Assessment of Parenting Practices and Styles and Adolescent Sexual Behavior among High School Adolescents in Addis Ababa, Ethiopia

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Abstract

Background: Healthy sexuality is a developmental process which needs investments from parents. Nonetheless, little is known about the effect of parenting practices and styles on the sexual risk behavior of young people.

Objectives: To assess the effect of different parenting styles and parenting practices on the sexual behavior of adolescents.

Methods: A cross-sectional study was conducted among 3840 randomly selected high school adolescents using three stage sampling in Addis Ababa, Ethiopia. Data were collected by a self-administered anonymous pre tested questionnaire. Logistic regression analysis was done to identify parental factors associated with sexual behavior.

Results: From the 3543 students participated in this study 723(20.4%) respondents reported ever having sexual intercourse and nearly three quarter of those who initiated sex were involved in risky sexual practices. Respondents who live with both parents [AOR = 0.48 (95%CI: 0.21-0.83)] and perceived connected to their parents [AOR = 0.51(95%CI: 0.22-0.96)] were less likely to experience risky sexual behavior. Similarly, students from authoritarian and authoritative parents were more likely to have safe sexual practices [AOR = 0.38(95%CI: 0.23-0.86)] and [AOR = 0.41(95%CI: 0.24-0.93)] respectively compared to children from permissive parenting styles. In addition, parent child communication about sexual issues [AOR = 0.56 (95%CI: 0.31-0.94)] and parental monitoring were protective from risky sexual behavior [AOR = 0.52(95%CI: 0.32-0.92)].

Conclusion: Appropriate parenting practices have a shielding effect from adolescent sexual risk behavior. Interventions that enable parents to build proper parenting practices, skills and styles have paramount importance.

Keywords: Adolescents; Parenting practices; Parenting style; Sexual behavior; HIV; STIs; Ethiopia

Back Ground and Statement of the Problem

Parents are the first socializing agents, teachers, leaders and counselors to their children. Parent’s guidance and support is always important, however it is highly needed in the period of adolescence, which is a transition from childhood to adulthood and is characterized by spurts of physical, mental, emotional, social and sexual development [1]. Healthy sexuality is a developmental process which needs investments from parents.

Sexual risk taking which includes early coital debut, multiple sexual relation, non use and inconsistent use of condom is becoming common among substantial numbers of young people. Risky sexual activity puts adolescents at risk of various reproductive health challenges. It is identified that about 20,000 girls under the age of 18 give birth each day [2] nearly 60 percent of unsafe abortions in Africa occur among women aged less than 25 years [3] and about 100 million adolescents acquire curable sexually transmitted disease each year [4-7] and youth, ages 15-24, account for approximately 33% of new HIV infections [8].

Parenting style is defined as the ardent climate provided by parents and parenting practices signify the behaviors in which parents involve with the purpose of undertaking specific socialization goals. Research evidences showed that parental practices such as parent child connectedness, parental monitoring and parents and adolescents communication about sexuality is protective against risky sexual behavior [9-11]. Baumrind’s identified four parenting styles: Authoritative, Authoritarian, Permissive and Neglectful. Studies showed that children from authoritative parents tend to engage in fewer risk behaviors than children from other parenting types [12,13].

Although, Adolescent's behavior is deeply affected by the family environment they live and parents are the main source of influence and credible sources to their children with regard to sexuality little is known in Ethiopia about the relationship between the different parenting practices and safe sexual behavior. Thus, it is the purpose of this study to assess the effect of different parenting styles and parenting practices on the sexual behavior of adolescents.

The result of this study will help to formulate policies, design strategies and programmes about proper parenting practices for the current and would be parents.

Subjects and Methods

This cross sectional study was conducted among regularly attending 15-24 years of age high school youth in Addis Ababa, the capital city of Ethiopia. Addis Ababa is administratively divided into 10 Sub Cities.

A sample size of 3840 students was calculated based on proportion of parenting practice 50%, 95% confidence interval, power 80%, margin of error 0.03, design effect of 3 and 20% allowance for non-response [14].

