

Breaking Barriers and Overcoming the Odds Confronting Intergenerational Communication Barriers to Adolescent Sexuality Education in Southwestern, Nigeria

Ola Tolulope Monisola, Ph.D

*Department of Sociology
Faculty of the Social Sciences,
Ekiti State University, Ado-Ekiti, Nigeria
Tel.: +2348139389466 E-mail address: tolulopeola2003@yahoo.co.uk*

Doi:10.5901/mjss.2012.v3n3p89

Abstract *There is a growing need to effectively address the sexual and reproductive health needs of adolescents in Nigeria. Research shows a pattern of adolescent sexual behavior indicating early sexual debut and a prevalence of premarital sex. The traditional lack of interest in discussing sexuality at home, schools and churches creates a problem in teacher-student/ parent-child communication and this has affected sexuality and sexuality education adversely overcoming communication barriers to sexuality education is critical to the well-being of millions of adolescent in Nigeria today since communication barriers complicate the delivery of sexuality education both at home, churches and in schools. This paper therefore examines the dearth and ease in effectively communicating the idea of sexuality through the family, church and school which play major roles in socialization and ultimately, the education process. The paper concludes by discussing the social, health and educational implications of sexuality education in Nigeria.*

Keywords: *Adolescent, Sexuality, Barriers, Communications, Sexuality education.*

1. Introduction

Nigeria, the most populous country in Africa, has a predominantly youthful population. One quarter (25%) of all Africans and one-third of continents adolescent population live in Nigeria (Obono, 2010) Adolescent constitute a high risk group in terms of sexual and reproductive health problems and this according to Population Reference Bureau (2003) has been argued to be often overlooked or viewed through a lens of cultural values that limit care. The adolescence stage is a time when many young people exhibit risky sexual behaviors that are life-changing such as sex initiation, multiple and concurrent partnership, low contraceptive use and risky sexual practices. All these predispose young people to HIV and sexually transmitted infections.

In Nigeria, more than 60% of new HIV infections occur in youths ages 15 to 25. This takes place against a background in which on third of the country's population of about 160 million are aged 10-24 years (NPC, 2007). Bracato (Cited in Oborio, 2010) reported that there is minimal access to proven sexuality, family life or HIV and AIDS education that would help them become sexually healthy adults practice safe sexual behavior, and reduce unintended pregnancy and Sexually Transmitted Diseases (STDs) including HIV. Forman (2003) noted that here, a lack of information and a lack of voice continue to be primary causes of infection among the worst affected groups of women and youth adolescent and youth face multiple barriers to accessing reproductive and sexual health services and maintaining their reproductive health. These include lack of information and education, lack of youth-specific services, concern about confidentiality affordability and access to services social pressures and taboos (UNFPA Website).

Education programmes are recognized as an effective means of addressing the sexual and reproductive health needs of adolescents.

Government of the Federal Republic of Nigeria in her National Policy on HIV/AIDS, which is the country's central blueprint on the battle against the HIV/AIDS epidemic, and which makes copious provisions touching on sex education different contexts (See pp vii, 18, 27) acknowledges that a comprehensive information, education and communication (IEC) system is central to the nation's efforts to prevent the spread of HIV/AIDS and mitigate its impact (NACA, 2003). More effective communication about HIV/AIDS, and greater flows of information are central to the success of AIDS strategies, and for reducing the vulnerability that flows to and from HIV infection Information and Communication are sources of power in an epidemic characterized by its lack they confer the power to protest against infection, to influence decision maker and to live of dignity and equality once infected. In a region often characterized by resource limitations and fragmented infrastructures, information and communication are two of the most critical and abundant resources

available in the fight against HIV/AIDS. They are both the pre-requisites and enablers of an effective response (Forman, 2003)

This position conforms to the World Health Organization Strategy (WHO, 2005) regarding combating the disease, and it has led to the initiation and implementation of various information, education and communication programmes to improve the general public awareness about HIV/AIDS. These approach has had limited success because of barriers which are affecting sexuality communication process and the role it plays in sexual socialization of adolescents. Thus, the purpose of this paper is to build an understanding of the factors and processes that constrain and/or enhance communication on sexuality education among adolescents and agents of socialization in a developing world context. Since circle of influence on sexuality extends beyond the individual adolescent and family system, this paper besides complimenting previous findings will fill knowledge gaps by highlighting ways of improving communication on sexuality education between adolescents and parents, teachers and significant others. It will also help to identify other possible research areas for further study related to information, education and communication approaches to HIV/AIDS prevention among adolescents in Nigeria.

