

**COMPARISON OF SOCIAL AND DEMOGRAPHIC FACTORS OF ADOLESCENT
BOYS SENTENCED FOR COMMITTING SEXUAL OFFENSES WITH THOSE OF
NON-SEXUAL OFFENDERS AT BORSTAL CENTRES IN KENYA**

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DECLARATION

I, Lutawo Lucky Lutawo Ouma, hereby declare that this research project is my original work and has never been submitted for any academic award in any institution of higher learning.

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APPROVAL

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DEDICATION

I dedicate this study to all the adolescents in Kenya who have been affected by sexual violence.

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ABBREVIATIONS AND ACRONYMS

ASO	Adolescent Sex Offenders
KDHS	Kenya Demographic and Health Survey
NACADA	National Agency for the Campaign against Drug Abuse
UN-HABITAT	United Nations Human Settlements Programme
UNICEF	United Nations Children’s Fund
USA	United States of America
WHO	World Health Organization

OPERATIONAL DEFINITION OF TERMS

Adolescent	Juvenile individual aged 10–19 years (UNICEF, 2011)
Alcohol Abuse	Excess consumption of alcohol
Bhang	A psychoactive drug from the Cannabis plant that is used as a drug for entheogenic and recreational purposes
Borstal Institution	A type of detention institute whose purpose is to reform very delinquent adolescents or young people.
Coercion	Various degrees of force including; mental threats, blackmail or other threats like dismissal from employment, not securing a job, or harm to one's body or body part. It can take place when the individual targeted is not in a position to give consent or when they are either incapable mentally of comprehending the scenario or situation, asleep, drunk or drugged. (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002).
Offender	A person or thing that does something wrong or causes problems
Perpetrator	A person who commits an illegal or bad act
Recreational drug	A loose term referring to legal and illegal drugs that are taken without medical supervision (www.bmj.com . Accessed November 2021)
Sexual violence	Any effort to get or obtain a sexual act, actual sexual act unwanted sexual advances or comments, or to traffic, or directed otherwise, against an individual's sexuality using force, by any individual irrespective of their relationship to the victim, in any situation or location(Krug, Dahlberg, et al., 2002).
Social norms	What individuals in a setting believe to be normal or typical in the group or setting; an appropriate action (Mackie, Moneti, Denny, & Shakya, 2012)
Victim	Person or people who have suffered injustice or harm, including mental or physical injury or torture, financial loss or fundamental right impairment, through omissions or actions that violate criminal laws in operation within member States(UN, 2006)

Violence

The purposeful utilization of physical force or power, threatened or actual, against an individual, one-self, or a community, that either has a high likelihood of leading to or leads to physical injury, mental or psychological harm, death, poor development or deprivation (Krug, Mercy, Dahlberg, & Zwi, 2002)

ABSTRACT

Introduction

Adolescents commit various types of offences, both non-sexual and sexual offences. It is not very clear whether there are peculiar social and demographic differences between adolescent sexual offenders and non-sexual offenders.

Objective

The aim of this study was to compare social and demographic factors of adolescents sentenced for committing sexual offenses with those of adolescent non-sexual offenders in borstal centres in Kenya.

Materials and Methods

This study conducted a comparative analysis of social and demographic factors of adolescents sentenced for committing sexual offenses to those of adolescent non-sexual offenders in borstal centres in Kenya. The study population is adolescents of ages 15 to 18 years. Quantitative data was collected through an interviewer administered semi structured questionnaire. Descriptive statistics, including mean and proportions were computed. Pearson's Chi-square test was used to establish the association between the dependent variable (Commission of crime i.e. Sexual or otherwise) and independent variables. Finally, unadjusted and adjusted Odds ratio (OR) with corresponding 95% confidence interval were estimated.

Results

The study established that most of the incarcerated adolescents were 17 years old, affiliated to the Christianity religion and were from families with both parents. Besides, most had primary level of education and had a history of alcohol use. The study results determined that age of the adolescents, their religion and family structure did not have a significant association with the type of offense they had been incarcerated for ($p > 0.05$). Moreover, the study established no significant association between running away from home, use of alcohol by the incarcerated adolescents, abuse of alcohol by parents / guardian, use of recreational drugs by parents /

guardians, having friends or relatives who abused alcohol, previous sexual encounter and type of offense ($p > 0.05$). However, the study established a significant association between education level of the incarcerated adolescents, strife in the adolescents' families, relationship with parent / guardian, use of recreational drugs, having a friend or relative who used recreational drugs, being a victim of sexual harassment, having a family member or relative with a history of sexual violence, having unnatural carnal knowledge and type of offense ($p < 0.05$). The findings from binary logistic regression indicated that being of a lower education level, having a bad relationship with parents or guardians, non-use of recreational drugs, having no friends or relatives who used recreational drugs, being victims of sexual harassment, having friends or relatives with a history of sexual violence and history of unnatural carnal knowledge significantly increased the odds of engaging in sexual offenses ($p < 0.05$).

Recommendations

The study makes the following recommendations: Good virtues and values should be inculcated in Adolescents early, preferably by the time they are 14 years of age; The government and parents should ensure that all adolescents complete their primary and secondary education; Adolescents should be guided and counselled on how to choose the friends and even relatives (apart from close family members) they associate with; The government should ensure that well established and equipped treatment , counselling and follow up centers for Victims of sexual violence exist in all counties of the country ;More research should be done to establish why recreational drug use and not alcohol use is associated with the type of offence committed by the adolescent boys. Finally, further research should be undertaken to determine the specific type of sexual violence committed by adolescents in the country.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Adolescents who are exposed to good parenting and individuals, good education, are able to read, and involve themselves in structured, supervised activities become individuals who can resist violence (Ward et al, 2013). Is the reverse then true for those who commit offences? A weak neighborhood social organization is indirectly related to crime. This may be associated with parenting behaviour and peer deviance (Chung et al, 2006).

Different factors predispose adolescents to commit crime. These include social and demographic factors, cognitive functioning, and psychopathology and personality characteristics.

Some factors associated with juvenile commission of offences include smoking, prior commission of offences, psychiatric disorders, escaping from home, low family education levels low income and poor parental control (Ozen et al., 2005). The social learning theory purports that human behaviour is learnt observationally from others' attitudes, behaviour, and consequences of those behaviours (Flowers, 2006).

A majority of juveniles commit offences related to theft and wounding (Ozen et al, 2005). These young individuals can also commit sexual offences. Juvenile or adolescent sex offenders account for 3.1% of all juvenile offenders, and constitute 7.4% of total violent adolescent offenders (Finkelhor et al, 2009). Greater than a third of all sexual abuse cases of children are perpetrated by someone under the age of 18 (Stop It Now, 2016). Juvenile sex offenders constitute 20 % of total rapes. Moreover, recidivism rates of sexual assault amongst juveniles ranged between 0–40% while general assault recidivism was found in 11–89% (Hart-Kerkhoffs et al., 2009).

There is the challenge that very few adults recognize that adolescents can be a risk to other children due to the perception that children are incapable of sexually abusing others (Stop It Now, 2016). Findings from the National Incident-Based Reporting System reveal that juvenile or adolescent sex offenders account for more than a quarter or 25.8% of all sex offenders, and greater than one third or 35.6% of all sex offenders against child victims or minors (Finkelhor et al, 2009).

What social and demographic factors lead to juvenile delinquency? This study seeks to answer this question in the Kenyan context. A baseline assessment of the 15-18 year old male adolescent offence situation in Kenya was conducted and comparison of the socio demographic characteristics of the sexual and non-sexual offenders done. The study gives valuable information needed to improve the treatment and rehabilitation of adolescent sexual and non-sexual offenders. It is essential to comprehend factors that predispose adolescents to commit sexual offences. It is even more important to establish whether these factors are similar or different to those that contribute to juveniles' commission of non-sexual offences. It is important to understand these factors as this will aid in the improvement of reformation or rehabilitation of adolescent non-sexual and sexual offenders. Moreover, a comprehensive understanding will prevent crime recrudescence in both groups.

1.2 Statement of the Problem

Crimes, both sexual and non-sexual, ones are committed by both adults and adolescents. These include theft, assault, and malicious damage to property, murder, and sexual offences. Causes of juvenile delinquency vary in different regions worldwide. In Latin America and Africa, adolescent crime is associated with poverty and homelessness. In Asia, adolescent offence commonly occurs in urban areas. (Schlenker ,2017).

Currently very few studies have been done on the issues of adolescent sex offenders in Kenya. Studies noted on the subject include; Abdullah, Uli, Ismail, and Ahmad (2007); Mwangi et al. (2015); Ngiloi and Carneiro (1999); Ruto (2009); Shipman (2016); Wangamati, Thorsen, Gele, and Sundby (2016); Were, Kioli, and Kurgat (2014). Most studies done on the topic were cross-sectional, with a few cohort studies. Most valid assessment tools which were used in the studies were geared towards psychological, mental, and antisocial traits. However, none of them have compared the social and demographic issues of adolescent sexual offenders and adolescent non-sexual offenders hence the choice of the study.

This study focussed on the social and demographic factors of adolescents in borstal centres. The study assessed whether these factors are the same for both adolescent sex offenders and adolescent non-sexual offenders in the Kenyan context. It is essential to comprehend factors

that predispose adolescents to commit sexual and non-sexual offences to aid the improvement of treatment or rehabilitation of adolescent sexual offenders.

1.3 Justification

Juvenile sexual offenders are a small, unique, and little understood population. Some people argue that they are a homogenous population with similarities in social and demographic factors (Wangamati et al., 2016). Many assume that juvenile sex offenders have unique social and demographic characteristics that are different from adolescents who commit non-sexual offences (Were et al., 2014).

There is a dearth of studies on the social and demographic characteristics of juvenile sexual and non-sexual offenders detained in Borstal centres in Kenya. This study hence sought to fill by bringing to light these factors, and to identify any similarities or differences of social and demographic scenarios of the two groups of adolescent offenders. This will help inform and guide social and demographic related measures that should be taken in the process of retribution, and management of adolescent offenders. To the adolescents, the study is significant as it can lead to implementation of effective interventions to counsel and manage juvenile offenders appropriate to their social and demographic characteristics. This could lead to faster rehabilitation for the offenders. Moreover, through participating in this study, juvenile offenders play a positive role by providing evidence, which could be applied to prevent future institutionalization of themselves and other juveniles by having effective interventions in the community to curb unlawful acts by adolescents.

Moreover, this study will enable proper training of stakeholders dealing with the adolescents, especially parents, police officers, psychologists, nurses, and other clinicians as well as courts to be able to deal with any identified unique social challenges in the society as it is noted that adolescent sex offenders respond well to treatment.

The study will enable parents to appreciate the dangers that adolescent children pose to the younger children in family either as siblings or care givers to enable them to have adequate supervision to stem the vice of adolescent sex offense from occurring and to make home the safest place for the children.

Finally, this study will enable communities, including schools, to be armed with the necessary information to put systems and programmes in place to assist the victims as well as the

offenders' reformation. The study will help in the identification of any peculiar social and demographic factors that may contribute of ASO to prevent the vice from both commencing and escalating in the future as it is on record that paedophilic offenders usually start offending at an early age.

1.4 Scope

The study covered Shimo La Tewa Borstal Institution and Shikusa Borstal Institution, which are located in Mombasa and Kakamega respectively. These institutions, which are run by the Kenya prisons Service, detain high risk, male offenders aged between 15 and 18 years of age who are convicted by a court of law for breaking the law, with a hope to reform or rehabilitate them.

The study targeted the juvenile offenders. The focus was on their social and demographic characteristics and the reasons for their incarceration in the two institutions. The study was conducted in the period between June and August 2020.

As of August 2020, there were 320 adolescents detained at Shimo la Tewa Borstal centre and 380 at Shikusa. At the time of the data collection, no female between 15 and 18 years of age was reported to be detained at any institution for the conviction of committing a sexual offence.

1.5 Limitations

The study covered adolescent boys detained at the only two Borstal Institutions in the Country. The results are therefore generalized to cover all adolescent offenders in Kenya. However, not all cases of adolescent delinquency are reported to the authorities. Moreover, many families still prefer to settle cases of sexual offence out of court in-order to avoid shame and stigma on both the victim's and perpetrator's kin. This means that any peculiar norms or reasons contributing to perpetration of offences, both sexual and non-sexual, by adolescents in the un-captured population were omitted by this study.

The study did not look into the exact type of sexual offence committed by the adolescents who had been convicted of committing sexual offences. The study failed to pick out those adolescents who might have committed both sexual and non-sexual offences(doble offenders),yet were only convicted of committing one type of offence.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

Offences can be committed both by adolescents and adults. This includes both non-sexual offences and sexual offences. It is not very clear whether adolescent sexual offenders and non-sexual offenders have similar characteristics, or each group has its own peculiar characteristics. This section will examine the available literature on the subject under study. It will also give a brief critical review and a summary of the literature review and conclude with the statement on the research gap.

2.2 Empirical Review

Causes of juvenile delinquency vary in different regions (Schlenker,2017). In Latin America and Africa, adolescent crime is associated with poverty and homelessness. In Asia, adolescent offence commonly occurs in urban areas. Adverse childhood events including physical abuse, sexual abuse and emotional abuse, being reared in poverty, having family members involved in gangs are some of the factors that contribute to adolescent antisocial behaviour and delinquency (DeLisi et al. 2017). They further note that these experiences are positively associated with commission of sexual offence but negatively associated with commission of non-sexual offences including homicide, person, or property offending.

Sexual offenders need not have extensive substance abuse problems, criminal histories, or antisocial peers. Even if they did, their levels were lower or fewer. compared with non-sexual offenders (Seto et al, 2010). Adolescent sexual offense is not easily elucidated as a simple indicator of anti-social inclinations. What seems to support adolescent sex offending includes acts of “subjection to sexual violence, sexual abuse history, other neglect or abuse, early exposure or subjection to sex or pornography, social isolation, abnormal sexual interests, low self-worth and anxiety” (Seto & Lalumiere, 2010). Substance abuse at home creates risks for the child as it brings about attachment disturbances in that the child fails to form a secure relationship with the guardian or parent. Growing up in an insecure and unstable environment of substance abuse places the child’s development in danger, leading to traumatizing

experiences, behavioural and emotional disturbances, as well as psychosomatic symptoms (Virtala & Suikkanen, 2010).

A history of substance abuse may influence adolescents to commit sexual offense acts. 50% of all sexual assaults are associated with alcohol intake (Zawacki, et al, 2003). Perpetrators use intoxication as an excuse to commit the many unacceptable social behaviours (Zawacki et al., 2003).

Sexual assault by the offender were associated with indirect or direct effects of alcohol problems, childhood sexual abuse, pressure from friends to engage in sexual relationships, adolescent delinquency, positive viewpoint about casual sex relationships and sexual dominance (Abbey, et al, 2006).

On recidivism different studies have shown different results. In one study, Juveniles convicted for committing sexual offences compared equally with those convicted for committing non-sexual offences in repeat general offences (Fannif et al. 2017). However, in another, the juvenile sexual offenders had a slightly increased probability of repeating sexual offences. Recidivism rate for juveniles who committed sexual offences verses for those who committed both non-sexual and sexual offences was at 14.3% versus 9.9% with an increased likelihood of violent re-offence in the latter group (Chu et al. 2010). Meanwhile, A meta-analysis of 11,219 juveniles followed for an average of approximately 60 months in 63 data sets noted that the average mean rate of sexual recidivism was 7.08% compared to 43.4% for general offence recidivism (Caldwell, 2010).

Compared to adult offenders, juveniles are more experimental, curious, and impulsive. For sexual offenders, Multisystem therapy, which can also involve the offenders' guardians or parents in various settings, has been shown to be effective in addressing both peer related factors and parenteral factors (Henggeler, Letourneau et al., 2009).

2.2.1 Sexual Harassment committed by Adolescents

According to the WHO World Report on Violence and Health , sexual violence is defined as any form of actual or attempted sexual act, unwelcome sexual advances or comments against an individual's sexuality using force or coercion, by any individual irrespective of how they

relate to the victim, in any situation either at home or work environment (Krug, Mercy, et al., 2002). Coercion covers actions that include blackmail, psychological intimidation, or other threats like that of bodily harm, being dismissal from employment or not obtaining a job needed (Krug, Mercy, et al., 2002). This unwanted or unwelcome sexual contact can take place or occur between two or more adults, two or more under-age or minors, an adult and a minor. There may be a notable age difference between the parties (Gilligan, n. d). The sexual offenders are not designated therefore they can either be female or male, old or young, married or single, have contrasting levels of education, have weak or strong ties with their communities and families, or have a record or none of prior criminal involvement in sexual or non-sexual offenses (Gilligan, n.d.).

Interest in Juvenile sex offenders increased tremendously in the last two decades as signified by the increase of 40-fold in treatment programmes of juvenile sex offenders between 1982 and 1992 (Finkelhor et al., 2009; Jaffé, 2010). Prior to this time, adolescent sex offenders (ASO) were not detected and therefore never faced any criminal justice. This is because the act was taken casually and had ‘a nuisance value’. It was taken as an experimental curiosity on the part of the children; that boys were just doing a boy’s thing and it was passed off with a “boys will be boys” mentality. It was considered as a normal aggressiveness by boys growing up (Bates, 2008; Jaffé, 2010). Society assumed that the behaviour would fester off as the children grew up as at this time issues of sex were not readily discussed in the family, community, and certain cultures (Bates 2008). If there was any punishment at all, it was left to parents as it was mostly a family matter assessed on the harm caused (Jaffé, 2010), or if the problem persisted, the adolescent was dealt with using the adult courts (Bates, 2008).

On victims, the US Department of Justice (2015) in its Maltreatment report revealed that out of the sexually assaulted cases in 2012, 26% were to those aged between 12-14 years, while those below 9 years accounted for 34% (US Department of Justice, 2015). Furthermore, the report established that one out of every six boys has been sexually assaulted while one out of every five girls goes through the same. (US Department of Justice, 2015).

Types of Sexual Offences committed by juveniles include off-clothed or clothed fondling, digital penetration, noncontact that covers obscene phone calls ,voyeurism, oral sex, performed or attempted vaginal intercourse; and performed or attempted sodomy that involves male victims who are younger (Aebi, Vogt, Plattner, Steinhausen, & Bessler, 2012; Finkelhor et al., 2009). Others include sharing pornography with young children, touching peers or fellow

pupils in a sexual way, gang rape, date rape, anal sex on a much younger child (Finkelhor et al., 2009; Vandiver & Teske Jr, 2006). It is noted from that adolescent sex offenders' most serious crime is more of sodomy or fondling as opposed to rape. The mentioned offenses may be a single occurrence, a few solitary events, or several events with many victims (Finkelhor et al., 2009). Adolescent offenders commit more illegal sexual crimes in groups (Kjellgren, Wassberg, Carlberg, Langström, & Svedin, 2006).

2.2.2 Prevalence of Adolescent Sexual Offenders

The prevalence of adolescent sexual abusers is difficult to ascertain in that various jurisdictions define it differently, and there has been change in reporting procedures over time and estimates from different research methodologies have produced different results (Jaffé, 2010). This challenge is compounded by the poor statistics from the police records, and the fact that many victims of sexual abuse do not lodge complaints and the crime goes undetected, whereas in some cases, incidences have been over estimated (Jaffé, 2010). However, studies have revealed that an estimated 20 percent of total rapes and between 30 and 50 percent of child molestations are perpetrated by juvenile males, and in Canada, adolescents account for 17% of the total of sexual aggression and that juveniles are responsible for nearly 20% of rapes and between 30 to 40 percent of child sexual violations or abuse (Jaffé, 2010). Additionally, in Australia, records show that between 9% and 16% of all sexual aggressions are committed by juveniles; while Sweden had adolescents accounted for 11% of persons imprisoned due to sex offences (Jaffé, 2010).

Juvenile sex offenders account for 3.1 percent of all juvenile or adolescent offenders, and constitute 7.4% of total violent adolescent offenders (Finkelhor et al. 2009). Adolescent sex offenders account for more than a quarter or 25.8% of all sex offenders, and greater than a third or 35.6% of all sex offenders against child victims or minors (Finkelhor et al, 2009). In the United States of America, approximately 23% of cases reported of child sexual abuse are perpetrated by adolescents (US Department of Justice, 2015).

In Germany in 2003, more than one quarter of suspected child sexual abusers were found to be children and adolescents; while in Switzerland the annual cases of child and adolescent child abusers ranged between 16% and 18% of the suspects known to the police and victims ranging from 25% to 30% victims reported having been assaulted by someone under the age of 18 (Jaffé, 2010). The United States reported that juvenile sex offenders accounted for over 25.8%

of total sex offenders and over 35.6 percent of sex offenders against juvenile victims (Jaffé, 2010).

2.2.3 Social and demographic Characteristics of Adolescent Offenders

Different studies have compared the two groups of adolescent offenders. Results differ in different discordance or problems described in both groups. For some, adolescent sex offenders have more in common with adolescent non-sex offenders than adult sex offenders (Przybylski, 2015). Adolescent sexual offenders more commonly have disturbed family origins (Barbaree et al. 1998 and Bagley and Shewchuk Dann, 1991). Other studies found that Adolescent sexual offence perpetrators were older than adolescent non-sexual offenders at the time of their first arrest (Ford and Linney, 1995). The Intelligence Quotient of adolescent sex offenders was found to be less than that of adolescent non-sex offenders in one study (Ferrara and MacDonald, 1996). However, another did not find any IQ difference in the two adolescent groups (Jacobs et al, 1997). On matters offence timing, noted that sex offenders had a greater likelihood of adequate performance at school prior to commission of the crime in comparison to non-sexual offender (Milloy, 1994). Boonman et al (2013) noted that adolescent sex offenders had similar self-reported psychopathic traits with their non-sex offender counterparts in detention.

Adolescent non-sex offenders have been found to have lower rates of a history of sexual abuse (victimization) compared to adolescent sexual offenders (Milloy, 1994) and (Fagan & Wexler, 1989). Between 40 to 80 percent of adolescent sexual offenders are likely to have a history of sexual abuse (Becker and Hunter, 1997). Drug use amongst adolescent sexual offenders and non-sexual offenders have been noted to be similar in some studies (Miner and Crimmins, 1995). In others, sex offenders were noted to be less involved in drug use compared to non-sex offenders (Milloy, 1994).

Juvenile or Adolescent sex offenders; (JSO) or (ASO); do not fall in the category of “paedophiles” or “predators” because the two titles refer to adult offenders (Finkelhor et al., 2009). These ASO have varied characteristics that include firstly, age; and apparently, age is what really sets them apart in that they tend to start early in the sex crime (Kjellgren et al., 2006). The proportion of the juvenile offenders catching to the attention of police or authorities for sex offenses vary age-wise; beginning at 9 years (5%). Numbers tend to increase strikingly at age 12 with 16% and phases off after age 14 (Finkelhor et al., 2009). The ages between 12 and 14 years account for 38%, while ages between 15 and 17 form 46% of ASOs. Males constitute the vast majority, which is 93%. (Finkelhor et al., 2009).

