

Television Advertisements' Influence on Adolescents' Sexual Attitudes and Behavior in Schools

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Abstract

UNICEF in 2016 reported that Sub-Saharan Africa adolescents aged 13-19 make up 23% of the region's population and 260,000 new HIV infections. Youth sexual behaviours risk their health which is worsened by a lack of condoms, contraceptives, multiple partners, and some who are high-risk partners transient. Adolescents' cognitions, physiological, emotional, and social states and inability to comprehend exposure to risks fully exacerbate their involvement in sexual behaviours. The International Conference on Population and Development (ICPD) calls on governments to provide sexuality education and promote the wellbeing of adolescents. The Population Services International (PSI) in conjunction with the Ministry of Education campaign effort to mitigate sexuality risks among the youth were studies to investigate their influence on youths in school sexuality behaviours. The adverts studies were Hatua Yetu, the "Je Una Yako?" – "Do you have one, "Maisha ni sawa with trust", Fungua Roho Yako", "Nakufee! Campaign, 'Nimechill' campaign. The effort was to curb new HIV infections. Some television advertisements could have favoured experimentation with sexual behaviours and therefore there was need to test the effects of the advertisement. This paper seeks to determine adolescents' awareness of adverts targeting their sexuality attitudes and behaviours, crate understanding on adolescents' perspectives on adverts targeting sexuality, and also expose finding on whether the adverts on adolescents' sexuality modify their attitudes and behaviours on the same. Findings on are expected to generalize to approaches of sexuality education among adolescents and the youth.

Keywords: Youth sexuality • Youths' sttitudes and behaviour • Youths' sexuality risks • Sexuality education • adolescent's sexuality & wellbeing

Introduction

WHO defines adolescents as those persons aged between 10 and 19 years, and youth between the ages of 15 and 24 years [1]. It is the stage when young people begin to explore their sexuality, become socialized to romantic and sexual relationships, and more increasingly receive information about sexuality from both formal and informal sources [2]. Adolescents are experiencing the second growth spurt, which is a period of optimal learning, the brain is easily shaped by experiences and therefore this is the best stage to learn new skills and develop lifelong habits [3]. The institute describes the adolescence stage as sensitive to their experiences. It also intimates that the prefrontal cortex responsible for self-control, judgement, organisation, planning, and emotional control undergoes most change and matures in adolescence and matures at young adulthood. Additionally their thinking, decision making and behaviours, therefore, need to be shaped responsibly.

Researchers indicate that parents, peers and media are some of the informal sources of sexuality socialization for adolescents and are most frequently relied upon as reliable on sex and sex-related topics such as relationships and birth control [2]. The socialization effort by parents, peers and media have been used to promote safer sexual behaviours [4]. Such efforts are made necessary by the risk burden faced by adolescents.

The United Nations writing on state of world youth estimate of the world's population of adolescents and youth in 2019 was 1.2 billion people aged 15 and 24 years, which means one in every six persons worldwide is a youth [5]. Adolescents and youth are faced with alarming risks, over 1.5 million aged 10-

24 died in 2020 and these figures are quantified as 5000 every day, globally there were 41 births out of 1000 to girls aged 15-19 in 2020. Furthermore, the probability of dying among those aged 10-24 years was highest in sub-Saharan Africa compared to other parts of the world [6]. United Nations Children's Fund reported that Sub-Saharan Africa's adolescents (13-19) years old HIV infections made up 23% of the region's population, of whom 260,000 new infections were recorded within 12 months in the year [7]. An estimated 1.7 million adolescents (aged 10-19) were living with HIV in 2019 with around 90% in the Africa Region [6]. UNAIDS report on HIV & AIDS statistics -fact sheet every show 4900 young women aged 15-24 years become infected with HIV, in addition, six in seven new infection cases among adolescents aged 15-19 are among girls and they are twice as likely to be living with HIV than young men [8].

Youth sexuality behaviour risk is aggravated by a lack of condoms, low contraceptive use, and multiple high-risk partners [9]; this is affirmed by Bajracharya who reckons that adolescents and youth face barriers in accessing reproduction health services. Moreover, adolescents' sexuality risks are exuberated by transient physiological, emotional, and social states and their inability to comprehend exposure to risks fully is likely to highten reproductive health problems [10]. Although at the adolescents are sexually mature, they are still learning their gender roles and sexual scripts and are struggling to understand their sexual feelings and their sexual orientation [11]. With television dramas, commercials, news and other programs showing relatively coherent images and messages sexual dispositions and preferences are linkely to be created among adolescents some of which could favour experimentation with sexual behaviours [12].

