

**SEXUAL MATURATION AND SCHOOL PARTICIPATION FOR GIRLS IN RURAL
KENYA: A CASE OF KASIGHAU LOCATION, TAITA DISTRICT**

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**A PROJECT SUBMITTED TO THE INSTITUTE OF ANTHROPOLOGY, GENDER
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DECLARATION

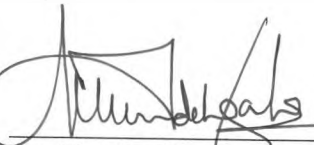
This project is my original work and has not been submitted for a degree at any other University.



Zipporah Nyamauncho Ongwenyi

23.11.2012
Date

This project has been submitted for examination with my approval as the University Supervisor and internal examiner



Dr. Charles Owuor Olungah

23.11.2012
Date

DEDICATION

I dedicate this work to:

My late father, Japheth Obegi Ongwenyi,
for your love, your constant belief in my potential, for your encouragement, and for
unwaveringly banking on me.

And

My sister, Lillian Ongweny,
for always having my back as I struggle to fulfill my dreams and ambitions.

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To all the people who participated in this research process; the various pupils, their teachers, and parents.

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TABLE OF CONTENTS

Declaration.....	i
Dedication	ii
Acknowledgments.....	iii
Table of contents.....	iv-v
List of tables.....	vi
List of graphs and figures.....	vii
Abbreviations and Acronyms.....	viii
Abstract.....	ix
Chapter 1.0 Background to the study.....	1
1.1 Introduction.....	1
1.2 Problem statement.....	3
1.3 Research questions.....	3
1.4 Study objectives.....	4
1.4.1 Overall objective.....	4
1.4.2 Specific objectives.....	4
1.5 Justification of the study.....	4
1.6 Definition of key terms.....	4
Chapter 2.0 Literature Review	5
2.1 Introduction.....	5
2.2 Girls' knowledge on sexual maturation.....	5
2.3 Girls' sources of information on sexual maturation.....	7
2.4 Support mechanisms available for girls.....	8
2.5 Sexual maturation and school participation.....	9
2.6 Theoretical framework.....	10
2.6.1 Liberal Feminism Theory.....	10
2.6.2 Relevance of the theory to the study.....	10
2.7 Study Assumptions.....	12
Chapter 3.0 METHODOLOGY.....	13
3.1 Research site.....	13
3.2 Research design.....	14
3.3 Study population.....	14
3.4 Sample population.....	14
3.5 Sampling procedure.....	15
3.6 Data collection methods.....	15
3.7 Data processing and analysis.....	16
3.8 Ethical considerations.....	16
Chapter 4.0 FINDINGS, INTERPRETATION AND DISCUSSION	
4.1 Demographic Characteristics.....	18
4.2 Girls knowledge on sexual maturation.....	19
4.3 Girls sources of information on sexual maturation.....	24
4.4 Support mechanisms available to girls.....	27
4.5 Sexual maturation and school participation.....	32
4.6 Summary.....	36

Chapter 5.0 CONCLUSION AND RECOMMENDATIONS.....	37
References.....	38
Appendices	
Appendix 1: Survey questionnaire for girls.....	40
Appendix 2: Focus group discussion guide for girls.....	42
Appendix 3: Interview guide for guidance and counseling teachers.....	43
Appendix 4: Interview guide for parents.....	44

LIST OF TABLES

Table 1: School Enrollment.....18
Table 2: Ages of respondents.....19
Table 3: Learning on sexual maturation.....20
Table 4: Menstrual cycle.....23
Table 5: Age at onset of menses.....27
Table 6: Growing up: My fears.....34

LIST OF GRAPHS AND FIGURES

Pie Chart 1: Learning on sexual maturation.....19
Pie Chart 2: Sources of information.....25
Pie Chart 3: Confidantes.....25
Pie Chart 4: Protection Used.....28
Pie Chart 5: Provider of sanitary pads.....28
Pie Chart 6: Needs of girls Vs boys.....31

Graph 1: Unique need of girls.....31

ABBREVIATIONS AND ACRONYMS

BAF	Binti Africa Foundation
CIC	Children In Christ
FAWE	Forum for African Women Educationists
FGD	Focus Group Discussion
GCN	Girl Child Network
HIV	Human Immuno deficiency Virus
KCPE	Kenya Certificate of Primary Education
KNEC	Kenya National Examination Council
MDGs	Millennium Development Goals
UPE	Universal Primary Education
SEGs	Sexually Experienced Girls
SIGs	Sexually Inexperienced Girls
TMOE	Tanzania Ministry of Education

ABSTRACT

The millennium development goals laid an emphasis on education, with goal number two making a commitment towards concerted efforts in achieving universal primary education by 2015. Though enrolment and access have increased in the past few years, gender parity in education in Kenya is yet to be achieved.

It has been noted that dropout for girls increases as you move into upper primary. This is more so the case in rural areas. A key reason for this is sexual maturation and the attendant inability to cope due to limited support mechanisms.

This paper discusses the knowledge that girls have on sexual maturation, and explores support mechanisms available both in school and at the home front. It then offers a conclusion on sexual maturation and its effect on school participation for girls, and makes a strong case for interventions in various spaces; School, Home and Government, to ensure retention of girls.

1.0 CHAPTER ONE: BACKGROUND TO THE STUDY

1.1 INTRODUCTION

Education is a key factor in determining development trends, particularly in the contemporary world. Yet, there is considerable disparity between men's and women's access to education. Sixty-four per cent of women in sub-Saharan Africa are illiterate compared to 40 per cent of the male population (UNESCO, 1990). This is so even when it has been documented that educating girls has ripple effects on the society.

Educating girls, particularly at the primary and lower secondary levels, is one of the most productive investments that society can make in terms of its social and economic development. Growth accounting studies have demonstrated the correlation between an educated female populace and a country's gross domestic product. Educating girls initiates a process of intergenerational poverty reduction that contributes to both family welfare and household income. Educated women are more likely to find employment, earn higher wages, and be more economically productive; have fewer children but increase the chances of both maternal and child survival; have healthier families through better nutrition and health practices; and ensure that their own children – daughters and sons- are educated, initiating a “virtuous cycle” that contributes to the wellbeing of future generations (USAID, 1998; Herz & Sperling, 2004; UNICEF 2004).

As the world advances in many spheres, gender disparity and inequality in education still poses formidable challenge and insistently acts as a reminder of the failed objectives and missed targets in regard to equal access to education as expressed by international conferences, many of which Kenya has been a part of. These include the 1990 conference held in Jomtien, Thailand, and the Education for All World Conference held in Dakar in 2000 (<http://www.un.org/millenniumgoals/>).

Over time, attempts have been made to explain gender disparity in education, and the poor performance of girls in schools. Girls who are able to access schooling are not assured of leading better lives. This is because their retention and transition rates are still

low (Ruto et al., 2009). Recent reports like the Binti Africa Foundations report of 2008, have pointed the lens to the human growth process and cited sexual maturation as a factor in the retention of girls, especially at primary school level.

In medical terminology, sexual maturation refers to the achievement of full sexual capacity in animals and humans. Sexual maturation is also referred to as puberty. Puberty marks the point in human development where both males and females gain the capability to procreate (<http://www.answers.com/topic/puberty>). It occurs during adolescence, which begins as early as age 10 and is usually completed by age 17. For girls, a rising level of oestrogen (female hormone) sets the process in motion. Pelvis and breast development are followed by a spurt in height and then the growth of underarm and pubic hair. Finally, menarche, the beginning of the first menstrual cycle, occurs (<http://www.answers.com/topic/puberty>).

In most of Africa, sexual maturation (also referred to as puberty or adolescence) is also a cultural and social construct that determines the age at which boys and girls take different social roles, and marks the transition from childhood and the distinction of being either man or woman.

According to the Girl Child network report of 2004, physiological and psychological changes that occur in the process of sexual maturation are thought to have an effect on girls participation in formal education. Menstruation for example introduces new costs in the form of sanitary protection that may not be available to majority of girls from low income populations. The ability to procreate also introduces a new risk of pregnancy, which is a cause for school dropout. This study looked at sexual maturation in girls, with an emphasis on menstruation, and sought to find out how it interferes with their school participation.

1.2 PROBLEM STATEMENT

The millennium development goals laid an emphasis on education, with goal number two making a commitment towards concerted effort towards achieving universal primary education by the year 2015. Although access has considerably increased in Kenya with the introduction of free primary education, gender balance in education is yet to be achieved.

It has been documented that dropout for girls increases as you move into upper primary. Several reasons have been given. Among others, they include; an increase in the gender burden, the patriarchal nature of society, socialization and unfriendly school environment. However, insufficient attention has been given to the correlation between the dropouts and girls growth.