It is imperative to note that early adolescence is the pinnacle age for sexual offenses against younger children. However, sex offences against teenagers increase during mid to late adolescence as sexual offenses against victims below 12 years of age reduce (Finkelhor et al., 2009). Additionally, out of every 8 juvenile offenders, one will be below 12 years of age (See figure 2.1). Adolescents who were sexually aggressive commenced these deviant behaviors before the age of 12 years; and the level and complexity of perpetrated acts increased in severity for the continuous offenders than for the other groups (Burton, 2000). According to another study, 36% of the sexual offenders committed sexual offences at the age of 13 years and below; with the most common sexual offences being rape and sodomy (Naidoo & Sewpaul, 2014).

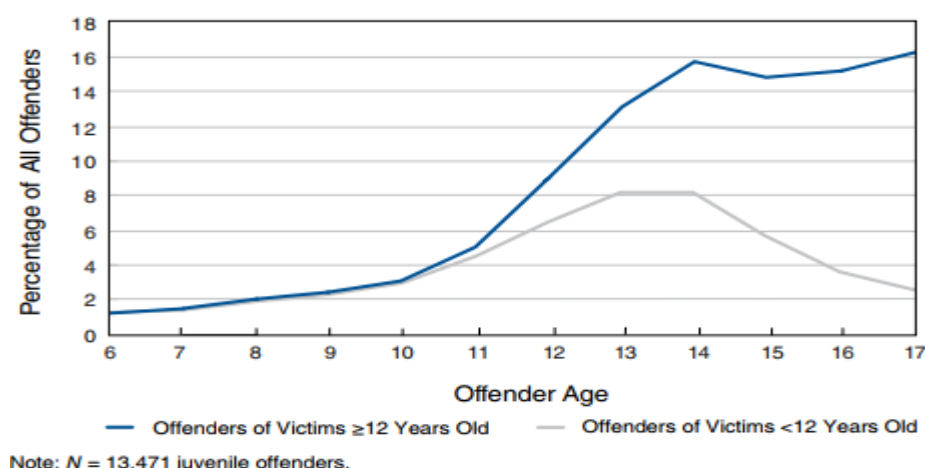


Figure 1.1. Age Distribution of Sex Offenders

Adapted from Finkelhor, Ormrod, and Chaffin, (2009, p. 4)

It is therefore imperative to note that juvenile sex offenders are not only of teenage years; and as stated in the report, that about 16% of the total juvenile sex offenders that came to police attention, some were below age 12 and their cases are handled differently from the normal system (Finkelhor et al., 2009). The group is not regarded as delinquency group like the older offenders by educators, clinicians, and public safety officials, who consider them as just having kids who have sexual behaviour challenges (Finkelhor et al., 2009). These young offenders are most likely female, and they offend; in groups and to multiple victims, against family and younger victims nearer their age and are likely male victims, and their offenses include, more of fondling than rape and they are rarely arrested by the police (Finkelhor et al., 2009). In

addition to that, the authors note that the ASO attack victims closer to their age who would also be more boys than girls, as shown in Figures 2.2 and 2.3.

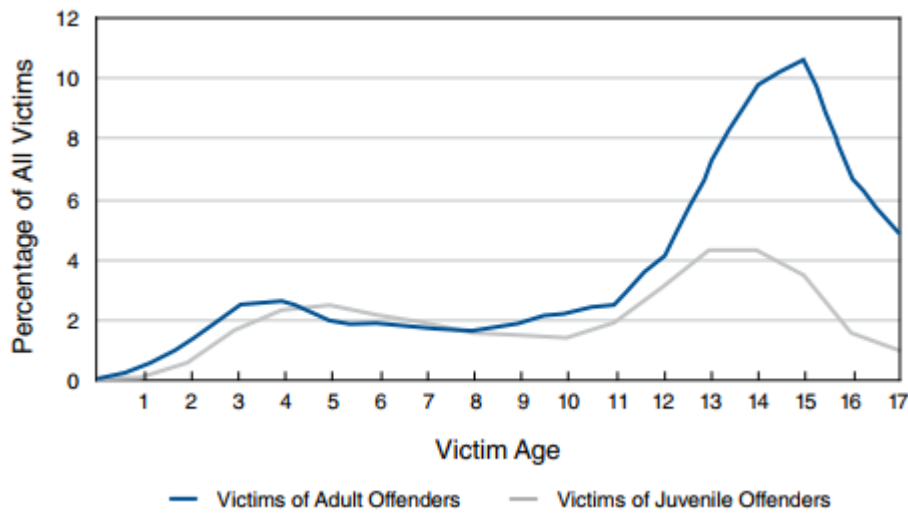


Figure 1.2. Age Distribution of Juvenile Sex Victims, by Offender Age
Adapted from Finkelhor et al (2009, p. 6)

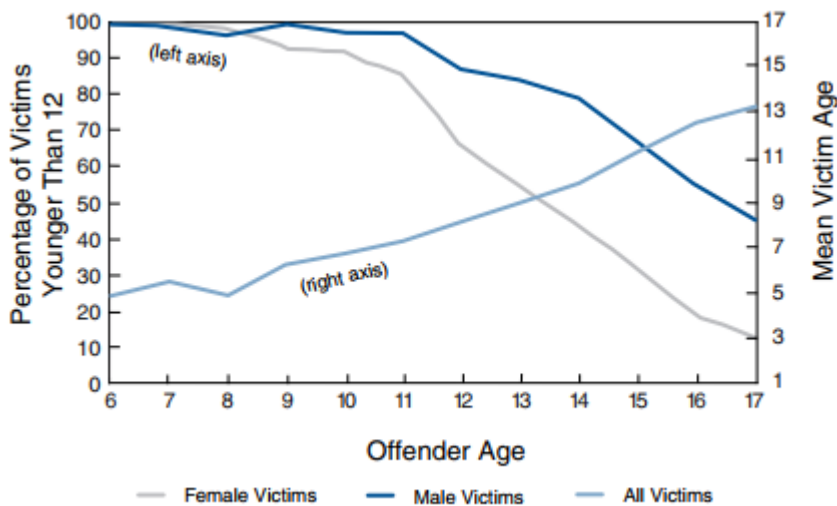


Figure 1.3. Juvenile Sex Victim Age, by Juvenile Offender Age
Adapted from Finkelhor et al (2009, p. 6)

Finkelhor et al. (2009) add that female juvenile sex offenders form a small proportion (approximately 7 percent) of all juveniles who commit sex offenses according to the NIBRS report. However, they have some distinct characteristic that are different from the male adolescent sex offenders namely; their younger age compared to their male counterparts, they

offend in groups mostly, involve themselves with multiple victims, and are also victims as they offend others (Finkelhor et al., 2009). Additionally, their environment of offense is mostly at a residence or home and on a lesser scale at school, and most of their victims are male and younger in age (Finkelhor et al., 2009). Furthermore, the offenses caused by these female juveniles include more multiple-victim and multiple-perpetrator episodes and their victims could mostly be family members or males. Their areas of operation greatly vary in their concentration of reported juvenile sex offenders compared to adult sex offenders (Finkelhor et al., 2009). Another significant characteristic is that greater than 90% of the adolescent sex offenders are male; while a large number of pre-adolescent offenders are female (Finkelhor et al., 2009).

Characteristic	Juvenile Sex Offenders (%)	
	Younger (age < 12 years) (N = 2,104)	Older (age ≥ 12 years) (N = 11,367)
Multiple offenders in incident	29.0	23.0
Adult offender in incident	2.6	5.7
Female offender	14.6	5.9
Multiple victims in incident	16.0	12.1
Victim identity (youngest victim)		
Family	31.6	23.8
Acquaintance	56.0	64.5
Stranger	1.6	2.7
Victim is also offender	1.0	0.8
Unknown	9.7	8.2
Incident location		
Residence/home	73.0	68.1
School/college	10.8	12.1
Store/building	2.9	4.0
Outside	5.0	7.4
Other/unknown	8.2	8.3
Victim gender (youngest victim)		
Male	36.6	19.9
Female	63.4	80.1
Age of youngest victim (years)		
0-6	57.1	21.0
7-10	31.2	15.5
11-14	10.9	43.2
15-17	0.8	20.2
Sex offense (most serious)		
Rape	11.0	26.4
Sodomy	15.4	11.9
Sex assault with object	7.2	4.2
Fondling	61.3	47.2
Nonforcible sex offense	5.1	10.5
Injury in incident		
None	88.8	86.9
Minor	9.6	10.6
Major	1.6	2.5
Incident time of day		
Morning (6 a.m. to 12 p.m.)	28.9	26.3
Afternoon (12 p.m. to 6 p.m.)	45.6	42.5
Evening (6 p.m. to 12 a.m.)	22.7	25.7
Night (12 a.m. to 6 a.m.)	2.8	5.6
Arrest in incident	16.5	32.9

Figure 1.4. Characteristics of Adolescent Sex Offenders Who Victimize Minors, by Age of Offender

Adapted from Finkelhor et al(2009, p. 7)

2.2.44 Targets of Adolescent Sexual Offenders

Adolescents who perpetrate sex offenses against minors differ from adults who commit sex offenses against minors in number and they offend more in groups. Their victims are known as family, either as an adopted, biological or a stepsibling or a relative either acquainted or not with the offender but mostly acquainted. The victim and offender live in the same institution or home, and the offender abuses more than one victim (Kjellgren et al., 2006).

The findings of the study by Kjellgren et al also established that the adolescent offenders and their victims received inadequate supervision by the adult caregivers for both family, peer, school and community molestations (Kjellgren et al., 2006). Of the total perpetrators, 43.4% abused only children from age ranges of zero to five years, or six to eleven years while 53.6% molested juveniles or adults aged 12 years or older. (Kjellgren et al., 2006). It was also noted that child offenders abused relatives and siblings more than offenders of peers (Finkelhor et al., 2009; Kjellgren et al., 2006). Furthermore, the adolescent offenders target boys who were much younger and sexually immature while older offenders target girls that are sexually mature. In essence, the victims in child sexual abuse are those that can be subdued (Finkelhor et al., 2009). The age band (modal) is 6–11 years or 45.2% for victims who are male and 12–17 years or 63.6% for victims who are female (Kjellgren et al., 2006).

2.2.55 Factors that Predispose Adolescents to Commit Sexual Offence

Reasons attributed to the behaviour of children hurting other children sexually are varied. They include individual factors like psychological, sexual, or physical abuse. Basile et al discovered that witnessing or growing up in an environment of emotional violence, coming in contact with sexually explicit movies, video games, or materials that created confusion may lead to one acting on a passing impulse with no intent to cause harm (Basile, Hamburger, Swahn, & Choi, 2013; Finkelhor et al., 2009; Stop It Now, 2016).

Negative childhood experiences including physical, emotional, and sexual abuse, being reared in poverty, having family members involved in gangs have been described by DeLisi et al (2017) as some of the factors that contribute to adolescent antisocial behaviour and delinquency. They further note that these experiences are positively associated with commission of sexual offence but negatively associated with commission of non-sexual offences including homicide, person, or property offending. Community factors include

poverty, physical or social environment; societal factors like law and policies, as well as the social norms (Basile et al., 2013; Krug, Mercy, et al., 2002). Also included are factors due to globalization namely; economic structural adjustment programmes, free trade that includes sexual trafficking (Krug, et al. 2002).

Additional risk factors that make adolescents susceptible to commission of sexual violence) include; having poor models at home and witnessing of and experienced physical and sexual aggression in the family, as well as having had challenges of relating to parents and feelings of abandonment which lead a child to have cognitive, emotional and behavioural disturbances (Naidoo and Sewpaul, 2014). Furthermore, a family that has a history of incest also bears on the influence of adolescent sex offenders. Abusive single parenthood or multiple parental partners and negative family environments (Grant et al., 2009) are also risk factors.

2.2.4.1 Parental Factors and Family dysfunction

Wamoyi, Wight, and Remes (2015) state that characteristics of families, specifically, parent-child relationships have a significant influence on adolescents' lives and sexual decision-making. Akambi et al established that adolescents with sexual behaviour challenges have a history of exposure to family dysfunction that may have impacted them negatively leading to development of sexually inappropriate behaviour (Akanbi et al., 2015). They further state that parenting involves a set of shared customs or norms, beliefs, and practices that are established. These operate at a structural level and need parents to communicate them to the children, control and monitor them (Wamoyi et al., 2015).

This means that it is the duty of the parents to provide a nurturing environment full of warmth but low in hostility so that a child's confidence, self-awareness, and emotional stability are boosted. Moreover, parents should teach adolescents to weigh their intentions as they grow up and to discover their personal sexual needs (Wamoyi et al., 2015). The children do so by observing other peoples' actions and being able to have parents communicate to the them about their sexuality and sexual needs (Ayalew, Mengistie, & Semahegn, 2014). Adolescents prone to practicing poor or very poor sexual reproductive health communication included those who had poor behavioural attitudes and poor subjective methods of discussing sexual concerns with guardians or parents, and those who viewed their parents' reproductive and sexual health

comprehension as poor (Dessie et al., 2015). This confirms the fact that positive parent-child communication protects against risk behaviours in adolescence (Kamaara, 1999).

Marshall and Marshall, (2000) state that the origin of adolescent sexual offence is a family where children have experienced neglect, abuse, and rejection. They then become vulnerable and tend to suffer from poor relationship skills, low self-esteem, and desire for affection. It is noted that young men may use sex in various forms to cope with these inadequacies. Over time, they may include power, control and aggressiveness as well as humiliation of their partners as a coping mechanism (Marshall & Marshall, 2000). Arslan et al suggest that male children of broken and scattered families, and particularly those without father's supervision were prone to committing sexual crimes (Arslan, Demirkiran, Akcan, Zeren, & Kokacya, 2016).

Additionally, Toby et al revealed that mothers tend to communicate more frequently with daughters, while sons received more communication from their fathers (Tobey, Hillman, Anagurthi, & Somers, 2011). This implies that when one parent misses out of the equation, the adolescents fail to get communication and hence encounter challenges on sexual health matters. Children living with single parents experience varied challenges including emotional stress, poverty, criminal activities, difficulties in school, violent behaviour and low self-esteem (Philip, 2016). Moreover, they develop negative attitudes on life. This suggests that children from single parent families have challenges in social emotional development compared to children raised in other family settings (Philip, 2016). Moreover, Basile (2008) found that juveniles brought up in dysfunctional families and exposure to trauma were more likely to commit sexual offence than those who were brought up in stable homes. Coyne et al. (2013) suggests that offspring of teenage mothers were associated with criminal convictions compared to their later borne siblings.

2.2.4.2 Social Norms

According to Kalra and Bhugra (2013), sexual aggression against females is often a consequence of unequal power equalities, imagined and real, between women and men. It is imperative to note that sexual violence would occur more in societies where men are perceived to be more superior than women as opposed to the feminist societies (Kalra & Bhugra, 2013). Culture shapes an individual in that it shapes the values, attitudes and behaviours of the person. In certain populations, culture defines the how they perceive, and interpret sex and sexual abuse or violence (Kalra & Bhugra, 2013). For instance during apartheid in South

Africa, only those who raped white women were prosecuted while sexual violence against black women just taken as part of life (Kalra & Bhugra, 2013).

Rich (2009) posits that sexual beliefs, emotional distress, social skills and attitudes, increase the likelihood of early sexual behaviour. Additionally, social norms and connections are significant factors in the development of sexual values and behaviour in adolescents. (Rich, 2009). In Sub Saharan Africa, there exist forms of sexual abuse through early marriages. This is worsened by the fact that the region has a culture of dominant traditional notions of masculinity that promotes and legitimizes unequal gender power relations (Petersen, Bhana, & McKay, 2005). A study in South Africa revealed various reasons to sexual violence namely that, sexual violence is used by men to put women in their place. It could be used on children as a punishment to the mother to make her comply (Petersen et al., 2005).

2.2.4.3 Poverty

Poverty and economic dependency were additional reasons for sexual violence in the families in some regions in Africa. The latest believe was that having sexual intercourse with a virgin would cure one of HIV/AIDS. Male siblings in some communities would sell of their sisters to their friends for wealth and hence acceptance (Petersen et al., 2005). Socio-economic factors including income, family size, environment of house and type of housing as well as nature of job, and social value, affects the sexual behaviour of adolescents (Udigwe et al., 2014). The issue of poverty as a contributor to early sexual debut and sexual violence in adolescents was confirmed in certain cases, where family socioeconomic status was affected by the parents' education and household income (Bengesai, Khan, & Dube, 2017).

2.2.4.4 Peer Pressure

Peer pressure describes the influence that groups have on individuals in the way they think and act. This may influence young people because they crave kinship (Reach Out, 2017). Peer pressure affects each person differently. Some may just follow along while those who are proactive may take a different direction (Reach Out, 2017). The proactive encounter positive effects and the person experiences increased self-confidence, a sense of belonging and support, learns positive interests and hobbies and positive attitudes and habits are reinforced (Reach Out, 2017). However, when the impact is negative the person encounters effects of pressure to substance abuse like drugs, alcohol or cigarettes, distraction from schoolwork, engagement in

risky behaviours, avoidance of existing friends and family as well as substantial changes in attitudes and behaviour (Reach Out, 2017).

According to Hezz, peer pressure is complicated because it has the positive and negative aspects such that one can become more active in athletics to avoid negative behaviours. On the other hand, it could push one to try drugs or alcohol, become truant or participate in other negative activities or behaviours (Hezz, 2013). Doshi (2014) established that peer groups play prominent roles in forecasting the perpetration of sexual violence in early adolescence. He also noted that greater adherence to traditional masculinity attitudes had significance in predicting the level of individual sexual violence perpetration (Doshi, 2014). Moreover, peer group level support of dismissive attitudes toward sexual violence was found to be significantly predictive of personal level sexual violence perpetration (Doshi, 2014). Additionally, a study done in South Africa revealed that sex offense was committed as a peer pressure act and it was like a competition amongst offenders either to spite their girl friend or their parents by getting a girl pregnant (Patrick et al., 2010).

2.2.4.5 Drug and Alcohol Abuse

According to Naidoo and Sewpaul (2014), continued alcohol abuse results in serious social, emotional and economic consequences for the family. The authors note that alcohol and violence are intimate partners. Perpetrators use alcohol to evade responsibility as it reduces inhibitions. Alcohol is used to purportedly reduce stress, but instead it allows persons to engage in deviant behaviour (Naidoo & Sewpaul, 2014). It is noted that children with alcoholic parents tend to internalize their sense of rejection. They respond by refusal to care for others, particularly their young siblings and parents and may have poor interaction with others (Naidoo & Sewpaul, 2014). They are then characterized by low levels of tolerance to frustration, cohesion, unrealistic expectations of children, poor parenting skills and role reversal which are traits for abusers (Naidoo & Sewpaul, 2014). The children also tend to have low esteem, lack affirmation and nurturance and high levels of unmet dependency needs. These children may end up with substance use disorders (SUDs) (Naidoo & Sewpaul, 2014).

A study by Virtala and Suikkanen (2010), established that children experience trauma, emotional harm and somatic symptoms when parents abuse substances. Trauma experiences

include, 'death of a parent or suicide attempts, parental mental disorders, domestic violence and imprisonment of a parent (Virtala & Suikkanen, 2010, p. 28). The emotional harm on the other hand includes four feelings of insecurity, anxiety, restlessness, and aggression. Somatic symptoms include headaches, nausea and vomiting, flu, eye inflammation, asthma and allergies secondary to the emotional harm (Virtala & Suikkanen, 2010). Abbey (2011) notes that inebriation could be a more significant determinant of when men commit sexual violence rather than who become sexually violent (Abbey, 2011). A study by Young, Grey, Abbey, Boyd, and McCabe (2008) revealed that about 12%–20% of the sexual offenses were due to alcohol. Depending on gender and age of the respondent, it was noted that the presence of alcohol during a physical attack differed remarkably for females depending on the venue of the offense; at a range of 6% at the victim or survivor's home to 29% at a different location like someone else's home or at parties. It was also observed that alcohol related sexual offences involved force(physical) than non-alcohol-related sexual offenses (Young et al., 2008).

2.2.5 Environments where Sexual Violence by Adolescents Occur

The environments for juvenile sex offense are varied. They include learning institutions, home as well as streets. However, the school and home are singled out as the ones with most incidences with most offenses occurring at the school. Timing being mostly in the afternoons (Kjellgren et al., 2006).

2.2.6 Other Crimes Linked to Sexual Violence in Kenyan Adolescents

According to Kabiru, Elung'ata, Mojola, and Beguy (2014), adolescent delinquent risky behaviour is caused by adverse incidences in childhood and adolescence like sexual abuse and household dysfunction. These may lead to either, violence perpetration, teenage drug, or alcohol use, sexual intercourse as well as bullying in school or college strikes, arson and riots (Kabiru et al., 2014). For adolescents living in slum areas, other events include; acute poverty, constant exposure to neighbourhood crime and violence as well as poor housing which are noted to be significant contributors to crime because they lead to the adolescents' hostility, distrust of people and cynical view of social norms and conduct, and the need for immediate gratification (Kabiru et al., 2014). However, delinquency can be prevented by close parental guidance and monitoring, high religiosity and promotion of high self-esteem (Kabiru et al., 2014).

Factors influencing general adolescent misconduct are similar to those of Adolescent sex offence (Kjellgren et al., 2006). According to Omboto, Ondiek, Odera, and Ayugi (2013), other factors leading to adolescent sexual delinquency include; rebel against parents or peer pressure. Drug and alcohol abuse are the causes of capital offense in males. A lack of dialogue between students and teachers, authoritarian school administration management, broken homes and low education also contribute to risky behaviour(Omboto et al., 2013) . The authors established that education and training has an impact on adolescent delinquency (Omboto et al., 2013). A study by Watiri (2011) established that more than 50% of the students in a school were taking alcohol very frequently, while frequent smokers of cigarettes were 51.4%, very frequent use of bhang 61.5% and chewing Khat (Miraa) was 73.1% (Watiri, 2011).

2.3 Critique of Existing Literature

Over the years, there has been more focus on sexual offence perpetration by adults compared to adolescents. Additionally, there is the tendency to focus on sexual offense in terms of sex penetration due to its occurrence on a large scale as opposed to other forms of sexual delinquency and violence. There is therefore need for more research on the subject of adolescent sexual offenders.

2.4 Summary

From the above literature review, it is noted that adolescent sex perpetration is a serious matter globally. The act has severe consequences for both offender and victim as well their families due the lasting effects of the offense. From the review one notes that it begins with parenting to ensure that children have proper supervision or well taken off in terms of provision for their needs that include, physical, environmental socially and cultural and that children need to be cared for equally to avoid gender discrimination that later perpetrates sexual violence against them. Demographic factors have been identified as well as challenges associated with each to enable tailoring policies or programmes to counter the vice of adolescent sex offense.

2.5 Research Gap

This research aimed to compare the social and demographic factors of adolescents sentenced for committing sexual offences with those of non-sexual offenders at borstal centres in Kenya. From the literature review done it was noted that, very few studies in Kenya have been done that alluded on the subject as follows; Odongo, (2017), Kabiru et al. (2014), Mwangi et al. (2015), Mutsotso, (2014), Ruto (2009) and Wangamati et al. (2016). Out of the studies noted,

none has dealt with the case of adolescent sexual perpetration in Kenya hence the choice of the study.

