

**INFLUENCE OF TEENAGE PREGNANCY ON COMPLETION RATES  
AMONG GIRLS IN PUBLIC DAY SECONDARY SCHOOLS IN  
KIMILILI SUB-COUNTY**

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Requirements for the Award of Master of Education in Educational  
Planning, University of Nairobi**

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## **DECLARATION**

This project report is my original work and has not been presented elsewhere for award of any degree in this or any other university.

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This project has been submitted to us for examination as University Supervisors

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## **DEDICATION**

To my parents mama Grace and Joston Kato who initiated my education when they took me to school for the first time. My wife Indosio, sons Simiyu and Cheloti, and only daughter Faith for their kindness and perseverance during the time of the study, may God bless you.

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## TABLE OF CONTENTS

Content	page
Title page .....	i
Declaration.....	ii
Dedication .....	iii
Acknowledgement .....	iv
List of tables .....	ix
List of figures .....	x
Abbreviations and acronyms .....	x
Abstract .....	xii

### CHAPTER ONE

#### INTRODUCTION

1.1 Background to the study .....	1
1.2 Statement of the problem .....	6
1.3 Purpose of study.....	8
1.4 Objectives of the study.....	8
1.5 Research questions.....	9
1.6 Significance of the study.....	9
1.7 Assumptions of the study.....	10
1.8 Limitations of the study .....	10
1.9 Delimitations of the study.....	11
1.10 Definition of significant terms .....	11
1.11 Organization of the study.....	11

### CHAPTER TWO

#### RELATED LITERATURE REVIEWED

2.1 Introduction.....	13
2.2 Teenage Pregnancy Risk Factors .....	13
2.2.1 Individual factors .....	13
2.2.2 Home environment.....	15
2.2.3 School Based Factors .....	18

2.3 Impact of teenage pregnancy on completion rates.....	22
2.4 Summary of literature reviewed.....	23
2.5 Theoretical Framework.....	24
2.6 Conceptual Framework.....	26

### **CHAPTER THREE**

#### **RESEARCH METHODOLOGY**

3.1 Introduction.....	29
3.2 Research design .....	29
3.3 Target population .....	30
3.4 Sample size and sampling procedure.....	31
3.5 Research instruments .....	32
3.6 Validity of the research instruments .....	33
3.7 Reliability of the research instruments .....	33
3.8 Data collection procedures.....	34
3.9 Data analysis techniques .....	35
3.10 Ethical considerations .....	35

### **CHAPTER FOUR**

#### **DATA ANALYSIS, PRESENTATION AND DISCUSSION**

4.1 Introduction.....	36
4.2 Instrument return rate.....	36
4.3 Demographic characteristics of the D.o.Ss .....	37
4.3.1 Type of school.....	37
4.3.2 Gender of the D.o.S .....	38
4.3.3 Teaching experience of the D.o.Ss .....	39
4.4 Demographic characteristics of student respondents .....	39
4.4.1 Age distribution of student respondents .....	40
4.4.2 School characteristics.....	40
4.5 Individual factors and teenage pregnancy.....	41
4.5.1 Sexual behavior.....	42
4.5.2 Contraceptive use.....	43

4.5.3 Students perspective on contraceptive use.....	44
4.5.4 Availability of contraceptives .....	45
4.6 Home based factors and pregnancy .....	46
4.6.1 Barriers to parent-adolescent communication .....	46
4.6.2 Supervision and Monitoring .....	47
4.6.3 Poverty at Home .....	49
4.7 School based factors .....	50
4.7.1 Class performance.....	53
4.7.2 Sexual harassment by boys .....	54
4.7.3 Sexual harassment by teachers.....	56
4.7.4 Life Skills Education.....	58
4.7.5 Comprehensive Sexuality Education .....	59
4.8 Extent of teenage pregnancy in school non completion .....	62

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSION AND RECOMMENDATIONS**

5.1 Introduction.....	64
5.2 Summary of the findings.....	64
5.2.1 Individual factors .....	64
5.2.2 Home based factors.....	65
5.2.3 School factors.....	66
5.2.4 Extent of teenage pregnancy in Kimilili Sub County .....	68
5.3 Conclusions.....	68
5.4 Recommendations.....	69
5.5 Suggestion for further research.....	71
<b>REFERENCES.....</b>	<b>72</b>
<b>APPENDICES .....</b>	<b>77</b>
APPENDIX A: Letter of transmittal.....	77
APPENDIX B: Questionnaire for director of study .....	78
APPENDIX C: Questionnaire for students.....	80
APPENDIX D: Interview guide.....	82

APPENDIX E: Research authorization .....	83
APPENDIX F: Research permit .....	84
APPENDIX G: Sub county letter of authorization .....	85
APPENDIX H: County letter of authorization .....	86
APPENDIX J: Letter from the university .....	87



## LIST OF TABLES AND FIGURES

Table 1.1: 2011-2014 Kimilili Sub-County Secondary school completion rate .....	5
Table 3.1: School distribution in Kimilili Sub-County .....	30
Table 4.1: Questionnaire return rate .....	36
Table 4.2: Type of school .....	37
Table 4.3: D.o.Ss Gender Distribution .....	38
Table 4.4: Teaching experience .....	39
Table 4.5: Age of students .....	40
Table 4.6: Schools for the study .....	41
Table 4.7: Sexual behavior .....	42
Table 4.8: Contraceptive use .....	43
Table 4.9: Should sexually active girls be encouraged to use contraceptives? .....	44
Table 4.10: Are family planning/contraceptives easily available .....	45
Table 4.11: Barriers to communication on reproductive issues .....	46
Table 4.12: Parental monitoring and supervision .....	48
Table 4.13: Home poverty and girls sexual behaviour .....	49
Table 4.14: Pregnancy dropouts in the period 2011-2014 .....	51
Table 4.15: Teenage pregnancy school dropout .....	52
Table 4.16: Academic Nature .....	53
Table 4.17: Girls perspective on poor performance and risky behaviour .....	54
Table 4.18: Teachers perspective on boys harassment of girls .....	55
Table 4.19: Students perspective on sexual harassment of by boys .....	56
Table 4.20: Sexual harassment by teachers .....	57
Table 4.21: Students perspective on sexual harassment by teachers .....	58
Table 4.22: Life skills Education .....	59
Table 4.23: Teachers perspective on comprehensive Sexuality Education .....	60
Table 4.24: Students perspective on Comprehensive Sexuality Education .....	61
Table 4.25: Extent of teenage pregnancy .....	62

## LIST OF FIGURES

Figure 2.1: Relationship between teenage pregnancy and secondary school completion rates .....	28
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## **LIST OF ABBREVIATIONS AND ACRONYMS**

<b>ARDH</b>	Adolescent Reproductive Health and Development
<b>ASRH</b>	Adolescent Sexual and Reproductive Health
<b>CSA</b>	Center for the Study of Adolescence
<b>DHS</b>	Demographic Health Survey
<b>DoE</b>	Director of Education
<b>DoS</b>	Director of Study
<b>EFA</b>	Education for All
<b>FAWE</b>	Forum for African Women in Education
<b>KIE</b>	Kenya Institute of Education
<b>KNBS</b>	Kenya National Bureau of Statistics
<b>KRHC</b>	Kenya Human Rights Commission
<b>PRB</b>	Population Reference Bureau
<b>RHRA</b>	Reproductive Health and Rights Alliance
<b>YFRHS</b>	Youth Friendly Reproductive Health Services

## ABSTRACT

Retention of students from the beginning of their education to completion at any level is the hallmark and the ultimate goal of any education system in any country. Compared to boys, girls face numerous hurdles in their pursuit of education that causes unanticipated school interruptions and the likely eventuality of school dropout; a phenomenon that affects equitable human capital formation. Specific to the girl child, is the menace of teenage pregnancy and the associated secondary school dropout that this study sought to address. The study was guided by human capital theory. The specific objectives were: to establish the extent to which individual factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County, to examine the extent to which home based factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County, to determine the extent to which school factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County and to assess the extent to which teenage pregnancy influence completion rate of girls in public day secondary schools Kimilili Sub-County. The study deployed descriptive survey research design. The accessible population was 300 form four girls, 18 Directors of Study and 1 D. o. E. Stratified random sampling was used to come up with 90 form four girls from 8 schools and 8 Directors of Study while census sampling was used to select the D.o.E. The study used questionnaires for students and Directors of Study and an interview schedule was administered on the Sub County D.o.E. Validity of the instruments was determined by the researcher who formulated items according to the research objectives. Experts from the Department of Educational Administration and Planning verified content validity. The instruments were piloted in two schools that were excluded in the actual study and test re-test method was used to calculate reliability. A reliability coefficient of 0.6 was attained and hence accepted as reliable. Data collected was analyzed using measures of central tendency. Results were then presented using tables. The study found out that individual sexual behaviour of students, lack of strict parental supervision and monitoring, home poverty, poor academic performance at school, and sexual harassment by both boys and teachers exposed girls to the problem of teenage pregnancy. The study also established that over 40% of the girls' dropout cases were due to teenage pregnancy over the four year cycle in day secondary schools in Kimilili Sub-County. The study recommended the creation of clear partnerships between public health facilities and schools to promote effective utilization of YFRHS, sensitization of parents on their roles, monitoring of poor academic performers at school and legal prosecution of teachers found harassing school girls.

# **CHAPTER ONE**

## **INTRODUCTION**

### **1.1 Background to the study**

Education is considered as human right and also crucial to economic growth and development. The various international conventions that recognize education as a basic human right include; The African Charter on the Rights and Welfare of the Child, Article 11 on the right to free and compulsory basic education; While the United Nations International Convention on Social and Economic rights, Article 13, declares the recognition of the right of all to education. Kenya being party to these conventions has entrenched the right of everyone to basic education through the constitution and the Basic Education Act 2013 (Republic of Kenya, 2013).

Having established education as a human right and key to development both the Millennium Development Goals (MDGs) and the Education for All (EFA) agenda committed governments to achieving gender equality in basic education by the year 2015, with a focus on ensuring girls full access to and achievement in basic education of good quality (Burnett and Felsman, 2012). This becomes a basis for further education and training. However this has not been the case the world over due a variety of challenges, like teenage pregnancy that specifically contributes to girls non completion of school (Muganda-Onyando and Omondi, 2008; Sifuna

and Chege, 2006) although the primary aim of any school system being to enable all those enrolled to complete their education as scheduled (UNESCO, 2008).

According to Molosiwa and Moswela (2012) school girls' pregnancy is an international crisis that affects the social economic welfare of countries, societies and families at large because it is one, if not the leading cause of school dropout for female students. In the United States of America 30% of all teen girls who drop out of school cite pregnancy as a key reason (Shuger, 2012) and fewer than 38% of the teen mothers ever earned their high school diploma (Van Pelt, 2012). Adolescent pregnancy trends in percentage terms are quite worrying in Sub Saharan Africa because of the health, social, economic and educational consequences. Niger is worst affected at 51%, Chad at 48%, Uganda at 33%, Tanzania at 28% and Kenya at 26% (Loaiza and Liang, 2013).