This study was therefore designed to unpack the body of knowledge on how sexual maturation affects the participation of girls in school, in order to come up with targeted interventions to equip girls with necessary information and skills to manage the process of sexual maturation. To achieve the set goal, the study was guided by the following research questions:

1.3 RESEARCH QUESTIONS

- What information do girls have on sexual maturation?
- What are the sources of information on sexual maturation for girls in rural areas?
- What kind of support do girls receive regarding sexual maturation, and from whom?
- How does sexual maturation interfere with girls' participation in the classroom?

1.4 STUDY OBJECTIVES

1.4.1 Overall Objective

To explore how sexual maturation interferes with school participation for girls in rural Kenya.

1.4.2 Specific Objectives

- To document girls knowledge on sexual maturation.
- To find out the sources of information on sexual maturation for girls
- To investigate the support mechanisms available to girls experiencing sexual maturation.
- To find out how sexual maturation interferes with girls' participation in school.

1.5 JUSTIFICATION OF THE STUDY

Kenya is one of the countries that have recognized the need for gender equity in education as a way of enabling girls and women to contribute to the national growth objectives. The country has also ratified a number of instruments towards gender equity in education.

This study sheds more light on sexual maturation, an issue that is acknowledged as existing but which has not received much attention both in public and private spheres. The study therefore contributes to the evidence needed for policy formulation. It also contributes to the general body of basic knowledge in the sexual maturation arena and acts as an advocacy tool to be used by organizations that are involved in championing the rights of the girl child in education.

1.6 Definition of Key Terms

Sexual maturation: The achievement of full sexual capacity in animals and in humans. Sexual maturation is also referred to as puberty.

Participation: Refers to the ability to be able to take part in various school based activities.

2.0 CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This section is a review of literature to establish what has been written regarding girls' knowledge on sexual maturation, their sources of information, the support mechanisms available to them, and how sexual maturation relates to their school performance.

2.2 Girls' Knowledge on Sexual Maturation

Most of the knowledge that girls have on sexual maturation is centered on menstruation. In a survey done on girls' knowledge on sanitary health, the most common information that girls reported having learnt about menstruation was that it is a monthly experience. The second most common issue learnt by girls was that it was dangerous to have sex once menstruation begins. Menstruation was linked to pregnancy; with girls stating that what they learnt on menstruation was 'not to play with boys and to take care'. Others were taught that 'it is dangerous to have sex after the onset of menstruation'. This underlies the fact that knowledge on menstruation passed on to girls was scanty and in most cases misunderstood (BAF, 2008).

It was also observed that while teachers lead in efforts to inform girls about menstruation, all they seem to concentrate on are the biological facts about the phenomenon, with very little or no information on menstrual hygiene and effective management of menstruation. This fact was further reinforced by girls who indicated that what they learnt was from a science topic on reproductive health (BAF, 2008).

An exploratory research done in Kenya by Quality Education for Social Transformation (2006) found that in the first instance, a special focus on managing sexual maturation was justified on the basis that successfully navigating the process by which a 'child' becomes an 'adult' 'is one of the most fundamental of all 'life-skills'. The study further stated that one need look no further than the HIV/AIDS pandemic to understand the extent to which the acquisition of knowledge about sexual and reproductive health - but also the capacity

to use this knowledge effectively - has literally become a life or death issue for young people on the continent. The formal schooling system has an increasingly important role to play in providing direction and guidance around the process of sexual maturation, particularly as more traditional structures have either broken down in the rush to modernity and urbanization, or have become less able to deal with contemporary demands and responsibilities (www.questafrica.org/SexMaturationLifeSkills.aspx).

A study on Adolescent sexual behaviour, knowledge and attitudes to sexuality among school girls in Transkei, South Africa published online (<http://www.ncbi.nlm.nih.gov/pubmed/8756047>) indicates that teenagers make up a quarter of all mothers in Transkei, South Africa, and well over 75% of them are unmarried. Such a high rate of teenage pregnancy is indicative of a high level of unprotected adolescent sexual activity. Sexual behaviour, knowledge and attitudes to sexuality among adolescent school girls in Transkei were studied in order to establish the incidence of sexual activity, and associated risk factors. Of the 1072 respondents, 74.6% were already sexually experienced, and 21.0% were not.

The study also found that majority of sexually experienced girls (SEGs) and sexually inexperienced girls (SIGs) were living with both their parents. There were no religious differences between the two groups of girls. The age of SEGs at first coitus correlated positively with the age of menarche, and the age at the first date, suggesting that sexual maturation and onset of dating were possible risk factors for initiation of sexual activity. Contraceptive use was low, and a third of SEGs had been pregnant at least once.

It also revealed that the knowledge of reproductive biology among both groups of girls was generally poor, although SEGs were significantly more knowledgeable than SIGs. The majority of girls in both groups did not approve of premarital sex, and adolescent pregnancy. They also did not approve of the idea of introducing sex education in schools, or the provision of contraceptives by schools. Nearly a third of the respondents in both groups did not wish to get married in future.

The study concluded that there was a high level of unprotected sexual activity among school girls in Transkei. The risk factors for this included early sexual maturation, early onset of dating, and poor knowledge of reproductive biology and contraceptives. Overall, the findings indicated that early sexual maturation, early onset of dating, and poor knowledge of reproductive biology and contraception represented risk factors for unprotected sexual activity in this population and suggested a need for school-based family life education introduced before girls initiate sexual activity.

Another study on “Comparing the self-image of prepubescent girls before and after four sessions on body awareness” found that increasing the knowledge of prepubescent girls concerning emotional and physiological changes would result in a more positive self-image. The procedure consisted of pretesting with the "How I See Myself Scale" and the "Sex Knowledge Test," teaching a four-session Body Awareness Course and post testing with pretest instruments. Body awareness of the participants was significantly increased following the course. Self-image was improved, although not significantly. Each participant indicated a strong interest in body awareness and her developing sexuality. This study suggests that prepubescent females need and desire factual information about their physical and emotional concerns (<http://www.ncbi.nlm.nih.gov/pubmed/>).

2.3 Girls' sources of information on sexual maturation

The Binti Africa Foundation baseline survey (BAF, 2008) done in Kenya observes that girls learnt about menstruation and maturation from the girl guides clubs. Other schools were exposed to sex education under the Children in Christ (CIC) clubs by World Vision. This suggests that Nongovernmental organizations can play a role in dissemination of information on sexual maturation to school going girls.

In the same survey, the most commonly cited sources of information to girls on menstruation were their teachers, followed by mothers. Sisters were the third most influential group of people in giving information to their school going siblings.

Girls were also found to be more comfortable speaking about menstruation with their fellow pupils or girlfriends.

2.4 Support mechanisms available for girls

A study by the Girl Child Network (2004) found that most schools did not construct toilets with gender differences and needs in mind. In some schools, there were pit latrines that serve both boys and girls without caring to separate the latrines. In others, boys had more pit latrines (3-4 holes plus a urinal space), than girls, even though the number of girls and boys in the school was equal. Latrines also had no walls, and doors were falling apart. In yet other cases, there were makeshift latrines with no roofs and walls, and covered with leaves, plastic or torn canvass materials. In some cases, toilets did not even exist. The study also found that most girls are shy to talk about their experiences during menstruation and prefer to “fall sick” during this period.

Teachers do not also offer support for girls. The teachers shame the girls and sometimes crack jokes about them. They especially do this to the bigger girls, calling them *mama*¹ and telling them that they are dirty. They also tell them things about their periods in the full presence of the boys which embarrasses some of the girls (GCN, 2004).

However, a study by BAF (2008) found that there is limited support in the schools for both boys and girls during their maturation process. Whereas boys are not deemed needy of support, the school management committees recognized the need for girls to be educated and empowered with life skills to manage maturation and menstruation. The head teachers recognize that women teachers can play a role in guiding and assisting girls on maturation and menstruation issues. However, this is not possible in all the schools where there are limited numbers of female teachers, who teach in the lower primary classes, which may not have girls who are going through maturation (BAF, 2008).

Recent studies by Quest Africa suggest that the current management of sexual maturation within the primary education system is systematically failing to meet the needs of all children, especially girls, at three different levels:

¹ *Mama* is a Kiswahili word meaning mother, or mature woman. In this context, it is used to mean mature woman.

- (a) Providing accessible and accurate knowledge and information about the process of sexual maturation;
- (b) Providing essential facilities to ensure that children (especially girls) are not excluded from full participation in the system because of their maturing bodies; and
- (c) Providing an adequate and appropriate value system through which children can be guided into safe and healthy adulthood (<http://www.questafrica.org/GrowingUp.aspx>).