2.6 Theoretical Framework

The social learning theory by Albert Bandura is the theory chosen to guide this study. It was first developed by Robert Burgers and Ronald Akers as the differential association reinforcement theory (Flowers, 2006).

2.6.1 Social Learning Theory

This theory purports that behaviour is learnt observationally from others' attitudes, behaviour, and results of those behaviours. Bandura calls this learning type Modelling. In this leaning process, Bandura states that there are four conditions for modelling to succeed namely, attention, retention, reproduction, and motivation. People pay attention to what happens around them. They then remember whatever it is, be it in symbols, actions, or images. At one point, they will reproduce or model the same. The theory states further that in observation a person develops an idea of how the new behaviours are presented which is then registered as information to guide future action. Additionally, the theory explains that peoples' behaviours are continual reciprocal interactions between cognitive, behavioural, and environmental influences. Bandura further notes that one's personality is interplay between three substances that include ones' psychological processes, the environment, and behaviour.

The above theory has been found appropriate to guide the study because apart from non-sexual violence, sexual violence and sexual abuse are learnt behaviours as a person grows (Flowers, 2006). They are learnt in various ways that include the following two forms: First, exposure to sexual abuse as a victim or witness that later develops in aggressive tendencies or similar sexual abuse (Flowers, 2006). The other form of learning is social interaction with sexually abusive or aggressive persons and exposure to pornography which tend to reinforce the aggressive and sexual abusive behaviours (Flowers, 2006). One's history of being a victim of sexual violence

is a strong predictor of turning into a perpetrator (Glasser et al. 2001). Sex offenders had a greater likelihood of being sexually abused than non-sex offenders but without suffering physical abuse (Jespersen et al, 2009).

2.6.2 Conceptual Framework

The conceptual framework that guided the study is presented in Figure 1.2. The dependent variable is juvenile offense status while the independent variables are social factors. Demographic factors are moderating variables. The conceptual framework indicates that juvenile offense status of an adolescent in a Borstal institution could be influenced by social factors. Moreover, the relationship between social factors and juvenile offense status could be moderated by the demographic factors. The social factors that could influence juvenile offense status are family/parental factors (occupation, family structure, family/marital conflict, use of drugs or alcohol, commission of crime), use of drugs or alcohol, peer pressure, commission of other crimes, age of sexual debut and sexual violence victimization. The demographic factors that could affect the relationship between the social factors and juvenile offense status are age, gender, education, and residence.

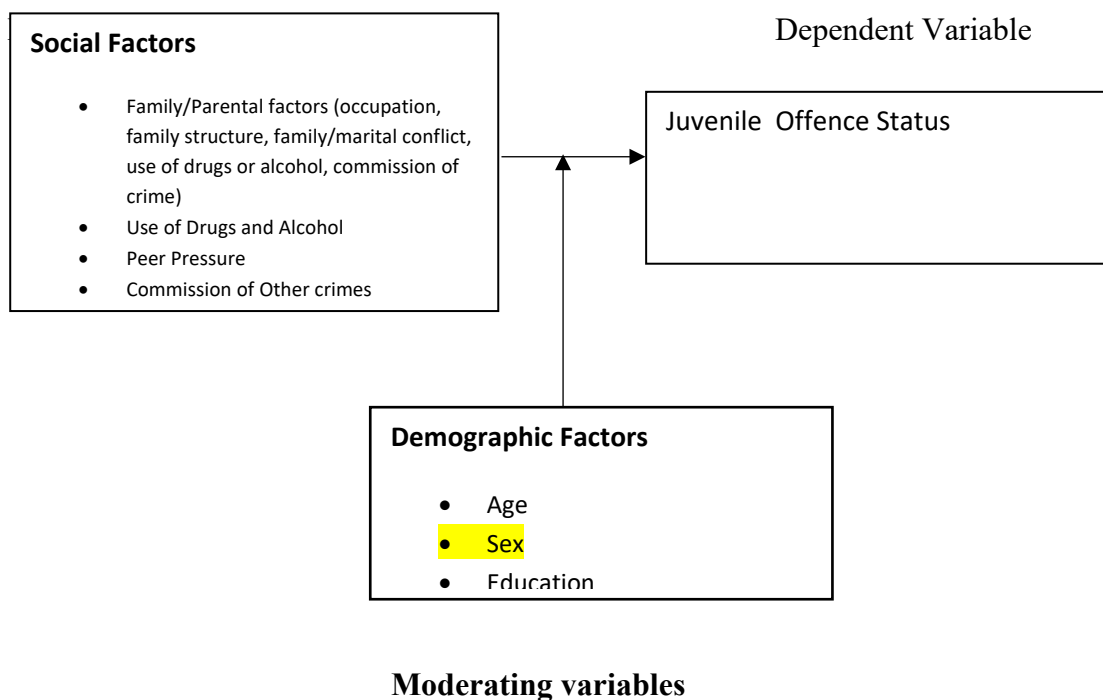


Figure 1.5 Conceptual Framework

Source: Author 2017

2.7 Research Questions

This study was guided by the below questions:

1. What are the social demographic characteristics of adolescents aged 15-18 years currently detained at Borstal centers in Kenya?
2. Are there differences in social demographic characteristics between adolescents aged 15-18 years currently detained at Borstal centres in Kenya for committing sexual offences with those detained for committing non-sexual offences?

2.8 Objectives

2.8.1 Main Objective

To compare social and demographic factors of adolescents sentenced for committing sexual offences to those of non-sexual offenders at borstal centres in Kenya.

2.8.2 Specific Objectives

1. To assess the social demographic characteristics of adolescents aged 15-18 years currently detained at Borstal centers in Kenya.
2. To compare the social demographic characteristics of adolescents aged 15-18 years currently detained at Borstal centres in Kenya for committing sexual offences with those detained for committing non-sexual offences.

CHAPTER THREE

STUDY METHODOLOGY

3.1 Introduction

This chapter focuses on the design, area, and population of the study. It also covers the sampling technique, data collection processing and analysis. Finally, it looks at the study limitation(s), ethical considerations, and outcomes of the study.

3.2 Study Design

This was a comparative study of adolescents detained for committing sexual offences and those detained for committing other types of offences (non-sexual offences). Social and demographic characteristics of adolescents detained at the borstal centres for committing sexual offences was compared to those detained at the institutions for committing other crimes.

3.2.1 Study Area

The study was conducted at Shimo La Tewa Borstal Institute in Mombasa and Shikusa Borstal Institute in Kakamega, both in Kenya. Adolescents convicted of committing offences or crime is brought here after their conviction for rehabilitation. The Borstal Institutions, which are run by the Kenya Prison's Service, hold boys from age 15 to 18. As in the Juvenile rehabilitation centres, the boys are detained for a maximum duration of three years. However, those who demonstrate a positive change in their behaviour can be released after serving for at least one year. As of December 2019, there were 320 adolescents detained at Shimo la Tewa Borstal Centre and 320 at Shikusa Borstal Centre.

3.3 Study Population

The borstal centres population comprised 640 adolescents (between 15 and 18 years of age) convicted of committing offences and domiciled at Shimo La Tewa and Shikusa Borstal Institutes. Adolescents who commit sexual offences were compared to adolescent offenders convicted of committing other crimes within the same institutions. 264 adolescents detained at both borstal centres participated in this study.

3.4 Inclusion and Exclusion Criteria

3.4.1 Inclusion Criteria

- Adolescent offenders domiciled at Shimo La Tewa and Shikusa Borstal Institutes in the Coastal and Western regions respectively during the study period (2020).
- Adolescents should be aged 15-18 years.

3.4.2 Exclusion Criteria

- Those who did not understand English or Swahili

3.5 Sampling and Sample Size Determination

3.5.1 Sample Size Determination

The sample for the study was computed using the sample size calculation for comparison between two groups. The formula is provided herein.

$$n = \frac{2 \left(Z_{\frac{\alpha}{2}} + Z_{\beta} \right)^2 P(1 - P)}{(P_1 - P_2)^2}$$

Where;

n = Desired sample size

$Z_{\frac{\alpha}{2}}$ = value from standard normal distribution corresponding to desired confidence level
($Z=1.96$ for 95% CI)

Z_{β} = 0.842 (From Z table) at 80% power

P_1 and P_2 = Prevalence of no prior conviction for sex offenders and non-sex offenders (from a study Cheryl D (1994) who did a comparative study of Adolescent Sex offenders and Non-Sex Offenders where the sex-offenders was at 30% and non-sex offenders at 12%)

$P_1 - P_2$ = Difference in proportion of events in two groups

P = Pooled prevalence = (Prevalence in group P_1 + Prevalence in group P_2) / 2

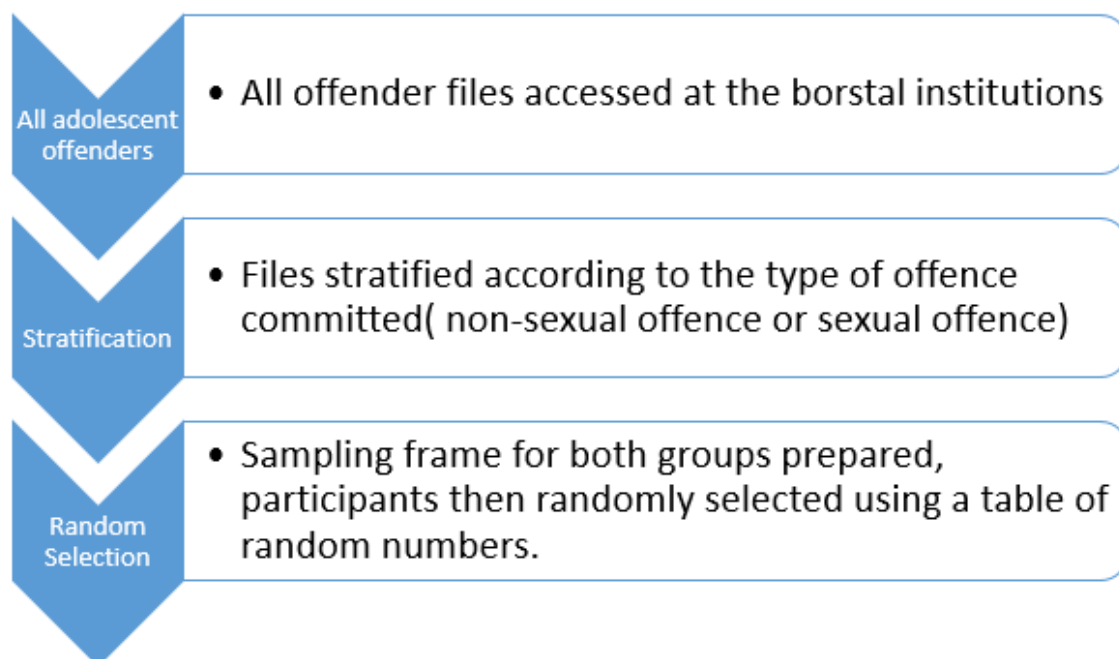
$$n = \frac{2(1.96 + 0.842)^2 0.21(1 - 0.21)}{(0.30 - 0.12)^2} = 80.4$$

A sample size of 80 for sex offenders was required. A sample size of 160 for non-sex offenders was required. A 10% of the sample will be added to cater for non-response. This formed a total sample of 264. This is because the adolescents currently detained at the borstal institutions for non-sexual offenses are more than those detained for sexual offenses.

3.5.2 Sampling

Files of adolescent offenders currently detained at the two borstal centres in Kenya were assessed for sexual and non-sexual offences and stratified according to the type of offence committed (Purposive sampling procedure). A sampling frame for both groups was prepared, after which participants were then randomly selected using a table of random numbers (3 Random number table generation).

Table 3.1 :Sampling procedure



3.6 Selection of Study Participants

Adolescent sexual and non-sexual offenders currently at the Borstal Institutions were included in the study. Secondary records were used to identify the participants as per the eligibility

criteria. Prior to the questionnaire guided interview, only those who accepted to participate were included in the study.

3.7 Study Variables

Table 3.2. List of Variables

Independent and Moderating Variables	Dependent Variable
<p>Independent Variables</p> <p>Religion</p> <p>Family structure</p> <p>Parent’s/Guardian’s Occupation</p> <p>History of alcohol and drug use</p> <p>Friendship with those with a history of drug/alcohol use or sexual offence</p> <p>History of running away from home</p> <p>History of sexual violence victimization</p> <p>Moderating Variables</p> <p>Age</p> <p>Gender</p> <p>Education level</p> <p>Residence</p>	<p>Commission of offence status (Sexual or non-sexual).</p>

3.8 Data Collection

A semi-structured questionnaire was utilized by the interviewers to collect information from the study participants (In English and Swahili). It had both close-ended and open-ended questions. Data was collected by assistants who were co-opted from the staff at the Shimo la Tewa and Shikusa Borstal centres. The assistants were trained prior to the commencement of the data collection process.

Piloting of the instruments was carried out for eliminating or minimizing errors to achieve authentic results. The process involved use of ten percent of the sample size. It was conducted in Shimo la Tewa Borstal Centre with 24 respondents (8 juvenile sexual offenders; 16 juvenile non-sexual offenders). Those who participated in the pilot study did not participate in the main study. Clarity, relevance of questions, ease of extracting data from the files when filling the

research instruments were reviewed during and after the pilot study. Any gaps or errors in the questionnaire were addressed before the development of the final research instrument, adaptation, and adoption of the same.

The questionnaire was tested for both validity and reliability. Representational and translational validity was tested by presenting the questionnaire to a panel of experts who explored the design and theoretical construct of the questionnaire. The experts then advised on the improvements or amendments required to ensure validity. The researcher conducted all amendments recommended to the satisfaction of the experts (Bolarinwa, 2015). On reliability, the study used coefficient alpha index to test internal consistency of the questionnaire. The responses from the pilot test were entered into SPSS and the coefficient alpha index was computed. The alpha should be 0.7 or above for the questionnaire to be considered consistent internally.

The responses from the pilot study were entered into SPSS and the coefficient alpha index was computed. The alpha should be 0.7 or above for the questionnaire to be considered consistent internally (Bolarinwa, 2015). The results of the reliability teste are provided in Table 3.2.

Table 3.3: Cronbach’s Alpha Statistics

Variable	Cronbach Alpha
Demographic factors	0.747
Social factors	0.829
Incarceration information	0.733

As indicated in Table 3.1, the questionnaire was internally consistent (All above 0.7). The items on demographic factors had a reliability coefficient of 0.747, while items on social factors had the highest reliability with a coefficient of 0.829. Further, items on incarceration information (whether incarcerated because of a social offense or otherwise) had a reliability coefficient of 0.733. The questionnaire was hence considered reliable and suitable for the main study. No item was changed.

3.9 Data Processing and Analysis

The questionnaires were checked at the site to ensure that they were filled completely. This is important for minimization of instances of missing data. The data from the questionnaires was entered using Microsoft-Access database software and checked for errors prior to data analysis. Data analysis was conducted by utilizing IBM SPSS® version 24. Descriptive statistics, including mean and proportions were established.

To establish the association between the independent variables and the dependent variable (Commission of crime) in order to establish which ones have significant association, Pearson's Chi-square test was used. Adjusted and unadjusted Odds ratio (OR) were estimated, as well as with corresponding 95% confidence interval. The statistical significance level was set at $p < 0.05$. In order to adjust for confounding factors, logistic regression analysis was done. The significant factors (confounding factors) at bivariable analyses were put through binary logistic regression by indicating or specifying 'backward conditional' method with removal at $p < 0.05$. Presentation of the study results was in form of narratives, tables, and diagrams.

Qualitative data from the open questions was analyzed using theme coding. The process involved reading through the transcripts, assigning key themes based on a review of the responses and then assigning codes to the themes. The study relied on grounded theory approach where the codes emerged from the responses. The themes were arranged hierarchically in order of higher-level themes to lower level themes. The study applied IBM® SPSS® Modeler Text Analytics, which provides robust capabilities to analyze qualitative or text data by use of Natural Language Processing (NLP) and advanced linguistic technologies. This software assisted in extracting, organizing and grouping the themes into categories.

3.10 Study Limitation

The execution of this study within the only two available sites may limit the generalizability of its findings. Nonetheless, due to the fact that the adolescents detained at the institution come from all over the country; and importance of the subject matter, the findings are still representative of the whole country and may still be used to inform interventions for adolescent sexual offenders.

Other biases include recall bias, desirability/acceptability bias and Berksonian bias (as the study was conducted in borstal institutions and not in the general community). Recall and desirability biases were mitigated by explaining to the study participants the purpose of this study. They were reassured that the information they share in the study would not be used against them and that the information they gave would be treated with utmost confidentiality.

3.11 Dissemination Plan

The study findings were presented at the University of Nairobi -School of Public Health during dissertation defence. A copy of the report was furnished to the Kenyatta National Hospital and University of Nairobi Ethics and Research Committee, the institutional library, and the university online repository. The findings were also shared with the Kenya Prisons service and in extension, the Borstal institutions. In addition, the work was published in international peer reviewed journals as well as presented at international scientific and research conferences.

3.12 Ethical Considerations

The review of this project, the clearance, and the approval to conduct the study were from Kenyatta National Hospital and University of Nairobi Ethics and Research Committee. Permission to conduct the research was also sought and obtained from the Ethics Committee at the Ministry of Education and the Kenya Prisons Service. Moreover, authority to conduct the study was sought from the Superintendents of Shimo La Tewa and Shikusa Borstal Institutes, who are the 'acting' guardians of the adolescents during their detention in the Borstal centres. It was not possible to get consent from the parents or actual guardians as contacting them might not have been possible due to various reasons. These include great distances away from the borstal centres where their children are detained (these children come from all regions of the country) and inaccessibility (some of the parents whereabouts are unknown, others do not have means of communication, for example, mobile phones, postal addresses). Moreover, some may have relocated from the residences known to their children for various reasons including search for livelihood or employment. The study participants were assented. It was made clear that should one refuse to participate in this study, their decision would not be used against them.

The participation was voluntary. The targeted participants were informed on what their participation entails, that there would not be penalties or risks for non-participation, how their responses would be used and the significance of the study to them. Moreover, they were notified of their right to withdraw at any time even after the study has commenced. Additionally, whether an adolescent agreed or refused to participate was not disclosed to the institutional administrators or teachers to prevent any negative consequences towards the targeted respondents.

Due to the vulnerability of the study population, the study critically considered confidentiality and welfare of the participants. The study was guided by the principles of beneficence, respect for persons and justice. The study was non-intrusive to ensure that the rights of the participants are respected. Confidentiality and anonymity were strictly observed. This was ensured by directing the participants not to indicate their name or any other personal identifier in the questionnaire. Besides, any information that could link the respondents with the questionnaire was destroyed as soon as possible. Being adolescents in a correctional facility may have further made the study subjects feel obliged to participate in the study as a show to the facility administrators of their (adolescents) cooperation. To avoid this, prior to the questionnaire guided interview of each adolescent, the issue of voluntary participation was emphasized, and they were reminded that choosing not to participate would not result in any bias or punishment from the authorities. This was also discussed with the borstal centre super-intendants, wardens and probation officers and they passed the same message to the adolescents.

To further protect the participants, information on participation or non-participation of any adolescent was not disclosed to administrators in the facility. Besides, the responses to the questionnaire were not disclosed to any other person except the investigators. The researcher unconditionally protected the privacy of the participants and did not bow to any pressure from the Borstal centre officials to disclose the data or the participants. However, the study results will be shared with the Kenya Prisons Service and Borstal centre officials; to be utilized to strengthen the counselling and treatment programs for the participants.

3.13 Expected Outcome of the Study

From this study, the expectation was to establish whether the social and demographic factors of adolescents sentenced for committing sexual offences are similar or differ from those of

non-sexual offenders at borstal centres in Kenya. These findings would be used by governmental actors on potential interventions to prevent and mitigate against adolescent offences. Moreover, any findings that can be used to improve the counselling or treatment plans for the adolescents detained for committing sexual offences was also shared with the Kenya Prisons service and borstal institutions.

CHAPTER FOUR

STUDY RESULTS

4.1 Introduction

This chapter provides the approaches used in analysis of the data, the study results, the presentation of the results and the results interpretation. The analysis approaches and results are aimed at comparing the social and demographic factors of adolescent boys sentenced for committing sexual offences to those of non-sexual offenders at borstal centres in Kenya. The results include results from descriptive statistics (percentages, frequencies and means) and results from inferential statistics such as chi square tests and logistic regression statistics. Figures and tables are used to present the findings.

4.2 Response Rate

The sample for the study was 264 adolescents detained at Shimo la Tewa and Shikusa Borstal institutions for non-sexual and sexual offenses. 245 adolescents from the borstal centres accepted to be interviewed. This was a response rate of 92.8%. Shimo la Tewa had 55% of the responses while Shikusa had 45%. This was considered to be an adequate and appropriate response rate for the study as it was consistent with the findings of the study by Lincoln and Guba (2018) who observe that a response rate of above 60% or above is adequate for a r. Findings from studies with 60% response rate or above are considered credible and a true representation of the study population.

4.3 Demographic Characteristics of the Study Participants

The demographic information of the study participants is provided in this section. This comprises of information such as age, religion, and family structure.

4.3.1 Age of Study Participants

For age, percentages were used to analyze the responses.

42% of the research participants were 17 years old, 24% were 18 years old, 22% were 16 years of age whereas 11% were 15 years of age. These study results show that most of the adolescent offenders incarcerated at the two borstal centers are nearing their adulthood; being 17 and 18 years of age.

The study further assessed the association between age of the study participants with types of offences they had been incarcerated for. Cross tabulation and chi-square tests were conducted, and the findings are presented in Table 4.1.

Table 4.1: Association between Age and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
Age 15	Number count	13	15	28	
	Percentage (%)	46.4	53.6	100.0	
16	Number	29	26	55	
	%	52.7	47.3	100.0	
17	Number	68	36	104	
	%	65.4	34.6	100.0	
18	Number	40	18	58	
	%	69.0	31.0	100.0	

Total	Number	150	95	245
	%	61.2	38.8	100.0
Chi-Square Test				
	Value	Df	p-value	
Pearson Chi-Square	6.477	3	.091	

The findings in Table 4.1 show that there was no significant association between age of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). This is indicated by the non-significance of the chi square tests ($\chi^2 = 6.477$, $p = 0.091$). These results suggest that age of the offender is not related with the type of offense that they are incarcerated for.

4.3.2 Religion of the Study participants

The study investigated the religious affiliation of the study participants to establish the affiliation which most of the incarcerated adolescents affiliated with. The results of the study from the descriptive analysis are presented in Figure 4.2. Majority of the study participants (82.9%) were affiliated to the Christianity religion. This was followed by Muslim faith , other religions and Hindu faith made up less than 2% of the religious affiliations. The distribution of the respondents in the borstal centres mirrored the distribution of the different faith in the country.

