



ASSESSMENT OF THE KNOWLEDGE OF MOTHERS ABOUT FAMILY LIFE EDUCATION OF THEIR CHILDREN IN ILISHAN-REMO, OGUN STATE, NIGERIA

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ABSTRACT: *Family life education is an organized effort to enrich and improve the quality of individual and family life by providing people with information, skills, experiences and resources intended to strengthen, improve, or enrich their family experience. This research work assessed the knowledge of mothers about family life education of their children in Ilishan-Remo, Ogun State. The study adopted a cross sectional descriptive survey. Three research questions and one hypothesis were generated, self-developed questionnaire was used to collect data from 183 mothers selected through stratified random sampling technique. Their responses were collated and analyzed using the SPSS version 22.0. Results showed 62.3% of the mothers had little knowledge about the content of family life education. This implies that mothers still have some factors hindering them from teaching family life education to their children. The hypothesis revealed that there is a significant difference between the mother's knowledge and teaching of family life education with a p-value of 0.035. In conclusion, the mothers seem to have a fair knowledge of family life education but lack the skill to impart it.*

KEYWORDS: Children, Family Life Education, Knowledge, Mothers, Family Experience, Nigeria

INTRODUCTION

The family which consists of the father, mother and children is the basic unit of the society that is responsible for supporting, caring for and preparing children for adulthood (Adesokan, 2014). This connotes that whatever happens to the family affects the society, the community and the nation at large. White (2008), wrote in her book, the Adventist Home pp.1 “the heart of the community, of the church, and of the nation is the household, the well-being of the society, the success of the church, the prosperity of the nation, depend upon home influences”.

The family is the primary agent of socialization for a child and is responsible in rearing, nurturing and teaching of the child (Ministry of Education, 2018). However, Axpe, Rodriguez, Goni, & Antonio-Agire (2019) pointed out that, although parents are not the only agents contributing to the socialization of children, the family has continued to be seen as a major arena for socialization. This reflects the pervasive assumption that even though socialization and resocialization can occur at any point in the life cycle, childhood is a particularly malleable period, and it is the period of life when enduring social skills, personality attributes, and social orientations and values are laid down.



As the child grows into adolescence, he/she as a human being becomes most conscious of their sexuality and start to express same. Adolescence is a transition period between childhood and adulthood. It is the period of physical, psychological and social changes from childhood to adulthood and falls within the ages of 10 and 19 years, (Adesokan, 2014). In most Nigerian societies, this truth is recognized, but changing traditional values and socialization process have rendered the preparation for coping with this period inadequate. The adolescent is eager to ask several questions but the problem is: whom to address these questions? Since it is perceived as a taboo to talk about sex in the society, the adolescent may not freely open up to his parents for guidance and those who try to ask questions are not well informed and this dissatisfaction make them try to get information elsewhere.

The adolescent's sources of information include; books, magazines, television programs, social media, films, internet, peer group and friends, (Kirby, 2009). The adolescents often times are fed with the wrong information and consequently they carry it through out their lifetime. The wrong information adolescents get from their friends include; sex is not bad, just enjoyment, you can try sex, you must not be a virgin, having sex makes a sharp guy/lady, you can get some money when you have sex, you must not tell mummy everything, to mention but a few. Opara(2012), emphasized that such information about sex gotten from outside the home may either be correct or incorrect, placing the adolescent at risk of sexual abuse, unwanted pregnancies, school dropout, untimely death through HIV/AIDS, criminal and septic abortion, reproductive organs complications and also juvenile delinquency.

Planned Parenthood Federation of America, (2014), pointed out that as part of each country's effort to reduce such incidence, programs of sex education were instituted to gear toward enlightenment and appropriate education, but adolescents have continued to face hazards as a result of lack of family life education. The mother has a key role to play in the life of her children and on this background, the researcher investigated first the knowledge of mothers towards family life education of their children.

Objective of the Study

The general objective of the study was to assess the knowledge of mothers on family life education of their children in Ilishan-Remi, Ogun State, Nigeria

Specific objective are to;

- i). Assess the knowledge of mothers about family life education of their children.
- ii). Find out appropriate age mothers think family life education should begin.
- iii). Find out what mothers think should be the content of family life education should be

Research Questions

- i). What is the knowledge of mothers about teaching family life education to their children?
- ii). When should mothers begin family life education of their children?
- iii). What should be the content of family life education?