According to a study by willan in 2013 in South Africa, approximately 30% of teenage girls report of having been pregnant with a devastating impact on their secondary schooling. In Cameroon teenage pregnancy is responsible for 30% gender gap difference between boys and girls in secondary education (Eloundou-Enyegue, 2004), while in Kenya 14.8% of 15-19year olds were either pregnant or mothers [Kenya Demographic and Health Surveys (KDHS), 2008/2009), a cohort that should ideally be at secondary school level. Another study by the Kenya Human Rights Commission/Reproductive Health and Rights Alliance

(KHRC/RHRA) in 2010, revealed that unwanted pregnancy and abortions were prevalent among school going youth, which implies that among factors contributing to gender disparity in school completion rates is teenage pregnancy which this study attempted to examine critically.

Research evidence from various studies across the globe in different fields highlights some of the factors behind teenage pregnancy as either individual, home, community or school associated (Panday, Makiwane Ranchold et al., 2009; Ramirez and Carpenter, 2008; Willan, 2013). Some individual behaviors of secondary school girls are responsible for pregnancy. These include early sexual involvement (Musonga, 2014) that results in multiple and concurrent partnerships (Muganda-Onyando and Omondi, 2008) with boys and men that may be transactional in nature due to poverty. Poverty at home affects individual attributes of some girls in that it may force girls' into survival sex for subsistence (FAWE Uganda, 2011); and for economic security girls can engage in multiple relations. Multiplicity of sexual relations reduces the chances that teenagers would use contraceptives to prevent pregnancies hence escalating the problem (Willan, 2013).

Issues emanating from the home environment that are relational in nature may also contribute to teenage pregnancy. Physical presence of parents in the home (Ngom, Magadi and Owuor (2003), close parental supervision and monitoring of

adolescents (Makundi, 2010) and age appropriate communication delays sexual debut and diminishes negative peer pressure that could lead to unwanted early pregnancies (Panday, Makiwane Ranchold et al., 2009).

Within the school environment a number of factors expose young girls to pregnancy risks. According to Hallman and Grant (2006) poor school performance is a strong marker for pregnancy. Poor performance often leads to repetition, meaning that girls physically mature while still in school and experience a lot of peer pressure to have sex (Kirby, 2002). In addition poorly performing girls have low educational expectations, are not sure they will graduate and as such have little motivation to avoid pregnancy (Coles, 2005; Turner, 2004).

Lack of comprehensive information on sexuality either at school or at home makes teenagers to rely on peer misinformation and may therefore succumb to peer pressure to have sex that could lead to early pregnancies (Panday, Makiwane, Ranchold et al., 2009). Another school based factor that contributes to pregnancy related school dropout is sexual harassment perpetrated by boys and sometimes teachers, where girls are coerced into having sexual intercourse (Abuya, 2013; Sifuna and Chege, 2006).



Teenage pregnancies are also associated with lack of access to and inconsistent use of contraceptives (Willan, 2013). Among other barriers perceptions play a vital role in determining whether adolescents who are sexually active use contraceptives or not. Questions about the efficacy of contraceptives and the possible side effects discourage their use (Wood and Jewkes, 2006) and therefore heightening pregnancy risks. According to a study by Hungi and Thuku (2010), school attendance in Kenya drops precipitously during the last four years of secondary school and pronounced gender gaps appear. This is attributed to a variety of factors that include child labour, early marriages, teenage pregnancies and inaccessible schools (Musonga, 2014).

**Table 1.1: 2011-2014 Kimilili Sub-County Secondary school completion rate**

Year	No. that sat		No when in		Likely Dropouts		Completion Rate	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
2011	1178	788	1401	1039	223	251	84%	76%
2012	1285	670	1476	1035	191	365	87%	65%
2013	1309	758	1522	1027	213	269	86%	74%
2014	1445	858	1745	1248	300	390	83%	69%

**Source: Kimilili Sub-County Education Office**

The situation is not different in Kimilili Sub County. Statistics from the Sub County education office on Table 1.1 indicate that although the absolute number of girls attending secondary school is growing, their completion rate not only lags behind that of boys but is also erratic. This is despite the measures undertaken by the government to increase basic education completion rates like subsidizing the cost of education and allowing school re-entry of pregnant girls after birth. The crucial question is why the gap in the completion rates and how significant is teenage pregnancy in non completion?

A study by Musonga (2014) in Bumula Sub County of Bungoma where about a half of the girls who join form one drop out before completing secondary school concluded that pregnancy accounted for the highest number of dropouts among other factors like poverty and culture. This is in agreement with a study by Nyaga (2010) in Runyenjes Division of the former Embu East District that singled out pregnancy as critical to school dropout. Is this the case in Kimilili Sub-County? This study analyzed the factors that influence teenage pregnancy school non completion in day secondary schools.

## **1.2 Statement of the problem**

Unmitigated teenage pregnancy school dropout has enormous cost implications for the society at large in terms of the lost benefits that accrue from school completion. They include lower fertility, lower child and infant mortality that

means improved family health, improved food security, decreased HIV/AIDS infection rates and women economic empowerment. Sustained access to basic education is critical in terms of long term productivity, reduction in inter-generational poverty transfer and women empowerment (Hunt, 2008). Increases in girls' secondary school enrolment increase their participation in the labour force and their contributions to household and national income (Murphy and Belmonte, 2009).

Despite education being a human right, girls in Kenya continue to suffer the indignity of school interruption when they become pregnant (Muganda-Onyando and Omondi, 2008) and most never return to complete their education regardless of the re-entry policy (Omwancha, 2012). This brings to the fore the need to tackle pregnancy before it happens as opposed to exclusively relying on re-entry, a perspective that underpinned this particular study given the fact that teen parenthood makes it more difficult for them to complete education, career and other life goals(Shuger, 2012).

Although studies done elsewhere point to the significance of teenage pregnancy in female student school dropout in Kenyan secondary schools (Nyaga, 2010; Sifuna and Chege, 2006; Musonga, 2014) none has been done in Kimilili Sub-County that particularly focuses on factors that fuel teenage pregnancy and the role this disruptive phenomenon has on the overall secondary school completion

rates; a gap that this study was meant to fill. Understanding these influencing factors and school non completion is necessary to effectively minimize and ease the costs of teenage pregnancy on the education system.

### **1.3 Purpose of Study**

The purpose of this study was to investigate the influence of teenage pregnancy on school completion rates among girls in public day secondary schools in Kimilili Sub-County

### **1.4 Objectives of the Study**

This study was guided by the following objectives.

1. To establish the extent to which individual factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County.
2. To examine the extent to which home based factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County.
3. To determine the extent to which school factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County.
4. To assess the extent to which teenage pregnancy influence completion rate of girls in public day secondary schools Kimilili Sub-County.

## **1.5 Research Questions**

The specific questions that guided this study were;

1. To what extent do individual factors influence teenage pregnancy school dropout in day secondary schools in Kimilili Sub-County?
2. To what extent do home factors influence teenage pregnancy school dropout in day secondary schools in Kimilili Sub-County?
3. To what extent do school factors influence teenage pregnancy school dropout in day secondary schools in Kimilili Sub-County?
4. To what extent does teenage pregnancy influence completion rates of girls in public day secondary schools in Kimilili Sub-County?

## **1.6 Significance of the Study**

This study aimed at contributing to the existing knowledge on minimizing the effect that teenage pregnancy has on secondary school completion rate in order to minimize the acknowledged gender disparity in basic education completion. The findings of the study thereof would assist educational policy makers and planners assess existing policies and strategies in relation to school girl pregnancies. This hopefully would generate better approaches that may assist retain girls in school up to sitting for their Kenya Certificate of Secondary Education (K.C.S.E.) that terminates basic education and forms the bridge to higher education.

As they finance their children's education, the least parents and families expect is that their daughters complete their education and if possible proceed to tertiary level. This study findings would assist them successfully guide their adolescent girls through secondary education.

### **1.7 Assumptions of the Study**

This study was guided by assumptions here-under;

1. Respondents were capable of identifying teenage pregnancy risk factors.
2. Minimizing teenage pregnancy would improve day secondary school completion rates.

### **1.8 Limitations of the Study**

Issues that affected the outcome of this study included; obtaining data on causes of dropout since some girls leave school without giving reasons for doing so and accounting for girls who dropped out or joined other schools. To overcome all these, the study assumed that records provided by schools were truthful and accurate.

### **1.9 Delimitations of the study**

This study on factors influencing teenage pregnancy non completion among girls in public day secondary schools conducted in Kimilili Sub-County of Bungoma County involved public day secondary female students, Directors of Study of the respective schools, and the Sub County Director of Education (DoE).

### **1.10 Definition of significant terms**

**Completion rate** refers to percentages of students who actually remain in school up to the end of secondary cycle against those who initially enrolled in form one.

**Home environment** refers to issues emanating from the home or family that influences adolescent sexual behavior.

**Individual factors** refer to personal attributes that affect adolescent girls' sexual decisions and choices

**School factors** refer to issues within schools that influence adolescent sexual behavior.

**Teenage pregnancy** refers conception while the girl is a teen and still at school.

### **1.11 Organization of the study**

The study is organized in five chapters. Chapter one has introduction to the study background information, statement of the problem, purpose of the study, objectives, research questions, significance of the study, assumptions of the study, limitations of the study, delimitations of the study, definitions of significant terms

and organization of the study. Chapter two has related literature reviewed about teenage pregnancy predisposing factors. It covers individual factors, home environment, school based factors, the impact of teenage pregnancy on school completion rates and summary of the literature reviewed. The theoretical and the conceptual frameworks of the study were also dealt with in this chapter. Chapter three is on research methodology with the following subtopics; introduction, research design, target population, sample size and sampling procedures, research instruments, validity and reliability of the research instruments, data collection procedures, data analysis techniques and ethical considerations. Chapter four covers data analysis presentation and discussion. Chapter five presents the summary of the study, conclusion/recommendations.



## **CHAPTER TWO**

### **RELATED LITERATURE REVIEWED**

#### **2.1 Introduction**

This chapter covers teenage pregnancy risk factors that secondary school girls face namely individual factors, home environment and school based factors. The impact of teenage pregnancy on completion rate, summary of literature reviewed, theoretical framework and the conceptual frameworks have also been dealt with hereunder.

#### **2.2 Teenage Pregnancy Risk Factors**

Ramirez and Carpenter (2008) categorize reasons for dropping out of school into four issues; home, community/society, school and student based. According to them any of these or a combination of any of them can contribute to girls leaving school due to pregnancy. This study considered individual, home environment and school based factors only.

##### **2.2.1 Individual factors**

Girls individual attributes can lead to early pregnancy and the consequent school disruption. These variables include early maturation and early sexual debut (Muganda-Onyando, Omondi, 2008; Musonga, 2014), multiplicity of sexual partnerships, contraceptive use, risk perception and attitudes towards teenage

pregnancy (Panday, Makiwane, Ranchold, 2009). However this study only examined the student's personal attributes in relation to contraceptive use.

A study by Willan (2013) that explored access to and use of contraceptives in South Africa, established that most teenagers had basic knowledge about contraceptives and protection from unplanned pregnancies however many reported insufficient and incorrect usage as well as limited knowledge on fertility and conception. In addition teenager's negative perceptions associated with contraceptive use determined whether or not they would use them (Wood and Jewkes 2006).