A three stages sampling was used to select study participants from the source population. In the first stage one high school was selected randomly from each sub-city. The sample size was assigned proportionate to the total student population for each selected school. One section was selected from each grade in the identified schools

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by lottery method. Using a systematic sampling method every third student from the selected section was taken until the allocated number was reached.

Data were collected using pretested anonymous self-administered questionnaire. The questionnaire was adapted from Youth Risk Behavior Survey [15]. The questionnaire was prepared in English and translated and administered in Amharic (the Ethiopian national language). The research team which consists of two supervisors (public health experts) and ten nurses (data collectors) were trained for 2 days to help them understand the purpose of the study and familiarize themselves with the questions. Scheduled and unscheduled visits during data collection and official contact with concerned personnel and institutions were made by the Principal Investigator. The questionnaire consisted of items dealing with the dependent variable risky sexual behavior of students and a composite score of parental factors: living arrangement, parent adolescent communication, parental monitoring, parental connectedness, and parenting style

Parent-adolescent communication

The questionnaire consisted of six items about parent-adolescent Communication. The students were asked whether they communicated with their parents about: sex, HIV, STIs, pregnancy, changes occurring during adolescents and about school. Communication between parents and adolescents on sexual and reproductive health was measured based on young people's perception that they have discussed about at least one sex and reproductive health-related topics with their parents in the past six months.

Parental monitoring

Respondents were asked five items: my parent(s) know where I am after school, my parent(s) know all my friends, I need permission from my parents to go anywhere, my parents allow me to stay at friend’s house overnight if I want to, my parents do not mind if I get a boyfriend/girlfriend. Parental monitoring was defined as participant's perception that their parents know their whereabouts, and associates.

Parental connectedness and family relationship

This was assessed by 9 items: family members ask each other for help, family members like to spend free time with each other, family members feel very close to each other, family members can easily think of things to do together as a family, family does things for fun together, listen to what other family members have to say, even when they disagree, will be available when others in the family want to talk to them, have meals together and conflict in the family. Parental connectedness is defined as those adolescents who responded "yes" to at least 5 parental connectedness questions.

Parenting styles

One item assessed the perception of students about parenting styles: they were asked about how decision was made in the home. The measure was: “Do you think it is important to decide for you and your partner(s)”? The choices were: “They make the decisions that I have to follow” (authoritarian); “They say their opinion but they have the final say” (authoritative); “They ask my opinion but they have the final say” (permissive); “They don’t care what I do, so I decide for myself” (neglectful).

Sexual risk-taking

Four items were used to determine the sexual risk-taking behaviors of the respondents. Students were asked: “Have you ever had sexual intercourse? At what age have you had sexual debut? During your life, with how many people have you had sexual intercourse? The last time you had sexual intercourse did you or your partner use a condom?”

Risky sexual behavior is defined as sexual debut before the age of 16, had either unprotected sex or had multiple sexual partnership.

Data coding, entry, and cleaning was processed using EPI info version 6.4 and the analysis was made using SPSS version 15 statistical package. Variables with significant association in the bivariate analysis were entered into logistic regression to estimate the odds and standard errors of having risky sexual behaviors. Variables with P value less than 0.05 was considered significant.

Ethical clearance was secured from the Addis Ababa University, College of Health Sciences IRB. Verbal informed consent was obtained from each respondent after explaining the purpose of the study. Participants were assured that participation is voluntary, the information they provide will be kept completely anonymous and confidential. Students were also informed the possibility of opting out at any time if they feel to do so.

Results

Table 1 summarizes the sample characteristics of respondents. From the 3840 eligible in school adolescents 3543(92.5%) fully participated in the study of these about half were females and 796(22.5%) of students were in the age group 15 - 16 years. In addition, 1964(55.4%) participants were living with both parents and 602(17.0%) of student's fathers and 928(26.2%) of students mothers were without formal education.

Parental connectedness and family relationship

As shown in table 2, 2038(57.5%) students reported that their family members feel very close to each other and 1388(39.2%) respondents indicated that their family members can easily think of things to do together as a family.

In addition, 1790(50.5%) of the students said they listen to what other family members have to say, even when they disagree and 1072(30.3%) of the respondents have meal together with the family at least once per day.