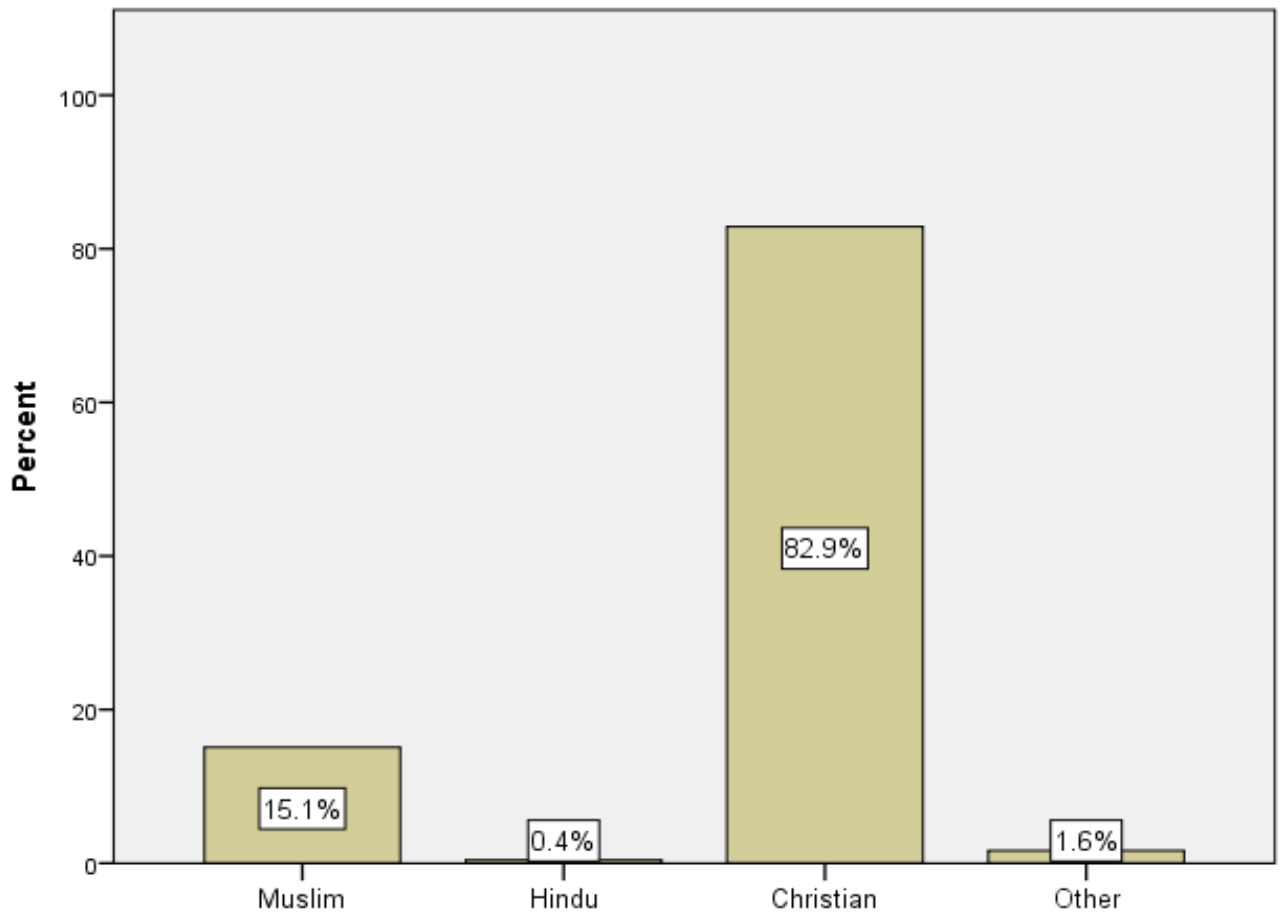


Figure 4.2: Religious Affiliation of the Study participants

The study further assessed the association between religion of the study participants with types of offences they had been incarcerated for (sexual or non-sexual offences). Religion was grouped into two categories: Christian and others. Cross tabulation and chi-square tests were conducted . Findings are presented in Table 4.2.

Table 4.2: Association between Religion and Type of Offense

	Type of Offense		Total
	Non-Sexual Offense	Sexual Offense	

Religion Christian	Number count	127	76	203
	Percentage (%)	62.6	37.4	100.0
Others	Number	23	19	42
	%	54.8	45.2	100.0
Total	Number count	150	95	245
	%	61.2	38.8	100.0
Chi-Square Tests				
	Value	Df	p-value	
Pearson Chi-Square	2.255	1	.521	

The findings in Table 4.2 indicate that there was no significant association, hence no relationship, between religion of the incarcerated adolescents and the nature of offense they had been incarcerated for. This is indicated by the non-significance of the chi square test ($\chi^2 = 2.255, p = 0.521$).

4.3.3 Distribution of Participants by County

The study investigated the county of origin of the adolescents incarcerated in the two borstal centres. All counties except five (Tana River, Turkana, Samburu, Isiolo and Elgeyo Marakwet) had adolescents incarcerated in the two borstal centres. Counties with the highest number included Meru (6.5%), Taita Taveta (6.1%), Machakos (5.7%) and Nairobi (4.9%). Other counties with considerable numbers included Kirinyaga (4.5%), Kiambu (4.5%), Murang'a (4.5%), Nyeri (4.1%), Kilifi (4.1%), Bungoma (4.1%) and Mombasa (4.1%). These results show that though incarceration of adolescent boys is a national problem, there are counties that are more affected than others.

4.3.4 Family Structure

The study enquired about the family structure of the incarcerated adolescents. The results of the ensuing analysis are presented in Figure 4.3.

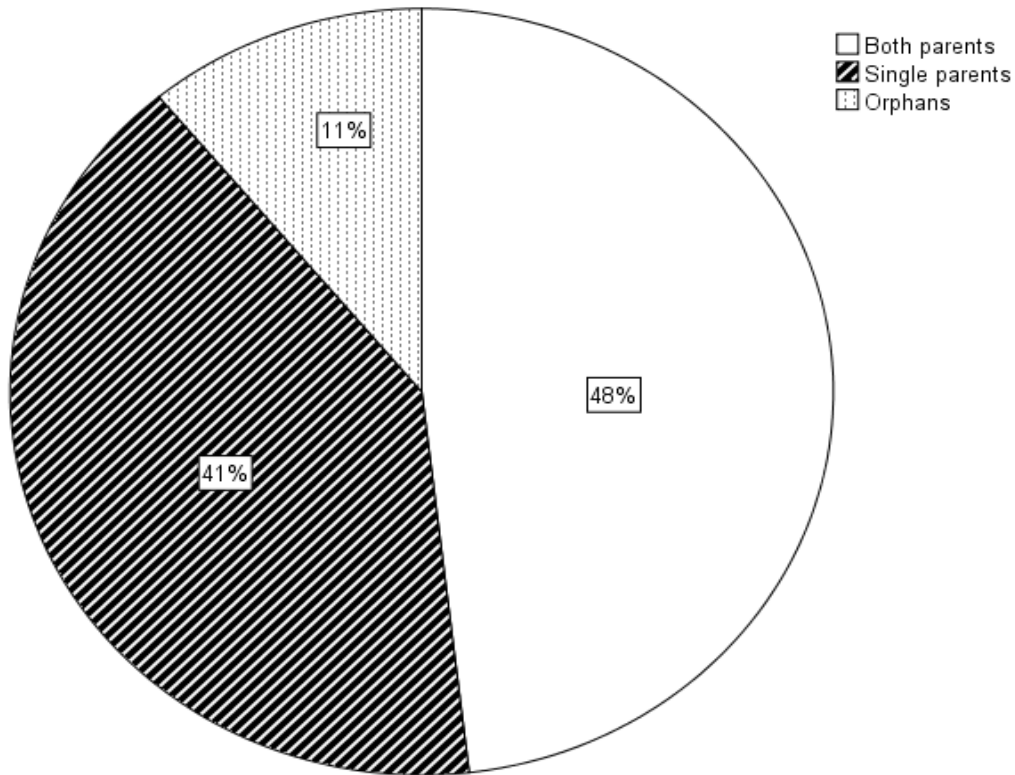


Figure 4.3: Family Structure of the Study Participants

Further, the study investigated the association between family structure of the study participants with the nature of offences they had been incarcerated for (sexual or non-sexual offenses). Family structure was grouped into two categories (because it is a nominal variable); both parents and single parents or orphans. Cross tabulation and chi-square tests were conducted, and the findings are presented in Table 4.3.

Table 4.3: Association between Family Structure and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
Family structure	Both parents	Number Count	79	39	118
		% (percentage)	66.9	33.1	100.0

Single parents or orphans	Number	71	56	127
	%	55.9	44.1	100.0
Total	Number	150	95	245
	%	61.2	38.8	100.0
Chi-Square Tests				
	Value	Df	p-value	
Pearson Chi-Square	3.380	2	.185	

The study results in Table 4.3 show that there was no significance association, hence no relationship between family structure of the incarcerated adolescents and the nature of offense they had been incarcerated for (sexual or not sexual offense). This is suggested by the non-significance of the chi square test ($\chi^2 = 3.380$, $p = 0.185$).

4.4: Socio-Economic Characteristics of the Study Participants

The study assessed various social and economic factors regarding the incarcerated adolescents and their immediate families. These included the level of education, occupation of parents/guardians, history of strife or fighting amongst the parents or guardians, relationship with parents or guardians, alcohol abuse by parents or guardians and use of recreational drugs by parents or guardians.

4.4.1 Level of Education of the Study Participants

As shown in Figure 4. Below, majority of the adolescent boys had completed Primary level education This is expected as 66% of them were aged between 17 and 18 years of age.

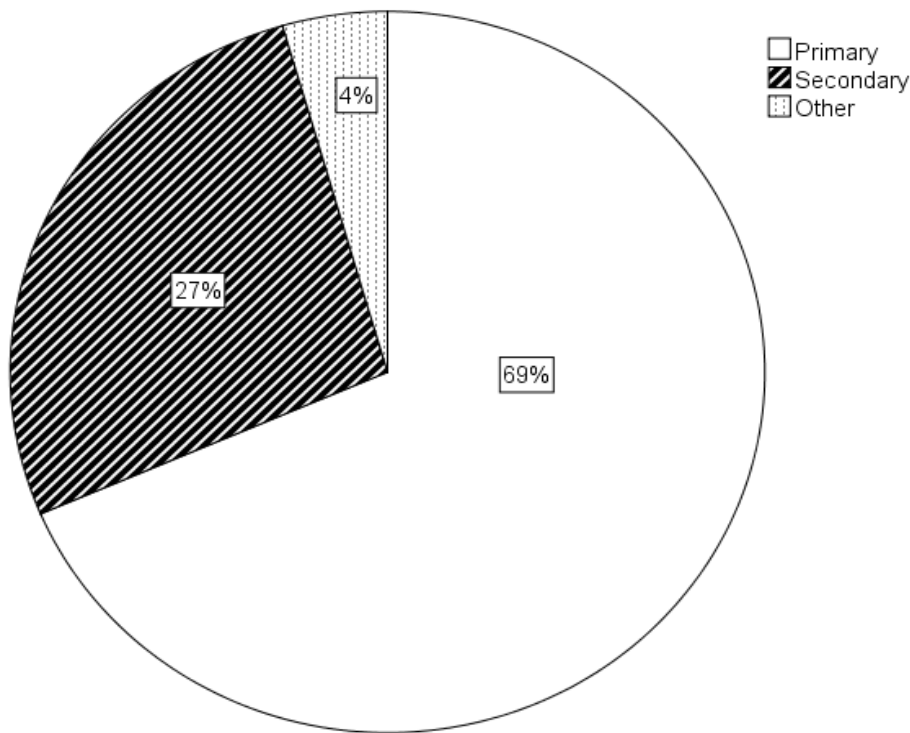


Figure 4.4: Education Level of the Study Participants

Association between education levels of the study participants with types of offences they had been incarcerated for (sexual or non-sexual offences) was examined. Education level was an ordered variable and hence it was appropriate for chi square tests. Findings are presented in Table 4.4.

Table 4.4: Association between Education Level and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
Education level	Other	Number Count	4	7	11
		Percentage (%)	36.4	63.6	100.0
	Primary	Count	95	73	168
		%	56.5	43.5	100.0
	Secondary	Number	51	15	66
		Percentage (%)	36.4	22.7	59.1

	%	77.3	22.7	100.0
Total	Number	150	95	245
	%	61.2	38.8	100.0
Chi-Square Tests				
	Value	Df	p-value	
Pearson Chi-Square	11.572	2	.003	

The study results in Table 4.4 indicate that there was a significant association, hence a significant relationship, between education level of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). This was indicated by the significance (less than 0.05) of the chi square test ($\chi^2 = 11.572$, $p = 0.003$). Offenders with lower education levels were more inclined towards sexual offenses than offenders with higher levels of education.

4.4.2 Parental, Guardian, and family Factors

The study investigated several aspects of the adolescent offenders relating to their parents, guardians, or their immediate families. These included occupation of the parents or guardians, history of strife or fighting amongst parents or guardians, their (adolescents) perceived relationship with their parents or guardians and whether they had ever run away from home. Other factors investigated included whether the parents or guardians abused alcohol or used recreational drugs.

4.4.2.1 Occupation of the Parents

The study results presented in Figure 4.5 show that majority of the parents or guardians of the adolescent offenders were involved in non-white collar jobs. Only 13%, indicated as 'professionals', were involved in white collar occupations such as teaching. The 5% indicated as others referred to those who lived in households without a source of income.

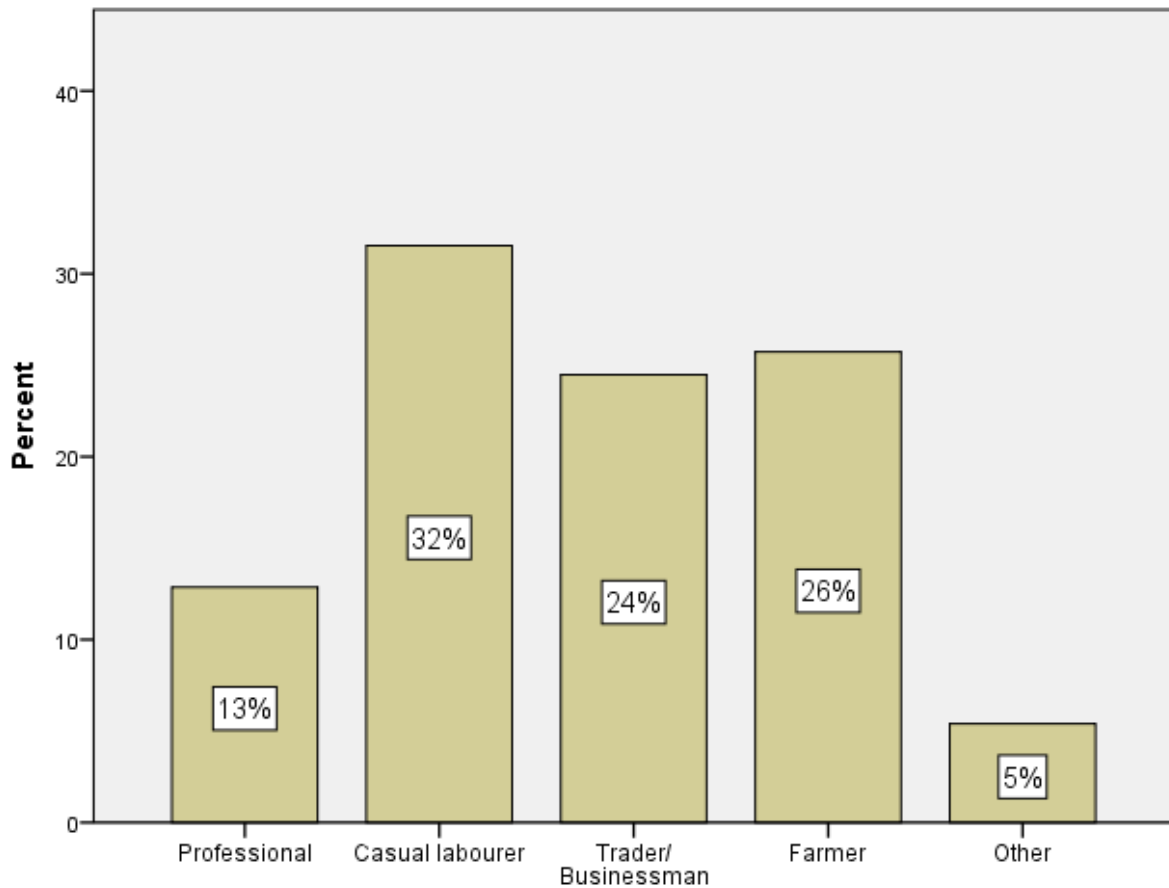


Figure 4.5: Occupation of Parent or Guardian

4.4.2.2 History of Strife or Fighting at Home

Majority of the offenders were from seemingly peaceful families as only 29% were noted to have experienced fighting and strife amongst their parents as shown in Figure 4.6.

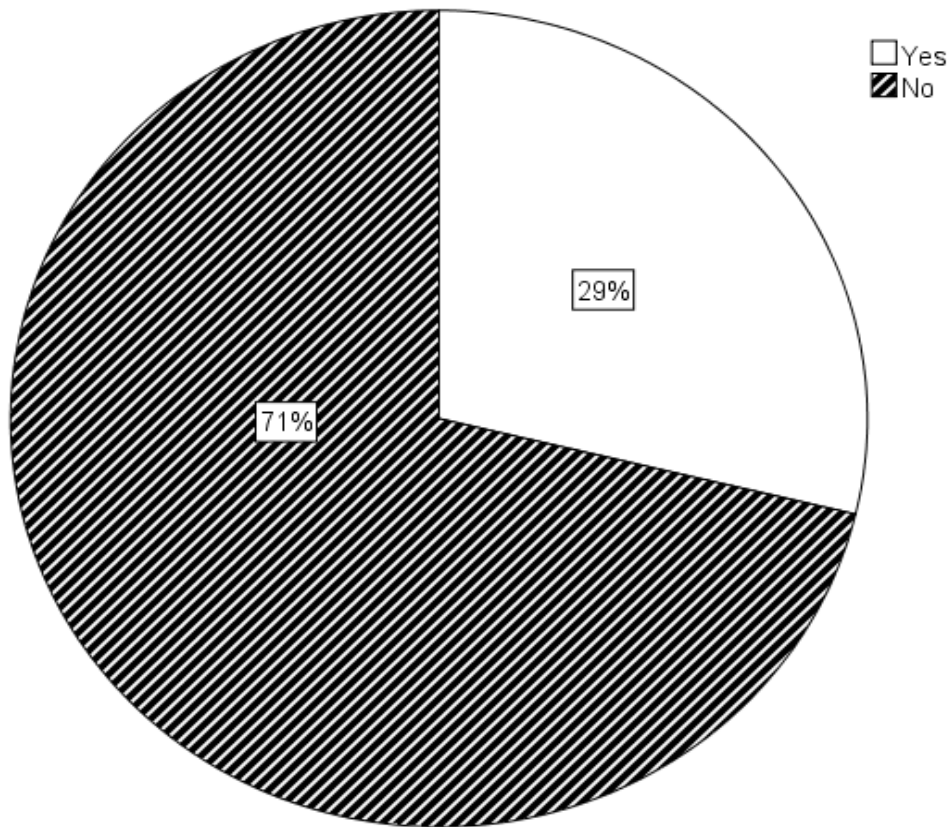


Figure 4.6: History of Strife or Fighting at Home

The study sought to associate the strife and fighting amongst parents / guardians with type of offense (sexual or non-sexual).

Table 4.5: Association between History of Strife or Fighting at Home and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
History of strife or fighting in home	Yes	Number	33	32	65
		%	50.8	49.2	100.0
	No	Number	103	58	161
		%	64.0	36.0	100.0

Total	Number	136	90	226
	%	60.2	39.8	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	9.438	1	.006	

The study results in Table 4.5 show that there was a significant association, hence a significant relationship, between history of strife or fighting at the homes of the incarcerated adolescents and the type of offense t (sexual or not sexual offense). This was indicated by the significance (less than 0.05) of the chi square test ($\chi^2 = 9.438$, $p = 0.006$). Offenders who experienced strife or fighting amongst their parents / guardians were more likely to engage in sexual offenses than offenders who did not experience strife or fighting amongst their parents or guardians.

4.4.2.3 Relationship with Parent or Guardian

The study interrogated the relationship that the juvenile offenders had with their parents and guardians. The results , as presented in Figure 4.7 show that majority of the adolescent offenders felt they related well with their parents or guardians, while only 10% felt they had a bad relationship with their parents or guardians.

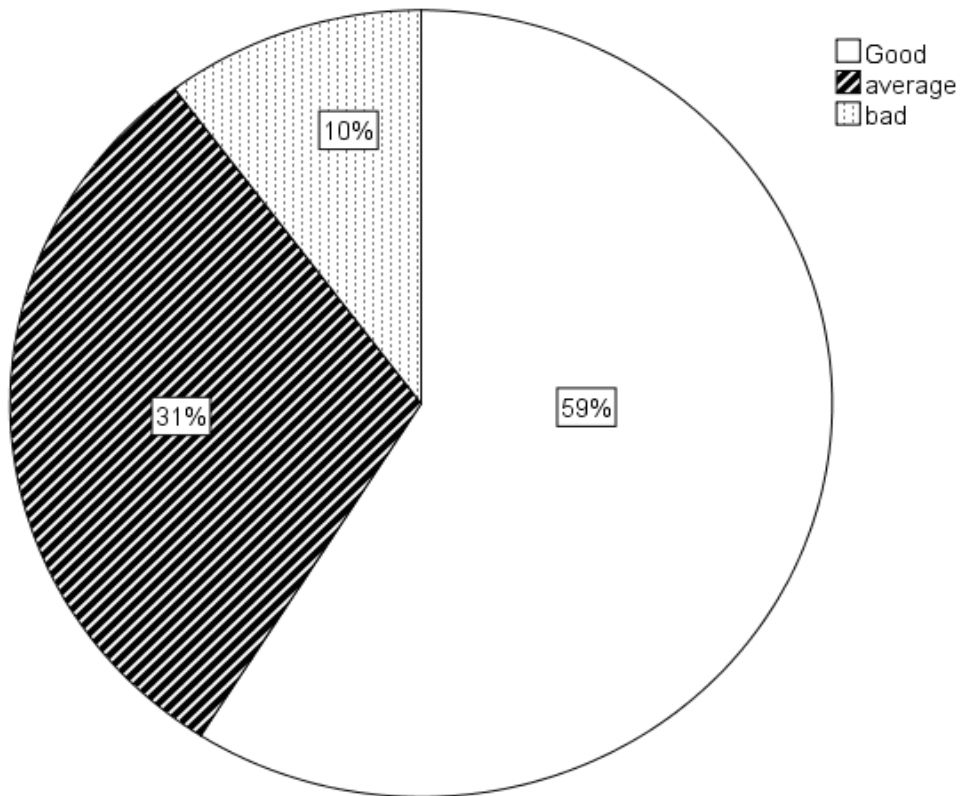


Figure 4.7: Relationship with Parent or Guardian

Association between the relation that the adolescent offenders had with parents or guardians and the type of offences (sexual or non-sexual offenses) was assessed .