Berk recons that television tends to show highly sexualized programs that adolescents seem to favour but do not articulate the negative consequences of sexual relationships [13]. The adverts tend to result in adolescents modelling the same behaviours and may lead to increased incidences of premarital sex and its accompanying risks of early pregnancy, abortion and sexually transmitted infections and HIV infections going up. UNESCO presents the teenage pregnancy and motherhood rate in Kenya at 18%, which infers that 1 in every 5 teenage girls between the ages of 15-19 years has had a live birth or is pregnant with their first child and the rate increased with age from 3% to 40% among girls aged 19 [14]. UNFPA report on adolescent pregnancy in Ghana in the years 2016-2020, recorded 542,131 adolescent girls aged 15-19 years and 13,444 young teenagers aged 10-14 had either given birth or were pregnant according to the Ghana Health Service District Health Information Management Health System (DHIMS) [15].

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While it has been established that peer pressure drives adolescents to first-sex experiences and multiple sex partners this trend impedes reproductive and sexual health efforts [16]. Besides pregnancy, adolescents and young women are prone to sexual and reproductive health risks for sexually transmitted infections, repeated pregnancy(s), sexual and gender-based violence, abuse and exploitation, fistula, and other post-partum reproductive challenges [15]. Other commonly known challenges are dropping out of school, and psychosocial-emotional effects that break their age-related aspirations. The challenges drift into livelihood challenges aggravated by generational poverty, discrimination, stigmatization, and loss of family and social ties in some cases.

Efforts towards changing adolescent sexual behaviours in Kenya for a long time has tended to be on abstinence and largely avoids information on condom and contraception among the youth. The avoidance of condom use and contraceptives has been a common place approach adopted in schools and in families for fear of exposing young girls' higher levels of permissive sexuality. However, the approach goes against globally accepted comprehensive sexuality education with experts pointing out that success of sexuality education should be based on the reduction of behavioural and biological health risks [17].

In line with the need to provide sex education, Population Services International (PSI) in conjunction with the Ministry of Education developed television adverts aimed at encouraging healthy behaviours. The adverts aimed at empowering vulnerable adolescents so that they can make smart decisions regarding their health. Meaning 'Our steps' in English- the advert was tailored to focus on behaviour change communication targeting specific groups to encourage health-seeking behaviours. Population Services International collaborated with the Ministry of Health technical staff to develop national communication strategies and interventions. The adverts were aired on the four main television stations in Kenya namely, Nation Television (NTV), Kenya Television Network (KTN), Kenya Broadcasting Corporation (KBC) and Citizen Television.

Campaigns were aimed at improving brand appeal where youth would identify with the brand and feel that it is for them. It was hoped that a habit of carrying condoms would be instilled in the youth for the purpose of ensuring they would engage in protected sex. The other advert was 'The Fungua Roho Yako' which meant, open your heart, speak out was aired in the 2005 campaign. It targeted both youth (15-24 years) and their parents and aimed at encouraging youth and adults to discuss the unspoken socially conflicting pressures and beliefs about condom use- as protection against pregnancy and HIV prevention. The advert intended to increase social support from peers and responsible adults and to build confidence among youth to help them negotiate condom use in sexual relationships.

Another advert was the "Nakufee!" Campaign – Which in English meant 'I feel you or I understand' – It was available at <https://www.youtube.com/watch?v=1lw4oOwkS50>. It was designed to increase the confidence of young people to discuss and negotiate for condom use in regular relationships. It also aimed at enhancing condom self-efficacy and behaviour change communication and was steered by National Aids & STI Control Programme (NASCOP) and NACC. There was also the 'Nimechill'- Meaning 'I am abstaining from sex' campaign available at <https://www.youtube.com/watch?v=zxNnldHav9g> Produced in 2004. The advert targeted adolescents aged 10-14 with the goal of maintaining abstinence behaviour to curb the spread of HIV infection by increasing the age of sexual debut. The campaign was steered by NASCOP). NASCOP hoped to increase self-esteem and confidence among youth regarding delaying sex, the organization also aimed at increasing abstinence as a cool lifestyle choice, reducing social norms and peer pressure regarding having sex and addressing barriers to abstinence amongst youth. According to the Weller, et al. condom use is 80-95% effective in preventing HIV infection and therefore the need to advocate for condom use is in the belief that when correctly and consistently used,