2. Why South West, Nigeria?

Nigeria is a West African country with a population of about 120 million and an annual growth of 2.8% spread over 350 ethnic groups and two major religions-Islam and Christianity. The country is divided into 36 states with a Federal Capital Territory and 774 Local Government Areas (LGAs). The States are grouped into six geopolitical zones as shown in the table 1 below:

Name of Zone	States within the Geopolitical Zone
South West	Ekiti, Lagos, Osun, Ondo, Ogun, Oyo
South East	Asia, Anambra, Ebonyi, Enugu, Imo
South-South	Akwa, - Ibom, Bayelsa, Cross River, Delta, Edo, Rivers
North Central	Benue, FCT, Kogi, Kwara, Nasarawa, Niger, Plateau
North East	Adamawa, Bauchi, Borno, Gombe, Taraba, Yobe
North West	Kaduna, Katsina, Kano, Kebbi, Sokoto, Jigawa, Zamfara

The South West geopolitical zone comprises of six States as shown on the table and they are referred to as the Yoruba speaking States. The Yoruba culture, according to Alaba (2004) can be defined as follows:

"The aggregate of the ways of life of the Yoruba-speaking peoples of southwestern Nigeria and their kiths and kins elsewhere in the world. It is a continuum beginning from their subsistence, communal, agrarian life of the pre-literate and pre-colonial times to the capitalist, individualistic, free enterprise life of the literate, colonial and post-colonial, modern times. In other words, a continuum of the traditional and modern aspects of the Yoruba culture provides a true picture of this concept. It is a dynamic phenomenon".

3. The conception of adolescent sexuality in southwestern Nigeria

Sexuality is an integral part of the human personality and has biological, psychological, cultural, social and spiritual dimensions. Adolescent sexuality refers to sexual feeling, behavior and development in adolescent and is a stage of human sexuality. Sexuality is often a vital aspect of teenagers live (Lynn, 2000).

The sexual behavior of adolescent is, in most cases, influenced by their culture's norms and more, their sexual orientation, and the issues of social control such as age of consent laws (Wikipedia). The study of adolescent sexuality can be divided into two important areas: the development of health sexuality in adolescent and the risk that are associated with too early or unsafe sexual activity. The emerging sexuality that accompanies adolescence poses fundamental challenges for young people. These include adjusting to the altered appearance and functioning of a sexually maturing body, learning to deal with sexual desires, confronting sexual attitudes and values, experimenting with sexual behaviors and integrating these feeling, attitudes and experience into and developing sense of self (Crockett, et al, 2003) adolescents responses to these challenges are profoundly influenced by the social and cultural context in which the live. In southwestern Nigeria, in contrast to many other developed countries, the topic of adolescent sexuality is often a taboo. Adults are uncomfortable with frank and serious discussions about sex and adolescent sexuality. Hoffman and Fuhermann (1996) have noted that adults often hold ambivalent attitudes towards young people, viewing them

simultaneously as 'small' adult also have difficulty acknowledging adolescents as sexual beings, and therefore adolescent sexuality is viewed as something that must be controlled and restrained. The words of the old Cole Porter Song, "in olden days, a glimpse of stocking was looked on as something shocking, now, heaven knows, anything goes....." Suggest that it is not only at this stage of history that we have worried about declining sexual standard and loose morals. The song also makes it clear that what is sexually appropriate or inappropriate change in accordance with the atmosphere of the times (Moore and Rosenthal, 2007). It is highly imperative to examine social factors influencing adolescent sexuality.

4. Social Factors Influencing Adolescent Sexuality

Cultural values and attitudes regarding sexuality are distilled through experience in everyday social through experienced in everyday social contexts. There are proximal and distal social influences on adolescent sexuality.

4.1 Distal and Proximal Factors

This is factors refers to the way in which such factors affect the individual at a given point in time; distal factors indirectly affect an adolescent whereas proximal factors may occur at both defined by a direct influence on an individuals adaptation (Capella and Weinstein, 2001) due to the direct influence, proximal factors have on outcome, they may also be labeled as process based because of their susceptibility to change based because of their susceptibility to change and the influence of intervention (Caldas, 1993). Distal factors are usually contextual and include demographic descriptors, because they are indirectly related to risk or adaptive outcomes they are regarded as unalterable. A typical proximal factor is parents. Parents can influence adolescent sexuality through four different avenues according to Thornton and Camburn (1987). Firstly, parental attitudes regarding adolescent sexual behaviors may influence adolescent attitudes. Second, the marital and child-bearing behavior of parents including experiences with divorce, remarriage living arrangements and apparent behaviors towards the opposite sex may provide and support role models for young people. Third, the religious environment of the home may affect adolescents' attitudes to sex and likely experience of sexual guilty. Finally, the educational and work experience of the parents may influence attitudes and present opportunities for sexual experience while the parents are many from home. Parents are not the only adult role models available to adolescents. Young people have about them many models of adult lifestyles in which diverse patterns of sexual expression are practiced