Table 4.6: Association between Relationship with Parent or Guardian and Type of Offense

		Type of Offense		Total
		Non-Sexual Offense	Sexual Offense	
Relationship with Good parents/guardians	Number	98	46	144
	%	68.1	31.9	100.0
Average	Number	44	31	75
	%	58.7	41.3	100.0

Bad	Number	8	17	25
	%	32.0	68.0	100.0
Total	Number	150	94	244
	%	61.5	38.5	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	14.065	2	.001	

The study results in Table 4.6 indicate that there was a significant association hence a significant relationship between the adolescent's perceived relationship with his parent or guardian and the nature of offense (sexual or not sexual offense) committed. This is suggested by the statistical significance of the chi square test ($\chi^2 = 14.065$, $p = 0.001$). The adolescents who reported that they had a bad relationship with their parents or guardians were more inclined towards sexual offenses than those with a good relationship with their parents or guardians.

4.4.2.4 History of Running Away from Home

Slightly over half of the study participants had at one time run away from home while 47% had never run away from home.

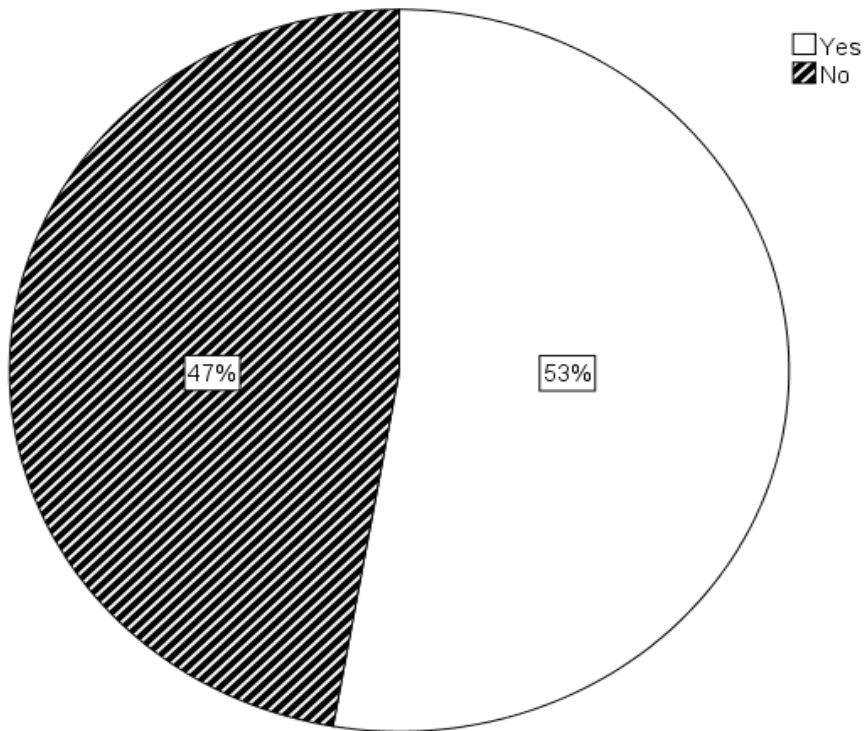


Figure 4.8: History of Running Away from Home

Association between running away from home and the nature of offence was examined as shown below.

Table 4.7: Association between Running away from Home and Type of Offense

		Type of Offense		Total
		Non-Sexual Offense	Sexual Offense	
Running away from home	Yes	83	43	126
	%	65.9	34.1	100.0
	No	64	49	113
	%	56.6	43.4	100.0
Total	Number	147	92	239

	%	61.5	38.5	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	2.146	1	.143	

Table 4.7 provides results that indicate that there was no significant association hence no relationship between running away from home by the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). This is suggested by the statistical insignificance of the chi square test ($\chi^2 = 2.146$, $p = 0.143$).

4.4.2.5 History of Abuse of Alcohol by Parents / Guardians

Figure 4.9 provides results which show that slightly over half of the adolescents came from families where the parents / guardians did not abuse alcohol.

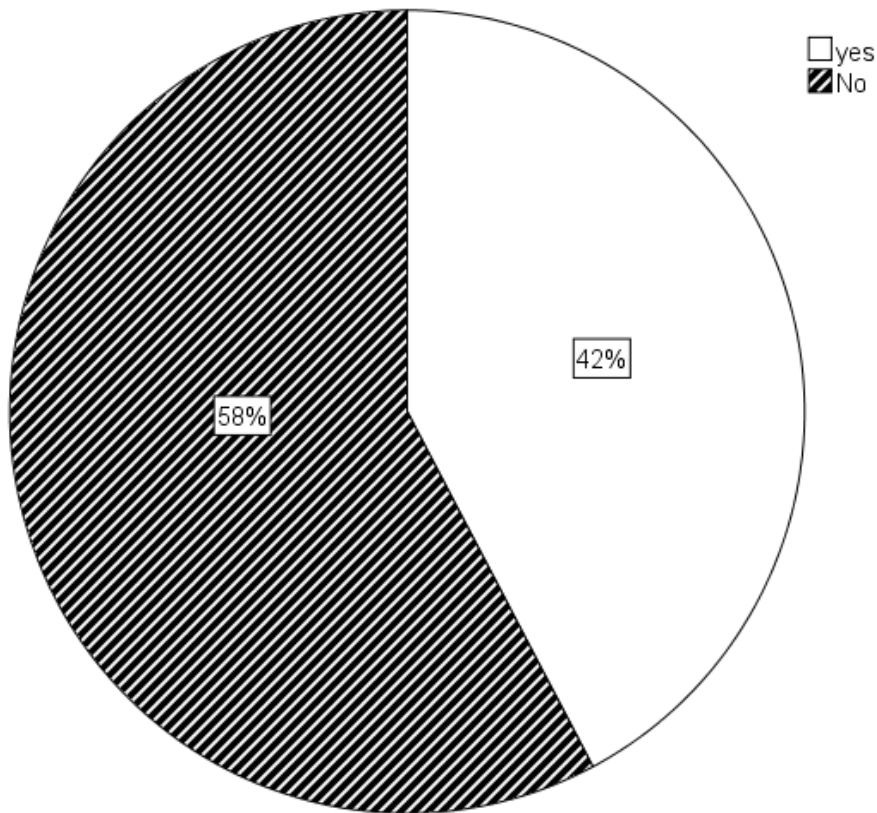


Figure 4.9: History of Abuse of Alcohol by Parents / Guardians

The association between abuse of alcohol by parents / guardians and the type of offence (sexual or non-sexual offenses) was assessed .

Table 4.8: Association between History of Abuse of Alcohol by Parents / Guardian and Type of Offense

	Type of Offense		Total
	Non-Sexual Offense	Sexual Offense	
Yes Number	62	39	101
% (Percentage)	61.4	38.6	100.0

History of Abuse No	Number	86	52	138
of Alcohol by	%	62.3	37.7	100.0
Parents / Guardian				
Total	Number	148	91	239
	%	61.9	38.1	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	.022	1	.883	

The study results in Table 4.8 show that there was no significant association hence no relationship between abuse of alcohol by parents / guardian of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). This is suggested by the statistical insignificance of the chi square test ($\chi^2 = 0.022$, $p = 0.833$).

4.4.2.5 Use of Recreational Drugs by Parents / Guardians

Use of recreational drugs by parents / guardians of the incarcerated adolescents were investigated in the study. The study results presented in Figure 4.10 indicate that most of the research participants came from families where their parents / guardians did not use recreational drugs. Those that came from families where parents / guardians used recreational drugs were 35%.

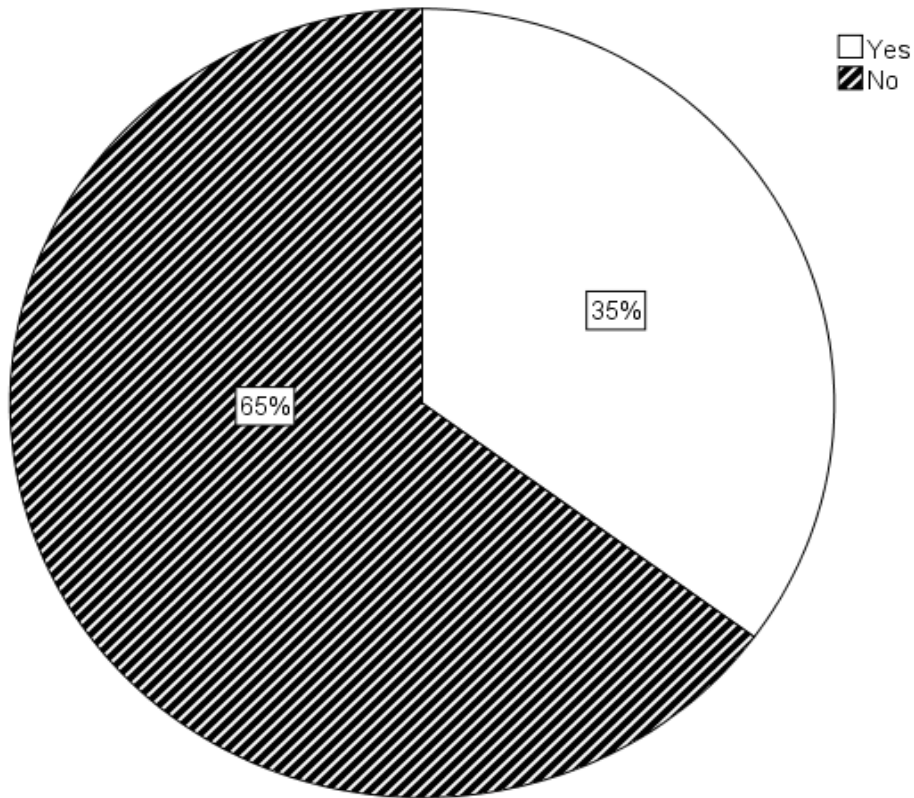


Figure 4.10: Use of recreational Drugs by Parents / Guardians

Examination of association of use of recreational drugs by parents / guardians of the incarcerated adolescents with the type of offense that had made the adolescent offenders to be incarcerated was done.

Table 4.9: Association between Use of recreational Drugs by Parents / Guardians and Type of Offense

	Type of Offense		Total
	Non-Sexual Offense	Sexual Offense	
Yes Number	39	34	73
%	53.4	46.6	100.0

Parents or guardians use of recreational drugs	No	Number	85	50	135
		%	63.0	37.0	100.0
Total		Number	124	84	208
		%	59.6	40.4	100.0
Chi-Square Tests					
		Value	df	p-value	
Pearson Chi-Square		1.790	1	.181	

The study results in Table 4.9 show that there was no significant association, hence no relationship, between use of recreational drugs by parents / guardians of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or non-sexual offense). This was indicated by the non-significance (greater than 0.05) of the chi square test ($\chi^2 = 1.790$, $p = 0.181$).

4.4.3 History of Alcohol Use by the adolescents

The study results presented in Figure 4.11 indicate that slightly above half of the study participants had history of alcohol use.

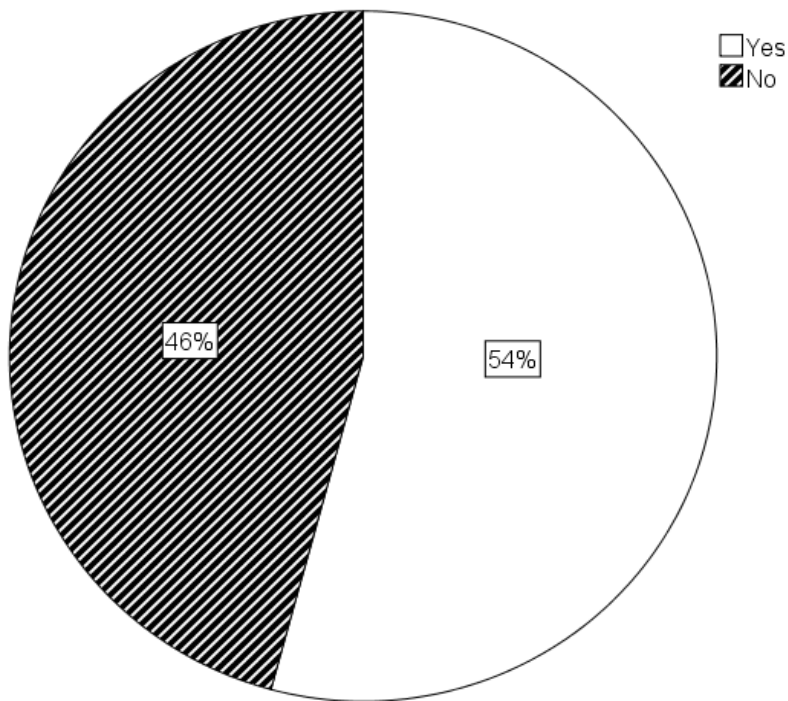


Figure 4.11: History of Alcohol Use by Adolescent Offenders

For those who had a history of alcohol use, the study enquired the age that they first used alcohol. The results are presented in Table 4.10.

Table 4.10: Age at First Alcohol Use

Age in years	Frequency	Percent
8	1	.8
10	11	8.7
11	11	8.7
12	17	13.5
13	13	10.3
14	16	12.7
15	21	16.7
16	20	15.9

17	16	12.7
Total	126	100.0

The study results presented in Table 4.10 show that of the 126 adolescent offenders who had ever used alcohol, majority of them had first used alcohol when they were between 12 and 16 years of age .

Further, the study assessed the association between alcohol use and type of offense committed by the incarcerated adolescents.

Table 4.11: Association between Alcohol Use and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
Alcohol use	Yes	Number	84	45	129
		%	65.1	34.9	100.0
	No	Number	61	48	109
		%	56.0	44.0	100.0
Total		Number	145	93	238
		%	60.9	39.1	100.0
Chi-Square Tests					
			Value	df	p-value
Pearson Chi-Square			2.079	1	.149

The study results in Table 4.11 show that there was no significant association, hence no relationship between use of alcohol by the incarcerated adolescent boys and the type of offense the adolescents were incarcerated for (sexual or non-sexual offense). This was indicated by the non-significance (greater than 0.05) of the chi square test ($\chi^2 = 2.079$, $p = 0.149$).

4.4.4 Association with Friends or Relatives who Abused alcohol

The study revealed 66% of the Adolescent offenders had friends or relatives(excluding parents) whom they thought abused alcohol. Remember that a lesser percentage (42%) of the participant’s parents abused alcohol.

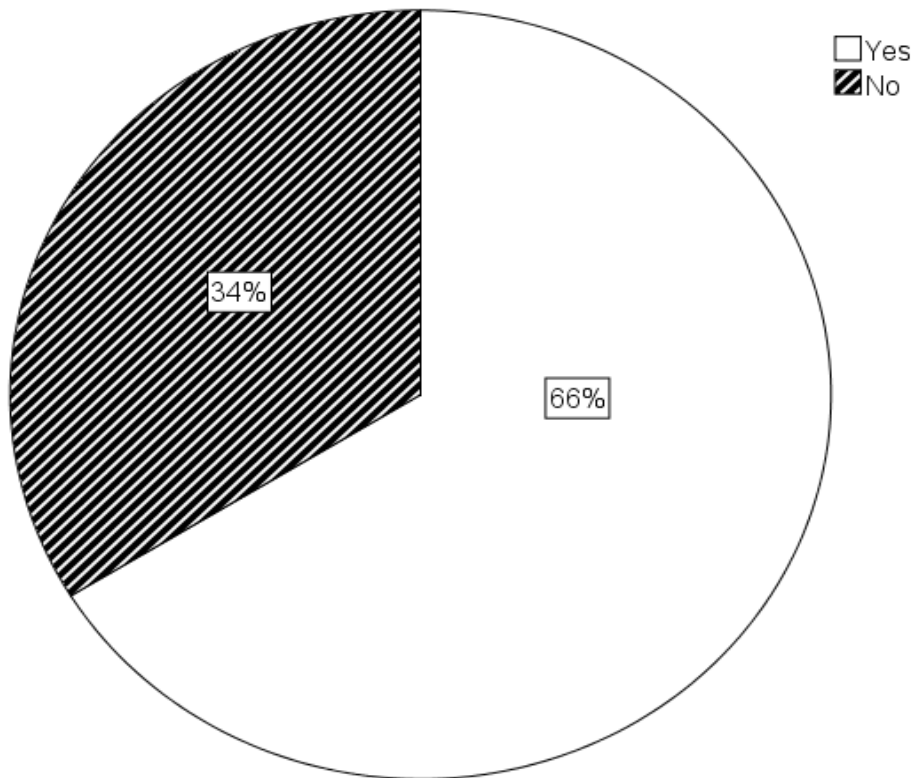


Figure 4.12: Having Friends or Relatives Who Abused Alcohol

Moreover, the participants who had friends or relatives who abused alcohol were asked to indicate whether these were friends or relatives. The findings are presented in Table 4.12.

Table 4.12: Whether Friends or relative abuse alcohol

Response	Frequency	Percent

Friend	134	72.8
Relative	50	27.2
Total	184	100.0

Of the 184 adolescent offenders, who had friends or relatives abusing alcohol, 72.8% were friends and 27.2% were relatives.

The study additionally assessed the association between having friends or relatives who abused alcohol and the type of offense committed.

Table 4.13: Association between Having a Friend of relative who abused alcohol and Type of Offense

		Type of Offense		
		Non-Sexual Offense	Sexual Offense	Total
Friends or relatives (excluding parents) who abused alcohol	Yes	Number 100	55	155
	%	64.5	35.5	100.0
	No	Number 45	34	79
	%	57.0	43.0	100.0
Total	Number	145	89	234
	%	62.0	38.0	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	1.267	1	.260	

As in the findings of abuse of alcohol by parents or guardians, the study results in Table 4.13 indicate no significant association, hence no relationship, between having friends or relatives who abused alcohol and the type of offense the adolescents were incarcerated for (sexual or not sexual offense). This was indicated by the non-significance (greater than 0.05) of the chi square test ($\chi^2 = 1.267, p = 0.260$).

4.4.5 Use of Recreational Drugs

The results indicate that majority of the participants had used a form of recreational drug with only a quarter of them reporting that they had never used any recreational drug.

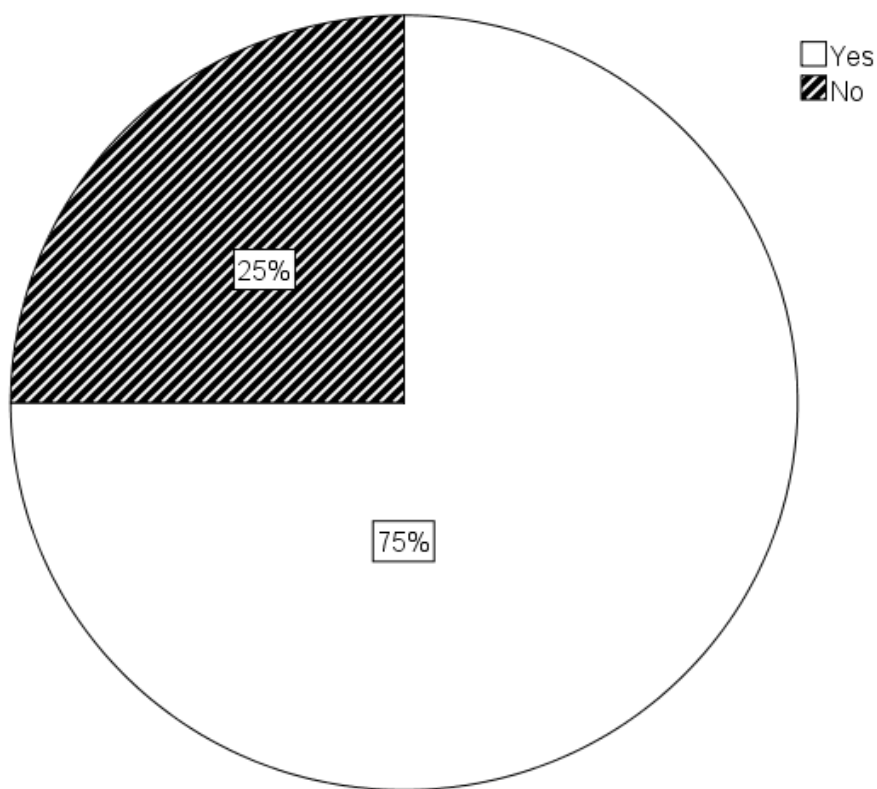


Figure 4.13: Use of Recreational Drugs

For the 75 percent majority that had ever used a recreational drug, the most commonly used substance was Bhang, followed by Khat.

Table 4.14: Type of Recreational Drug or Used

Recreational drug	Frequency	Percent
Bhang	124	63.6

Khat	56	28.7
Other	15	7.7
Total	195	100.0

Those that had used recreational drugs were asked to indicate the age at which they first used the recreational drugs. Most first used a recreational drug or substance when aged between 14 and 16 years. (Remember that the majority age bracket for first time alcohol use of the adolescents who had ever consumed alcohol was lower (12-16 years) than for first time recreational drug or substance use).

Table 4.15: Age at First Recreational Drug Use

Age in years	Frequency	Percent
9	2	1.0
10	19	10.4
11	9	4.9
12	19	10.4
13	15	8.2
14	28	15.4
15	33	18.1
16	42	23.1
17	15	8.2
Total	182	100.0

The study assessed the association between use of recreational drugs and type of offense committed by the adolescents.

Table 4.16: Association between Use of Recreational Drugs and Type of Offense

		Type of Offense		Total
		Non-Sexual Offense	Sexual Offense	
Use of recreational drugs	Yes	Number 124	59	183
	% (percent)	67.8	32.2	100.0
	No	Number 26	35	61
	%	42.6	57.4	100.0
Total	Number	150	94	244
	%	61.5	38.5	100.0
Chi-Square Tests				
		Value	df	p-value
	Pearson Chi-Square	12.206	1	.000

The study results in Table 4.16 indicate a significant association, hence association, between use of recreational drugs and the type of offense the adolescents were incarcerated for (sexual or not sexual offense). This was indicated by the significance (less than 0.05) of the chi square test ($\chi^2 = 12.206$, $p < 0.05$). Specifically, recreational drug users were more associated with non-sexual offenses than sexual offences.

4.4.6 Association with Friends or Relatives who Use Recreational Drugs

Results are presented in Figure 4.14 indicate that majority of the study participants had friends or relatives who used recreational drugs, with friends comprising majority of the users as shown in Table 4.17.