There was a need to find out the implications of the adverts on adolescents' sexuality. 2008/09 Kenya Demographic and Health Survey showed that the prevalence of unintended pregnancy among girls aged 15-19 years was 49%. Muganda and Omondi indicated that annually, unintended pregnancies cause about 13,000 girls to drop out of school in Kenya. Kenya National Bureau of Statistics (KNBS) revealed that 56% of women aged 15-19 years engaged in high-risk sex while UNAIDS estimate that almost 4 out of every 100 young women of the same age group are HIV positive found 79% of new HIV infections among East and Southern Africa adolescents aged 10-19 were females and 50 of the adolescent girls die every day from AIDS related illness in 2017. According to the statistics espoused earlier in the background, the situation has become worse

and it is appropriate to revisit what television advertisements do regarding sexual behaviours and attitudes among adolescents.

Drawing from the risks adolescents are exposed to and the adverts intended to alleviate sexuality risks, this paper seeks to provide findings on whether the adolescents were aware of the adverts' their perspectives on the adverts targeting sexuality, and also expose finding on whether the adverts modified their attitudes and behaviours.

The findings are based on a study carried out by Murage. It was anchored on Social cognitive theory which expresses that learning occurs in a social context and that much of what we learn is gained through observation and cognitive processing through attention, practice and retention. People learn and maintain new behaviours, such as sexual behaviours. Drawing from this theory, the media is a possible model for youth learning. The other theory that grounding the study is social marketing theory which is a combination of theoretical perspective and a set of marketing techniques. The social marketing theory by Kotler, view the social marketer's goal as intended meet consumer needs and wants. The theory holds the assumption that adolescents viewing television advertisements will adopt new sexual behaviours and attitudes if they perceive that the advertisements are meeting their needs. Social marketers can play to adolescents' sense of goals and idealism for their future by demonstrating how unhealthy behaviours can damage their ability to reach those goals.

While commercial marketers use the concept of "cool" they are likely to lure teenagers into unhealthy behaviours, such as smoking or improper sexual behaviour, social marketers counter-market these negative behaviours while still maintaining the message of being "cool". Being cool is especially desirable to teenagers because they are trying to bolster their self-concept and have a sense of belonging to their peers. It is therefore likely that teenagers respond to media content positively. However, determining whether media images cause the desired behaviour is a very difficult empirical task; however, associations were established as is the case of this study with the independent variable being Television advertisement and the dependent variable being adolescent sexual behaviours and attitudes.

Research Design and Methodology

The research design was a descriptive survey and it involved use of questionnaire and focused group discussion data collection methods. The population of the study was adolescents aged 12- 17, and the sample of respondents was selected from classes six, seven and eight at a Primary School in Mathare, Nairobi County (urban informal settlement). The Primary school was purposively selected because it had life skills training program which included sexuality education taught by both their teachers and community animators working with Japan Centre for Conflict Prevention (JCCP). The selected school has a total population of 1,106 pupils, and each class has two streams with an average of 45 pupils per class, a final sample of 150 pupils was obtained through stratified sampling from classes six, seven and eight who were considered able to respond to the questionnaire and aware of the adverts. Pretesting was done using 50 pupils from a neighbourhood school. Simple descriptive statistics were employed in this study. Data was gathered using a rating scale and using simple language appropriate to the respondents. The final participants in the focused group were selected on the basis of being conversant with the adverts. All participants were assured of confidentiality and were made aware of their right to withdraw from study participation. The research was authorized by Daystar University and the National Council for Science, Technology and Innovation (COST). The adolescent's participation was authorized by their parents and the principal of the headmaster of the school.

Findings

Demographic data

The respondent comprised 58% boys and 42% girls as shown in (Figure 1). The majority of the adolescents (85%) were aged 13-15 and a minority of 2% aged 17. Among the adolescents 53% lived with both parents and 35% lived with mothers only and 5% with other guardians. The researcher sought to find out whether adolescents were aware of the sexuality advertisements as shown in Table 1. Findings showed a high awareness rate of two advertisements, "Nakufee!" (88.1%) and "Nimechill" 90.9%., The other two " Je Una yako" and Fungus Roho yako had low awareness levels of 11.9 % and 21% respectively.

