



Parental Factors and Sexual Health Profile of Students in Public Tertiary Institutions in Osun State

Tolulope O. Ojo

Centre for Gender and Social Policy Studies
Obafemi Awolowo University, Ile-Ife
Tolulopeojo22@gmail.com

Olufemiwa N. Makinde

Department of Obstetrics and Gynaecology
Faculty of Health Sciences
Obafemi Awolowo University, Ile-Ife

Mary O. Obiyan

Department of Demography and Social Statistics
Faculty of Social Sciences, Obafemi Awolowo University, Ile-Ife

Abstract

This study examined how sexual health of young people can be influenced by parental factors such as education, marital status and parent-child communication. The population comprised of all students in tertiary institutions in Osun State. Three hundred students were selected from each of the institutions using convenience sampling technique. ‘Parental Variables and Sexual Health Scale’ was used to collect data. Data was analysed using frequency distribution and chi-square. Results revealed that Parents marital status is statistically associated with being sexually active ($\chi^2 = 10.97$; $p < 0.01$); use of contraception ($\chi^2 = 13.82$; $p < 0.03$) and indulging in homosexual practices ($\chi^2 = 10.89$; $p < 0.01$). The result also showed that there is no statistically significant relationship between mother/mother figure’s level of education and father/father figure’s level of education with transactional sex, multiple partners and being homosexually active. Majority (45.33%) of respondents stated that their mother is the most important source of knowledge on sex-related matters; 7.33% believe it is their father. It was concluded that education has no influence on young peoples’ sexual practice. It was recommended that fathers should be educated on how to overcome constraints of traditional norms, limited information on sexual health and poor communication skills as regards sexual health with young people.

Keywords: Parental Factors, Parental communication, Young People, Sexual Health

Introduction

Parents are the first contact of every child. According to psychologists the nature of communication and training that a child receives at home, especially during the developmental stages, goes a long way in determining his attitude at adulthood. During childhood and early

adolescence stage, the main influencers of gender socialisation for many young people are their parents or guardians (Mmari, Sommer, Kabiru, Fatusi, Bello, Adepoju, & Maina, 2017). Culture and social environment influence the dynamics of parent-child relationship and communications. Sexual health is a state of physical, emotional,

mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health is the ability of women and men to enjoy and express their sexuality and to do so while being free from risk of sexually transmitted diseases, unwanted pregnancy, coercion, violence and discrimination (Lottes, 2000).

Statement of the Problem

Sex-differential mortality and morbidity pattern in young people begin to emerge between age 10-24 years (Kågesten, Gibbs, Blum, Moreau, Chandra-Mouli, Herbert, & Amin, 2016). There is consensus that young people engage in high-risk sexual behaviour that predisposes them to sexual health problems. Parent-child communication on sexual issues is still a challenging issue in Nigeria and in many Sub-Saharan African countries as many traditional communities still constrain such communication. It may be difficult for parents in such communities to initiate conversations about sexual issues as they themselves may be unsure of how to go about the issues. They may equally doubt their competence in handling sexual topics and questions that may be raised by their adolescents or feel confused about the proper amount of information to offer (Akinwale, Omotola, Manafa, Adeneye, Idowu, Sulyman & Adewale, 2006). Also, some topics are regarded taboo in African culture. Despite these submissions, research shows that positive communication between parents and children can help young people establish individual values and make healthy decisions (Lagina, 2002). It is not known if parental factors influence the sexual health of young people in Osun State hence this study.

Research Questions

1. What is the association between parental factors (education, marital status and parent-child communication patterns) and young peoples' sexual health profile?

Hypotheses

1. There is no significant association between parental/guardian marital status and young peoples' sexual health profile.
2. There is no significant association between parental/guardian education and young peoples' sexual health profile.
3. There is no significant association between parental/guardian communication patterns and young peoples' sexual health profile.

Method

This study was conducted in public tertiary institutions in Osun state. The state is divided into three federal senatorial districts namely; Osun central, Osun west and Osun east. The state consists of thirty local government areas.

Research Design

This study employed descriptive survey. The study populations in this study were female and male students in Public Tertiary Institutions in Osun State, Nigeria. The state has two public universities - Obafemi Awolowo University Ile-Ife; Osun State University; three public polytechnics - Federal Polytechnic Iree; Federal Polytechnic Ede, Osun State Polytechnic Esa-Oke; and two public colleges of education - Osun State college of Education Ilesa, Osun State college of Education Ila-Orangun. Each of this institution has several faculties and departments providing varying courses of study to thousands of students which suggest homogeneity of the study population.