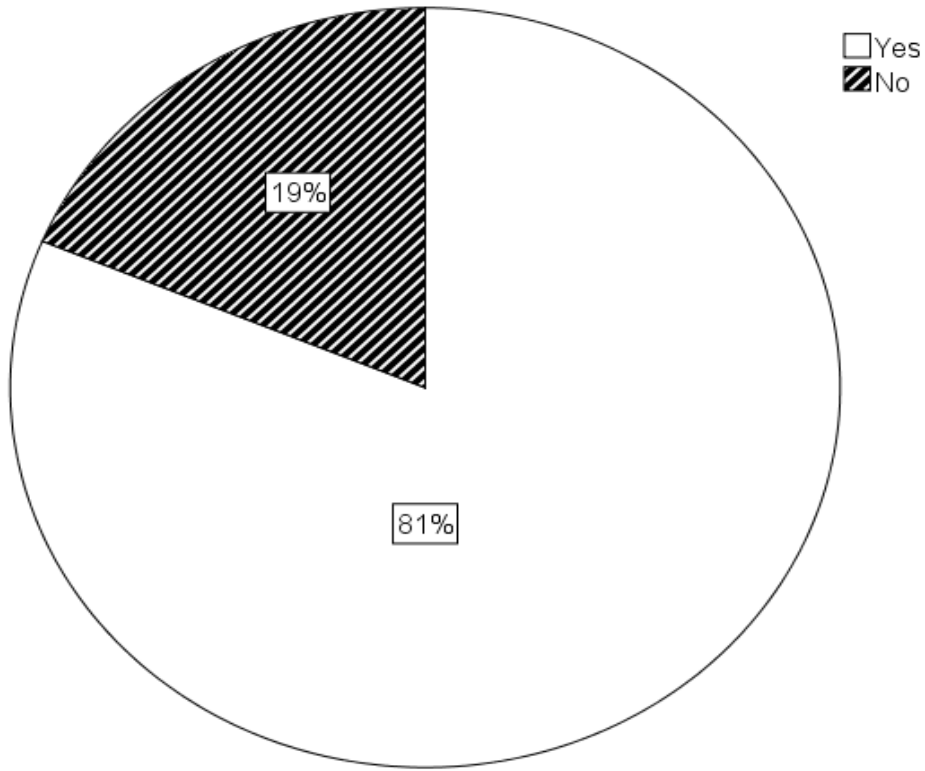


Figure 4.14: Having Friends or Relatives who Use Recreational Drugs

Table 4.17: Whether it was friend or relative who used recreational drugs

Friend or relative	Frequency	Percent
Friend	157	76.6
Relative	48	23.4
Total	205	100.0

Moreover, the study sought to establish the association between having a friend or relative using recreational drugs and the type of offense committed by the adolescent (sexual or non-sexual offense).

Table 4.18: Association between having a friend or relative using recreational drug and Type of Offense

	Type of Offense		
	Non-Sexual Offense	Sexual Offense	Total
Friends or relatives Yes Number (excluding parents) who used recreational drugs	127	60	187
	% 67.9	32.1	100.0
No Number	16	27	43
	% 37.2	62.8	100.0
Total	Number 143	87	230
	% 62.2	37.8	100.0
Chi-Square Tests			
	Value	df	p-value
Pearson Chi-Square	14.015	1	.000

The study results in Table 4.18 show that there was a significant association hence a significant relationship, between having a friend or relative who used recreational drugs and the type of offense the adolescents had been incarcerated for (sexual or not sexual offense). This was indicated by the statistical significance (less than 0.05) of the chi square test ($\chi^2 = 14.015$, $p < 0.05$). Specifically, the cross tabulation statistics indicate that those with friends or relatives who used recreational drugs were more inclined towards non-sexual offenses than while those who did not have friends or relatives who used recreational drugs were more likely to commit sexual offences.

4.5 Sexual Activity/By the Study Participants

The study investigated sexual encounters, practices, and habits of the research participants. This was conducted to associate and link these sexual factors to the offences committed by the adolescent offenders. These aspects include whether the research participants had engaged in sexual encounters, whether they had experienced sexual harassment, whether they had a friend or relative with history of sexual violence and whether they have had unnatural carnal knowledge.

4.5.1 Sexual Encounters by Study participants

Figure 4.15 shows that 3/4 of the study participants had had a sexual encounter.

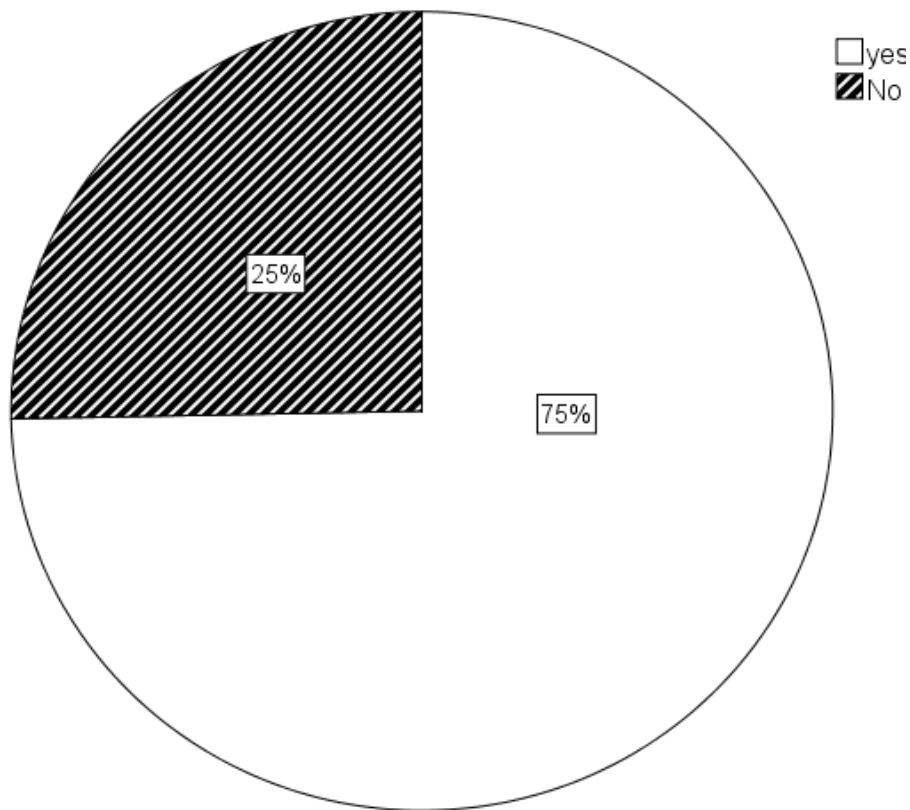


Figure 4.15: Previous Sexual Encounter by Study Participants

.Additionally, the study sought to establish whether there was any association between engagement in sexual activity and the type of offense that the adolescents had committed.

Table 4.19: Association between Previous Sexual Encounter and Type of Offense

		Type of Offense		Total	
		Non-Sexual Offense	Sexual Offense		
Previous Sexual Encounter	Yes	Number	107	76	183
		% (percentage)	58.5	41.5	100.0
	No	Number	43	19	62
		%	69.4	30.6	100.0
Total	Number	150	95	245	

%	61.2	38.8	100.0
Chi-Square Tests			
	Value	df	p-value
Pearson Chi-Square	2.311	1	.128

The study results in Table 4.19 indicate no significant association, hence no relationship, between previous sexual encounter and the type of offense the adolescents were incarcerated for (sexual or non-sexual offense). This was indicated by the non-significance (greater than 0.05) of the chi square statistic ($\chi^2 = 2.311$, $p = 0.128$).

4.5.2 Age at First Sexual Encounter

The study results presented in Table 4.20 indicated for participants who had engaged in sex , the sexual debut for the majority occurred between 15 and 16 years of age.

Table 4.20: Age at first sexual encounter

Age in years	Frequency	Percent
10	8	4.4
11	9	4.9
12	26	14.2
13	16	8.7
14	22	12.0
15	41	22.4
16	42	23.0
17	19	10.4
Total	183	100.0

4.5.2 History of Sexual Harassment

The results are presented in Figure 4.16 show majority of the study participants had never been sexually harassed.

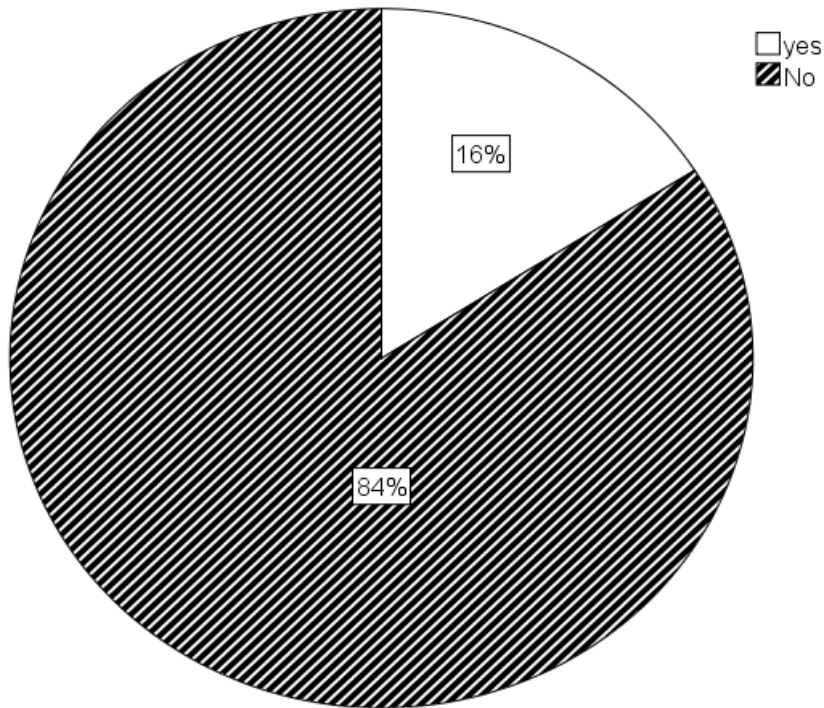


Figure 4.16: Experience of Sexual Harassment

The study further, sought to assess the association between being a victim of sexual harassment and type of offenses that made the adolescent to be convicted.

Table 4.21: Association between Sexual harassment and Type of Offense

	Type of Offense		Total
	Non-Sexual Offense	Sexual Offense	
Victim of sexual harassment	Yes	Number	38
		%	100.0
	No	Number	200

	%	66.5	33.5	100.0
Total	Number	145	93	238
	% within Victim of sexual harassment	60.9	39.1	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	10.491	1	.003	

Table 4.21 show results that indicate that there is a significant association between being a victim of sexual harassment and the type of offense they adolescents had been incarcerated for (sexual or non-sexual offense). This is suggested by the statistical significance of the chi square statistic ($\chi^2 = 10.491$, $p = 0.003$). These results imply that when an adolescent is a victim of sexual harassment, they are more likely to become sexual offenders compared to those adolescents who are not victims of sexual harassment.

4.5.3 Friend or Relative with History of Sexual Violence

The study assessed whether the study participants had any friend or relative who had a history of sexual violence. The findings in Figure 4.17 indicate that majority of the participants did not have friends or relatives a history of sexual violence. For those with who did, approximately half of the associates were friends and the other half relatives as shown in Table 4.22.

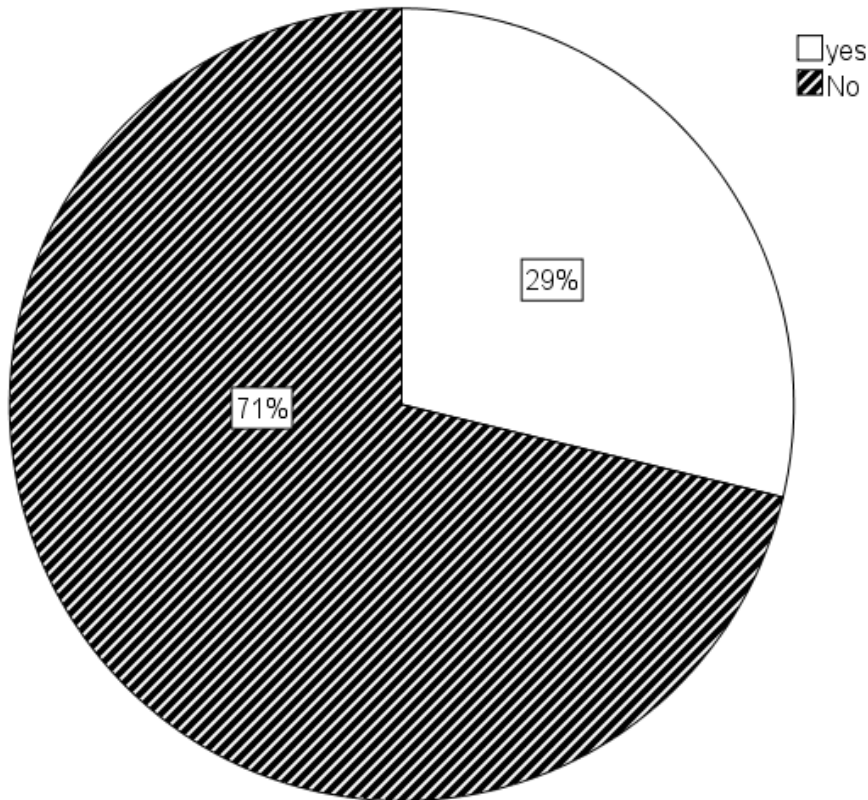


Figure 4.17: Friend or Relative with History of Sexual Violence

Table 4.22: Whether Friend or relative had a history of sexual violence

Friend or relative	Frequency	Percent
Friend	48	49.0
Relative	50	51.0
Total	98	100.0

The study further evaluated the association between having a friend or relative with a sexual violence history and the type of offenses the adolescent committed.

Table 4.23: Association between Having a friend or relative with history of sexual violence and Type of Offense

			Type of Offense		Total
			Non-Sexual Offense	Sexual Offense	
Friends or relatives with a history of sexual violence	Yes	Number	32	35	67
		%	47.8	52.2	100.0
	No	Number	111	55	166
		%	66.9	33.1	100.0
Total		Number	143	90	233
		%	61.4	38.6	100.0
Chi-Square Tests					
		Value	df	p-value	
	Pearson Chi-Square	9.310	1	.009	

The study results in Table 4.23 show a significant association between having a family or relative with a history of sexual violence and the type of offense the adolescents were incarcerated for (sexual or not sexual offense). This was indicated by the significance (less than 0.05) of the chi square statistic ($\chi^2 = 9.310$, $p = 0.009$). Adolescents who had a friend or relative with a history of sexual violence were more inclined towards sexual offences compared to those adolescents who had no friends or relatives with a history of sexual violence.

4.5.4 History of having unnatural carnal knowledge

The results presented in Figure 4.18 indicate that majority of the study participants had no history of unnatural carnal knowledge .

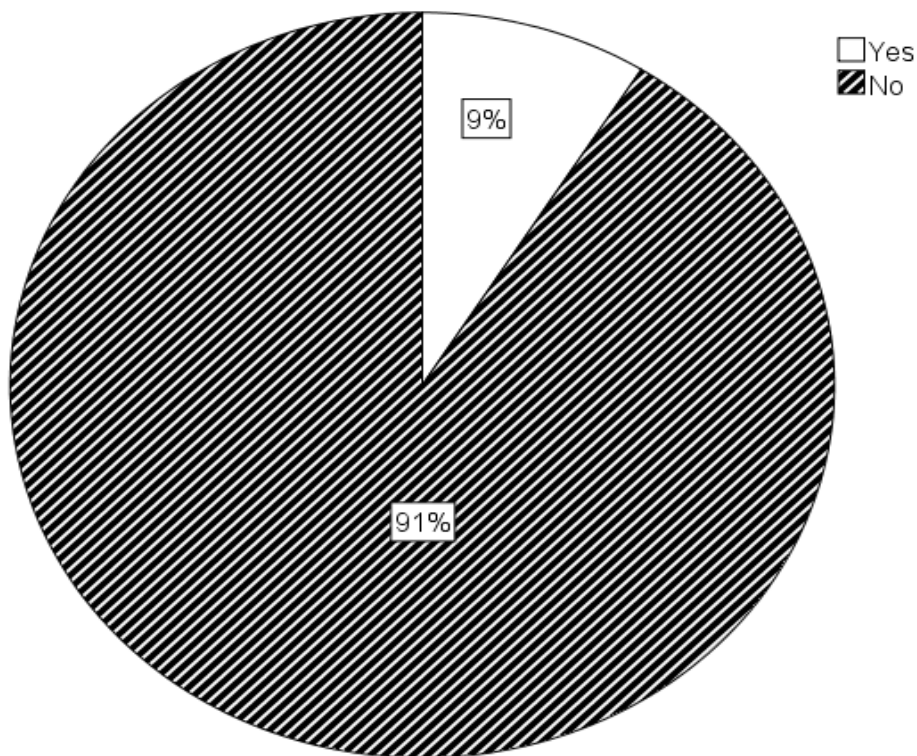


Figure 4.18: History of Unnatural Carnal Knowledge

The study further sought to establish whether there was any association between an adolescent offender’s history of unnatural carnal knowledge and the offense they commit.

Table 4.24: Association between having unnatural carnal knowledge and Type of Offense

	Type of Offense		
	Non-Sexual Offense	Sexual Offense	Total
History of Yes	4	15	19
unnatural carnal knowledge	21.1	78.9	100.0
No	124	70	194
	63.9	36.1	100.0

Total	Number	128	85	213
	%	60.1	39.9	100.0
Chi-Square Tests				
	Value	df	p-value	
Pearson Chi-Square	13.259	1	.000	

The study results in Table 4.24 show that there was a significant association, hence significant relationship, between having unnatural carnal knowledge by an adolescent and the type of offense the adolescents had been incarcerated for (sexual or non-sexual offense). This was indicated by the statistical significance (less than 0.05) of the chi square statistic ($\chi^2 = 13.259$, $p < 0.05$). The cross tabulation statistics indicate that those with a history of unnatural carnal knowledge were more inclined towards sexual offenses than those without a history of unnatural carnal knowledge.

4.6 Incarceration Information of the Study Participants

The study sought to establish incarceration information of the study participants. This was information regarding length of incarceration, reason for incarceration and whether the incarceration was the first or it was a repeat offense. Moreover, if the offender was incarcerated because of a sexual offense, the study sought the age of victims of the sexual offenses and the relationship with the victim. Further, the study enquired on whether the offense was conducted individually or in a gang.

4.6.1 Length of Incarceration

While approximately 1/3rd of the adolescents had been at the borstal centres for duration of between 31 to 40 months, less than 1 % had been detained at the borstal centres for more than 40 months.

Table 4.25: Length of incarceration

Length in months	Frequency	Percent

1 - 10	55	22.4
11 - 20	70	28.6
21 - 30	23	9.4
31 - 40	95	38.8
41 - 96	2	0.8
Total	245	100.0

4.6.2 Reason for Incarceration

Most adolescents at the borstal center were convicted for committing non-sexual offences.

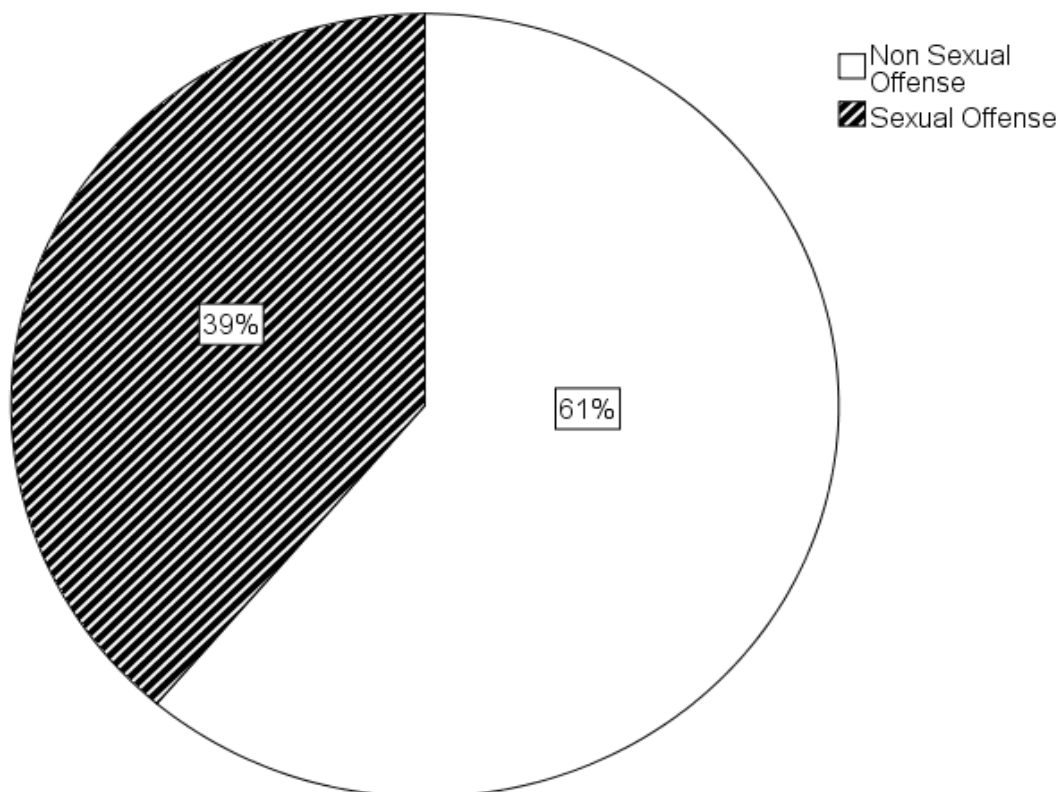


Figure 4.19: Reason for incarceration

The reasons for incarceration were broken down further. The most prevalent non-sexual offenses included being in possession of recreational drugs (mostly bhang), assault and burglary. Other non-sexual offenses included creating disturbance, drug use, handling stolen property, gambling, damage to property, theft, robbery with violence, manslaughter and threatening to kill. The most prevalent sexual offense was defilement. Other sexual offenses included attempt of defilement, incest, rape, gang defilement and gang rape.

4.6.3 Incarceration for Index or Repeat Offense

Slightly above half of the adolescent boys were incarcerated for an index offense while 47% indicated that they had been convicted for a repeat offense.

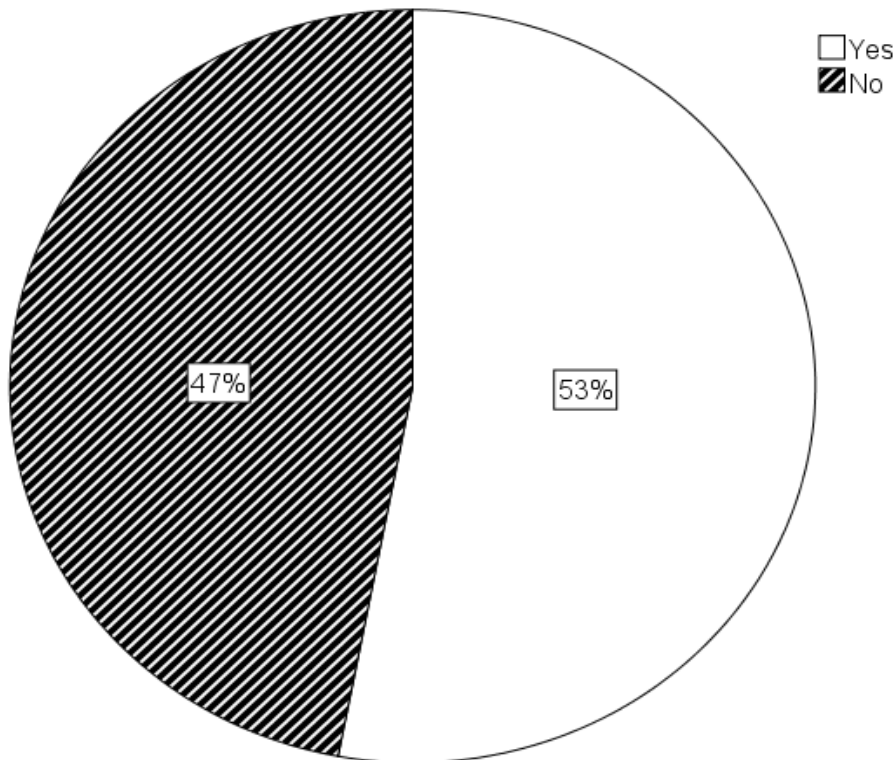


Figure 4.20: Incarceration for Index or Repeat Offense

Repeat offenders were asked to indicate their index offense and how old they were when they committed that offense. The findings on age are presented in Table 4.26.