Early sexual debut typically results into a higher number of sexual partnerships and without sufficient knowledge and use of contraceptives, poor risk evaluation, and ambivalent attitudes, increases the risk of exposure to pregnancy (Panday, Makiwane, Ranchold, et al.). A study by KHRC/RHRA (2010) established that a whopping 51.9% of the slum girls in Korogocho of 15-17 age bracket were already sexually active. Since the setting of KHRC/RHRA 2010 study was an urban slum that did not specify school status of the respondents, the findings cannot therefore be generalized for the entire population of school going youths especially for rural areas.

Bearinger, Sieving, Ferguson et al., (2007) contend that all adolescents need to access quality youth friendly services provided by clinicians trained to work with this population. Boonstra (2007) contends that teens are concerned about and want to protect themselves from both unplanned pregnancy and HIV, but that misinformation about sex and its consequences is common and many adolescents do not get the education and services they need. The KHRC/RHRA study in (2010) also decried the fact that adolescents engaged in sexual behaviors that put them at a risk of unwanted pregnancies and sexually transmitted infections with or without the provision of contraceptives. However it is not clear from this study whether the problem is ease of access to contraceptives or negative perceptions that are preventing young girls from protecting themselves. This study sought to investigate the perceptions of secondary school students on the availability and use of ASRH/YFRHS at public health facilities in Kimilili Sub-County.

### **2.2.2 Home environment**

The transition to healthy adulthood is dependent on the social environment in which adolescents live, learn and earn. This social environment comprises of families, communities, schools and peers. Parents and families are a crucial part of this environment (World Health Organization, 2007) that basically constitutes the home environment.

Quoting Miller, Benson and Galbraith (2001); Panday, Makiwane, Ranchold et al., (2009) state that parent child closeness and physical availability decreases the risk of pregnancy by influencing adolescent sexual and contraceptive behaviors. Ngom, Magadi and Owuor (2003) in a study on parental presence and adolescent health among the urban poor in Nairobi concluded that the presence of the father significantly reduced the likelihood that young girls would engage in sex and have unwanted pregnancy.

Parental monitoring and supervision is another home factor associated with teenage pregnancy. Panday, Makiwane ,Ranchold et al., (2009) who cites Berglas, Brindis and Cohen (2003) point out that parents who set rules ,and enforce them can positively impact sexual behavior. It encompasses actions aimed at shaping or restricting adolescent behaviors. This is in agreement with findings from a study by Makundi (2010) in Mtwara region of Tanzania that showed that poor parental monitoring and supervision is a key factor leading to teenage pregnancies. This study set out to establish if this situation is applicable in Kimilili Sub-County.

Although parent-child communication on matters sexual has been shown to have considerable influence on teen dating behavior most parents prefer not to discuss reproductive matters with their children as it is considered taboo (Panday, Makiwane, Ranchold et al., 2009). According to Nundwe (2012) barriers that

affect parent-child communication include gender differences, economic barriers and low levels of education among parents.

Lack of parent to child communication encourages adolescents to seek solace in sexual activity (Muganda-Onyando, Omondi, 2008) whereas open and age appropriate communication on reproductive matters has been shown to delay sexual debut and diminish negative peer pressure that is associated with unwanted early pregnancies (Panday, Makiwane Ranchold et al., 2009). This study endeavored to establish students perceptions about the apparent barriers between parents and their teens when it comes to communicating reproductive issues.

Across the globe a substantial body of evidence points to the fact that poverty is one of the most consistent risk factors for early pregnancy. In the USA adolescents in poor neighbourhoods were found to be more apt to engage in sex leading to pregnancy (Domenico and Jones, 2007). In South Africa poverty in some cases leads to intergenerational transactional sex that decreases a girl's ability to negotiate for safe sex, meaning that she may end up pregnant or with a venereal disease (Willan, 2013). According to a study by FAWU Uganda (2011), the lack of basic necessities exposes girls to the risk of teenage pregnancy as the girls who are not strong willed end up exchanging sex for money.

A study by KHRC/RHRA established that extreme poverty forces women and girls to earn incomes through sexually risky behavior such as prostitution. Could this be the scenario in Kimilili Sub-County given the fact that it most densely populated part of Bungoma where about 56% of the population lives below the poverty line (Republic of Kenya, 2005). This study sought to examine how poverty influences teenage pregnancy school dropout in Kimilili Sub-County.

### **2.2.3 School Based Factors**

According to Collins, Allagiri and Summers (2002) the American public wants schools to deliver strong abstinence messages alongside information about self protection for young people who find themselves in sexual situations. They further assert that a majority of parents support sex education in schools, including the provision of information about contraceptives and condom use.

Rosen, Murray and Moreland (2004) in a policy working paper developed for Nigeria revealed that comprehensive sexuality education is effective in improving youth reproductive health by delaying sexual initiation, reducing number of sexual partners and increasing contraceptive use among the sexually active. According to a study by Bearinger, Sieving, Ferguson et al., (2007) sex education programs should provide accurate and comprehensive information while building skills for negotiating sexual behavior.

Effective sexuality education can provide young people with age appropriate, culturally relevant and scientifically accurate information. This includes structured opportunities for young people to explore their attitudes and values and to practice decision making and other life skills they will need to make informed choices about their sexual lives (UNESCO, 2009). Collins, Allagiri and Summers (2002) contend that the substantial portion of school students who report being sexually active should be provided with information so as to protect themselves.

At school, the Ministry of Education is yet to provide comprehensive sexuality education curriculum despite the students' strong belief that it is within the schools ambit to do so (Muganda-Onyando and Omondi, 2008). A report by The United States Agency for International Development (USAID) in 2010 pointed out the inadequacy of Life Skills Education as currently implemented, in covering reproductive issues facing adolescents. According to Anya (2013) the main goal of the Life Skills approach is to enhance the young people's ability to take responsibility for making choices, resisting negative pressure, meet the demands of everyday life and avoiding risky behaviour. From this perspective then Life Skills Education offers valuable social skills but does not adequately respond to reproductive issues in the face of an explosive media driven youth culture that revolves around sexuality (Strasburger, 2010).

The critical lack of information on sexuality either at school or at home means that teenagers source their information from their peers and media (Muganda-Onyando and Omondi, 2008) that is often misleading. According to the Guttmacher Institute (2012) when knowledge about sexual health was not forthcoming then American teens turned to the media sources such as websites and television that often provided inaccurate and misleading information associated with increased risk of sex and teen pregnancies.

Obongo writing in the UReport of February 23<sup>rd</sup> 2015 opines that adolescent sexuality has been marked with controversies that have significantly hindered the fight against HIV, other sexually transmitted infections and teen pregnancy. He stated further that these controversies centered around what is morally right and the fears of encouraging sexual activity. In the wake of the prevailing confusion it is not clear what the perceptions of teachers and students are about comprehensive sexuality education a gap this study set out to fill.

Sexual harassment at school is another factor that predisposes girls to early pregnancy. At school it is largely perpetrated by boys learning in the same school and teachers to some extent (Abuya, 2013). Sifuna and Chege (2006), in their study, report that there were high rates of girls dropping out of unaided Harambee schools due premarital pregnancies that were linked to sexual harassment. This



study seeks to establish if this applicable in day secondary schools that succeeded Harambee schools against the backdrop of the Sexual Offences Act of 2006.

According to Lloyd (2007) who cites studies by Grant and Hallman (2006) and Marteleto (2006) that used longitudinal data sets from South Africa, there exists an association between academic achievement and sexual initiation and therefore pregnancy: showing that those who perform better in school are less likely to initiate sex or use contraceptives if active, and for girls less likely to become pregnant or drop out if pregnant. Repetition due to poor performance leads to biological maturation of the girls while still in school and the attendant peer pressure to become sexually active can easily result in unwanted pregnancy (Kirby, 2002).

Coles (2005) opines that girls who become teen mothers were already experiencing academic difficulties in school, had low educational expectations, and were not confident they will graduate. Pursuing higher education or a career was not reasonably within reach and adolescent girls had no motivation to avoid pregnancy as it served as an alternative path to economic independence and adult status (Turner, 2004). This study sought to establish if poor performance is a pregnancy risk factor in Kimilili Sub-County day secondary schools.

### **2.3 Impact of teenage pregnancy on completion rates**

Van Pelt (2012) observes that in the United States only 50% of teen mothers have a high school diploma compared to 90% of girls who did not have a teen pregnancy whereas fewer than 38% of teen girls who have a child before turning 18 earn their high school diploma. She states further that less than 2% of teens who have a baby before 18 ever earn a college degree.

In analyzing DHS data from Cameroon Eloundou-Enyegue (2004) calculated that in Cameroon teenage pregnancies account for 13% of female dropouts in grade 6, 33-41% in grades 7-10 and 4-22% in grades 10-13. According to his estimates pregnancies increased the gender gap by six percentage points during primary which increases to thirty in secondary schools in contrast to 11 percentage points difference with other factors.

Quoting statistics from the Ministry of Education (2005) Inter Press Service (July 28th 2006) observes that the completion rates in Kenya for secondary school education declined from 92.1% to 89.6% in 2004 with boys recording a 91.5% rate as compared to girls 87.5% with pregnancy accounting for 31% of the school dropout cases among girls. The overall effect of unchecked girl child dropout is lowering the gender parity index from about 1 in primary school to 0.75 in favor of boys at secondary school [Kenya National Bureau of Statistics (KNBS), 2010].

By 2005 secondary school dropout rates in former Bungoma district that encompasses the present day Kimilili Sub-County stood at 30% for girls and 26.5% for boys respectively. It is important to note that over a half of children enrolled in schools in Bungoma drop out before completing their basic education and in the process impacting on the quality and quantity of labor produced (Republic of Kenya, 2005). This study examined the impact of teenage pregnancy on completion rates in day secondary schools in Kimilili Sub-County.

#### **2.4 Summary of literature reviewed**

Studies both locally and internationally have identified teenage pregnancy as serious threat to the education of the girl child. Panday, Makiwane, Ranchold et al., (2009) and Willan (2013) studied the prevalence, determinants and interventions for teenage pregnancies in South Africa. While the findings of the above studies are quite informative, they were within the South African context and therefore largely country specific. In addition these studies were dependent on desk literature review with small samples.

Muganda-Onyando and Omondi (2008), in their study on the costs of teenage pregnancy and school dropout in Kenya dealt with a broad spectrum of issues surrounding school girl pregnancy based on project results by the Centre for the Study of Adolescence (CSA) from Suba and Kisumu districts. Musonga (2014) who studied varied factors responsible for girl child dropout concluded that

pregnancy is a significant factor in Bumula Sub-County. In addition, though many studies has been done on pregnancy related school dropout worldwide none has been in Kimilili Sub-County a gap that this study intended to fill.

Also as illustrated above, most studies dwelt mainly on desktop review of literature with limited use of actual field studies and used limited instruments that could not solicit adequate real-time and current data for analysis; this study also broadened the spectrum by use of a variety of tools such as questionnaires and interview schedules.

## **2.5 Theoretical Framework**

The study was analyzed using the human capital theory which views human beings as critical elements of economic production alongside land, capital and entrepreneurship. According to DeSousa and Gebremedhin (1999) human capital theory was developed by Shultz (1961) and Becker (1962) to take account for the increase in productivity that could not be explained by improvements in technology or fiscal capital. Education is seen as crucial to human capital development on the basis that it improves the quality of labor force and therefore the value of labor input in the production process (Welch, 1975 as cited by DeSousa and Gebremedhin 1999).