Distal factors on the other hand, is concerned with the border social content in which adolescents live and these plays a significant role in their sexual beliefs and behavior. The nature of that context and consequently, its impact, ranges from the overt and overwhelming world of the adolescent subculture, a world in which adolescents are bombarded by media messages about current (and ephemeral) mores, to the less obvious influences of societal institutions such as schools, religion and the law.

5. The concept of Sexuality Education

Sexuality education is the lifelong process of acquiring information and forming attitudes, beliefs and values about identity, relationships and intimacy. It encompasses sexual development reproductive health, interpersonal relationship affection, intimacy, body image and gender roles. Sexuality education addresses the biological, socio-cultural, psychological and spiritual dimensions of sexuality from:

- The Cognitive Domain
- The Affective Domain
- The Behavioral Domain

Including skills to communicate effectively and make responsible decisions (SIECUS, 2005) it was also defined by Alli and Mba (2006:85) as a:

"Planned process of education that factors the acquisition of factual information, the information positive attitudes, beliefs and values and the development of skills to cope with the biological, socio-cultural and spiritual aspects of human society"

The four primary goals of comprehensive sexuality education are:

- ❖ *to provide information about human sexuality*, including human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.
- ❖ *to provide an opportunity to question, explore, and assess sexual attitudes* in order to develop values, increase self-esteem, create insights concerning relationships with members of both genders, and understand obligations and responsibilities to others.
- ❖ *to help develop interpersonal skills—including communication, decision-making, assertiveness, and peer refusal skills—and help to create satisfying relationships.*
- ❖ *to help create responsibility regarding sexual relationships*, including addressing abstinence, resisting pressure to become prematurely involved in sexual intercourse, and encouraging the use of contraception and other sexual health measures.

The provision of sexuality education continued to be a sensitive issue in Nigeria because of the fear that the provision of such education would arouse young people's curiosity and encourage sexual activity. The Guideline for Comprehensive Sexuality Education in Nigeria was developed by the National Guideline Task Force, which comprised 20 governmental organizations working in the area of adolescent health, education and development in the country. The book was developed to fill the yawning gap between the information and services young people ought to receive and what was actually delivered to them. It served as an important step to help young people acquire accurate knowledge and develop responsible behavior that will help reduce the present high rate of unwanted teenage pregnancy, complication from unsafe induced abortion, sexually transmitted diseases and HIV/AIDS experienced in the country today. The guidelines provided answers to many important questions like, "What key concept should be taught in sexuality education?" and "At what age should specific information be taught?" The framework presented in the book served as a guide to be used to conduct sexuality education sessions for school age youths, as well as for parents and relevant communities. The Guidelines for Comprehensive Sexuality Education in Nigeria had already been reviewed by over 70 national organizations that had given written endorsements for its use for providing guidance to young people across the country (SIECUS, 2000).

6. Theoretical Clarifications

The theoretical orientation for this paper will be focusing on two theoretical models that have direct relevance for behavioural sciences. These are Socialisation Theory and Communication model.

6.1 Socialisation Theory

Theoretically, Socialisation Theory provides a basis for the current study of adult-adolescent sexual communication in relation to adolescent sexual behaviour. Socialisation Theory is based on the assumption that children and adolescents learn certain attitudes and behaviours early in life from adult role models, such as parents (Clawson & Reese-Weber, 2003). The attitudes and behaviours modelled by parents are learned by their children and portrayed in adolescence and adulthood (Philliber, 1980).