Table 4.26: Age at Index Offense

Age in years	Frequency	Percent
Below 10	9	10.0
10 - 12	26	28.9
13 - 15	31	34.4
16 – 18	24	26.7
Total	90	100.0

34.4% of the repeat offenders had their first offenses when they were 13 to 15 years old while 10% had their index offenses when they were yet to attain 10 years. Analysis of the provided qualitative data indicated that the most common index offense for the repeat offenders was stealing. Others included loitering, burglary, defilement, gambling, and possession of narcotics.

The study assessed whether there was an association between being an index or repeat offender and type of offense the adolescent offender was incarcerated for. The results are presented in Table 4.27.

Table 4.27: Association between Index or Repeat offense and Type of offense

		Type of Offense		Total
		Non-Sexual Offense	Sexual Offense	
Index or repeat offence	Yes	70	55	125
	%	56.0	44.0	100.0
	No	72	39	111
	%	64.9	35.1%	100.0
Total		142	94	236
		60.2	39.8	100.0
		Value	df	p-value
Pearson Chi-Square		1.928	1	.165

The results in Table 4.27 show no significant association, between being an index or repeat offender and the type of offense committed ($\chi^2 = 1.928$, $p = 0.165$).

4.6.4 Age of Victim of Sexual Offense

The adolescents who had been convicted for sexual offenses were asked to indicate the age of the victim that they were convicted of assaulting sexually. The results are presented in Table 4.27.

Table 4.28: Age of Victim of Sexual Offense

Age in years	Frequency	Percent
Below 10	24	25.3
11 - 15	37	38.9
16 - 20	32	33.7
Above 20	2	2.1
Total	95	100.0

4.6.5 Relationship with Victim

The study further enquired from the adolescents who had been convicted of sexual offenses to indicate the relationship between them and the victim of the sexual assault. The findings, as presented in Table 4.28, show that majority of the sexual assault victims were friends to the adolescent sexual offender.

Table 4.29: Relationship to Victim

Association with victim	Frequency	Percent
Friend	64	67.4
Relative	23	24.2
No relationship	8	8.4
Total	95	100.0

4.7 Results of Logistic Regression Analysis

The study sought to establish the likelihood of committing sexual offenses based on the demographic and social factors of the offenders. The study computed the adjusted and unadjusted odds ratio (OR) at 95% confidence interval. The statistical significance level was set at $p < 0.05$. Presentation of the study results was in form of tables. Results in Table 4.29 present the summary of the logistic regression model.

Table 4.30: Logistic Regression Summary

-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
197.369	.440	.570

a. Estimation terminated at iteration number 5 because parameter estimates changed by less than .001.

The findings in Table 4.29 show that based on the Nagelkerke R Square, the independent variables in the model explained 57% of the variation in the type of offense (sexual or non-sexual) committed by the adolescent offender.

The study assessed the percentage accuracy, sensitivity, and specificity of the model. This was to assess the effectiveness of the model in predicting the type of offense an adolescent offender is likely to commit. The results are presented in Table 4.30.

Table 4.31: Predictive Capacity of the Model

Observed	Predicted		
	Type of Offense		Percentage Correct
	Non-Sexual Offense	Sexual Offense	
Type of Non-Sexual Offense	90	16	84.9

Sexual Offense	34	36	51.4
Overall Percentage			71.6

Study results in Table 4.30 indicate that the binomial logistic regression model had a sensitivity of 51.4% and a specificity of 84.9%. The overall predictive effectiveness of the model was 71.6 percent. This means that the model correctly classified 71.6% of the cases. These indicate that the model was good for predictive sexual and non-sexual offenses amongst the incarcerated adolescents.

The study sought to assess the variables that could predict the type of offense that an adolescent offender was convicted for. To adjust for confounding factors, binary logistic regression analysis was done. The significant factors (confounding factors) at bivariate analysis were put through binary logistic regression by indicating or specifying ‘backward conditional’ method with removal at $p < 0.05$. The results are presented in Table 4.31.

Table 4.32: Variables in the Equation

Variable	B	S.E.	Wald's statistics	df	Sig.	Exp(B)	95% C.I. for EXP(B)	
							Lower	Upper
Low Education Level	-.779	.351	2.862	1	.041	2.619	1.311	5.233
Fighting among Parents	.631	.447	1.993	1	.158	1.880	.783	4.413
Relationship with Parents	.602	.284	2.529	1	.020	2.303	1.017	4.576
Drug Use	-.998	.425	5.514	1	.019	2.712	1.179	6.237
Drug Use by Friends	-.631	.352	2.942	1	.023	2.679	1.274	5.560
Sexually harassed	.897	.340	4.222	1	.027	3.551	1.291	6.586

Friends with sexual violence history	.734	.208	3.133	1	.017	2.648	1.291	5.441
Unnatural Carnal Knowledge	2.789	.856	10.620	1	.001	6.061	2.011	10.329
Constant	4.428	2.159	4.206	1	.040	83.746		

The findings in Table 4.30 show that education level ($p = 0.041$), relationship with parents ($p = 0.020$), recreational drug use ($p = 0.019$), recreational drug use by friends or relatives ($p = 0.023$) and being a victim of sexual harassment ($p = 0.027$) were significant in predicting whether an adolescent would commit a sexual offense or not. Having friends or relatives with a history of sexual violence (0.017) and having unnatural carnal knowledge ($p = 0.001$) were also significant in predicting sexual offenses amongst the adolescents. However, fighting amongst parents or guardians was not significant in predicting sexual offenses amongst the incarcerated adolescents ($p = .158$).

The findings in Table 4.30 also show that being of a lower education level increased the odds of sexual offenses by 2.619 (CI 1.311,5.233). Moreover, having a bad relationship with parents or guardians increased the odds of sexual offenses by 2.303 (CI 1.017,4.576) compared to those with a good relationship with parents or guardians. Besides, the results indicate that adolescent offender who did not use recreational drugs had 2.712 (CI 1.179,6.237) higher odds of engaging in sexual offenses than those who engaged in recreational drugs. Additionally, the odds of engaging in sexual offenses were 2.679 (CI 1.274 ,5.560) higher for those incarcerated adolescents who did not have friends or relatives who used recreational drugs than those who had friends or relatives who engaged in recreational drugs. Besides, the odd of engaging in sexual offenses was 3.551 (CI 1.291 ,6.586) higher in those adolescents that had been victims of sexually harassment compared to those who had never been victims of sexual harassment. The study findings also indicate that the odds of committing sexual offenses was 2.648 (CI 1.291,5.441) greater among those who had friends or relatives with a history of sexual violence than for those who did not have a friend or relative with a history of sexual violence. Lastly, the study established that the odds of committing sexual offenses was 6.061 (CI 2.011,10.329) greater amongst the adolescents with a history of unnatural carnal knowledge than those who had not.

4.8 Summary of Analysis and Results

Table 4.32 provides a summary of the results. This comprises of the key variables studied, the tests conducted and the results.

Table 4.33: Summary of Analysis and Results

Variable	Chi square	Levels of Significance (p-value)	OR	Levels of Significance (p-value)
Age	6.477	P > 0.05	-	-
Religion	2.255	P > 0.05	-	-
Family structure	3.380	P > 0.05	-	-
Education level	11.572	P < 0.05	2.619	P < 0.05
History of strife or fighting in home	9.438	P < 0.05	1.880	P > 0.05

Relationship with parents or guardians	14.065	P < 0.05	2.303	P < 0.05
History of Running Away from Home	2.146	P > 0.05	-	-
History of Abuse of Alcohol by Parents / Guardians	.022	P > 0.05	-	-
Use of Recreational Drugs by Parents / Guardians	1.790	P > 0.05	-	-
History of Alcohol Use	2.079	P > 0.05		
Having Friends or Relatives who Abused alcohol	1.267	P > 0.05	-	-
Use of Recreational Drugs	12.206	P < 0.05	2.712	P < 0.05
Having Friends or Relatives who Use Recreational Drugs	14.015	P < 0.05	2.679	P < 0.05
Sexual Experience	2.311	P > 0.05		
History of Sexual Harassment	10.491	P < 0.05	3.551	P < 0.05
Friend or Relative with History of Sexual Violence	9.310	P < 0.05	2.648	P < 0.05

History of having unnatural carnal knowledge	13.259	P < 0.05	6.061	P < 0.05
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CHAPTER FIVE

DISCUSSION

5.1: Introduction

This section takes a close look at the results of the study and their implications. It also compares the findings with those of other studies that have been done globally.

5.2: Discussion

The study established that there was no significance association between age of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). These results suggest that age of the offender is not related with the type of offense that they are incarcerated for. This contradicts the study by Ford and Linney (1995) which established that adolescent sexual offence perpetrators were older than adolescent non-sexual offenders at the time of their arrest.

On family structure of the incarcerated adolescents, the study determined that there was no significance association between family structure of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). These results imply no relationship between family structure of an adolescent offender and the type of offense that they are incarcerated for (sexual or non-sexual offense). This contradicts the study by Arslan et al. (2016) which found that male children of broken and scattered families and particularly those without father's supervision were prone to committing sexual crimes.

The study determined that, there was a significant association between education level of the incarcerated adolescents and the type of offense they had been incarcerated for ($p = 0.003$). These results show that there was a significant relationship between education level of the adolescent offenders and the type of offense that they are incarcerated for (sexual or non-sexual offense). The offenders with lower education levels were inclined towards sexual offenses than offenders with higher levels of education. These findings relate to the results by Ozen et al. (2005) who determined that most juveniles commit sexual offenses due to low family education levels.

History of strife or fighting at homes of the incarcerated adolescents had a significant association with the type of offense they had been incarcerated for (sexual or not sexual offense). These results imply that there was a significant relationship between history of strife or fighting amongst parents / guardians and the type of offense that they are incarcerated for (sexual or non-sexual offense). The offenders who experienced strife or fighting amongst their parents / guardians were more likely to engage in sexual offenses than offenders who did not experience strife or fighting amongst their parents / guardians. These findings support those of

studies arguing that adolescent sexual offenders more commonly have disturbed family origins (Barbaree, Marshall and McCommick, 1998, Bagley and ShewchukDann, 1991).

Relationship with parent or guardian of the incarcerated adolescents had a significant association with the type of offense they had been incarcerated for (sexual or not sexual offense). These results imply that the relationship that an adolescent offender has with their parent / guardian has a significant relationship with the type of offense that they are incarcerated for (sexual or non-sexual offense). The findings indicate that most of those with a bad relationship with their parents / guardians are more inclined towards sexual offenses than those with a good relationship with their parents / guardians. This supports the findings by Wamoyi, Wight, and Remes (2015) that characteristics of families, specifically, parent-child relationships have a significant influence on adolescents' lives and sexual decision-making. This also supports the study by Akambi et al (2003) that adolescents with sexual behaviour challenges have a history of exposure to family dysfunction that may have impacted them negatively leading to development of sexually inappropriate behaviour.

History of running away from home had no significant association between running away from home by the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or not sexual offense). These results imply that history of running away from home does not have a significant relationship with the type of offense that they are incarcerated for (sexual or non-sexual offense). These findings, however, contradict the findings by Marshall and Marshall (2000) that the origin of adolescent sexual offence is a family where children have experienced neglect, abuse, and rejection. The findings also contradict the findings by Ozen et al. (2005) who determined that most juveniles who commit sexual offenses have a history of running away from home.

History of abuse of alcohol by parents / guardians of the incarcerated adolescents had no significant association with the type of offense they had been incarcerated for ($p = 0.833$). These results imply that abuse of alcohol by parent / guardian of an adolescent does not have a significant relationship with the type of offense that the adolescents are incarcerated for (sexual or non-sexual offense). This contradicts the findings by Virtala and Suikkanen (2010) who

found that substance abuse at home creates risks for the child as it brings about attachment disturbances in that the child fails to form a secure relationship with the guardian or parent which can lead to the child becoming a sexual offender.

The study determined that use of recreational drugs by parents / guardians of the incarcerated adolescents had no significant association with the type of offense they had been incarcerated for (sexual or not sexual offense). This was indicated by the non-significance (greater than 0.05) of the chi square test ($\chi^2 = 1.790$, $p = 0.181$). These results imply that there was no significant relationship between use of recreational drugs by parents / guardians and the type of offense that they are incarcerated for (sexual or non-sexual offense). This disagrees with the findings that growing up in an insecure and unstable environment of substance abuse places the child's development in danger, leading to traumatizing experiences, behavioural and emotional disturbances, as well as psychosomatic symptoms (Virtala & Suikkanen, 2010).

The study established no significant association between use of alcohol by the incarcerated adolescents and the type of offense the adolescents were incarcerated for ($p = 0.149$). These results suggest that there was no significant relationship between alcohol use and the type of offense that the adolescents are incarcerated for (sexual or non-sexual offense). This contradicts the findings by Zawacki et al. (2003) that a history of substance abuse may influence adolescents to commit sexual offense acts. The study had indicated that 50% of all sexual assaults are due to alcohol, whereas this study found no association. It is suggested that the perpetrators use intoxication as an excuse to commit the many unacceptable social behaviours such as sexual assault (Zawacki et al., 2003).

Having friends or relatives who abused alcohol had no significant association with the type of offense the adolescents were incarcerated for (sexual or not sexual offense). The implication of these results is that having a relative or friend who abused alcohol was not significantly related with the type of offense that the adolescents are incarcerated for (sexual or non-sexual offense). These findings contradict the findings by Naidoo & Sewpaul (2014) who established that having role models or friends that abused alcohol was a key factor explaining future sexual offense orientation of the adolescent.

On use of recreational drugs by adolescents, the study results indicate a significant association between use of recreational drugs and the type of offense the adolescents were incarcerated for. The implication of these results is that use of recreational drugs was associated with type of offense committed by the adolescents. Specifically, recreational drug users were more associated with non-sexual offenses than non-recreational drug users. These findings agree with findings by Milloy (1994) that sex offenders were less involved in drug use compared to non-sex offenders. However, the findings contradict the findings by Miner and Crimmins (1995) that drug use amongst adolescent sexual offenders and non-sexual offenders was similar.

Having friends or relatives who use recreational drugs had a significant association with the type of offense the adolescents had been incarcerated for. These results imply that there was significant relationship between having a friend or relative who used recreational drug the type of offense that the adolescents had committed. Specifically, the cross-tabulation statistics indicate that those with no friends or relatives who used recreational drugs were more inclined towards sexual offenses than those who had friends and relatives that used recreational drugs.

Being a victim of sexual harassment had a significant association with the type of offense they adolescents had been incarcerated for (sexual or not sexual offense). These results imply that when an adolescent is a victim of sexual harassment, they are more likely to become sexual offenders compared to those adolescents who are not victims of sexual harassment. These findings concur with the findings that adolescent non-sex offenders have been found to have lower rates of a history of sexual abuse (victimization) by Milloy (1994) and Fagan and Wexler (1989) compared to adolescent sexual offenders. Moreover, the findings support the findings by Becker and Hunter (1997) who found that 40 to 80 percent of adolescent sexual offenders had a history of sexual abuse.

Having a friend or relative with history of sexual violence had a significant association with the type of offense the adolescents were incarcerated for ($p = 0.009$). The implication of these results is that the adolescents who had a friend or relative with a history of sexual violence

were more inclined towards sexual offences compared to those adolescents who had no friends or relatives with a history of sexual violence. This supports the findings by DeLisi et al. (2017) who determined that being brought up in an environment where sexual abuse is common can make a child become a sexual offender in later years.

Lastly, the study established that having a history of unnatural carnal knowledge had a significant association with the type of offense the adolescents had been incarcerated for (sexual or not sexual offense). These results imply that there was significant relationship between having unnatural carnal knowledge and the type of offense that the adolescents had committed. Specifically, the cross-tabulation statistics indicate that those with a history of unnatural carnal knowledge were more inclined towards sexual offenses than those without a history of unnatural carnal knowledge. These findings relate with the findings by Rich (2009) who indicated that children who have unnatural sexual experiences or actions such as having sex with animals, have a high likelihood of committing sexual offenses later in their lives.

CHAPTER SIX

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

This study compared the social and demographic factors of adolescents sentenced for committing sexual offences to those of non-sexual offenders at borstal centres in Kenya. The summary of findings, conclusions and recommendations made in the study are provided in this section.

6.2 Summary of Findings

The study's first objective was to assess the demographic characteristics of adolescents aged 15-18 years currently detained at Borstal centres in Kenya. Regarding age, 42% of the research participants were 17 years old, 24% were 18 years old, 22% were 16 years of age whereas 11% were 15 years of age. These study results show that most of the adolescent offenders incarcerated at the two borstal centres are nearing their adulthood since most are 17 and 18 years of age. The findings on religious affiliation show that most of the study participants (82.9%) were affiliated to the Christianity religion. Those affiliated to the Muslim faith were 15.1% while only 0.4% was of the Hindu faith. On the distribution by counties, all counties except five (Tana River, Turkana, Samburu, Isiolo and Elgeyo Marakwet) had adolescents incarcerated in the two borstal centres. Counties with the highest number included Meru (6.5%), Taita Taveta (6.1%), Machakos (5.7%) and Nairobi (4.9%). Other counties with considerable numbers included Kirinyaga (4.5%), Kiambu (4.5%), Murang'a (4.5%), Nyeri (4.1%), Kilifi (4.1%), Bungoma (4.1%) and Mombasa (4.1%). Regarding the family structure of the adolescents in the borstal centres, 48% were from families with both parents, 41% were from single parent families while 11% were orphans.

The second objective was to assess the social characteristics of adolescents aged 15-18 years currently detained at Borstal centres in Kenya. On education, 69% had primary level of education, 27% had secondary level of education while 4% indicated to have attained other levels of education. Regarding occupation of their parents / guardians, 32% of the parents / guardians of the adolescent offenders were casual labourers, 26% were farmers, 24% were

traders or business-people while 13% were professionals. Those who indicated 'others' were 5%. On strife or fighting amongst parents or guardians, 71% indicated that they had not experienced strife or fighting in their homes while 29% indicated to have experienced fighting and strife amongst their parents / guardians. On relationship that the juvenile offenders had with their parents and guardians, 59% of the adolescent offenders had a good relationship with their parents or guardians, 31% had an average relationship while 10% had a bad relationship with their parents

or guardians. On their history of running away from home, 53% had at one time run away from home while 47% had never run away from home. Regarding abuse of alcohol by parents or guardians, 58% of the incarcerated adolescents came from families where the parents or guardians did not abuse alcohol. Those that came from families where parents or guardians abused alcohol were 42%. On use of recreational drugs by parents or guardians, 65% of the research participants came from families where their parents or guardians did not use recreational drugs while 35% came from families where parents or guardians used recreational drugs.

Regarding their alcohol use, 54% of the adolescent offenders had history of alcohol use while 46% did not have a history of alcohol use. Moreover, 66% of the adolescent offenders had friends or relatives who abused alcohol while 34% did not relatives or friends who abused alcohol. On their use of recreational drugs, 75% of the participants had used recreational drugs while only 25% had not used recreational drugs. Bhang was the mostly used recreational drug which was used by 63.6% of those who had indicated to have engaged in recreational drug use. Besides, 81% of the study participants had friends or relatives who used recreational drugs while 19% did not have any friends or relatives who used recreational drugs.

Regarding sexual history, 75% of the study participants had previously engaged in sexual encounter while 25% had never engaged in any sexual activity. Additionally, 23% of the research participants who had engaged in sex had their first sexual encounter at the age of 16 years. Those who had their first sexual encounter at the age of 15 years were 22.4%. The results also show that 4.4% had their first sexual encounter when they were 10 years old. On sexual harassment, 84% of the study participants had never experienced sexual harassment while 16%

indicated to have experienced sexual harassment. Moreover, 71% had friends or relatives with no history of sexual violence. However, 29% indicated that they had a friend or with a history of sexual violence. On history of unnatural carnal knowledge, 91% had no history of unnatural carnal knowledge whereas 9% had a history of unnatural carnal knowledge.

The study's third objective was to compare the demographic characteristics of adolescents aged 15-18 years currently detained at Borstal centres in Kenya for committing sexual offences with those detained for committing non-sexual offences. On age, the study established no significant association between age of the incarcerated adolescents and the type of offense they had been incarcerated for. These results suggest that age of the offender is not related with the type of offense that they are incarcerated for. The study also found no significant association between religion of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or non-sexual offense). Besides, the study found no significant association between family structure of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or non-sexual offense).

The last study objective was to compare the social characteristics of adolescents aged 15-18 years currently detained at Borstal centres in Kenya for committing sexual offences with those detained for committing non-sexual offences. There was a significant association between education level of the incarcerated adolescents and the type of offense they had been incarcerated for (sexual or non-sexual offense). The study results also showed that the offenders who experienced strife or fighting amongst their parents / guardians were more likely to engage in sexual offenses than offenders who did not experience strife or fighting amongst their parents or guardians. The study results indicate that there was a significant association between relationship with parent or guardian by the incarcerated adolescents and the type of offense, sexual or not sexual offense.

The findings also indicated that there was no significant association between running away from home by the incarcerated adolescents and the type of offense, sexual or non-sexual offense. Besides, the study established no significant association between abuse of alcohol by parents / guardian of the incarcerated adolescents and the type of offense they had been

incarcerated for, sexual or non-sexual offense. The study also established no significant association between use of recreational drugs by parents or guardians of the incarcerated adolescents and the type of offense). Besides, there was no significant association between use of alcohol by the incarcerated adolescents and their sexual or non-sexual offender status. Moreover, there was no significant association between having friends or relatives who abused alcohol and being a sexual or non-sexual offender. However, there was a significant association between use of recreational drugs and being a sexual or non-sexual offender. Specifically, recreational drug users were more associated with non-sexual offenses than non-recreational drug users. Similarly, there was a significant association between having a friend or relative who used recreational drugs and being a non-sexual offender.