Sampling Technique

A multi-stage sampling technique was employed. Tertiary institutions were stratified into three groups based on the type - university, polytechnic and college of education. Three institutions were purposively selected from each stratum and they are: Obafemi Awolowo University Ile-Ife, Federal Polytechnic Ede and Osun State College of Education. A sample size of 300 students was obtained using the Leslie Kish formula for calculating a representative sample for proportions of larger sample and 100 students were randomly selected from each institution.

Data Collection Method

Semi-structured questionnaires were administered to the students to gather information that are relevant to the study. Three hundred questionnaires were administered among study population in the three selected tertiary institutions.

Validity and reliability of research instruments

The questionnaire was pre-tested among the population not involved in the study. The pre-test took place among male and female students in Adeyemi college of Education, Ondo town. A total of 40 questionnaires were administered to students in pre-test study area. Thereafter, the information obtained from the pre-test were reviewed in line with the objectives and purpose of the study. Ambiguous questions were reframed and all necessary corrections were made. The instrument titled “Parental Variables and Sexual Health scale” was validated by the use of construct and content validity methods. The instrument was given to experts in Tests and Measurement. They were of the view that the instrument contained the appropriate psychological constructs and each item in the instrument is related to the psychological construct in the research topic. Data from pre-tests were collated and loaded on SPSS and then subjected to Principal Component Analysis in order to determine its validity. Also, reliability test was carried out for each of the sections of the instrument using Cronbach Alpha, Split half and Test-re-Test methods. This was done so as to ascertain the appropriateness of the items. Thus, this was to ensure the reliability and validity of the questionnaire. In order to ascertain the usability of factorial validation for the items in each section of the questionnaire, Olkin Measure of Sampling Adequacy (KMO) and Barlett’s Test of Sphericity (BTS) tests were carried to ascertain the suitability of the items for factorial validation. The KMO value for each of the sections was greater than critical value at 0.05 level of significance and so is acceptable. It also showed that the items are uniform enough to yield distinct factors.

Data Analysis

Chi-Square analysis was used to determine the association between parental variables (parent’s

marital status, mother’s level of education, and father’s level of education) and sexual health profile (modern contraceptive use, age of sexual debut, transactional sex, multiple partners, and homosexuality of respondents) of public tertiary institution students.

Results

The table 1 below show the relationship between parental variables (parent’s marital status, mother’s level of education, and father’s level of education) and sexual health profile (modern contraceptive use, age of sexual debut, transactional sex, multiple partners, and homosexuality of respondents) of public tertiary institution students. The results of the analysis reveal highest proportion of sexually active respondents and use of modern contraception were found among those whose parents are married and living together (77.6%; 87% respectively); mothers with tertiary education (62.9%; 68.1% respectively) and fathers with tertiary education (68.1%; 69.6% respectively). This pattern was similarly found among respondents in relation to transactional sex; multiple sexual partners and homosexual practice.

Sexual health profile was significantly associated with selected parental factors as seen in Table 1, Parents marital status is statistically associated with being sexually active ($\chi^2 = 10.97$; $p < 0.01$); use of contraception ($\chi^2 = 13.82$; $p < 0.03$) and indulging in homosexual practices ($\chi^2 = 10.89$; $p < 0.01$). The result also show that there is no statistically significant relationship between mother/mother figure’s level of education and father/father figure’s level of education with transactional sex, multiple partners and being homosexually active.

Table 1: Sexual Health Profile of Public Tertiary Institution Students by Parental Variables

