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The Role of Household Power Relation on Parent-Child Communication and Adolescent Sexual Health in Ondo State, Nigeria

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Abstract
Parent-child communication is a product of household power relations which significantly influence household violence and justice practices with their resultant effects on adolescents' sexual health. Previous studies on adolescent sexual health largely attributed it to peer influence. Little or no studies exist on the role of household power relation on parent-child communication and adolescent sexual health. The study examined the influence of household power relations on parent-adolescent sexual communication, particularly the implications for adolescents' sexual health in Ondo State within the triads of fathers, mothers and adolescents. Survey questionnaire was administered to 322 parents and 161 adolescents selected through a multi-stage sampling technique. Twenty in-depth interviews (IDIs) were conducted with adolescents and both of their parents. The majority, 62.1% and 69.6% of fathers and mothers respectively, had positive attitude to parent-child sexual communication, while most adolescents (98.8%) had negative attitude. Further, patriarchal dominance privileges men over women in sexual issues and this power relation negatively influenced household practice of parent-child sexual communication. It was strongly indicated that, chastity is generally perceived to be rather about girls and woman. This has largely influenced and shaped the role of contemporary men and fathers in the sexual socialization of their children. Also, social and cultural norms do not only impede open and receptive parent-child sexual discussion in Ondo State but it's also disadvantageous to the boy child sexual socialization. There is need for early and friendly family sexual interaction as a strategy for breaking the cultural stereotype inhibiting open and receptive parent-child sexual communication for raising sexually healthy adolescents.

Keywords: patriarchy, parent-child communication, adolescents, sexual health and ondo state.

INTRODUCTION

Parent-child communication is indispensible in the monitoring of the sexual health (SH) of adolescents. Indisputably, the extent of the qualitative manner in which parents are involved in their children's lives are critical factors in the prevention of sexual risk-taking behaviour among adolescents that compromises their sexual health. Adolescents' sexual health is a global public health concern especially in the developing countries due to increased rate of risky sexual behaviour among adolescents. Several studies have reported increased sexual risk-taking behaviour among adolescents in the last decade (Bastien, Kajula and Muhwezi, 2011; WHO, 2012; Haub, 2013).

Sexuality is a life cycle process that begins from the cradle and terminates at death. It spans the biological, psychological, social, emotional and spiritual dimensions of their lives. It begins with relationship within them and extends to relationship with others. Much of what we hear about adolescent sexuality are problems of risky sexual behaviour, such as, unwanted pregnancy, abortion, school drop-out as a result of pregnancy and sexually transmitted infection.

Indeed, several factors influence adolescents' sexuality; however, parental factor is indubitably among the most important potential influence on adolescent's sexual health (Wight, Williamson and Henderson, 2006). Although adolescence is a period during which extra family influences such as peers, media, and the community become increasingly important, parents remain a large influence on youths' lives due to the centrality of the family as a socialization agent in the adolescent life course (Santrock, 2005; FMOH, 2012). The first contact of children is with their parents. Hence, we should not fail to accept the fact that the first sex education begins with parents. Parents serve as the first source of sex role learning for their adolescents and often, relationship with parents forms templates for future sexual behaviour. Communication between parents and adolescents is a vital part of adolescents' lives and it is one of the primary means by which parents socialize their children. The researcher is of the opinion that overwhelming influences of these other factors on adolescent's knowledge of sexuality is due to the absence of the mediating influence of open and receptive parental communication on sex-related matters. Unravelling the intertwinement between

parental communication and adolescent sexual health as a way of mitigating this dangerous absence which predisposes adolescents to risky sexual behaviour becomes imperative, hence the time sensitive nature of the study.

