Don't know	30	3%	21	6%	1	11%	52	4%
No reply	105	20%	104	27%	2	22%	301	22%
Total*		108%		115%		110%		110%
Base	1066		433		10		1509	

*percentages may total over 100 because multiple responses were allowed.

These findings show clearly that young people in Kenya are looking to teachers and other professionals outside the home for sex education. The implications of these findings are far reaching in terms of the responsibilities of the schools and the need for training teachers in this subject.

These findings have been replicated in other parts of the world. In a recent study in Japan involving 5,000 young people between the ages of 15 and 24 years, 70 per cent of those interviewed thought they had insufficient knowledge of sex. In the Japanese study, 40 per cent of the respondents thought that the best way to learn about sex was in the classroom, a further 14 per cent thought the best way to learn was through information made available at hospitals and health centres, and only 11 per cent thought that sex education should be obtained in the home. (17,p.24)

Who Do Teachers Think Should Teach About Sex

In the survey of Kenyan primary and secondary teachers, the respondents were asked who they thought was qualified to teach sex education. Their responses are given in Table 10. It is interesting that about 50 per cent of the teachers think that teaching sex education should be the responsibility of teachers, and only 24 per cent think that this responsibility should be left to the parents (although most of these teachers are parents themselves). It is also interesting that 4 per cent of the teachers think that the churches should teach sex education, whereas none of the students mentioned churches

as the appropriate source of information on sex.⁴

Table 10. Who should teach sex education? Teachers' responses.

Response	Male		Female		Total	
	No.	%	No.	%	No.	%
Teachers	91	54.5%	27	38.6%	118	49.8%
Parents, mothers, grandparents	49	29.3%	7	10.0%	56	23.6%
Older sisters, older brothers, relatives	25	15.0%	3	4.3%	28	11.8%
Clergymen, churches	7	4.2%	3	4.3%	10	4.2%
Doctors, health department	16	9.6%	7	10.0%	23	9.7%
Social workers, voluntary organisations	8	4.8%	2	2.9%	10	4.2%
Government officers	16	9.6%	1	1.4%	17	7.2%
Authority on subject	2	1.2%	0	0.0%	2	0.8%
Family Planning Association	6	3.4%	4	5.7%	10	4.2%
Books	1	0.6%	0	0.0%	1	0.4%
Don't know	7	4.2%	4	5.7%	11	4.6%
No reply	26	15.6%	30	42.9%	56	23.6%
Total*	254	152.0%	88	125.8%	242	144.0%

*The percentages may add up to more than 100 because multiple responses were allowed.

Both groups of respondents were asked in a different question whether they felt that all adults were capable of teaching about sex. Among the students, 15 per cent said yes and 71 per cent said no; among the teachers, 52.3 per cent said yes and 29.5 per cent said no. It is interesting that the teachers, themselves adults, have more confidence in adults to teach sex education than do the young people. Perhaps their confidence stems more from the fact that they are teachers, and a similar proportion of them (49.8 per cent) feel that teachers should teach sex education.

A somewhat lower percentage (41.4 per cent) of the teachers felt that they themselves were qualified to teach about sex, as is shown in Table 11. One sees from the table that men teachers felt generally more confident to teach sex education than did women teachers. When the data from this survey are fully

4. In this context note that the only group giving family life education lectures in the Kenya schools at present is the Protestant churches under the umbrella of the National Christian Council of Kenya.

analysed, it will be interesting to see how the teachers' professed ability to teach sex education correlates with their age, education and number of years of teaching experience.

Table 11. Do you personally feel qualified to teach sex education?

Teachers' responses.