6.2 The Rommetveit and Blakar communication model

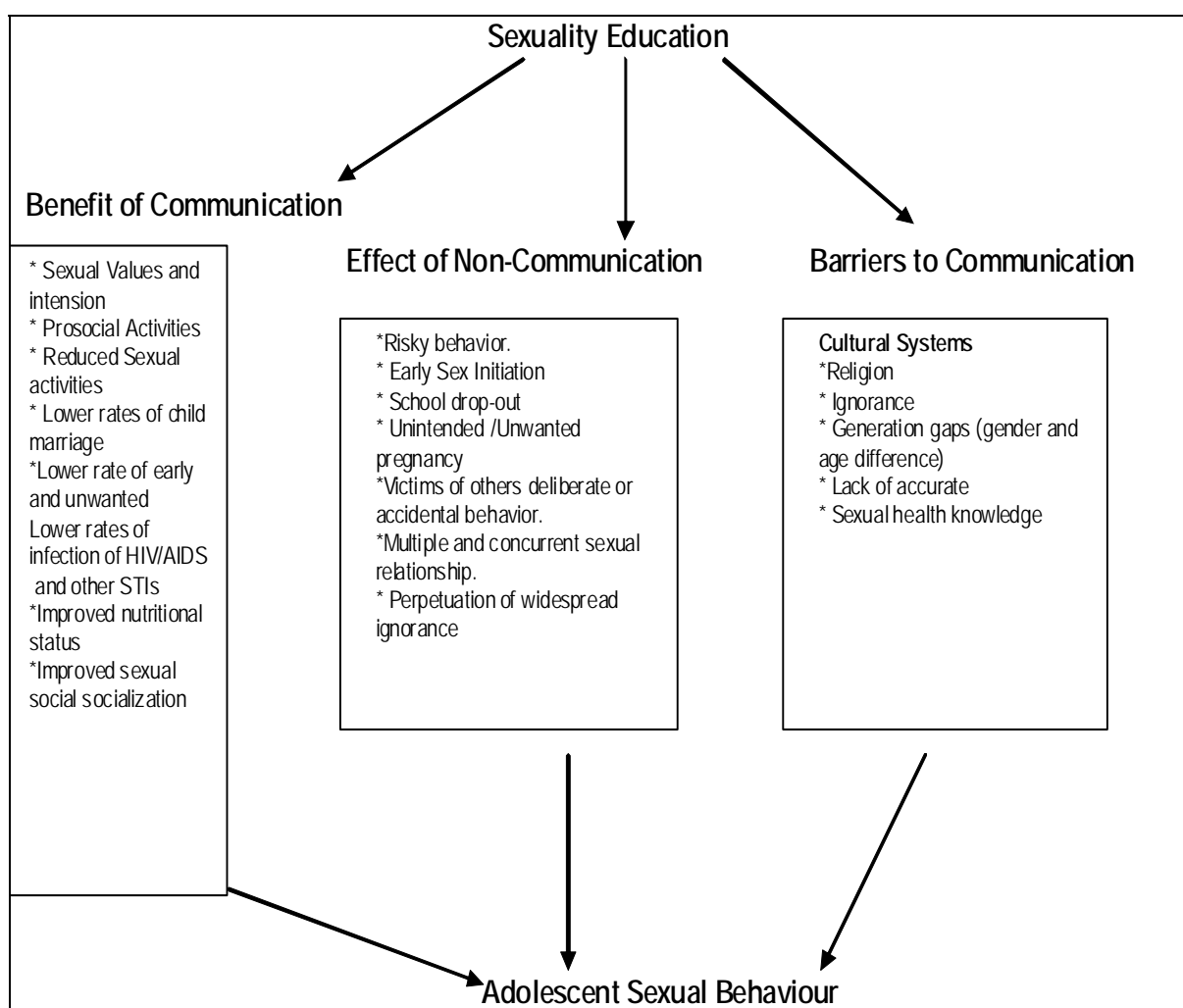
The Rommetveit and Blakar communication model addresses many relevant issues in the communication process and is thus adopted by this study. The model provides a dialogical perspective on communication (Blakar, 1984). The communication process is seen as an interaction between two parties, with each having the ability to influence the other. In the Rommetveit and Blakar communication model, there are six processes that are named as follows: (1) Production of messages, (2) Encoding of messages, (3) Decoding of messages, (4) Processing and memory of received messages, (5) Sender's anticipation of receiver's decoding, and (6) Receiver's listening to the premises of the sender (Blakar, 1984). According to Botchway (2004), a number of important points can be made about this conceptualisation of the communication process. The participants must be willing and able to produce a message. For example, if adults and adolescents consider communication on sexuality as a taboo subject not to be talked about, interaction is unlikely to occur. It is also obvious that participants must have the ability to relay messages to each other. This requires knowledge of the subject. In some situations this knowledge may simply be absent, such as parents' ability to present facts on HIV/AIDS due to their lack of knowledge. Furthermore, participants must have the mutual trust and confidence in each other for communication to be effective (Botchway, 2004). In the parent-adolescent sex communication process,

adolescents may regard their parents as being judgmental, overly protective, and disrespectful of their privacy and autonomy. Such factors may undermine the perceived trustworthiness of the parent as an information source, and the communication will not be effective.