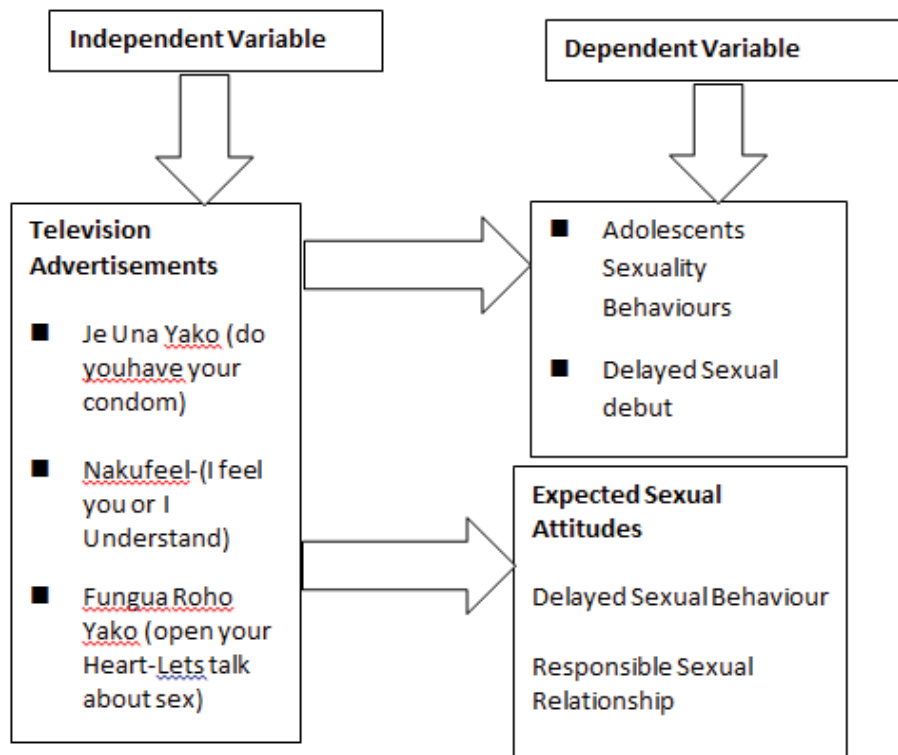


Figure 1. Researcher designed conceptual framework.

Table 1. Adolescents' awareness of tv adverts.

	Aware	Not Familiar
Nakufee!	88.10%	11.90%
Chill	90.90%	9.10%
Je, una yako	11.90%	88.1
Fungua Roho Yako	21%	79%

The “Je Una Yako” and “Fungus Roho Yako” campaigns had fewer respondents recalling them as they did not resonate with them in terms of age. It means the two did not capture their attention. The adverts did not show youth adolescent involvement and therefore rehearsal among the youth was not possible. As a result, it was not likely to lead to behaviour change - The “Je una yako” (Do you have your condom) and the “Fungua Roho yako” (Open your heart and speak about sex and relationship) did not focus on a behaviour change directly among the youth because they showed older youth and adults and did not directly relate to observable behaviour.

Effective sex and HIV education program message have to focus on the reduction of sexual behaviours that lead to unintended pregnancy or other sexually transmitted infections as shown in (Figure 2). The two adverts with high levels of awareness were captivating to the youth because they involved young people, therefore the target was right and contained clear messages about abstaining or contraceptives. They also included activities to help with resisting social pressures, while the latter two were not age-appropriate as they targeted young adults and older women. The models used youthful language- English mixed with Kiswahili known as Cheng in Kenya mainly used in urban areas whose syntax is basically Kiswahili.