Consequent to this education and training not only plays a central role in human capital formation but is a crucial engine in the growth of the economy. According to DeSousa and Gebremedhin (1999) who cites Gebremedhin and Odell (1996) human capital refers to individual skills, talents, capacities, and elements of knowledge that improve one's contribution to the production of goods and services. To obtain the needed skills and knowledge then people and governments must invest in more and more education meaning that any form school dropout ultimately affects the quality and quantity of human capital output.

Teenage pregnancy dropout rates that are driven by a number risk factors without the mitigating influence of the ARHD policy and the easy availability of ARSH/YFRHS affects completion of schooling hence inequitable formation of human capital at higher levels of education.

The human capital theory was considered appropriate for this study because of the fact that education is used to develop human capital and the more the education the better. However teenage pregnancy causes girls to drop out of schools meaning their resourcefulness as human capital is diminished with limited education. Without skills and training that schooling should provide then fewer women than men manage to penetrate the labor market that continues to require increased literacy, more education, enhanced technical skills and lifelong learning (Lam, Harder, Lamm, et al., 2005) that only comes at tertiary levels.

Since human capital sees education as a form of investment with future benefits both to the society and the individual then it is used to justify the massive expenditures incurred by governments and societies the world over. It is used to come up with policies intended at increasing human capital base which include using the human capital of women, investing in higher education and supporting higher education programs. Moreover the availability of skilled labor determines industrial location by investors and therefore the attractiveness of any country will be measured by the stocks of human capital among other things that are directly affected by completion rates. Pregnant girls who dropout, enter the job market at a significant cost to the society (DeSousa & Gebremedhin 1999).

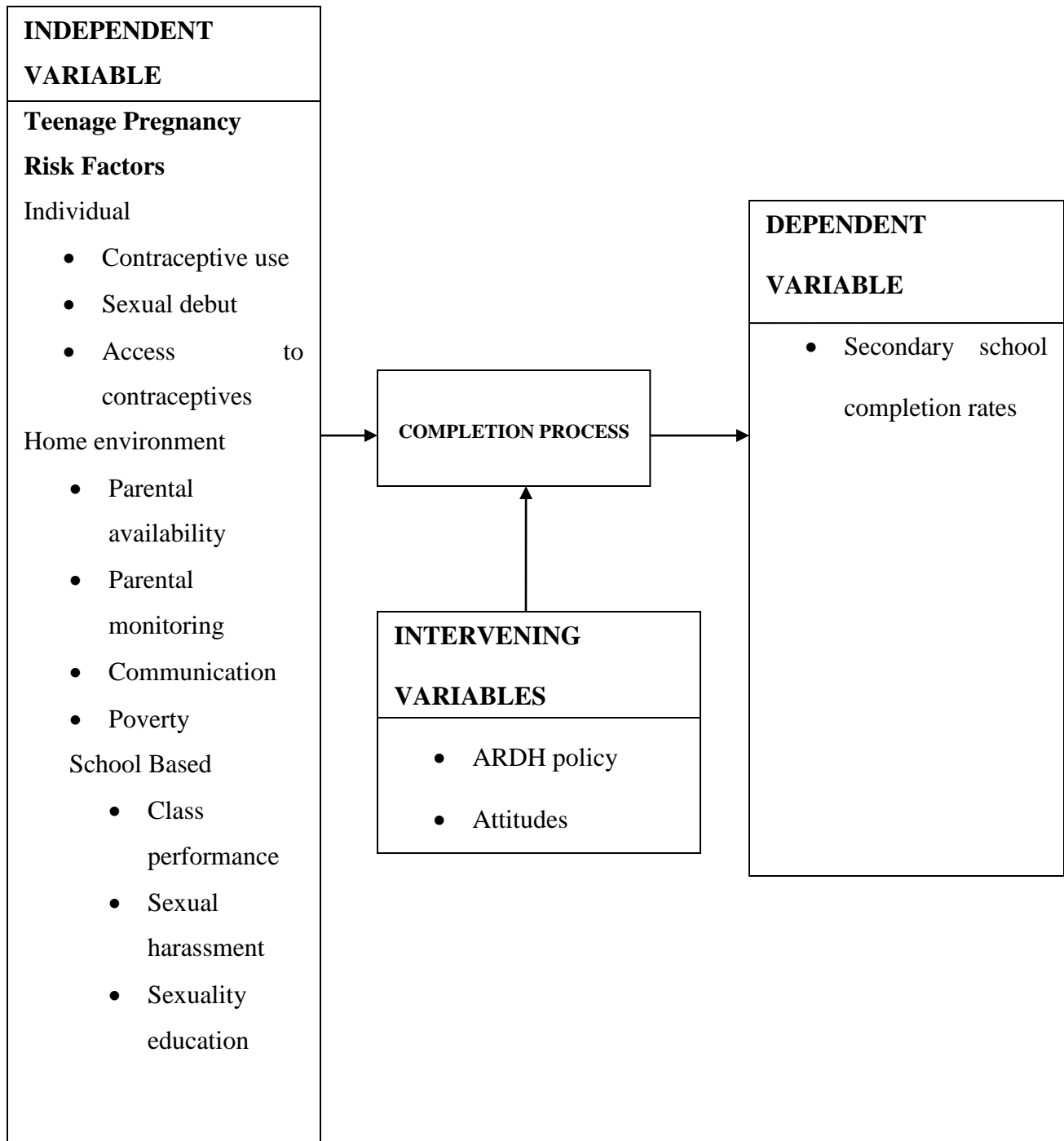
However a major weakness of this theory includes the fact that it assumes that it is only education that equips people with knowledge, skills and attitudes for the labour market. In addition people invest in themselves with the hope of achieving higher returns later, however this may not be attainable due to diminishing employment opportunities, labour market imperfections, monopoly and labour unions that easily lead to distortions in pay that do not reflect the level of education.

## **2.6 Conceptual Framework**

A conceptual framework is a model of presentation through which the researcher represents the relationship between variables in the study graphically or

diagrammatically (Orodho, 2004). This study adopted a conceptual frame work derived from the reviewed literature on the effects of teen pregnancy on education of the girl child especially the completion process. The Independent variable in this study was Teenage Pregnancy that was assumed to affect completion rates at secondary level. Considered under the independent variable were factors viewed as major contributors to school girl pregnancy. These include; individual, home environment and school based factors.

The intervening variable was the Kenya the Adolescent Reproductive Health Development (ARHD) policy of 2003. This policy is to complement other initiatives that address the girl child education. Among other approaches it proposes to scale up adolescent contraceptive use rate, increase facilities offering basic obstetric care and increase facilities offering youth friendly Adolescent Sexual and Reproductive Health (ASRH) services in order to achieve Education For All (EFA) and gender equity in education by 2015 [Population Reference Bureau (PRB), 2013]. The Dependent variable for this study was girls Completion rate of secondary school education. It was hinged on the premise that minimizing teenage pregnancy among other things will help to boost the retention and completion rates of girls in secondary schools in Kenya.



**Figure 2.1: Relationship between teenage pregnancy and secondary school completion rates**



## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Introduction**

Research methodology is the procedure used to collect, organize and analyze data. It includes research design, target population, sampling techniques and sample size, data collection instruments, validity and reliability of the instruments, data analysis techniques and ethical considerations (Mugenda and Mugenda, 2003).

#### **3.2 Research design**

The study used descriptive survey. It is a method of collecting information by interviewing or administering a questionnaire to a sample of individuals (Orodho, 2004). This design is used to explain or explore existing status of two or more variables at a given point in time (Mugenda and Mugenda, 2003). It is on this basis that the design was adopted to examine teenage pregnancy and secondary school completion rates in Kimilili Bungoma Sub County. Guided by survey research design the study endeavored to gather facts, knowledge, opinions and judgments from students, teachers, and education officers on how they view teenage pregnancy with regard to school completion rates.

### 3.3 Target population

According to Mugenda and Mugenda (2003), a target population consists of all members of a real or a hypothetical set of people to which the researcher wishes to generalize the results of the study.

**Table 3.1: School distribution in Kimilili Sub-County**

Type of school	Number
Boarding	9
Mixed Day	17
Girls Day	1
<b>Total</b>	<b>27</b>

**Source: Kimilili Sub-County Education Office**

As indicated in Table 3.1 of the 27 secondary schools in Kimilili Sub-County, 18 are day while 9 are boarding schools.

The target population of this study therefore was comprised of the total girls enrolment of 2056 (D.o.E. office) in the aforementioned day secondary schools.

The accessible population comprised of all the 300 form four girl students already registered to sit for KCSE in the 18 day secondary schools, all their 18 directors

of study, and 1 D.o.E. The grand total population of the study was 319 respondents (D.o.E. office).

Kimilili is one of the constituent Sub-Counties of the larger Bungoma County in the former Western Province and it is headquartered at Kimilili town. Situated in the Northern parts of Bungoma County and it is neighbored to the west; Bungoma Central, to the South East; Bungoma East, to the North; Mt. Elgon, and Tongaren to the North East. Kimilili Sub-County has two administrative divisions: Kimilili and Kamukuywa.

### **3.4 Sample size and sampling procedure**

Mugenda and Mugenda (2003), assert that the main consideration for determining the sample size is the capability to collect in depth data at affordable costs in terms of time, finances and resources. According to Kerlinger (2004) an ideal sample size should be between 10%-30%. Depending on the data to be gathered and analyzed. Using this, the researcher sampled 90 form four girls (30%) from 8 schools, their 8 Directors of Study using stratified random sampling and 1 D.o.E. using census sampling. Census, a complete enumeration of all items in the population, where no element of chance is left and a high accuracy is obtained (Kothari, 2009) was done on the D.o.E. The 90 girls and 8 Directors of Study were selected from 8 schools through stratified random sampling, 4 from each of

the two divisions in the Sub County. 90 form four girl students, 8 directors of study, and 1 D.o.E. gave rise to a total sample population of 99.

### **3.5 Research instruments**

This study was undertaken through the use a questionnaires and interview schedules. Questionnaires are quite useful when responses are required from a large number of respondents (Orodho, 2004). The students' questionnaire that was administered by the researcher himself comprised two sections. The first section collected information on the background while the second section solicited information on perceptions of learners on teenage pregnancy risk factors, contraceptive use and communication barriers on sexual issues. Director of Study questionnaires sought background information on the extent of teenage pregnancies at school and their perceptions on the risk factors that emanate from the school environment. The D.o.E. in charge of the Sub County was interviewed after obtaining a prior appointment.

An interview schedule was an appropriate instrument for this study as it allowed the interviewer to cover all dimensions of the investigation through probing of participants. The interview schedule was tailored to obtain information on teenage pregnancy risk factors.

### **3.6 Validity of the instruments**

Validity is the degree the research instruments measure the variables they were intended to measure. Content and face validity of the instruments was determined before deployment. Content validity refers to the representativeness of the items on the instrument as they relate with content being measured, whereas face validity is the appeal and appearance of the instrument (Kathuri and Pals, 1993). To check on the validity of the instruments the questionnaires, and interview guides drawn as per the study objectives were presented to the research supervisors and other educational planning experts from University of Nairobi who scrutinized and advised on them. Their input was used to improve them through expert judgment (Borg and Gall, 1985).