Response	Male		Female		Total	
	No.	%	No.	%	No.	%
Yes.	79	47.3%	19	27.1%	98	41.4%
No	60	35.9%	31	44.3%	91	38.4%
Don't Know	13	7.8%	4	5.7%	17	7.2%
No Reply	15	9.0%	16	22.9%	31	13.1%

The results of these two investigations make clear that teachers are considered by many to be the best qualified members of society to teach sex education, and they will probably have to carry the major responsibility for instruction to young people in this important subject. Whether the teachers and educational authorities in Kenya are prepared to accept this challenge is still not known. What cannot be disputed is the fact that there is an urgent need to formally introduce the subject of sex education in Kenya schools. The need for this instruction is indicated by the widespread incidence of pregnancy, illegal abortions and venereal disease among Kenyan young people. These extremely serious problems will be discussed in the following sections.

PREGNANCY AMONG SCHOOLGIRLS

Advocates of sex education have relied heavily on the argument that by giving young people more information about sex, unwanted pregnancies could be avoided. Unwanted pregnancies are said to occur very often among girls of primary or secondary school age, and, since most young people in Kenya consider that furthering their education is vital to their future wellbeing, many of these girls might consider an illegal, and dangerous, abortion to enable them to continue their studies.

In fact, there is almost no factual information on the incidence of unwanted pregnancies among school age girls in Kenya. Most writing on the subject has occurred in the popular press, particularly in the 'Letters to the Editor' column, with such emotionally loaded headlines as "Girls Warned Against Unwanted Pregnancy" (E.A. Standard, May 25, 1971), "Good Sex Education Vital for Girls" (Daily Nation, May 25, 1971), "Pill for Girls is a Social Necessity" (Daily Nation, September 24, 1973), "Should our Schoolgirls be Given the Pill?" (Sunday Nation, September 9, 1973), "Pregnancies Forcing Girls to Leave School Early" (E.A. Standard, September 30, 1973), "Abortion: A Case of Flexibility" (E.A. Standard,

September 30, 1973), "No, Abortion is Murder" (Sunday Nation, April 29, 1973) and "Now Girls are Using the Pill as a Cover for Impurity" (Sunday Nation, April 29, 1973).

Writing in the "Education Notebook" column, Kul Bhushan expressed the widespread notion that sex education should be introduced in the schools to limit the number of unwanted pregnancies:-

Sex and education do not mix. But if they are not allowed to mix, the results are disastrous.... The most dangerous period is the secondary school age. It is the time of puberty for all teenage girls and they are all confused and unaware of the biological changes taking place in them. If they do not know what all this is about, and remain as innocent as the birds, then they land in trouble.... What is the answer to this problem? Sex education before the damage is done. The real answer is to educate them about sex education in the first two years of secondary school. Teach them about human beings and end this nonsense talk about the flowers and animals. Let them face the facts of sex. (Sunday Post, May 27, 1973)

Incidence of School Girl Pregnancies as Estimated by Teachers

In order to obtain a more accurate idea of the magnitude of the school girl pregnancy problem, we asked the teachers who were interviewed to assess the situation. Teachers should be able to estimate the frequency of pregnancies among school girls since, according to current school regulations, the teachers are responsible for dismissing pregnant girls from school. The teachers were asked to estimate what percentage of girls become pregnant while in school; 11.4 per cent of the teachers stated that over 20 per cent of school girls become pregnant, and 37.0 per cent of the teachers felt that over 5 per cent of the girls become pregnant. The responses are given in Table 12.

Table 12. Estimated percentage of girls who become pregnant while in school.

Estimate	No. of Respondents	%
Under 5% of all girls	48	20.3%
Between 6% and 10%	37	15.6%
Between 11% and 20%	26	10.0%
Over 20%	27	11.4%