Furthermore, the adolescents were asked to indicate whom the adverts were meant for, 69% indicated they were meant for the youth, 29% indicated they were meant for adults and 2% said they were for children. The results were accurate because 2 of the adverts 'fungua roho and the 'Je Una yako?' featured women in young adult hood respectively. On the other hand, the “Je Una Yako” and “Fungua Roho Yako” campaigns had fewer respondents recalling them as they did not resonate with them in terms of age. According to Social cognitive theory by Bandura the impact of modelling is strongly influenced by perceived similarity to the models. Thus, the greater the assumed similarity, the more persuasive the models. The “Je una yako” campaign used well-known personalities such as musicians to pass on the message that condom use was cool. Considering that the campaign was rolled out in 2000, the participants could have been too young

Gender of Adolescents

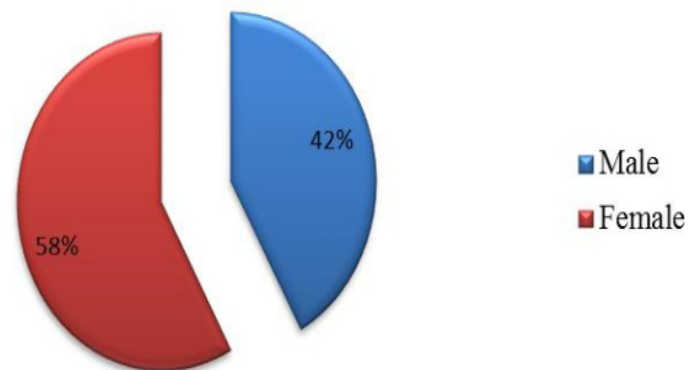


Figure 2. Gender of adolescent pupils.

to identify with the message being passed. The “Fungua Roho Yako” campaign was meant for both parents and the youth. In the advertisements, parental concerns over their adolescents' relationships and the inherent dangers of these relationships were given prominence. Thus the respondents could have failed to identify with this particular advertisement as shown in (Figure 3).

Advertisements influence on adolescents' sexuality attitude and behaviours

The researcher also sought to find out from the adolescents how the advertisements influenced their sexual feelings and emotions. The findings as in Table 2 show that 29.9% reported not being informed, 36.1% were a little informed and 34% were a lot informed. About the advert informing them on responsibility in relationships 19.3% indicated nothing informed them at all, 21.3% indicated there was some little information and 59.3% reported they were informed a lot. Regarding protecting themselves during sex against pregnancy 10.9% said they were not informed at all, 17.1% said there were a little informed and 71.9 % they were informed a lot. On how to use a condom, 57.5 % said they were not informed at all, 22.1% indicated they were informed a little and 26.2% said they were informed a lot. More than 59% said they were informed a lot on

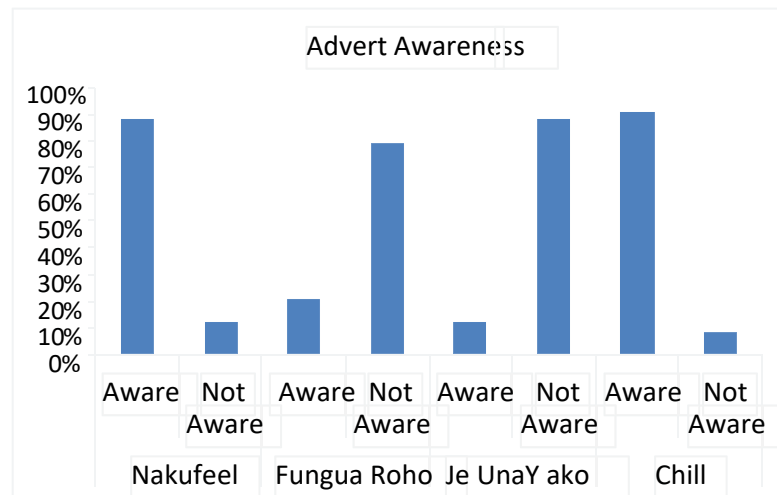


Figure 3. Further exemplifies the adolescents' levels of awareness regarding the TV adverts.

Abstinence. This is probably because of the age target of the 'Nime chill' advert which targeted adolescence was appropriate and therefore they were captivated.

A large percentage (57.7%) found nothing on the adverts on how to use a condom. This could be because this was not the objective of the adverts. If adolescents do not know how to use a condom, then they are likely not to use it at all or may use it wrongly. According to Aventin G, et al. programme targeting sexual risks must target condom efficacy, risk perception and the trusted partner myth. So if the adverts hoped to enhance condom use for sexuality risk prevention, there was a likelihood of half over 50% failure. Over 40% of the adolescents felt they did not learn much from the adverts and 28% did not think they learnt much about protection from pregnancy. In addition, over 71% of adolescents reported that the adverts led them to develop sexual feelings and emotions. The implications of these findings are that adolescents may have been exposed to the truth without having adequate time and support for them to process and adapt and apply the information.