2.5 Sexual maturation and school participation

The GCN (2004) gender report states that the psychic cost (loss of dignity and privacy) incurred by girls who learn in gender insensitive environments is very high. The result is that girls in such schools that have no toilet facilities for girls will be absent from school and eventually drop out of school altogether. Studies in other countries like Lesotho, Rwanda and South Africa (Abagi 2002; 2003) support such conclusions and have indicated that lack of or limited school facilities, including toilets and sanitary facilities, negatively affects girls' participation in education.

In examining the strides, achievements, and gaps in the field of women's and girls' education in East Africa since the 3rd UN International Women's Conference held in Nairobi in 1985, Ruto et al., (2009) point out that in East Africa, the largest margins of increased access for girls have occurred in Uganda. Uganda has been the most proactive in promoting girls' education, and prioritizing the girl-child education in its educational interventions. In a bid to improve the qualitative aspects of schooling, Uganda introduced the child friendly basic education and learning programme; a concept with six broad components, one of which is to make the schools girls friendly. One of the strategies is having a senior woman teacher in each school that acts as a mentor and confidant to girls and helps them deal with issues of maturation.

In a study carried out by FAWE (1999) in Malawi, lack of sanitary materials and period pains were the major factors that influenced absenteeism among girls. Their absence from school was therefore, not school related. The provision of sanitary materials is the

responsibility of parents/guardians. The cost of providing such materials to allow for girls to attend school comfortably is an additional cost of educating girls, which may be difficult for some households to shoulder. These added costs are often ignored in calculations of the costs of girls' schooling.'

A study conducted by the Institute of Development Studies (Sussex) and the Tanzania Ministry of Education (TMOE) on gender and primary schooling in Tanzania in 2004 found that the onset of puberty marks deterioration in girls' performance at primary school. During the later grades of primary school, boys and girls reach adolescence. However, the physical and social impact of puberty appears to have only a negative effect on girls' education. Puberty brings with it new problems for both boys and girls, for which they are very few coping mechanisms within the school system. Many girls receive little guidance on how to handle the implications of physical changes to their body and how to deal with menstruation while at school.

In the context of a harsh environment and traditional social attitudes where open discussions of puberty are taboo, girls need guidance and assistance in overcoming the transition to adulthood while remaining in the education system.

Early marriage is also associated with sexual maturation in girls. It perpetuates the feminization of poverty, preventing girls from attaining their full potential in terms of developing their social capabilities. Hence, it violates girls' human rights, especially their right to sexual and reproductive choices and health care (Sweetman, 2003).

2.6 THEORETICAL FRAMEWORK

This study has explored sexual maturation issues that affect the participation of girls in school. *It has looked at the issues through the lens of unavailability of information. The liberal feminism theory has been used to situate the lack of information to girls on sexual maturation as denial of a right.*

2.6.1 Liberal Feminism Theory

This study was guided by the liberal feminism theory. This theory argues that the inequality of women stems from denial of equal rights and from women's learned reluctance to exercise those rights. The goal of liberal feminism is equality, and the construction of a social world where all persons can exercise individual freedom. Society would reap benefits if women were recognized as rational and worthy of civil liberties and economic opportunities.

It also argues that marriage and motherhood are overvalued, and women need their own identity, equality, and political power. Liberal feminists wish to free women from oppressive gender roles as society is structured in ways that favor men (http://www.cas.unt.edu/~gailm/Feminist_Theory.rtf.htm).

Proponents of the liberal feminist theory include Mary Wollstonecraft who in 1792 published a book "A vindication of the Rights of the Woman" in which she argued that women are not naturally inferior to men, but appear to be so only because they lack education. She suggested that both men and women should be treated as rational beings and imagined a social order founded on reason (http://en.wikipedia.org/wiki/Mary_Wollstonecraft).

The 19th Century John Stuart Mill was a supporter of liberal feminism and believed that men are not intellectually above women and much of his research centered on the idea that women, in fact, are superior – in knowledge than men (http://en.wikipedia.org/wiki/Feminist_theory).

2.6.2 Relevance of Liberal Feminism to the study

Liberal feminism focuses mainly on issues of equal opportunity in access to resources for women. It is relevant to the study in addressing issues of lack of information on sexual maturation, and lack of support for girls experiencing maturation, which eventually denies them equal participation in education. It supports one of the study assumptions

that there is limited knowledge on sexual maturation to equip a girl with the necessary information and resources to stay in school. Menstruation is one of the effects of sexual maturation, and as it is a female construct, little energy and resources have been put into understanding it, and supporting girls and women, as opposed to what may have been the case if it was a male construct.

2.7 Study Assumptions

- Girls in rural areas have limited information on sexual maturation.
- Sources of information on sexual maturation are limited.
- Girls experiencing sexual maturation have limited support mechanisms.
- Sexual maturation affects girls' participation in school

3.0 CHAPTER THREE: METHODOLOGY

This section describes the study site, study design, sampling and discusses the various methods that were used to collect the data, and how the data was analyzed. Ethical considerations for this study are also covered here.

3.1 Research Site

The study was conducted in Kasighau location of Voi Division, Taita District, in Coast Province. The area was chosen through purposive sampling. The former coast province is one of the regions in the country that has historically posted low performance and thus transition rates in the Kenya Certificate of Primary Examination (KCPE) annual national examinations (KNEC, 2005).

Taita District was carved out of the greater Taita Taveta District in 2007. It occupies the south west part of the province. Its neighbours include Tana River, Kitui and Makueni Districts to the North, Kwale and Kilifi districts to the east, Kajiado District to the North-West and the republic of Tanzania to the south and south west (Taita Taveta District Development Plan, 2001).

Kasigau Location is located off the Nairobi-Mombasa Highway at the Maungu truck stop junction. It is approximately 90 kilometers from Voi Town. The main economic activity in the area is subsistence farming although with very little yield. There is widespread human-wildlife conflict in the area in the form of elephants that roam from the adjacent Tsavo National Park (District Development Plan, 2001)

The area is mainly inhabited by the Taita, Duruma and Kamba peoples and presents an interesting perspective on the various cultural inhibitions that surround sexual maturation issues that invariably affect the participation of girls.

There are eleven primary schools in Kasigau location, and one secondary school. School performance has generally been low in the area with an average mean score varying between 260 to 280 marks out of a total of 500 marks posted in the KCPE exams over the years. The main issue that surrounds girls' education in this area is school drop outs due

to pregnancy (BAF 2008). Culturally, girls are married off at an early age, often to older men. Teenage pregnancies are therefore rampant, though these pregnancies are within marriage.

3.2 Research Design

The study was exploratory in design, employing both qualitative and quantitative methodologies. It explored girls' knowledge on sexual maturation, the availability of information on sexual maturation, identified knowledge gaps, assessed the participation of girls in school and sought opinions on the whole topic of sexual maturation as it relates to girls' school participation.

Qualitative data was collected using FGDs, in-depth interviews, and observations while quantitative data was collected using questionnaires. Findings are presented in report formats with the use of graphs, tables, and pie charts. Qualitative information has been analyzed thematically and verbatim quotes used to enrich the information and amplify the voices of informants and the FGD participants.

3.3 Study population

The study population consisted of 2,945 pupils, 1,100 of whom were girls. This population was drawn from the eleven primary schools in the location (BAF, 2008).

3.4 Sample population

The sample population was a total of 2,506 pupils in the five schools.

The sample size was 100 girls who participated in the survey, 40 girls who were part of the 5 FGDs, 5 teachers, and 5 parents drawn from five schools in the area acted as key informants. The five schools were selected purposively with a focus on the five schools around the Nyangalla Hills that form a homogenous region with similar socio-economic characteristics.

3.5 Sampling Procedure

The study used random sampling to select 20 girls from upper primary in each of the five schools for the questionnaire. Class registers were used to come up with a sampling frame, and girls were then selected using random sampling. This gave a total of 100 girls who were then subjected to the questionnaire.

For the Focus Group Discussions, eight girls were selected in each school, bringing the total number to 40. Classes five, six, seven and eight were purposively sampled, and in each class, random sampling was used to select two girls to participate in the FGD.

All five schools each had a guidance and counseling teacher, and they were drawn for the study as key informants, bringing the total to 5.

A parent was selected from each school through convenience sampling, which selected a parent that was a member of the school management committee and likely to be found in school.

3.6 Data collection methods

Various methods were used to collect data for the study.

3.6.1 Survey

Data was collected using structured and unstructured questionnaires that were administered by the research assistants to 100 girls. This method helped to gather respondents' biodata, their knowledge on sexual maturation, sources and nature of support mechanisms, and the girls' opinions on the link between sexual maturation and girls' educational participation.