### **3.7 Reliability of the instruments**

Reliability of research instruments is the extent to which results are consistent over time and are an accurate representation of the population under study (Joppe, 2000). The consistency of this study instruments was ascertained through test retest method in two schools that were left out of the actual study. After piloting the same test was administered again to the same respondents at an interval of two weeks and the test scores correlated using Pearson's product moment correlation coefficient (R) using the formula

$$R = \frac{N \sum xy - \sum x \sum y}{\sqrt{N \sum x^2 - (\sum x)^2} \sqrt{N \sum y^2 - (\sum y)^2}}$$

Where  $x$  are the scores for test 1,  $y$  the scores for test 2,  $N$  is the number of the pairs of data and  $\sum$  the summation of the test scores. The instruments were adjudged reliable when  $R$  yielded 0.6 that is between 0.5 and 1 (Kathuri and Pals, 1993).

### **3.8 Data collection procedures**

Prior to collection of data the researcher sought permission from the Board of Post Graduate Studies of the University of Nairobi that enabled him process a research permit from the National Commission for Science, Technology and Innovation for collection of data from all the respondents. Armed with the research permit the researcher then obtained consent through introductory letters to conduct the study from the County Commissioner, the County Director of Education, the Sub County Director of Education and the principals of the selected schools.

Questionnaires were personally delivered and administered so as to clarify to the respondents the purpose of the research. Due to the sensitive nature of the information the researcher sought, uttermost confidentiality and anonymity of the respondents was maintained.

### **3.9 Data analysis techniques**

After sorting, classifying, coding, and tabulating the data obtained was analyzed using descriptive statistics which employed frequencies and percentages with the aid of the Statistical Package for social Sciences (SPSS) program version 20. Quantitative data were analyzed descriptively using measures of central tendency; that is frequencies and percentages. For ease of analysis the researcher analyzed the data collected in terms of objectives so as to answer the four study questions. The findings are presented using tables.

### **3.10 Ethical considerations**

All respondents were assured of their confidentiality by the researcher explaining and making clear the purpose of the study being solely and purely academic and that all information given would be treated with uttermost respect. Consequently all respondents were implored to fill the questionnaires without use of any identification details whatsoever to maintain anonymity. Adherence to the principle of voluntary and informed consent to participate in this study was highly esteemed and upheld throughout the research.

## CHAPTER FOUR

### DATA ANALYSIS, PRESENTATION AND DISCUSSION

#### 4.1 Introduction

This chapter presents the instruments return rate, type of schools, gender distribution of the Directors of Study, their teaching experience, demographic characteristics of students, their age distribution and school characteristics. Results of the study are presented in three sections. The first sections deals with individual factors and teenage pregnancy, the second gives data on home based factors and teenage pregnancy, the third on school based factors and the fourth; data addressing the extent of teenage pregnancy in school non completion.

#### 4.2 Instrument return rate

The study used questionnaires and an interview schedule. Questionnaire return rate was as indicated on Table 4.1.

**Table 4.1: Questionnaire return rate**

<b>Sample</b>	<b>Dispatched</b>	<b>Received</b>	<b>Return Rate</b>
D.O.S's	8	8	100%
Girl Students	90	90	100%
<b>Total</b>	<b>98</b>	<b>98</b>	<b>100%</b>



The findings on Table 4.1 indicate that all the questionnaires given out were collected back achieving a 100% return rate. Therefore the data collected was reliable and acceptable according to Mugenda and Mugenda (2003). The D.o.E. was personally interviewed by the researcher.

### 4.3 Demographic characteristics of the D.o.Ss

Directors of Study were asked to indicate the type of school, their gender and the teaching experience in terms how long they taught after college.

#### 4.3.1 Type of school

Day secondary schools offer girls who cannot afford the cost of girls only boarding secondary schools opportunities to pursue secondary education. Directors of Study were asked to indicate their school types. Table 4.2 gives the distribution of day schools.

**Table 4.2: Type of school**

<b>Type</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Mixed Day	7	87.5
Girls Day	1	12.5
<b>Total</b>	<b>8</b>	<b>100</b>

The results on table 4.2 show that the majority of the target schools were mixed day at 87.5%. In Kimilili Sub-County most of the girls who miss out on girls' only boarding secondary schools for a variety of reasons enroll in the nearest mixed day secondary schools.

#### 4.3.2 Gender of the D.o.S

The issue of gender balance arises in senior school administrative positions that serve as role models to the girls. The Directors of Study were asked to indicate their gender. Table 4.3 presents a summary of their responses.

**Table 4.3: D.o.Ss Gender Distribution**

<b>Gender</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Male	6	75
Female	2	25
<b>Total</b>	<b>8</b>	<b>100</b>

The results on Table 4.3 clearly indicate that there were more male Directors of Study (75%) than female (25%).

### 4.3.3 Teaching experience of the D.o.Ss

Directors of Study were asked to indicate their level of experience in terms of length of service since leaving college. Table 4.4 summarizes the teaching experience of the Directors of Study.

**Table 4.4: Teaching experience**

<b>Experience</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
6.10	2	25
11-16	3	37.5
17 and over	3	37.5
Total	8	100

Table 4.4 reveals that 37.5% of the Directors of Study had teaching experience spanning 17 and over, years and therefore had the requisite experience to understand the impact of teenage pregnancy on school completion rates.

### 4.4 Demographic characteristics of student respondents

Student respondents were asked to indicate their age and the type of school they were attending.

#### 4.4.1 Age distribution of student respondents

Student respondents gave their age as shown in Table 4.5.

**Table 4.5: Age of students**

<b>Age</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
16-17	28	31.1
18-19	56	62.2
20 and over	6	6.7
<b>Total</b>	<b>90</b>	<b>100</b>

The data on Table 4.5 reveals that the majority of the form four girls, 62.2% were aged between 18-19 years. This implies the respondents selected for this study were mature adolescents deemed able to give correct information on teenage pregnancies.

#### 4.4.2 School characteristics

Students were asked to indicate their school types in section I of the questionnaire.

**Table 4.6: Schools for the study**

<b>School type</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Mixed day	69	76.7
Girls day	21	23.3
Total	90	100

Findings on Table 4.6 shows that 76.7% of the respondents were in mixed day schools while only 23.3% of were girls' day school. This implies that the majority of the respondents selected for the study were in mixed schools. It is therefore likely that boy girl relationships exist in this schools that may put girls at elevated risk for teenage pregnancy.

#### **4.5 Individual factors and teenage pregnancy**

The first objective was to establish the extent to which individual factors influence teenage pregnancy in public day secondary schools in Kimiliili Sub-County. This was achieved through the question 'to what extent do individual factors influence teenage pregnancy school dropout?' The individual factors considered here are: sexual behavior, use of contraceptives, perceptions about school girls using contraceptives and availability of family planning services from government hospitals/health centers.

#### 4.5.1 Sexual behavior

In order to gauge the level of teenage pregnancy risk that girls expose themselves to it was necessary to find out whether respondents were sexually active or not. Therefore students were asked to indicate if they were sexually active or not. Table 4.7 summarizes their responses.

**Table 4.7: Sexual behavior**

<b>Sexually active</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Yes	32	31.5
No	55	68.5
<b>Total</b>	<b>90</b>	<b>100</b>

The results on Table 4.7 shows that the majority of students (68.5%) were not sexually active whereas 31.5% were sexually active thus putting themselves at the risk of teenage pregnancy. This in agreement with Musonga (2014) who found that high rate of premarital sex that led to unwanted pregnancies among girls was associated with high school dropout rate. According to Ann, Gregory, Lloyd et al. (2007) girls who engage in premarital sex while still in school are more likely to drop out.

#### 4.5.2 Contraceptive use

Students who had indicated that they were sexually active were asked if they had used contraceptives in their last sexual encounter. Table 4.8 summarizes the observations made.

**Table 4.8: Contraceptive use**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Yes	16	45.7
No	19	54.3
<b>Total</b>	<b>35</b>	<b>100</b>

The findings on Table 4.8 show that majority of the sexually active girls, 54.3% did not use contraceptives in their last sexual encounter thus elevating their chances of pregnancy and venereal infections. This in agreement with Obonyo (2014) who established that utilization of reproductive health services among school and college going youths was low despite the fact that they were sexually active. According to a study by Willan (2013) correct and consistent use of contraceptives among South African youths was low.

### 4.5.3 Students perspective on contraceptive use

A question was asked if the sexually active girls should be encouraged to use contraceptives/family planning in order avoid pregnancy related school non completion. Their responses are presented on Table 4.9.

**Table 4.9: Should sexually active girls be encouraged to use contraceptives?**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Yes	63	70
No	27	30
<b>Total</b>	<b>90</b>	<b>100</b>

The data Table 4.9 reveals that majority of students, 70% supported the use of contraceptives/family planning services while 30% opposed. This concurs with Boonstra (2007) who found out that teens are concerned about and want to protect themselves from pregnancy and HIV were it not for the lack of education and reproductive services in many third world countries. A KHRC/RHRA study in Korogocho slums in Nairobi in 2010 established that even though contraceptive awareness was very high among the slum youth, barriers emerged when it came to access and use.



#### 4.5.4 Availability of contraceptives

Respondents were asked about the availability of family planning /reproductive services in government hospitals /health centers. Table 4.10 shows the distribution of the responses gathered.

**Table 4.10: Are family planning/contraceptives easily available**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Yes	17	18.9
No	18	20
Not sure	55	61.1
<b>Total</b>	<b>90</b>	<b>100</b>

The findings on Table 4.10 the majority of the students, 61.1% were not sure about the availability of contraceptive/family planning services in government health facilities. This is in agreement with Obonyo (2014) who established that majority of school and college youths were not aware of the availability of reproductive health services targeting them in all public health facilities. Holt, Lince, Struthers, Nkala, et al. (2012) had noted in their study in South Africa that availability, accessibility and acceptability of health care services for young women significantly impacted their use of prevention methods which in turn influenced their risk of pregnancy and HIV. A study by Willan (2013) revealed that access to contraceptives was difficult especially for the young ones.

#### **4.6 Home based factors and pregnancy**

The second objective was to examine the extent to which home based factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County. This was achieved through the question ‘to what extent do home factors influence teenage pregnancy school dropout?’ Home associated factors considered here are: barriers to parent-adolescent communication, aspects of parental supervision and monitoring and poverty.

##### **4.6.1 Barriers to parent-adolescent communication**

Student respondents were asked a question on common barriers that could hinder parent-adolescent discussions on matters reproductive. Table 4.11 gives a summary of the findings.

**Table 4.11: Barriers to communication on reproductive issues**

<b>Factor</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Unavailable parents	32	35.6
Taboo	24	26.7
No time for discussion	23	25.5
Parent not well informed	11	12.2
<b>Total</b>	<b>90</b>	<b>100</b>

Findings on Table 4.11 indicate that 12.2% of the respondents indicated that parents were not well informed, 25.5% cited lack of time for discussion, 26.7% pointed at taboos while the majority, 35.6% indicated unavailability of parents. Ngom, Magadi, Owuor et al. (2003) in their study showed that a fathers' presence inhibited girls' sexual activities. 26.7% of the respondents indicated that taboos were a hindrance to parent-adolescent dialogues on reproductive matters. This confirms findings by Nundwe (2012) that showed that parents were too busy with economic activities to be available for any meaningful discussions with their own children about sexuality and that cultural norms or taboos were significant barriers. Unavailability of parents is critical determinant of pregnancy as it influences a teens' sexual and contraceptive behavior (Panday, Makiwane, Ranchold et al. 2009).