Currently, there are 1.8 billion 10-24 year olds young people across the globe (WHO, 2012). This is the largest ever number in the history of humanity and nearly 90% of them live in low- and middle-income countries (WHO, 2012). According to World Health Organisation population in this age group is estimated to continue to increase until the year 2040. Besides, about 16 million adolescent girls between ages 15 and 19 give birth yearly, with 95% occurring in developing countries (WHO, 2011). For many of these adolescents, pregnancy and childbirth are unplanned and unwanted. In addition in many developing countries, pregnancy and childbirth related complications are the chief cause of death among female adolescents aged 15 to 19, with estimated three million unsafe abortions among girls in this age group in 2008 (Sakeah, 2013). Since young people form the nucleus of national labour force and sustained development, addressing the SH needs and problems of adolescents is a crucial public health issue. In many parts of the world, particularly in Sub-Saharan Africa that still has the world's highest level of adolescent childbearing (Haub, 2013), the SH needs of adolescents are either poorly understood or not fully appreciated.

Many studies have found that interpersonal relations or persons closer to young people have greater influence on the decisions they take about their sexual behaviour (Parke, 2004; Lieberman, 2006). Besides, a number of studies have linked parent-adolescent discussion on sexual issues to less risky adolescent sexual behaviour (Izugbara, 2001; Action Health Incorporated, 2003; Sunmola, Dipeolu, Babalola and Adebayo, 2003; Wyckoff, Miller, Forehand, Bau, Fasula, Long and Armistead, 2008).This points to the potential efficacy of family influences on the initiation of sexual activity. However, in grappling with risk-taking sexual behaviour and SH health challenges among adolescents in Nigeria, interventions have mainly included the introduction of sex education into school curriculum, media campaign on the need for safe sexual behaviour, emergence of NGOs with focus on SH of adolescents to mention just a few. These interventions targeted at changing sexually risky behaviour of young people are organised primarily at community level. It is arguable that these interventions had not been able to stem the tide of high-risk sexual behaviour particularly among adolescents because they were not organised primarily at the family level. This assertion is not an overstatement, as the Federal Ministry of Health in Nigeria had to revise its 2006 National Strategic Framework on the Health and Development of Adolescents and Young People to include focus on the family to make the policy reflects new realities (FMOH, 2012). Indisputably, there is a dire need to build capacity among households by repositioning parents as a vital early and proximal intervention for delaying the transition to sexual activity among young people. The significance of this study stems from the fact that capacity building is a cardinal means of achieving the seventeen Sustainable Development Goals (SDGs) which among others include good health, gender equality and reduced inequalities.

The repositioning of the family requires adequate understanding of the role of household power relation on parent-child communication which the patriarchal nature of human society often subtly and sometime obliviously imposes on the interpersonal relations among households. Thus, the researcher evaluated the communication processes that take place among the triads of fathers, mothers and their adolescents with the aim of understanding precisely how parents could be re-orientated to have open and receptive sexual communication with their children

The theoretical orientation adopted is influenced by Weber's action theory. Particularly, his four types of actions that are distinguished by the meanings on which they are based. Namely; means-ends rational actions, value rational actions, affective or emotional actions and traditional actions.

Objectives of the Study

The specific objectives are to:

1. Examine parents' attitude to sexual discussion with their children in the community.
2. Assess household power relation and the existing practices of parent-child communication on sex-related matters in Ondo State.

Research Hypotheses

Also, following from the review of literature, the study hypothesized that:

1. Parents will have a negative attitude towards discussion about sex and sex-related issues with their adolescents

2. There is significant difference in fathers' and mothers' attitude to sexuality discussion with their adolescents.

METHODOLOGY

The study utilized a mixed method design involving a survey and the use of qualitative techniques in eliciting information from respondents. A total of 483 respondents comprising fathers, mothers and one of their adolescent were selected through a multi-stage sampling technique in Ondo state. Seven Local

Government Areas (LGAs), with highest population in each dialect group were purposively selected, while simple random sampling was used to select twenty-eight enumeration areas (EAs). Finally, 322 parents and 161 adolescents were purposively selected at household level. Data for the study were collected through structured interviews (the Questionnaire) and In-depth Interviews (IDIs). A total of 20 IDIs were conducted. The quantitative data were analysed using Statistical Package of the Social Sciences, version 20 at univariate and bivarite levels. Content analysis was employed to analyse data collected from the IDIs.