3.6.2 Focus Group Discussions

Five FGDs were held with a group of eight girls in five schools. The eight girls were selected from class five to class eight, with each class having two representatives. Focus group discussions sought to achieve triangulation as the questions built up on those in the

questionnaires. In order to ensure equal participation, the researcher took time to introduce the subject, and encouraged particular individual opinions during the discussion, such that everyone gradually understood that their view was being sought on every topic.

3.6.3 Key informant Interviews

Key informant interviews were held with guidance and counseling teachers in the five schools. To understand the home situation, interviews were held with five parents, one of whom was male. Incidentally, all guidance and counseling teachers were female. The same questions applied to the female parent were also applied to the male parent and offered insight as to which sex of parent is mostly aware about sexual maturation issues. Information sought ranged from the kind of support they offered, whether they knew when their daughters started menstruating, and if they had any indication as to whether the onset of growth affected the education of their daughters.

3.7 Data Processing and Analysis

The quantitative data was analyzed using the Statistical Package for Social Sciences (SPSS) software which is then presented using frequencies and descriptive statistics.

Qualitative data was analyzed thematically and used to enrich the quantitative data, and also to draw conclusions as guided by the objectives and assumptions of the study. In areas where individuals made presentations that captured certain themes, verbatim quotes have been used to amplify the voices of the informants and the FGD participants.

3.8 Ethical Considerations

The ethical problem inherent in a study of this nature is that of informed consent, as most of the girls in the study were below the age of 18 and therefore, still classified as children. Consent therefore, was sought from the head teachers who are entrusted with the welfare of the children in the school system. In addition, each tool was preceded with a brief concise paragraph informing the respondents on the purpose of the study and seeking their informed consent. To protect the privacy of the respondents, no tool

required that respondents indicate their names. Confidentiality was observed at all times and the write up has used pseudonyms instead of any identifier that can compromise the identity of any of the sources of information. I also expect to give them feedback on my findings at the end of the exercise.

4.0 CHAPTER FOUR: FINDINGS, INTERPRETATION AND DISCUSSION

In this chapter, the researcher reports the findings on various areas of the study by focusing on the demographic characteristics of the respondents, and the objectives set out at the beginning of the research.

4.1 Demographic characteristics

The study took place in five primary schools; Makwasinyi, Buguta, Mkamenyi, Kisimenyi, and Sasenyi. The school populations are as follows;

Table 1: School Enrollment

SCHOOL	Std 1		Std 2		Std 3		Std 4		Std 5		Std 6		Std 7		Std 8		TOTAL
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	
Kisimenyi	43	43	30	28	15	18	29	25	37	20	24	17	18	30	14	5	405
Mkamenyi	23	31	23	15	29	19	31	24	24	25	17	13	9	14	13	5	315
Sasenyi	49	54	22	35	35	46	45	34	35	34	35	26	44	34	14	8	550
Buguta	95	88	98	93	47	67	68	75	53	62	56	41	35	21	10	10	919
Makwasinyi	28	26	23	26	13	22	25	21	15	16	15	30	20	13	15	9	317
TOTAL	238	242	196	197	139	172	198	179	164	157	147	127	126	112	66	37	2,506

Data in Table 1 indicates high enrollment of both boys and girls in standard one, but generally shows a marked decrease in enrollment as one goes higher. This is true for all schools studied. In total, there are 242 girls in standard one in all the schools combined, as opposed to 37 girls in standard 8 in all the schools combined. This is one of the first indications that though the numbers of boys also decrease, girls numbers reduce more drastically, pointing to possible greater challenges in girls' education.

4.1.1 Age of Respondents

Total number of pupil respondents for the questionnaire was 96, ranging from 12 years to 20 years. Four of the respondents did not divulge any information, hence their questionnaires were not part of the analysis. There were five different focus group discussions and eight girls took part in each, bringing the total to 40 participants aged between 10 years and 18 years. There were also 10 key informants. Ages of pupils are presented in the table below:

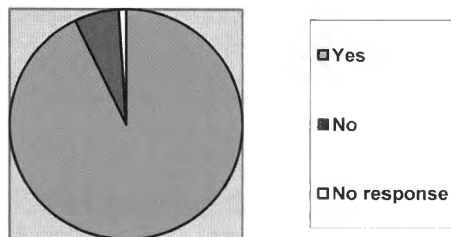
Table 2: Ages of respondents

AGE (Yrs)	NUMBER
12-14	30
15-17	52
18-20	14
TOTAL	96

4.2 Girls knowledge on sexual maturation

The study sought to find the information that girls had on sexual maturation in general, and menstruation in particular. With respect to maturation, eighty nine of the respondents, representing 93% indicated having learnt something on the subject, while 6.2% did not have any prior knowledge

Pie chart 1: Have you learnt anything on sexual maturation?



Although the majority of respondents said they had learnt something on sexual maturation, the information they gave on their knowledge was varied, as captured in the table below;

Table 3: Learning on sexual maturation (Multiple responses given)

ANSWER	FREQUENCY	%	THEMES (%)
I did not understand it	7	6	6
It is adolescence in boys and girls, and starts from age 9-12	15	12.5	51.1
It is the changes that take place from childhood to adult, like menstruation, emotional and physical changes	44	37	
In girls, hips become broader and they have soft voice	2	1.6	
It is flowing of blood from the vagina during monthly periods	20	17	21.8
During maturation, you use a piece of cloth	1	0.8	
It is the released egg from the ovary or blood that comes out	2	1.6	
You must be clean during your menstrual period	2	1.6	
You drink hot water when you reach adolescence because of pain	1	0.8	
It might cause pregnancy	2	1.6	
It is having sex	8	6.6	
You should not have sex when you get to adolescence	2	1.6	
It is having feelings to do what you want	4	3.3	
We should respect our bodies	1	0.8	
It causes a disease called HIV and AIDS	2	1.6	1.6
No answer	5	4.2	4.2
TOTAL	120	100	

The responses coalesce around five major themes; Lack of knowledge, Adolescence, Menstruation, Sex and reproduction, and HIV and AIDS.

The first, lack of knowledge, represents 6% of the pupils who indicated that though they had learnt about sexual maturation, they did not understand it. A possibility arises that the sources of information on sexual maturation for this group may not have felt competent enough to pass on the information, or were hindered from expounding because they were uncomfortable with the subject. The pupils on their part did not give feedback to indicate that they had not understood the topic well enough. Therefore, even if the pupils indicated that they had learnt something on sexual maturation, they were not confident enough to indicate what they knew. In one of the Focus Group Discussions, the participants completely refused to divulge what they knew about sexual maturation. This lack of response lends credence to those pupils that filled in the questionnaires and

admitted to lack of understanding of sexual maturation. It also shows that sexual maturation may be taboo and should therefore not be discussed openly.

The second and most popular theme is that which equated sexual maturation to adolescence, and physical changes taking place in the body. The sum total of 51.1% of the pupils fell in this category. Sexual maturation was said to be the emotional and physiological changes taking place in both boys and girls, starting from the age of 9 to 12 years.

The responses that coalesced around menstruation, gave the suggestion that to the pupils, sexual maturation and menstruation are synonymous. The sum total of 21.8% of the respondents thought that sexual maturation was the flow of blood during menstrual periods, and offered explanations on the process (release of the egg from the ovary), the care (using a piece of cloth and being clean), and how to cope with the discomfort (drinking of hot water). Participants in the focus group discussions echoed that sexual maturation meant monthly periods, and in the words of one participant, "*it is just how girls are supposed to be*".

The fourth theme that was evident among a sum total of 13.9% of the respondents was Sex and reproduction. To some, sexual maturation was having sex, while to others; it meant putting a stop to having sex since you could get pregnant. The perception here then is that it is not wrong to have sex, so long as it does not get you pregnant, and therefore, one of the hazards of sexual maturation is that you could get pregnant. Sexual maturation was also thought to be doing what you want, i.e. being mature enough to give in to bodily desires. The underlying message in all the responses depicting sexual maturation as sex and reproduction was that sexual maturation entails negotiating with ones sexuality.

The focus group discussions also drew responses that sexual maturation involves being careful of boy and girl relationships, abstaining from sex and early pregnancies, being faithful and avoiding drugs. Others said that it was sexual relation between a man and a woman, and indeed, to sum it up in the words of a fourteen year old girl, "*sexual maturation is when you reach the age of having sex*".

Only two responses indicated that sexual maturation brings forth a disease- HIV and AIDS. This could be tied up with the sex theme, being that sexual maturation is thought of as a potential way to contract HIV and AIDS when one becomes sexually active. However, this thinking precludes all the potential ways of HIV and AIDS transmission, which are not necessarily sexual.

Information given by pupils as to what sexual maturation is, generally points out to doubt, and in many cases misinformation. Pupils are struggling to put together meaningful explanations to a phenomenon they know they ought to be aware about, but of which they lack sufficient information to be self confident and articulate.