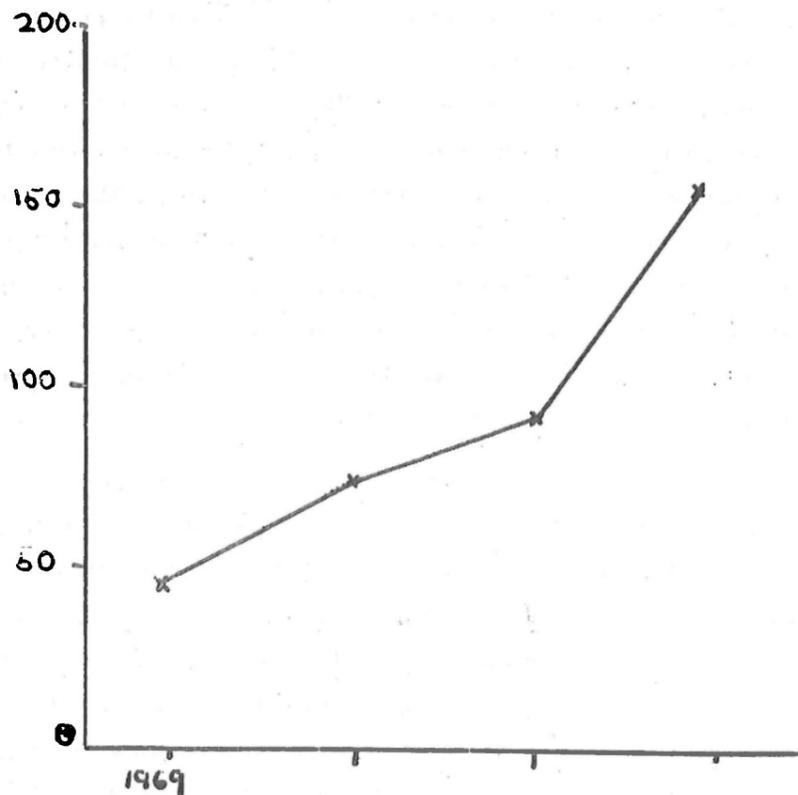
5. There are ample data to support the claim that young people do not know very much about their own bodies and their growth and maturation. See Gachuhi, C, 7 and 8.

Estimate	No. of Respondents	%
Don't know ⁶	64	27.0%
Refused to answer	35	14.8%
Total	237	100.0%

The teachers were asked whether any girls had to leave school because of pregnancy since they started teaching: 37.6 per cent of the teachers said yes, 40.5 per cent said no, and the remaining 22.0 per cent either did not know or refused to answer.

To determine if there is a trend in the number of school girl pregnancies, we asked the teachers to indicate how many girls actually left school each year from 1969 to 1972. Their responses are shown in Figure 1, which indicates that the number of pregnancies is increasing. In 1969, 46 girls were dismissed from the schools where our respondents were teaching, and by 1972, 155, or nearly four times as many girls, had to leave school because of pregnancy.

Figure 1. Pregnancy trend among school girls.



6. We suspect that those who did not know might have been new to the schools where they were teaching or said they did not know to avoid embarrassment. When the data are fully tabulated, it will be possible to correlate this response with the length of time a teacher has been teaching at his present school.

This trend varied among schools, with some schools having no pregnancies in a given year and other schools having as many as ten. The average was two or three pregnancies per school per year. School girl pregnancies are a significant and increasing problem, and, if in fact giving the girls more information about sex would decrease the number of pregnancies, then the case for introducing sex education in the schools is strong.

Attitudes of Teachers Concerning Pregnant School Girls

To ascertain the teachers' attitudes toward school girls who become pregnant, we asked them whether they felt pregnant girls should be allowed to continue their studies and whether they felt these girls should be readmitted to school after giving birth. Responding to the first question, 28.3 per cent (67) of the teachers felt that pregnant girls should be allowed to remain in school, but the majority of 52.7 per cent (125) felt that they should not. The remaining 19.0 per cent (45) either did not know or refused to reply.

The teachers were asked their reasons for feeling that pregnant girls should or should not be allowed to remain in school, and they gave a wide variety of responses. Some of the reasons given for keeping pregnant girls in school were: "to expel these girls is to ruin them psychologically, socially and physically", "why hinder her progress?", "sending them out of school does them more harm than good", "pregnancy has nothing to do with education" and "a girl cannot become useless because of pregnancy". Among the reasons given for not allowing pregnant girls to stay in school were: "because during this time they concentrate too much on their pregnancy than on their studies", "allowing them will encourage school for the married", "lowers the standard and morale of the school" and "they would be a scandal to others and also the school would become a sort of maternity".