Hypothesis

There is no significant difference between the mother's knowledge and teaching of family life education to their children.

LITERATURE/THEORETICAL UNDERPINNING

Family life education, also called sexuality education, health education, and health promotion, human development, and family living are curricula designed to provide information that will help young people make healthy decisions and choices about their sexuality. This education refers to "an age-appropriate, culturally relevant approach to teaching about sex and relationships by providing scientifically accurate, realistic, non-judgmental information" (Leung, H, Daniel, T. L. S, Edvina L, & Esther, Y. W. S., 2019). Family life education is a principal strategy to influence adolescent risk behaviors that may lead to early pregnancy and also help young people become sexually healthy, responsible adults.

Taffa, Haimanot, Desalegn, Tesfaye and Mohammed, (2016) defined Family Life Education as the type of education an individual receives to prepare him/her for adult life. It includes education about the family, human growth and development, adolescent problems (health and disease), sexuality, family planning, and responsible parenthood.

Family life education (FLE) is an organized effort to enrich and improve the quality of individual and family life by providing people with information, skills, experiences and resources intended to strengthen, improve, or enrich their family experience. "Family life education focuses on healthy family functioning within a family systems perspective and provides a primarily preventive approach to health and wellbeing. The skills and knowledge needed for healthy functioning are widely known: strong communication skills, knowledge of typical human development, good decision-making skills, positive self-esteem, and healthy interpersonal relationships. The goal of family life education is to teach and foster this knowledge and these skills to enable individuals and families to function optimally" (National Council on Family Relations, 2014).

Family life education is commitment to improve the lives of individuals on a prevention model, teaching families to enrich family life and prevent problems before they occur. The intent of family life education is to help individuals make sound decisions across a variety of life topics and avoid crises that impede the health and optimal functioning of families (Kirby, 2001). Family life education focuses on primary prevention before individuals reach a crisis situation that merits case management or long-term or intensive counseling to repair functioning, (Myers-Walls, Ballard, Darling, & Myers-Bowman, 2011).

Aims/ Values of Family Life Education

According to Nakpodia, (2011), family life education aims at enable individual to understand and appreciate the institution of family and the family life in proper perspective focusing largely on developing among learners the ability to understand themselves, the family and society in which they live and interact, to think rationally and independently, to clarify the traditional values and their own values and to take informed decision about their own individual selves and the family life, and to ensure that individual approaching adulthood is equipped with



the skills and personal reserves to cope with the challenges of everyday life in society within acceptable societal structures and to adapt to change with experience and equilibrium. Emenike, (2011) added that family life education exposes adolescents to parental roles, It develops individual's ability to see sex as a positive rather than negative human problem, which follows developmental pattern, It exposes the mother to her effective roles towards child growth and development.

Recipients of Family Life Education

Family life education is an education meant for growing children. Adolescent boys and girls are the recipients of family life education.

When Should Family Life Education/ Sexuality Education Start?

Sexuality education that works starts early, before young people reach puberty and before they establish pattern of behaviour. Chirban (2014), stated that the precise age at which information should be provided depends on the physical, emotional and intellectual development of the young person as well as level of understanding of that individual.

Where Should Family Life Education Start and Who Should Teach Family Life Education?

Family life education should start in the home as the family is the primary agent of socialization for a child and is responsible for rearing, nurturing and teaching of the child (Birch, 2013). Parents have great influence on their children; hence it has been suggested that family life education should start in the family (National Council for family relations, 2019). Few parents practice family life education at home because they may be embarrassed and find it difficult to put their thoughts into words, (Masten & Cicchet, 2010). Furthermore, Dicenso (2008), pointed out that mothers are duty bound to give more detailed explanation about sex and sexuality to their children because children naturally tend to confide in their mothers, this relationship of trust, friendship and confidence which have started in early first year of life that the mother should take advantage of in discussing sexuality with their children.