Since it was clear that most of the pupils knew something about menstruation, a different angle was used to gauge the extent of their knowledge specifically on the topic of menstruation. It appeared that though the pupils may know what menstruation is, few (1.6%) know what exactly the menstrual cycle is. A staggering 50.8% indicated that they knew nothing about the menstrual cycle.

In the focus group discussions, the attributes of adolescence (growth spurts, pubic hair, breasts and menstruation) were given as meaning the menstrual cycle. As one girl said *“Menstrual cycle is when your body finishes becoming bigger because of adolescence”*. Some responses like *“Menstrual cycle is love”* were alarming.

Lack of such knowledge would put them at risk of pregnancy if they are to be sexually active without protection. Knowledge of menstruation in itself is not enough if the pupils do not have the information to keep track of the various changes in their bodies on the different days of the menstrual cycle.

The table below sums up the various explanations that pupils put forth in their questionnaires when asked what the menstrual cycle is;

Table 4: Menstrual Cycle (Multiple responses given)

ANSWER	FREQUENCY	%
I do not know	63	50.8
It is the period of menstruation	15	12.1
Blood comes out of the vagina	10	8.1
It is breaking of an egg	1	0.8
It is growing from childhood to adulthood	1	0.8
Periods have not started	1	0.8
It is when you start to receive periods	15	12
It is emotional changes	2	1.6
It is to mature	1	0.8
It happens every month	10	8.1
These are monthly periods on a cycle of 21 or 28 days	2	1.6
It is stomachache during periods	3	2.5
TOTAL	124	100

Teachers on their part unanimously agreed that girls did not have sufficient information on sexual maturation. Though they imparted the information to them in school, they said that what they taught was only factual, and they did not have time or room to expound the same into practical life skills. Therefore, girls possessed text book knowledge on sexual maturation, but lacked the skills to translate their knowledge into practice. Teachers felt that parents, especially mothers, were instrumental in giving this life skills, but felt that parents were not cooperative in such matters. In the words of one teacher:

“There is a girl in class 8 who is pregnant and has been married off. The parent came and just explained casually. And she has another daughter here, who looks like she is heading the same way”.

Such cases may point to a bigger problem, probably economic or cultural, that goes beyond the mandate of this report. However, it is important to note that in offering knowledge on sexual maturation to girls, teachers feel that their efforts are not complemented at home. A parent’s response to the question of whether she talks to her children about sexual maturation supports the teachers claim. The parent said *“Hayo si maneno rahisi kuongea na mtoto. Ni kama vile kumwambia aende akutane na wanaume. Huwezi kusema hivyo kama mzazi. Pengine kwa shule wasome hayo maneno. Kwangu ni kumtunza kiafya, na afuate heshima zetu”* (It is not a topic that is easy to talk about with a child. It is like telling her to go and meet with men. As a parent, you cannot say that.

Maybe they should learn about that in school. My role is to take care of her health and she follows our traditions)

4.3 Girls' sources of information on sexual maturation

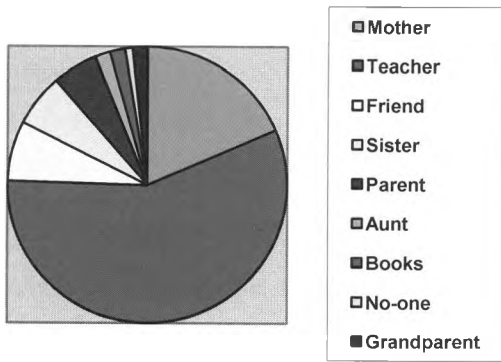
Pupils' responses indicated that most information on sexual maturation comes from teachers, followed by mothers. Science teachers are particularly instrumental in this regard. However, mothers are the main sources of advice regarding changes in the body, and any other attendant matters as regards maturing, and health. In contrast, teachers, who are the key sources of information, are not confidantes. In focus group discussions, it emerged that though teachers were said to be the key sources of information, girls do not approach them with issues and questions on maturation. The conclusion then is that the initial content that teachers disseminate is the only information girls are likely to receive from them. Clarifications and questions are asked elsewhere. Science and home science teachers particularly play an important role in disseminating information.

Mothers are also consulted by virtue of being the closest female relatives with authority and economic means. Most times, this consultation is an uneasy one. In communicating her fears about maturing, one respondent clearly captured the unease thus; *"What should I say when my mum asks if I have started periods?"*(Girl, 14years old).

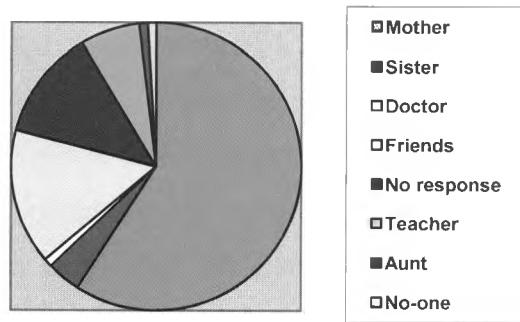
Maturation induces panic and creates a feeling in a girl that she has done something wrong. Hence, the confusion about what to say to a mother on the subject, and yet trust is somehow placed on the same mother to offer direction. *"Nyumbani, pengine mama ndio anaweza kukueleza"* (At home, it is probably your mother who can explain to you) (Girl, 14 years old)

Friends and sisters were also sources of information. Friends also act as confidantes regarding issues of opposite sex relationships, growth and maturation.

Pie chart 2: Sources of information



PieChart 3: Confidante in maturation matters



Aunts, books, and grandparents were also sources of information that featured on the same weight. Very few respondents get their information from these sources. Aunts are consulted on a small scale. Though grandparents are a very small source of information (2%) they are not sought out to give advice and lend a hand in the growth process. This finding is contrary to what has always been known about grandmothers. It may be that in this particular culture, sexual maturation issues are not a role that grandmothers play. It may also be that though grandparents offer refuge in troubled times, they are hardly the ones to habitually talk with about sexual issues.

Pupils in the focus group discussions also indicated that they got their information from the church, and when visiting the hospital. Information by the church may be helpful but tends to be biased and laced with issues of faith and religion (Your body is the temple of God, take care of it; fornication is sin; no sex before marriage; abstinence) and therefore, may not be adequate.

One respondent indicated that she did not have information on sexual maturation from anyone, and did not also consult or confide in anyone. Though this is one person in the sample, she may be representative of a number of girls in the larger population which is an evidence of a precarious situation, since it seems that matters sexual are self taught. Many girls are groping in the dark, without the necessary literature or adequate sources of information.

Teachers reiterated that the information they passed on was limited, but cited after school activities like clubs run by Non Governmental Organizations as possible sources of broader information. The sources of reference for the teachers were mainly books, and life experience. The customs of the area were also cited as a barrier to information exchange; culturally, young men are isolated at the onset of adolescence, and are expected to come into manhood with several sexual conquests. Girls coming into adolescence are caught in between trying to preserve their virginity, and essentially being one of the victims of the male conquests, yet paradoxically, culture does not necessarily expect the girls to be conquered. With such conflicting expectations, the information given to the girls by parents and society is vague, leaving the choice to the girl to make her own interpretations.

Even where information was given at home, teachers did not seem to have confidence in it, and neither did they have confidence in some of the home environments because, as confessed by the guidance and counseling teacher, "*...the houses are small and you find that the father comes home drunk and he misbehaves in front of the children.*" The meaning of this is that girls are already exposed to sexual activity and innuendos even before they mature, making it difficult for them to receive information from their parents in the way it is meant.

Parents on their part insisted that they did give information to their girls. However, the kind of information they offered was wanting. Key informant interviews revealed that information given revolved around threats of sinister consequences, devoid of factual information to help them deal with hormonal and bodily changes. Parents, especially mothers, said to girls; be respectful, have good manners, do not play with boys, cover yourself, sit nicely with your legs together etc. Delving into deeper explanations was seen as embarrassing.

4.4 Support mechanisms available to girls experiencing sexual maturation

In investigating support mechanisms available to girls undergoing sexual maturation, the researcher sought to ask questions that surround menstruation because it is one area of maturation that requires extra resources if it is to be managed well. The researcher also sought to find out the perceived unique needs of girls from those of boys, and to determine the support mechanisms present for these needs.

Seventy Seven percent (77%) of the respondents indicated that they have started their menstruation while twenty three percent (23%) indicated that they were yet to start menstruating. The age of onset of menses ranged between 11 years to 17 years, with a majority having started their menses at fourteen to fifteen years.

While schooling in rural areas starts at a later age, menses also starts at a later age than would be the case in urban places where majority of girls may start their menses between ages ten and thirteen. This has been attributed to diet, and lifestyle.