When asked whether pregnant girls should be allowed to re-enter school after giving birth, a majority of 50.2 per cent (119) of the teachers answered that they should, and only 28.7 per cent (68) that they should not. The remaining 21.1 per cent (50) either did not know or refused to answer. Some of the reasons given for feeling that pregnant school girls should be re-admitted after their babies are born were: "their upstairs (brain) is still perfect", "can concentrate on schoolwork as long as child is at home", "should be given the chance of educating herself, so as to be useful to society" and "should not lose a chance for education, otherwise she would become a prostitute and have many more unwanted children". Among the reasons given for feeling that such girls

should not be re-admitted to school were: "they are mothers and have to take care of their children", "her life in school would be difficult", "a punishment for her sins" and "would encourage other school girls to become pregnant since they know nothing will happen to them".

The crucial issue is whether, by keeping these girls in school or not allowing them to continue their education, we are helping them or Kenyan society in general. The majority of teachers interviewed feel that girls should not be allowed to stay in school while they are pregnant but should be allowed to re-enter school after they have given birth. In fact, girls in Kenya who become pregnant are not allowed to stay in school, and, although some are later re-admitted to different schools, their chances for re-admission are not very good.⁷

ABORTION AMONG SCHOOL GIRLS

It is known that very many young Kenyans of school age are sexually active and that most of them are not using contraceptives of any kind. (See Gachuhi, 8.) These same young people have a very strong desire to continue with their formal schooling. One unwelcome consequence of this situation is the incidence of illegal abortions among school age girls. Very little is known about abortions among school girls in Kenya, or anywhere else in Africa for that matter, but it is important to bring together what little information is available on this very serious subject.

In Kenya abortion is illegal except on certain very narrowly defined medical grounds. Both the abortionist and the woman involved are considered to be engaged in a criminal activity.

In a major Kenyan survey of knowledge, attitudes and practises concerning family planning conducted in 1971, it was found that many of the 4,194 adult (16 years and older) men and women interviewed approved of abortion, but essentially for the same narrow range of reasons which are allowed under the law.⁸ It was perhaps suprising that the men interviewed approved of abortion in much greater numbers than the women. Although men themselves never experience unwanted pregnancies, they approved of abortion by a margin of nearly two to one.

7. In Liberia, it seems that girls are allowed to continue their educations after giving birth.

8. The study was conducted by Associated Business Consultants (East Africa) Ltd. on behalf of the Family Planning Association of Kenya between April and June, 1971. The study was based on sampling and personal interviews. For details, see Family Planning Association of Kenya, (5).

Respondents in the under-25-years age group also approved of abortion in greater numbers than older respondents. When approval of abortion was compared to education, it was found that the proportion approving was roughly the same for all categories of educational background.

In a preliminary report of an on-going study on changing abortion patterns in North Africa and the Middle East, I.R. Nazer notes that:-

In terms of abortees' residency, only 4.7% come from rural areas, 7.0% from small towns and 72.1% come from urban areas with others not specified. In terms of education, the largest majority (34.8%) had completed between 11 and 12 years; 25.6% between 7 and 10 years; 14% between 3 and 6 years. (25,pp.2-3)

Nazer goes on to state that:-

Nearly half (48.9%) of the women seeking abortion were single, 11.6% divorced, 37.2% married and the rest were unknown. The abortees are young, half being under 25 years of age.... Looking at the age structure of the abortees, their marital status and knowledge of contraceptives, some pathetic cases emerge. Young girls becoming pregnant who never used contraception because they did not even know that pregnancy could be avoided. Undoubtedly, their knowledge in the whole field of sexual matters is minimal. (25,p.7)

In Ghana, figures from an urban hospital showed that "56.1% of the abortees were under the age of 24 years. In a rural hospital it was found that 48% of the abortees were under the age of 24 years." (Ampofo, 1, p.4)