Parental Variables	Sexually Active			Contraceptive Use			Sexting		
	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)
Parent's marital status									
Single/Never Married	8 (6.90)	15 (8.15)	23 (7.67)	3 (4.35)	5 (12.50)	8 (6.90)	4 (4.2)	19 (9.3)	23 (7.67)
Married & living together	90 (77.59)	160 (86.96)	250 (83.33)	60 (86.96)	30 (63.83)	90 (77.59)	78 (81.3)	172 (84.3)	250 (83.3)
Separated/divorced	6 (5.17)	5 (2.72)	11 (3.67)	2 (2.90)	4 (9.76)	6 (5.17)	9 (9.4)	2 (1.0)	11 (3.7)
Widowed	12 (10.34)	4 (2.17)	16 (5.33)	4 (5.80)	8 (19.51)	12 (10.43)	5 (5.2)	11 (5.4)	16 (5.3)
	$\chi^2 = 10.97$; Pr = 0.012			$\chi^2 = 13.82$; Pr = 0.03			$\chi^2 = 14.88$; Pr = 0.002		
Mother/mother figure's level of education	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)
None	3 (2.59)	3 (1.63)	6 (2.00)	3 (4.35)	0 (0.00)	3 (2.59)	3 (3.1)	3 (1.5)	6 (2.0)
Primary	10 (8.62)	8 (4.35)	18 (6.00)	3 (4.35)	7 (0.00)	10 (8.62)	5 (5.2)	13 (6.4)	18 (6.0)
Secondary	30 (25.86)	55 (29.89)	85 (28.33)	16 (23.19)	14 (29.79)	30 (25.86)	24 (25.0)	61 (30.0)	85 (28.3)
Tertiary	73 (62.93)	118 (64.13)	191 (100.0)	47 (68.12)	26 (53.66)	73 (62.93)	64 (66.7)	127 (62.3)	191 (63.7)
	$\chi^2 = 2.9136$; Pr = 0.405			$\chi^2 = 8.7923$; Pr = 0.186			$\chi^2 = 1.7941$; Pr = 0.616		
Father/father figure's level of education	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)	Yes (%)	No (%)	Total (%)
None	2 (1.72)	3 (1.63)	5 (1.67)	0 (0.00)	2 (4.88)	2 (1.72)	1 (1.0)	4 (2.0)	5 (1.0)
Primary	4 (3.45)	5 (2.72)	9 (3.00)	3 (4.35)	1 (2.44)	4 (3.45)	4 (4.2)	5 (2.5)	9 (3.0)
Secondary	31 (26.72)	34 (18.48)	65 (21.67)	18 (26.09)	13 (27.66)	31 (26.72)	21 (21.9)	44 (21.6)	65 (21.7)
Tertiary	79 (68.10)	142 (77.17)	221 (73.67)	48 (69.57)	31 (65.96)	79 (68.10)	70 (72.9)	151 (74.0)	221 (73.7)
	$\chi^2 = 3.1578$; Pr = 0.368			$\chi^2 = 4.8437$; Pr = 0.564			$\chi^2 = 0.9850$; Pr = 0.805		

Parental Variables	Transactional Sex			Multiple Sexual Partners				Homosexual		
Parent's marital status	Yes (%)	No (%)	Total (%)	1 (%)	2 – 4 (%)	5 and above (%)	Total (%)	Yes (%)	No (%)	Total (%)
Single/Never Married	2 (11.11)	6 (6.12)	8 (6.90)	5 (7.69)	2 (5.88)	1 (6.25)	8 (6.96)	0 (0.00)	8 (7.27)	8 (6.90)
Married & living together	16 (88.89)	74 (75.51)	90 (77.59)	53 (81.54)	22 (64.71)	14 (87.50)	89 (77.39)	4 (66.67)	86 (78.18)	90 (77.59)
Separated/divorced	0 (0.00)	6 (6.12)	6 (5.17)	1 (1.54)	5 (14.71)	0 (0.00)	6 (5.22)	2 (33.33)	4 (3.64)	6 (5.17)
Widowed	0 (0.00)	12 (12.24)	12 (10.34)	6 (9.23)	5 (14.71)	1 (6.25)	12 (10.43)	0 (0.00)	12 (10.91)	12 (10.34)
	$\chi^2 = 4.2057$; Pr = 0.240			$\chi^2 = 10.5224$; Pr = 0.104				$\chi^2 = 10.8892$; Pr = 0.012		
Mother/mother figure's level of education	Yes (%)	No (%)	Total (%)	1 (%)	2 – 4 (%)	5 and above (%)	Total (%)	Yes (%)	No (%)	Total (%)
None	1 (5.56)	2 (2.04)	3 (2.59)	2 (3.08)	0 (0.00)	1 (6.25)	3 (2.61)	0 (0.00)	3 (2.73)	3 (2.59)
Primary	1 (5.56)	9 (9.18)	10 (8.62)	8 (12.31)	0 (0.00)	2 (12.50)	10 (8.70)	0 (0.00)	10 (9.09)	10 (8.62)
Secondary	5 (27.78)	25 (25.51)	30 (25.86)	21 (32.31)	6 (17.65)	2 (12.50)	29 (25.22)	1 (16.67)	29 (26.36)	30 (25.86)
Tertiary	11 (61.11)	62 (63.27)	73 (62.93)	34 (52.31)	28 (82.35)	11 (68.75)	73 (63.48)	5 (83.33)	68 (61.82)	73 (62.93)