Regarding conflict in the family, 1090(30.8%) of the students pointed out that adults in their household fight.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Number%</th>
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<tbody>
<tr>
<td>Sex</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>1789(50.5)</td>
</tr>
<tr>
<td>Male</td>
<td>1754(49.5)</td>
</tr>
<tr>
<td>Age group (mean = 17.6, SD = 1.5 years)</td>
<td></td>
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<tr>
<td>Young adolescents (15-16)</td>
<td>796(22.5)</td>
</tr>
<tr>
<td>Older adolescents (17-24)</td>
<td>2747(77.5)</td>
</tr>
<tr>
<td>School Grade</td>
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<tr>
<td>Ninth</td>
<td>701(19.8)</td>
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<tr>
<td>Tenth</td>
<td>703(20.3)</td>
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<tr>
<td>Preparatory</td>
<td>I 770(21.7)</td>
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<td>I 670(18.9)</td>
<td>699(19.7)</td>
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<tr>
<td>Vocational</td>
<td></td>
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<tr>
<td>Paternal literacy</td>
<td></td>
</tr>
<tr>
<td>Illiterate and Non formal</td>
<td>602(17.0)</td>
</tr>
<tr>
<td>Formal school</td>
<td>2941(83.0)</td>
</tr>
<tr>
<td>Maternal literacy</td>
<td></td>
</tr>
<tr>
<td>Illiterate and Non formal</td>
<td>928(26.2)</td>
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<tr>
<td>Formal school</td>
<td>2615(73.8)</td>
</tr>
</tbody>
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Table 1: Socio-demographic Characteristics of 3543 High School Students in Addis Ababa, Ethiopia.
about pregnancy, and 1012(28.6%) about changes occurring during adolescence.

In addition, 2140(60.4%) of students reported that their parents were willing to provide advice and counseling, and 2110(59.6%) of the respondents said that their parents communicate with them in a positive way.

Furthermore, 1894(53.5%) of study participants reported that their parents talk to them about school.

### Parental monitoring and parenting styles

Overall, 1332(37.6%) of the respondents reported that their parents have clear rules and consequences, and 2100(59.3%) of the respondents indicated their parents know their where about, 1470(41.5%) know all their friends and 1760(49.7%) they need permission from parents to go anywhere (Table 4).

Furthermore, in relation to parental permissiveness 1424(40.2%), 1466(41.4%), and 698(19.7%) indicated that their parents allow them to stay at friends’ houses overnight if they want to, parents do not mind if they get a boyfriend/girlfriend, and parents think it is okay for teenagers to have sex respectively (Table 4).

Regarding, parenting style 1553(43.8%) of participants perceived that their parents follow authoritarian parenting style, 926(26.1) authoritative parenting style, 615(17.4%) permissive parenting style and 449(12.7%) neglectful parenting style (Table 4).

### Sexual activity among high school students

Table 5 depicts the sexual practice of students. A total of 723(20.4%) respondents ever had sex. Of these 574(79.4%) had had two or more sexual partners; out of these 319(55.6%) reported intercourse in the 12 months preceding the survey and 262(45.6%) respondents ever had sex. Of these 574(79.4%) had had sexual activity among high school students.

### Parent communication

As it is depicted in table 3, 674(19.0%) of the students reported that their parents communicated to them about sex, 748(21.1%) about HIV transmission and prevention, 554(15.6%) about STIs, 712(20.1%)
Parental practices and styles and risky sexual behavior

The parental correlates of risky sexual behavior are shown in Table 5. Students from authoritarian and authoritative parents were more likely to have safe sexual practices [AOR = 0.51(95%CI: 0.22-0.96)]. Parental connectedness was protective from risky sexual behaviors [AOR= 0.49(0.22-0.89)]. Communication about sexuality issues within the family appears to be important [27-29]. However, it was only one fifth of the students who communicated about sexual matters with their parents. Our study evidenced the association of parent child communication and sexual risk taking behavior. Respondents who reported communication with their parents about sexual issues were less involved in risky sexual behavior. Thus, parents should be helped to develop effective communication skills on sexual matters. In addition, the extent of communication, the content of the information that is communicated; and the timing of the communication should be given consideration.