There was no significant association between previous sexual encounter and the type of offense the adolescents were incarcerated for, sexual or not sexual offense. However, there was a significant association between being a victim of sexual harassment and the type of offense the adolescents had been incarcerated for, sexual or not sexual offense. These results imply that when an adolescent is a victim of sexual harassment, they are more likely to become sexual offenders compared to those adolescents who are not victims of sexual harassment. Besides, there was a significant association between having a family or relative with a history of sexual violence and being a sexual or non-sexual offender. Besides, there was a significant association between having unnatural carnal knowledge by an adolescent and being sexual or non-sexual offender.

The findings from binary logistic regression indicated that being of a lower education level increased the odds of sexual offenses by 2.619 (CI 1.311,5.233). Moreover, having a bad relationship with parents or guardians increased the odds of sexual offenses by 2.303 (CI 1.017 ,4.576) compared to those with a good relationship with parents or guardians. Besides, the results indicate that adolescent offenders who did not use recreational drugs had 2.712 (CI 1.179,6.237) higher odds of engaging in sexual offenses than those who engaged in recreational drugs. Additionally, the odds of engaging in sexual offenses were 2.679(CI 1.274 ,5.560) higher for those incarcerated adolescents who did not have friends or relatives who used recreational drugs than those who had friends or relatives who engaged in recreational drugs. Besides, the odd of engaging in sexual offenses was 3.551(CI 1.291,6.586) higher in those

adolescents that had been victims of sexually harassment compared to those who had never been victims of sexual harassment. The study findings also indicate that the odds of committing sexual offenses was 2.648(CI 1.291,5.441) greater among those who had friends or relatives with a history of sexual violence than for those who did not have a friend or relative with a history of sexual violence. Lastly, the study established that the odds of committing a sexual offense was 6.061 (CI 2.011,10.329) greater amongst the adolescents with a history of unnatural carnal knowledge than those who had not.

6.3 Conclusions

The study makes the following conclusions.

- i) 42 out of the 47 counties in Kenya had adolescents incarcerated in the two borstal centres. This was a good representation of adolescents in the country. 66% of the adolescents incarcerated at the two borstal centres in Kenya are 17 and 18 years old, nearing their adulthood.
- ii) Socio-demographic characteristics of the adolescent boys were not necessarily peculiar for either the non-sexual offenders or the sexual offenders. However, some characteristics had a significant association hence relationship with a particular offence type (sexual offence or non-sexual offence).
- iii) Characteristics with a significant association to sexual offence commission included: the education level of the adolescent, a poor relationship between the adolescent and his parents/guardians, being a sexual abuse victim, having friends or relatives with a history of sexual violence and having a history of unnatural carnal knowledge.
Characteristics with a significant association to non-sexual offence commission included: use of recreational drugs by the adolescent and association with friends of relatives who used recreational drugs.
- iv) 58% of the socio-demographic characteristics did not have a significant association hence no relationship with the type of offence the adolescent boys committed. These included: The age of the adolescent, religion, family structure (single parent/ orphan or both parents headed family), A history of running away from home, Abuse of alcohol by the parents/ guardians of the adolescents, use of recreational drugs by the parents/guardians, Use of alcohol by the adolescent, association of the adolescent with friends or relatives who used alcohol, previous history of having a

sexual encounter before commission of crime, and whether the adolescent was an index or repeat offender.

- v) Parental and family factors did not carry as much weight in terms of association with the type of offence the adolescents committed as individual factors.

6.4 Recommendations

The study makes the following recommendations.

- i) Good virtues and values should be inculcated in Adolescents early, preferably by the time they are 14 years of age. This will ensure that by the time they are in their late adolescent years (a period noted in the study for high commission of crime by adolescents), they are able to make better choices in terms of behaviour and avoid engaging in criminal activities.
- ii) The government and parents should ensure that all adolescents complete their primary and secondary education as those who have a higher level of education are less likely to commit serious offences like sexual offences. The free primary and secondary education system should be utilized to ensure that all adolescents are kept in schools during this critical development stage.
- iii) Adolescents should be guided and counselled on how to choose the friends and even relatives (apart from close family members) they associate with. This is because association with friends and relatives with anti-social behaviour can lead to the adolescent adapting similar vices. This is also imperative seeing that for adolescents who committed sexual offences, majority of the offender's victims were their friends. Adolescents should be educated on how to identify and get away from sexual violence offenders, be they friends, relatives, or strangers.
- iv) The government should ensure that well established and equipped treatment, counselling and follow up centres for Victims of sexual violence are in all counties of the country. This will ensure better management of the sexual violence victims and prevent them from becoming sexual violence offenders.

- v) More research should be done to establish why recreational drug use and not alcohol use is associated with the type of offence committed by the adolescent boys.
- vi) Further research should be undertaken to determine the specific types of sexual violence committed by adolescents in the country.
- vii) Further research should be undertaken to determine if there are adolescents in the borstal centres who may be double offenders.

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APPENDICES

APPENDIX I: EXPLANATION FOR SUPERINTENDENTS OF BORSTAL CENTERS

My name is Lutawo L. Ouma. I am pursuing a Master of Public Health Degree program at the University of Nairobi.

What is the purpose of this study?

One of the university's current interests is to learn more about the background of adolescents in Kenya's rehabilitation centres. This is with a view of helping to prevent social and health problems among these adolescents, especially those related to sexual offences. My research with focus on Shimo la Tewa and Shikusa Borstal Centres.

What are we requesting from you?

We are undertaking a research that aims to compare the social and demographic factors of adolescents sentenced for committing sexual offences with those of non-sexual offenders at Borstal centres in Kenya.

We request your help in learning and understanding the background of the adolescents in your institution by allowing us to interview the adolescents detained at your institution (See the interview questions attached).

Study benefits

There are no direct benefits to you. However, the study results will enable us to create interventions that ensure adolescents, including yourself, do not commit offences, including repeat offences in your case.

Risks

The interview questions asked to the adolescents may affect them psychologically. Some of them may feel guilty for their past actions or embarrassed to discuss them. We will try to

mitigate this by doing counselling before and after the interview. Adolescents identified to need further follow up and counselling will also be linked to neutral counselling services (free of charge) nearest to the borstal centres.

Moreover, time will be taken to answer or respond to the questions (approximately 20-30 minutes).

Confidentiality

Only the principal investigator will access the original copies of the questionnaires, which will be safely stored in a cabinet (which will be locked). These will not be accessed by other individuals.

Under no circumstances will data from this survey be divulged to the detention centres nor used against the detained adolescents. The data will solely be used for research purposes.

Voluntary participation

Participation of the adolescents in this study is purely voluntary. Any adolescent will have the right to withdraw any adolescent from the study at any time without any problem. Denial to participate has no adverse effect for any adolescent.

Please do not hesitate to ask questions or seek clarification regarding the information we have shared with you.

If you are willing that the adolescents detained in the borstal centre under your guardianship participate in this study, we request that you sign this document to indicate that you have understood and agreed for the adolescents under your care to participate. We have attached all relevant permits from the relevant authorities for your perusal.

Study Procedure

Having provided you with permits from relevant authorities, you are requested to provide access to the information regarding their offences. You are also requested to provide access to the juveniles in the facility at a date and time of your choice. Sampling of the study group will be done 1 day prior to the data collection process. The investigator will also request two rooms to enable comfortable, free, and confidential conversation with the adolescents. Information received from the adolescent will then be used by the investigator to complete the questionnaire (see sample questionnaire attached). Only those adolescents who assent to be included in the study will be interviewed. During the interviews, no employee from the institution should be present. This is to ensure that the juveniles do not feel intimidated or fearful. Each session with an adolescent will take an estimated duration of 30 minutes. The investigator will be briefing you on the progress every day. At the end of each day, you will be involved in planning for the next investigation day. This will continue until the lapse of the study period.

Authority to conduct the study

I _____ (Name), the manager of
_____ Borstal Centre,

Being of age(mature) _____

I have authorised /allowed these adolescents) to participate in this study.

I fully comprehend the aims of this study, that has been explained to me in _____ a language that I understand most, and have been granted permission to ask questions; which have been satisfactorily answered. I also know that any study participant is free to withdraw/ be excused from this study at any time without any consequences or conditions.

Name of Manager: _____

Signature of Manager: _____ Date _____

Name of Researcher _____

Signature Researcher _____ Date _____

In case of any clarifications or questions related to participating in the study, contact the principal investigator **Lutawo L. Ouma (+254722448948)** or the Secretary of the Kenyatta National Hospital-University of Nairobi Ethics Review Committee on E-mail: uonknh_erc@uonbi.ac.ke or Tel. (254-020) 2726300-9 Extension 44355.

APPENDIX II: ASSENT FORM FOR ADOLESCENTS AT THE BORSTAL CENTRE

My name is Lutawo L. Ouma. I am pursuing a Master of Public Health Degree program at the University of Nairobi.

What is the purpose of this study?

One of the desire of universities is to understand more about the background of adolescents in Kenya's rehabilitation centres. This is with a view of helping to prevent social and health problems among these adolescents, especially those related to sexual offences. My research with focus on Shimo la Tewa and Shikusa Borstal Centres.

What is our requesting to you?

We are requesting you to help us learn about your background by answering a short questionnaire.

Study Benefits

There are no direct benefits to you. However, your participation is important as it can lead to changes that can benefit other kids or your rehabilitation.

Risks

The interview questions asked may affect you psychologically. You may feel guilty for past actions or embarrassed to discuss them. We will try to mitigate this by doing counselling before and after the interview. Should you need further follow up and counselling we will link you to counselling services (free of charge) nearest to the borstal centres.

Moreover, time will be spent responding to the questions (approximately 20-30 minutes).

Confidentiality

Only the principal investigator will access the hard copies of the questionnaires, which will be safely stored in a cabinet (which will be locked). These will not be accessed by other individuals including administrators and teachers in this institution.

Under no circumstances will data from this survey be divulged to the detention centres nor used against the detained adolescents. The data will solely be used for research purposes. The institution will not know whether you have participated or not.

Voluntary participation

The participation in the study is purely voluntary. Anyone is free to withdraw at any time of the study without any consequences or problems. Please do not hesitate to ask questions or seek clarification regarding the information we have shared with you.

Study Procedure

Should you be willing to be a participant in this study, you will be requested to sign this document to indicate that you have understood the explanations well and that you have voluntarily agreed to participate. You will then be provided with a questionnaire that will take you 20 – 30 minutes to fill. After filling the questionnaire, you will be required to take it to the next room where you will mix it with others such that no one can tell which questionnaire you filled. You will thereafter be free to leave the room at any time you want.

Assent Agreement

I _____ (Name of Child) _____ years old

have agreed to participate in this study.

I well understand the aims of the study, which has been fully explained to me in English, a language that I understand best/most, and have been given the chance to ask questions

pertaining to the study, which have been answered. I am also aware that I have the freedom to withdraw from the study at any time without any consequences or conditions.

In case of any questions related to participating in the study, contact the principal investigator **Lutawo L. Ouma (+254722448948)** or the Secretary of the Kenyatta National Hospital-University of Nairobi Ethics Review Committee on E-mail: uonknh_erc@uonbi.ac.ke or Tel. (254-020) 2726300-9 Ext 44355,

APPENDIX III: FOMU YA KIBALI KWA VIJANA WA KITUO CHA BORSTAL

Jina langu ni Lutawo L. Ouma. Nafuatilia Shahada ya Afya ya Umma katika Chuo Kikuu cha Nairobi.

Madhumuni ya utafiti huu ni nini?

Moja ya hamu ya vyuo vikuu ni kuelewa zaidi juu ya asili ya vijana katika vituo vya ukarabati vya Kenya. Hii ni kwa nia ya kusaidia kuzuia shida za kijamii na kiafya kati ya vijana hawa, haswa zile zinazohusiana na makosa ya kijinsia. Utafiti wangu utazingatia Shimo la Tewa na vituo vya Shikusa Borstal.

Ombi letu kwako ni?

Tunakuomba utusaidie kujifunza juu ya msingi wako kwa kujibu maswali katika fomu utakayopewa ukikubali.

Faida za utafiti huu

Hakuna faida za moja kwa moja kwako. Walakini, kushiriki kwako ni muhimu kwani inaweza kusababisha mabadiliko ambayo yanaweza kufaidi watoto wengine au ukarabati wako.

Madhara

Maswali ya mahojiano yatakayoulizwa yanaweza kukuathiri kisaikolojia. Unaweza kuhisi una hatia kwa matendo ya zamani au unaona aibu kujadili. Tutajaribu kupunguza hii kwa kufanya ushauri nasaha kabla na baada ya mahojiano. Ikiwa utahitaji kufuata zaidi na ushauri nasaha tutakuunganisha na huduma za ushauri (bila malipo) karibu na kituo ulichoko cha Borstal. Kwa kuongeza, wakati utatumika kujibu maswali (takribani dakika 20-30).

Usiri

Ni mpelelezi mkuu tu ndiye atakayepata nakala za majibu utakayopeana, ambazo zitahifadhiwa salama kwenye droo (ambalo litafungwa). Hizi hazitapatikana na watu wengine wakiwemo wasimamizi na waalimu katika taasisi hii.

Kwa hali yoyote hakuna majibu yoyote kutoka kwa utafiti huu yatajulishwa katika kituo hiki au kutumiwa dhidi ya vijana watakojijumlisha kwa utafiti huu. Majibu hayo yatumika tu kwa madhumuni ya utafiti. Taasisi haitajua ikiwa umeshiriki au la.

Kushiriki kwa hiari

Ushiriki katika utafiti huu ni kwa hiari yako pekee. Kijana yeyote ako huru kutoshiriki katika utafiti hu una kujiondoa wakati wowote bila athari yoyote au shida. Tafadhali usisite kuuliza maswali au kutafuta ufafanuzi juu ya habari umeelezewa.

Utaratibu wa Utafiti

Ikiwa ungetaka kuwa mshiriki katika utafiti huu, unaombwa kusaini hati hii kuashiria kuwa umeelewa vizuri maelezo na kwamba umekubali kwa hiari kushiriki. Kisha utapewa dodoso ambalo litakuchukua dakika 20 - 30 kujaza. Baada ya kujaza dodoso, utalazimika kuipeleka kwenye chumba kinachofuata ambapo utachichanganya na wengine ili kuwa hakuna mtu yeyoyote anayeweza kusema ni karatasi gani ya maswali uliyojaza. Baadaye utakuwa huru kutoka kwenye chumba wakati wowote unavyotaka.

Mkataba wa makubaliano

Mimi _____ (Jina la mshiriki), wa umri wa miaka _____ nimekubali kushiriki katika utafiti huu.

Ninaelewa vyema malengo ya utafiti huu, ambayo nimeelezwa kikamilifu kwa lugha ya kiswahili, lugha ambayo naelewa vizuri zaidi, na nimepewa nafasi ya kuuliza maswali

yanayohusiana na utafiti, ambayo umejibiwa. Ninajua pia kuwa nina uhuru wa kutoshiriki au kujiondoa kwenye utafiti huu wakati wowote bila athari yoyote au hali yoyote.

Kama uko na maswali yoyote yanayohusiana na kushiriki katika utafiti, wasiliana na mpelelezi mkuu Lutawo L. Ouma (+254722448948) au Katibu wa Kamati ya Kitaifa ya Maadili ya Hospitali ya Kitaifa ya Chuo Kikuu cha Nairobi kwa barua-pepe: uonknh_erc@uonbi.ac.ke or Simy. (254-020) 2726300-9 Ext 44355,

APPENDIX IV: QUESTIONNAIRE

Institution:

Offence Type: Sexual Offence

Non-Sexual Offence

Form Identification Code:

SECTION 1: SOCIAL AND DEMOGRAPHIC CHARACTERISTICS			
NO	Question	Response	Code
1	SEX (SEX)	M=1 F=2	[]
2	AGE (AGE)		[]
3	Religion (RELIG)	1. Muslim 2. Hindu 3. Christian 4. Other (specify)	[]
4	County of Residence		
5	Level of Education(EDULEV)	1. Primary 2. Secondary 3. Other (specify) 4. None	[]
6	Occupation of Parent's/Guardians (OCCUP)	1. Professional eg Teacher/Lawyer/Nurse 2. Casual Labourer 3. Trader/Businessman	[]

		4. Farmer 6. Other (specify)	
7	Structure of the Family(FAM)	1. Both Parents 2. Single Parents 3. Orphan	[]
8	Was there a history of strife or fighting amongst your parents or guardians?		
9	How would you describe your relationship with your parents or guardians	1. Good 2. Average 3. Bad	
10	Have you ever run away from home?	1. Yes 2. No	
11	Did your parents or guardians abuse alcohol?	1. Yes 2. No	
12	Did your parents or guardians use recreational drugs?		
13a	Sexual Activity (SEXACT) Had you ever engaged in sexual intercourse?	1. Yes 2. No	[]

13b	If yes, how old were you at your first sexual encounter?	Number	[]
14	Had you ever been a victim of sexual harassment?	1. Yes 2. No	[]
15a	Did you have friends or relatives with a history of committing sexual violence?	1. Yes 2. No	[]
15b	If Yes, Was it a friend or a relative?	1.Friend 2.Relative	[]
16	History of having unnatural carnal knowledge (for example with animals)?	1.Yes 2. No	15
17a	Had you ever used alcohol?	1. Yes 2. No	[]
17b	If yes, when did you first use alcohol (Age)?	Number	[]
17c	Did you have friends or relatives (excluding parents)who abused alcohol?	1. Yes 2. No	[]
17d	If Yes, were they friends or relatives?	1.Friend 2.Relative	[]

18a	Had you ever use recreational drugs?	1. Yes 2. No	[]
18b	If yes, which recreational drug(s) did you use?	1.Bhang 2.Khat(Miraa) 3.Heroine 4.Cocaine 5.Other(s)	[]
18c	If yes, when you first use recreational drug(s) (Age)?		[]
18d	Did you have friends or relatives (excluding parents) who took recreational drugs?	1. Yes 2. No	[]
18e	If Yes, were they friends or relatives?	1.Friend 2.Relative	[]
SECTION 2: INCARCERATION INFORMATION			
12	Length of Incarceration (Months)		
13	Reason for Incarceration (Check records)		
14b	Was this an Index or repeat offence	1.Yes 2.No	
14c	If Yes, what was your index offence and how		

	old were you when you committed it?		
15	If you were sentenced for a sexual offence, what was the Age of Victim(s) you were convicted of sexually assaulting(at time of assault)	Number	
16	Relation to Victims(s) he was convicted of assaulting (Relative / Friend)		
17	Was the offence committed individually or in a gang?	1.Individually 2.Gang	[]

APPENDIX V: MASWALI

Kituo:

Aina ya Kukosa: Makosa ya Kijinsia [] Makosa Yasiyo ya Kijinsia

Nambari ya Kitambulisho:

SEHEMU YA 1: VIWANGO VYA JAMII NA DEMOGRAFIA			
NO	Swali	Jibu	Msimbo
1	JINSIA (SEX)	Mvulana =1 Msichana = 2	[]
2	Umri (AGE)		[]
3	DINI (RELIG)	1. Muislamu 2. Hindu 3. Mkristo 4. Ingingine (Taja)	[]
4	Kaunti Unayoishi		
5	Kiwango cha Elimu (EDULEV)	1. Msingi 2. Secondari 3. Ingingine (Taja) 4. Hakuna	[]
6	Kazi ya mzazi/mlezi (OCCUP)	1. Mtaalamu kama Mwalimu/Wakili/Muuguzi 2. Mtoaji wa kawaida 3. Mfanyi biashara	[]

		4. Mkulima 6. Injine (Taja)	
7	Muundo wa Familia (FAM)	1. Wazazi wawili 2. Mzazi mmoja 3. Yatima	[]
8	Je! Kulikuwa na historia ya ugomvi au mapigano kati ya wazazi wako au walezi wako?	Ndio [] Hapana []	
9	Je! Ungeelezeaje uhusiano wako na wazazi wako au walezi wako?	1. Mzuri 2. Wastani 3. Mbaya	
10	Je! Umewahi kukimbia nyumbani?	1. Ndio 2. Hapana	
11	Je! Wazazi wako au walezi wako walitumia pombe vibaya?	1. Ndio 2. Hapana	
12	Je! Wazazi wako au walezi wako walitumia dawa za burudani?	1. Ndio 2. Hapana	
13a	Shughuli ya Ngono (SEXACT) Je! Umewahi kushiriki tendo la ngono?	1. Ndio 2. Hapana	[]

13b	Ikiwa ndio, ulikuwa na umri wa miaka ngapi uliposhiriki ngono mara ya kwanza?	Miaka	[]
14	Je! Umewahi kuwa mwathirika wa dhuluma ya kijinsia?	1. Ndio 2. Hapana	[]
15a	Je! Ulikuwa na marafiki au jamaa na historia ya kufanya ukatili wa kijinsia?	1. Ndio 2. Hapana	[]
15b	Ikiwa Ndio, Je, alikuwa rafiki au jamaa?	1. Rafiki 2. Jamaa	[]
16	Historia ya kuwa na maarifa yasiyo ya kawaida ya mwili (kwa mfano na wanyama)?	1. Ndio 2. Hapana	15
17a	Je! Umewahi kutumia pombe?	1. Ndio 2. Hapana	[]
17b	Ikiwa ndio, ni lini ulitumia pombe kwanza (Umri)?	Miaka	[]
17c	Je! Ulikuwa na marafiki au jamaa (ukiondoa wazazi) ambao walitumia pombe?	1. Ndio 2. Hapana	[]
17d	Ikiwa Ndio, walikuwa marafiki au jamaa?	1. Rafiki	[]

		2. Jamaa	
18a	Je! Umewahi kutumia dawa za burudani?	1. Ndio 2. Hapana	[]
18b	Ikiwa ndio, ni dawa gani za burudani ambazo umetumia?	1. Bangi 2. Miraa 3. Heroine 4. Cocaine 5. Zingine?	[]
18c	Ikiwa ndio, wakati wa kwanza kutumia dawa za burudani (watu) (Umri)?		[]
18d	Je! Ulikuwa na marafiki au jamaa (ukiondoa wazazi) ambao walitumia dawa za burudani?	1. Ndio 2. Hapana	[]
18e	Ikiwa Ndio, walikuwa marafiki au jamaa?	1. Rafiki 2. Jamaa	[]
SEHEMU 2: HABARI ZA KIFUNGO			
12	Urefu wa kufungwa (Miezi)		
13	Sababu ya Kufungwa (Kutoka kwa rekodi)		
14b	Je! Hii ilikuwa mara ya kwanza au la kurudia	1. Ndio 2. Hapana	

14c	Ikiwa Ndio, kosa lako la kwanza lilikuwa nini na ulikuwa na umri gani wakati wa kuifanya?		
15	Ikiwa ulihukumiwa kwa kosa la kijinsia, ilikuwa ni umri gani ulihukumiwa kwa hatia ya kijinsia (wakati wa hatia)	Miaka	
16	Uhusiano na mwathiriwa ulipatikana na hatia ya kumwathiriwa (Jamaa / Rafiki)		
17	Je! Kosa hilo lilitendwa kibinafsi au katika genge?	1. Kibinafsi 2. Genge	[]