	$\chi^2 = 1.0000$; Pr = 0.801			$\chi^2 = 12.3035$; Pr = 0.056				$\chi^2 = 1.3345$; Pr = 0.721		
Father/father figure's level of education	Yes (%)	No (%)	Total (%)	1 (%)	2 – 4 (%)	5 and above (%)	Total (%)	Yes (%)	No (%)	Total (%)
None	0 (0.00)	2 (2.04)	2 (1.67)	2 (3.08)	0 (0.00)	0 (0.00)	2 (1.74)	0 (0.00)	2 (1.82)	2 (1.72)
Primary	0 (0.00)	4 (4.08)	4 (3.45)	2 (3.08)	1 (2.94)	1 (6.25)	4 (3.48)	0 (0.00)	4 (3.64)	4 (3.45)
Secondary	5 (27.78)	26 (26.53)	31 (26.72)	23 (35.38)	5 (14.71)	3 (18.75)	31 (26.96)	2 (33.33)	29 (26.36)	31 (26.72)
Tertiary	13 (72.22)	66 (67.35)	79 (68.10)	38 (58.46)	28 (82.35)	12 (75.00)	78 (67.83)	4 (66.67)	75 (68.18)	79 (68.10)
	$\chi^2 = 1.1640$; Pr = 0.762			$\chi^2 = 7.9753$; Pr = 0.240				$\chi^2 = 0.4326$; Pr = 0.933		

*p<0.05; **p<0.01; ***p<0.001

Presented in the table 2 below is the association between parent communication pattern specifically the level of comfortability and sexual health profile of respondents. From the result obtained, about 58% of respondents who have had sexual intercourse, 40% of respondents who use a form of contraception, 44.4% of respondents who engage in transactional sex and 52.1% who sext reported that they feel close to their parents, though the association between closeness to this selected sexual health profile was found to be statistically insignificant.

Also, from the result obtained, 30.2% of respondents who have had sexual intercourse feel very comfortable talking to their parents about problems with their boyfriend/girlfriend and also have the freedom to tell their parents/caregiver about anything that worries them, including their relationship and sexual related issues. and the association was found to be statistically significant. Additionally, most (34.4%) of respondents who engage in sexting do not feel comfortable talking to their parents about sexual related issues at all.

Table 2: Sexual Health profile of Public Tertiary Institution Students by Parent Communication Pattern

Communication patterns	Ever had sex	p-value	Use of contraception	p-value	Homosexuality	p-value	Transactional sex	p-value	Sexting	p-value
Do you feel close to your parents?		$\chi^2=3.19$ p=0.53		$\chi^2=9.03$ p=0.34		$\chi^2=3.59$ p=0.46		$\chi^2=5.14$ p=0.27		$\chi^2=7.51$ p=0.11
Yes, a lot	67 (57.8)		37 (53.6)		2 (33.3)		8 (44.4)		50 (52.1)	
Yes, somewhat	19 (16.4)		15 (21.8)		2 (33.3)		6 (33.3)		17 (17.7)	
No, not much	20 (17.2)		9 (13.0)		1 (16.7)		3 (16.7)		16 (16.7)	
No. not at all	6 (5.2)		4 (5.8)		1 (16.7)		1 (5.6)		8 (8.3)	
Don't know	4 (3.4)		4 (5.8)		0 (0.0)		0 (0.0)		5 (5.2)	
How comfortable do you feel talking to your parent about things that worry you?		$\chi^2=6.67$ p=0.08		$\chi^2=5.07$ p=0.54		$\chi^2=1.72$ p=0.63		$\chi^2=1.23$ p=0.75		$\chi^2=0.77$ p=0.86
Very comfortable	65 (56.0)		36 (52.2)		2 (33.3)		9 (50.0)		46 (47.9)	
Somewhat comfortable	24 (20.7)		14 (20.3)		2 (33.3)		5 (27.8)		26 (27.1)	
Not very comfortable	18 (15.5)		12 (17.4)		1 (16.7)		2 (11.1)		16 (16.7)	
Not at all comfortable	9 (7.8)		7 (10.1)		1 (16.7)		2 (11.1)		8 (8.3)	
How comfortable do you feel talking to your parent about problems with your boyfriend or girlfriend?		$\chi^2=25.07$ p<0.01**		$\chi^2=2.01$ p=0.98		$\chi^2=16.99$ p<0.002*		$\chi^2=0.69$ p=0.95		$\chi^2=3.49$ p=0.48
Very comfortable	35 (30.2)		23 (33.3)		1 (16.7)		5 (27.8)		24 (25.0)	
Somewhat comfortable	27 (23.3)		15 (21.7)		0 (0.0)		4 (22.2)		22 (22.9)	
Not very comfortable	26 (22.4)		16 (23.2)		4 (16.6)		5 (27.8)		21 (21.9)	
Not at all comfortable	26 (22.4)		14 (20.3)		0 (0.0)		4 (22.2)		21 (21.9)	
I don't have a boyfriend or girlfriend	2 (1.7)		1 (1.5)		1 (16.7)		0 (0.0)		8 (8.3)	
How comfortable do you feel talking to your parent about sexual related issues?		$\chi^2=21.92$ p<0.001**		$\chi^2=3.38$ p=0.91		$\chi^2=14.25$ p<0.007*		$\chi^2=2.09$ p=0.72		$\chi^2=6.72$ p=0.15
Very comfortable	26 (22.4)		16 (23.2)		0 (0.0)		6 (33.3)		11 (11.5)	
Somewhat comfortable	20 (17.3)		14 (20.3)		3 (50.0)		2 (11.1)		19 (19.8)	
Not very comfortable	31 (26.7)		17 (24.6)		1 (16.7)		5 (27.8)		27 (28.1)	
Not at all comfortable	37 (31.9)		21 (30.4)		1 (16.7)		5 (27.8)		33 (34.4)	
I don't have a boyfriend or girlfriend	2 (1.7)		1 (1.5)		1 (16.6)		0 (0.0)		6 (6.2)	