Parental practices and styles and risky sexual behavior

The parental correlates of risky sexual behavior are shown in Table 6. Respondents who live with both parents [AOR= 0.48 (95%CI: 0.21-0.83)] were less likely to experience risky sexual behavior. Parental connectedness was protective from risky sexual behaviors [AOR= 0.51(95%CI: 0.22-0.96)].

There was significant association between parenting style and risky sexual behavior. Students from authoritarian and authoritative parents were more likely to have safe sexual practices [AOR = 0.38(95%CI: 0.23-0.86)] and [AOR = 0.41(95%CI: 0.24-0.93)] respectively. Students who perceived their parents communicated to them about sexual issues were less likely to have sexual risk behavior [AOR = 0.56 (95%CI: 0.31- 0.94)] than their counterparts. Parental monitoring was significantly associated with risky sexual behavior. Consistent supervision and monitoring of children were protective from risky sexual behavior [AOR =0.52(95%CI: 0.32- 0.92)].

Discussion

This study intended to assess the effect of different parenting styles and parenting practices on the sexual behavior of adolescents. About 723(20.4%) students reported ever having sexual intercourse and nearly three-quarter of those who initiated sex were involved in risky sexual practices. The study showed that positive parenting practices had association with safe sexual behavior.

The study used large sample size and an extensive sampling procedure to maximize the representation of the sample to similar population. However, there are some potential limitations. A cross-sectional design was used in this study to assess the effects of parenting practices on sexual risk-taking behaviors. Although such studies can provide useful data they are not optimal for illuminating processes by which these behaviors are linked. In addition, parenting practices have been assessed only from the students’ perspective.

This study showed that 55.4% of students live with parents. Concurring with evidences from previous studies students living with both parents were less likely to be involved in risky sexual behavior [16-19]. This could be explained that students living with both parents may be more secured and parents may also be available and have more time to support, show love, communicate and monitor their children. Thus, pre-marriage and marriage counseling should be in place and special attention should be given to interventions that aim the development of positive family life.

Nearly half of students reported that they have good connections with their parents. In line with research evidences elsewhere and diverging from the Zambian study the findings of this study shown that parent child connectedness is protective against risky sexual behavior [20-26]. This difference could be explained by cultural differences. Parental warmth, love and support increase the quality of parent child relationship and communication between parents and children. Thus, interventions that strengthen this bond need priority attention.

Communication about sexuality issues within the family appears to be important [27-29]. However, it was only one fifth of the students who communicated about sexual matters with their parents. Our study evidenced the association of parent child communication and sexual risk taking behavior. Respondents who reported communication with their parents about sexual issues were less involved in risky sexual behavior. Thus, parents should be helped to develop effective communication skills on sexual matters. In addition, the extent of communication, the content of the information that is communicated; and the timing of the communication should be given consideration.

Half of the students in this study indicated that their parents know their whereabouts and their friends. Parental monitoring appears to be consistently associated to a lower likelihood of risky sexual behavior in previous studies –[30-34]. Our study is in agreement with these evidences. This entails that family level interventions are vital with parental monitoring playing a substantial role.

Parenting styles are important to consider when examining parent-adolescent relationships. The substantial influence of parenting style on adolescent development is clear. Previous researches exhibited the protective effect of authoritative parenting style from risky sexual behavior [35]. However, this study showed adolescents raised in authoritarian and authoritative households had higher protective and fewer risk behaviors than adolescents from permissive families. The data presented here affirms the importance of authoritarian and authoritative parenting style in shielding children from risky sexual practices.
Conclusion

Parenting styles and practices have paramount influence on the sexual behavior of adolescents. Children raised in authoritative and authoritarian homes, live with both parents, feel connected with parents, communicated with parents about sexuality and monitored and supervised by parents are less involved in sexual risk behavior. Thus, training parents on how to nurture their children have supreme importance in risk behavior reduction. Interventions targeting the current and would be parents about proper parenting practices, skills and styles should be given special considerations.

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References