Table 5: Age at onset of menses

AGE (Years)	NUMBER
11-13	10
14-17	64
No response	22
Total	96

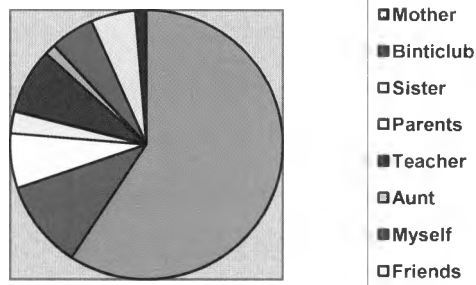
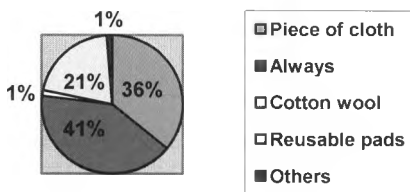
Sanitary pads are commonly used to control the flow during menstruation. 84.2% of the girls indicated that they used sanitary pads, while 15.8% indicated that they did not use sanitary pads. Sanitary pads may be understood to mean the various kinds of protection that one can use during their menstrual period. The particular kind of protection used was broken down to Pieces of cloth, Always sanitary pads, Cotton wool, reusable pads, and any other protection. The findings indicate that a considerable number of girls (36%) use pieces of cloth, as they cannot afford the conventional sanitary pads. Sanitary pads or other protection is mostly provided by mothers. However, clubs operated by Non Governmental Organizations also provide sanitary pads on an average of 6 months in a year. Pieces of cloth are usually picked up around the house, and by their very nature do

not offer the girls protection from leakage. This sentiment is well captured by a girl, 16years old who said; *“I fear when I am on my periods when our teacher tells us to stand up”*.

Being called upon to stand up when one is not sure if the cloth she is wearing has leaked or not can be traumatic. In mixed schools, it can be extremely disconcerting when a girl accidentally soils herself as boys would taunt her mercilessly. Such a girl would rather not attend school during her periods than risk having such an accident.

Pie chart 4: Protection used

Pie chart 5: Provider of sanitary pads



Providers of protection also included self, or friends. Since most of the girls in school do not have sources of income, sanitary protection provided by self means the different means in which a girl assembles on her own, with some degree of innovation. In the focus group discussions, girls talked of packaging cotton wool and wrapping it with gauze, cutting out chunks from old mattresses, and layering several textures of papers together. That girls have to go to such lengths is a clear indication of lack of support to manage menstruation.

There was indication that sometimes sanitary protection was bought by friends. This may expose girls to favours which may be detrimental to them in the long term, given that some of the friends who provide the money to buy the sanitary protection are men who are seeking to endear themselves to the girls.

Sanitary pads are also not issued in a majority of schools. 70% of respondents said that they did not receive sanitary pads in their schools, while 30% indicated that they did. The 30% who did receive the sanitary pads got them from Non Governmental Organizations and the supply was not consistent, heavily dependent on availability of funding.

Menstruation brings about the need for a proper private space where girls are able to take care of their hygiene away from the public eye. In schools, this place is usually the toilet. There is need for sufficient girls' toilets in schools. Most of the respondents indicated that their schools had an average of four toilets for the girls. These toilets serve the whole school population, making it very difficult for girls to have the privacy they need, especially since they have to jostle for the toilets at break/recess time with their younger schoolmates from the lower classes, who tend to have no information on menstruation, and therefore, treat any episode of an 'accident' as news worth sharing as widely as possible. Girls on menstruation are therefore, not accorded enough support regarding their privacy. Sample a few sentiments shared by the girls during the focus group discussions:

"The toilets are far from the classes and if you go there during lessons, the whole school can know you have gone there so many times" (Girl, 14 years old).

"The toilets have broken doors and if you don't have a friend to hold for you, then you better not go there" (Girl, 16 years old).

It was also quite telling that due to incessant warnings for girls not to mix with boys, especially at maturation, the majority of respondents (90%) did not know the number of boys toilets in school so the researcher had to do a physical count. In all the five schools, the number of boys' toilets was more than those of girls by between two and five toilets. While it may be argued that there are fewer girls than boys in the schools, this is the exception rather than norm, because in planning, numbers to be used are those of girls that enroll in lower primary, where as clearly noted, numbers are high. This therefore points to lack of gender considerations in setting up such facilities.

The teachers indicated that they kept some sanitary pads in the office and assisted girls whenever the need arose. They also said that there was a foreign lady working in the area that met with the girls every Wednesday and talked to the pupils about life skills. Among other topics, her talks included career choices, safety measures for girls, handling relationships with the opposite sex, and recreational activities. However, they felt a need for parents to ease up and allow their children to share with them on issues that they find difficult to handle.

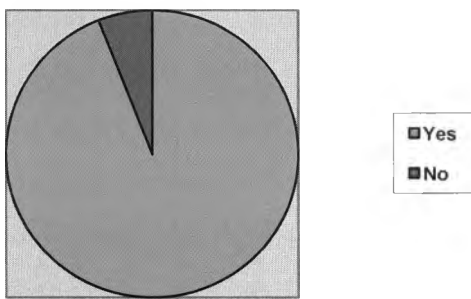
Parents on the other hand indicated that they would not hesitate to offer help, but somehow, not all their children confided in them. When asked whether she knew if her daughter had started her periods, one mother said *“My first born daughter never told me she had started. I only learnt that she had started when the others started and one of them told me. Then I realized the older one had started a long time ago”*. It seems then that not all mothers are confidantes. Mothers too may not actively be seeking to know about changes taking place in their children’s lives. Given that mothers should largely be aware of the age at which to expect the onset of menses, it is rather telling when a mother has no clue that a daughter has started menstruating, and learns about it from someone else. This shows that mothers may not necessarily be actively giving support. Mothers said they bought the pads when they were aware and also advised on hygiene by asking the girls to take regular showers to avoid unpleasant smells. However, not all mothers are able to afford sanitary pads, and this is a blow to the girls, who find that they may not be able to get the necessary help from the female relative that is closest to them.

The parents also indicated that the toilets, both at home, and in school, were not in good condition, and so the problems faced by girls were similar both at home, and in school.

4.4.1 The Needs of Girls versus boys

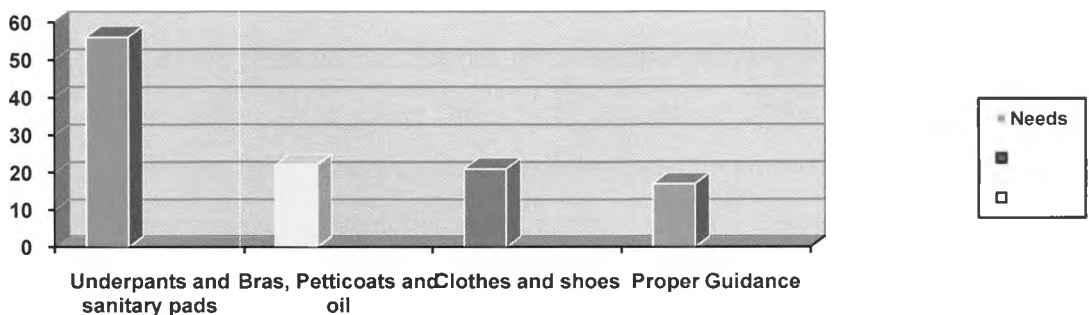
In seeking to understand the support mechanisms that may either be present or absent for girls, it was important to understand what girls perceive as their special needs, which may need to be supported as they mature. A question was posed: Do girls have different needs from boys? Ninety four percent (94%) of the respondents replied in the affirmative, while only six percent (6%) did not think that the needs of girls and boys were any different

Pie chart 6: Do girls have different needs from boys?



Various needs that are unique to girls were indicated, with the highest ranking need being that of underpants and sanitary pads. The graph below shows the various needs as ranked:

Graph 1: Unique needs of girls



Girls indicated that they are more 'expensive' to maintain as opposed to boys who never need items like sanitary pads, bras and petticoats. Lack of such items like appropriate clothing, shoes and oil works on their self esteem at a crucial time when they are becoming more aware of their bodies, and the need to look presentable. Availability of the same items boosts confidence and frees them to take part in various activities. A girl who has developed breasts and has no bra feels quite uncomfortable running around and may think that everyone is focused on their chest. This was captured by a 15 year old girl's opinion, "*Girls need bra and vests so that everyone stops looking*"

The need for more focused guidance for girls, as opposed to boys was reiterated in the focus group discussions where girls felt that their success or failure in life was largely dependent on the kind of associations they had, as opposed to boys who could get away with anything. Girls felt that they could easily drop out of school as opposed to boys because they are the ones who get pregnant, or get married off early. Sexual maturation puts them at risk because various possibilities arise that could conspire to change the direction of their lives. In the words of a 15 year old girl, "*I need to be helped when I am in the wrong place or when I am doing bad things*". She said that sometimes one was not aware of the consequences of their actions. For example, like meeting up with boys could end up badly, hence the need for adults to point out consistently the right path to be followed.