Table 3: Sexual Health profile by Information Shared by Parents of Public Tertiary Institution Students while Growing Up

Sexual health profile	Information Shared by Parents			P value	Total (%)
	None (%)	Minimum (%)	Extensive (%)		
Sexual Intercourse (N=300)					
Yes	37 (33.15)	47 (40.52)	32 (27.59)	$\chi^2 = 0.06$	116 (38.66)
No	61 (31.90)	74 (40.22)	49 (26.63)	$p = 0.97$	184 (61.34)
	98 (32.67)	121(40.33)	81 (27.00)		300 (100.00)
Use of contraception (N = 116)					
Yes	21 (30.43)	29 (42.03)	19 (27.54)	$\chi^2 = 0.21$	69 (59.48)
No	16 (34.04)	18 (38.03)	13 (27.66)	$p = 0.90$	47 (40.52)
	37 (31.90)	47 (40.52)	32 (27.59)		116 (100.0)
Homosexuality (N = 116)					
Yes	3 (50.00)	2 (33.33)	1 (16.67)	$\chi^2 = 1.00$	6 (5.17)
No	34 (30.91)	45 (40.91)	31 (28.18)	$p = 0.61$	110 (94.83)
	37 (31.90)	47 (40.52)	32 (27.59)		116 (100.00)
Transactional sex (N = 116)					
Yes	7 (38.89)	6 (33.33)	5 (27.78)	$\chi^2 = 0.59$	18 (15.52)
No	30 (30.61)	41 (41.84)	27 (27.55)	$p = 0.74$	98 (84.48)
	37 (31.90)	47 (40.52)	32 (27.59)		116 (100.00)
Sexting (N = 300)					
Yes	37 (38.54)	36 (37.50)	23 (23.96)	$\chi^2 = 2.26$	12 (4.00)
No	61 (29.90)	85 (41.67)	58 (28.43)	$p = 0.32$	84 (28.00)
	98 (32.67)	121 (40.33)	81 (27.00)		300 (100.00)

*p<0.05; **p<0.01; ***p<0.001

The table 3 above reveals the association between respondents' sexual health profiles and information shared by parents. The result obtained reveals that respondents who got extensive information from their parents had the least engagement in sexual intercourse, sexting and other risky sexual practices like transactional sex and homosexuality. The result also shows that respondents who used a form of contraception also had some level of information from their parents although not extensive but enough to influence their use of contraception.