Communicants must also have a shared worldview. Intergenerational differences between parents and children can cause misunderstanding. For example, parents may talk to adolescents about the dangers of unprotected sexual intercourse. Adolescents may erroneously think of this communication as a signal that the parents think they are actually having unprotected sex (Botchway, 2004). Nonverbal cues also affect the communication. For example, parents who speak in high or low tones, their eye contact with the child, and their gestures could all affect the child when he/she answers the questions. The social and situational context is also emphasised by this model. Parents may conceive of a message, but due to cultural taboos they may employ vague language to transmit their message. This may be due partly to the embarrassment associated with a parent and child communicating about sexuality (Botchway, 2004).

7. Conceptual scheme for sexuality education and adolescents' behaviour

Figure 1 shows a relationship of how sexuality education may affect adolescents' sexual behavior.



8. Conclusion

Raising sexual and reproductive health awareness forms a cornerstone of health promotion endeavours that target adolescents and young people in general. Parents, teachers and adults in general should provide adolescents sexuality education frequently. It will be important to ensure that the sexuality messages adults are providing are improved, and re-enforced through other channels like the media.

References

- Bendersky, M, & Lewis, M. 1994. "Environmental risk, biological risk, and development aloutcome" *Developmental Psychology*, 30(4), 484-494
- Blakar, R. 1984. "Communication: a social perspective on clinical issues". *Oslo: Universitetsforlaget*.
- Botchway, A.T. 2004. "Parent and adolescent males' communication about sexuality in the context of HIV/AIDS – A study in the Eastern Region of Ghana". *Unpublished Master's thesis. University of Bergen, Bergen, Norway*.
- Caldas, S.J . 1993. "A multivariate re-examination of input and process factor effects on public school achievement" *Journal of Educational Research*, 86, 206, 214
- Cappella, E. & Weintin R.S. 2001. "Turning around reading achievement: Predictors of high school students' academic resilience" *Journal of Educational Psychology*" 93 (4), 758-770.
- Clawson, C.L., & Reese-Weber, M. 2003. "The amount and timing of parent-adolescent sexual communication as predictors of late adolescent sexual risk-taking behaviours". *The Journal of Sex Research*, 40(3), 256-265.
- Crockett, Lisa J, Raffaelli, Marcela, and Moilanen, Kristinli. 2003. "Adolescent Sexuality and Meaning" *Faculty Publications, Department of Psychology. Paper 245. <http://digitalcommons.unl.edu/psychfacpub/245>*.
- Forman Lisa. 2003. "HIV/AIDS, Information and communication in Africa" *APC Theme Discussion Paper, 2003*
- Hoffman, N. & Futterman, M. 1996. "Youth and HIV/AIDS". In J. Mann and Tarantola (eds.) *AIDS in the World in the World II: Global Dimensions, Social Roots and Responses*. New York: Oxford University Press.
- Mba T. 2006. "Issues and trends in Nigerian education" *ED: Port Harcourt Pear publishers*.
- Moore, Susan and Rosenthal Doreen. 2007. "Sexuality in Adolescent: Current Trends" *Adolescent and Society Series. Taylor and Francis- Library, 2007*
- National Action Committee on AIDS .2003. "National Policy on HIV/AIDS". *National Action Committee on AIDS, Abuja: Nigeria, P 39*.
- National Population Commission 2007: "Final Result of the 2006 census" Abuja: National Population Commission.
- Obono, Oka and Modupe Mohammed .2010. "The liminality of adolescent sexual and reproductive behavior in Ibadan southern Nigeria" *The Nigerian Journal of Sociology and Anthropology Volume: 8 pages 55-85*
- Philliber, S.G .1980. "A conceptual framework for population socialization. *Population and Environment*, 3(1), 3-9.
- Ponton, Lynn. 2000. "The sex lives of teenagers" *New York: Dulton. P.2 ISBN0-0452-28260-8*.
- Population Reference Bureau: 2003
- Sexuality Information and Education Council of the United States of America. 2005. "Developing Guidelines for Comprehensive Sexuality Education" *SIECUS, New York*.
- Sexuality Information and Education Council of the United States of America. 2000. Approval of guidelines for comprehensive sexuality education in Nigeria for Nigeria schools. Making the connection – News and Views on Sexuality: Education, Health and Rights, 1 (1). (Online). Available at: <http://www.siecus.org/inter/connection/index.html>
- Thornton, A and Camburn, D. 1987. "The influence of the family on premarital sexual attitude and Behavior" *Demography*, 24: 323-340.
- UNFPA Website
www.Wikipedia.com