The mother has a lot of role to play in child development. Geetarao (2013) pointed out that a mother has to be aware of the physical, cognitive and social development of her child as well as its adolescent development. He further explains that a mother plays a vital role in the life of a child, she has to create proper environment for her child because the environment in which a child is brought up is of primary importance in a child's life, a suitable environment supports the proper development of a child, and she is the one to know when her children is to be trained to use the toilet. It is the duty of the mother to monitor her child's behavioural development.

Mother's Knowledge About Family Life Education

Home is the best place to begin family life instruction but mothers who are to give this education are reluctant and uncomfortable finding it embarrassing or as a taboo to discuss with their children simply because they may not be well educated about family life education. In Nigeria it has been reported that many adolescent focused programs do not turn out well because they lack parental support, yet no attempt has been made to examine what the parents know about family life education.



Effects of Neglecting Family Life Education

Adolescents develop sexual risk behaviours when family life education/sexuality education is neglected. Sexual risks are behaviors pertaining to sex that put an individual at risk. These may include; too early initiation of sexual activity, sexual intercourse without the use of contraceptive, sexual intercourse without the use of condom, sexual intercourse with more than one partner, sexual intercourse with a partner infected with an STI and/or HIV/AIDS. The resultant effects may include the following; teenage pregnancy, abortion, sexually transmitted infections (HIV/AIDS, gonorrhoea, syphilis, chlamydia, genital warts, human papilloma virus etc.), greater risks of childhood illness and birth complications such as vesico-vaginal fistula, recto-vaginal fistula, rejection by parents, poor academic performance, withdrawal or drop out from school, children turning to be hawkers, family conflict, and even to death, (Adesokan (2014).

Empirical Review on Knowledge of Family Life Education

Ilo, Abgapuonwu, Obasi and Mkata, (2014) in their research about the involvement of mothers in educating their children on family life and related issues used 100 mothers of adolescent girls as respondents. The mothers perceived that girls should be told about menstruation only after experiencing menarche and that their fathers and brothers must not know about it. The study also reveals that only 65% mothers have poor knowledge about issues like changes which take place during adolescence, conception, family planning and a feeling of embarrassment to discuss issues hinder communication between the mother and her adolescent girl.

METHODOLOGY

The study adopted a descriptive survey design to assess the knowledge of mothers about family life education of their children in Ilishan-Remo, Ogun State.

Study Area and Sample Size

The target population for this study are mothers who have children between the ages of 10 and 19 in Ilishan Remo, Ogun State, attending churches and mosque. Ilishan Remo has about thirty-two (32) churches of different denominations and eight (8) mosques. A stratified random sampling technique was used for the purpose of this study to select eight (8) churches while purposive sampling technique was used to select one mosque (The central mosque, reason being that the Muslims gather together at their central Mosque for worship every Friday). The churches were stratified into groups using their denomination and one church was selected to represent each denomination. The church register and the Mosque register was used to calculate the number of mothers who have children between the ages of 10 and 19.

Instrumentation

A self-developed questionnaire was used to collect data for the study. The questionnaire comprised of three sections.

Section A assessed the Socio- Demographic data consisting of 7 questions.



Section B assessed the mother's knowledge about family life education consisting of 10 questions.

Data gotten from questionnaire was collated and analyzed in tables, charts and frequencies using Statistical Package for social sciences (SPSS) version 22. Descriptive statistics was used to analyze research questions using percentages while the hypothesis was analyzed with crosstab chi square.

Ethical Consideration

The study was submitted to Babcock University Health Research Ethical Committee (BUHREC) for clearance. Permission was gotten from Dean School of nursing, Babcock University, Ilishan Remo. A letter of introduction was given to me from school of nursing Babcock University and signed by my supervisor. Consent was obtained from the respondent by explaining the purpose of the study. The respondents were assured of anonymity and confidentiality and they were also told they could withdraw at any stage without reprisal.