Discussions

The study revealed that Parents marital status is statistically associated with sexual health profile of the students in tertiary institutions; therefore, the null hypothesis 1 is rejected. Furthermore, there is no significant relationship between mother/mother figure's level of education and father/father figure's level of education; therefore, the null hypothesis 2 is rejected. Parental communication on the selected sexual health profile was found to be statistically insignificant. Respondents who got extensive information from their parents had the least engagement in sexual intercourse, sexting and other risky sexual practices like transactional sex and homosexuality. The hypothesis 3 is also rejected. The results of the study could mean that parents marital status and education has little or no influence in engagement of young people in sexual activities (Olubukola & Akinjide, 2010) parents with tertiary level of education have adequate knowledge about sexual related topics to pass across to young people. As highlighted by Svodziwa et al., (2016), parents with a high level of education, decide to use other means of communication, like giving of learning materials to ensure that their children understand and get to know all the information about sexual health issues compared to others.

Conclusion

The study examined how sexual health of young people can be influenced by parental factors hence this study concludes, in as much as young people depend on multiple sources of information about sexual health, parents are the most consistent influence in young people's lives and

supportive communication enables young people to make a harmless and self-assured transition into adulthood.

Recommendation

Based on the findings of this study, it is recommended that parents should be educated on how to overcome constraints of traditional norms, limited information on sexual health and poor communication skills as regards sexual health with young people.

References

- Akinwale, O., Omotola, B., Manafa, O., Adeneye, A., Idowu, E., Sulyman, M., Adewale, D. (2006). An assessment of parent-child communication on sexuality in Lagos, Nigeria. *World Health Population* 2006;8(1):58-61.
<https://doi.org/10.12927/whp.2006.17891>.
- DiClemente, R. J., Wingood, G. M., Crosby, R., Cobb, B. K., Harrington, K., & Davies, S. L. (2001). Parent-adolescent communication and sexual risk behaviors among African American adolescent females. *Journal of Pediatrics*, 139(3), 407-412.
<https://doi.org/10.1067/mpd.2001.117075>
- Hansen, L., Mann, J., McMahon, S., Wong, T., Lisahansenhc-sc-gcca, E. L. H., Mann, J., & Sharonmcmahonhc-sc-gcca, S. M. (2005). *BMC Women 's Health*. 8, 1-8.
<https://doi.org/10.1186/1472-6874-4-S1-S24>
- Igras, S. M., Macieira, M., Murphy, E., & Lundgren, R. (2014). Investing in very young adolescents' sexual and reproductive health. *Global Public Health*, 9(5), 555-569.
<https://doi.org/10.1080/17441692.2014.908230>
- Kågesten, A., Gibbs, S., Blum, R. W., Moreau, C., Chandra-Mouli, V., Herbert, A., & Amin, A. (2016). Understanding factors that shape gender attitudes in early adolescence globally: A mixed-methods systematic review. *PLoS ONE* .
<https://doi.org/10.1371/journal.pone.0157805>
- Lagina, N. (2002). Parent-Child Communication: Promoting Sexually Healthy Youth. *Advocates for youth*.
www.advocatesforyouth.org

- Lottes, I. (2000). New perspectives on sexual health. In I. Lottes & O. Kontula (Eds.), *New views on sexual health: The case of Finland* (pp. 7-29). Helsinki, Finland: Population Research Institute. <https://doi.org/10.1023/B:ASEB.0000026619.95734.d5>
- Mmari, K., Sommer, M., Kabiru, C. W., Fatusi, A. O., Bello, B. M., Adepoju, O. E., & Maina, B. W. (2017). Adolescent and Parental Reactions to Puberty in Nigeria and Kenya: A Cross-Cultural and Intergenerational Comparison. *Journal of Adolescent Health*, 61(4), S35–S41. <https://doi.org/10.1016/j.jadohealth.2017.03.014>
- Musa, O., Akande, T., Salaudeen, A., and Soladoye, O. (2008). Family Communication on HIV/AIDS among secondary school students in Northern state of Nigeria. *African Journal of Infectious Diseases (AJID)*. 2, 1(Apr. 2008), 46-50
- Olubukola, O., & Akinjide G.,(2010). Who Breaks the Ice in Parent-Child Sexual Communication – Counselling Implications for Adolescent Health and Development? *International Journal for Cross-Disciplinary Subjects in Education*, 1(2), 88–92. <https://doi.org/10.20533/ijcdse.2042.6364.2010.0012>
- Svodziwa, M., Kurete, F., & Ndlovu, L. (2016). Parental Knowledge, Attitudes and Perceptions towards Adolescent Sexual Reproductive Health in Bulawayo. *International Journal of Humanities, Social Sciences and Education*, 3(4), 62–71. <https://doi.org/10.20431/2349-0381.0304007>