RESULTS

Parents' Attitude to Sexual Discussion with their Adolescents among Households

Table 1 show the frequency and percentage distribution of fathers', mothers' and their adolescents' attitude to parent-child sexual discussions alongside the mean scores for fathers and mothers attitude. The mean scores for parents were included on account of hypothesis two. As seen in the table some (37.9%) of fathers have a negative attitude to discussing sex-related issues with their adolescents, while the majority (62.1%) have a positive attitude to discussing sex-related issues with their adolescent children. Similarly, some (30.4%) mothers have a negative attitude to such discussions with the children, while the majority (69.6%) have a positive attitude to sex-related discussion with their adolescents. The findings indicated that more mothers are positive in their attitude to discussing sex-related issues with the children than fathers. However, the mean score for fathers was 72.13%, while mother had a mean score 70.76% mothers.

Table 1: Frequency Distribution of Respondents by Attitude to Sexual Discussion

Attitude to Sexual Discussion	Fathers	Mother	Children
Negative	61(37.9%)	49(30.4%)	159(98%)
Positive	100(62.1%)	112(69.6%)	2(2%)
Total	161(100%)	161(100%)	161(100%)
Parents' mean score	72.13%	70.76%	

The implication of this is that the fathers have higher positive attitude than mothers. Nonetheless, Hypothesis one which states that parents will have a negative attitude towards discussion about sex and sex-related issues with their adolescents was invalidated since the majority of both fathers and mothers have positive attitude to sex-related discussion with their adolescent. Moreover, the mean scores for both parents were high. The qualitative data gave some insight into these findings. The majority of the interviewees indicated a great concern about the possibility of adolescents contracting STIs particularly HIV/AIDs, commonplace information of the girl-child abuse, rape, dropout of school and maternal death as a result of teenage pregnancy. All of these had over time had its toll on attitudes of parents such that fathers and mothers are now generally well-disposed to their children learning more about sexuality education and parent-child sex-related discussion. An adolescent female respondent asserted:

Yes, I know that parents are concerned about HIV / AID disease,

but I know too, that it's very important that their daughters don't get

pregnant. [13 years old JSS3 female student in Akure]

Moreover, the responses of the children as reflected in the table gave a different picture about the situation as regards parents' attitude to parent-child sexual communication among the households in Ondo State. Virtually none of the adolescent children in the entire selected house indicated a positive attitude towards parent-child sexual communication. Only (1.2%) adolescents indicated a positive attitude, the remaining (98.8%) had a negative attitude to discussing sexual issues with their parents. The sharp divergence in the attitude of parents and their adolescents is a strong indication that there is sexual communication gap between parents and their adolescents which the parents are oblivious of. In addition, the divergence implies that parents are not the major contributory factor to their adolescents information and knowledge on sexual issues.

Odimegwu, Solanke, Adedokun, (2002) noted that there is no doubt that parents have an important role to play in the upbringing of their children, the effectiveness of parents in discharging this burdensome duty could greatly help adolescents delay sexual initiation and protect themselves if sexually active. Sex related issues are sensitive and intimate, thus transcending parental attitude to sex-related discussions, cordial and intimate relationships with parents are important in the adolescent's development. Such relationship functions as models or templates that are carried forward over time to influence the construction of new relationship. During the IDIs, adolescent respondents in all the sessions said that for majority of parents there is no bond or attachment of intimacy between parents and their adolescents, and since there is a sense of what may be termed 'confidentiality' about sex-related matters, many adolescents may not perceive parents as preferred persons to discuss with. The majority (9 of 10) of the adolescent respondents said parents are the right persons to discuss sex-related matters with, but they are least persons they are inclined to go to. This response was given in virtually all the sessions with just one exception. They reported that information about sex-related matters was obtained mainly from friends and books. Some respondents made the following statements:

Huuum, uncle, me o, am afraid of facing my parents with matters that have to do with sexual emotions; they will definitely misunderstand me [17 years SS3 female student in Akoko]

Table 2 shows the T- test analysis of fathers and mothers attitude to sex-related discussion with their adolescents. This analysis was done to test hypothesis two that also relates to objective one. As noted earlier, hypothesis two states that: there is a significant difference in the attitude of fathers and mothers to sexuality discussion with their adolescents.

Table 2: T-Test Analysis of Mothers' and Fathers' Attitude to Parent-Child Sexual Communication

Paired	Mean Dff	T	Degree of freedom	(P-Value)
Mothers' and Fathers' Attitude	-1.373	-1.077	160	0.283

*0.05 level of Significance

The table shows that the mean difference was -1.373, meaning that fathers' mean score is rather higher than that of mothers by 1.37. However, the P valve (0.283) is higher than 0.05 and the mean difference (1.37) is not significant. The implication of these is that there is really no significant difference in mothers' and fathers' attitude to parent-child sexual communication with their adolescents. Hence, the second hypothesis that mothers will tend to have more positive attitude to parent-child sexual communication with adolescents than father was rejected. The most probable explanation to this finding is to recall as noted earlier in respect of the qualitative data that the great concern of all the parents about the possibility of adolescents contracting STIs particularly HIV/AIDs, commonplace information of the girl-child abuse, rape, school dropout as a result of pregnancy and even death had over time had it toll on attitude of parents such that fathers and mothers are now generally more positive to parent-child sex-related discussion and children learning more about sexuality education. Thus, the social reality in Ondo State is that for parents (both fathers and mothers), in line with the theory of social action, if the perception of parents is that the outcome of sexual communication with their adolescents is positive, for instance, that such discussion will lead to delayed sexual initiation or the prevention of several risky sexual behaviours, they will have a positive attitude toward parent-adolescent sexual communication.

Since the perception of parents in the community is that the outcome of sexual communication with their adolescents is positive (as found during the IDIs), that such discussion will lead to delayed sexual initiation or a prevention of several risky sexual behaviour, they have a positive attitude toward parent-adolescent sexual communication. The opposite can also be stated if parent-adolescent sexual communication is thought to be negative in which case for instance, parents perceive such discussion of sexual matters as encouraging sexual intercourse. Nevertheless, it is important to note the positive attitude of parents will translate to practice, when parents feel they have sexual communication skill, time and high comfort level with discussion about sex-related matters with their adolescents. . However, where this is not the case, positive attitude of parents may not necessarily translate to open and receptive parent-adolescent sexual conversation.

Power Relation and the Existing Practices of Parent-Child Sexual Communication

Table 3 shows the existing practice of parent-child sexual communication in respect of the opinion of each family member about the frequency of sexual communication.

Table 3: Distribution of Respondents by Frequency of Sexual Communication

Frequency of Sexual Communication	Father		Mothers		Children	
	Freq.	%	Freq.	%	Freq.	%
Once In Three Months	6	3.7	8	5.0	16	9.9
Twice A Month	15	9.3	11	6.8	4	2.5
Once A Month	27	16.8	27	16.8	21	13.0
Twice A Week	2	1.2	8	5.0	11	6.8
Once A Week	20	12.4	19	11.8	12	7.5
Anytime Something Related Comes up	91	56.5	88	54.7	97	60.2
Total	161	100	161	100	161	100