Adolescents' attitudes on sexuality risks behaviours

Adolescents were asked to indicate true or false on the statement that measured statements that indicated perception of sexuality risks as shown in Table 3. The findings indicate that 11% do not consider getting pregnant at adolescence as wrong, this would mean they are likely to involve in activities that would lead to teenage pregnancy. Some 18.9% of adolescents do not think condom use would protect against pregnancy and HIV while 81.1 are positive. Some 16.6% of the adolescents do not think the use of condoms indicates respect for the girlfriend while 69.7% do and 31% think condoms are used by boys who have more than one girlfriend. In fact, 25.4% thought it is okay to have sex without a condom, while 26.7% declared that it is not okay to say no to sex. Some 35% said their friends would laugh at them if they refused to have sex. The findings suggest ignorance and attitudes suggestive of the likelihood of sexually risky behaviours for a significant population of adolescents and this explains findings by UNESCO on teenage pregnancy and motherhood rate in Kenya at 18%, a 1 in every 5 teenage girls between the ages of 15-19 years having had a live birth or is pregnant with their first child and the rate increased with age from 3% to 40% among girls aged 19. The situation mirrors UNFPA report on adolescent pregnancy in Ghana between 2016- 2020, where 542,131 adolescent girls aged 15-19 years and 13,444 pregnancies amongst young teenagers aged 10-14 according to the Ghana Health Service District Health Information Management Health System (DHIMS). It is clear some adolescents hold attitudes that pose risks to HIV and pregnancy and may be behaving in ways that expose them to sexual risks even though a large percentage (over 80% had viewed the adverts on 'Nakufeeel' and 'Nime Chill' whose target was their norm age) yet they hold attitudes that may suggest they could be engaging in sexual behaviours that expose them to pregnancy, STI, and HIV risks. National Council for Population and Development indicates that 5 in every 10 girls and 3 in every 10 boys in the age bracket of 15-19 years were sexually active and that most intercourse among them is unprotected and it occurs with multiple partners, these facts concur with the numbers of adolescents that are at risk based on their responses.

Some 20 Adolescents who had watched the adverts participated if focused group discussions. The researcher sought to establish how the pupils got to

learn about sex. From their responses, 5 girls and 2 boys learned about sex from movies they watched, 3 girls and 4 boys from science lessons in class and 2 from the life skills lesson in school. On the other hand, 2 boys learned about sex from social clubs in school and 2 learnt from television programs. Studies reveal white adolescents reported learning more from parents and less from media than black adolescents. Learning from parents was positively associated with the use of condoms as opposed to learning from parents and peers which was associated with sexual activities. Probably the added factor of peers led to more permissiveness. Asked if adolescents of the same age engaged in sex, all the respondents (100%) affirmed that boys and girls their age engaged in sex, 2 expressed that they should not involve in sex because 'they are too young, 3 of them said 'it is not right for the age.' The findings are affirmed by findings from a study conducted by Kariuki and Gachari among 140 adolescents in Christian schools in Kenya Nairobi County which found 7.2% had been involved in intercourse with adult persons, 8.6% had been involved in sexual intercourse with more than one person in a period of 6 months, and some 14.2 % had suspected their sex partner had a sexual relationship with another person while 21.4% were not sure. Furthermore, 6.4% reported they had sexual intercourse with high-risk persons while 6.4 % were not sure and the rest had not. Overall Kariuki and Gachari's study indicate 25% of adolescents have had sexual intercourse. The study found a statistically significant correlation between gender-responsive sexuality education (Gender equality, equity and power life skills sexuality education) and adolescents' protective sexuality attitudes and behaviour at $r (.688^{**}) = 140, p < .01$, one-tailed test. Equally, comprehensive sexuality life skills education was statistically correlated with adolescents' protective sexuality attitudes and behaviours at $r (.214^{*}) = 140, p < .05$, two-tailed tests. Proposing any sex education must be comprehensive. The findings show that gender-responsive sexuality education (gender equity, equality, power, and comprehensive sexuality education predicted 10.7% protective sexuality attitudes and behaviour in faith-based secondary schools in Kenya as represented by the R Square (R2).