RESULTS

Table 1: Socio-Demographic Characteristics of the Respondents (n= 183)

Variables	Frequency (N = 183)	Percentages (%)
Age		
31 - 40 years	92	50.3
41 - 50 years	55	30.1
51 -60 years	23	12.6
Above 60 years	13	7.1
Religion		
Christianity	131	71.6
Islam	51	27.9
Others	1	.5
Occupation		
House wife	30	16.4
Trading	78	42.6
Teaching	46	25.1
Catering	9	4.9
Fashion designer	20	10.9
Number of children		
1 -4	152	83.1
5 -8	29	15.8
9 -12	2	1.1
Type of marriage		
Monogamy	160	87.4
Polygamy	23	12.6
Educational level		
No education	12	6.6
Primary	14	7.7
Secondary	47	25.7
Tertiary	110	60.1



Tribe		
Yoruba	142	77.6
Igbo	28	15.3
Hausa	6	3.3
Others	7	3.8

Table 1 above showed that majority of the respondents 92 (50.3%) were within age group 31-40yrs, followed by 55(30.1%) fall within age group 41-50 years, 23(12.6%) fall within age group 51-60 years while the least happened to be 13(7.1%) fall within age group above 60 years. Almost all the respondents 131 (71.6%) were Christians, 51(27.9%) were Islam while 1(0.5%) were other religion. Majority of the respondents' occupation 78(42.6%) are trading, 46(25.1%) are teaching, 30(16.4%) are house wife, 20(10.9%) are fashion designer while 9(4.9%) are catering. 152(83.1%) are major respondents that had 1 – 4 children, 29(15.8%) had 5 -8 children while 2(1.1%) had 9-12 children. Majority of the respondents 160(87.4%) are from monogamy marriage while 23(12.6%) are from polygamy marriage. Most of the Educational level of the respondents 110(60.1%) are in tertiary, 47(25.7%) are in secondary, 14(7.7%) are in primary while 12(6.6%) are not in any educational level. The most of the tribe of the respondents 142(77.6%) are Yoruba, 28(15.3%) are Igbo, 7(3.8%) are from others tribe while 6(3.3%) are from Hausa's tribe.

Table 2: Knowledge of Mothers About Teaching Family Life Education

Variables	Frequency (N = 183)	Percentages (%)
Have you heard about family life education		
No	23	12.6
Yes	160	87.4
What do you understand by family life education?		
An education that prepares an individual for a successful adult life	51	27.9
An education that teaches about sex and how to avoid sexual risks	23	12.6
An education to enrich and improve the quality of individual and family life	82	44.8
A preventive and educational approach to individuals and family issues	27	14.8
When should family life education start?		
I don't know when	25	13.7
Before age 5	56	30.6
Between age 5 and 8	40	21.9
Between age 8 and 12	62	33.9
Do you think your children need guidance on family life education and sexual matters		
No	12	6.6
Yes	171	93.4
Have you had discussion with your children on sexual matters		
No	57	31.1
Yes	126	68.9



If yes, which areas		
No discussion	57	31.1
Dating	9	4.9
Reproduction	9	4.9
Menstruation/Wet dream	27	14.8
Sexual experience	14	7.7
Relationship with opposite sex	67	36.6

Table 3. Showing the Knowledge of Mothers About Family Life Education

Respondents Knowledge	SA	A	U	D	SD
Lack of family life education/sexuality education can lead adolescents to experimenting sex and early sex initiation	77 (42.1%)	61 (33.3%)	35 (19.1%)	6 (2.7%)	5 (2.7%)
Lack of family life education/sexuality education can lead adolescents to unwanted pregnancy and unsafe abortion	82 (44.8%)	63 (34.4%)	26 (14.2%)	6 (3.3%)	6 (3.3%)
Lack of family life education/sexuality education can lead adolescents to exposure to sexually transmitted disease such as HIV/AIDS	65 (35.5%)	61 (33.3%)	45 (24.6%)	8 (4.4%)	4 (2.2%)
Lack of family life education/sexuality education can lead adolescents to dropping out from school	69 (37.7%)	55 (30.1%)	44 (24.0%)	7 (3.8%)	8 (4.4%)
Peer group influence family life education in the community	72 (39.3%)	70 (38.3%)	33 (18.0%)	7 (3.8%)	1 (0.5%)
Adolescent's exposure to wrong information influence family life education in the community	56 (30.6%)	80 (43.7%)	37 (20.2%)	6 (3.3%)	4 (2.2%)
Cultural belief influence family life education in the community	51 (27.9%)	61 (33.3%)	54 (29.5%)	14 (7.7%)	3 (1.6%)
Mothers lack of time for her children influence family life education in the community	78 (42.6%)	56 (30.6%)	33 (18.0%)	10 (5.5%)	6 (3.3%)
Family life education can make the adolescent open to his or her mother	78 (42.6%)	54 (29.5%)	37 (20.2%)	8 (4.4%)	6 (3.3%)
Family life education can help the child to understand his/her physiological changes e.g. menstruation or wet dream	78 (42.6%)	59 (32.2%)	32 (17.5%)	10 (5.5%)	4 (2.2%)
Family life education can help in guiding the child to understand and appreciate his or her sexual needs and those of his or her future adult life	73 (39.9%)	60 (32.8%)	34 (18.6%)	12 (6.6%)	4 (2.2%)
Family life education can prevent the adolescent from getting false information from other sources except from the primary family life educator	64 (35.0%)	68 (37.2%)	35 (19.1%)	11 (6.0%)	5 (2.7%)