#### **4.6.2 Supervision and Monitoring**

Students were presented with a statement structured on a Likert five point scale that was meant to measure the level of parental monitoring and supervision during evenings, weekends and school holidays. Students were to show their level of agreement to the statement "My parent/guardian strictly supervises/monitors my activities in the evenings/weekends/holidays". Table 4.12 presents a summary of their responses.

**Table 4.12: Parental monitoring and supervision**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Strongly Agree	17	18.9
Agree	19	21.1
Undecided	3	3.3
Disagree	29	32.3
Strongly Disagree	22	24.4
<b>Total</b>	<b>90</b>	<b>100</b>

Table 4.12 indicates, 32.3% of the student respondents disagreed while 24.4% strongly disagreed. The implication drawn from this table is that most parents are not exercising parental monitoring and supervision and therefore inadvertently allowing their children enough room to engage in sexually risky activities. According to the D.o.E. the lack of rules and regulations guiding sexual behavior coupled with inadequate monitoring and supervision constituted poor parenting that inevitably led to poor sexual outcomes especially during cultural activities like circumcision. This is in concurrence with a study in Mtwara region in Tanzania by Makundi (2010) which established that 24.2% of the teens felt that parents and guardians never monitored them. According to a study by FAWE Uganda in 2011 most of the girls end up pregnant during holiday time an indication of neglect and lack of guidance by parents.

### 4.6.3 Poverty at Home

Students were asked their reaction to a statement structured on the lickert point 5 scale intended to gauge the influence of poverty in girls' risky behavior in that girls from poor homes are often tempted to accept lifts/money/gifts from boys and men in exchange for sexual relations. Table 4.13 is a summary of the observations made.

**Table 4.13: Home poverty and girls sexual behaviour**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Strongly Agree	26	40
Agree	29	32.2
Undecided	10	11.1
Disagree	15	16.7
<b>Total</b>	<b>90</b>	<b>100</b>

The data on Table 4.13 illustrates that most of the respondents, 40% strongly agreed, 32.2% agreed that because of poverty girls were often tempted to accept lifts, money or gifts from boys and men in exchange for sexual relationships. This phenomenon essentially becomes transactional in nature and puts girls at risk of pregnancy. The interview schedule with the D.o.E. revealed that high poverty levels in the area made school girls vulnerable to sexual predators like “boda

bodas”, “matatu crews”, businessmen and even teachers who lure them using money.

This is in agreement with findings by a study by KHRC/RHRA in Korogocho slums in Nairobi that extreme poverty forces girls into risky sexual behaviors in the pursuit of a living. A lack of basic requirements makes girls vulnerable to risky sexual behaviours that expose them to pregnancy particularly day scholars (FAWE Uganda, 2011). According to Willan (2013) transactional sex as a result of poverty tilts the balance against girls trying to negotiate for safe sex or contraceptive use when in sexual situations.

#### **4.7 School based factors**

The third objective was to determine the extent to which school factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County. However it was important to first establish whether schools experienced problems with teenage pregnancy in the period 2011 to 2014. Directors of Study were therefore asked if schools where they were teaching had experienced teenage in the period 2011 to 2014. Table 4.14 presents a summary of the observations.

**Table 4.14: Pregnancy dropouts in the period 2011-2014**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Yes	8	100
<b>Total</b>	<b>8</b>	<b>100</b>

The data on Table 4.14 indicates that all the respondents answered in affirmative that actually their schools have had school dropouts in the aforementioned period on account of teenage pregnancy. This resonates with studies by Nyaga (2012) and Muganda-Onyando and Omondi (2008) that showed that teenage pregnancy plays a major role in school dropout.

To confirm the reality of teenage pregnancy dropout in Kimilili Sub-County day secondary schools the Director of Studies were asked to rate teenage pregnancy school dropout in their respective schools against other factors. Table 4.15 summarizes the data.

**Table 4.15: Teenage pregnancy school dropout**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
High	5	62.5
Average	2	25
Low	1	12.5
<b>Total</b>	<b>8</b>	<b>100</b>

Table 4.15 shows that a majority, 62.5% rated teenage related school dropout as high in comparison to other factors. This agrees with Musonga (2014) who found that compared to other factors pregnancy accounted for highest numbers of school dropouts.

Having shown that teenage pregnancy is indeed a problem in day secondary schools in Kimilili Sub-County the researcher turned his attention to answering the second research question: to what extent did school factors influence teenage pregnancy school dropout in public day secondary schools in Kimilili Sub-County?. To capture this both questionnaires to students and the Directors of Study looked at class performance and sexual harassment by teachers and boys.



#### 4.7.1 Class performance

The study sought to find out the linkage between class performance and teenage pregnancy from the teachers and students perspectives. The researcher sought information from the Director of Studies and students. Directors of Study were asked to rate class performance of the girls who had dropped out due to pregnancy. Table 4.16 summarizes the data.

**Table 4.16: Academic Nature**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Average	7	87.5
Very poor	1	12.5
<b>Total</b>	<b>8</b>	<b>100</b>

The findings on Table 4.16 indicates that the majority of the directors, 87.5% indicated that class performance of the girls who had dropped out in the period 2011 to 2014 was average class while 12.5% indicated that the girls were very poor. To obtain students' perspective on performance and risky behavior they were asked to give show their level of agreement on a Likert scale to the perception that girls who perform poorly in class often turn to risky sexual behavior. Table 4.17 summarizes the girls' responses.

**Table 4.17: Girls perspective on poor performance and risky behaviour**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Strongly agree	36	40
Agree	32	35.6
Undecided	4	4.4
Disagree	11	12.2
Strongly Disagree	7	7.8
<b>Total</b>	<b>90</b>	<b>100</b>

The findings on Table 4.17 reveals that 40% of the respondents strongly agreed followed closely with 35.6% who agreed that poor performance often triggers risky sexual behavior among adolescent girls. In an interview with the D.o.E. it was revealed that low academic standards in these schools contributed substantially to the problem of teenage pregnancies. This finding that poor class performance is precursor to risky sexual behavior is supported by other studies. Grant and Hallman (2006) assert that poorly performing girls were significantly more likely than the best students to become pregnant.

#### **4.7.2 Sexual harassment by boys**

The study sought to find out if girls were still subjected to sexual harassment by boys that could lead to teenage pregnancy school dropout. First Directors of Study

were asked how often they received reports of boys sexually harassing girls.

Table 4.18 summarizes their responses.

**Table 4.18: Teachers perspective on boys harassment of girls**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Often	5	62.5
Rare	2	25
Very rare	1	12.5
<b>Total</b>	<b>8</b>	<b>100</b>

The data on Table 4.18 shows majority of the Directors of Study, 62.5% indicated that they had received reports from girls about sexual harassment that was being perpetrated by boys.

On the same issue of sexual harassment that girls are subjected to. Students were asked to show their level of agreement with the statement that “Boys disturb girls to make them agree to their sexual demands” Their responses are summarized in Table 4.19.

**Table 4.19: Students perspective on sexual harassment of by boys**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Strongly Agree	35	38.9
Agree	34	37.8
Undecided	4	4.4
Disagree	11	12.2
Strongly disagree	6	6.7
<b>Total</b>	<b>90</b>	<b>100</b>

The findings on Table 4.19 demonstrates that most of the girls, 38.9% strongly agreed, while 37.8 agreed that that sexual harassment by boys exists in public day schools that in effect puts girls at risk of pregnancy. This closely corresponds with data obtained from Directors of Study as presented in Table 4.18. These observations are in concurrence with Sifuna and Chege (2006) study that found out that pregnancies associated with sexual harassment were common in Harambee secondary schools.

#### **4.7.3 Sexual harassment by teachers**

The study also sought to find out if girls were still subjected to sexual harassment by their teachers that could lead to teenage pregnancy school dropout. First

Directors of Study were asked how often they received reports of teachers sexually harassing girls. Table 4.20 summarizes their responses.

**Table 4.20: Sexual harassment by teachers**

<b>Response</b>	<b>Frequency f</b>	<b>Percentage %</b>
Often	3	37.5
Rare	1	12.5
Very rare	2	25
Never	2	25
<b>Total</b>	<b>8</b>	<b>100</b>

The data on Table 4.20 indicates that 37.5% of the Directors of Study responded that they often received reports from girls about sexual harassment. To obtain the girls perspective on sexual harassment by teachers the researcher asked them to show their level of agreement with the statement that “Some teachers want sexual relations with girls against their will”, their responses were as presented on Table 4.21.

**Table 4.21: Students perspective on sexual harassment by teachers**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Strongly agree	30	33.3
Agree	26	28.9
Undecided	5	5.6
Disagree	13	14.4
Strongly disagree	16	17.8
<b>Total</b>	<b>90</b>	<b>100</b>

The findings on Table 4.21 shows that most of the girl, 33.3% strongly agreed while 28.9% agreed that some teachers want sexual relations with girls against their will which this study equates to sexual harassment. Evidence from Tables 4.20 and 4.21 shows that girls in these day secondary schools suffer from sexual harassment perpetrated by those they are entrusted to. According to sifuna and Chege (2006), Harambee schools that were the forerunners of today's day secondary experienced a lot pregnancy induced school dropout that was linked to sexual harassment. Abuya (2013) blames school boys and teachers for this form of violence on girls.

#### **4.7.4 Life Skills Education**

The study sought to establish the perceptions of teachers about the adequacy of Life Skills Education in addressing reproductive issues. Directors of Study were asked to indicate their level of agreement to the statement; "Life Skills Education doesn't

adequately address reproductive/sexual issues affecting” structured on the Likert five point scale. Table 4.22 shows their responses.

**Table 4.22: Life skills Education**

<b>Response</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Strongly agree	2	25
Agree	3	37.5
Disagree	1	12.5
Strongly disagree	2	25
<b>Total</b>	<b>8</b>	<b>100</b>

The findings on Table 4.22 indicate that 25% strongly agreed, while 37.5% agreed that Life Skills Education doesn’t adequately address adolescents’ reproductive or sexual issues. This observation tallies with those by USAID (2010) report that pointed out that Life Skills Education curriculum as currently constituted does not comprehensively inform learners to be able make critical sexual decisions.

#### **4.7.5 Comprehensive Sexuality Education**

In the wake of inadequate coverage of reproductive matters under Life Skills Education and the inadequacy of information at home the study sought to establish the perceptions of teachers and students about the issue of

comprehensive sexuality education. Directors of Study were asked to indicate their degree of agreement to the statement; “In the light of teenage pregnancy risk, should students be taught comprehensive sexuality education at school?” Their responses are presented on Table 4.23.

**Table 4.23: Teachers perspective on comprehensive Sexuality Education**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>f</b>	<b>%</b>
Strongly agree	6	75
Agree	2	25
<b>Total</b>	<b>8</b>	<b>100</b>

From the data on Table 4.23, 75% of the Directors of Study strongly agreed, while 25% agreed that comprehensive sexuality education be taught in schools.

Table 4.24 presents data obtained from girls’ responses when asked if comprehensive sexuality education should be taught in schools.