Fathers who opined once in three months were (3.7%), twice a month were (9.3%), once a month were (16.8%), twice a week were (1.2%), once a week were (12.4%) and anytime something related comes up were (56.5%). For mothers, once in three months represent (5.0%), twice a month (6.8%), once a month (16.8%), twice a week (5.0%), once a week (11.8%) and anytime something related comes up represents (54.7%). In a similar vein, children who indicated once in three months were (9.9%), twice a month were (2.5%), once a month were (13.0%), twice a week were (6.8%), once a week were (7.5%), while anytime something related comes up were (60.2%). The findings reveal the same pattern of response in respect of how frequent parent-child sexual communication between parents and their adolescents in all households in the Ondo state takes place. In all the households, parent-child sexual

communication between parents and their adolescents mainly takes place anytime something related to it comes up within the home or the immediate neighbourhood. When related issues comes up on the television, or, for instance, an adolescent got pregnant in the immediate neighbourhood, the child of a family friend was diagnosed with sexually transmitted infection (particularly HIV/AIDs), when a friend of the opposite gender pays children a visit e.t.c. The implication is that parent-child sexual communication in the community is predominantly occasional discussions.

There was a convergence between the quantitative and qualitative data in this respect. Majority (14 of 20) of the parent's respondents reported that sex-related matters are not usually easy to discuss with adolescents. However, the concern about sexually transmitted infection, particularly HIV/AIDs which has no certified cure and the rising tide of teenage pregnancy have become a push-factor for discussing sex related matters with their children. Most respondents stated that they discourage premarital sexual relations among adolescents by referring to HIV/AIDS infection. In addition to HIV/AIDs, parents discuss other consequences of risky sexual behaviour among adolescents, such as unwanted pregnancy and dropping out of school. Although some noted that they do not like such discussion because it may lead to promiscuity among adolescents. Many interviewees commented that the discussions are often times opportune conversations, as for instance after a programme on the television, or if an adolescent in the neighbourhood develops problems as a result of sexual activities, or when the children are taught related issues in school and they mention such at home. The following consensus emerges from some of the household panel survey:

The occurrence of an adolescent becoming pregnant normally provide good opportunity to discourage my daughter from premarital sex (54 years old Less educated female parent in Ondo)

However, it equally important to note that not all respondents reported that discussion about sex related matters was difficult. For instance a discussant testified:

Discussion about sexual issues is a subject parents should readily have with their children, towards the attainment of puberty; I enlightened my children about all it entails[50 years old Less educated female parent in Akoko Local Government]

The data from the IDIs brought to light salient issues about fathers' role in sexual socialisation of their children in the community. Among the various households, parents differ on who should discuss sex-related matters with adolescents. Some male discussants felt it is the sole responsibilities of the mother. Some fathers and mothers argued that mothers should discuss with female adolescents, while the fathers do the same for male adolescents. Others are of the opinion that both parents should do so regardless of the sex of the child. Nevertheless, the majority of fathers (8 of 10) and mothers (7 of 10) still belief that the matter of sexual purity is primarily about the girls and women. Consequently, chastity is generally perceived to be rather about girls and woman. This is what has largely influenced and shaped the role of contemporary men and fathers in the sexual socialization of their children. For instance in Akure South local government of the State a male discussant who cut in sharply interrupting his wife, emphatically noted:

In traditional African societies, token of the intending wife's virginity was needed to contract marriage; the young men were not under such obligation.

So the women folk were the ones at a disadvantage during marriage rites, as loss of virginity can readily be proved and the consequences for such loss was grave. Mothers were primarily saddled with the duty of ensuring proper sexual socialization for the children (particularly female children) since mothers were full-time house wives and hence spend more time with the children unlike fathers who were out to provide for the family. So chastity, sexual socialization, negative consequences of risky sexual behaviour had always been within the domain of girls, women and mothers. For me, things have not really changed except that today, more women now work. This is what I have made my wife to realize (54 years Educated father: Akure South local Government)