4.5 Sexual maturation and School participation for girls

To answer the question as to whether sexual maturation affects school participation for girls, a question was asked on whether girls attend school when on their periods. 72% of the respondents said that they came to school anyway, while 10.4% said they did not come to school. 18% of the respondents did not give a response, and could fall in either category. That menstruation would affect the school attendance of 10.4% of pupils is alarming as the government makes steps towards seeking to attain education for all by the year 2015. Further interrogation revealed that the number of days missed for those who are unable to come to school range from 3 to 7, with the majority indicating 4 days. In the last three months alone, seven respondents indicated having missed school because of

menstruation, due to stomach cramps, lack of sanitary pads and/or heavy bleeding. The following are some of the responses from the girls regarding menstruation:

My stomach has a lot of pain and I try to take panadol (Girl, 15 years old).

The second day of the periods, I feel like there is too much blood. I cannot want to be anywhere. I stay at home (Girl, 14 years old).

You can have bad smell during periods and people will point at you. You avoid them until you are well (Girl, 15 years old).

An aspect of sexual maturation that also brings discomfort is physical growth, especially growth of breasts and pubic hair. These physical changes draw a lot of attention to the girls, and they feel out of sync with their bodies. The changing hormones, coupled with physical growth make for an uncomfortable experience that has to be lived out in the public eye, with men taking note of the changes and starting to express interest in the girls. Girls at this age view themselves as prey. As several girls pointed out:

"I fear when I am in my period when our teacher tells us to stand up, or I fear getting pregnant". (Girl, 16 years old)

"We feel shy when we are in school". (Girl, 17 Years old)

"We are not happy with the changes that take place in our bodies because of breast enlargements". (Girl, 15 years old)

"We don't like hair on our private parts". (Girl, 14 Yrs old).

"I don't like monthly periods. Yet when you receive them, you feel like you are normal". (Girl, 16 Years old).

"We feel like we have grown so big and we can't learn properly:." (Girl, 16Years old).

The physical changes make girls very self conscious and affect their concentration in class. The attention and attendant fear can be summed up in the words of one ten year old:

"I won't be coming to school if my breasts enlarge".

The following table summarizes the fears of growing up physically and how they affect participation in school.

Table 6: Growing up: My fears

FEAR	FREQUENCY	PERCENTAGE
I get afraid during menstruation	16	15.1
I feel afraid of coming to school during menstruation because it can leak	8	7.5
I fear standing in front of the class	3	2.8
Being laughed at by boys because of my breasts	11	10.4
Being touched on my breasts by boys	3	2.8
I fear a boy knowing the dates of my periods	4	3.8
I fear attraction from boys	3	2.8
I fear looking like a big girl in school	3	2.8
I fear getting pregnant	41	38.7
I fear hanging around boys	5	4.7
I fear having sexual intercourse	5	4.7
I fear contracting HIV and AIDS	4	3.8
TOTAL	106	99.9

The fears can be categorized as; those surrounding the menstrual process; physical changes; enhanced attention from the opposite sex; sexual activity, and disease. The biggest fear, mentioned 41 times from the 106 responses (39%) is getting pregnant. With sexual maturation, the possibility of pregnancy is very high, and would lead to a girl dropping out of school. The overwhelming fear of pregnancy points out to lack of sufficient information to cope under pressure and to stay free of unwanted pregnancy. This could also mean lack of proper sexual and reproductive health education including the need for family planning and contraception. The physical changes, especially growth of breasts, become an outward manifestation of changes and disrupt concentration in class as girls are preoccupied with hiding the breasts. This could be resulting from the intense interest and attention that the girls all of a sudden receive from the male pupils, teachers and others members of the community in general.

Teachers indicated that most girls of adolescent age do not perform well because their parents do not give them enough support. The parents do not take into account that the

girls are changing and therefore should change the way they handle them. Teachers accused parents of employing the use of their daughters in the domestic brewing of illicit brews so as to attract customers. Their growth can then be said to be used as a marketing tool, thus affecting their school attendance. According to the teachers, pregnancies account for a majority of the drop-outs for girls in upper primary.

Parents put the blame of inadequate school participation by adolescent girls squarely on the doorstep of cultural expectations;

When it's a girl who has finished class 8 and has not gone to high school, the community has no problem because we want bride-wealth. When she gets married when in school, then the teachers intervene because it's not acceptable even in the community though some parents just want bride-wealth (Mother, 35 years old).

Parents also held the view that boys participate better in school than girls because “*the boys perform well but the girls are more interested in boys so they don't learn and they fail. They become rude and engage in sexual activities*” (Father, 47 years old). This is a perfect case of blaming the victim given the cultural expectations. It is generally reported that more resources are spent on the boy-child education despite the fact that girls' needs are more compared to the boys. In some families, the girl child is given out for marriage as a means of getting resources to ensure that the sons remain in school. Parents also employ double standards in the socialization of their children. The boys are encouraged to be manly and nobody cares whether they are chaste while the girls are taught to remain virgins till marriage. This is made worse in situations where virginity testing is part of the cultural requirement on the wedding night.

5.0 CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS

This chapter provides the summary of findings, suggests recommendations on what needs to be done to assist the girls on the shortcomings resulting from menstruation, and finally concludes on the study

5.1 Summary of the findings

The foregoing discussion of findings indicates that girls possess inadequate information regarding sexual maturation, with their responses varying greatly, an indication of grasping at the proverbial straw in order to find meaning.

The problem is further compounded by the fact that sources of information are not readily available, and where they should be available, say in adults like parents and teachers, they are not trusted.

Support mechanisms, whether in school or at home, are insufficient, with sanitation facilities, like toilets for girls being very few. In regard to menstruation, which is a result of sexual maturation, sanitary pads are not provided in school, yet they are also not readily affordable at the home front. As such, girls resort to insufficient measures to contain the flow, thus hindering their participation in school.

This brings us to the point of the needs of boys, versus those of girls. Girls' needs are said to be more, and girls are generally viewed as precarious, as they mature, making it easy for parents and teachers alike to dismiss their schooling. On the one hand, teachers are not sensitive to the social and psychological needs of maturing girls experiencing growth spurts, and on the other hand, parents are sometimes quick to cash in on the attention the girls are getting from the opposite sex.

Sexual maturation elicits fears in many girls, predisposing them to poor participation in school. Especially prevalent is the fear of pregnancy. Coupled with the lack of sufficient information to counter fears, sexual maturation becomes a detriment to girls' participation in school.

5.2 Recommendations

The following are suggested as measures to help increase school participation of girls experiencing sexual maturation:

- There are several programs run by either the schools, or private organizations that target the youth in schools. Such programmes that target youth must be designed to take into account their special needs, combine both information and services and include the input of the youth for whom they are ostensibly intended. They must be of high quality, accessible, and affordable and must offer a comprehensive package that encourages youth to seek services. Above all, they must be implemented with the support of the communities within which they are undertaken.
- Information on sexual maturation is hindered by religious and cultural barriers. Religion views sex education as a promotion of immorality, while cultural norms render certain topics as taboo. As such, issues that should be dealt with openly soon become a cause of shame and anxiety. Religious organizations should give the necessary space needed to promote sex education, while cultural norms that prevent progress should be interrogated and shunned.
- The role of peer educators should be emphasized in order to encourage increased sharing of ideas by the youth.
- The government should consider offering sanitary towels to girls in school as part of the free primary education program. This will ensure that even those who are unable to afford sanitary pads will get to go to school.
- Mechanisms should be put in all schools to ensure that there are adequate number of toilets for girls.
- An increase in the number of female teachers in rural areas should be considered, in order to increase the base of the number of teachers that girls can confide in for matters of sexual maturation

- The sentiment among 14% of the respondents that the school should have taught more about sexual maturation and provided more literature since they spent most of their days in school should be taken seriously.

5.3 Conclusion

For the free primary education to benefit girls, and for the country to achieve its MDG target regarding girl child education, the above suggested measures should be instituted. Demystification of sexuality must be done so as to enable the parents and the society at large to discourse on issues of sexual maturity.

This study shows clearly that the girl child is still endangered and all stakeholders in the education sector, in the home front and society at large must act now to protect this future generation. The needs of the girl-child far outweigh those of the boy child, and parents must be assisted in all fronts to educate and empower their daughters. It is only through such efforts will we be able to have a society that cherishes equality.

REFERENCES

Abagi, O. (2002). Situational analysis of girls' education in Lesotho. Maseru:GoL/UNICEF.