**Table 4.24: Students perspective on Comprehensive Sexuality Education**

<b>Responses</b>	<b>Frequency</b>	<b>Percentage</b>
	<b>F</b>	<b>%</b>
Yes	79	87.8
No	11	12.2
<b>Total</b>	<b>90</b>	<b>100</b>

Table 4.23 clearly indicates that that an overwhelming majority of the respondents, (87.8%) supports the suggestion that comprehensive sexuality education be taught at school in the face teenage pregnancy school dropout. According to these findings; teachers and students are in support of teaching comprehensive sexuality education at school as a strategy intended at curbing pregnancy related school non completion. An interview with the D.o.E. indicated strong support for the introduction of comprehensive sexuality education that will empower the girls with knowledge and skills to enable them navigate through secondary school to completion. These research findings concur with Muganda-Onyando and Omondi (2008) who established that there was need for the introduction of comprehensive sexuality education. According to Collins, Allagiri and Summers (2002) those students who are sexually active should be provided with information that they need to protect themselves.

#### 4.8 Extent of teenage pregnancy in school non completion

The fourth objective was to assess the extent to which teenage pregnancy influence completion rate of girls in public day secondary schools Kimilili Sub-County. The research question used to achieve this objective was; “to what extent does teenage pregnancy influence completion rates in Kimilili Sub-County?” During the visits to the sampled schools and the D.o.E.s office the following secondary data presented in table 4.25 was obtained for years; 2013, 2014 and 2015.

**Table 4.25: Extent of teenage pregnancy**

No when in form 1	No. KCSE	for Dropouts	Pregnancy	Percentage	Overall Percentage
251	192	59	24	40.7	9.6
254	190	64	28	43.75	11
248	186	62	30	48.4	12.1

The findings on Table 4.24 indicate that pregnancy accounted for about a half (48.4%) of the girls who dropped out of those who were initially enrolled in form one in 2012 before form four. Overall teenage pregnancy reduced the completion

by between 9.6% and 12.1% for the 2013, 2014 and 2015 cohorts as indicated on Table 4.24. The implication here is that teenage pregnancy is the single, most significant cause of school non completion. These findings concur with those by Nyaga (2010) who found studies that pregnancy contributed about half of all school girl school dropout in Runyenjes Division of Embu District. Musonga (2014) in her study on “Factors Influencing Girl Child Dropout Rate in Mixed Secondary Mixed secondary Schools in Kenya: The Case of Bumula Sub-County”, concluded that pregnancy was responsible for a third of the dropouts.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter presents a summary of the study findings, conclusions and recommendations.

#### **5.2 Summary of the findings**

The purpose of this study was to investigate the influence of teenage pregnancy on completion rates among girls in public day secondary schools in Kimilili Sub-County. The study was guided by the following objectives; to establish the extent to which individual factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County, to examine the extent to which home based factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County, to determine the extent to which school factors influence teenage pregnancy in public day secondary schools in Kimilili Sub-County and to assess the extent to which teenage pregnancy influence completion rate of girls in public day secondary schools Kimilili Sub-County.

##### **5.2.1 Individual factors**

The first objective sought to establish the individual factors that lead to teenage pregnancy in public day secondary schools. Sexual behavior of students

determines the level of risk to teenage pregnancy that school girls expose themselves to. The study observed that 31.5% were sexually active while 68.5% were not. For the sexually active, 54.3% did not use protection in their last sexual encounter whereas 45.7 % used. Therefore a majority of the girls who were sexually active were exposing themselves to the risk of pregnancy and contraction of sexually transmitted infections.

The study showed that 70% of the girls were in support of encouraging those who were sexually active to use contraceptives in order to protect themselves. As much as pregnancy prevention is important to the sexually active, easy availability of contraceptives in government health facilities plays a major role in achieving this. However 61.1% of the girls were not sure if reproductive services targeting them were easily and readily available in these facilities thus hampering the governments' efforts in providing these services freely to the youth and adolescents.

### **5.2.2 Home based factors**

Family communication on reproductive and sexual issues is quiet crucial especially during the adolescent years (Nundwe, 2012). Although this is this the case, a number of barriers exist that hamper parent-child communication. Findings of this study reveal that unavailability of parents is a leading barrier

where parents are physically removed from their children. In addition some parents are too busy to have any meaningful time for own children.

Taboos were also indicated as significant in parent-adolescent communication where African cultural norms appear to prohibit direct parent to child communication on human sexuality. Further the study revealed that some parents were deemed not well informed on matters that affect adolescent sexuality

On the issue of parental monitoring and supervision of their adolescent girls the study established that 32.4% disagreed while 24.4% strongly disagreed with the notion that their parents monitored their activities on weekends, evenings and school holidays. These observations concur with views held by the D.o.E. who blamed teenage pregnancies on poor parenting.

Concerning the influence that poverty has on adolescent sexual behavior, the study findings showed that poverty at home made girls vulnerable to sexual predation with the lure of money, lifts to and from school and gifts. The D.o.E. and 40% of the students strongly agreed that poverty influenced sexual risk taking behaviour which can easily lead to teenage pregnancy.

### **5.2.3 School factors**

Study results obtained showed that a number of factors within the school environment put girls at the risk teenage pregnancy. In addition the study findings

indicated that all the sampled schools have had pregnancy cases in the period 2011-2014. Compared to other factors leading to school non completion, teenage pregnancy was rated highest by 62.5% of the Directors of Study.

Findings of the study also revealed that there was an association between class performance and teenage pregnancy. 87.5% of the Directors of Study indicated that most of those who fell pregnant were average in class performance. On the other hand there was agreement by students that poor class performance often led to risky sexual behaviors. To reinforce these views, the D.o.E. in charge of the Sub County lamented the lack of academic focus and poor performance as crucial contributory elements to teenage pregnancies in these day schools.

About the issue of sexual harassment by boys in these day schools, there was general agreement among the Directors of Study (62.5%) and the students (38.9%) that girls are vulnerable to this form of sexual violence. Further the study revealed that girls are exposed to sexual harassment by their own teachers.

The study also revealed that Life Skills Education as currently taught did not adequately address reproductive challenges as indicated in. On how to fill the reproductive health information gap that may lead to risky sexual decisions, 75% of the Directors of Study, 87.5% of the students and the D.o.E. rooted strongly for the introduction of comprehensive sexuality education.

#### **5.2.4 Extent of teenage pregnancy in Kimilili Sub-County**

The study findings on the extent of teenage showed that indeed teenage pregnancy negatively affects secondary school completion rates and that pregnancy alone accounted for over 40% of the dropouts in years 2013, 2014 and 2015.

#### **5.3 Conclusions**

Based on the study findings the following conclusions were put forward in line with the study questions. Concerning the extent that individual factors influenced teenage pregnancy school dropout the study concludes that about a third of the girls were at risk of teenage pregnancy as they were sexually active and at least a half of them were not using contraceptives consistently . This is partly due to lack of awareness of family planning services targeting them and partly because of the lack of such services in government health facilities. Students in general supported the use of contraceptives in order to protect themselves from teenage pregnancies.

Regarding the extent that home factors influenced teenage pregnancy the study established that; unavailability of parents, taboos, lack of time for discussion, lax parental supervision and monitoring, and poverty were found to be crucial in elevating the level of risky sexual behavior among school girls.



As to the extent that school factors influence teenage pregnancy the study found out that poor class performance, sexual harassment by both teachers and boys and inadequacy of Life skills Education heightened the risk of teenage pregnancy that the girls faced. On plugging the reproductive health information gap the study concluded that the government introduces comprehensive education curriculum in schools.

With reference to the extent to which teenage pregnancy did influence completion rates of girls in public day schools in Kimilili Sub-County the study established that teenage pregnancy accounted for over 40% of all female dropout cases. On completion rates the study found out that incidences of teenage pregnancy reduced the completion rate by about 10%.

#### **5.4 Recommendations**

The following recommendations were made based on findings of the study thereof.

That there is need to create partnerships through policy between public health facilities and secondary schools so as to foster good use of the Youth Friendly Reproductive Health Services (YFRHS) for those who are sexually active.

Through public forums like chiefs “barazas” parents should sensitized on the need to not only supervise and monitor their children at home but also to be physically available for their children, to overcome taboos on sexual communication and be trained on age appropriate reproductive health talks. The government should also sensitize parents to involve their adolescent girls in income generating activities so as to be able meet their own needs.

At school the guidance and counseling department and class teachers should monitor and constantly offer academic guidance to girls who are performing poorly in class or those who are deteriorating academically. Boys found to be harassing girls should also be counseled promptly.

Teachers found engaging in inappropriate relations and harassing girls should not only be dismissed by the Teachers Service Commission (TSC) but also prosecuted by the Deputy Public Prosecutor (DPP) under the Sexual Offences Act of 2006 to serve as a deterrence to others with similar base intentions. Due to the sexual information gap noted in this study the government should consider introducing comprehensive sexuality education with abstinence programs in all schools.

### **5.5 Suggestion for further research**

To shed more light in this area of study, the following recommendations were made for further research:

1. A similar study covering Bungoma County should be conducted to find out if findings reached here obtain for the whole County.
2. A comparative study in girls' boarding schools should be conducted establish the causes of teenage pregnancy school non completion.

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## APPENDICES

### APPENDIX A: Letter of Transmittal

Dismas Kituyi Kato,  
The University of Nairobi,  
School of Education and External Studies,  
Department of Educational Administration and Planning,  
P.O. Box 30197-00100,  
Nairobi.

20<sup>th</sup> of March 2015.

Dear Respondent,

#### **RE: RESEARCH PARTICIPATION IN RESEARCH**

I am a graduate student at the University of Nairobi pursuing M. Ed degree in Educational Planning and in partial fulfillment of the course I am conducting research on the “**Influence of Teenage Pregnancy on Completion Rates among Girls in Public Day Secondary Schools in Kimilili Sub-County**”. I therefore seek your permission to visit your institution to collect the necessary information. The information collected is purely for academic purposes only and your anonymity is assured. Your participation in this research is highly appreciated.

Thank you,

Dismas Kituyi Kato.

## **APPENDIX B: Questionnaire for Director of Study**

Kindly respond honestly to all items in the questionnaire by ticking appropriately or filling in the blank spaces. Your identity will remain anonymous while the information sought will be used for the purposes of the study only.

### **Section I: Background Information**

1. Indicate the type of school  
(a) Mixed Day [ ] (b) Girls Day [ ]
2. Your Gender  
(a) Male [ ] (b) Female [ ]
3. For how long have you taught since leaving college/university? (in years)  
(a) 1-5 [ ] (b) 6-10 [ ] (c) 11-16 [ ] (d) 17 and above [ ]

### **Section II: Issues related to Teenage Pregnancy School Dropout**

1. Have you had girls drop out due to pregnancy in this school in the period 2011-2014?  
(a) YES [ ] (b) NO [ ]
2. In comparison to the other factors that cause school dropout among girls how do you rate pregnancy?  
(a) Very high [ ] (b) High [ ] (c) Average [ ] (d) Low [ ]  
(e) Very low [ ]
3. What was the academic nature of the girls who dropped out due to pregnancy?  
(a) Very bright [ ] (b) Bright [ ] (c) Average [ ] (d) Poor [ ] (e)  
Very poor [ ]
4. How often do you receive reports of boys' sexual harassment of girls?  
(a) Very often [ ] (b) Often [ ] (c) Rare [ ] (d) Very rare [ ] (e)  
Never [ ]

5. How often do you receive reports of teachers' sexual harassment of girls?  
 (a) Very often [ ] (b) Often [ ] (c) Rare [ ] (d) Very rare [ ] (e)  
 Never [ ]
6. What is your level of agreement with the following statements?
- (i) Life Skills education does not adequately address reproductive/sexual issues affecting adolescents.  
 (a) Strongly Agree [ ] (b) Agree [ ] (c) Undecided (d) Disagree [ ] (e) Strongly Disagree [ ]
- (ii) In the light of teenage pregnancy risk students be taught comprehensive sexuality education at school  
 (a) Strongly Agree [ ] (b) Agree [ ] (c) Undecided (d) Disagree [ ] (e) Strongly Disagree

**Section III: Extent/Impact of teenage pregnancy on school completion**

7. For the cohorts that joined form one in the years indicated below, how many were girls?  
 2010..... 2011.....
8. Tacking the cohorts indicated above how many dropped out before completing their secondary school education?  
 2010.....2011.....
9. Of the girls who dropped out how many were pregnancy related?  
 2010.....2011.....
10. Of the current girls how many were they in form 1? .....
11. How many dropped out due to pregnancy? .....