In reporting characteristics of women who died of illegally induced abortions in Cameroon, D.N. Lantum argues that:-

Minors dying of abortion suggests that minors at the tender age of 13 and 14 years are exposed to sexual activity.... Notably also, these cases of death were school children in class seven, and the pregnancies were illegitimate. As these are the victims among the probable many who survive, their age suggests definitely the epoch in the woman's life when sex education should be usefully taught as a preventative measure to prepare young men and women for responsible parenthood. (20,p.7)

Lantum describes further the steps, including sex education, which he feels should be taken to prevent this high incidence of abortion among young girls:-

Although statistics of death from abortion are not known for Cameroon, there is some evidence from the present study that the problem was certainly existing, and was likely to increase with the current trends of urbanisation, westernisation and radical social upheaval consequent on these phenomena in Cameroon. Therefore, the realistic planning of health services today should take into consideration the health problems of the present and the future. Further epidemics of illegal abortions and more maternal deaths can be prevented by improving existing maternal and child health services with sex education and comprehensive family programmes - which include: nutrition education, routine immunisation and child-spacing methodology. (20,p.9)

Data from Kenya indicate that many young people are sexually active and that they are not using contraceptives. Before reaching 15 years of age, 49 per cent of the boys and 7 per cent of the girls interviewed by the author in a recent study had had some sexual experience. By the time they reached 19, 80 per cent of the boys and 38 per cent of the girls had their first sexual experience. Only 5 per cent of the young people interviewed under 17 years of age reported using contraceptives at all, and even among this small group contraceptives were used infrequently. (Gachuhi, 10)

Teachers' Attitudes on Abortion

These data on sexual activity and the knowledge and use of contraceptives point to a situation in which many young girls are faced with the choice of interrupting and very likely ending their education because of an unwanted pregnancy or facing the possibility of sterility or death caused by an illegal abortion. In light of this situation, the Kenyan teachers were asked what their attitudes were concerning the legalisation of abortion. Their responses are given in Table 13.

Table 13. Do you think abortion should be legalised in Kenya? Teachers' responses.

	Male		Female		Total	
	No.	%	No.	%	No.	%
Yes	34	20.4%	7	10.0%	41	17.3%
No	66	39.5%	18	25.7%	84	35.4%
Don't know	37	22.2%	22	31.4%	59	24.9%
No reply	30	18.0%	23	32.9%	53	22.4%

These responses can be compared with those obtained by M.K. Were and J.K.G. Mati who interviewed women patients recovering from abortions in a Nairobi hospital. Nearly two-thirds of the women they interviewed thought that "there was intentional interference in a lot of abortions but only 21% agreed that they would themselves seek termination of an unwanted pregnancy and this same percentage would encourage a friend or relative to terminate a pregnancy". Nearly 44 per cent of the women they interviewed "would like the government hospitals to have facilities for terminating pregnancies". Further, "64% of those interviewed thought that when working girls get unwanted pregnancy they tried to get termination". All except one of the respondents thought that abortion is bad, though 30 per cent would like the law changed to allow abortion of unwanted pregnancies. (36)

Although more of the hospital patients interviewed by Were and Mati favoured legalising abortion than the teachers interviewed in this study, the

proportion in both cases was well under 50 per cent. However, the incidence of illegal abortions in Kenya points to the urgency of reviewing abortion laws and of stepping up campaigns for sex education which would include information on the use of contraceptives. As Dr. John Kabiru, a Kenyan physician, put it, "The choice today is illegal abortion, unmarried motherhood, or allowing single girls facilities to prevent such situations from arising." (Daily Nation, December 5, 1969)

Venereal Disease Among Young People

Venereal disease and particularly gonorrhoea, has been referred to as the disease of young people. (Gimble, 14, p. 186. See also Bennet, 2, p.322.) However, when Kenyan young people were asked in an earlier study what they were afraid of at the time of their first sexual experience, "no one mentioned the often-voiced reason from abstaining from sex, namely venereal disease". (Gachuhi, 8, p.15, See also Gachuhi, 9.) This lack of concern about venereal disease probably reflects the general ignorance prevailing in Kenya about these diseases and how they are transmitted.