Abagi, O. (2003) Baseline study of Basic Education for Girls and other Vulnerable Groups in Rwanda. Kigali: GoR/UNICEF.

Adolescent sexual behaviour, knowledge and attitudes to sexuality among school girls in Transkei, South Africa. <http://www.ncbi.nlm.nih.gov/pubmed/8756047>. Visited on 2nd August at 11.00HRS

Binti Africa Foundation (2008) Sustainable Sanitary Health for Improved Girls Education. Binti Africa Foundation Project Baseline Survey. BAF

Bellotti, E.G. (1975). Little girls. London: Waters and Readers Publishing Cooperative.

Cammish N.K. and Brock, C. (1994). State, Status and Status Quo: Factors affecting the Education of girls in Cameroon *International Journal of education Development*, Vol.14: 21-25

Comparing the self-image of prepubescent girls before and after four sessions on body awareness. <http://www.ncbi.nlm.nih.gov/pubmed/>. Visited on 6th August 19:00HRS

USAID (1998) Educating Girls A Development Imperative. Conference report, Washington D.C

MoE (2004) Gender and primary schooling in Tanzania Report of a joint team from the Institute of Development Studies, Sussex, and the Ministry of Education and Culture. Dar es Salaam: MOE

FAWE (2004) Re-entry for Adolescent school girl mothers. Zambia: Best practices in Girls' Education in Africa. FAWE Report

Girl Child Network (2004) The status of gender equity and equality in primary education in Kenya. Gender Report

Herz, B & Sperling, GB (2004) What works in girls' education: evidence and policies from the developing world. New York: Council on Foreign Relations.

<http://www.un.org/millenniumgoals/>. Visited on 10th May 2009. 11.00HRS

http://portal.unesco.org/education/en/ev.php-URL_ID=27554&URL_DO=DO_TOPIC&URL_SECTION=201.html. Visited on 15th June 2009. 17.00HRS

http://www.cas.unt.edu/~gailm/Feminist_Theory.rtf.htm. Visited on 15th June 2009.20.00HRS

<http://www.questafrica.org/SexMaturationLifeSkills.aspx>. Visited on 2nd August 2009. 14.00HRS

<http://www.questafrica.org/GrowingUp.aspx> Visited on 2nd August 2009. 14.30HRS

<http://www.answers.com/topic/puberty> Visited on 15th June 2009. 17.00HRS

http://en.wikipedia.org/wiki/Mary_Wollstonecraft Visited on 28th August 2009 22.00HRS

http://en.wikipedia.org/wiki/Feminist_theory Visited on 28th August 2009 22.30HRS

Kadzamira E.C & Chibwana M.P(1999)*Partnership for strategic resource planning for Girls Education in Africa. Gender and Primary Schooling in Malawi*. FAWE and IDS. Sussex England

Kifle Henock et al, (2002)*Global poverty Report. Achieving the millennium Development Goals in Africa: Progress, prospects and policy interventions*. ADB & World bank

Mama, A.(1996). *Women Studies and studies of women in Africa During the 1990s*:Working paper series 5/96, Dakar, CODESRIA.

Nachmias C.F & Nachmias D(1996) *Research methods in the social sciences*(5th Edition). Britain, St Martins Press.

Republic Of Kenya (2001) *Taita Taveta District Development Plan*. Nairobi, Government Printer.

Ruto S.J, Kameri-Mbote P & Muteshi-Strachan J (2009) *Promises and Realities: Taking stock of the 3rd UN International Women's Conference*. Nairobi, Kenya: ACTS press, AWCFS.

Sweetman C (2003) *Gender, Development and Marriage*. Oxfam publication

UNESCO (1990), *Compendium of statistics on illiteracy: Statistical reports and studies*. No.31.Paris:UNESCO.

UNESCO (2003) *Gender and Education For All*. France, Paris, UNESCO.

APPENDIX 1: SURVEY QUESTIONNAIRE FOR GIRLS

Introduction

My name is Zipporah Ongwenyi and I am doing a study for my MA project at the University of Nairobi. My topic is on “Sexual Maturation and School Performance for girls in Rural Kenya”. I am collecting information from girls of your age in several schools in order to be able to write my paper. I will appreciate if you can take some of your time to share your experiences with me as regards sexual maturation, and your education. Feel free to express yourself.

Name of school: _____

Date: _____

Date of Birth: _____

1. Have you ever learnt anything on sexual maturation? If yes, explain

2. Who gave you the information on sexual maturation?

3. Have you started receiving your monthly period? _____

4. How old were you when you first received your monthly period?

5. Do you use sanitary towels/protection? _____

6. If yes, what kind do you use? A. Piece of cloth () B. Always () C. Cotton wool () D. Reusable pads () E. Others (specify) _____

7. Who provides you with sanitary pads? _____

8. Are you given sanitary pads in school? _____

9. What do you understand by the term “menstrual cycle”?

10. Who do you talk to when you have a problem/question regarding your body, or menstruation? _____

11. Do you come to school when you are on your periods? _____

12. If NO, how many days are you absent because of periods? _____

13. How many days have you been absent from school in the last 3 months?

Month	Number of school days missed	Reasons

14. How many girls' toilets are in your school? _____

15. How many boys toilets are in your school? _____

16. Do you think girls have different needs from boys? _____

17. If YES, which are these needs?

18. What fears do you have about growing up physically?

19. What do you think should have been done when you started maturing to make you have better understanding of yourself?

Thank you for answering the questions

APPENDIX 2: FOCUS GROUP DISCUSSION GUIDE FOR GIRLS

Name of School: _____

Number in group: _____

Age of groups members: _____

A: Knowledge

1. About sexual maturation.
2. Sources of information.
3. Number of girls who have started periods.
4. Knowledge of the menstrual cycle.
5. Knowledge of contraception methods
6. Sexual maturation and HIV/AIDS (Probe for links)

B: Sources of information

1. Where information is sought.
2. Where information ideally ought to be found.

C: Support mechanisms

1. Coping with start of periods.
2. Methods of protection. (Probe: Pads, cloth, cotton)
3. Bodily care during menstruation.
4. Sanitation and disposal of menstrual waste.
5. Assistance during menstruation a) in school b) at home
6. Information on pregnancy, early marriage, and HIV/AIDS.
7. Condition of school toilets.

D: Maturation and School performance

1. Incidents of leakage during menstruation. (How they are addressed).
2. Absenteeism during menstruation. (Probe on how many days and the effects).
3. Maturing and school performance. (Probe for any noticed changes).
4. Aspects of sexual maturation that most affect schooling. (menstruation, body changes).

APPENDIX 3: KEY INFORMANT INTERVIEW: GUIDE FOR GUIDANCE AND COUNSELLING TEACHERS

Name of School: _____

Age of teacher: _____

Highest qualification: _____

A: Knowledge

1. What do you understand by the term sexual maturation?
2. Do you think girls in your class have sufficient knowledge on sexual maturation?

B: Sources of Information

1. Where do the girls get information on sexual maturation?
2. Do you pass on information to them? If Yes, what kind of information do you pass? And through what forums?
3. If yes, what are your sources of reference?
4. Do parents assist you in talking about the same to their daughters?

C: Support mechanisms

1. How do you handle girls who are maturing?
2. Do you have cases of girls soiling themselves in class?
3. If yes, how do you respond?
4. Does the school have mechanisms to address the issue of sexual maturation?
5. What do you think should be done to ensure girls get better support?

D: Maturation and school performance

1. Comment on sexual maturation and girls performance in your class
2. Have you observed any changes (Negative or positive) in girls performance as they move into upper classes?
3. If yes, what are the reasons for this?
4. Are there any girls who have dropped out this year due to pregnancy?
5. Does girls school attendance and performance change when they start their periods?

APPENDIX 4: KEY INFORMANT INTERVIEW: GUIDE FOR PARENTS

Name of school: _____

Sex of parent: _____

Age of parent: _____

Highest academic qualification: _____

Profession: _____

A: Knowledge

1. What do you understand by sexual maturation?
2. From whom did you receive the information you have on sexual maturation?

B: Sources of Information

1. Do you talk to your children, especially girls, about sexual maturation?
2. If yes, what do you talk about?
3. If No, what prevents you from sharing this information?

C: Support Mechanisms

1. Are you aware whether your daughter has started her periods or not?
2. How do you ensure that your daughters are well provided for during their periods?
3. What is the sanitation (toilets) situation at school, and at home?

D: Maturation and School Performance

1. Are there cases of pregnancy in the school?
2. Do boys perform better than girls in school?
3. If yes, what could be the reasons?
4. Do you think menstruation affects a girls' performance?
5. If yes, how?
6. Comment on early marriages in this area.