As already confirmed and affirmed by UNICEF adolescents face a high HIV risk currently standing at 19% for adolescents aged 10-19 and 40% for that aged 15 – 24 %, Television messaging on adolescents' sexual behaviour needs to be comprehensive. As already established by Murage, Adolescents watch TV and gain messages from videos presented in the study over 80% had watched videos on sexuality that target their age but they reported 29% felt the advertisement targeted adults while 69% felt they were targeted, which means, the target on youth must be accurate and should focus effectively on attitude and behaviour change. In the study, a significant percentage 19.3 % felt little was addressed in the video regarding being responsible in relationships, and 21.3% were not sure suggesting they did not benefit from the adverts. Regarding protection against HIV and AIDS, 10.9% said there was little protection knowledge while 17.1 reported they were not sure which means many adolescents did not benefit from HIV and AIDS protection messaging. Equally 18.7% said they had little influence on condom use and 22.1% were not sure 26.2% said they benefited a lot. Some 10 out of 20 (50%) of the focused group adolescents said the advert on condoms was not relevant to them. Probably because it features young adults in Kenya condom and contraceptives sexuality education among the youth is frowned upon, despite this attitude it is important that a county's adolescents

Table 2. Adolescents' sexuality attitudes and behaviour.

How have these television advertisements informed you of the following?	Nothing at All		A Little		A Lot		Total	
	F	%	F	%	F	%	F	%
Sexual feelings and emotions	4400.00%	2990.00%	53	36.1	50	34	147	100
Responsibility in relationships	2800.00%	19.3	31	21.3	86	59.3	145	100
Protection from HIV / AIDS	800%	560%	11	7.6	125	86.8	144	100
Protection from pregnancy	16	10.9	25	17.1	105	71.9	146	100
How to use a condom	75	51.7	32	22.1	38	26.2	145	100
Abstinence	27	18.7	32	22.2	85	59	144	100

Table 3. Adolescents' attitudes on sexuality risks.

Influence of TV Advertisements on Sexual Attitudes			
Attitudes	% True		
	True	False	Total
It is right for boys/girls my age to have sex	12.4	87.6	100
Getting pregnant at my age is wrong	89	11	100
Condoms protect against pregnancy and HIV	81.1	18.9	100
Having sex shows that you are grown up	16.6	83.4	100
A boy who uses a condom shows respect to his girlfriend	69.7	30.3	100
Condoms are used only by boys who have more than one girl	31	69	100
It is okay to have sex without a condom	25.4	74.6	100
It is okay to say No to sex	73.3	26.7	100
My friends would laugh at me for refusing to have sex	35.2	64.8	100

and youth who are at high risk of HIV & Aids be provided with comprehensive sexuality education based on the fact that parental and other sources of sexuality values education have not been sufficient for all and the age group is at high risk as already espoused.

The fact that the majority of the adolescents had seen the video and more than half the population found the content useful suggests that support targeting sexual health provisions that are age and gender appropriate is critical. A youth-focused approach is critical. Results also indicate that adolescents are not always making safe choices which concur with Zhang, which implies comprehensive sex education that is age and gender-sensitive is necessary.

Conclusion and Recommendations

Adolescents were aware of the television advertisements that are aired and a majority of them thought that they were meant for them. Most of the adolescents had a positive attitude towards these television advertisements and a majority of them felt that the advertisements informed them on various issues to do with their sexuality. That television advertisements that targeted adolescents were captivating to them and most of them reported they were informative to them. A significant population, drawing from the findings, still engaged in risky sexual and bore unhealthy attitudes to healthy sexuality behaviours. The findings suggest they did not benefit from the adverts. There were indications that the information gathered such as using a condom to prevent HIV and saying no to premarital sex influenced the adolescents' sexual attitude and behavior. That some respondents still held on to ideas that could expose them to risky behavior, meaning that there were some adolescents whose sexual attitude and behavior had not been positively influenced by these advertisements.

With over 1.2 billion adolescents in the world today, there is good reason more than ever to focus on their needs, concerns and endeavour to create climates that can foster their healthy development and functioning. Therefore, the study made the following recommendations:

There should be continued use of the media, especially television, in informing adolescents on their sexuality as this information should be age and gender appropriate.

Future television advertisements should include information on the consequences of using or not using a condom or not abstaining.

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