In responding to research question one on what is the knowledge of mothers about teaching family life education to their children, 87.4% have heard about family life education, 44.8% were able to identify family life education as an education to enrich and improve the quality of individual and family life.

Table 4: Showing What Mothers Think the Content of Family Life Education Should be

Discussion Contents		
No discussion	57	31.1
Dating	9	4.9
Reproduction	9	4.9
Menstruation/Wet dream	27	14.8
Sexual experience	14	7.7
Relationship with opposite sex	67	36.6

In responding to research question four on what should be the content of family life education, 67(36.6%) indicated it should contain topic on relationship with opposite sex, 57(31.1%) have had no discussions on any topic on family life education with their children, 27(14.8%) indicated menstruation and wet dream topic, 14(7.7%) indicated for sexual experience topic while 9(4.9%) indicated it should contain topics such a dating and reproduction

Hypothesis

There is no significant difference between the mother's knowledge and teaching of family life education to their children.

Table 5: Showing the Differences in the Mother's Knowledge and Teaching of Family Life Education to Their Children.

Knowledge	Level of Teaching of Family Life Education			χ^2	p-value
	Low	Moderate	High		
Adequate	29	45	17	811.337	0.035
Inadequate	17	39	36		
Total	46(25.1%)	84(45.9%)	53(29.0%)		

The hypothesis revealed that there is a significant difference between mother's knowledge of family life education and teaching of family life education to their children. The result from above table showed that the p-value is 0.035. Therefore, the null hypothesis was rejected and alternative hypothesis accepted.

DISCUSSION OF FINDINGS

A majority of the respondents, 92 (50.3%) and 55(30.1%), are in age groups 31-40years and 41-50years respectively. Almost all the respondents 131 (71.6%) were Christians, 51(27.9%) were Muslims while the remaining 1(0.5%) were identified as other religion this is due that majority living in the part of the study religion are Christianity. A large number 78(42.6%) were traders, 46(25.1%) were teachers, 30(16.4%) are house wife, 20(10.9%) are fashion



designer while 9(4.9%) are caterers. This is expected in a study carried out in a community whose major occupation is trading and teaching. In terms of number of children respondents had, majority 152(83.1%) had 1 – 4 children, 29(15.8%) had 5 -8 children while 2(1.1%) had 9-12 children. A significant number 160(87.4%) are from monogamy marriage while 23(12.6%) are from polygamy marriage. Majority of the respondent's educational qualification 110(60.1%) are in tertiary, 47(25.7%) are in secondary, 14(7.7%) are in primary while 12(6.6%) are not in any educational level. This literacy level is very high this is similar to the study of national level as documented in the 2008-2009 KDHS where only 10.8% of females aged 15 to 49 years have no education (KNBS and ICF Macro, 2010). 142(77.6%) are Yoruba, 28(15.3%) are Igbo, 7(3.8%) are from others tribe while 6(3.3%) are from Hausa's tribe. This is understandable for a study carried out in the south-west part of the country and a community whose major reason why we have more Yorubas participating in the study.