Human society had been and is still generally patriarchal. Women serve the sexual interest, pleasure and purpose of men. The popular biblical story of the woman caught in the act of adultery and adjudged to die by stoning readily comes to mind. The question is; What about the man she was caught with? Again, till date, polygyny is generally acceptably but polyandry is vehemently frowned at. Hence, parent-child communication is a product of household power relations which significantly influence household violence and justice practices with their resultant effects on adolescents' sexual health. Virginity, sexual discipline and purity are rather seen by society in relation to girls and young women. Boys and men are privileged over girls and women. In a way, society is a man's world. This subjective norm had ever since govern human society and is still very endemic in contemporary society. It is significant to note this was a major theme that emerged from almost all the IDIs conducted among the household. Boys had never really been the focus of sexual socialization. What make him a real man is to provide for the household. Overtime, this had translated to

contemporary fathers not seeing themselves as having a major role to play in the sexual socialization of the children.

A young father from Okitipupa local government area of the state, after listening to how is wife explained the way she felt about being left alone to grapple with the sexual socialisation of the children, empathetically made this submission and promised his wife that he would try and adjust

Heeem, actually am a very busy person, but honestly I never really see a need to make sexual socialisation of the children a duty for instance, my father never spoke to me about any sex-related issue, but my mother was always cautioning the girls. So I really don't see myself having much to do about sexual socialization. I prefer talking to them through their mother, even for the boys too (43 years old Educated father)

This subjective norm does only apply to fathers it similarly holds with mothers. However, it is important to note that just a few fathers (2 of 10) posit that sexual socialisation of the children is the onerous duty of father. This theme emerged

> *Fathers must be at the forefront of sexual socialisation to ensure that no one destroy the children's (particularly the girl child) future*

As observed from the themes, result from the qualitative data provides some insights into the role of fathers in the sexual socialization of the children. All of these point to the fact that while men play a dominant role in fertility behaviour of women, as literature has well established, they tend to perceive the issue of chastity, consequences of sexual activity and sexual socialization of children to be primarily about girls and their mothers. For majority of fathers, parent-child sexual communication is more of admonishing their children (particularly their girls) to be chaste, while their mothers should work out the details of such conversation.

DISCUSSION OF MAJOR FINDINGS

The study reveals that there is sharp divergence in the attitude of parents and their adolescents towards parent-child sexual communication. In addition, it was indicated that the divergence implies that parents are not the major contributory factor to adolescents' knowledge about sexuality. The implication is that such knowledge of sexuality is likely to be from peers or other sources which are laden with distortions that predispose adolescents to risky sexual behaviour or sexual risk-taking. This finding corroborates the assertion of Lieberman (2006) who noted that adolescents continue to have distorted information on and about sex from peers, which results in early sexual debut. Similarly, other studies across the country found that male and female adolescents have high level of risky sexual practices including unprotected sexual intercourse with multiple partners and the age at first sexual intercourse increasingly decreasing (Ola and Oludare, 2009).

In addition, fathers' role in sexual socialisation of children is chiefly influence and moulded by patriarchy. This validates action theory that certain human actions are governed by traditionally existing practices of the society. The situation makes social and cultural norms not only to impede open and receptive parent-child sexual discussion in Ondo State but also disadvantageous to the boy child sexual socialization.

CONCLUSION AND RECOMMENDATIONS

The study revealed that the problem of communication on sexual matters between parents and their adolescents persists. The Majority of parents are unwilling/unable to receptively and openly discuss sex-related matters with their adolescents. Interventions should focus on reorienting parents towards early, friendly and appropriate parents-child sexual communication.

Regardless of level of educational attainment, fathers' perception and belief about sexual socialization of children is greatly influenced, moulded and shaped by the patriarchal nature of society. Consequently, there is need for gender mainstreaming for fathers in respect of sexual socialization of their adolescents, particularly for the boy-child. So much have been said about the mother's role in the girl-child sexual life, the boy-child also needs the father as a role model. However, the study utilised 161 households, perhaps increased sample size might give a different picture

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