Authorities in the schools, on the other hand, do recognise that venereal disease is a serious problem among Kenyan young people. At a National Seminar of Headmasters and Headmistresses of Secondary Schools in Kenya, which was held in 1973, the following points were made:-

- 1) Exposure to venereal disease is a growing problem, particularly in boys' boarding schools. Sex education would greatly assist the youth to avoid such diseases;
- 2) Venereal disease is a serious problem about which students should be educated so that they are aware of the consequences.
- 3) It should be made clear to the youth that V.D. can be obtained from anyone regardless of his/her status, and not only from prostitutes.
- 4) The youth should be told about the need for proper treatment once they have contracted V.D.
- 5) Emphasis on dangers of V.D. to the individual and society should be central in any discussion of venereal disease. (23, p.50)

Little is known about the actual incidence of venereal disease among young people in Kenya. It may be no higher than among adults, but it is often more serious because young people generally lack the means to obtain treatment. Although the reduction of venereal disease should not be the primary reason for teaching young people about sex, the nature and consequences of sexually

transmitted diseases should be taught in any course of sex education.

CONCLUSION

Many groups in Kenya have pointed to the need for sex education in the schools. Participants in a workshop on "Utilisation of Cultural Information for Population Planning in East Africa", held in Nairobi in 1973, concluded that "there is an urgent need to include sex education in the curricula of East African schools". (12,p.19) Headmasters and headmistresses of Kenya secondary schools attending the 1973 Seminar referred to above also agreed that there is a need for sex education in Kenya schools for the following reasons:-

- 1) When young people misunderstand sex, they not only get themselves in trouble, but also society as a whole;
- 2) Traditional systems for teaching about sex are rapidly becoming inadequate for disseminating useful information, and so far no other means for spreading this information have been devised;
- 3) While the sex urge among young people seems to be increasing, parents have abdicated their responsibility in this area and no one else is filling the gap;
- 4) Sex education should equip young people with all the necessary facts about the anatomy and physiology of reproduction as well as the emotional changes that occur in boys and girls at puberty, so that they will be prepared for a responsible future family life, and so they will feel free to discuss sex with their own children, a topic which most parents shy away from today;
- 5) Sex education in the schools would protect young people from incorrect and distorted information given by ignorant people which would otherwise be misleading. (23,pp.47-50)

After discussing the problems of unwanted pregnancies, illegal abortions and venereal disease, the Seminar participants concluded:-

Pregnancy among young people including school children is a real problem resulting, we feel, from society's permissiveness and perhaps from adults' abdication of their responsibilities in imparting sexual knowledge to young people.... While V.D. and abortion are problems among many young people, we feel that teaching of sex education may or may not help in curbing the problem. However, once the facts are fully discussed, the youth would be expected to be responsible for their actions and hopefully not involve themselves in irresponsible practises out of ignorance - the knowledge makes them aware of all the possible dangers. (23,p.60)

In this paper we have presented some of the prevailing opinions in Kenya and elsewhere in the world on the question of sex education. We have also presented the views of a sample of Kenyan students and teachers on the subject and have discussed three very serious problems which perhaps stem in part from the present failure to provide young people with information about sex, namely unwanted pregnancies, illegal abortions and venereal disease. Knowledge of human sexuality is extremely important to personal growth and development, and sex education should not be seen merely as an effort to prevent sexual activity among young people or its more unfortunate consequences. In other words, "sex education is not a disaster insurance". (26,p. 391) Sex education should help young people behave more responsibly: they are entitled to information about sex as a right due to them because they are members of society and future adults and parents. Many groups and individuals who are concerned about the growth and development of young people have concluded that sex education must be introduced into Kenyan schools. The question is now whether we are prepared to do something about it.

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