Assessment of the knowledge of mothers about teaching family life education to their children revealed that majority of the mothers have heard about family life education and the understood family life education to be an education to enrich and improve the quality of individual and family life. The mothers also agreed that lack of family life education can lead their children into early sex initiation, unwanted pregnancy and unsafe abortion, dropping out of school and exposure to sexually transmitted disease such as HIV/AIDS. However, 65.9 (36%) felt family life education should be taught by them while 57.6(32%) felt the school teachers should be responsible. Odimegwu, Bamisile and Okemgbo (2001), in studying the parental knowledge, attitude and practice of family life education in Apata, Nigeria also found out from their study that parents believed they should be the primary family life educators, followed by teachers, if they are mobilized and motivated to provide family life education for their children.

The study clearly showed that Mothers in Ilishan-Remo indicated that the appropriate time to begin family life education with their children should be between age 8 and 12. This is a bit late, according to Godswill, (2012); UNESCO, (2014) & Konwea and Mfrekemfon, (2015), in their study wrote 'the need for early exposure to sexual education cannot be over emphasized as many children now are sexually active even before they start menstruating and are also ignorant of the fact that they can get pregnant after just one exposure to intercourse.

In assessing what family life education should contain from the mothers. The study clearly showed that 36.6% indicated that family life education content should include topic on relationship with opposite sex, 31.1% have had no discussions on any topic on family life education with their children, 14.8% indicated menstruation and wet dream topic, 7.7% indicated for sexual experience topic while 4.9% indicated it should contain topics such as dating and reproduction. Ilo, Abgapuonwu, Obasi and Mkata (2014) in their research about the involvement of mothers in educating their children on family life and related issues used 100 mothers of adolescent girls as respondents. The mothers perceived that girls should be told about menstruation only after experiencing menarche and that their fathers and brothers must not know about it. This study reveals that mothers do not know the content of family life education, but as described by Dicenso (2008), mothers are duty bound to give more detailed explanation about sex and sexuality to their children because children naturally tend to confide in their mothers, this relationship of trust, friendship and confidence which have started in early first year of life that the mother should take advantage of in discussing sexuality with their children.



Implication of the Study to Nursing Practice

The study will enhance the development of health education skills that the nurses require in giving out correct and adequate information on family life education and in turn the mothers will be trained from the outset. Nurses should be involved in educating children. Family life education should not be left to mothers and teachers alone but to health workers. Nurses should be enthusiastic and have positive attitude towards the training of mothers and adolescents on family life education.

CONCLUSION

The study was conducted among mothers in Ilishan-Remo, Ogun State, Nigeria with one hundred and eighty-three mothers as respondents. Majority of them were between the ages of 31 and 40, majority were Christians, and majority were from Yoruba tribe. However, majority of the respondents seem to have a fair knowledge about family life education, but the issue remain that the adolescents still engage in risky behaviours. This means there is still a gap yet to be filled as to why the mother's knowledge of family life education do not positively influence their children's behaviour and choice of lifestyle

Further Research

- 1) Mothers attitude towards imparting family life education should be studied
- 2) The hindrances faced by the mothers on trying to teach family life education to their children should be studied
- 3) Mother's knowledge about family life education should be enhanced through regular health talks and workshop in the community and churches.
- 4) Awareness to be made to the mothers on why they should start early to talk to their children about family life education, this education should take place even before the age of 8.

REFERENCES

- Adesokan .F (2014). Reproductive Health for all ages. Third Edition, Bosed Publishers Nigeria.
- Axpe, I. Rodriguez, A., Goni, E., & Antonio-Agire, I., (2019). Parental Socialization Styles: The Contribution of Paternal and Maternal Affect/Communication and Strictness to Family Socialization Style. *International journal of environmental research and public health*, 16(12), 2204
- Chirban J.T (2014). When should sex education begin? Retrieved from <https://www.psychologytoday.com/blog/age-un-innocence/201402/when-does-sex-education-begin> Curriculum.
- Dicenso, A. (2002). Interventions to reduce unintended pregnancies among Adolescents: Systemic Review of Randomized Controlled Trials. *British Medical Journal*, 324:1426