## APPENDIX C: Questionnaire for Students

Kindly respond honestly to all items in the questionnaire by ticking appropriately or filling in the blank spaces. Your identity will remain unknown while the information sought will be used for the purposes of the study only.

### Section I: Background Information

1. How old are you (Age in years)  
(a) 15 and below [ ] (b) 16-17 [ ] (c) 18-19 [ ] (d) 20 and above [ ]
2. Indicate the type of school you are in (a) Girls Day [ ] (b) Mixed Day [ ]

### Section II: Individual Factors

1. Are you sexually active (a) YES [ ] (b) NO [ ]  
If NO move to Question 3
2. If YES in 1 above, did you use contraceptives/family planning methods in your last sexual encounter? (a) YES [ ] (b) NO [ ]
3. In your opinion should students who are sexually active be encouraged to use family planning methods/contraceptives in order to avoid pregnancies?  
(a) YES [ ] (b) NO [ ]
4. Are family planning/contraceptive services for students easily available in government health centers/hospitals?  
(a) YES [ ] (b) NO [ ] (c) NOT SURE [ ]

### Section III: Home Environment

5. In your opinion what hinders students from discussing sexual issues with their parents? (You may tick more than one).  
(a) It is taboo [ ] (b) Un available parents [ ] (c) No time for discussion [ ] (d) Parents not well informed [ ]
6. To what extent do you agree with the following statements?
  - (i) Girls from poor homes are often tempted to accept lifts/money/gifts from boys and men in exchange for sexual relations.  
(a) Strongly agree [ ] (b) Agree [ ] (c) Undecided [ ] (d) Disagree [ ] (e) Strongly Disagree [ ]

- (ii) My parent/guardian strictly supervises/monitors my activities in the evenings/weekends/holidays  
(a) Strongly agree [ ] (b) Agree [ ] (c) Undecided [ ] (d) Disagree [ ]  
(e) Strongly Disagree [ ]

**Section IV: School Based Factors**

7. What is your level of agreement with the following statements

- (i) Girls who perform poorly in class often turn to risky sexual relations.  
(a) Strongly agree [ ] (b) Agree [ ] (c) Undecided [ ] (d) Disagree [ ]  
(e) Strongly Disagree [ ]
- (ii) Boys disturb girls to make them agree to their sexual demands.  
(a) Strongly agree [ ] (b) Agree [ ] (c) Undecided [ ] (d) Disagree [ ]  
(e) Strongly Disagree [ ]
- (iii) Some teachers want sexual relations with girls against their will.  
(a) Strongly agree [ ] (b) Agree [ ] (c) Undecided [ ] (d) Disagree [ ]  
(e) Strongly Disagree [ ]

8. In the light of teenage pregnancy risk should students be taught comprehensive sexuality education at school? (a) YES [ ] (b) NO [ ]

#### **APPENDIX D: Interview Guide for the Sub County D.o.E**

I am a Master of Education student from the University of Nairobi conducting research on the “**Influence of Teenage Pregnancy on Completion Rates among Girls in Public Day Secondary Schools in Kimilili Sub-County**”. As a major stakeholder in education you have been selected to participate in this study and your views and experiences will be highly appreciated. Be assured that your responses will be used for the purposes of this study only. Kindly provide your answers honestly and objectively.

1. What is the total secondary school student population by gender in Kimilili?
2. How many girls are in day schools?
3. How many girls joined form one in these day schools in the years 2010.....2011.....2012?
4. How many of the above cohorts made it to form four in the years 2013.....2014.....2015?
5. How has pregnancy affected school completion among girls in Kimilili Sub-County?
6. In your opinion what are main factors contributing to teenage pregnancy?
7. What can be done to minimize these cases in secondary schools?
8. In the light of teenage pregnancy risk should students be taught comprehensive sexuality education at school?

## APPENDIX E: Research Authorization



### NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471,  
2281349, 310571, 2219420  
Fax: +254-20-318245, 318249  
Email: secretary@nacosti.go.ke  
Website: www.nacosti.go.ke  
When replying please quote

9<sup>th</sup> Floor, Utalii House  
Uhuru Highway  
P.O. Box 30623-00100  
NAIROBI-KENYA

Ref. No.

Date:

10<sup>th</sup> March, 2015

**NACOSTI/P/15/2147/4993**


Dismas Kituyi Kato  
University of Nairobi  
P.O. Box 30197-00100  
**NAIROBI**

#### **RE: RESEARCH AUTHORIZATION**

Following your application for authority to carry out research on *"Influence of teenage pregnancy on completion rates among girls in public day secondary schools in Kimilili Sub County,"* I am pleased to inform you that you have been authorized to undertake research in **Bungoma County** for a period ending **30<sup>th</sup> June, 2015**.

You are advised to report to **the County Commissioner and the County Director of Education, Bungoma County** before embarking on the research project.

On completion of the research, you are required to submit **two hard copies and one soft copy in pdf** of the research report/thesis to our office.

  
**DR. S. K. LANGAT, OGW**  
**FOR: DIRECTOR GENERAL/CEO**

Copy to:

The County Commissioner  
Bungoma County.


The County Director of Education  
Bungoma County.

## APPENDIX F: Research Permit

**THIS IS TO CERTIFY THAT:**

**MR. DISMAS KITUYI KATO**  
**of UNIVERSITY OF NAIROBI, 381-50204**  
**KIMILILI, has been permitted to conduct**  
**research in Bungoma County**  
**on the topic: INFLUENCE OF TEENAGE**  
**PREGNANCY ON COMPLETION RATES**  
**AMONG GIRLS IN PUBLIC DAY**  
**SECONDARY SCHOOLS IN KIMILILI SUB**  
**COUNTY**  
**for the period ending:**  
**30th June, 2015**


**Permit No. : NACOSTI/P/15/2147/4993**  
**Date Of Issue : 10th March, 2015**  
**Fee Received :Ksh 1,000**




*[Signature]*  
**Director General**  
**National Commission for Science,**  
**Technology & Innovation**

**CONDITIONS**

1. **You must report to the County Commissioner and the County Education Officer of the area before embarking on your research. Failure to do that may lead to the cancellation of your permit**
2. **Government Officers will not be interviewed without prior appointment.**
3. **No questionnaire will be used unless it has been approved.**
4. **Excavation, filming and collection of biological specimens are subject to further permission from the relevant Government Ministries.**
5. **You are required to submit at least two(2) hard copies and one(1) soft copy of your final report.**
6. **The Government of Kenya reserves the right to modify the conditions of this permit including its cancellation without notice.**



**REPUBLIC OF KENYA**  
  
**National Commission for Science,**  
**Technology and Innovation**

**RESEARCH CLEARANCE**  
**PERMIT**  
**Serial No. A** **4892**

**CONDITIONS: see back page**



## APPENDIX G: Sub County Letter of Authorization

### MINISTRY OF EDUCATION SCIENCE AND TECHNOLOGY

Telephone: (020)2319168 / (020)8163418

Email: kimigrodes@gmail.com

When replying please quote our

REF NO: KIMIED/ADM/BS5/VOL.1/62



DISTRICT EDUCATION OFFICE

KIMILILI - BUNGOMA DISTRICT

P.O.BOX 227

KIMILILI

DATE 11<sup>TH</sup> MAY 2015

TO WHOM IT MAY CONCERN

#### RE: DISMAS KITUYI

The above named is a student at the University of Nairobi and has the authority to carry out research on influence of teenage pregnancy on completion rates in Public Day Secondary Schools in Kimilili Sub- County

Please accord him all the necessary assistance he may require

  
**ELISHA OMALA**  
SUB- COUNTY DIRECTOR OF EDUCATION  
KIMILILI- BUNGOMA SUB-COUNTY



## APPENDIX H: County Letter of Authorization



REPUBLIC OF KENYA

MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY  
State Department of Education – Bungoma County

e-mail: [busgocemcede@gmail.com](mailto:busgocemcede@gmail.com)  
when replying please quote:

REF:DCE/19/VOL.1/132

County Director of Education  
P.O. Box 1620-50200  
BUNGOMA  
DATE: 16/3/2015

THE SUB – COUNTY DIRECTOR OF EDUCATION  
KIMILILI SUB – COUNTY

AUTHORITY TO CARRY OUT RESEARCH  
MR. DISMAS KITUYI KATO- NACOSTI/P/15/2147/4993

The bearer of this letter Mr. Dismas Kituyi Kato is a student of University of Nairobi.


He is hereby given authority to carry out research on *"Influence of teenage pregnancy on completion rates among girls in public day secondary schools in Kimilili Sub – County."* Bungoma County for a period ending 30<sup>th</sup> June, 2015.

Kindly accord him the necessary assistance.

A handwritten signature in black ink, appearing to read 'Charles A. Anyika'.

CHARLES A. ANYIKA  
COUNTY DIRECTOR OF EDUCATION  
BUNGOMA COUNTY

## APPENDIX J: Letter from the University

  
**UNIVERSITY OF NAIROBI**  
**COLLEGE OF EDUCATION AND EXTERNAL STUDIES**  
**SCHOOL OF EDUCATION**  
**DEPARTMENT OF EDUCATIONAL ADMINISTRATION AND PLANNING**

Telegram: "CEES"  
Telephone: 020-2701902  
dept.edadmin@uonbi.ac.ke

P.O. BOX 30197 NAIROBI  
OR P.O. BOX 92  
KIKUYU

9<sup>th</sup> February, 2015

**Our Ref:** UON/CEES/SOE/A&P/1/4

**TO WHOM IT MAY CONCERN**



Dear Sir/Madam

**SUBJECT: DISMAS KITUYI KATO - REG NO. ESS/75304/2012**

This is to certify that **Dismas Kituyi Kato** our Master of Education student in the Department of Educational Administration and Planning at the University of Nairobi. His area of specialization is Educational Planning. He has successfully completed his course work and is summarizing his research on "*Influence of Teenage Pregnancy on Completion Rates among Girls in Public Day Secondary Schools in Kimitili Sub County*".

Any assistance accorded to him will be highly appreciated.

Yours faithfully,

   
**DR. GRACE NYAGAH**  
**CHAIRMAN**  
**DEPARTMENT OF EDUCATIONAL ADMINISTRATION AND PLANNING**

GN/nd