- Emenike, O. (2011). "A comparative pre-adolescent Parenting Strategies and Teens Dating and Sexual Initiation". *A Longitudinal Journal of Marriage and Family*, 63(2), pp. 322-335
- Geetarao. R.Y (2013). Role of a mother in child development. Retrieved from <http://www.hubpages.com/family/roles>
- Godswill, J. (2002). Education and sexuality: Toward addressing adolescent's reproductive health needs in Nigeria. *Current Research journal of Social Sciences*, 4(4), 285-293.
- Ilo C.I., Agbapuonwu N.E., Obasi, S.C & Makata N.E (2014). Involvement of mothers in Educating their Children on Family Life and Related issues in Awka South Local Government Area, Anambra State. *Journal of Nursing and Health Science*, 3(2), pp. 37-41
- Kenya Demographic and Health Survey 2008-2009, (2010). Retrieved from <https://dhsprogram.com/pubs/pdf/fr229/fr229.pdf>
- Kirby, D. (2001). Understanding what works and what doesn't in reducing adolescent sexual risk taking. *Family Planning Perspectives*, 33(6), pp. 276-281.
- Kirby, D. (2009) Emerging Answers: Research findings on programs to Reduce Teen Pregnancy. National Campaign to Prevent Teen pregnancy. Retrieved from <http://www.eric.ed.gov/ERICWebPortal/custom/portlets/recordDetail/detailmini.jsp>
- Konwea, P. & Mfrekemfon, P. (2005). Parent's perception of the teaching of Sexuality Education in secondary schools in Nigeria. *International journal of innovative Science and Technology*, 2(1), pp. 88-99.
- Leung, H, Daniel, T. L. S, Edvina L, & Esther, Y. W. S. (2019). Development of Contextually-relevant Sexuality Education: Lessons from a Comprehensive Review of Adolescent Sexuality Education across Cultures. *International Journal of Environmental Research and public health*, 16(4): 621
- Masten, A.S, Cicchetti D. (2010). Developmental cascades. *Development and Psychopathology*, 22(3), pp.491-495. PubMed.gov
- Ministry of Education, Guyana (MOE, 2018). Why Are Parents Such a Powerful Agent of Socialization? Retrieved from <https://www.education.gov.gy/web/index.php/parenting-tips/item/1752-why-are-parents-such-a-powerful-agent-of-socialization>
- Myers-Walls, J. A., Ballard, S. M., Darling, C. A. and Myers-Bowman, K. S. (2011). Reconceptualizing the domain and boundaries of family life education. *Family Relations, Interdisciplinary journal of Applied Family Studies*, 60(10), pp. 357-372
- Nakpodia E.D (2012). Relevance of sex education in secondary school scholarly. *Journal of Business Administration*, 2(2), 36-41
- National Council for family relations, (2019). What is family life education? Retrieved from <https://www.ncfr.org/cfle-certification/what-family-life-education>
- National Council on Family Relations (NCFR, 2014). Family Life Education. Retrieved from <http://www.ncfr.org>.
- Odimegwu C.O., Bamisile T.A., & Okemgbo C.N., (2001). "Parental knowledge, Attitude and Practice of family life Education in Apata Town of Ibadan, Nigeria". *Journal of social science*, 5(1& 2), pp. 1-9
- Opara P.I., (2012). Perception of sex education among secondary school students in Nigeria, *West Africa Journal of medicine*. 3(2), 109-113.
- Planned Parenthood Federation of America, (2014). Reducing teenage pregnancy. Retrieved from https://www.plannedparenthood.org/uploads/filer_public/94/d7/94d748c6-5be0-4765-9d38-b1b90d16a254/reducing_teen_pregnancy.pdf



-
- Taffa N, Haimanot R., Desalegn S., Tesfaye A., Mohammed K.,(2016). “Do parents and young people communicate on sexual matters? The situation of Family Life Education (FLE) in a rural town in Ethiopia.” *Ethiop. Journal of Health Development*; 13(3):205-210.
- UNESCO, (2014). *Comprehensive Sexuality Education: The challenges and opportunities of scaling-up*. Retrieved from www.unesdoc.org/0022/002277/227781E. Pdf
- White E.G (2008). *Adventist Home, Complete Published Ellen G. White Writings* [CD ROM], Silver Spring, MD. Ellen G White Estate.